

STATE OF NEW YORK

2432

2017-2018 Regular Sessions

IN ASSEMBLY

January 20, 2017

Introduced by M. of A. PAULIN -- read once and referred to the Committee on Insurance

AN ACT to amend the insurance law, in relation to requiring certain group health insurance policies to provide coverage for hearing aids

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

Section 1. Section 3221 of the insurance law is amended by adding a new subsection (t) to read as follows:

(t) (1) Every group health insurance policy offered in the large group market that is issued, amended, or renewed in this state shall provide coverage for medically necessary hearing aids purchased from a hearing aid dispenser registered under article thirty-seven-A of the general business law or an audiologist licensed under article one hundred fifty-nine of the education law in the following manner:

(A) For an insured person sixteen years of age or older, such insured person shall be entitled to reimbursement of up to three thousand dollars every thirty-six months for expenses related to the purchase of up to two hearing aids.

(B) For an insured person who is less than sixteen years of age, such insured person shall be entitled to reimbursement of up to two thousand dollars every twenty-four months for expenses related to the purchase of up to two hearing aids, when it is medically demonstrated that:

(i) the hearing of the insured person under the age of sixteen has changed significantly within a two-year period; and

(ii) the existing hearing aid will no longer correct the hearing of the insured person under the age of sixteen; such person shall be entitled to reimbursement for additional hearing aid expenses.

(2)(A) For the purposes of this subsection, "hearing aid" shall mean any wearable instrument or device designed for hearing and any parts, attachments or accessories but excluding batteries and cords or accesso-

EXPLANATION--Matter in italics (underscored) is new; matter in brackets [-] is old law to be omitted.

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1 ries thereto. A registered hearing aid dispenser or licensed audiologist
2 shall determine the type of device needed to correct the hearing loss.

3 (B) For the purposes of this section, services for recasing, reshell-
4 ing and acquiring new molds shall be included as part of the policies.

5 (3) The insured person may choose a hearing aid exceeding the amount
6 of coverage required by this section and shall be liable for the differ-
7 ence in cost. Reimbursement shall be provided according to the respec-
8 tive principles and policies of the health insurance plan and may
9 include such policy provisions as deductibles, coinsurance, allowable
10 charge limitations, and coordination of benefits.

11 § 2. Section 4305 of the insurance law is amended by adding a new
12 subsection (n) to read as follows:

13 (n) (1) A group contract issued, amended, or renewed pursuant to this
14 section offered in the large group market shall provide coverage for
15 medically necessary hearing aids purchased from a hearing aid dispenser
16 registered under article thirty-seven-A of the general business law or
17 an audiologist licensed under article one hundred fifty-nine of the
18 education law in the following manner:

19 (A) For an insured person sixteen years of age or older, such insured
20 person shall be entitled to reimbursement of up to three thousand
21 dollars every thirty-six months for expenses related to the purchase of
22 up to two hearing aids.

23 (B) For an insured person who is less than sixteen years of age, such
24 insured person shall be entitled to reimbursement of up to two thousand
25 dollars every twenty-four months for expenses related to the purchase of
26 up to two hearing aids, when it is medically demonstrated that:

27 (i) the hearing of the insured person under the age of sixteen has
28 changed significantly within a two-year period; and

29 (ii) the existing hearing aid will no longer correct the hearing of
30 the insured person under the age of sixteen; such person shall be enti-
31 tled to reimbursement for additional hearing aid expenses.

32 (2)(A) For the purposes of this subsection, "hearing aid" shall mean
33 any wearable instrument or device designed for hearing and any parts,
34 attachments or accessories but excluding batteries and cords or accesso-
35 ries thereto. A registered hearing aid dispenser or licensed audiologist
36 shall determine the type of device needed to correct the hearing loss.

37 (B) For the purposes of this section, services for recasing, reshell-
38 ing and acquiring new molds shall be included as part of the policies.

39 (3) The insured person may choose a hearing aid exceeding the amount
40 of coverage required by this section and shall be liable for the differ-
41 ence in cost. Reimbursement shall be provided according to the respec-
42 tive principles and policies of the health insurance plan and may
43 include such policy provisions as deductibles, coinsurance, allowable
44 charge limitations, and coordination of benefits.

45 § 3. This act shall take effect on the ninetieth day after it shall
46 have become a law and shall apply according to its terms to all poli-
47 cies, contracts and certificates issued, renewed, modified, altered or
48 amended on or after such date.