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American Association of Oral and Maxillofacial Surgeons

## CRANIOFACIAL ANOMALIES



**Please support the Ensuring Lasting Smiles Act to require health plans to cover treatment for patients with congenital anomalies.**

**Key details:** The Ensuring Lasting Smiles Act (S 560 / HR 1379) was introduced by Sens. Tammy Baldwin (D-Wis.) and Joni Ernst (R-Iowa) and Reps. Collin Peterson (D-Minn.) and Denver Riggleman (R-Va.).

### About congenital anomalies legislation

- This important legislation would correct inequities in health insurance coverage for the treatment of congenital anomalies.
- Specifically, it would ensure all group and individual health plans cover medically necessary services, including needed dental procedures such as orthodontic or prosthodontic support, as a result of a congenital anomaly. It would exclude coverage for cosmetic procedures or surgery on normal structures.
- More than 30 health professional and patient advocacy organizations support the Ensuring Lasting Smiles Act.

### Why is federal craniofacial anomalies legislation needed?

- According to the CDC's National Center on Birth Defects and Developmental Disabilities, approximately 1 in every 33 babies born in the United States each year has a congenital anomaly, commonly referred to as a birth defect. Examples of craniofacial anomalies – deformities in the growth of the bones and soft tissue in the head and face – include cleft lip and palate, skeletal and maxillofacial deformities, facial paralysis, microtia, hypodontia (absence of teeth) and craniosynostosis.
- While these conditions appear cosmetic, they often impede daily functioning, particularly that of the nose and mouth area, potentially restricting a patient's ability to breathe, eat and speak. Corrective procedures allow these patients to grow and function normally.
- While many private health insurance companies cover preliminary procedures for congenital anomalies, they routinely deny or delay follow-up or corrective procedures – notably, dental-related procedures involving orthodontia and dental implants – deeming them cosmetic or covered by dental plans.
- Severe dental anomalies are a common symptom of many craniofacial anomaly conditions, but coverage limits in dental plans are not nearly as expansive as that of health plans. As a result, patients are often forced to incur significant out-of-pocket costs on medically necessary reconstructive dental care related to their disorder during their lifetime.
- If health insurance coverage is required by states, it may be limited to minor patients or patients with specific conditions, such as cleft lip and palate. Even in states with decent laws, ERISA plans are exempt from those requirements – making federal legislation essential to ensure coverage for all patients.



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