

Submitter: Shelby Atwill
On Behalf Of: Deaf and Hard of Hearing Children
Committee: Joint Committee On Ways and Means
Measure: SB5506

To: Joint Committee on Ways & Means
Subject: Support & Fund HB 2994A

Dear Co-Chair Steiner, Co-Chair Sanchez and Members of the Joint Committee On Ways and Means,

I'm one of the few audiologists in Oregon who exclusively sees pediatric patients, takes all Oregon insurance plans and submits all of my claims to insurance companies directly without a separate, specialized billing team. This has given me a very intimate view of the complicated ways that insurance processes can be difficult for children with hearing loss, and for us as audiologists.

I worked really hard to help write the original insurance bill (HB4104) and get it passed to mandate commercial insurance providers cover hearing aids, cochlear implants and audiology services in 2018. Over the past few years, I have seen the positive impact this legislation has had on patients and families. Numerous parents have shared what a relief it is to have these services and equipment covered and not have to deal with the headache they assumed would be inevitable with their insurance company.

Unfortunately, during the last few years, insurance companies have either knowingly or unknowingly found ways to avoid coverage, or increase families' financial responsibility beyond the spirit of the law. The law has been implemented by insurance companies including the following ways that do not align with the spirit of the current law:

- Limiting the number of earmolds a child can receive in the same calendar year
- Reimbursing at rates that don't accurately reflect the cost of the service or item (RM systems at \$200, Earmolds at \$6)
- Requiring families to pay their deductible before they'll help pay for hearing aids (deductibles might be more than the hearing aids!)
- Covering hearing aids but not the professional services for programming and fitting
- Only paying for programming of one CI per day (even though most pediatric recipients are bilateral)
- Not paying for the parts kids need to help their hearing devices work: batteries, softbands, chargers, retention solutions, etc.

I could share at least a dozen stories for each of these loopholes regarding different children. It's a battle with the insurance company each time to educate and advocate

so they provide the required coverage and act ethically.

I worked hard over the last few years with the Pacific NW Chapter of AG Bell, OAA, and members of the Oregon legislature to help the law passed in 2018 get implemented as it was intended. The spirit is clear, but nuts and bolts need some refining. HB 2994 will fix the issues we have seen arise since the law was passed.

As the operator of a pediatric non-profit clinic in Beaverton and Roseburg, as a pediatric audiologist, and as a person who thinks audiology care and equipment should be available to children who need it -- without financial and bureaucratic barriers.

This bill passed the House Behavioral Health & Health Care Committee with unanimous support and has a bipartisan group of co-chief and regular sponsors.

The state has an opportunity to invest in the future of our children. That is why I am urging you to fund HB 2994A this session and keep the promise the legislature made to our deaf and hard-of-hearing children five years ago.

Sincerely,

Shelby Atwill, AuD
Tigard resident and Beaverton business-operator
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