

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2017

A N A C T

RELATING TO INSURANCE - HEARING AIDS

Introduced By: Senators Archambault, Satchell, Miller, Sosnowski, and Calkin

Date Introduced: March 29, 2017

Referred To: Senate Health & Human Services

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.**

4 (a) (1) Every individual or group health insurance contract, or every individual or group  
5 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,  
6 or renewed in this state on or after ~~January 1, 2006~~ July 1, 2017, shall provide coverage for ~~one~~  
7 ~~thousand five hundred dollars (\$1,500)~~ two thousand dollars (\$2,000) per individual hearing aid,  
8 per ear, every three (3) years ~~for anyone under the age of nineteen (19) years, and shall provide~~  
9 ~~coverage for seven hundred dollars (\$700) per individual hearing aid, per ear, every three (3)~~  
10 ~~years for anyone of the age of nineteen (19) years and older.~~

11 (2) Every group health insurance contract or group hospital or medical expense insurance  
12 policy, plan, or group policy delivered, issued for delivery, or renewed in this state on or after  
13 ~~January 1, 2006~~ July 1, 2017, shall provide, as an optional rider, additional hearing aid coverage.  
14 Provided, the provisions of this paragraph shall not apply to contracts, plans, or group policies  
15 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.**

14 (a) (1) Every individual or group health insurance contract, or every individual or group  
15 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,  
16 or renewed in this state on or after ~~January 1, 2006~~ July 1, 2017, shall provide coverage for ~~one~~  
17 ~~thousand five hundred dollars (\$1,500)~~ two thousand dollars (\$2,000) per individual hearing aid,  
18 per ear, every three (3) years ~~for anyone under the age of nineteen (19) years, and shall provide~~  
19 ~~coverage for seven hundred dollars (\$700) per individual hearing aid per ear, every three (3) years~~  
20 ~~for anyone of the age of nineteen (19) years and older.~~

21 (2) Every group health insurance contract or group hospital or medical expense insurance  
22 policy, plan, or group policy delivered, issued for delivery, or renewed in this state on or after  
23 ~~January 1, 2006~~ July 1, 2017, shall provide, as an optional rider, additional hearing aid coverage.  
24 Provided, the provisions of this paragraph shall not apply to contracts, plans, or group policies  
25 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.**

4 (a) (1) Every individual or group health insurance contract, or every individual or group  
5 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,  
6 or renewed in this state on or after ~~January 1, 2006~~ July 1, 2017, shall provide coverage for ~~one~~  
7 ~~thousand five hundred dollars (\$1,500)~~ two thousand dollars (\$2,000) per individual hearing aid,  
8 per ear, every three (3) years ~~for anyone under the age of nineteen (19) years, and shall provide~~  
9 ~~coverage for seven hundred dollars (\$700) per individual hearing aid per ear, every three (3) years~~  
10 ~~for anyone of the age of nineteen (19) years and older.~~

11 (2) Every group health insurance contract or group hospital or medical expense insurance  
12 policy, plan, or group policy delivered, issued for delivery, or renewed in this state on or after  
13 ~~January 1, 2006~~ July 1, 2017, shall provide, as an optional rider, additional hearing aid coverage.  
14 Provided, the provisions of this paragraph shall not apply to contracts, plans, or group policies  
15 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.**

28 (a) (1) Every individual or group health insurance contract, or every individual or group  
29 hospital or medical expense insurance policy, plan, or group policy delivered, issued for delivery,  
30 or renewed in this state on or after ~~January 1, 2006~~ July 1, 2017, shall provide coverage for ~~one~~  
31 ~~thousand five hundred dollars (\$1,500)~~ two thousand dollars (\$2,000) per individual hearing aid,  
32 per ear, every three (3) years ~~for anyone under the age of nineteen (19) years, and shall provide~~  
33 ~~coverage for seven hundred dollars (\$700) per individual hearing aid per ear, every three (3) years~~  
34 ~~for anyone of the age of nineteen (19) years and older.~~

1           (2) Every group health insurance contract or group hospital or medical expense insurance  
2 policy, plan, or group policy delivered, issued for delivery, or renewed in this state on or after  
3 ~~January 1, 2006~~ [July 1, 2017](#), shall provide, as an optional rider, additional hearing aid coverage.  
4 Provided, the provisions of this paragraph shall not apply to contracts, plans, or group policies  
5 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 to  
11 the provider of hearing aids with which they choose to contract. Reimbursement shall be provided  
12 according to the respective principles and policies of the health maintenance organizations.  
13 Nothing contained in this section precludes the health maintenance organizations from  
14 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 insurance coverage for hearing aids from one thousand five  
2 hundred dollars (\$1,500) to two thousand dollars (\$2,000), per year, every three years. In addition  
3 the amount of insurance coverage would no longer be based on the age of the recipient.

4           This act would take effect upon passage.

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