



Anatomical and Degree of Provider Discrimination

The dental specialty of oral and maxillofacial surgery is the specialty responsible for the diagnosis and treatment of congenital, pathological and traumatic disorders of the maxillofacial complex. Recognition of this expertise is the result of the specialty's unique education, training, surgical experience and research endeavors. All oral and maxillofacial surgeons who complete this rigorous training program are surgically competent to treat such disorders of the maxillofacial complex. Section 2706(a) of the Public Health Service Act prohibits health plans from discriminating "with respect to participation under the plan or coverage against any health care provider who is acting within the scope of that provider's license or certification under applicable State law."

Many types of craniofacial disorders result from congenital defects, developmental anomalies, pathologic and traumatic conditions affecting the skeletal complex of the face, head and neck region. These conditions are

similar to ones affecting the musculoskeletal complex in other parts of the body resulting in abnormal function and disability. The Surgeon General's September 2000 report, "Oral Health in America," states one in six children in America is plagued by these types of conditions, often requiring surgical procedures for correction.

The position of the American Association of Oral and Maxillofacial Surgeons (AAOMS) is any health insurance contract or policy providing coverage for diagnostic or surgical procedures involving the musculoskeletal system shall not discriminate against coverage for any similar diagnostic or surgical care involving the maxillofacial region. Furthermore, given the standing of oral and maxillofacial surgery as the specialty treating these types of conditions, it is the position of AAOMS that insurers who discriminate based on the academic degree(s) of the provider should be held liable for breach of federal law as supported by the Public Health Service Act.

Reaffirmed January 2018, AAOMS Committee on Government Affairs

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