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PURPOSE OF SB 137

To mandate coverage for necessary maxillofacial services.

ACTUARIAL STATEMENT

The Fiscal Impact Statement was prepared according to generally accepted actuarial principles and practices, in compliance with ACT 112. The Statement provides an estimate of the financial and actuarial effect of the proposed change(s) on the Plans, if possible. The Statement makes no comment or opinion with regard to the merits of the measure for which the Statement is prepared; however, any identified technical or mechanical defects have been noted.

We have reviewed the input and results of our analysis for reasonableness and relied upon the data and information provided by the Plans and their Claims Processing Contractors.

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Patrick Klein, FSA, MAAA Vice President	Date	
lute 3/65		3/13/2023
Matthew Kersting, FSA, MAAA Vice President	Date	

PROJECTED COSTS

Plan	Plan Design Change	Estimated Cost/(Savings)
EBD	No Change	No Impact
UOA	No Change	No Impact
ASU	No Change	No Impact
AHEC	No Change	No Impact
NWACC	No Change	No Impact
SAU	No Change	No Impact

PRICING APPROACH AND COMMENTS

Senate Bill 137 requires self-insured health plans to cover necessary maxillofacial services. The bill calls out services that are used to restore and manage the head and facial structures of an individual that are defective because of disease, trauma, or birth or developmental deformities. The bill excludes cosmetic procedures as well as traditional dental care and orthodontic services

Our understanding is that the health plans already cover these necessary maxillofacial services per the plans responses and language found in their summary plan descriptions (SPDs). Therefore, we project no cost impact for this bill to the plans shown above.

