

March 13, 2025

Senator Henry Ingwersen, Chair Representative Michele Meyer, Chair Joint Standing Committee on Health and Human Services Cross Office Building, Room 209 Augusta, Maine 04333

Re: L.D. 167 An Act to Provide 2 Hearing Aids to MaineCare Members with Diagnosed Hearing Loss

Dear Senator Ingwersen, Representative Meyer, and Members of the Joint Standing Committee on Health and Human Services:

Thank you for the opportunity for Disability Rights Maine (DRM) to provide testimony in support of this legislation. DRM is a non-profit organization whose mission is to advance justice and equality by enforcing rights and expanding opportunities for people with disabilities in Maine.

I am the Co-Director of DRM's Deaf Services program. We provide advocacy, equipment, and training to people who are Deaf, Hard of Hearing and Late-Deafened throughout the state.

On a daily basis, we are contacted by people across Maine who need hearing aids, and who can't afford them. Hearing aids are a simple measure that significantly improves overall health and self-sufficiency. Yet, most Maine households do not have the resources to pay the average out-of-pocket cost of \$1500 for a hearing aid. For those who can't afford them, the majority will simply go without, with serious impacts to their ability to work and live independently.

Many of the individuals who contact us are MaineCare members. Currently, MaineCare will reimburse for one hearing aid only, even when an individual has been diagnosed with hearing loss in both ears and a medical professional has recommended two hearing aids as treatment.

This limitation lacks logic. If a medical professional has recommended and prescribed hearing aids in both ears for a person with bi-lateral hearing loss, that means two hearing aids are necessary for effective treatment of that person's hearing loss. Limiting that person to only receiving one hearing aid, means that they are being limited to receiving only partial and less effective treatment.

160 Capitol Street, Suite 4, Augusta, ME 04330 207.626.2774 • 1.800.452.1948 • Fax: 207.621.1419 • drme.org Our brain is wired to process sound from both ears simultaneously. Using one hearing aid when two are required does not provide the full input that the brain requires. It makes it difficult for our brain to locate where sounds are coming from, or to pick out voices from noise. For example, a person using only one hearing aid (despite needing two) may not only continue to struggle to understand what people are saying, but also to understand who is speaking, or to distinguish someone speaking from background din, particularly in a group. In another example, they may hear a car approaching, but not know from where unless they can see it. The overall effectiveness of the hearing aid is limited.

There are other conditions for which a single hearing aid would simply be ineffective. For example, hearing aids are often prescribed to treat tinnitus (ringing in the ears). For those with tinnitus, this endless ringing can be unbearable. Two hearing aids are typically prescribed for effective treatment, since a single hearing aid alone would not mask the ringing sound in the unaided ear, and the individual would continue to suffer.

For these reasons, and others, it is now unusual to limit hearing aid coverage to only one aid even when two are needed. A quick review shows that state Medicaid programs in New Hampshire, Vermont, Massachusetts all provide coverage for hearing aids for both ears. In 2019, Maine passed a law mandating that private insurers cover hearing aids; that law also mandated coverage for both ears, not just one. DRM's own TEP program, which has very limited resources to provide a small number of hearing aids to certain eligible individuals over age 65, and was initially established with a policy similar to MaineCare's, also now offers two hearing aids when individuals require them.

Unaided hearing loss generally carries a steep financial cost for Mainers and their families. A 2007 study by the National Better Hearing Institute concluded that unaided hearing loss for a wage earner resulted in an average loss of \$12,000 per year in household income. In addition, access to hearing aids impacts whether an individual with hearing loss is able to age in place, or live independently.

MaineCare members are by definition low-income. They are the least likely to be able to afford to pay for an expensive hearing aid on their own. They are also most in need of access to healthcare that can bolster their ability to work and live independently. It is time for MaineCare policy to provide reimbursement for two hearing aids to members with hearing loss in both ears.

DRM urges the Committee to vote Ought to Pass on L.D. 167.

Thank you for your time.

Sincerely,

Riley Albair Program Director

Disability Rights Maine