



Ohio Legislative Service Commission

Bill Analysis

Nick Thomas

S.B. 257

130th General Assembly
(As Introduced)

Sens. Brown, Schiavoni, Kearney, Smith, Turner

BILL SUMMARY

- Requires health insuring corporations, sickness and accident insurers, and multiple employer welfare arrangements to offer coverage for hearing aids as a rider to basic health coverage.
- Specifies that the benefit provided is to be at least \$1,500 per ear over three years.

CONTENT AND OPERATION

The bill requires health insurers to offer coverage for hearing aids. The bill's requirements apply to health insuring corporations, sickness and accident insurers, and multiple employer welfare arrangements. It does not apply to public employee benefit plans.¹ Also, note that the bill specifies that it does not apply to sickness and accident insurers that do not offer coverage for basic health care services.²

The bill requires that, for all health insurance plans offering basic coverage, health insurers must also offer coverage for hearing aids as a rider to such plans. The benefit must include coverage of the purchase of related services and supplies, including the initial assessment, fitting, adjustments, and auditory training that is provided. Such coverage is subject to all of the following:

- The benefit provided is not to be less than \$1,500 per ear over the course of three years;
- The coverage is to be provided to persons of all ages;

¹ R.C. 1739.05(B), 1751.68(B), and 3923.84(B).

² R.C. 3923.84(D).

- The benefit is not to be subject to any deductible or copayment requirements, but may be subject to coinsurance requirements.³

The bill defines "hearing aid" as any wearable instrument or device designed or offered for the purpose of aiding or compensating for impaired human hearing, including all attachments, accessories, and parts thereof, excluding batteries and cords, that is distributed by a licensed hearing aid dealer. The definition of hearing aid does not include cochlear implants, which are surgically implanted.⁴

Exemption from review by the Superintendent of Insurance

The bill's requirements hearing aid riders might be considered mandated health benefits. Under R.C. 3901.71, no mandated health benefits legislation enacted by the General Assembly may be applied to any policy, contract, plan, or other arrangement providing sickness and accident or other health benefits until the Superintendent determines, pursuant to a hearing conducted in accordance with the Administrative Procedure Act,⁵ that the provision can be applied fully and equally in all respects to (1) employee benefit plans subject to regulation by the federal Employee Retirement Income Security Act of 1974 (ERISA) and (2) employee benefit plans established or modified by the state or any political subdivision of the state, or by any agency or instrumentality of the state or any political subdivision of the state. The bill includes provisions that exempt its requirements from this restriction.⁶

HISTORY

ACTION	DATE
Introduced	12-12-13

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³ R.C. 1751.68(C) and 3923.84(C).

⁴ R.C. 1751.68(A) and 3923.84(A).

⁵ R.C. Chapter 119.

⁶ R.C. 1751.68(B) and 3923.84(B).

