

Executive Summary: Health Impact Review of HB 1047

Requiring coverage for hearing instruments for children and adolescents (2021 Legislative Session)

Evidence indicates that HB 1047 would likely result in fully-funded health plans including coverage for hearing instruments and associated care for individuals 18 years of age or younger, which could increase the affordability of hearing instruments, increase the number of youth accessing hearing instruments and technology, improve health outcomes, and reduce health inequities for youth who are deaf or hard of hearing.

BILL INFORMATION

Sponsors: Wicks, Orwall, Leavitt, Simmons, Kloba, Ortiz-Self, Bateman, Wylie, Gregerson, Goodman, Bronoske, Valdez, Callan, Riccelli, Frame, Rule, Davis, Berquist, Pollet

Summary of Bill:

- Requires a health carrier offering a health plan issued or renewed on or after January 1, 2022 to include coverage for hearing instruments, including bone conduction hearing devices, for individuals 18 years of age or younger.
- Specifies that coverage must include the hearing instrument, initial assessment, fitting, adjustment, auditory training, and ear molds as necessary to maintain optimal fit.
- Sets a maximum benefit amount (not subject to deductible) of \$2,500.00 per ear with hearing loss¹ every 36 months.

HEALTH IMPACT REVIEW

Summary of Findings:

This Health Impact Review found the following evidence for provisions in HB 1047:

- **Informed assumption** that requiring health carriers to include coverage for hearing instruments and associated care for individuals 18 years of age or younger would result in fully-funded health plans including this coverage. This is based on information from Washington State Office of the Insurance Commissioner (OIC), Health Benefit Exchange (HBE), and health carriers in Washington State.
- **Informed assumption** that fully-funded health plans including coverage for hearing instruments and associated care for individuals 18 years of age or younger would increase the affordability of hearing instruments and associated care for families. This is based on information from key informant interviews.
- **Informed assumption** that increasing the affordability of hearing instruments and associated care would increase the number of youth who are deaf or hard of hearing accessing hearing instruments and technology. This is based on information from key informant interviews.

¹ This review recognizes that the phrase “hearing loss” may not be the preferred language of community. This review uses this phrase for consistency and/or accuracy with bill provisions, organizational titles, and direct quotations from published literature, as applicable.

For more information:
Phone: (360) 628-6823
Email: hir@sboh.wa.gov
sboh.wa.gov/hir

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- **Strong** evidence that increasing the number of youth who are deaf or hard of hearing accessing hearing instruments and technology will improve health outcomes for these individuals.
- **Strong** evidence that improving health outcomes for youth who are deaf or hard of hearing would decrease health inequities for these individuals. It is unclear how HB 1047 would impact inequities by insurance status and geography.

FULL REVIEW

For review methods, logic model, strength-of-evidence analyses, and citations of empirical evidence refer to the full Health Impact Review at

<https://sboh.wa.gov/Portals/7/Doc/HealthImpactReviews/HIR-2021-02-HB1047..pdf>

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