

ASSEMBLY, No. 536

STATE OF NEW JERSEY 213th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2008 SESSION

Sponsored by:

Assemblyman RONALD S. DANCER

District 30 (Burlington, Mercer, Monmouth and Ocean)

Assemblyman JOSEPH R. MALONE, III

District 30 (Burlington, Mercer, Monmouth and Ocean)

SYNOPSIS

Requires health insurers to provide coverage for hearing aids.

CURRENT VERSION OF TEXT

Introduced Pending Technical Review by Legislative Counsel



1 AN ACT concerning health insurance coverage for hearing aids and
2 supplementing Titles 17 and 26 of the Revised Statutes and Title
3 17B of the New Jersey Statutes.

4
5 **BE IT ENACTED** by the Senate and General Assembly of the State
6 of New Jersey:

7
8 1. A hospital service corporation contract that provides hospital
9 or medical expense benefits and is delivered, issued, executed or
10 renewed in this State or approved for issuance or renewal in this
11 State by the Commissioner of Banking and Insurance, on or after
12 the effective date of this act, shall provide coverage for medically
13 necessary expenses incurred in the purchase of a hearing aid
14 pursuant to this section.

15 a. The coverage shall include the purchase of one analog or
16 digital hearing aid for each ear at least every 48 months, as
17 prescribed or recommended by a State licensed audiologist or a
18 hearing aid dispenser licensed pursuant to P.L.1973, c.19 (C.45:9A-
19 1 et seq.).

20 b. The total cost sharing responsibility of the covered person for
21 the hearing aid, including any copayments or deductibles, shall not
22 exceed 15% of the cost of the hearing aid.

23 c. This section shall apply to those hospital service corporation
24 contracts in which the hospital service corporation has reserved the
25 right to change the premium.

26
27 2. A medical service corporation contract that provides hospital
28 or medical expense benefits and is delivered, issued, executed or
29 renewed in this State or approved for issuance or renewal in this
30 State by the Commissioner of Banking and Insurance, on or after
31 the effective date of this act, shall provide coverage for medically
32 necessary expenses incurred in the purchase of a hearing aid
33 pursuant to this section.

34 a. The coverage shall include the purchase of one analog or
35 digital hearing aid for each ear at least every 48 months, as
36 prescribed or recommended by a State licensed audiologist or a
37 hearing aid dispenser licensed pursuant to P.L.1973, c.19 (C.45:9A-
38 1 et seq.).

39 b. The total cost sharing responsibility of the covered person for
40 the hearing aid, including any copayments or deductibles, shall not
41 exceed 15% of the cost of the hearing aid.

42 c. This section shall apply to those medical service corporation
43 contracts in which the medical service corporation has reserved the
44 right to change the premium.

45
46 3. A health service corporation contract that provides hospital or
47 medical expense benefits and is delivered, issued, executed or
48 renewed in this State or approved for issuance or renewal in this

1 State by the Commissioner of Banking and Insurance, on or after
2 the effective date of this act, shall provide coverage for medically
3 necessary expenses incurred in the purchase of a hearing aid
4 pursuant to this section.

5 a. The coverage shall include the purchase of one analog or
6 digital hearing aid for each ear at least every 48 months, as
7 prescribed or recommended by a State licensed audiologist or a
8 hearing aid dispenser licensed pursuant to P.L.1973, c.19 (C.45:9A-
9 1 et seq.).

10 b. The total cost sharing responsibility of the covered person for
11 the hearing aid, including any copayments or deductibles, shall not
12 exceed 15% of the cost of the hearing aid.

13 c. This section shall apply to those health service corporation
14 contracts in which the health service corporation has reserved the
15 right to change the premium.

16

17 4. A group health insurance policy that provides hospital or
18 medical expense benefits and is delivered, issued, executed or
19 renewed in this State or approved for issuance or renewal in this
20 State by the Commissioner of Banking and Insurance, on or after
21 the effective date of this act, shall provide coverage for medically
22 necessary expenses incurred in the purchase of a hearing aid
23 pursuant to this section.

24 a. The coverage shall include the purchase of one analog or
25 digital hearing aid for each ear at least every 48 months, as
26 prescribed or recommended by a State licensed audiologist or a
27 hearing aid dispenser licensed pursuant to P.L.1973, c.19 (C.45:9A-
28 1 et seq.).

29 b. The total cost sharing responsibility of the covered person for
30 the hearing aid, including any copayments or deductibles, shall not
31 exceed 15% of the cost of the hearing aid.

32 c. This section shall apply to those insurance policies in which
33 the insurer has reserved the right to change the premium.

34

35 5. An individual health insurance policy that provides hospital
36 or medical expense benefits and is delivered, issued, executed or
37 renewed in this State or approved for issuance or renewal in this
38 State by the Commissioner of Banking and Insurance, on or after
39 the effective date of this act' shall provide coverage for medically
40 necessary expenses incurred in the purchase of a hearing aid
41 pursuant to this section.

42 a. The coverage shall include the purchase of one analog or
43 digital hearing aid for each ear at least every 48 months, as
44 prescribed or recommended by a State licensed audiologist or a
45 hearing aid dispenser licensed pursuant to P.L.1973, c.19 (C.45:9A-
46 1 et seq.).

47 b. The total cost sharing responsibility of the covered person for
48 the hearing aid, including any copayments or deductibles, shall not

- 1 exceed 15% of the cost of the hearing aid.
- 2 c. This section shall apply to those insurance policies in which
3 the insurer has reserved the right to change the premium.
4
- 5 6. A certificate of authority to establish and operate a health
6 maintenance organization in this State shall not be issued or
7 continued by the Commissioner of Health and Senior Services on or
8 after the effective date of this act unless the health maintenance
9 organization provides health care services coverage for the purchase
10 of a hearing aid pursuant to this section.
- 11 a. The coverage shall include the purchase of one analog or
12 digital hearing aid for each ear at least every 48 months, as
13 prescribed or recommended by a State licensed audiologist or a
14 hearing aid dispenser licensed pursuant to P.L.1973, c.19 (C.45:9A-
15 1 et seq.).
- 16 b. The total cost sharing responsibility of the enrollee for the
17 hearing aid, including any copayments or deductibles, shall not
18 exceed 15% of the cost of the hearing aid.
- 19 c. The provisions of this section shall apply to those contracts
20 for health care services by health maintenance organizations under
21 which the right to change the schedule of charges for enrollee
22 coverage is reserved.
23
- 24 7. An individual health benefits plan that provides hospital or
25 medical expense benefits and is delivered, issued, executed or
26 renewed in this State pursuant to P.L.1992, c.161 (C.17B:27A-2 et
27 seq.) or approved for issuance or renewal in this State, on or after
28 the effective date of this act, shall provide coverage for medically
29 necessary expenses incurred in the purchase of a hearing aid
30 pursuant to this section.
- 31 a. The coverage shall include the purchase of one analog or
32 digital hearing aid for each ear at least every 48 months, as
33 prescribed or recommended by a State licensed audiologist or a
34 hearing aid dispenser licensed pursuant to P.L.1973, c.19 (C.45:9A-
35 1 et seq.).
- 36 b. The total cost sharing responsibility of the covered person for
37 the hearing aid, including any copayments or deductibles, shall not
38 exceed 15% of the cost of the hearing aid.
- 39 c. This section shall apply to those health benefits plans in
40 which the carrier has reserved the right to change the premium.
41
- 42 8. A small employer health benefits plan that provides hospital
43 or medical expense benefits and is delivered, issued, executed or
44 renewed in this State pursuant to P.L.1992, c.162 (C.17B:27A-17 et
45 seq.) or approved for issuance or renewal in this State, on or after
46 the effective date of this act, shall provide coverage for medically
47 necessary expenses incurred in the purchase of a hearing aid
48 pursuant to this section.

1 a. The coverage shall include the purchase of one analog or
2 digital hearing aid for each ear at least every 48 months, as
3 prescribed or recommended by a State licensed audiologist or a
4 hearing aid dispenser licensed pursuant to P.L.1973, c.19 (C.45:9A-
5 1 et seq.).

6 b. The total cost sharing responsibility of the covered person for
7 the hearing aid, including any copayments or deductibles, shall not
8 exceed 15% of the cost of the hearing aid.

9 c. This section shall apply to those health benefits plans in
10 which the carrier has reserved the right to change the premium.

11

12 9. This act shall take effect on the 30th day after enactment.

13

14

15

STATEMENT

16

17 This bill would require hospital, medical and health service
18 corporations, individual, small employer and larger group insurers
19 and health maintenance organizations to provide coverage for
20 medically necessary expenses incurred in the purchase of a hearing
21 aid.

22 The coverage shall include the purchase of one analog or digital
23 hearing aid for each ear at least every 48 months, as prescribed or
24 recommended by a State licensed audiologist or a hearing aid
25 dispenser licensed pursuant to N.J.S.A.45:9A-1 et seq. The total
26 cost sharing responsibility of the covered person for the hearing aid,
27 including any copayments or deductibles, shall not exceed 15% of
28 the cost of the hearing aid.