HB 4104 STAFF MEASURE SUMMARY

House Committee On Health Care

Prepared By: Oliver Droppers, LPRO Analyst

Meeting Dates: 2/12

WHAT THE MEASURE DOES:

Requires health insurers to reimburse costs of bilateral cochlear implants, if medically appropriate, including programming and reprogramming expenses, and repair costs. Defines hearing assistive technology system. Requires health insurers to reimburse for ear molds, replacement ear molds, hearing assistive technology system for an enrollee who is younger than 19 or 19 to 25 years of age and enrolled in a secondary school or accredited educational institution. Requires health insurers provide other specific hearing aid benefits. Requires health insurers to ensure members have access to pediatric audiologists, provide notice of coverage limits, and offer education materials describing appropriate technologies.

FISCAL: No fiscal impact.

REVENUE: No revenue impact.

ISSUES DISCUSSED:

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

Currently, hearing services and technology are limited in scope for families and children with hearing loss. Current health insurance coverage includes: initial and ongoing hearing evaluations, essential fitting and verification procedures, essential supplies, essential equipment, cochlear implants and replacement hearing aids when necessary.

In 2017, House Bill 2392 was introduced. The bill required a health benefit plan to provide: payment, coverage, or reimbursement for ear molds and replacement ear molds, one box per year of replacement batteries for each hearing aid necessary for diagnostic and treatment services, twice per year for enrollees younger than four years old, and once per year for enrollees 4 or older necessary for bone conduction sound processors, and hearing assistive technology systems for an enrollee who is younger than 19. The bill also would have required health plan benefits for hearing aids, bone conduction sound processors, and hearing assistive technology systems for an enrollee who is younger than 19 every 36 months, or for hearing aids more frequently if modifications to an existing hearing aid did not meet the needs of the enrollee.

HB 4104 requires health insurers provide access to pediatric audiologists and assistive listening devices to aid with hearing.