SB 963

Measure Title:	RELATING TO HEARING AIDS.
Report Title:	Health Insurance Coverage; Hearing Aids
Description:	Requires health insurance policies and contracts issued after 12/31/15 to provide coverage for the cost of hearing aids up to \$1,500 per hearing aid for each hearing-impaired ear every thirty-six months.
Companion:	
Package:	Deaf and Blind Task Force
Current Referral:	HSH/CPN, WAM
Introducer(s):	CHUN OAKLAND, BAKER, GREEN, Harimoto, Taniguchi



DISABILITY AND COMMUNICATION ACCESS BOARD

919 Ala Moana Boulevard, Room 101 • Honolulu, Hawaii 96814 Ph. (808) 586-8121 (V/TDD) • Fax (808) 586-8129

February 12, 2015

TESTIMONY TO THE SENATE COMMITTEES ON HUMAN SERVICES AND HOUSING AND COMMERCE AND CONSUMER PROTECTION

Senate Bill 963 - Relating to Hearing Aids

The Disability and Communication Access Board (DCAB) is a statewide Governorappointed board with a majority of its members being persons with disabilities or family members. The Board's mission is to advocate and promote full inclusion, independence, equal access, and quality of life for persons with disabilities in society. This testimony represents a position voted upon by the Legislative Committee of the Board.

DCAB supports Senate Bill 963 that requires health insurance providers and contracts issued after December 31, 2015 to provide coverage for the cost of hearing aids up to \$1,500 per hearing aid for each ear with hearing impairment, and that the aids may be changed every thirty-six months, as needed. These recommendations were from the Legislative Auditor's Study completed in October 2014.

Currently, private health insurance plans provide partial coverage for eyeglasses to correct vision, and some provide partial coverage for hearing aids. Hearing is an equally important sense upon which an individual depends for communication, so an individual with a hearing loss would have improved coverage for hearing aids through a private insurance carrier with the passage of this bill.

Although DCAB supports Senate Bill 963, we are aware that it is a requirement for another study to be conducted related to the social and financial effects of requiring health insurers to offer coverage for hearing aids per §21-51, Hawaii Revised Statutes. Due to this requirement, DCAB recommends that this measure be deferred in order for the Legislative Auditor to conduct a study to assess, evaluate and review the social and financial effects of requiring health insurers to offer improved coverage for hearing aids, current practices of public and private insurance plans. We also request that the study include the feasibility of including future periodic studies to determine if the increasing costs for hearing aids would warrant an increase of the \$1,500 per hearing aid as a cost of living adjustment.

Thank you for the opportunity to testify.

Respectfully submitted,

BARBARA FISCHLOWITZ-LEONG

Chairperson Legislative Committee

ranging War

FRANCINE WAI Executive Director



DAVID Y. IGE GOVERNOR

SHAN S. TSUTSUI LT. GOVERNOR STATE OF HAWAII OFFICE OF THE DIRECTOR DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

335 MERCHANT STREET, ROOM 310 P.O. Box 541 HONOLULU, HAWAII 96809 Phone Number: 586-2850 Fax Number: 586-2856 www.hawaii.gov/dcca CATHERINE P. AWAKUNI COLÓN DIRECTOR

JO ANN M. UCHIDA TAKEUCHI DEPUTY DIRECTOR

TO THE SENATE COMMITTEES ON HUMAN SERVICES AND HOUSING AND COMMERCE AND CONSUMER PROTECTION

TWENTY-EIGHTH LEGISLATURE Regular Session of 2015

Thursday, February 12, 2015 9:30 a.m.

TESTIMONY ON SENATE BILL NO. 963 – RELATING TO HEARING AIDS.

TO THE HONORABLE SUZANNE CHUN OAKLAND AND ROSALYN H. BAKER, CHAIRS, AND MEMBERS OF THE COMMITTEES:

My name is Gordon Ito, State Insurance Commissioner, testifying on behalf of the Department of Commerce and Consumer Affairs ("Department"). The Department takes no position on this bill, and submits the following comments on this bill.

The purpose of this bill is to add a new mandated health insurance benefit requiring health insurance policies and contracts issued after December 31, 2015, provide coverage for the cost of hearing aids up to \$1,500 per hearing aid for each hearing-impaired ear every 36 months.

Notwithstanding proposed paragraph (e), the addition of a new mandated coverage in excess of Hawaii's benchmark health plan may trigger section 1311(d)(3) of federal Patient Protection and Affordable Care Act which requires states to defray the additional cost of any benefits in excess of the essential health benefits of the state's qualified health plan. The Department defers to the Auditor's study (report no. 14-10, October 2014) on mandating insurance coverage for hearing aids.

House Bill No. 963 DCCA Testimony of Gordon Ito Page 2

We thank the Committee for the opportunity to present testimony on this matter.

DAVID Y. IGE GOVERNOR OF HAWAII



VIRGINIA PRESSLER, M.D. DIRECTOR OF HEALTH

WRITTEN ONLY

STATE OF HAWAII DEPARTMENT OF HEALTH P. O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov

Testimony COMMENTING on S.B. 963 RELATING TO HEARING AIDS

SENATOR SUZANNE CHUN OAKLAND, CHAIR SENATE COMMITTEE ON HUMAN SERVICES AND HOUSING SENATOR ROSALYN H. BAKER, CHAIR SENATE COMMITTEE ON COMMERCE AND CONSUMER PROTECTION Hearing Date: February 12, 2015 Room Number: 229

Fiscal Implications: This bill does not address the issue of financial hardship for individuals
 whose health insurance does not adequately cover hearing aid purchases.

3 Department Testimony: The Department of Health appreciates the intent of this bill to increase
4 access to hearing aids by mandating health insurance coverage. However, this bill does not
5 address the issue, raised in the State Auditor's report, of financial hardship for individuals whose
6 health plans do not adequately cover hearing aid purchases. The bill only provides a maximum
7 cost (instead of a minimum cost) to be covered.

8 Each year in Hawaii, 2 to 4 newborns per 1000 (about 55 infants) are born with
9 permanent hearing loss. Approximately 2% of children receiving special education services in
10 the Department of Education have hearing impairment. Approximately one-third of persons
11 between ages 65 to 75 and up to one-half of persons older than 75 have hearing loss.

- Hearing aids benefit individuals of all ages. Hearing aid amplification can be a part of the comprehensive treatment of hearing loss in children age birth to three years enrolled in early intervention programs, and part of the educational plan of school-aged children with hearing loss. Hearing aids are important for communication in the lives of adults with hearing loss.
- The State Auditor studied the social and financial effects of mandating health insurance
 coverage for hearing aid purchases ("Study of Mandatory Health Insurance for Hearing Aids",

1 Report No. 14-10, October 2014, http://files.hawaii.gov/auditor/Reports/2014/14-10.pdf).

2 Findings include:

- Most health insurance companies in Hawaii cover or are planning to cover hearing aid
 purchases. Coverage ranges from \$625 to \$1500 per hearing aid per ear.
- Costs for hearing aids range from \$600 to \$3,400 per hearing aid, depending on their
 make, model, and configuration.
- The cost of hearing aids may place an unreasonable financial hardship on people whose
 plans do not cover hearing aid purchase or do not adequately cover the hearing aid costs.
- As of August 2014, 20 states have laws that require private health insurance companies to cover the purchase of hearing aids. Fifteen (15) states set parameters on the costs of coverage which range from \$1400 to \$4000 per ear.
- Hawaii's bill needs to specify insurance coverage parameters for hearing aids, such as
 age, frequency, or costs. Without providing a minimum amount that insurers must cover,
 there may be no change in their current coverage of hearing aid costs.
- This bill proposes a maximum benefit of \$1,500 per hearing aid per ear to be covered.
 When the cost of a hearing aid exceeds this maximum benefit, out-of-pocket expenses may be a
 financial challenge and individuals/families may delay or forego the use of hearing aids.
- Improving access to health care services address the foundation of Health Equity in the Department's Strategic Plan – which includes a goal to eliminate disparities and improve the health of all groups throughout Hawaii. Improving access also addresses a Healthy People 2020 objective to increase the proportion of persons with hearing impairments who use hearing aids.
- 22 Thank you for the opportunity to testify.

23

STATE OF HAWAI'I OFFICE OF THE AUDITOR 465 S. King Street, Room 500 Honolulu, Hawai'i 96813-2917



(808) 587-0800 FAX: (808) 587-0830

TESTIMONY OF JAN K. YAMANE, ACTING STATE AUDITOR, ON SENATE BILL NO. 963 RELATING TO HEARING AIDS

Senate Committees on Human Services and Housing and Commerce and Consumer Protection

February 12, 2015

Chair Oakland, Chair Baker, and Members of the Committees:

I am Jan Yamane, Acting State Auditor. Thank you for the opportunity to provide comments on Senate Bill No. 963, which would require health insurance coverage for hearing aids for people with all types of hearing loss.

As you are aware, pursuant to Senate Concurrent Resolution No. 34, Senate Draft 1 of the 2014 Regular Session, we assessed the social and financial effects of mandating health insurance coverage for hearing aids, as proposed in Senate Bill 309, Senate Draft 1 (2014), in accordance with Sections 23-51 and 23-52, Hawai'i Revised Statutes. In our *Study of Proposed Mandatory Health Insurance for Hearing Aids* (Report No. 14-10), released in October 2014, we concluded that some coverage was already provided for one hearing aid per ear every five years. However, because last year's bill had no limits on coverage, such as costs covered by insurers and frequency for replacing hearing aids, the social and financial impacts were minimal and would not ensure adequate coverage. Therefore, our recommendation was to not enact last year's bill as written.

1

SB 963 addresses the lack of coverage parameters identified in our report by making changes sought by the Department of Health. Specifically, the bill provides a maximum benefit of \$1,500 per hearing-impaired ear and allows for replacing hearing aids every three years. In addition, the bill expands the definition of hearing aids to include conventional and bone conduction hearing aids for certain people with permanent conductive hearing loss, such as atresia (no ear canals) or tumor in the middle ear.

Thank you for the opportunity to provide comments on SB 963. I am available to answer any questions you may have.



February 12, 2015

The Honorable Suzanne Chun Oakland, Chair Senate Committee on Health The Honorable Rosalyn H. Baker, Chair Senate Committee on Commerce and Consumer Protection

Re: SB 963 – Relating to Hearing Aids

Dear Chair Chun Oakland, Chair Baker and Members of the Committees:

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on SB 963 which would require plans to provide coverage for the cost of hearing aids up to \$1,500 per hearing aid and for hearing aid replacement every36 months. HMSA has concerns with this Bill.

HMSA's plans do provide coverage for hearing aids under both our Preferred Provider Plan and Health Plan Hawaii Plus (our HMO plan). As such, the coverage was included in the plan selected by the State as the Hawaii Health Connector's Benchmark Plan, as required by the Affordable Care Act (ACA).

The Committee has included a provision exempting this mandate on qualified ACA plans. That provision acknowledges the potential impact of another provision of the ACA which requires the State to cover the cost of any State mandate implemented after December 31, 2011. While the Bill attempts to shield the State from bearing the cost burden – it does not do so. All non-ACA plans provided by Hawaii's small businesses or purchased directly by individuals are not exempt in this Bill and, therefore, that cost must be picked-up by the State. As such, we suggest that, should this Bill move forward, an appropriation be included in the draft.

Thank you for allowing us to comment on SB 963.

Sincerely,

Jennifer Diesman Vice President, Government Relations

Senator Suzanne Chun Oakland, Chair Senator Josh Green, Vice Chair

Senator Rosalyn Baker Chair Senator Brian Taniguchi

February 12, 2015 9:30am

Re: SB 963 - Relating to Hearing Aids

Dear Senator Chun Oakland, Senator Baker and members of the joint Committees on Human Services and Housing and Commerce and Consumer Protection,

Aloha State Association of the Deaf support of SB 963 that will increase the amount the insurance company will pay for hearing aids and allow me to get a new hearing aid every three years, if needed. This will support all deaf and hard of hearing people of any age.

The price of digital hearing aids increases each year, so I feel it is necessary to have the insurance company pay more than \$500 per hearing aid. Also with the cost of living increasing each year, it may be necessary to for the Legislative Auditor to conduct periodic studies to see if an increase in insurance payment is needed on a regular basis.

Thank you for your time reading my testimony.

Aloha,

Colleen Cidade President Aloha State Association of the Deaf



February 10, 2015

Senator Suzanne Chun Oakland Chair, Senate Committee on Human Services and Housing Hawaii State Capitol, Room 226 415 South Beretania Street Honolulu, HI 96813

RE: SB 963

Dear Senator Chun Oakland and Members of the Committee:

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for more than 173,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Over 540 of our members reside in Hawaii.

On behalf of our members, I am writing you to support SB 963, which would require health insurance coverage for hearing aids for individuals with all types of hearing loss and specifies a minimum amount of coverage and frequency for replacement.

Communication skills are central to a successful life for all Americans. Communication disorders greatly affect education, employment, and the well-being of many Americans. Each day is a challenge for the 1 in 6 Americans who has a communication disability and for their families.

One major contributor to communication disability is hearing loss. The occurrence of hearing loss is on the rise; the number of Americans with a hearing loss has doubled during the past 30 years. According to the National Institute on Deafness and Other Communication Disorders, one in eight people in the United States aged 12 years or older has hearing loss in both ears, based on standard hearing examinations. With the increase of the MP3 generation and the aging of baby boomers, this number will only continue to rise. As illustrated in an article in the Journal of the American Medical Association, "Change in Prevalence of Hearing Loss in U.S. Adolescents" (*JAMA*, Aug. 18, 2010), teen unilateral and bilateral hearing loss has jumped 31% from 1988–1994 to 2005–2006. The prevalence of mild hearing loss or greater during this same time period spiked to 77%. The study showed 1 in 5 adolescents who were 12 to 19 years old—approximately 6.5 million teens—had hearing loss in 2005–2006. Teen hearing loss is increasing at an epidemic rate.

Studies have linked untreated hearing loss to many social and economic factors including depression; withdrawal from social situations; reduced alertness and increased risk to personal safety; impaired memory and ability to learn new tasks; reduced job performance and earning power; and diminished psychological and overall health. For the young, even a mild or moderate

ASHA Comments February 9, 2015 Page 2

hearing loss could bring difficulty learning, developing speech, and building the important interpersonal skills necessary to foster self-esteem and success in school and life. Academic achievement and social functioning are also significantly affected for children with hearing loss. The costs to the state over the course of the child's education can be prohibitive.

Increasing insurance coverage for hearing aids for anyone who can benefit from them without beneficiaries having to pay the entire cost out-of-pocket will help those with hearing loss get the assistance they need to live full lives.

Thank you for the opportunity to provide comments. Should you have any questions, please contact Eileen Crowe, ASHA's director, state association relations at <u>ecrowe@asha.org</u>, or Janet Deppe, ASHA's director of state advocacy, at <u>jdeppe@asha.org</u>.

Sincerely,

Judith L. Lage

Judith L. Page, PhD, CCC-SLP 2015 ASHA President

cc: Senator Rosalyn Baker Senator Jill Tokuda Senator Suzanne Chun Oakland, Chair Committee on Human Services and Housing Senator Rosalyn H. Baker, Chair Committee on Commerce and Consumer Protection Hawaii State Capitol 415 Beretania St. Honolulu, HI 96813

February 9, 2015

Re: Support the intent of SB 963, Relating to Hearing Aids.

Dear Chair Chun Oakland and Chair Baker and members of the joint committee,

My name is Amanda Kaahanui and the mother of a deaf/hard of hearing son. I am also Board President for Hands & Voices Hawaii, a parent-to-parent support organization for families who have deaf/hard of hearing or deaf/blind keiki.

Our organization is in support of SB 963 with a slight amendment. Please consider changing page 4, line 9 and page 6, line 17 to read "be subject to a "minimum" benefit of \$1500 per hearing-impaired ear every thirty-six months." Many families are forced to choose between allowing their child to hear and learn to speak and paying the rent and bills. They may be on the cusp of poverty and not qualify for government assistance programs but cannot afford hearing aids because the insurance companies cover only a very small cost of the aids. The average low-end digital hearing aid costs about \$1500 per aid. By asking the insurance companies to pay this minimum, at least families will have the opportunity to allow their child to hear and potentially learn speech in the very important early years of their lives.

The population of deaf/hard of hearing children in Hawaii is very small, and this should not have a severe impact on the insurance companies. It would also reduce the burden on the state Medicaid system as well. For those children who have dual insurances, Medicaid thankfully pays for hearing aids, and/or the co-payment from the private insurance. If the private insurance companies are required to cover at least what the Medicaid system will cover, then the cost to the taxpayers and burden to the Medicaid system can be reduced.

Please pass SB 963 with the amendment of requiring a minimum amount of \$1500 to be covered for each hearing aid. Our children deserve the chance to hear, if they are able, and this technology should not be denied them because insurance companies do not want to fully cover this benefit.

Respectfully yours, Amanda Kaahanui

Board President, Hands & Voices Hawaii 808-384-8936 hv.hawaii@gmail.com

National Active and Retired Federal Employees Association (NARFE) Hawaii State Federation of Chapters e-mail: JMatsuo368@hawaii.rr.com

LEGISLATIVE TESTIMONY IN **SUPPORT** OF SB963, Relating to Hearing Aids

Hearing, Thursday, February 12, 2015, 9:30 a.m., Room 229

Senator Suzanne Chun Oakland, Chair Senator Josh Green, Vice Chair Members, Committee on Human Services and Housing

Senator Rosalyn H. Baker, Chair Senator Brian T. Taniguchi, Vice Chair Members, Committee on Commerce and Consumer Protection

Aloha

The National Active and Retired Federal Employees Association (NARFE), Hawaii State Federation of Chapters, is in support of SB963, Relating to Hearing Aids, that would require health insurance policies and contracts issued after 12/31/15 to provide coverage for the cost of hearing aids up to \$1,500 per hearing aid for each hearing-impaired ear every thirty-six months.

As indicated in the bill, about 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. Generally, health plans provide coverage for exams, but few provide coverage of any kind for hearing aids. For example, the HMSA Akamai Advantage Plan used by many senior citizens does not provide coverage for any hearing aid.

The bill proposes coverage up to \$1,500; we suggest that this amount needs to be higher as the cost for hearing aids typically begin at \$2000, and we also suggest a percentage of the cost, such as 80% by the insurance company with co-pay of 20% by the insurer as the better solution to address coverage for the varying costs of hearing aids.

Respectfully

Joyce Matsuo 1st Vice President/Legislation

About NARFE

The National Active and Retired Federal Employees Association (NARFE) is dedicated to protecting and enhancing the earned pay, retirement and health care benefits of federal employees, retirees and their survivors. Founded in 1921, NARFE's legacy spans more than 90 years – working tirelessly in support of our members before Office of Personnel Management, members of Congress and the White House. The Hawaii State Federation of Chapters has 11 chapters that are located on Kauai, Hawaii, O'ahu and Maui.



SB 963 RELATING TO HEARING AIDS Senate Committee on Human Services and Housing Senate Committee on Commerce and Consumer Protection Joint Public Hearing - February 12, 2015 9:30 am, State Capitol, Conference Room 229

> By Tamar Lani, MBA, CI, CT, NIC, SC:L Susan Kroe-Unabia, CI, CT

Aloha,

Our names are Tamar Lani and Susan Kroe-Unabia. We are co-owners of Isle Interpret, LLC. We are writing in support of <u>SB 963 – Relating to Hearing Aids.</u>

Isle Interpret supports the approval for insurance companies to include coverage for hearing aids as a standard coverage. Isle Interpret supports the requirement that insurance companies should pay for heading aids, that each hearing aid should be covered up to \$1,500, and that patients be allowed to obtain new hearing aids every 3 years.

Hearing aids are an essential assistive technology for the deaf and hard of hearing who benefit from the technology. Having up to date equipment that is in good condition is necessary for ensuring a good quality of life.

Again, Isle Interpret is in full support of SB 963.

Thank you for the opportunity to testify on this bill.

Mahalo,

Tamar Lani, MBA, CI, CT, NIC, SC:L, President Susan Kroe-Unabia, CI, CT, Vice President Senator Suzanne Chun Oakland, Chair Committee on Human Services and Housing Senator Rosalyn H. Baker, Chair Committee on Commerce and Consumer Protection Hawaii State Capitol 415 Beretania St. Honolulu, HI 96813

February 9, 2015

Re: Support the intent of SB 963, Relating to Hearing Aids.

Dear Chair Chun Oakland and Chair Baker and members of the joint committee,

My name is Amanda Kaahanui and the mother of a deaf/hard of hearing son. I use both terms, because without hearing aids, my son is deaf and cannot hear or recognize any speech sounds or patterns, but with the use of hearing aids, can hear and respond with speech at home, in the classroom and in the community at large.

I support SB 963 with a slight amendment. Please consider changing page 4, line 9 and page 6, line 17 to read "be subject to a "minimum" benefit of \$1500 per hearing-impaired ear every thirty-six months." My son has HSMA as a primary insurance, through my husband. But HMSA will only pay a \$300 benefit for is hearing aids. The hearing aids are not top of the line, they are the minimum of what the audiologist suggested is needed to aid in his hearing of speech sounds, and still, these digital hearing aids cost about \$1500 per aid. By asking the insurance companies to pay a minimum, at least families will have the opportunity to allow their child to hear and potentially learn speech in the very important early years of their lives.

The population of deaf/hard of hearing children in Hawaii is very small, and this should not have a severe impact on the insurance companies. It would also reduce the burden on the state Medicaid system as well. For those children who have dual insurances, Medicaid thankfully pays for hearing aids, and/or the co-payment from the private insurance. If the private insurance companies are required to cover at least what the Medicaid system will cover, then the cost to the taxpayers and burden to the Medicaid system can be reduced.

Please pass SB 963 with the amendment of requiring a minimum amount of \$1500 to be covered for each hearing aid. Our children deserve the chance to hear, if they are able, and this technology should not be denied them because insurance companies do not want to fully cover this benefit.

Respectfully yours, Amanda Kaahanui

45-850 A Ano'i Rd. Kaneohe, HI 96744 808-384-8936

ART FRANK 84-718 FARRINGTON HWY WAIANAE, HI 96792-1906 FEBRUARY 8, 2025

SENATE BILL 963 RELATING TO HEARING AIDS

My name is Art Frank and I am from Makaha on the Waianae Coast. I have been deaf since 1977. I originally wore two hearing aids from 1977 to 1986, at which time I had surgery for a Cochlear Implant. I wore only one hearing aid in my right ear with my Cochlear Processor on my left ear until 2005. With experience in wearing hearing aids I can attest to the fact that they are damn expensive. I had no insurance coverage for my hearing aids and had to pay for them outof-pocket. I was fortunate even though it was a struggle, and my dealer permitted me to make installment payments, I was able to pay for my hearing aids. I knew many people, including children who went without hearing aids due to the cost, and that's tragic because being able to hear; being able to communicate is important in life. By not wearing hearing aids because of the cost, people's hearing, including children deteriorates to the point it becomes useless. Any audiologist I'm sure will agree with me. Consequently I support this bill wholeheartedly because people need financial assistance in order to buy hearing aids. Let me reiterate that being able to hear, being able to communicate is important in life. Until you lose your hearing yourself you have no idea how frustrating and difficult it is to adjust to a hearing loss. Being multi-disabled I can truthfully say I adjusted to being in a wheelchair more easily than adjusting to my hearing loss. I recall telling people (all in wheelchairs) in my group therapy session, "if God appeared here today and said to me 'I'll give you three choices; your legs, your hands or your hearing'." I said to my group with no hesitation I would tell the Lord "I'd take my hearing back because this wheelchair don't mean a damn thing to me, but losing my hearing does". I also said "if the Lord said he'd give me back my hearing but leave me in the wheelchair the rest of my life, I'd take the deal without any hesitation". I further stated to my group, "communications means more to me than walking and using my hands because with my hearing I can communicate with the world and I can go back to work". Even today if the Lord gave me a choice of being able to use my hands without paralysis, and walk without braces and crutches versus my hearing, I would take my hearing back any day because I could accomplish a hell of a lot more with my hearing than with my hands and legs. . The bottom line until you lose your own hearing you have no idea how frustrating, depressing and expensive it is. That's a fact of life. Thank you very much.

Art Frank Deaf Consumer Makaha, Waianae Coast

Cheryl Mizusawa		
Chun Oakland		
<u>wa"</u>		
ng to Hearing Aids		
ary 10, 2015 1:11:48 PM		

Senator Suzanne Chun Oakland, Chair Senator Josh Green, Vice Chair

Senator Rosalyn Baker Chair Senator Brian Taniguchi

February 12, 2015 9:30am

Re: SB 963 - Relating to Hearing Aids

Dear Senator Chun Oakland, Senator Baker and members of the joint Committees on Human Services and Housing and Commerce and Consumer Protection,

I am a deaf or hard of hearing person and I support of SB 963 that will increase the amount the insurance company will pay for hearing aids and allow me to get a new hearing aid every three years, if needed. This will support all deaf and hard of hearing people of any age.

The price of digital hearing aids increases each year, so I feel it is necessary to have the insurance company pay more than \$500 per hearing aid. Also with the cost of living increasing each year, it may be necessary to for the Legislative Auditor to conduct periodic studies to see if an increase in insurance payment is needed on a regular basis.

Thank you for your time reading my testimony.

Aloha

Cheryl Mizusawa Pearl City, HI February 10, 2015

To: Senator Suzanne Chun Oakland, Chair Vice Chair Senator Rosalyn Baker Chair Senator Brian Taniguchi

Fr: Christine "Crissy" Holmes

February 12, 2015 9:30am Re: SB 963 – Relating to Hearing Aids

Dear Senator Chun Oakland, Senator Baker and members of the joint Committees on Human Services and Housing and Commerce and Consumer Protection,

I am a deaf or hard of hearing person and I support of SB 963 that will increase the amount the insurance company will pay for hearing aids and allow me to get a new hearing aid every three years, if needed. This will support all deaf and hard of hearing people of any age.

The price of digital hearing aids increases each year, so I feel it is necessary to have the insurance company pay more than \$500 per hearing aid. Also with the cost of living increasing each year, it may be necessary to for the Legislative Auditor to conduct periodic studies to see if an increase in insurance payment is needed on a regular basis.

Based on my personal life, I was born Deaf the same time, wearing hearing aid on my left ear. Today, I'm still wearing a hearing aid until I die. Hearing aid is the main part of my life that I CANNOT live without. I had few times in my life when my hearing aid batteries dies, I must go to the store immediately to get a pack of battery and keep my hearing aid to work. Even one time, my hearing aid shut down that I nothing else working, I had to take my husband's hearing aid and wear it just for few days until my hearing aid working.

Again, hearing aid plays a big part of my personal life. Without hearing aid, I feel lost and feeling insecure around me is like I'm the

Senator Josh G n

only person left on an island. That's very scary!

One or two hearing aids are still expensive today that I couldn't afford. Such a small device that cost so much really depresses me sometimes. Why do they have to cost more that we had to pay out of our pocket? It not our fault that we are born to be Deaf.

I hope that we, as Deaf people should be charged less or free when purchasing a hearing aid(s). Think about our safety in our environment such as walking alone in the dark not knowing someone behind us, think about the newborn babies crying in the crib that we don't know, think about transportation that probably we could hear the ambulance coming by, and so many reasons why hearing aids are part of Deaf people's lives to deal with.

Thank you for your time reading my testimony. Aloha

Christine "Crissy" Holmes Honolulu, Hawaii

From:	mailinglist@capitol.hawaii.gov
To:	HSH Testimony
Cc:	kuliangel569@gmail.com
Subject:	Submitted testimony for SB963 on Feb 12, 2015 09:30AM
Date:	Saturday, February 07, 2015 12:11:04 PM
Attachments:	SB963 (1) Hearing Alds.pdf

Submitted on: 2/7/2015 Testimony for HSH/CPN on Feb 12, 2015 09:30AM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
Francine Mae Aona Kenyon	Individual	Support	No

Comments:

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

SB 963 Relating to Hearing Aids

To: <u>COMMITTEE ON HUMAN SERVICES AND HOUSING</u> Senator Suzanne Chun Oakland, Chair Senator Josh Green, Vice Chair

DATE: Thursday, February 12, 2015 TIME: 9:30 am PLACE: Conference Room 229 State Capitol 415 South Beretania Street

FROM: Jana Kidder

RE: SUPPORT

My name is Jana Kidder, I am a member of the hard-of-hearing/deaf community and I am writing to express my support of SB963 Relating to Hearing Aids. I beseech the Committee on Human Services and Housing to please pass this bill to increase the amount an insurance company should cover for hearing aids.

Currently hard-of hearing people pay the price of a new computer or a second-hand car, for hearing aids, just so they can communicate and participate in life. The cost out of pocket can still exorbitant for a hard-of-hearing consumer even after an insurance company has covered their portion. In our state of Hawaii the cost of living is so high that many senior citizens and disadvantaged individuals go without these important assistive devices because they cannot afford the balance left. In families where there are 2 or more hard-of-hearing members it becomes even more difficult when that cost is multiplied.

Why are hearing aids an important asset in a hard-of hearing persons life? Here are some examples:

<u>Communication:</u> A hearing disability affects communication. What a hard-of-hearing person hears is how they will pronounce their words. If what they hear is not clear their words will be muffled or incoherent. Without hearing aids a lot of hard of hearing are actually legally deaf. What hearing people do not understand is that if you've never heard sounds in your life you will never be able to speak.

<u>Education</u>: Hearing aids are important for students of all ages, from Pre-school to College. It helps hard-of-hearing to participate and improves grades. Being able to hear also helps enhance comprehension, which is important in any aspect of life.

<u>Safety:</u> Crossing the street or driving and hearing a car horn to prevent being hit or a part of an accident. Sitting/waiting at a bus stop or even walking/jogging and hearing a

stranger approach them. Any hard-of-hearing person who has been victimized sometimes could not hear their attackers approach them.

<u>Veterans:</u> Our Veterans fight for our safety and our freedom. Those who have experienced hearing loss from War, whether being exposed to chemicals such as Agent Orange while at war or even loss from the sounds or artillery, heavy equipment or bombs, sometimes do not qualify for benefits from the VA unless they're at least 70% disabled. Those who do not qualify and need hearing aids find themselves also paying out of pocket for assistive devices such as hearing aids to remain productive in society. SB963 will help bring the balance down for them as well.

Daily Living:

- For senior citizens hearing aids help them to hear their grandchild cry when they're born and hear them laugh or sing when they're happy. It also allows the elderly some independence and confidence in later years as it allows them to continue to socialize.
- Parenting: Hearing aids help hard-of-hearing parents hear their newborn baby coo, cry to be held, comforted, or fed. Hear their older children ask them questions or share what happened at school.
- Even every day tasks are easier to accomplish when using hearing aids. Being able to hearing the cashier give the balance when shopping for groceries. Going to the doctors and answering his/her questions and listening to the doctor's instructions.

Thank you for taking the time to read my testimony. I truly appreciate it.

Jana Kidder

From:	mailinglist@capitol.hawaii.gov
To:	HSH Testimony
Cc:	mkhan@hawaiiantel.net
Subject:	Submitted testimony for SB963 on Feb 12, 2015 09:30AM
Date:	Thursday, February 05, 2015 11:16:28 AM

Submitted on: 2/5/2015 Testimony for HSH/CPN on Feb 12, 2015 09:30AM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
Leimomi Khan	Individual	Support	No

Comments: Support SB963 to require health insurance coverage for hearing aids. However, recommend the amount in the bill be changed to up to \$2000 for each hearing impaired ear to be consistent with the information in Section 1 of the bill that lists minimum cost as \$2000. If there is a concern that inclusion of this benefit may raise health insurance premiums for all, recommend mandate that insurance companies offer an option to purchase such coverage at a reasonable rate. As a note, the HMSA Akamai Advantage Premier covers hearing exams, but not hearing aids. The Federal Plan covers one device per ear every 60 months with coverage at 80% of the eligible charge and 20% payable by the member. Mahalo, Leimomi Khan

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

From:	mailinglist@capitol.hawaii.gov
To:	HSH Testimony
Cc:	lisa2tom@gmail.com
Subject:	Submitted testimony for SB963 on Feb 12, 2015 09:30AM
Date:	Wednesday, February 11, 2015 3:50:03 PM

Submitted on: 2/11/2015 Testimony for HSH/CPN on Feb 12, 2015 09:30AM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
Lisa Tom	Individual	Support	No

Comments: My name is Lisa Tom and I am a deaf advocate. I support S.B. NO. 962 because it helps me "lessen" my financial hardship. My current medical insurance is low and is not able to cover the cost of two hearing aids. The cost of hearing aids have increased due to better technology. Not only the cost of hearing aids, I pay for extra costs for new hearing aid molds, tubing replacement and hearing aid batteries. I rely on using hearing aids when working in a hearing environment and other reasons. I'm asking you please support this bill. Thank you for your time in reading my testimony.

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

Submitted on: 2/8/2015 Testimony for HSH/CPN on Feb 12, 2015 09:30AM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
Lucy Miller	Individual	Support	No

Comments: It makes no sense to deny coverage for hearing aids for people who depend on them in their work and daily lives. Properly fitted hearing aids are much cheaper than expensive surgery which is covered but not a good option for most people.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

PETER L. FRITZ

200 NORTH VINEYARD BOULEVARD, #430

HONOLULU, HAWAII 96817 Telephone (Sprint IP Relay): (808) 568-0077 E-mail: plflegis@fritzhq.com

THE SENATE THE TWENTY-EIGHTH LEGISLATURE REGULAR SESSION OF 2015

COMMITTEE ON HUMAN SERVICES AND HOUSING and COMMITTEE ON COMMERCE AND CONSUMER PROTECTION

Testimony on S.B. 963 Hearing: February 12, 2015

(RELATING TO HEARING AIDS)

Chairs Chun Oakland and Baker, Vice Chairs Green and Tanaguchi, and members of the Committees. I am an individual with a disability and a user of hearing aids and I am testifying in support of this measure.

This bill requires health insurance policies and contracts to provide coverage for the cost of hearing aids up to \$1,500 per hearing aid for each hearing-impaired ear every thirty-six months.

As someone who uses hearing aids, I have personal knowledge relating to their cost. The hearing aids that I purchased almost 3 years ago cost \$2722.49. This represents a significant expenditure. I support this legislation which would establish an amount for reimbursement and time periods for replacement of hearing aids.

I would ask that the Committees consider inserting language that would allow the amount of reimbursement to be increased according to a standard that reflects increases in the cost of medical equipment. Indexing the amount of reimbursement would avoid having to return to the legislature to increase the reimbursement amount because of increases in the cost of hearing aids.

Thank you for the opportunity to testify.

Respectfully Submitted,

Submitted on: 2/4/2015 Testimony for HSH/CPN on Feb 12, 2015 09:30AM in Conference Room 229

Submitted By	Organization	Testifier Position	Present at Hearing
Wailua Brandman	Individual	Support	No

Comments:

Please note that testimony submitted <u>less than 24 hours prior to the hearing</u>, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.