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Dear Chair of the House Committee on Healthcare:

As a resident of the state of Oregon, I am writing in support of HB 2393: Support Access to Sound for Children who are Deaf/Hard of Hearing. Our current hearing aid mandate is limited, making it difficult for some families of children with hearing loss to receive the necessary technology and services they need. This bill would update the mandate to include necessary components that current private insurance companies are not required to offer.

As a speech and language pathologist who works exclusively with children with hearing loss to help them develop their listening and spoken language skills, I cannot reiterate enough the importance of early diagnosis, early access to sound and quality intervention. When these components are in place, children with hearing loss are able to overcome the challenges of having a hearing loss. They may attend their neighborhood school alongside their hearing peers, require fewer special education services, and become productive members of our communities. Denials, long waits for evaluations, and high out-of-pocket expenses for necessary equipment should not prevent our children with hearing loss from achieving their full potential. Families and employers who pay for private insurance should be able to depend on their insurance to cover the services and technology necessary to help grow their baby's brains. Our families know time is precious and long waits, denials, high costs of equipment creates unnecessary stress for our families who want the best for their children.

This bill would update current legislation so that all hearing evaluations for children are covered, not just the initial evaluation. What good is identifying a hearing loss if we cannot track their hearing over time? It would require coverage for the fitting and verification procedures that are necessary to make sure a child's technology is providing the right benefit and it would cover the cost of the additional supplies and repairs that are needed for hearing aids to work such as earmolds and batteries. On average, a child hears 12,000 words a day. When a child's equipment does not work and a family has to wait or can't afford to fix it, their child is missing out on critical language needed to build their baby's brain. It is not enough to have hearing aids, the hearing aids need to be appropriate and be able to change if the child's hearing loss changes over time and they need to work. Additionally, there is a wealth of research to

support the use of additional equipment such as FM/DM systems to help our children succeed in everyday listening and learning environments like school or work. We know that noise and distance affects a child's ability to hear even with their hearing aids or cochlear implants. FM/DM technology allows our children with hearing loss to listen in the classroom, hear their coach on the soccer field, hear a parent caution them on the playground, or hear a friend at a birthday party. Many families cannot afford these systems even when they know it would help their child learn and grow.

Finally, this bill would cover cochlear implants when medically necessary. Let's join the ranks of Wisconsin, the only state to mandate coverage for both cochlear implants and hearing aids for children, so that when a child with hearing loss is born in the state of Oregon, our families can rest assured knowing their child is covered for whatever they might need.

Thank you for your time today and for considering this bill. Your support of children with hearing loss is greatly appreciated.

Sincerely,

Claire Leake, M.S. CCC-SLP