HOUSE DOCKET, NO. FILED ON: 1/13/2009

**HOUSE . . . . . . . . . . . . . . No.**

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The Commonwealth of Massachusetts

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PRESENTED BY:

**Sean Garballey**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General
 Court assembled:*

 The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying bill:

An Act to provide coverage for hearing aids for children.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

PETITION OF:

|  |  |
| --- | --- |
| Name: | District/Address: |
| Sean Garballey | 23rd Middlesex |

The Commonwealth of Massachusetts

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**In the Year Two Thousand and Nine**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

An Act to provide coverage for hearing aids for children.

 *Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

 Section 23 of chapter 32A of the General Laws, as appearing in the 2000 Official Edition, is hereby amended by adding the following paragraph:-

The commission shall provide to any minor 18 years of age or younger who is the child of an active or retired employee of the commonwealth and who is insured under the group insurance commission coverage for the full cost of one (1) hearing aid per hearing impaired ear up to one thousand six hundred dollars ($1,600) for each hearing aid, as defined under section 196 of chapter 112, every three years upon a written statement from such minor’s treating physician that the hearing aids are medically necessary. The insured may choose a higher priced hearing aid and may pay the difference in cost above the one thousand six hundred dollar ($1,600) limit as provided in this section without any financial or contractual penalty to the insured or to the provider of the hearing aid. Nothing in this section shall prohibit the commission from offering greater coverage for hearing aids than that required by this section.  This section shall also require coverage for such hearing aids under any non-group policy.

**SECTION 2.** Section 47U of chapter 175 of the General Laws, as so appearing, is hereby amended by adding the following paragraph:-

Any policy of accident and sickness insurance as described in section 108 which provides hospital expense and surgical expense insurance and which is delivered, issued or subsequently renewed by agreement between the insurer and policyholder in the commonwealth; any blanket or general policy of insurance described in subdivision (A), (C) or (D) of section 110 which provides hospital expense and surgical expense insurance and which is delivered, issued or subsequently renewed by agreement between the insurer and the policyholder, within or without the commonwealth; or any employees’ health and welfare fund which provides hospital expense and surgical expense benefits and which is delivered, issued or renewed to any person or group of persons in the commonwealth, shall provide coverage for any minor child 18 years of age or younger, who is insured under the policy or fund, for the full cost of one (1) hearing aid per hearing impaired ear up to one thousand six hundred dollars ($1,600) for each hearing aid, as defined under section 196 of chapter 112, every three years upon a written statement from such minor’s treating physician that the hearing aids are medically necessary. The insured may choose a higher priced hearing aid and may pay the difference in cost above the one thousand six hundred dollar ($1,600) limit as provided in this section without any financial or contractual penalty to the insured or to the provider of the hearing aid. Nothing in this section shall prohibit an insurer from offering greater coverage for hearing aids than that required by this section.  This section shall also require coverage for such hearing aids under any non-group policy.

**SECTION 3.**Section 8U of chapter 176A of the General Laws, as so appearing, is hereby amended by adding the following paragraph:-

Any contracts, except contracts providing supplemental coverage to Medicare or other governmental programs, between a subscriber and the corporation under an individual or group hospital service plan which is delivered, issued or renewed in the commonwealth shall provide as benefits to all individual subscribers or members within the commonwealth and to all group members having a principal place of employment within the commonwealth, coverage for their minor children 18 years of age or younger, who are insured under such contracts or plans, for expenses incurred for at least two hearing aids, as defined under section 196 of chapter 112, every three years upon a written statement from such minors treating physician that the hearing aids are medically necessary.  Nothing in this section shall prohibit a corporation from offering greater coverage for hearing aids than that required by this section.  This section shall also require coverage for such hearing aids under any nongroup policy.

**SECTION 4.**  Section 4U of chapter 176B of the General Laws, as so appearing, is hereby amended by adding the following paragraph:-

Any subscription certificate under an individual or group medical service agreement, except certificates which provide supplemental coverage to Medicare or other governmental programs, that shall be delivered, issued or renewed within the commonwealth shall provide as benefits to all individual subscribers or members within the commonwealth and to all group members having a principal place of employment in the commonwealth, coverage for their minor children 18 years of age or younger, who are insured under such certificates or agreements, for expenses incurred for at least two hearing aids, as defined under Section 196 of chapter 112, every three years upon a written statement from such minors treating physician that the hearing aids are medically necessary.  Nothing in this section shall prohibit a medical service corporation from offering greater coverage for hearing aids than that required by this section.  This section shall also require coverage for such hearing aids under any nongroup policy.

**SECTION 5.** The first section 4N of chapter 176G of the General Laws, as so appearing, is hereby amended by adding the following paragraph:-

An individual or group health maintenance contract, except contracts providing supplemental coverage to Medicare or other governmental programs, shall provide coverage and benefits for minors 18 years of age or younger, who are insured under such contracts, for expenses incurred for at least two hearing aids, as defined under section 196 of chapter 112, every three years upon a written statement from such minors treating physician that the hearing aids are medically necessary.  Nothing in this section shall prohibit a health maintenance organization from offering greater coverage for hearing aids than that required by this section.  This section shall also require coverage for such hearing aids under any nongroup policy.