
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
15 family may need to wear hearing aids, thereby multiplying the
16 financial burden of purchasing hearing aids.



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,
19 with thirteen of those states requiring replacement every three
20 years. Fifteen states have parameters on the amount of coverage



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

3 The legislature further finds that the auditor published
4 report No. 14-10 (2014), a sunrise study on the advisability of
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
11 complied with S.B. No. 309, had it been enacted. 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.

15 In response to the auditor's report, Senate Bill No. 2439,
16 S.D. 2, regular session of 2022 (S.B. No. 2439), proposed a
17 minimum coverage benefit of \$1,500 per hearing aid for each
18 hearing-impaired ear every thirty-six months. The legislature
19 passed Senate Concurrent Resolution No. 61, S.D. 1, H.D. 1
20 (2022), which requested the auditor to perform a social and



1 financial assessment of S.B. No. 2439, as required by section
2 23-51, Hawaii Revised Statutes.

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
15 the policy, contract, plan, or agreement.

16 (b) Hearing aid purchases covered under this section shall
17 be subject to a minimum benefit of \$1,500 per hearing-impaired
18 ear every thirty-six months.

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.



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 "§432:1- 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 \$ per hearing-
15 impaired 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:



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, 431:10A-134, 431:10A-140, and [~~431:10A-134~~]
10 431:10A-, 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.

20 SECTION 7. This Act shall take effect on December 31,
21 2050.



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 an unspecified amount per hearing aid for each hearing-impaired ear every thirty-six months. Effective 12/31/2050. (SD1)

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

