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December 13, 2022

Representative Scott Lipps Chair, Ohio House Health Committee 77 South High Street, 13<sup>th</sup> Floor Columbus, OH 43215

Dear Chairman Lipps:

I am writing on behalf of our nearly 21,000 small business members in opposition to House Bill 198. This legislation will mandate coverage of hearing aids and other prescribed services, for individuals 21 and under, who are covered under fully-insured health, public employee benefit, and Medicaid plans. We are concerned the provisions of this bill could result in increased premiums for our members who purchase health insurance for themselves and their employees in the fully-insured marketplace.

The cost of health insurance is a major issue for small businesses. The NFIB Research Foundation's last Problems & Priorities has shown the cost of health insurance to be the top concern amongst members, a place this issue has held since 1986! Many of our members struggle to even offer this benefit. According to the Kaiser Family Foundation(KFF), 47 (down from 56 in 2021) percent of companies with 3-49 workers offer health insurance. Contrast that with the employers with 50 or more employees where 93 (down from 94 in 2021) percent are offering this desired benefit.¹ Similar to the data from KFF, a recent survey of our Ohio membership shows 31 percent of our members indicate cost as the reason why they do not offer health insurance. Additionally, for those that are providing, more than one-third indicate it is a "very-costly benefit." Further, over half of respondents indicate an increase in premium between 6-20 percent when they last renewed their policy(s).

As such, we are always concerned with legislation that may lead to additional costs, particularly when those bills impact, for the private sector, only the fully-insured market, leaving self-insured (typically larger companies) immune from the cost impacts. This inherent inequity saddles our members and others that purchase fully-insured products with the associated costs. The Legislative Service Commission fiscal note on House Bill 198 indicates a likely cost increase to public employee benefit plans, local government plans, and school district plans. The same will no doubt hold true for our members as well. Of import to note, the public employee benefit plans, local government plans, and school district plans are at least in part funded with taxpayer dollars. The same cannot be said for our members.

There currently exists a program through the Ohio Department of Health, the Ohio Hearing Aid Assistance Program (OHAAP)<sup>2</sup>. OHAAP provides assistance to families with children, birth to twenty-

<sup>&</sup>lt;sup>1</sup> https://www.kff.org/report-section/ehbs-2022-section-2-health-benefits-offer-rates/

<sup>&</sup>lt;sup>2</sup> https://odh.ohio.gov/know-our-programs/hearingaid-assistance/ohaap

one years of age, with hearing impairments to purchase hearing aids, earmolds, assistive listening devices, external cochlear implant processor replacements, and/or hearing aid batteries. OHAAP is available to families with incomes at or below 400 percent of the federal poverty level, which is \$111,000 this year<sup>3</sup>. There is a max cost sharing of \$20 based upon income level. Why not look to this existing program as a path to addressing the concerns of proponents of House Bill 198? If more funds are necessary to fulfill the demand, the legislature can surely appropriate additional money.

We urge this committee to thoroughly evaluate any legislation that puts upward pressure on health insurance premiums. These policies ultimately result in difficult decisions by small business owners with respect to providing healthcare coverage. Please do not move forward on legislation that will increase health insurance costs, particularly when there is an existing program that can address the mandates contemplated in House Bill 198. Thank you for your consideration.

Sincerely.

Christopher J. Ferruso
Ohio Legislative Director

 $<sup>^{3}\</sup> https://jfs.ohio.gov/owd/WorkforceProf/Docs/FPGLLSIL.stm$