



State of Vermont  
Deaf, Hard of Hearing, Deaf/Blind Advisory Council

TO: Green Mountain Care Board

FROM: Spenser Wepler, Chair, Deaf/Hard of Hearing/ Deaf/Blind (DHHDB) Advisory Council

DATE: February 11, 2022

RE: Hearing Aid Coverage

I am writing on behalf of the Vermont Council for Deaf/Hard of Hearing and DeafBlind which supports and recommends the inclusion of hearing aid coverage as part of the Essential Health Benefits package beginning in 2024. To do so would go a lot way to achieving equity in hearing health and would begin to make hearing aids affordable for Vermonters. Improved hearing aid access would directly impact the health, quality of life, communication access, education, and employment of Vermonters. Currently, Vermont is one of only two states in the Northeast that has not passed legislation requiring some sort of hearing aid coverage for commercial insurance plans for its residents.

Below is an excerpt from our Council's recent legislative report for 2021 which can be found here:

<https://legislature.vermont.gov/assets/Legislative-Reports/Final-2022-D-HH-DB-Council-Report-for-Review-and-Submission.pdf>

*The cost of hearing aids, their exclusion from most health insurance plans, and racial and socioeconomic disparities are barriers to being able to hear. Sixty-four percent of people with severe hearing loss reported that they could not afford a hearing aid and over 75% identified financial factors as a barrier (Kochkin 2007). White and higher socioeconomic individuals (Bainbridge 2010) are more likely to wear hearing aids, even when Black individuals were more likely to have had a recent hearing test (Neiman 2016). Adults in rural communities cite lack of easy access to hearing healthcare, in addition to lack of insurance coverage and high cost of hearing aids (Powell 2019). Heightening the problem, people with untreated hearing loss earn as much as \$30,000 less annually than do people with normal hearing. There is a \$14,100 income differential between people with mild and severe hearing loss (Kochkin 2007). People with untreated hearing loss have lower rates of graduating from high school and college, being employed and making wages above poverty levels. The negative employment and wage impacts are worse for women. The use of hearing aids has been shown to mitigate the impact of income loss by 90%-100% for those with milder hearing losses and from 65%-77% for those with severe to moderate hearing loss.*

*People with more severe hearing loss may require more advanced models of hearing aids, whereas people with more mild hearing loss may succeed with more basic models (Cho 2019). The level of hearing aid support needed by individuals*

*with hearing loss may vary depending on their degree and the nature of their hearing loss, as well as speech discrimination abilities.*

*We are also aware of increasing research which links hearing loss to earlier onset of dementia.*

*As a state, it is critical that we recognize the impact of these correlated conditions, both in terms of their impact on the lives of Vermonters but also on the costs of health care, particularly long-term care, across the state.*

*Current research shows:*

- *Mild hearing loss doubles risk of dementia.*
- *Untreated hearing loss increases risk of falls by 50%.*
- *1 in 10 people with untreated hearing loss suffer from depression.*
- *People with hearing loss are often unaware that they have a hearing loss. Self-assessment surveys of hearing loss are often incorrect and should not be relied upon.*

*Hearing aid use was positively associated with improved memory scores (Maharani 2018). Use of hearing aids is associated with delayed diagnosis of Alzheimer's disease, dementia, depression, anxiety, and injurious falls among older adults with hearing loss (Mahmoudi et al. 2019). Additionally, hearing comprehension with remote microphone technology may be 61% better than only using a hearing aid or cochlear implant. (Thibodeau L. 2020)*

The council wishes to thank the Department of Financial Regulation for convening the stakeholder group and the work doing to evaluate the impact around the inclusion of additional benefits that would be included in EHB's and thanks the GMCB for its consideration in this important matter

Sincerely,

Spenser Wepler, Chair