#### A BILL FOR AN ACT

RELATING TO HEARING AIDS.

#### BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that approximately three 2 to four out of every one thousand children born in Hawaii are 3 identified as having permanent hearing loss. According to the 4 National Institutes of Health, about one-third of Americans 5 between the ages of sixty-five and seventy-five and around 6 one-half of those older than seventy-five have some degree of 7 hearing loss.

8 According to the Lions Club, the cost for one digital 9 hearing aid can be around \$3,000 or more. Some people with 10 permanent conductive hearing loss, for whom conventional hearing 11 aids are not appropriate, may benefit from amplification through 12 bone conduction hearing aids, which can also cost over \$3,000. 13 Furthermore, about fifty per cent of childhood hearing loss is 14 due to genetic causes, meaning that more than one member in a family may need to wear hearing aids, thereby multiplying the 15 16 financial burden of purchasing hearing aids.



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1 The legislature also finds that, currently, most health 2 insurance plans in Hawaii cover the purchase of hearing aids, 3 but the amount of coverage may be low, leaving the patient with 4 a large copayment. As a result, it is not unusual for people 5 with hearing loss to choose to delay or forgo the purchase of 6 hearing aids because they are unable to pay for them. A 2005 7 study by the Better Hearing Institute estimated that untreated 8 hearing loss resulted in a loss of income per household of up to 9 \$12,000 per year. Hawaii's medicaid managed care plans cover 10 hearing aid evaluation, selection, purchase, and fitting every 11 three years, and subsequent hearing aid checks, hearing testing, 12 ear molds, repairs, and batteries. However, federal medicare 13 insurance plans for the elderly do not cover hearing aid 14 purchases and related services, and only cover hearing testing. 15 According to the American Speech-Language-Hearing 16 Association, twenty-five states currently mandate insurance 17 coverage for hearing aids. In states that specify the frequency 18 of replacing hearing aids, the range is every two to five years, with thirteen of those states requiring replacement every three 19 20 years. Fifteen states have parameters on the amount of coverage





that the insurance companies must provide, ranging from \$1,400
to \$4,000 per ear or hearing aid.

3 The legislature further finds that the auditor published report No. 14-10 (2014), a sunrise study on the advisability of 4 5 mandating insurance coverage for hearing aids, as proposed in 6 Senate Bill No. 309, S.D. 1, regular session of 2013 (S.B. No. 7 309). The auditor found that most insurance plans in Hawaii 8 already covered or planned to cover the cost of hearing aids by 9 2015 and that although the coverage levels at that time might 10 require a large copayment, those insurance plans would have complied with S.B. No. 309, had it been enacted. 11 The 12 legislature notes that the auditor's report expressed concerns 13 that S.B. No. 309, had no limits on coverage, such as minimum or 14 maximum costs covered by insurers or frequency of placement.

In response to the auditor's report, Senate Bill No. 2439, S.D. 2, regular session of 2022, proposed a minimum coverage benefit of \$1,500 per hearing aid for each hearing-impaired ear every thirty-six months. The legislature passed Senate Concurrent Resolution No. 61, S.D. 1, H.D. 1 (2022), which requested the auditor to perform a social and financial

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1 assessment of Senate Bill No. 2439, S.D. 2, regular session of 2022, as required by section 23-51, Hawaii Revised Statutes. 2 3 The purpose of this Act is to require health insurance 4 coverage in the State for hearing aids for all types of hearing 5 loss at a minimum coverage benefit of \$1,500 per hearing aid for 6 each hearing-impaired ear every thirty-six months. 7 SECTION 2. Chapter 431, Hawaii Revised Statutes, is 8 amended by adding a new section to article 10A to be 9 appropriately designated and to read as follows: 10 "§431:10A- Coverage for hearing aids. (a) Each 11 individual and group accident and health or sickness policy, 12 contract, plan, or agreement issued or renewed in the State on 13 or after January 1, 2024, shall provide coverage for the cost of 14 hearing aids for the policyholder and individuals covered under the policy, contract, plan, or agreement. 15 16 (b) Hearing aid purchases covered under this section shall be subject to a minimum benefit of \$1,500 per hearing-impaired 17 ear every thirty-six months. 18 19 (c) The policyholder and individual covered under the 20 policy, contract, plan, or agreement may choose a hearing aid 21 that is priced higher than the benefit payable under this



1	section without financial or contractual penalty to the provider
2	of the hearing aid.
3	(d) This section shall not prohibit an insurer subject to
4	this section from providing coverage that is greater or more
5	favorable to the policyholder and individuals covered under the
6	policy, contract, plan, or agreement.
7	(e) Coverage required under this section may be subject to
8	deductibles, copayments, coinsurance, or annual or maximum
9	payment limits that are consistent with deductibles, copayments,
10	coinsurance, and annual or maximum payment limits applicable to
11	other similar coverage under the policy, contract, plan, or
12	agreement.
13	(f) Any literature or correspondence an insurer sends to
14	policyholders, including annual information that is made
15	available to policyholders, shall include information concerning
16	the coverage required by this section; provided that the
17	information concerning the coverage required by this section
18	shall also be posted on the insurer's website.
19	(g) This section shall not apply to limited benefit health
20	insurance as provided in section 431:10A-607.



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1	(h) For the purposes of this section, "hearing aid" shall
2	have the same meaning as in section 451A-1 and includes
3	conventional and bone conduction hearing aids."
4	SECTION 3. Chapter 432, Hawaii Revised Statutes, is
5	amended by adding a new section to article 1 to be appropriately
6	designated and to read as follows:
7	" <u>§432:1-</u> Coverage of hearing aids. (a) Each individual
8	and group hospital or medical service plan contract issued or
9	renewed in the State on or after January 1, 2024, shall provide
10	coverage for the cost of hearing aids for the member and
11	individuals covered under the individual and group hospital or
12	medical service plan contract.
13	(b) Hearing aid purchases covered under this section shall
14	be subject to a minimum benefit of \$1,500 per hearing-impaired
15	ear every thirty-six months.
16	(c) The member and individuals covered under the plan
17	contract may choose a hearing aid that is priced higher than the
18	benefit payable under this section without financial or
19	contractual penalty to the provider of the hearing aid.
20	(d) This section shall not prohibit a mutual benefit
21	society subject to this section from providing coverage that is



1	greater or more favorable to the member and individuals covered
2	under the individual and group hospital or medical service plan
3	contract.
4	(e) Coverage required under this section may be subject to
5	deductibles, copayments, coinsurance, or annual or maximum
6	payment limits that are consistent with deductibles, copayments,
7	coinsurance, and annual or maximum payment limits applicable to
8	other similar coverage under the individual and group hospital
9	or medical service plan contract.
10	(f) Any literature or correspondence a mutual benefit
11	society sends to members, including annual information that is
12	made available to members, shall include information concerning
13	the coverage required by this section; provided that the
14	information concerning the coverage required by this section
15	shall also be posted on the mutual benefit society's website.
16	(g) For the purposes of this section, "hearing aid" shall
17	have the same meaning as in section 451A-1 and includes
18	conventional and bone conduction hearing aids."
19	SECTION 4. Section 432D-23, Hawaii Revised Statutes, is
20	amended to read as follows:



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# H.B. NO. 818

1	"§432D-23 Required provisions and benefits.
2	Notwithstanding any provision of law to the contrary, each
3	policy, contract, plan, or agreement issued in the State after
4	January 1, 1995, by health maintenance organizations pursuant to
5	this chapter, shall include benefits provided in sections
6	431:10-212, 431:10A-115, 431:10A-115.5, 431:10A-116, 431:10A-
7	116.2, 431:10A-116.5, 431:10A-116.6, 431:10A-119, 431:10A-120,
8	431:10A-121, 431:10A-122, 431:10A-125, 431:10A-126, 431:10A-132,
9	431:10A-133, <u>431:10A-134,</u> 431:10A-140, and [ <del>431:10A-134,</del> ]
10	<u>431:10A-</u> , and chapter 431M."
11	SECTION 5. The benefit to be provided by health
12	maintenance organizations corresponding to the benefit provided
13	under section 431:10A- , Hawaii Revised Statutes, as contained
14	in the amendment to section 432D-23, Hawaii Revised Statutes, in
15	section 4 of this Act, shall take effect for all policies,
16	contracts, plans, or agreements issued in the State on or after
17	January 1, 2024.
18	SECTION 6. Statutory material to be repealed is bracketed
19	and stricken. New statutory material is underscored.



1 SECTION 7. This Act shall take effect on January 1, 2024.

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INTRODUCED BY:

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JAN 2 3 2023



Report Title:

Deaf and Blind Task Force; Kupuna Caucus; Health Insurance Coverage; Hearing Aids

#### Description:

Requires health insurance policies and contracts issued on or after 01/01/2024 to provide coverage for the cost of hearing aids at a minimum of \$1,500 per hearing aid for each hearingimpaired ear every thirty-six months. Effective 01/01/2024.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

