



Member Alert

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Oral and Maxillofacial Surgeons applaud Congresswoman McCarthy's legislation to require insurance coverage for children with congenital deformities

The [American Association of Oral and Maxillofacial Surgeons \(AAOMS\)](#) applauds [Congresswoman Carolyn McCarthy \(D-NY\)](#) on her recent introduction of [H.R. 1339, the Children's Access to Reconstructive Evaluation and Surgery \(CARES\) Act](#), which would require insurance plans, including those which fall under the [Employee Retirement Income Security Act \(ERISA\)](#), that provide surgical benefits, to cover reconstructive surgeries for children with congenital deformities, including craniofacial anomalies.

Each year, approximately 1 in 600 children is born with some type of craniofacial abnormality which may result in distortion of facial tissue, the oral cavity, and the skull. The most widely known craniofacial conditions are cleft lip and palate. Oral and maxillofacial surgeons donate thousands of hours each year performing corrective surgery on children suffering from congenital deformities, such as a cleft lip and palate, who are uninsured or living in medically underserved areas. However, thousands of children currently covered under health insurance plans are not able to receive corrective surgery because their claims are denied by insurers on the basis the procedure is deemed "cosmetic." While craniofacial anomalies may appear to be cosmetic, they often impede a child's ability to chew food, speak normally and perform other quality of life functions.

"The CARES Act is an important step toward ensuring that our nation's children no longer experience coverage discrimination for congenital deformities such as cleft lip and cleft palate," says Congresswoman McCarthy. "These procedures are not simply cosmetic. This bill experienced widespread bipartisan support in the last session of Congress and we are optimistic that we can advance this bill in this 111th Session. The provider community, including the nation's oral and maxillofacial surgeons, has been a great resource for identifying the extent of this problem and the unfortunate gaps in coverage for our nation's children. I also applaud the many hours of pro-bono services that oral and maxillofacial surgeons spend in treating those who cannot afford or do not have coverage for birth deformities such as cleft palate and cleft lip."

AAOMS shares Congresswoman McCarthy's belief and vision that corrective surgery for craniofacial anomalies is medically necessary and should be defined as reconstructive surgery rather than cosmetic surgery. The CARES Act would set an important national standard for ensuring families who have insurance receive the necessary care for their children with these conditions.

AAOMS members have worked closely with Congresswoman McCarthy on the CARES Act since it was initially introduced during the 110th Congress and look forward to promoting this cause and securing passage of this important legislation in the 111th Congress.

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