

HOUSE BILL 160

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HB 393/00 - ECM

2001 Regular Session
1r1245

By: **Delegates Hixson, Rosenberg, Morhaim, Finifter, and Nathan-Pulliam**
Introduced and read first time: January 18, 2001
Assigned to: Economic Matters

A BILL ENTITLED

1 AN ACT concerning

2 **Health Insurance - Hearing Aids and Related Treatment - Coverage for**
3 **Children**

4 FOR the purpose of requiring certain insurers, nonprofit health service plans, and
5 health maintenance organizations to provide coverage for hearing aids for
6 children under certain circumstances; requiring certain insurers, nonprofit
7 health service plans, and health maintenance organizations to provide coverage
8 for certain treatment relating to the child's hearing impairment and hearing
9 aids; requiring reimbursement to certain professionals at a certain rate;
10 requiring certain notice to insureds and enrollees at a certain time; defining a
11 certain term; providing for the application of this Act; and generally relating to
12 requiring health insurance coverage for hearing aids and related treatment for
13 children.

14 BY adding to
15 Article - Insurance
16 Section 15-837
17 Annotated Code of Maryland
18 (1997 Volume and 2000 Supplement)

19 BY adding to
20 Article - Health - General
21 Section 19-706(rr)
22 Annotated Code of Maryland
23 (2000 Replacement Volume)

24 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
25 MARYLAND, That the Laws of Maryland read as follows:

26 **Article - Insurance**

27 15-837.

28 (A) IN THIS SECTION, "HEARING AID" MEANS A DEVICE THAT:

1 (1) IS OF A DESIGN AND CIRCUITRY TO OPTIMIZE AUDIBILITY AND
2 LISTENING SKILLS IN THE ENVIRONMENT COMMONLY EXPERIENCED BY CHILDREN;
3 AND

4 (2) MEETS OR EXCEEDS THE FOLLOWING STANDARDS -- MULTIPLE
5 BAND, WIDE DYNAMIC RANGE COMPRESSION, AND DIRECT AUDIO INPUT
6 COMPATIBILITY.

7 (B) THIS SECTION APPLIES TO:

8 (1) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT PROVIDE
9 HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS ON AN
10 EXPENSE-INCURRED BASIS UNDER HEALTH INSURANCE POLICIES OR CONTRACTS
11 THAT ARE ISSUED OR DELIVERED IN THE STATE; AND

12 (2) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE HOSPITAL,
13 MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS UNDER CONTRACTS
14 THAT ARE ISSUED OR DELIVERED IN THE STATE.

15 (C) (1) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE COVERAGE
16 FOR HEARING AIDS FOR A CHILD WHO IS COVERED THROUGH AN INSURED OR
17 ENROLLED PARENT OF THE CHILD IF THE HEARING AID IS PRESCRIBED, FITTED, AND
18 DISPENSED BY A LICENSED AUDIOLOGIST.

19 (2) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE COVERAGE
20 FOR REPLACEMENT HEARING AIDS FOR THE CHILD AT LEAST ONCE EVERY 3 YEARS.

21 (D) (1) IN ADDITION TO PROVIDING COVERAGE FOR HEARING AIDS UNDER
22 SUBSECTION (C) OF THIS SECTION, AN ENTITY SUBJECT TO THIS SECTION SHALL
23 PROVIDE COVERAGE FOR TREATMENT, BY A LICENSED AUDIOLOGIST, THAT RELATES
24 TO THE CHILD'S HEARING IMPAIRMENT AND HEARING AIDS.

25 (2) THIS TREATMENT MAY INCLUDE:

26 (I) CONSULTATION THAT RELATES TO THE HEARING IMPAIRMENT
27 AND HEARING AIDS;

28 (II) FITTING OF THE HEARING AIDS;

29 (III) PROFESSIONAL VISITS TO MONITOR THE APPROPRIATE
30 FUNCTIONING OF THE HEARING AIDS; AND

31 (IV) ASSESSMENT OF THE CHILD'S HEARING IMPAIRMENT.

32 (E) THE HEARING AID INSTRUMENT, ASSESSMENT, PRESCRIBING, FITTING,
33 AND CONSUMABLE SUPPLIES SHALL BE REIMBURSED AT THE USUAL AND
34 CUSTOMARY CHARGES OF THE LICENSED PROFESSIONALS.

35 (F) THIS SECTION DOES NOT PROHIBIT AN ENTITY SUBJECT TO THIS SECTION
36 FROM PROVIDING COVERAGES THAT ARE GREATER THAN OR MORE FAVORABLE TO A

1 CHILD OF AN INSURED OR ENROLLEE THAN THE COVERAGE REQUIRED UNDER THIS
2 SECTION.

3 (G) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE NOTICE
4 ANNUALLY TO ITS INSUREDS AND ENROLLEES ABOUT THE COVERAGE REQUIRED
5 UNDER THIS SECTION.

6 **Article - Health - General**

7 19-706.

8 (RR) THE REQUIREMENTS OF § 15-837 OF THE INSURANCE ARTICLE APPLY TO
9 HEALTH MAINTENANCE ORGANIZATIONS.

10 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all
11 policies, contracts, and health benefit plans issued, delivered, or renewed in the State
12 on or after October 1, 2001. Any policy, contract, or health benefit plan in effect before
13 October 1, 2001, shall comply with the provisions of this Act no later than October 1,
14 2002.

15 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
16 October 1, 2001.