State Hearing Aid Insurance Mandates

Arkansas
Requires insurance companies to offer coverage to employers in the state. If the employer chooses to add this option, the health plan must provide hearing aid coverage of no less than $1,400 per ear every three years for individuals of all ages.
Citation: Arkansas Code Ann. §23-79-1401

Colorado
Requires insurance providers to cover hearing aids for children under 18 years of age when medically necessary. Coverage must include a new hearing aid every five years, a new hearing aid when alterations to the existing hearing aid cannot meet the needs of the child, and services and supplies such as the initial assessment, fitting, adjustments, and auditory training.
Citation: Colorado Rev. Stat. §10-16-104

Connecticut
Requires individual and group health insurance policies to provide coverage for hearing aids for children 12 years old or younger; classifies hearing aids as durable medical equipment and allows policies to limit the benefit to $1,000 every 24 months. As a result of the Affordable Care Act’s prohibition on discriminatory benefit design based on age, the Connecticut Insurance Department is requiring insurance policies to remove age limits on hearing aid benefits for policies issued or renewed after January 1, 2016.
Citation: Connecticut Gen. Statute §38a-490b and §38a-516b. Bulletin HC-102

Delaware
Requires individual and group health insurance contracts to provide coverage for hearing aids of up to $1,000 per ear, every 3 years, for children under 24 years of age, covered as a dependent by the policy holder.
Citation: Delaware Code Ann. tit. 18 §3357

Georgia
Requires health benefit policy to provide coverage of up to $3,000 per ear every 48 months for covered individuals 18 years and under.
Citation: Ga. Code Ann § 33-24-59.21 [PDF] [as created by S.B. 206 (2017)]

Kentucky
Requires health benefit plans to provide coverage for the full cost of one hearing aid per hearing-impaired ear up to $1,400 every 36 months for individuals under 18 years of age as needed, and all related services necessary to assess, select, and fit the hearing aid. The insured may choose a higher price hearing aid and pay the difference in cost; the hearing aid must be prescribed by a licensed audiologist and dispensed by a licensed audiologist or hearing instrument specialist.
Citation: Kentucky Rev. Stat. Ann. §304.17A-132 [PDF]
Louisiana
Requires individual and group insurers to provide coverage for hearing aids for a child under the age of 18 if the hearing aids are fitted and dispensed by a licensed audiologist or licensed hearing aid specialist following medical clearance by a physician licensed to practice medicine and an audiological evaluation medically appropriate to the age of the child. The insurer may limit the benefit payable to $1,400 per hearing aid for each hearing-impaired ear every 36 months. The insured may purchase a hearing aid priced higher than the benefit payable and pay the difference to the hearing aid provider.
Citation: Louisiana Rev. Stat. Ann. §22:1038

Maine
Requires health insurance policies to provide coverage for hearing aids for children up to age 18; coverage may be limited to $1,400 per hearing aid every 36 months.
Citation: Maine Rev. Stat. Ann. tit. 24-A §33-2762

Maryland
Requires insurers to provide coverage for hearing aids for a minor child if the hearing aids are prescribed, fitted, and dispensed by a licensed audiologist; coverage may be limited to $1,400 per hearing aid for each hearing-impaired ear every 36 months; insured may choose a more expensive hearing aid and pay the difference.
Citation: Maryland Code §15-838

Massachusetts
Requires certain health plans to provide to any minor 21 years of age or younger coverage for the full cost of one hearing aid per hearing-impaired ear up to $2,000 for each hearing aid, every 36 months upon a written statement from such minor's treating physician that the hearing aids are medically necessary. The insured may choose a higher priced hearing aid and may pay the difference in cost above the $2,000 limit without any financial or contractual penalty to the insured or to the provider of the hearing aid.

Minnesota
Requires health plans to cover hearing aids for children under the age of 18 year for hearing loss due to functional congenital malformation of the ears that is not correctable by other covered procedures. The coverage is limited to one hearing aid per ear every three years.
Citation: Minnesota Stat. §62Q.675

Missouri
Requires health insurance and Medicaid coverage for infant hear screening, re-screening (if necessary), audiological assessment and follow-up, and initial amplification, including hearing aids.
Citation: Missouri Rev. Stat. §376.1220
**New Hampshire**
Effective January 1, 2011, insurers are required to cover the cost of no less than $1,500 per hearing aid every 60 months. The insured may choose a higher price hearing aid and pay the difference in cost.

**New Jersey**
Requires health insurers, State Health Benefits Program and NJ FamilyCare to provide coverage for medically necessary expenses incurred in the purchase of a hearing aid for covered children 15 years of age or younger. Coverage includes the $1,000 per hearing aid for each hearing-impaired ear every 24 months when medically necessary and prescribed or recommended by a licensed physician or audiologist. The insured may choose a more expensive hearing aid and pay the difference between the price of the hearing aid and the benefit.
Citation: [New Jersey Stat. Ann. §17:48-6gg; §17:48A-7dd; §17:48E-35.31; §17B:26-2.1a a; §17B:27-46.1gg; §17B:27A-7.14; §17B:27a-19.18; §26:2J -4.32; §52:14-17.29n; §30:4j -12.2](https://www.nj.gov/health/carefinance/index.html)

**New Mexico**
Requires individual and group health insurance policies to cover $2,200 per hearing aid every three years for children under 18 years of age, or under 21 years of age if still attending high school. The insured may choose a higher priced hearing aid and may pay the difference in cost. Coverage includes fitting and dispensing services, including providing ear molds as necessary to maintain optimal fit, provided by an audiologist, a hearing aid dispenser or a physician, licensed in New Mexico.
Citation: [New Mexico Stat. Ann. §13-7-10; §59A-22-34.5; §59A-23-7.8; §59A-46-38.5; §59A-47-37.1](https://legisweb.nmlegis.gov/Statutes/)

**North Carolina**
Effective January 1, 2011, health plans are required to provide coverage for one hearing aid per hearing-impaired ear up to two thousand five hundred dollars ($2,500) per hearing aid every 36 months for covered individuals under the age of 22 years.
Citation: [North Carolina Gen. Stat. §58-3-285](http://www.ncga.state.nc.us/SessionLaws/2013-2014/document研究)- [PDF](http://www.ncga.state.nc.us/SessionLaws/2013-2014/document研究)

**Oklahoma**
Requires any group health insurance or health benefit plan to provide coverage for audiological services and hearing aids for children up to 18 years of age; adds requirement of hearing aid prescription and dispensing by a licensed audiologist; allows hearing aid benefit every 48 months without a dollar limit.
Citation: [Oklahoma Stat. tit. 36 §6060.7](https://www.ok.gov/legis/)

**Oregon**
Requires health benefits plans to cover one hearing aid per hearing impaired ear for enrollees under 18 years of age, or 18 years of age or older if eligible as a dependent under the plan and enrolled in an accredited educational institution. Hearing aids must be prescribed, fitted and dispensed by a licensed audiologist with the approval of a licensed physician and the maximum benefit amount is $4,000 every 48 months; however, an enrollee may purchase a hearing aid priced higher than the benefit amount and pay the difference in cost.
Tennessee
Requires every individual or group health insurance policy renewed on or after January 1, 2012 to provide coverage of one thousand dollars ($1,000) per individual hearing aid per ear, every three (3) years, for every child under 18 years of age covered by such policy whether as a dependent of the policy holder. An insured may purchase a hearing aid priced higher than the benefit amount and pay the difference in cost.
Citation: Tennessee Code Ann. §56-7-2368

Texas
Requires a health benefit plan to provide coverage for the cost of a medically necessary hearing aid or cochlear implant and related services and supplies for a covered individual who is 18 years of age or younger. Coverage is limited to one hearing aid in each every three years and one cochlear implant in each ear with internal replacement as medically or audiologically necessary.
Citation: Tex. Ins. Code Ann. §1367.251 [as created by H.B. 490 (2017)]

Rhode Island
Requires individual and group insurance policies to provide coverage for $1,500 per individual hearing aid, every three years, for children under the age of 19, and $700 per individual hearing aid for those over 19 years of age.
Citation: Rhode Island Gen. Laws §27-18-60

Wisconsin
Requires health insurance plans and policies to pay for cochlear implants, hearing aids and related treatment that are prescribed by a physician or audiologist for any child under the age of 18. Coverage for hearing aids includes the cost of one hearing aid per ear per child once every three years.
Citation: Wisconsin Stat. § 609.86; § 632.895 (16)