

SENATE NO. 589

AN ACT PROVIDING COVERAGE FOR HEARING AIDS

*Be it enacted by the Senate and House of Representatives in General Court assembled,
And by the authority of the same, as follows:*

1 SECTION 1. Chapter 32A of the General Laws is hereby amended by inserting after section 17G, as
2 inserted by section 1 of chapter 81 of the acts of 2000, the following section:-

3 Section 17H. (a) For purposes of this section, the following words shall have the following meanings:

4 "Hard of hearing", hard of hearing as defined in section 191 of chapter 6 of the General Laws.

5 "Hearing instrument specialist", a hearing instrument specialist as defined in section 196 of chapter
6 112 of the General Laws.

7 "Hearing aid", a hearing aid as defined in section 196 of chapter 112 of the General Laws.

8 SECTION 2. Section 19 of said chapter 152, as so appearing, is hereby amended

9 "Out-of-network provider", a health care provider that does not have a contract with the insurer.

10 (b) The commission shall provide to any active or retired employee of the commonwealth who is
11 insured under the group insurance commission coverage for two hearing aids every three years, unless
12 an employee voluntarily obtains such hearing aids from an out-of-network health care provider, if any.

13 Hearing aid coverage pursuant to this section shall not exceed an amount of \$2,000 for each three-year
14 period.

15 (c) Nothing in this section shall prohibit the commission from offering greater coverage for hearing
16 aids than that required by this section.

17 SECTION 2. Chapter 175 of the General Laws is hereby amended by inserting after section 47U, as
18 inserted by section 8 of chapter 141 of the acts of 2000, the following section:-

19 Section 47V. (a) For purposes of this section, the following words shall have the following meanings:

20 "Hard of hearing", hard of hearing as defined in section 191 of chapter 6 of the General Laws.

21 "Hearing instrument specialist", a hearing instrument specialist as defined in section 196 of chapter
22 112 of the General Laws.

23 "Hearing aid", a hearing aid as defined in section 196 of chapter 112 of the General Laws.

24 "Out-of-network provider", a health provider that does not have a contract with the insurer.

25 (b) Any policy of accident and sickness insurance as described in section 108 which provides hospital
26 expense and surgical expense insurance and which is delivered, issued or subsequently renewed by
27 agreement between the insurer and policyholder in the commonwealth; any blanket or general policy
28 of insurance described in subdivision (A), (C) or (D) of section 110 which provides hospital expense
29 and surgical expense insurance and which is delivered, issued or subsequently renewed by agreement
30 between the insurer and the policyholder, within or without the commonwealth; or any employees'
31 health and welfare fund which provides hospital expense and surgical expense benefits and which is

32 delivered, issued or renewed to any person or group of persons in the commonwealth, shall provide
33 coverage for two hearing aids every three years, unless a policyholder voluntarily obtains such hearing
34 aids from an out-of-network health care provider, if any. Hearing aid coverage pursuant to this section
35 shall not exceed an amount of \$2,000 for each three-year period.

36 (c) Nothing in this section shall prohibit an insurer from offering greater coverage for hearing aids than
37 that required by this section.

38 SECTION 3. The third paragraph of section 110E of said chapter 175 is hereby amended by inserting
39 after clause (16) the following clause:-

40 (17) An insurer's written statement purporting to offer insurance coverage for durable medical
41 equipment without specifically stating any exclusions, including but not limited to exclusions for
42 hearing aids, shall be considered misleading for purposes of this section.

43 SECTION 4. Chapter 176A of the General Laws is hereby amended by inserting after section 8U, as
44 inserted by section 14 of chapter 141 of the acts of 2000, the following section:-

45 Section 8V. (a) For purposes of this section, the following words shall have the following meanings:

46 "Hard of hearing", hard of hearing as defined in section 191 of chapter 6 of the General Laws.

47 "Hearing instrument specialist", a hearing instrument specialist as defined in section 196 of chapter
48 112 of the General Laws.

49 "Hearing aid", a hearing aid as defined in section 196 of chapter 112 of the General Laws.

50 "Out-of-network provider", a health provider that does not have a contract with the insurer.

51 (b) Any contracts, except contracts providing supplemental coverage to Medicare or other
52 governmental programs, between a subscriber and the corporation under an individual or group
53 hospital service plan which is delivered, issued or renewed in the commonwealth shall provide as
54 benefits to all individual subscribers or members within the commonwealth and to all group members
55 having a principal place of employment within the commonwealth, coverage for expenses incurred for
56 two hearing aids every three years, unless a subscriber voluntarily obtains such hearing aids from an
57 out-of-network health care provider, if any. Hearing aid coverage pursuant to this section shall not
58 exceed an amount of \$2,000 for each three-year period.

59 (c) Nothing in this section shall prohibit a corporation from offering greater coverage for hearing aids
60 than that required by this section.

61 SECTION 5. Chapter 176B of the General Laws is hereby amended by inserting after section 4U, as
62 inserted by section 15 of chapter 141 of the acts of 2000, the following section:-

63 Section 4V. (a) For purposes of this section, the following words shall have the following meanings:

64 "Hard of hearing", hard of hearing as defined in section 191 of chapter 6 of the General Laws.

65 "Hearing instrument specialist", a hearing instrument specialist as defined in section 196 of chapter
66 112 of the General Laws.

67 "Hearing aid", a hearing aid as defined in section 196 of chapter 112 of the General Laws.

68 "Out-of-network provider", a health provider that does not have a contract with the insurer.

69 (b) Any subscription certificate under an individual or group medical service agreement, except
70 certificates which provide supplemental coverage to Medicare or other governmental programs, that
71 shall be delivered, issued or renewed within the commonwealth shall provide as benefits to all
72 individual subscribers or members within the commonwealth and to all group members having a
73 principal place of employment in the commonwealth, coverage for expenses incurred for two hearing
74 aids every three years, unless a subscriber or member voluntarily obtains such hearing aids from an
75 out-of-network health care provider, if any. Hearing aid coverage pursuant to this section shall not
76 exceed an amount of \$2,000 for each three-year period.

77 (c) Nothing in this section shall prohibit a medical service corporation from offering greater coverage
78 for hearing aids than that required by this section.

79 SECTION 6. Chapter 176G of the General Laws is hereby amended by inserting after section 4M, as
80 inserted by section 10 of chapter 80 of the acts of 2000, the following section:-

81 Section 4N. (a) For purposes of this section, the following words shall have the following meanings:

82 "Hard of hearing", hard of hearing as defined in section 191 of chapter 6 of the General Laws.

83 "Hearing instrument specialist", a hearing instrument specialist as defined in section 196 of chapter
84 112 of the General Laws.

85 "Hearing aid", a hearing aid as defined in section 196 of chapter 112 of the General Laws.

86 "Out-of-network provider", a health provider that does not have a contract with the insurer.

87 (b) An individual or group health maintenance contract shall provide coverage and benefits for
88 expenses incurred for two hearing aids every three years, unless a member voluntarily obtains such
89 hearing aids from an out-of-network health care provider, if any. Hearing aid coverage pursuant to this
90 section shall not exceed an amount of \$2,000 for each three-year period.

91 (c) Nothing in this section shall prohibit a health maintenance organization from offering greater
92 coverage for hearing aids than that required by this section.

93 SECTION 7. Pursuant to sections 191 to 199, inclusive, of chapter 6 of the General Laws, the
94 Massachusetts Commission for the Deaf and Hard of Hearing shall consult with the Commissioner of
95 Insurance to ensure that sections 1 to 6 of this act are enforced.