



Representative C. Allison Russo
The Ohio House of Representatives

Chairman Merrin, Vice Chair Manning, Ranking Member Boyd, and members of the House Health Committee: thank you for the opportunity to testify today regarding HB 243 with my colleague and joint sponsor, Representative Weinstein.

For young children, hearing is an essential part of their development and learning, especially since their young brains are undergoing rapid development. Clear, consistent sound input allows them to develop normal brain pathways for hearing, speech, language, and other cognitive functions. It also gives them the opportunity to form stronger bonds with their families and society. Hearing is such an important sense that children with hearing loss and no intervention noticeably lag behind their peers with full hearing in vocabulary capacity, language skills, academics, and social skills and behaviors. Not only do they lag behind, but research shows that children with hearing loss and late or no intervention cost the state **more than \$400,000 per child** in special education costs by the time they graduate high school.



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As children age, this gap between hearing and deaf children continues to widen, affecting college entry and job prospects, which is why early stage detection and intervention of hearing loss in children is so critical. In fact, research demonstrates that the detection and intervention of hearing loss prior to six months of age results in significantly better outcomes than intervention after six months of age. These outcomes can be measured not only in terms of a child's speech, language, social, behavioral, and cognitive abilities, but also in terms of the economic costs to society and the state.

Although Ohio requires newborn hearing screenings, allowing us to detect hearing loss in children before six months, Ohio does not take the next step to make sure that the appropriate intervention is also covered. Hearing aids are costly devices, requiring individuals to pay on average \$3500 - \$4500 for a pair of hearing aids. (A hearing aid that allows children to distinguish between the sound of an air vent and the sound of their teacher talking costs about \$5200.) When added up with other costs such as appointments with an audiologist, hearing aid fittings, repairs, etc., the



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prices quickly skyrocket. Because hearing aids are considered to be “elective” or “cosmetic” devices, private health insurance plans often do not provide any kind of coverage, forcing parents to pay fully out-of-pocket. However, the huge effect hearing has on a child’s development and life makes it clear that hearing aids are anything but cosmetic. They are a medical necessity, just like eyeglasses.

This bill, House Bill 243, seeks to remedy this situation and provide some relief for our hardworking Ohio families. It would require private health insurance plans to cover hearing aids for children under the age of 21. Each hearing device would be covered for up to \$2500 every 48 months. Insurance plans would also be required to cover the costs of other services associated with hearing aids, such as screenings, fittings, and repairs.

While this would not provide full coverage for hearing aids in all circumstances, it would be an important and critical step forward. So far,



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23 other states provide hearing aid coverage for children. Our bill, which is modeled after similar laws in Kentucky and Georgia, would simply put us in line with other states. This is smart policy that makes critical early stage intervention more affordable for middle class families, and it ultimately saves the state and taxpayers considerable costs further down the line. We owe it to Ohio's children to give them the tools that they need to develop into their fullest potential.

Chairman Merrin, Vice Chair Manning, Ranking Member Boyd, and members of the House Health Committee, thank you for your time and the opportunity to testify regarding House Bill 243. My colleague, Representative Weinstein, and I are happy to answer any additional questions you might have. Thank you.