

The Commonwealth of Massachusetts

PRESENTED BY:

John W. Scibak

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to insurance coverage for craniofacial disorders.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
John W. Scibak	2nd Hampshire	1/15/2015
Timothy R. Madden	Barnstable, Dukes and Nantucket	9/9/2019
Peter V. Kocot	1st Hampshire	9/9/2019
Louis L. Kafka	8th Norfolk	9/9/2019
Paul Brodeur	32nd Middlesex	2/2/2015
Thomas J. Calter	12th Plymouth	9/9/2019
Paul McMurtry	11th Norfolk	9/9/2019
Aaron Vega	5th Hampden	9/9/2019
Angelo J. Puppolo, Jr.	12th Hampden	9/9/2019
Jason M. Lewis	Fifth Middlesex	9/9/2019
Ellen Story	3rd Hampshire	9/9/2019
James E. Timilty	Bristol and Norfolk	9/9/2019
Stephen Kulik	1st Franklin	9/9/2019
Tom Sannicandro	7th Middlesex	9/9/2019
John V. Fernandes	10th Worcester	9/9/2019
Angelo L. D'Emilia	8th Plymouth	9/9/2019
Jose F. Tosado	9th Hampden	9/9/2019

By Mr. Scibak of South Hadley, a petition (accompanied by bill, House, No. 953) of John W. Scibak and others relative to insurance coverage for craniofacial disorders. Financial Services.

The Commonwealth of Massachusetts

In the One Hundred and Eighty-Ninth General Court (2015-2016)

An Act relative to insurance coverage for craniofacial disorders.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1	Section 1. Chapter 32A of the General Laws, as so appearing, is hereby amended by
2	striking out section 17J, as amended by section 1 of chapter 234 of the acts of 2012, and inserting
3	in the place thereof the following section:-
4	Section 17J. The commission shall provide to any active or retired employee of the
5	commonwealth or spouse/dependent who is insured under the group insurance commission
6	coverage for the cost of treating the following medically diagnosed, congenital craniofacial
7	defects: ectodermal dysplasia, dentinogenesis imperfecta, amelogenesis imperfecta, and
8	congenital oligodontia and for the cost of treating cleft lip and cleft palate for children under the
9	age of 18. The coverage shall include benefits for medical, dental, oral and facial surgery,
10	surgical management and follow-up care by oral and plastic surgeons, orthodontic treatment and
11	management, preventative and restorative dentistry to ensure good health and adequate dental
12	structures for orthodontic treatment or prosthetic management therapy, speech therapy,
13	audiology and nutrition services, if such services are prescribed by the treating physician or

surgeon and such physician or surgeon certifies that such services are medically necessary and consequent to the treatment of the medically diagnosed congenital craniofacial defects and birth abnormalities. The coverage required by this section shall be subject to the terms and conditions applicable to other benefits. Payment for dental or orthodontic treatment not related to the management of the medically diagnosed congenital craniofacial defects and birth abnormalities shall not be covered under this section.

20 SECTION 2. Chapter 118E of the General Laws, as so appearing, is hereby amended by 21 striking out section 10G, as amended by section 2 of chapter 234 of the acts of 2012, and 22 inserting in the place thereof the following section:-

23 Section 10G. The division shall cover the cost of treating the following medically 24 diagnosed congenital craniofacial defects: ectodermal dysplasia, dentinogenesis imperfecta, 25 amelogenesis imperfecta, and congenital oligodontia and for the cost of treating cleft lip and cleft 26 palate for children under the age of 18. The coverage shall include benefits for medical, dental, 27 oral and facial surgery, surgical management and follow-up care by oral and plastic surgeons, 28 orthodontic treatment and management, preventative and restorative dentistry to ensure good 29 health and adequate dental structures for orthodontic treatment or prosthetic management 30 therapy, speech therapy, audiology and nutrition services, if such services are prescribed by the 31 treating physician or surgeon and such physician or surgeon certifies that such services are 32 medically necessary and consequent to the treatment of the medically diagnosed congenital 33 craniofacial defects and birth abnormalities. The coverage required by this section shall be 34 subject to the terms and conditions applicable to other benefits. Payment for dental or 35 orthodontic treatment not related to the management of the medically diagnosed congenital 36 craniofacial defects and birth abnormalities shall not be covered under this section.

37 SECTION 3. Chapter 175 of the General Laws, as so appearing, is hereby amended by
 38 striking out section 47BB, as amended by section 3 of chapter 234 of the acts of 2012, and
 39 inserting in the place thereof the following section:-

40 Section 47CC. An individual policy of accident and sickness insurance issued under 41 section 108 that provides hospital expense and surgical expense insurance and any group blanket 42 or general policy of accident and sickness insurance issued under section 110 that provides 43 hospital expense and surgical expense insurance, which is issued or renewed within or without 44 the commonwealth, shall cover the cost of treating the following medically diagnosed congenital 45 craniofacial defects: ectodermal dysplasia, dentinogenesis imperfecta, amelogenesis imperfecta, 46 and congenital oligodontia and for the cost of treating cleft lip and cleft palate for children under 47 the age of 18. that covers a child under the age of 18 shall cover the cost of treating cleft lip and 48 cleft palate for the child. The coverage shall include benefits for medical, dental, oral and facial 49 surgery, surgical management and follow-up care by oral and plastic surgeons, orthodontic 50 treatment and management, preventative and restorative dentistry to ensure good health and 51 adequate dental structures for orthodontic treatment or prosthetic management therapy, speech 52 therapy, audiology and nutrition services, if such services are prescribed by the treating 53 physician or surgeon and such physician or surgeon certifies that such services are medically 54 necessary and consequent to the treatment of the medically diagnosed congenital craniofacial 55 defects and birth abnormalities. The coverage required by this section shall be subject to the 56 terms and conditions applicable to other benefits. Payment for dental or orthodontic treatment 57 not related to the management of the medically diagnosed congenital craniofacial defects and 58 birth abnormalities shall not be covered under this section.

59 SECTION 4. Chapter 176A of the General Laws, as so appearing, is hereby amended by 60 striking out section 8EE, as amended by section 3 of chapter 234 of the acts of 2012, and 61 inserting in the place thereof the following section:-

62 Section 8EE. A contract between a subscriber and the corporation under an individual or 63 group hospital service plan which provides hospital expense and surgical expense insurance, 64 except contracts providing supplemental coverage to Medicare or other governmental programs, 65 delivered, issued or renewed by agreement between the insurer and the policyholder, within or 66 without the commonwealth shall provide coverage for the cost of treating congenital craniofacial 67 defects and birth abnormalities including, but not limited to cleft lip, cleft palate, ectodermal 68 dysplasia, dentinogenesis imperfecta, amelogenesis imperfecta, and other maxillofacial 69 abnormalities for the child. The coverage shall include benefits for medical, dental, oral and 70 facial surgery, surgical management and follow-up care by oral and plastic surgeons, orthodontic 71 treatment and management, preventative and restorative dentistry to ensure good health and 72 adequate dental structures for orthodontic treatment or prosthetic management therapy, speech 73 therapy, audiology and nutrition services, if such services are prescribed by the treating 74 physician or surgeon and such physician or surgeon certifies that such services are medically 75 necessary and consequent to the treatment of the medically diagnosed congenital craniofacial 76 defects and birth abnormalities. The coverage required by this section shall be subject to the 77 terms and conditions applicable to other benefits. Payment for dental or orthodontic treatment 78 not related to the management of the medically diagnosed congenital craniofacial defects and 79 birth abnormalities shall not be covered under this section.

80 Section 8EE. A contract between a subscriber and the corporation under an individual or
81 group hospital service plan which provides hospital expense and surgical expense insurance,

82 except contracts providing supplemental coverage to Medicare or other governmental programs, 83 delivered, issued or renewed by agreement between the insurer and the policyholder, within or 84 without the commonwealth, shall cover the cost of treating the following medically diagnosed 85 congenital craniofacial defects: ectodermal dysplasia, dentinogenesis imperfecta, amelogenesis 86 imperfecta, and congenital oligodontia and for the cost of treating cleft lip and cleft palate for 87 children under the age of 18. The coverage shall include benefits for medical, dental, oral and 88 facial surgery, surgical management and follow-up care by oral and plastic surgeons, orthodontic 89 treatment and management, preventative and restorative dentistry to ensure good health and 90 adequate dental structures for orthodontic treatment or prosthetic management therapy, speech 91 therapy, audiology and nutrition services, if such services are prescribed by the treating 92 physician or surgeon and such physician or surgeon certifies that such services are consequent to 93 the treatment of the medically diagnosed congenital craniofacial defects and birth abnormalities. 94 The coverage required by this section shall be subject to the terms and conditions applicable to 95 other benefits. Payment for dental or orthodontic treatment not related to the management of the 96 medically diagnosed congenital craniofacial defects and birth abnormalities shall not be covered 97 under this section.

98 SECTION 5. Chapter 176B of the General Laws, as so appearing, is hereby amended by 99 striking out section 4EE, as amended by section 3 of chapter 234 of the acts of 2012, and 100 inserting in the place thereof the following section:-

Section 4GG. Any subscription certificate under an individual or group medical service
agreement, except certificates that provide supplemental coverage to Medicare or other
governmental programs, issued, delivered or renewed within or without the commonwealth, that
covers a child under the age of 18 shall provide coverage for the cost of treating the following

105 medically diagnosed congenital craniofacial defects: ectodermal dysplasia, dentinogenesis 106 imperfecta, amelogenesis imperfecta, and congenital oligodontia and for the cost of treating cleft 107 lip and cleft palate for children under the age of 18. The coverage shall include benefits for 108 medical, dental, oral and facial surgery, surgical management and follow-up care by oral and 109 plastic surgeons, orthodontic treatment and management, preventative and restorative dentistry to 110 ensure good health and adequate dental structures for orthodontic treatment or prosthetic 111 management therapy, speech therapy, audiology and nutrition services, if such services are 112 prescribed by the treating physician or surgeon and such physician or surgeon certifies that such 113 services are medically necessary and consequent to the treatment of the medically diagnosed 114 congenital craniofacial defects and birth abnormalities. The coverage required by this section 115 shall be subject to the terms and conditions applicable to other benefits. Payment for dental or 116 orthodontic treatment not related to the management of the medically diagnosed congenital 117 craniofacial defects and birth abnormalities shall not be covered under this section.

SECTION 6. Chapter 176G of the General Laws, as so appearing, is hereby amended by striking out section 4W, as amended by section 3 of chapter 234 of the acts of 2012, and inserting in the place thereof the following section:-

Section 4W. A health maintenance contract issued or renewed within or without the commonwealth shall provide coverage for the cost of treating treating the following medically diagnosed congenital craniofacial defects: ectodermal dysplasia, dentinogenesis imperfecta, amelogenesis imperfecta, and congenital oligodontia and for the cost of treating cleft lip and cleft palate for children under the age of 18. The coverage shall include benefits for medical, dental, oral and facial surgery, surgical management and follow-up care by oral and plastic surgeons, orthodontic treatment and management, preventative and restorative dentistry to ensure good

128 health and adequate dental structures for orthodontic treatment or prosthetic management 129 therapy, speech therapy, audiology and nutrition services, if such services are prescribed by the 130 treating physician or surgeon and such physician or surgeon certifies that such services are 131 medically necessary and consequent to the treatment of the medically diagnosed congenital 132 craniofacial defects and birth abnormalities. The coverage required by this section shall be 133 subject to the terms and conditions applicable to other benefits. Payment for dental or 134 orthodontic treatment not related to the management of the medically diagnosed congenital 135 craniofacial defects and birth abnormalities shall not be covered under this section.

SECTION 7. Chapter 176I of the General Laws, as so appearing, is hereby amended by
striking out section 12, as amended by section 3 of chapter 234 of the acts of 2012, and inserting
in the place thereof the following section:-

139 Section 12. An organization entering into a preferred provider contract shall provide 140 coverage for the cost of treating treating the following medically diagnosed congenital 141 craniofacial defects: ectodermal dysplasia, dentinogenesis imperfecta, amelogenesis imperfecta, 142 and congenital oligodontia and for the cost of treating cleft lip and cleft palate for children under 143 the age of 18. The coverage shall include benefits for medical, dental, oral and facial surgery, 144 surgical management and follow-up care by oral and plastic surgeons, orthodontic treatment and 145 management, preventative and restorative dentistry to ensure good health and adequate dental 146 structures for orthodontic treatment or prosthetic management therapy, speech therapy, 147 audiology and nutrition services, if such services are prescribed by the treating physician or 148 surgeon and such physician or surgeon certifies that such services are medically necessary and 149 consequent to the treatment of the medically diagnosed congenital craniofacial defects and birth 150 abnormalities. The coverage required by this section shall be subject to the terms and conditions

151	applicable to other benefits. Payment for dental or orthodontic treatment not related to the
152	management of the medically diagnosed congenital craniofacial defects and birth abnormalities
153	shall not be covered under this section.
154	SECTION 8. This act shall apply to all policies, contracts and certificates of health
155	insurance subject to chapters 32A, 118E, 175, 176A, 176B, 176G and 176I of the General Laws

156 which are delivered, issued or renewed on or after January 1, 2016.