

Congenital Craniofacial Anomalies



Support the Ensuring Lasting Smiles Act (ELSA) to require health plans to cover treatment for patients with congenital craniofacial anomalies.

Why is federal congenital craniofacial anomalies legislation needed?



Congenital craniofacial conditions appear cosmetic, but they often impede daily functioning and may restrict a patient's ability to breathe, eat and speak. Corrective procedures allow these patients to grow and function normally.



Many private health insurers cover initial procedures for congenital craniofacial anomalies but deny or delay subsequent procedures—which are the clinical standard of care—including dental-related procedures involving orthodontia and dental implants, by deeming them cosmetic or covered under dental plans.



Coverage limits in dental plans are much lower than those in health plans. As a result, patients may pay significant out-of-pocket costs for medically necessary treatment related to their condition, despite maintaining private health coverage.



Even in states that require health insurance coverage for congenital craniofacial anomalies, ERISA plans are exempt from those requirements. Federal legislation is essential to ensure coverage for all patients.

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 congenital 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.

*According to the CDC's National Center on Birth Defects and Developmental Disabilities

AAOMS's ask of Congress



**Support the
Ensuring Lasting
Smiles Act
(S 1677/HR 3277)**

- The bipartisan, bicameral Ensuring Lasting Smiles Act (ELSA) was reintroduced in the 119th Congress by Sens. Tammy Baldwin (D-Wis.) and Joni Ernst (R-Iowa) and Reps. Neal Dunn, MD (R-Fla.) and Kim Schrier, MD (D-Wash.).
- **ELSA would close health benefit plan loopholes to ensure all group and individual health plans cover provider-directed medically necessary services as a result of a congenital anomaly of the eyes, ears, teeth, mouth or jaw.**
- ELSA last passed the House in April 2022 during the 117th Congress. Since then, the bill sponsors and a broad coalition of ELSA supporting organizations have worked together to incorporate feedback and strengthen ELSA's language.
- **ELSA has the support of both health professional and patient advocacy organizations.**
- To learn more or co-sponsor, contact the office of Sen. Baldwin, Sen. Ernst, Rep. Dunn and Rep. Schrier.