SENATE CONCURRENT RESOLUTION

REQUESTING THE AUDITOR TO ASSESS THE SOCIAL AND FINANCIAL IMPACTS OF REQUIRING HEALTH INSURERS TO OFFER COVERAGE FOR HEARING AIDS.

WHEREAS, according to the National Institutes of Health, an estimated one-third of Americans between the ages of sixty-five and seventy-five and around one-half of those older than seventy-five have some degree of hearing loss; and

WHEREAS, according to the Mayo Clinic, hearing loss is not reversible; and

WHEREAS, according to the Lions Club, the cost of a custom low- to mid-level analog or digital hearing aid begins around \$2,000 or less, and starts around \$3,000 and higher for a highend hearing aid; and

WHEREAS, Medicare and most private insurance companies do not cover the cost of hearing aids; and

WHEREAS, section 23-51, Hawaii Revised Statutes, requires that "[b]efore any legislative measure that mandates health insurance coverage for specific health services, specific diseases, or certain providers of health care services as part of individual or group health insurance policies, can be considered, there shall be concurrent resolutions passed requesting the auditor to prepare and submit to the legislature a report that assesses both the social and financial effects of the proposed mandated coverage"; and

WHEREAS, section 23-51, Hawaii Revised Statutes, further provides that "[t]he concurrent resolutions shall designate a specific legislative bill that:

(1) Has been introduced in the legislature; and

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- (2) Includes, at a minimum, information identifying the:
 - (A) Specific health service, disease, or provider that would be covered;
 - (B) Extent of the coverage;
 - (C) Target groups that would be covered;
 - (D) Limits on utilization, if any; and
 - (E) Standards of care.

For the purposes of this part, mandated health insurance coverage shall not include mandated optionals."; and

WHEREAS, section 23-52, Hawaii Revised Statutes, further specifies the minimum information required for assessing the social and financial impact of the proposed health coverage mandate in the Auditor's report; and

WHEREAS, Senate Bill No. 309, S.D. 1, was introduced during the Regular Session of 2013 and carried over to the Regular Session of 2014 and mandates health insurance coverage for hearing aids for every individual and group accident and health or sickness insurance policy, contract, plan, or agreement, other than an accident-only, specified disease, hospital indemnity, Medicare supplement, long-term care, dental, vision, or other limited benefit health insurance policy; hospital and medical service plan contracts; and health maintenance organization plans; and

WHEREAS, the Legislature believes that mandatory health insurance coverage for hearing aids will substantially assist persons who are deaf or hard of hearing to function effectively in the community; now, therefore,

BE IT RESOLVED by the Senate of the Twenty-seventh Legislature of the State of Hawaii, Regular Session of 2014, the House of Representatives concurring, that the Auditor is requested to conduct an impact assessment report, pursuant to sections 23-51 and 23-52, Hawaii Revised Statutes, of the social and financial impacts of mandating coverage for hearing aids for individual and group accident and health or sickness insurance

policies, contracts, plans, or agreements; hospital and medical service plan contracts; and health maintenance organization plans; and

BE IT FURTHER RESOLVED that the Auditor is requested to include within the impact assessment report the impact of federal Patient Protection and Affordable Care Act of 2010 requirements if mandated health insurance coverage for hearing aids is implemented in Hawaii; and

BE IT FURTHER RESOLVED that the Auditor is requested to submit findings and recommendations to the Legislature, including any necessary implementing legislation, no later than twenty days prior to the convening of the Regular Session of 2015; and

BE IT FURTHER RESOLVED that certified copies of this Concurrent Resolution be transmitted to the Auditor and to the Insurance Commissioner, who in turn is requested to transmit copies to each insurer in the State that issues health insurance policies.