HOUSE DOCKET, NO. 342 FILED ON: 1/10/2013

HOUSE . . . . . No. 976

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 passage of the accompanying:

An Act relative to insurance coverage for craniofacial disorders.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
John W. Scibak	*2nd Hampshire*
Kimberly N. Ferguson	*1st Worcester*
Louis L. Kafka	*8th Norfolk*
Peter V. Kocot	*1st Hampshire*
Timothy R. Madden	*Barnstable, Dukes and Nantucket*
James E. Timilty	*Bristol and Norfolk*
Richard J. Ross	*Norfolk, Bristol and Middlesex*
Chris Walsh	*6th Middlesex*

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HOUSE . . . . . No. 976

By Mr. Scibak of South Hadley, a petition (accompanied by bill, House, No. 976) of John W. Scibak and others relative to insurance coverage for craniofacial disorders. Financial Services.

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE
HOUSE
, NO. *321* OF 2011-2012.]

The Commonwealth of Massachusetts

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:

Section 1. Chapter 32A of the General Laws, as so appearing, is hereby amended by striking out section 17J, as amended by section 1 of chapter 234 of the acts of 2012, and inserting in the place thereof the following section:-

Section 17J. The commission shall provide to any active or retired employee of the commonwealth who is insured under the group insurance commission coverage for the cost of treating medically diagnosed congenital craniofacial defects and birth abnormalities, including, but not limited to cleft lip, cleft palate, ectodermal dysplasia, dentinogenesis imperfecta, amelogenesis imperfecta, and other maxillofacial abnormalities. 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 health and adequate dental structures for orthodontic treatment or prosthetic management therapy, speech therapy, 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 congenital craniofacial defects
24 and birth abnormalities, including, but not limited to cleft lip, cleft palate, ectodermal dysplasia,
25 dentinogenesis imperfecta, amelogenesis imperfecta, and other maxillofacial abnormalities. The
26 coverage shall include benefits for medical, dental, oral and facial surgery, surgical management
27 and follow-up care by oral and plastic surgeons, orthodontic treatment and management,
28 preventative and restorative dentistry to ensure good health and adequate dental structures for
29 orthodontic treatment or prosthetic management therapy, speech therapy, audiology and nutrition
30 services, if such services are prescribed by the treating physician or surgeon and such physician
31 or surgeon certifies that such services are medically necessary and consequent to the treatment of
32 the medically diagnosed congenital craniofacial defects and birth abnormalities. The coverage
33 required by this section shall be subject to the terms and conditions applicable to other benefits.
34 Payment for dental or orthodontic treatment not related to the management of the medically
35 diagnosed congenital craniofacial defects and birth abnormalities shall not be covered under this
36 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 47BB. 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 congenital defects and birth abnormalities
45 including, but not limited to cleft lip, cleft palate, ectodermal dysplasia, dentinogenesis
46 imperfecta, amelogenesis imperfecta, and other maxillofacial abnormalities for the child. The
47 coverage shall include benefits for medical, dental, oral and facial surgery, surgical management
48 and follow-up care by oral and plastic surgeons, orthodontic treatment and management,
49 preventative and restorative dentistry to ensure good health and adequate dental structures for
50 orthodontic treatment or prosthetic management therapy, speech therapy, audiology and nutrition
51 services, if such services are prescribed by the treating physician or surgeon and such physician
52 or surgeon certifies that such services are medically necessary and consequent to the treatment of
53 the medically diagnosed congenital craniofacial defects and birth abnormalities. The coverage
54 required by this section shall be subject to the terms and conditions applicable to other benefits.
55 Payment for dental or orthodontic treatment not related to the management of the medically
56 diagnosed congenital craniofacial defects and birth abnormalities shall not be covered under this
57 section.

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

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

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

82 Section 4EE. Any subscription certificate under an individual or group medical service
83 agreement, except certificates that provide supplemental coverage to Medicare or other
84 governmental programs, issued, delivered or renewed within or without the commonwealth shall
85 provide coverage for the cost of treating congenital craniofacial defects and birth abnormalities
86 including, but not limited to cleft lip, cleft palate, ectodermal dysplasia, dentinogenesis
87 imperfecta, amelogenesis imperfecta, and other and other maxillofacial abnormalities for the
88 child. The coverage shall include benefits for medical, dental, oral and facial surgery, surgical
89 management and follow-up care by oral and plastic surgeons, orthodontic treatment and
90 management, preventative and restorative dentistry to ensure good health and adequate dental
91 structures for orthodontic treatment or prosthetic management therapy, speech therapy,
92 audiology and nutrition services, if such services are prescribed by the treating physician or
93 surgeon and such physician or surgeon certifies that such services are medically necessary and
94 consequent to the treatment of the medically diagnosed congenital craniofacial defects and birth
95 abnormalities. The coverage required by this section shall be subject to the terms and conditions
96 applicable to other benefits. Payment for dental or orthodontic treatment not related to the

97 management of the medically diagnosed congenital craniofacial defects and birth abnormalities
98 shall not be covered under this section.

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

102 Section 4W. A health maintenance contract issued or renewed within or without the
103 commonwealth shall provide coverage for the cost of treating congenital craniofacial defects and
104 birth abnormalities including, but not limited to cleft lip, cleft palate, ectodermal dysplasia,
105 dentinogenesis imperfecta, amelogenesis imperfecta, and other and other maxillofacial
106 abnormalities for the child. The coverage shall include benefits for medical, dental, oral and
107 facial surgery, surgical management and follow-up care by oral and plastic surgeons, orthodontic
108 treatment and management, preventative and restorative dentistry to ensure good health and
109 adequate dental structures for orthodontic treatment or prosthetic management therapy, speech
110 therapy, audiology and nutrition services, if such services are prescribed by the treating
111 physician or surgeon and such physician or surgeon certifies that such services are medically
112 necessary and consequent to the treatment of the medically diagnosed congenital craniofacial
113 defects and birth abnormalities. The coverage required by this section shall be subject to the
114 terms and conditions applicable to other benefits. Payment for dental or orthodontic treatment
115 not related to the management of the medically diagnosed congenital craniofacial defects and
116 birth abnormalities shall not be covered under this section.

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

120 Section 12. An organization entering into a preferred provider contract shall provide
121 coverage for the cost of treating congenital craniofacial defects and birth abnormalities
122 including, but not limited to cleft lip, cleft palate, dentinogenesis imperfecta, amelogenesis
123 imperfecta, amelogenesis imperfectal, and other and other maxillofacial abnormalities for the
124 child. The coverage shall include benefits for medical, dental, oral and facial surgery, surgical
125 management and follow-up care by oral and plastic surgeons, orthodontic treatment and
126 management, preventative and restorative dentistry to ensure good health and adequate dental
127 structures for orthodontic treatment or prosthetic management therapy, speech therapy,
128 audiology and nutrition services, if such services are prescribed by the treating physician or
129 surgeon and such physician or surgeon certifies that such services are medically necessary and
130 consequent to the treatment of the medically diagnosed congenital craniofacial defects and birth
131 abnormalities. The coverage required by this section shall be subject to the terms and conditions
132 applicable to other benefits. Payment for dental or orthodontic treatment not related to the
133 management of the medically diagnosed congenital craniofacial defects and birth abnormalities
134 shall not be covered under this section.

135 SECTION 8. This act shall apply to all policies, contracts and certificates of health
136 insurance subject to chapters 32A, 118E, 175, 176A, 176B, 176G and 176I of the General Laws
137 which are delivered, issued or renewed on or after January 1, 2014.