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H.B. 152
135th General Assembly

Bill Analysis

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Version: As Passed by the House

Primary Sponsors: Reps. Weinstein and B. Young

Logan Briggs, Attorney

SUMMARY

- Requires health plan issuers to cover hearing aids and related services for persons 21 years of age and younger.
- Names the bill “Madeline’s Law.”

DETAILED ANALYSIS

Hearing aid coverage

The bill requires health benefit plans to provide coverage for the cost of both of the following:

- One hearing aid (including attachments, accessories, and parts other than batteries and cords) per hearing-impaired ear up to \$2,500 every 48 months for a covered person 21 years old or younger; and
- All related services prescribed by an otolaryngologist or recommended by a licensed audiologist and dispensed by a licensed audiologist, licensed hearing aid dealer, or otolaryngologist.¹

A covered person may choose a hearing aid at any price, but the bill does not require the health benefit plan to cover any costs beyond \$2,500 per hearing aid, in any 48-month period. Moreover, if a covered person chooses a more expensive hearing aid, the health plan issuer is prohibited from imposing any financial or contractual penalty on the covered person or hearing aid provider.²

¹ R.C. 3902.63(B).

² R.C. 3902.63(C).

The bill allows a health plan issuer to deny a claim for a hearing aid if, less than 48 months prior to the claim, the covered person received the coverage identified above from any other health benefit plan.³

A health benefit plan is required to cover only hearing aids that are medically appropriate. Health benefit plans may not exclude coverage for any hearing aid that is medically appropriate. The State Speech and Hearing Professionals Board is required to adopt professional standards concerning hearing aids as needed to evaluate a health benefit plan's compliance with the bill's requirements.⁴

Exemption from review by the Superintendent of Insurance

The bill might be considered a mandated health benefit. Under R.C. 3901.71, if the General Assembly enacts a provision for mandated health benefits, that provision cannot be applied to any health benefit plan until the Superintendent of Insurance determines that the provision can be applied fully and equally in all respects to employee benefit plans subject to regulation by the federal "Employee Retirement Income Security Act of 1974" (ERISA),⁵ and to employee benefit plans established or modified by the state or any of its political subdivisions. ERISA appears to preempt any state regulation of such plans.⁶ The bill contains provisions that exempt its requirements from this restriction.⁷

Name of the bill

The bill names the law "Madeline's Law" after an Ohio girl whose parents brought this topic to the attention of legislators after learning that insurance frequently does not cover the cost of hearing aids for children, and may consider them to be cosmetic.⁸

Definitions

"**Hearing aid**" means 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, except batteries and cords, that is dispensed by a licensed audiologist, a licensed hearing aid dealer or fitter, or an otolaryngologist.

"**Otolaryngologist**" means a licensed physician who practices otolaryngology.

³ R.C. 3902.63(D).

⁴ R.C. 3902.63(E).

⁵ 29 U.S.C. 1001, not in the bill.

⁶ 29 U.S.C. 1144, not in the bill.

⁷ R.C. 3902.63(B).

⁸ Section 2; *see also* [Madeline's Law would require Ohio insurance plans to cover children's hearing aids](#), which may be accessed by conducting a keyword search for "Madeline's law" on Cleveland.com's website: cleveland.com.

“**Related services**” means services necessary to assess, select, and appropriately adjust or fit a hearing aid to ensure optimal performance.

“**Health plan issuer**” includes sickness and accident insurers, health insuring corporations, fraternal benefit societies, self-funded multiple employer welfare arrangements, nonfederal government health plans, and under certain circumstances third party administrators.⁹

HISTORY

Action	Date
Introduced	04-12-23
Reported, H. Insurance	06-13-23
Passed House (86-8)	06-21-23

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⁹ R.C. 3922.01, not in the bill.