## **MAA Support Letter SB 397- final.pdf**Uploaded by: Dr. Alicia Spoor

#### Maryland Academy of Audiology



P.O. Box 710 Parkville, MD 21234

https://maaudiology.org/

February 14, 2023

Chair Brian Feldman
Senate Education, Energy and Environmental Committee
Miller Senate Office Building, 2 West Wing
11 Bladen Street
Annapolis, MD 21401

RE: SB397 -- Health Insurance - Hearing Aids for Adults - Coverage

Position: SUPPORT

Chair Feldman, Vice Chair Kagan, and Committee Members,

On behalf of the Maryland Academy of Audiology (MAA), I am writing to support SB397, Hearing Aids for Adult Coverage.

The National Institute of Health (NIH) reports that 15% of American adults over the age of 18 years reports some form of difficulties hearing. Additionally, more than 28 million Americans could benefit from the use of hearing aids, yet fewer than 30% of those over the age of 70 years have used them.<sup>1</sup>

The American Speech-Language-Hearing Association (ASHA) reports that 25 states have health benefit plans that pay for hearing aids for children, four of them also provide coverage for adults. Maryland Code § 15-838 providers \$1,400 per hearing aid every 36 months for minors, when prescribed, fit, and dispensed by a licensed audiologist. Additionally, individuals may choose to upgrade to a more expensive hearing aid and pay the difference.<sup>2</sup> Unfortunately, adults have been forgotten.

Medicare statutorily excludes coverage of hearing aids for adults. While some third party payers (e.g., Federal Employee Health Plan (FEHP) BlueCross BlueShield (BCBS) plans cover hearing aids for adults, the majority of plans do not. SB397 would provide some assistance to adults who seek treatment for their hearing loss.

The MAA represents more than 520 licensed Audiologists who practice in the state of Maryland, and the patients they serve. The MAA's goal is to enhance the ability of members to achieve career and practice objectives by fostering professional autonomy, providing quality continuing education, and increasing public and consumer awareness of hearing and balance disorders and the value of audiologic services. By virtue of education and licensure, Audiologists are the most qualified professionals to manage hearing and balance disorders. An Audiologist is a state-licensed professional who specializes in evaluating, diagnosing, treating, and managing patients with hearing loss, tinnitus, and balance (vestibular) disorders. Audiologists work in a

<sup>&</sup>lt;sup>1</sup> https://www.nidcd.nih.gov/health/statistics/quick-statistics-hearing

<sup>&</sup>lt;sup>2</sup> https://www.asha.org/advocacy/state/issues/ha\_reimbursement/

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variety of settings: private practice offices, hospitals, medical centers, out-patient clinics, public and private schools, universities (teaching and research), regulatory agencies, large-scale research centers, rehabilitation centers, skilled nursing facilities, assisted living facilities, the Veterans Administration, and the U.S. Military. Audiologists work closely with federal, state, and private third-party payers to optimize coverage of services provided for the evaluation and treatment of the patients in their care.

SB 397 provides access and affordability to adults to obtain hearing aid treatment for hearing loss, consistent with the coverage for children in Maryland. Thank you for your time and consideration and to Senator Gallion for sponsoring this legislation. I ask for a favorable committee report on SB 397.

Sincerely,

Leigh McCarthy, Au.D.

Leigh M'Carthy, Aud

Doctor of Audiology President, MAA Alicia D.D. Spoor, Au.D. Doctor of Audiology

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Legislative Chair, MAA

# **SB397.LOSWA.pdf**Uploaded by: Heather Forsyth Position: FAV

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STATE OF MARYLAND OFFICE OF THE ATTORNEY GENERAL

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February 14, 2023

**CONSUMER PROTECTION DIVISION** 

TO: The Honorable Melony Griffith, Chair

Senate Finance Committee

FROM: Office of the Attorney General, Health Education and Advocacy Unit SB0397 – Health Insurance Hearing Aids for Adults – Coverage: Support RE:

with Letter of Information

The Health Education and Advocacy Unit of the Attorney General's Office supports the intent of SB0397 which amends Md. Code Ann., Ins. §15-838 to expand the current requirement for private individual and group issuers in the state to provide hearing aid benefits for minor children up to \$1,400 for each hearing-impaired ear every 36 month, requiring the same coverage for adults. The bill cures a presumptively discriminatory benefit design (benefits based on age) in the non-grandfathered individual and small-group markets (see MIA bulletin 15-33) and offers the benefit to adults in the grandfathered and large group markets.

In considering SB 397, the General Assembly should be mindful of the FDA's recent approval of over-the-counter hearing aids. We recommend clarifying the definition of hearing aids in 15-838 and 838.1 to make clear whether the General Assembly intends the statute to apply to over-the-counter hearing aids as regulated by Title VII, Sec. 709 of the FDA Reauthorization Act of 2017, 21 USC 360j(q).

Over-the-counter (OTC) hearing aid is defined in 21 CFR 800.30 as an over-thean air-conduction hearing aid that does not require implantation or other surgical intervention, and is intended for use by a person age 18 or older to compensate for perceived mild to moderate hearing impairment. The device, through tools, tests, or software, allows the user to control the hearing aid and customize it to the user's hearing needs. The device may use wireless technology or may include tests for self-assessment of hearing loss. The device is available over the counter, without the supervision, prescription, or other order, involvement, or intervention of a licensed person, to

consumers through in-person transactions, by mail, or online, provided that the device satisfies the requirements in this section.

More information about the new over-the-counter hearing aid rules can be found at <a href="https://www.fda.gov/news-events/press-announcements/fda-finalizes-historic-rule-enabling-access-over-counter-hearing-aids-millions-americans">https://www.fda.gov/news-events/press-announcements/fda-finalizes-historic-rule-enabling-access-over-counter-hearing-aids-millions-americans</a> and

https://www.federalregister.gov/documents/2022/08/17/2022-17230/medical-devices-ear-nose-and-throat-devices-establishing-over-the-counter-hearing-aids.

Currently, § 15-838(b)(2) of the Insurance Article requires coverage of hearing aids "prescribed, fitted, and dispensed by a licensed audiologist." Section 15-838.1, which would be added by SB 397, does not appear to contain any similar requirement. It would be helpful for the General Assembly to repeat the limitations contained in the current statute or to expressly provide that over-the-counter hearing aids must be covered.

cc: Sponsor, Jason Gallion

## NASW Maryland - 2023 SB 397 FAV - Hearing Aids - S Uploaded by: Mary Beth DeMartino



# Senate Finance Committee Senate Bill 397 - Health Insurance Hearing Aids for Adults Coverage February 15, 2023 SUPPORT

On behalf of the National Association of Social Workers, Maryland Chapter (NASW-MD) Committee on Aging, we would like to voice our support for Senate Bill 397 - Health Insurance Hearing Aids for Adults Coverage. This bill will provide Marylanders with coverage for a portion of the cost of hearing aids.

As social workers for older adults, we are aware of the importance of hearing aids for seniors, in the context of physical and mental health. Hearing loss, if untreated, is related to an increased risk of falls and dementia, among other undesirable effects. Adults who have untreated hearing loss have much greater overall health care expenses (an average of 46% higher) than adults who do not have hearing loss.

In addition to these risks, untreated hearing loss often leads to social isolation. According to studies by Johns Hopkins University, the inability to hear conversations and other sounds often causes individuals to withdraw from others and become depressed. Every decibel drop in perception in people under 70 increases the odds of becoming severely lonely by 7%, one Dutch study showed.

Despite the serious effects of untreated hearing loss, only about 20% of older Americans with hearing loss wear hearing aids, according to an NPR report, leaving more than 23 million older adults with untreated problems. One obstacle has been the lack of coverage by Medicare and other insurers. The average price of two hearing aids in the United States is roughly \$4700, a price that is out of reach for many Marylanders.

Many Marylanders purchase hearing aids only after suffering years of hearing loss. Unfortunately, the longer the wait, the more likely that the brain does not adjust quickly enough to make the hearing aids effective. Financial assistance for hearing aids will help people avoid putting off getting their devices, which will also contribute to the overall effectiveness of the aids.

For these reasons, we ask that you give a favorable report on Senate Bill 397. We believe it is a vital piece of legislation that will help ensure that older adults have greater access to and ability to pay for hearing aids they need.

Respectfully,

Mary Beth DeMartino, LCSW Executive Director, NASW-MD

### **SB 397 Support MSHA February 2023.pdf** Uploaded by: Mary Casper



The Honorable Jason Gallion
Maryland General Assembly
420 James Senate Office Building
11 Bladen Street
Annapolis, MD 21401

RE: Hearing Aid Coverage; SB 397

#### Dear Senator Gallion:

The Maryland Speech-Language-Hearing Association (MSHA) represents speech-language pathologists and audiologists living and working in Maryland. Our clients are adults and children with communication, cognition, and swallowing disorders. Consumers of our services in Maryland can benefit from this effort to reduce untreated hearing loss.

MSHA supports SB 397, which specifies that hearing aid purchases are subject to a minimum benefit of \$1,400 per hearing-impaired ear every 36 months.

The National Institutes on Deafness and Other Communication Disorders (NICDC) cites statistics on hearing loss in the US. <a href="https://www.nidcd.nih.gov/health/statistics/quick-statistics-hearing#:~:text=One%20in%20eight%20people%20in,based%20on%20standard%20hearing%20examinations.ktext=About%202%20percent%20of%20adults,adults%20aged%2055%20to%2064.

- One in eight people in the United States (13 percent, or 30 million) aged 12 years or older has hearing loss in both ears, based on standard hearing examinations.
- About 2 percent of adults aged 45 to 54 have disabling hearing loss. The rate increases to 8.5 percent for adults aged 55 to 64. Nearly 25 percent of those aged 65 to 74 and 50 percent of those who are 75 and older have disabling hearing loss.

We appreciate the support for citizens of Maryland who experience hearing loss. If you have questions, you or your staff may contact MSHA at 301-304-7001, or via e-mail <a href="mailto:president@mdslha.org">president@mdslha.org</a>.

Sincerely,

Mary L. Casper, MA, CCC-SLP, ASHA Fellow, FNAP

MSHA President

Maryland District 15 resident

Mary Lee Capper

## ASHA Support Letter to MD SB 397 Hearing Aid Cover Uploaded by: Robert Augustine



February 13, 2023

The Honorable Jason Gallion Maryland General Assembly 420 James Senate Office Building 11 Bladen Street Annapolis, MD 21401

RE: Hearing Aid Coverage; SB 397

Dear Senator Gallion:

On behalf of the American Speech-Language-Hearing Association, I write to express support for SB 397, which requires insurers to provide coverage for hearing aids for adults.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 223,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Over 4,100 ASHA members reside in Maryland.<sup>1</sup>

ASHA supports SB 397, which also specifies that hearing aid purchases are subject to a minimum benefit of \$1,400 per hearing-impaired ear every 36 months.

SB 397 provides critical support for reducing instances of untreated hearing loss. Studies have linked untreated hearing loss to many social and economic factors, including depression, withdrawal from social situations, reduced alertness and increased risk to personal safety, impaired memory and ability to learn new tasks, reduced job performance and earning potential, and diminished psychological and overall health.<sup>2</sup> Approximately 15% of school-age children have some degree of hearing loss in one or both ears, with 5.4% (or about 1 in 20) having less severe or unilateral hearing loss.<sup>3</sup> Academic achievement and social functioning are significantly impacted by even a mild to moderate hearing loss, which may bring about difficulty in learning and building important interpersonal skills necessary to healthy self-esteem. In fact, over one-third of children with less severe or unilateral hearing loss are projected to fail at least one grade or will require additional educational support, which is estimated to cost the educational system over \$5.5 billion.<sup>4</sup>

Thank you for helping to ensure that the citizens of Maryland have access to hearing aids, which will help them participate in daily living activities and improve their ability to engage in social interaction. If you or your staff have any questions, please contact Susan Adams, ASHA's director, state legislative and regulatory affairs, at <a href="mailto:sadams@asha.org">sadams@asha.org</a>.

Sincerely,

Robert M. Augustine, PhD, CCC-SLP

2023 ASHA President

<sup>&</sup>lt;sup>1</sup> American Speech-Language-Hearing Association. (2022). *Maryland* [Quick Facts]. https://www.asha.org/siteassets/advocacy/state-fliers/maryland-state-flyer.pdf

<sup>&</sup>lt;sup>2</sup> Emmett, S. D., & Francis, H. W. (2015). The Socioeconomic Impact of Hearing Loss in U.S. Adults. *36*(3), 545–550. doi. 10.1097/MAO.0000000000000562.

<sup>&</sup>lt;sup>3</sup> Niskar, A.S., Kieszak, S.M., Holmes, A., Esteban, E, Rubin, C., & Brody, D.J. (1998). *Prevalence of Hearing Loss* Among Children 6 to 19 Years of Age: The Third National Health and Nutrition Examination Survey. JAMA, 279(14),1071–1075. doi:10.1001/jama.279.14.1071.

<sup>&</sup>lt;sup>4</sup> Tharpe, A. M. (2008). Unilateral and mild bilateral hearing loss in children: past and current perspectives. Trends in Amplification, 12(1), 7-15. https://doi.org/10.1177/1084713807304668.

# **SB 397 Favorable.pdf**Uploaded by: Senator Gallion Position: FAV

### Jason C. Gallion Legislative District 35 Harford and Cecil Counties

Education, Energy, and the Environment Committee



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### THE SENATE OF MARYLAND Annapolis, Maryland 21401

February 14th, 2023

The Honorable Melony Griffith, Chair

Senate Finance Committee

RE: SB 397 – Health Insurance – Hearing Aids for Adults – Coverage

**Position: Favorable** 

Dear Chairwoman Griffith and Senate Finance Committee Members:

SB 397 would require insurers, nonprofit health service plans, and health maintenance organizations that provide certain health insurance benefits under certain insurance policies or contracts to provide certain coverage for certain hearing aids for adults.

Currently, minors in the State of Maryland are eligible for a max benefit payable limit to \$1,400 per hearing aid for each hearing-impaired ear every 36 months. SB 397 simply expands the limit for adults to be in line with the benefit limit provided to minors.

SB 397 will help adults with hearing loss overcome the economic obstacles that often leave individuals untreated and without hearing aids. I respectfully ask the committee for a favorable report to assist our hearing-impaired adults gain greater access to hearing aids.

Sincerely,

Senator Jason Gallion

Jasa Dallin

### DOCS-#229785-v1-SB\_397\_Hearing\_Aids\_League\_Oppose\_

Uploaded by: Matthew Celentano

Position: UNF



15 School Street, Suite 200 Annapolis, Maryland 21401 410-269-1554

February 15th, 2023

The Honorable Melony Griffith Chair, Senate Finance Committee 3 East Miller Senate Office Building Annapolis, Maryland 21401

#### Senate Bill SB 397 - Health Insurance - Hearing Aids for Adults - Coverage

Dear Chairman Griffith,

The League of Life and Health Insurers of Maryland, Inc. respectfully **opposes** Senate Bill 397 – Health Insurance – Hearing Aids for Adults – Coverage and urges the committee to give the bill an unfavorable report.

Senate Bill 397 requires insurers, non-profit health service plans, and health maintenance organizations (collectively known as carriers) to provide coverage for all medically appropriate and necessary hearing aids for an adult who is covered under a policy and may limit the benefit payable to \$1,400 per hearing aid for each hearing-impaired ear every 36 months. The fact is, Maryland carriers are already providing coverage for hearing aids today.

Under the ACA, each state must pay, for every health plan purchased through the Maryland Health Benefit Exchange, the additional premium associated with any state-mandated benefit beyond the federally mandated essential health benefits. This means, should the Commissioner include the mandate in the State bench mark plan, the State would be required to defray the cost of the benefits to the extent it applies to the individual and small group market ACA plans.

The League opposes any additional mandated benefits to Maryland's law. Mandated benefits add cost to health insurance policies in our state and limit the ability of insurers to design benefits to best meet the needs of enrollees. Given the potential impact to health insurance costs in the State, Maryland law includes a statutory framework for review and evaluation of proposed mandated benefits by the Maryland Health Care Commission under § 15-1501 of the Insurance Article. The law requires the assessment of a proposed mandate for the social, medical and financial impact of the proposed mandate and equips the General Assembly with such information as the extent to which the service is generally utilized by a significant portion of the population; the extent to which the insurance coverage is already generally available; if

coverage is not generally available, the extent to which the lack of coverage results in individuals avoiding necessary health care treatments; if coverage is not generally available, the extent to which the lack of coverage results in unreasonable financial hardship; and the level of public demand for the service. Before adopting this or any other mandated health benefit, we urge the Committee first request an evaluation of the proposed benefit to facilitate an informed decision.

For these reasons, the League urges the committee to give Senate Bill 397 an unfavorable report.

Very truly yours,

Matthew Celentano Executive Director

cc: Members, Senate Finance Committee