

By: Representative Massengill

To: Insurance

HOUSE BILL NO. 3

1 AN ACT TO REQUIRE THAT CERTAIN INSURANCE POLICIES AND
2 CONTRACTS SHALL PROVIDE COVERAGE FOR HEARING AIDS AND SERVICES FOR
3 DEAF AND HEARING IMPAIRED CHILDREN UNDER 21 YEARS OF AGE; AND FOR
4 RELATED PURPOSES.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

6 **SECTION 1.** (1) All individual and group health insurance
7 policies providing coverage on an expense-incurred basis,
8 individual and group service or indemnity type contracts issued by
9 a nonprofit corporation, individual and group service contracts
10 issued by a health maintenance organization, all self-insured
11 group arrangements to the extent not preempted by federal law and
12 all managed health care delivery entities of any type or
13 description that are delivered, issued for delivery, continued or
14 renewed on or after July 1, 2018, and providing coverage to any
15 resident of this state shall provide benefits or coverage for
16 hearing aids and services for deaf and hearing impaired for
17 dependent children under twenty-one (21) years of age who are
18 covered under a policy or contract of insurance. Coverage or
19 benefits shall be provided when the prescribing physician has



20 issued a written order stating that the dependent child is deaf or
21 hearing impaired and that the treatment is medically cleared.
22 Coverage or benefits shall be provided for all the hearing
23 examinations and tests that are administered. The coverage
24 required under this section shall meet the requirements set forth
25 in subsection (2) of this section.

26 (2) A dependent child under twenty-one (21) years of age
27 shall not be required to pay an additional deductible or
28 coinsurance for testing that is greater than an annual deductible
29 or coinsurance established for similar benefits. If the program
30 or contract does not cover a similar benefit, a deductible or
31 coinsurance may not be set at a level that materially diminishes
32 the value of the deaf or hearing impaired treatment required.
33 Reimbursement to health care providers for deaf or hearing
34 impaired treatment provided under this section shall be equal to
35 or greater than reimbursement to health care providers provided
36 under the Medicaid program.

37 (3) A group health plan or health insurance issuer is not
38 required under this section to provide for a referral to a
39 nonparticipating health care provider unless the plan or issuer
40 does not have an appropriate health care provider that is
41 available and accessible to administer the screening exam and that
42 is a participating health care provider with respect to that
43 treatment.



44 (4) If a plan or issuer refers a dependent child under
45 twenty-one (21) years of age to a nonparticipating health care
46 provider in accordance with this section, services provided
47 according to the approved screening exam and resulting treatment,
48 if any, shall be provided at no additional cost to the dependent
49 child beyond what the dependent child would otherwise pay for
50 services received by a participating health care provider.

51 **SECTION 2.** This act shall take effect and be in force from
52 and after July 1, 2018.

