

HOUSE BILL 910

C3

1lr2906

By: **Delegate Lisanti**

Introduced and read first time: February 2, 2021

Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 **Health Insurance – Hearing Aids for Adults – Coverage**

3 FOR the purpose of requiring insurers, nonprofit health service plans, and health
4 maintenance organizations that provide certain health insurance benefits under
5 certain insurance policies or contracts to provide coverage for certain hearing aids
6 for adults covered under the policies or contracts; authorizing insurers, nonprofit
7 health service plans, and health maintenance organizations to limit the benefit
8 payable under this Act in a certain manner; authorizing an insured or enrollee to
9 choose a certain hearing aid and pay a certain amount for the hearing aid without
10 financial or contractual penalty to the provider of the hearing aid; providing for the
11 application of this Act; providing for a delayed effective date; defining a certain term;
12 making a conforming change; and generally relating to health insurance and
13 coverage for hearing aids.

14 BY repealing and reenacting, with amendments,
15 Article – Insurance
16 Section 15–838
17 Annotated Code of Maryland
18 (2017 Replacement Volume and 2020 Supplement)

19 BY adding to
20 Article – Insurance
21 Section 15–838.1
22 Annotated Code of Maryland
23 (2017 Replacement Volume and 2020 Supplement)

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

26 **Article – Insurance**

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 15-838.

2 (a) This section applies to:

3 (1) insurers and nonprofit health service plans that provide hospital,
4 medical, or surgical benefits to individuals or groups on an expense-incurred basis under
5 health insurance policies or contracts that are issued or delivered in the State; and

6 (2) health maintenance organizations that provide hospital, medical, or
7 surgical benefits to individuals or groups under contracts that are issued or delivered in
8 the State.

9 (b) (1) In this subsection, “hearing aid” means a device that:

10 (i) is of a design and circuitry to optimize audibility and listening
11 skills in the environment commonly experienced by children; and

12 (ii) is nondisposable.

13 (2) An entity subject to this section shall provide coverage for hearing aids
14 for a minor child who is covered under a policy or contract if the hearing aids are prescribed,
15 fitted, and dispensed by a licensed audiologist.

16 (3) (i) An entity subject to this section may limit the benefit payable
17 under paragraph (2) of this subsection to \$1,400 per hearing aid for each hearing-impaired
18 ear every 36 months.

19 (ii) An insured or enrolled individual may choose a hearing aid that
20 is priced higher than the benefit payable under this subsection and may pay the difference
21 between the price of the hearing aid and the benefit payable under this subsection, without
22 financial or contractual penalty to the provider of the hearing aid.

23 (c) This section does not prohibit an entity subject to this section from providing
24 coverage that is greater or more favorable to an insured or enrolled individual than the
25 coverage required under this section.

26 [(d) If an entity subject to this section provides coverage for hearing aids to an
27 insured or enrolled individual who is not a minor child, and if the policy or contract of the
28 insured or enrolled individual has a dollar limit on the hearing aid benefit, the entity shall
29 allow the individual to:

30 (1) choose a hearing aid that is priced higher than the benefit payable
31 under the policy or contract; and

32 (2) pay the difference between the price of the hearing aid and the dollar
33 limit on the hearing aid benefit.]

1 15-838.1.

2 (A) IN THIS SECTION, “HEARING AID” MEANS A DEVICE THAT:

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

6 (2) IS NONDISPOSABLE.

7 (B) THIS SECTION APPLIES TO:

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

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

15 (C) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE COVERAGE FOR
16 ALL MEDICALLY APPROPRIATE AND NECESSARY HEARING AIDS FOR AN ADULT WHO
17 IS COVERED UNDER A POLICY OR CONTRACT.

18 (D) (1) AN ENTITY SUBJECT TO THIS SECTION MAY LIMIT THE BENEFIT
19 PAYABLE UNDER SUBSECTION (C) OF THIS SECTION TO \$750 PER HEARING AID FOR
20 EACH HEARING-IMPAIRED EAR EVERY 36 MONTHS.

21 (2) AN INSURED OR ENROLLEE MAY CHOOSE A HEARING AID THAT IS
22 PRICED HIGHER THAN THE BENEFIT PAYABLE UNDER THIS SUBSECTION AND MAY
23 PAY THE DIFFERENCE BETWEEN THE PRICE OF THE HEARING AID AND THE BENEFIT
24 PAYABLE UNDER THIS SUBSECTION, WITHOUT FINANCIAL OR CONTRACTUAL
25 PENALTY TO THE PROVIDER OF THE HEARING AID.

26 (E) THIS SECTION DOES NOT PROHIBIT AN ENTITY SUBJECT TO THIS
27 SECTION FROM PROVIDING COVERAGE THAT IS GREATER OR MORE FAVORABLE TO
28 AN INSURED OR ENROLLEE THAN THE COVERAGE REQUIRED UNDER THIS SECTION.

29 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all
30 policies, contracts, and health benefit plans issued, delivered, or renewed in the State on or
31 after January 1, 2022.

32 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect

1 January 1, 2022.