

2015 -- H 5611

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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2015

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A N A C T

RELATING TO INSURANCE - HEARING AIDS

Introduced By: Representatives Jacquard, Handy, Nunes, and Naughton

Date Introduced: February 25, 2015

Referred To: House Corporations

It is enacted by the General Assembly as follows:

1 SECTION 1. Section 27-18-60 of the General Laws in Chapter 27-18 entitled "Accident  
2 and Sickness Insurance Policies" is hereby amended to read as follows:

3 **27-18-60. Hearing aids.** -- (a) (1) Every individual or group health insurance contract, or  
4 every individual or group hospital or medical expense insurance policy, plan, or group policy  
5 delivered, issued for delivery, or renewed in this state on or after ~~January 1, 2006~~ July 1, 2015,  
6 shall provide coverage for ~~one thousand five hundred dollars (\$1,500)~~ per one individual hearing  
7 aid, per ear, every three (3) years for anyone under the age of nineteen (19) years, and shall  
8 provide coverage for ~~seven hundred dollars (\$700)~~ one thousand five hundred dollars (\$1,500)  
9 per individual hearing aid, per ear, every three (3) years for anyone of the age of nineteen (19)  
10 years and older.

11 (2) Every group health insurance contract or group hospital or medical expense  
12 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state on  
13 or after ~~January 1, 2006~~ July 1, 2015, shall provide, as an optional rider, additional hearing aid  
14 coverage. Provided, the provisions of this paragraph shall not apply to contracts, plans, or group  
15 policies subject to the small employer health insurance availability act, chapter 50 of this title.

16 (b) For the purposes of this section:

17 (1) "Hearing aid" means any nonexperimental, wearable instrument or device designed  
18 for the ear and offered for the purpose of aiding or compensating for impaired human hearing, but  
19 excluding batteries, cords, and other assistive listening devices, including, but not limited to FM

1 systems.

2 (c) It shall remain within the sole discretion of the accident and sickness insurer as to the  
3 provider of hearing aids with which they choose to contract. Reimbursement shall be provided  
4 according to the respective principles and policies of the accident and sickness insurer. Nothing  
5 contained in this section precludes the accident and sickness insurer from conducting managed  
6 care, medical necessity, or utilization review.

7 (d) This section does not apply to insurance coverage providing benefits for: (1) hospital  
8 confinement indemnity; (2) disability income; (3) accident only; (4) long term care; (5) Medicare  
9 supplement; (6) limited benefit health; (7) specified diseased indemnity; (8) sickness of bodily  
10 injury or death by accident or both; (9) and other limited benefit policies.

11 SECTION 2. Section 27-19-51 of the General Laws in Chapter 27-19 entitled "Nonprofit  
12 Hospital Service Corporations" is hereby amended to read as follows:

13 **27-19-51. Hearing aids.** -- (a) (1) Every individual or group health insurance contract, or  
14 every individual or group hospital or medical expense insurance policy, plan, or group policy  
15 delivered, issued for delivery, or renewed in this state on or after ~~January 1, 2006~~ July 1, 2015,  
16 shall provide coverage for ~~one thousand five hundred dollars (\$1,500) per~~ one individual hearing  
17 aid, per ear, every three (3) years for anyone under the age of nineteen (19) years, and shall  
18 provide coverage for ~~seven hundred dollars (\$700)~~ one thousand five hundred dollars (\$1,500)  
19 per individual hearing aid per ear, every three (3) years for anyone of the age of nineteen (19)  
20 years and older.

21 (2) Every group health insurance contract or group hospital or medical expense  
22 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state on  
23 or after ~~January 1, 2006~~ July 1, 2015, shall provide, as an optional rider, additional hearing aid  
24 coverage. Provided, the provisions of this paragraph shall not apply to contracts, plans, or group  
25 policies subject to the small employer health insurance availability act, chapter 50 of this title.

26 (b) For the purposes of this section, "hearing aid" means any nonexperimental, wearable  
27 instrument or device designed for the ear and offered for the purpose of aiding or compensating  
28 for impaired human hearing, but excluding batteries, cords, and other assistive listening devices,  
29 including, but not limited to, FM systems.

30 (c) It shall remain within the sole discretion of the nonprofit hospital service corporation  
31 as to the provider of hearing aids with which they choose to contract. Reimbursement shall be  
32 provided according to the respective principles and policies of the nonprofit hospital service  
33 corporation. Nothing contained in this section precludes the nonprofit hospital service corporation  
34 from conducting managed care, medical necessity, or utilization review.

1 SECTION 3. Section 27-20-46 of the General Laws in Chapter 27-20 entitled "Nonprofit  
2 Medical Service Corporations" is hereby amended to read as follows:

3 **27-20-46. Hearing aids.** -- (a) (1) Every individual or group health insurance contract, or  
4 every individual or group hospital or medical expense insurance policy, plan, or group policy  
5 delivered, issued for delivery, or renewed in this state on or after ~~January 1, 2006~~ July 1, 2015,  
6 shall provide coverage for ~~one thousand five hundred dollars (\$1,500)~~ per one individual hearing  
7 aid, per ear, every three (3) years for anyone under the age of nineteen (19) years, and shall  
8 provide coverage for ~~seven hundred dollars (\$700)~~ one thousand five hundred dollars (\$1,500)  
9 per individual hearing aid per ear, every three (3) years for anyone of the age of nineteen (19)  
10 years and older.

11 (2) Every group health insurance contract or group hospital or medical expense  
12 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state on  
13 or after ~~January 1, 2006~~ July 1, 2015, shall provide, as an optional rider, additional hearing aid  
14 coverage. Provided, the provisions of this paragraph shall not apply to contracts, plans, or group  
15 policies subject to the small employer health insurance availability act, chapter 50 of this title.

16 (b) For the purposes of this section, "hearing aid" means any nonexperimental, wearable  
17 instrument or device designed for the ear and offered for the purpose of aiding or compensating  
18 for impaired human hearing, but excluding batteries, cords, and other assistive listening devices,  
19 including, but not limited to, FM systems.

20 (c) It shall remain within the sole discretion of the nonprofit medical service corporation  
21 as to the provider of hearing aids with which they choose to contract. Reimbursement shall be  
22 provided according to the respective principles and policies of the nonprofit medical service  
23 corporation. Nothing contained in this section precludes the nonprofit medical service corporation  
24 from conducting managed care, medical necessity, or utilization review.

25 SECTION 4. Section 27-41-63 of the General Laws in Chapter 27-41 entitled "Health  
26 Maintenance Organizations" is hereby amended to read as follows:

27 **27-41-63. Hearing aids.** -- (a) (1) Every individual or group health insurance contract, or  
28 every individual or group hospital or medical expense insurance policy, plan, or group policy  
29 delivered, issued for delivery, or renewed in this state on or after ~~January 1, 2006~~ July 1, 2015,  
30 shall provide coverage for ~~one thousand five hundred dollars (\$1,500)~~ per one individual hearing  
31 aid, per ear, every three (3) years for anyone under the age of nineteen (19) years, and shall  
32 provide coverage for ~~seven hundred dollars (\$700)~~ one thousand five hundred dollars (\$1,500)  
33 per individual hearing aid per ear, every three (3) years for anyone of the age of nineteen (19)  
34 years and older.

1           (2) Every group health insurance contract or group hospital or medical expense  
2 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state on  
3 or after ~~January 1, 2006~~ July 1, 2015, shall provide, as an optional rider, additional hearing aid  
4 coverage. Provided, the provisions of this paragraph shall not apply to contracts, plans, or group  
5 policies subject to the small employer health insurance availability act, chapter 50 of this title.

6           (b) For the purposes of this section, "hearing aid" means any nonexperimental, wearable  
7 instrument or device designed for the ear and offered for the purpose of aiding or compensating  
8 for impaired human hearing, but excluding batteries, cords, and other assistive listening devices,  
9 including, but not limited to FM systems.

10           (c) It shall remain within the sole discretion of the health maintenance organizations as  
11 to the provider of hearing aids with which they choose to contract. Reimbursement shall be  
12 provided according to the respective principles and policies of the health maintenance  
13 organizations. Nothing contained in this section precludes the health maintenance organizations  
14 from conducting managed care, medical necessity, or utilization review.

15           SECTION 5. This act shall take effect upon passage.

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EXPLANATION  
BY THE LEGISLATIVE COUNCIL  
OF  
A N A C T  
RELATING TO INSURANCE - HEARING AIDS

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1           This act would increase hearing aid insurance coverage for those under the age of  
2    nineteen (19) from one thousand five hundred dollars (\$1,500) to full cost, and for those age  
3    nineteen (19) and older from seven hundred dollars (\$700) to one thousand five hundred dollars  
4    (\$1,500).

5           This act would take effect upon passage.

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