

House Bill 198- Proponent Testimony

Ohio House Health Committee: Carrie Spangler, Au.D., CCC-A

Consumer (Individual with Hearing Loss) and Lead Educational Audiologist at Summit Educational Service Center

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Chairman Lipps, Vice-Chairman Holmes, Ranking Member Russo and members of the House Health Committee: Thank you for the opportunity to be here today and speak in support of HB 198 (Madeline's Law) which would require health benefit plans to provide coverage for hearing aids and related services for Ohioans under 22 years of age.

My name is Dr. Carrie Spangler and I am an educational audiologist for the Summit Educational Service Center serving children with auditory needs ages 3 to graduation. I have been practicing as an audiologist for 22 years. I also have over 45 years of personal experience living with hearing loss as I was diagnosed at the age of 4 and fitted with hearing aids. Most recently my hearing declined and as of November 2019, I have a cochlear implant for my left ear and a hearing aid for my right ear.

Hearing is a critical sense that provides the foundation for listening, spoken language, reading, writing and academics in our hearing world. Hearing loss distorts and smears the acoustic signal negatively impacting access to listening, spoken language, reading, writing, and academics.

Statistically, 95% of children with hearing loss are born to parents with normal hearing.ⁱ Many families do want their child to communicate in their family's native language, whether English, Spanish, or any other verbal language. In order for a child with hearing loss to communicate with their families using spoken language, hearing aids are a necessity.

In Ohio, many families experience significant financial hardship in order to give their child a fundamental need, hearing. The consequences of not providing the necessary hearing aid benefit are costly and detrimental to Ohio. Without hearing aids, children with HL will experience delayed speech and language acquisition, social-emotional or behavioral problems, and lags in academic achievement.ⁱⁱ With appropriate intervention and technology, children with hearing loss can be mainstreamed in their local elementary and secondary educational school settings.ⁱⁱⁱ When children are not identified and do not receive necessary amplification and intervention, special education for 1 child with hearing loss costs schools an additional \$420,000 over education and has a lifetime cost of approximately \$1 million dollars per individual.^{iv}

Ohio's General Assembly has supported early hearing screening with the 2002 law that requires hearing screening for newborns in Ohio. If we identify babies with hearing loss, why would we deny a child the foundational right to hear? A child's ability to hear should not be determined on family income. It should be viewed as a fundamental right to the children of Ohio, especially when we have a mandated hearing screening program. To diagnose deafness and then fail to provide hearing intervention is morally and ethically unacceptable. Health insurances are not required to cover hearing aids, yet Medicaid and BCMH do. Ohio's families experience significant financial hardship of approximately \$5600 out of pocket expense for 2 hearing aids in

order to give their child a fundamental need; hearing. Hearing aids also need to be replaced every 3-5 years and follow up for replacement parts, repairs and audiology visits are also not typically covered.

All children, regardless of family's income, should have the right to hear, grow, and reach their fullest potential. As an audiologist and as an individual who has lived my entire life with hearing loss, I depend on my hearing aid and cochlear implant in order to be a productive, contributing Ohioan. Each morning I wake up to a quiet world. Without hearing devices, I would not be able to communicate with others and be gainfully employed in this hearing world.

Hearing aids are not cosmetic as many insurance companies say. Insurance companies also claim they are not medically necessary, and I would argue that they are. Hearing aids are necessary for safety (hearing cars, sirens, people calling my name), daily functioning, communication, and employment in the hearing world. I understand firsthand the importance of hearing aids and Ohio's children deserve to have the basic right to hear. On behalf of Ohio's children with hearing loss, I ask Ohio's lawmakers to support HB 198.

Thank you, and I would be happy to answer any questions that you may have.

Sincerely,

Carrie Spangler, Au.D. CCC-A

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ⁱ Mitchell RE, Karchmer MA. [Chasing the mythical ten percent: Parental hearing status of deaf and hard of hearing students in the United States.\(link is external\) \(PDF\)](#) Sign Language Studies. 2004;4(2):138-163

ⁱⁱ Bubbico L, Di Castelbianco FB, Tangucci M, Salvinelli F. Early hearing detection and intervention in children with prelingual deafness, effects on language development. *Minerva Pediatr.* 2007 Aug;59(4):307-13. PMID: 17947837.

ⁱⁱⁱ Ching TYC, Dillon H, Button L, et al. Age at Intervention for Permanent Hearing Loss and 5-Year Language Outcomes. *Pediatrics.* 2017;140(3):e20164274. doi:10.1542/peds.2016-4274

^{iv} Johnson, J. L., Mauk, G. W., Takekawa, K. M., Simon, P. R., Sia, C. C., & Blackwell, P. M. (1993). Implementing a statewide system of services for infants and toddlers with hearing disabilities. *Seminars in Hearing*, 14, 105-118;