

**As Reported by the House Insurance Committee**

**135th General Assembly**

**Regular Session**

**2023-2024**

**H. B. No. 152**

**Representatives Weinstein, Young, B.**

**Cosponsors: Representatives Abdullahi, Baker, Blackshear, Brennan, Brent, Brewer, Brown, Dean, Forhan, Galonski, Grim, Humphrey, Isaacsohn, Jarrells, Lightbody, Liston, McNally, Miller, A., Miller, J., Miranda, Mohamed, Rogers, Somani, Sweeney, Upchurch, Young, T.**

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**A BILL**

To enact section 3902.63 of the Revised Code to  
require health plan issuers to cover hearing  
aids and related services for persons twenty-one  
years of age and younger and to name this act  
Madeline's Law.

**BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:**

**Section 1.** That section 3902.63 of the Revised Code be  
enacted to read as follows:

**Sec. 3902.63.** (A) As used in this section:

(1) "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.

(2) "Otolaryngologist" means a licensed physician who

practices otolaryngology. 16

(3) "Related services" means services necessary to assess, 17  
select, and appropriately adjust or fit a hearing aid to ensure 18  
optimal performance. 19

(B) On and after the effective date of this section, and 20  
notwithstanding section 3901.71 of the Revised Code, a health 21  
benefit plan shall provide coverage for the full cost of both of 22  
the following: 23

(1) One hearing aid per hearing-impaired ear up to two 24  
thousand five hundred dollars every forty-eight months for a 25  
covered person twenty-one years of age or younger who is 26  
verified as being deaf or hearing impaired by a licensed 27  
audiologist or by an otolaryngologist or other licensed 28  
physician; 29

(2) All related services prescribed by an otolaryngologist 30  
or recommended by a licensed audiologist and dispensed by a 31  
licensed audiologist, a licensed hearing aid dealer or fitter, 32  
or an otolaryngologist. 33

(C) A covered person may choose a higher priced hearing 34  
aid and may pay the difference in cost above the two-thousand- 35  
five-hundred-dollar required coverage required by this section 36  
without any financial or contractual penalty to the covered 37  
person or to the provider of the hearing aid. 38

(D) A health plan issuer is not required to pay a claim 39  
for the cost of a hearing aid as required by division (B) of 40  
this section if, less than forty-eight months prior to the date 41  
of the claim, the covered person received the coverage required 42  
under division (B) of this section from any health benefit plan. 43

(E) (1) A health benefit plan shall only provide coverage 44

for hearing aids that are considered medically appropriate to 45  
meet the needs of the covered person, according to professional 46  
standards established by the state speech and hearing 47  
professionals board. 48

(2) A health benefit plan shall not exclude coverage for 49  
any hearing aid that would be considered medically appropriate 50  
to meet the needs of the covered person, according to 51  
professional standards established by the state speech and 52  
hearing professionals board. 53

(3) The state speech and hearing professionals board shall 54  
adopt professional standards concerning hearing aids as needed 55  
to evaluate the compliance of a health benefit plan with this 56  
section. 57

**Section 2.** This act shall be known as Madeline's Law. 58