Whereas, head and neck cancer and trauma that requires resection often times leaves patients with incomplete or completely absent dentition; and

Whereas, prosthodontic reconstruction can broaden the opportunities for nutritional supplementation after treatment of head and neck cancers; and

Whereas, prosthodontic reconstruction allows for improved psychosocial outcomes after treatment of head and neck cancers; and

Whereas, prosthodontic reconstruction done at the time of orofacial reconstruction is more frequently covered by insurers while delayed prosthodontic reconstruction is significantly less likely to be covered; and

Whereas, same day reconstruction is not an option for all patients but does not negate the potential benefits for eventual prosthodontic reconstruction; and

Whereas, the American Medical Association has long standing policy advocating for coverage of dental implants for persons with congenital orofacial clefting; therefore be it

RESOLVED, that our American Medical Association with appropriate stakeholders to advocate:

(a) that prosthodontic reconstruction (including dental implants) after orofacial reconstruction secondary to oncologic resection be covered by all insurers, (b) that such coverage, shall include treatment which, in the opinion of the treating physician is medically necessary to optimize the patient’s appearance and function to their original form as much as possible, and (c) that such insurability be portable, i.e. not denied as a pre-existing condition if the patient's insurance coverage changes before treatment has been initiated or completed. (Directive to Take Action)

Fiscal Note: Modest - between $1,000 - $5,000

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