

OIC Rules Coordinator

From: Cheri Perazzoli <cheri.perazzoli@LoopWashington.org>
Sent: Friday, October 24, 2025 4:54 PM
To: OIC Rules Coordinator
Cc: Shimoji, Heather (OIC)
Subject: Comments Re: R 2025-12 Hearing Instruments

External Email

Dear Washington State OIC Rulemakers,

Thank you for the opportunity to provide feedback on the prepublication draft of the Consolidated Health Care Rule (R 2025-12). On behalf of the Hearing Loss Association of America—Washington State Association (HLAA-WA) and the 1.5 million people in Washington State living with hearing loss, please see our comments below.

First, we greatly appreciate all of the work done by Jane Beyer and the OIC to expand insurance coverage of hearing healthcare and hearing instruments. The passage of SB 5262 and the inclusion of hearing healthcare and hearing instruments in Washington State's Essential Health Benefits go a long way toward helping more Washingtonians gain covered, life-changing access to these services.

WAC 284-43-5937: We support an expiration date of December 31, 2025, for WAC 284-43-5937 and the establishment of a new section, WAC 284-43-5939, that mandates all health plans, including individual, small group, and large group plans, to provide coverage for hearing healthcare and instruments per the legislation cited above.

WAC 284-43-5939:

Hearing instrument coverage.

- (1) For purposes of compliance with RCW 48.43.135 and WAC 284-43-56442, which require health plans issued on or after January 1, 2026, to cover hearing instruments and related services

HLAA-WA: Per the language used in SB 5262, we believe this should read..."which require health plans **issued or renewed** on or after January 1, 2026..." Thank you for working to remove the grandfathered plans exclusion.

- (2) A health carrier shall provide coverage for hearing instruments every 36 months per ear with hearing loss and may not establish any lifetime or annual limit on the dollar amount of coverage for services for any individual, whether provided in-network or out-of-network.

HLAA-WA: Please clarify the difference between "every 36 months" and "no annual limit" on coverage of services. These appear to be contradictory rules and may lead to confusion for providers and

recipients. On a different note, thank you very much for ensuring out-of-network providers are included in coverage.

WAC 284-43-5935

Definitions

HLAA-WA: This section includes hearing loss-specific auxiliary aids and services such as assistive listening devices; assistive listening systems; telephones compatible with hearing aids; real-time captioning, text telephones (TTYs), videophones, and captioned telephones, etc. Would it be possible to include a reference to this definitions list, in other sections of the prepublication draft of the Consolidated Health Care Rules (R 2025-12), where these required accommodations constitute a reasonable step to provide communication access? For example:

1. WAC 284-43-5960

Meaningful access for individuals with limited-English proficiency.

HLAA-WA: While this entire section focuses on ensuring communication access for people with limited English proficiency, the same subsection considerations apply to people with hearing loss and those who identify as Deaf. These patients have limited English proficiency because they cannot hear clearly or at all. Therefore, appropriate accommodations and protective rules should apply.

2. WAC 284-43-5965:

Effective communication for people with disabilities.

An issuer offering a plan shall:

(1) Take appropriate steps to ensure that communications with individuals with disabilities are as effective as communications with others with respect to benefits and services, in accordance with the standards found at 28 C.F.R. 35.160 through 35.164. Where the regulatory provisions referenced in this section use the term "public entity," the term "issuer" shall apply in its place.

HLAA-WA: Indicate that 28 C.F.R. 35.160 through 35.164 is part of Title II Americans with Disabilities Act (ADA). Further, add an "including but not limited to" list of covered disabilities as examples, and include hearing loss.

We recommend the inclusion of the following highlighted sentences:

(3) Ensure that their benefits and services provided through electronic and information technology, including telehealth, are accessible to individuals with disabilities. **Example: telehealth services must be captioned for people with hearing loss.**

(5) Make reasonable modifications to policies, practices, or procedures when such modifications are necessary to avoid discrimination on the basis of disability, unless the issuer can demonstrate that making the modifications would fundamentally alter the nature of the health program or activity.

Example: Issuer must make available, free of charge, the use of auxiliary aids, as defined in WAC 284-43-5935.

WAC 284-43-5604

Essential health benefits package benchmark plan.

2) The services and items covered by a health benefit plan that are within the categories defined in RCW 48.43.005 as "essential health benefits" including, but not limited to:

- (a) Ambulatory patient services;
- (b) Emergency services;
- (c) Hospitalization;
- (d) Maternity and newborn care;
- (e) Mental health and substance use disorder services, including behavioral health treatment;

HLAA-WA: Please include "Hearing Instruments" in the list of services and items covered by a health benefit plan. Coverage of hearing instruments is a new Washington State EHB and should be included to ensure carriers acknowledge this benefit.

Thank you very much for considering our feedback on behalf of Washington's hearing loss and Deaf communities. Your efforts are essential to our community members receiving equal access to hearing healthcare and hearing instruments.

Onward,
Cheri Perazzoli

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