



## 2022 South Dakota Legislature

# Senate Bill 89

Introduced by: **Senator Tobin**

1 **An Act to require insurers to provide coverage for hearing aids and related services**  
 2 **to persons under age nineteen.**

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF SOUTH DAKOTA:

4 **Section 1. That § 58-17-63 be AMENDED:**

5 **58-17-63.** For the purposes of section 3 of this Act, §§ 58-17-64, ~~58-17-84.1~~, -58-  
 6 18-63, 58-38-36, and 58-40-33, a health benefit plan is any hospital or medical policy or  
 7 certificate, hospital or medical service plan, or health maintenance organization subscriber  
 8 contract. The term does not include specified disease, hospital indemnity, fixed indemnity,  
 9 fixed duration of one year or less, accident-only, credit, dental, vision, medicare  
 10 supplement, long-term care, or disability income insurance, coverage issued as a  
 11 supplement to liability insurance, workers' compensation or similar insurance, or  
 12 automobile medical payment insurance.

13 **Section 2. That § 58-17-153 be AMENDED:**

14 **58-17-153.** Any qualified health plan issued on or after January 1, 2015, that  
 15 offers coverage for professional audiology services ~~shall~~ must include coverage for  
 16 medically necessary physician services appropriate for the treatment of hearing  
 17 impairment to a person under the age of nineteen. ~~This shall~~ The coverage must include  
 18 professional services rendered by an audiologist licensed pursuant to chapter 36-24.

19 The benefits provided ~~shall be~~ are subject to the same dollar limits, deductibles,  
 20 coinsurance and other limitations provided for other covered benefits in the policy.

21 ~~Nothing in this section requires the payment by the~~ The health plan of is subject  
 22 to the coverage requirements of section 3 of this Act for hearing aids, devices, ~~or~~ and  
 23 equipment to correct hearing impairment or loss.

24 **Section 3. That chapter 58-17 be amended with a NEW SECTION:**

1           Any health benefit plan, as defined in § 58-17-63, delivered, issued for delivery,  
2           or renewed in this state, on or after January 1, 2023, must provide coverage for medically  
3           necessary devices and equipment appropriate for the treatment of hearing impairment to  
4           a person under the age of nineteen. The coverage must include:

5           (1) A hearing aid purchased from an audiologist or hearing aid dispenser licensed  
6           pursuant to chapter 36-4, and costs related to dispensing the hearing aid;

7           (2) Evaluation, fitting, and programming of a hearing aid;

8           (3) Probe microphone measurements for verification that hearing aid gain and output  
9           meet prescribed targets;

10          (4) Repairs, follow-up adjustments, servicing, and maintenance of a hearing aid;

11          (5) Ear molds and ear mold impressions; and

12          (6) Auditory rehabilitation and training.

13           The items and services in this section must be covered on a continual basis to the  
14           extent that benefits paid during the immediately preceding forty-eight-month period do  
15           not exceed three thousand dollars. The benefits provided are subject to the same dollar  
16           limits, deductibles, coinsurance, and other limitations provided for other covered benefits  
17           in the policy.

18           For the purposes of this section, the term, hearing aid, means any wearable  
19           instrument or device offered for the purpose of aiding or compensating for impaired human  
20           hearing, and any parts, attachments, or accessories to the instrument or device, excluding  
21           batteries and cords. The term does not include cochlear implant or cochlear prosthesis.

22    **Section 4. That § 58-18-95 be AMENDED:**

23           **58-18-95.** Any qualified health plan issued on or after January 1, 2015, that offers  
24           coverage for professional audiology services ~~shall~~ must include coverage for medically  
25           necessary physician services appropriate for the treatment of hearing impairment to a  
26           person under the age of nineteen. ~~This shall~~ The coverage must include professional  
27           services rendered by an audiologist licensed pursuant to chapter 36-24.

28           The benefits provided ~~shall be~~ are subject to the same dollar limits, deductibles,  
29           coinsurance and other limitations provided for other covered benefits in the policy.

30           ~~Nothing in this section requires the payment by the~~ The health plan of is subject  
31           to the coverage requirements of section 5 of this Act for hearing aids, devices, ~~or~~ and  
32           equipment to correct hearing impairment or loss.

33    **Section 5. That chapter 58-18 be amended with a NEW SECTION:**

1           Any health benefit plan, as defined in § 58-18-42, delivered, issued for delivery,  
2           or renewed in this state, on or after January 1, 2023, must provide coverage for medically  
3           necessary devices and equipment appropriate for the treatment of hearing impairment to  
4           a person under the age of nineteen. The coverage must include:

5           (1) A hearing aid purchased from an audiologist or hearing aid dispenser licensed  
6           pursuant to chapter 36-4, and costs related to dispensing the hearing aid;

7           (2) Evaluation, fitting, and programming of a hearing aid;

8           (3) Probe microphone measurements for verification that hearing aid gain and output  
9           meet prescribed targets;

10          (4) Repairs, follow-up adjustments, servicing, and maintenance of a hearing aid;

11          (5) Ear molds and ear mold impressions; and

12          (6) Auditory rehabilitation and training.

13           The items and services in this section must be covered on a continual basis to the  
14           extent that benefits paid during the immediately preceding forty-eight-month period do  
15           not exceed three thousand dollars. The benefits provided are subject to the same dollar  
16           limits, deductibles, coinsurance, and other limitations provided for other covered benefits  
17           in the policy.

18           For the purposes of this section, the term, hearing aid, means any wearable  
19           instrument or device offered for the purpose of aiding or compensating for impaired human  
20           hearing, and any parts, attachments, or accessories to the instrument or device, excluding  
21           batteries and cords. The term does not include cochlear implant or cochlear prosthesis.

22           **Section 6. That § 58-18B-60 be AMENDED:**

23           **58-18B-60.** Any qualified health plan issued on or after January 1, 2015, that  
24           offers coverage for professional audiology services—~~shall~~ must include coverage for  
25           medically necessary physician services appropriate for the treatment of hearing  
26           impairment to a person under the age of nineteen.—~~This shall~~ The coverage must include  
27           professional services rendered by an audiologist licensed pursuant to chapter 36-24.

28           The benefits provided—~~shall be~~ are subject to the same dollar limits, deductibles,  
29           coinsurance and other limitations provided for other covered benefits in the policy.

30           ~~Nothing in this section requires the payment by the~~ The health plan of is subject  
31           to the coverage requirements of section 7 of this Act for hearing aids, devices, ~~or~~ and  
32           equipment to correct hearing impairment or loss.

33           **Section 7. That chapter 58-18B be amended with a NEW SECTION:**

1           Any health benefit plan delivered, issued for delivery, or renewed in this state, on  
2           or after January 1, 2023, must provide coverage for medically necessary devices and  
3           equipment appropriate for the treatment of hearing impairment to a person under the age  
4           of nineteen. The coverage must include:

5           (1) A hearing aid purchased from an audiologist or hearing aid dispenser licensed  
6           pursuant to chapter 36-4, and costs related to dispensing the hearing aid;

7           (2) Evaluation, fitting, and programming of a hearing aid;

8           (3) Probe microphone measurements for verification that hearing aid gain and output  
9           meet prescribed targets;

10          (4) Repairs, follow-up adjustments, servicing, and maintenance of a hearing aid;

11          (5) Ear molds and ear mold impression; and

12          (6) Auditory rehabilitation and training.

13           The items and services in this section must be covered on a continual basis to the  
14           extent that benefits paid during the immediately preceding forty-eight-month period do  
15           not exceed three thousand dollars. The benefits provided are subject to the same dollar  
16           limits, deductibles, coinsurance, and other limitations provided for other covered benefits  
17           in the policy.

18           For the purposes of this section, the term, hearing aid, means any wearable  
19           instrument or device offered for the purpose of aiding or compensating for impaired human  
20           hearing, and any parts, attachments, or accessories to the instrument or device, excluding  
21           batteries and cords. The term does not include cochlear implant or cochlear prosthesis.

22    **Section 8. That § 58-41-127 be REPEALED:**

23           ~~Any qualified health plan issued on or after January 1, 2015, that offers coverage~~  
24           ~~for professional audiology services shall include coverage for medically necessary~~  
25           ~~physician services appropriate for the treatment of hearing impairment to a person under~~  
26           ~~the age of nineteen. This shall include professional services rendered by an audiologist~~  
27           ~~licensed pursuant to chapter 36-24.~~

28           ~~The benefits provided shall be subject to the same dollar limits, deductibles,~~  
29           ~~coinsurance and other limitations provided for other covered benefits in the policy.~~

30           ~~Nothing in this section requires the payment by the health plan of hearing aids,~~  
31           ~~devices, or equipment to correct hearing impairment or loss.~~