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(FORM UPDATED: 08/11/2010)

WISCONSIN STATE LEGISLATURE ... PUBLIC HEARING - COMMITTEE RECORDS

2009-10

(session year)

Senate

(Assembly, Senate or Joint)

Committee on ... Health, Health Insurance, Privacy, Property Tax Relief, and Revenue (SC-HHIPPTRR)

COMMITTEE NOTICES ...

- Committee Reports ... CR
- Executive Sessions ... ES
- Public Hearings ... PH

INFORMATION COLLECTED BY COMMITTEE FOR AND AGAINST PROPOSAL

- Appointments ... Appt (w/Record of Comm. Proceedings)
- Clearinghouse Rules ... CRule (w/Record of Comm. Proceedings)
- Hearing Records ... bills and resolutions (w/Record of Comm. Proceedings)

(ab = Assembly Bill)

(ar = Assembly Resolution)

(air = Assembly Joint Resolution)

(sb = Senate Bill)

(sr = Senate Resolution)

(sir = Senate Joint Resolution)

Miscellaneous ... Misc

Senate

Record of Committee Proceedings

Committee on Health, Health Insurance, Privacy, Property Tax Relief, and Revenue

Senate Bill 27

Relating to: requiring health insurance coverage of hearing aids and cochlear

implants for persons under 18 years of age.

By Senators Lassa, Hansen, Lehman, Risser, Taylor, Erpenbach, Vinehout, Darling, S. Fitzgerald, Coggs and Kapanke; cosponsored by Representatives Cullen, Bernard Schaber, Schneider, Sheridan, Berceau, Hilgenberg, Hraychuck, Vruwink, Mason, Black, Pasch, Sherman, Pocan, Jorgensen, Sinicki, Stone, Krusick, Smith, Seidel, Montgomery, Parisi, Turner, Grigsby, Richards, Zigmunt, A. Williams, Soletski, Hixson, Dexter and Molepske Jr..

February 03, 2009

Referred to Committee on Health, Health Insurance, Privacy,

Property Tax Relief, and Revenue.

March 18, 2009

PUBLIC HEARING HELD

Present:

(0) None.

Absent:

(0) None.

Appearances For

- Julie Lassa Senator
- David Cullen Rep.
- Marlin Schnieder Rep.
- Alicia Boehme, Madison Disability Rights Wisconsin
- Mark Boehler, Hubertus
- Amy Boehler, Hubertus
- Franz Backus, Milwaukee
- Tiffany Wilke, Beaver Dam
- Beth Severson, Madison
- Judith Wagner
- Tina Staszewski, Milwaukee Milwaukee Public Schools
- Todd Blobe, Neenah
- Matthew Fitton, Appleton
- Tom Foht, Germantown
- Michelle Kihntopf, Green Bay
- Michaela Kihntopf, Green Bay
- Laura Feldhake, Stoughton WSHA-P
- Connie Breaker, Appleton
- Ann Bransel, Ft. Atkinson

- Laurie Nelson, Mineral Point
- Peyton Nelson, Mineral Point
- Vicki Denzin, Neenah
- John Fletcher, Milwaukee
- Dana Gladd, Madison
- Heather Sorebo, Appleton
- Anna McCartney, Oregon
- Tracy Sipla, Friendship
- Mary Heun, Milwaukee
- Amber Heun, Milwaukee
- Michael Flood, Appleton
- Christine Kometer, MIlwaukee Center For the Deaf and Hard of Hearing
- Carol Petrina, Kewaunee
- Jenny Geiken, Green Bay
- Lisa Hanel, Milwaukee Center for the Deaf and Hard of Hearing
- Sherry Kimball, Madison
- Andrea Happel, Onalaska
- Carol Burns, Mt. Horeb
- Monica Dull, Waunakee
- Julie Spangler, Janesville
- Heather Schrieber, Beaver Dam
- Kelly Hilliker, Two Rivers
- Anne Heintzelman, Madison

Appearances Against

None.

Appearances for Information Only

- Joanne Alig Wisconsin Association of Health Plans
- Sean Dilweg Commissioner, Office of the Commissioner of Insurance
- Rachel Currans-Sheehan, Madison Department of Health Services
- Joanne Alig Wisconsin Association of Health Plans

Registrations For

- Brad Schwanda, Oak Creek
- Sabrina Gentile Wisconsin Council on Children and Families
- Valerie Wulf, Waunakee
- Eli Breaker, Appleton
- James Denzin, Neenah
- Nate Wilke, Beaver Dam

- Elizabeth Burmaster Department of Public Instruction
- Janice Vele, St. Francis
- Ramie Zelenkova, Madison WI Speech Language Pathology and Audiology Association
- Cindy See, Pittsville
- Amy Hartman, Cross Plains
- Kim Smuda, Oregon
- Kim Schairer, Madison
- Sarah Chipman, Madison
- Lauren Hefty, Madison
- Alyssa Spangler, Madison
- Rianna Christen, Fitchburg
- Doug Johnson, Evansville WI Alliance of Hearing Professionals
- Angela McCarver, Middleton
- Terence Griffin, Eau Claire
- MaryJane Griffin, Eau Claire
- Alana Bergin, Green Bay
- Holly Bergin, Green Bay

Registrations Against

- RJ Pirlot WI Manufacturers and Commerce
- Bill Smith NFIB-WI

Registrations for Information Only

• None.

April 14, 2009 **EXECUTIVE SESSION HELD**

Present: (7) Senators Erpenbach, Carpenter, Robson, Lassa, Lazich, Kanavas and Darling.

Absent: (0) None.

Moved by Senator Lassa, seconded by Senator Robson that **Senate Amendment 1** be recommended for adoption.

Ayes: (7) Senators Erpenbach, Carpenter, Robson, Lassa, Lazich, Kanavas and Darling.

Noes: (0) None.

ADOPTION OF SENATE AMENDMENT 1 RECOMMENDED, Ayes 7, Noes 0

Moved by Senator Lassa, seconded by Senator Robson that **Senate Amendment 2** be recommended for adoption.

Ayes: (7) Senators Erpenbach, Carpenter, Robson, Lassa, Lazich, Kanavas and Darling.

Noes: (0) None.

ADOPTION OF SENATE AMENDMENT 2 RECOMMENDED, Ayes 7, Noes 0

Moved by Senator Lassa, seconded by Senator Robson that **Senate Bill 27** be recommended for passage as amended.

Ayes:

(6) Senators Erpenbach, Carpenter, Robson,

Lassa, Kanavas and Darling.

Noes:

(1) Senator Lazich.

PASSAGE AS AMENDED RECOMMENDED, Ayes 6, Noes 1

Kelly Johnson-Becker

Committee Clerk

Vote Record Committee on Health, Health Insurance, Privacy, Property Tax Relief, and Revenue

Date: 414109			n			amendment # 1		
Moved by:	4889	Seconded by:	Lobs	j.		#1		
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AR	SR_		Other					
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Senator Tim Car	rpenter							
Senator Judith	Robson		d					
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Vote Record Committee on Health, Health Insurance, Privacy, Property Tax Relief, and Revenue

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Committee Member		<u>Aye</u>	<u>No</u>	<u>Absent</u>	Not Voting
Senator Jon Erpenbach,	Chair				
Senator Tim Carpenter	Ø				
Senator Judith Robson					
Senator Julie Lassa					
Senator Mary Lazich					
Senator Ted Kanavas					
Senator Alberta Darling	Ø				
	Totals:				

☐ Motion Carried

☐ Motion Failed

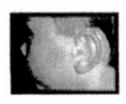
Vote Record Committee on Health, Health Insurance, Privacy, Property Tax Relief, and Revenue

Date: 4114							J	asage
Moved by: Robson		Seconded	by: _				as	amended
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Committee Member				<u>Aye</u>	<u>No</u>	<u>Absent</u>	Not Voti	ng
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Senator Tim Carpente	er							
Senator Judith Robso	on			Ø				
Senator Julie Lassa								
Senator Mary Lazich					Ø			
Senator Ted Kanavas	;			Ø				
Senator Alberta Darling				Z				
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☐ Motion Carried

☐ Motion Failed





LetKidsHear.org

Home

Abby's story

Sun, 10/19/2008 - 3:45pm - Anonymous

Our daughter, Abby, was born with profound hearing loss. Detected early in life, we had time to decide what we wanted for our daughter. We struggle with what the future would hold for little Abigail if she could never hear.

At five months of age, Abby received borrowed hearing aids, which helped her detect some environmental noises, but she would never hear the spoken word. Within the next year we were referred to the HIKE Foundation, which so generously raised money so our daughter could have her own hearing aid. At seven months of age, we decided that we wanted to get a cochlear implant for Abby and had high hopes that after her first birthday, she would have surgery. We received a letter of denial from my employer's insurance company. I work in the health care field, and thought the insurance offered would be good coverage for my family. After receiving the denial, we were not going to give up. We appealed but were once again rejected because it was a direct exclusion in our policy. We almost got to the point of taking my employer to court. After researching the health insurance my husband could obtain through his new job, we discovered that his insurance would cover a cochlear implant. I just didn't understand that the insurance I have paid thousands of dollars in premiums could be so cold about helping a child's development. Although the implant would be covered by my husband's insurance, a lot of the other day-to-day health issues were not. As a result, we are paying two premiums in order for my daughter to be able to hear. We have been struggling with just paying our household bills in order to live as middle-class Americans.

The same insurance company that denied my daughter the ability to hear, covered lap banding for an obese individual to lose weight. Weight loss may prevent a lot of health costs down the road, just like proper amplification will prevent significant increased education costs. Why not help the children and help the taxpayers?

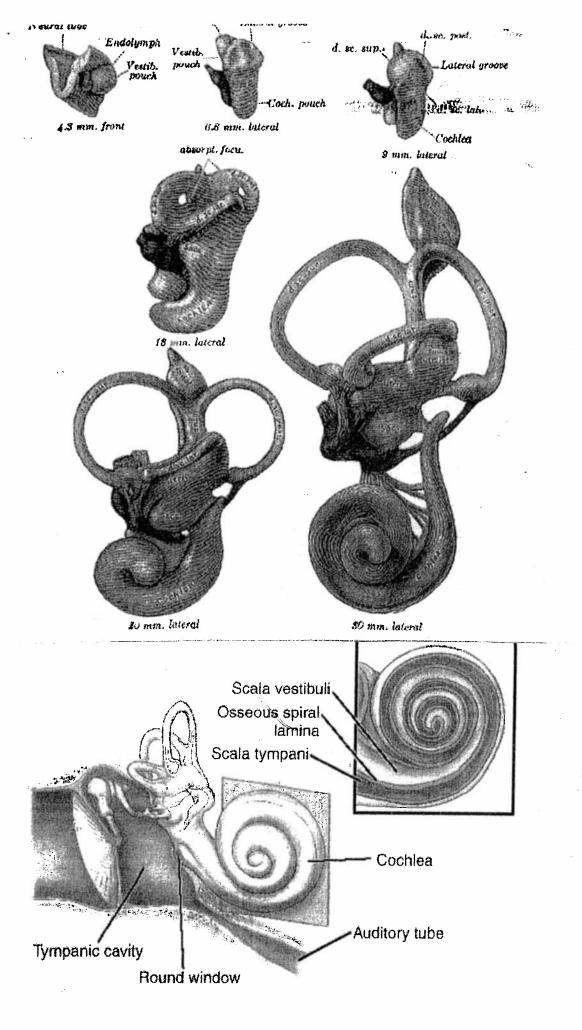
Abigail finally had cochlear implant surgery (three months before her third birthday). It has been almost five months after she received her

cochlear implant speech processor and she is ALREADY detecting so much more than she ever did before. She has said "bye bye ma ma" when I drop her off at preschool. She can tell me some of the sounds that certain animals make. We are hopeful that her speech will develop with time and hard work. It still amazes me that anyone (legislators, insurance companies) would deny a child the opportunity to hear and to help them to develop their speech and language to their fullest potential.

Let us work together on this bill so that families don't have to wait two years for their child to begin hearing more. We lost precious time in Abby's speech and <u>language development</u>, exhausting options and trying to work with my health insurance. These children are our future, let's give them all we can.

Ann and Matt Brensel Parents of Abigail

Personal Stories







Eloise Schwarz 2533 North 113th Street Wauwatosa, WI 53226-1215

February 21, 2009

The Honorable Jon Erpenbach Chairman, Senate Committee – Health Insurance, Privacy, Tax Relief and Revenue State Capitol Room 8 South Post Office Box 7882 Madison, WI 53707-7882

RE: Senate Bill 27 - Insurance for Hearing Aids and Implants

I am a professional healthcare provider who is concerned about disability issues and am writing to you today to give you my thoughts on the above proposed legislation. This bill would require insurance companies to cover the costs for hearing instruments and cochlear implants for children/youth up to and including 18 years old who are deaf or hard of hearing.

The ability to hear impacts a child's development, acquisition of spoken language, and learning. Hearing aids and cochlear implants are proven interventions to assure that children who are deaf or who have hearing loss acquire spoken language and learn in school. The best time for this is in the first 18 months of life. Without interventions, they have become our 'million-dollar' children in all relevant costs and considerations.

The respective bill – SB 27 is currently in review for fiscal estimate and assessment. Thank you for your support for this bill and for your continued advocacy on behalf of our special children. I look forward to attending future scheduled public hearings for this worthy piece of legislation.

Thank you for your time and consideration. We look forward to your quick action.

Sincerely,

Eloise Schwarz, RN, MBA, CCM

(414) 259-0431 office

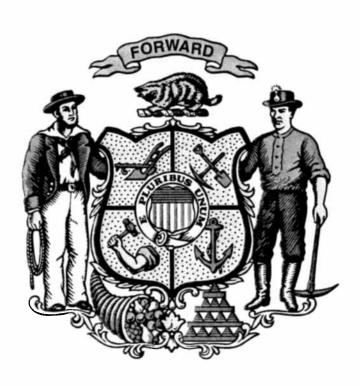
(414) 259-9313 fax

(414) 807-4373 mobile

Eloise6376@wi.rr.com

Member of Hearing Loss Association of America

Member, Governor's Council for the Deaf and Hard of Hearing



March 6, 2009

Senator Jon B. Erpenbach Wisconsin State Capitol S. P.O. Box 7882 Madison, WI 53707-7882

Dear Senator Erpenbach:

I am writing to urge you to support and approve S.B. 27, the Cochlea Implant and Hearing Aid bill. It is so very important that insurance companies help cover costs of this.

Insurance covers many other birth defects or abnormalities. Why should cochlea implants not be treated as the medical necessity that they are?

Little children can not realize their life potential without being able to hear sounds as soon as possible after birth. Many parents need the help S.B. 27 would provide them.

Financially, learning disabilities caused by deafness have far-reaching ramifications for the state, such as special-ed costs, poor job opportunities which result in less income tax income for government.

Again, I urge your support for S.B. 27. Thank you.

Sincerely,

Mrs. Jeannine M. Prager N8 W27947 Northview Rd. Waukesha, WI 53188-1919

eannine m. Prager





From:

Patty Coleman [pcoleman@new.rr.com]

Sent:

Saturday, March 14, 2009 1:43 PM

To:

Rep.Cullen

Subject: Insurance

Representative Cullen,

You are on the committee that will be deciding Senate Bill 27, Assembly Bill 16. It is imperative that this bill pass so that all of the children who are deaf and hard of hearing have an opportunity to have hearing aids and cochlear implants covered by insurance.

I work with two parents who were able to provide hearing aids for one child and cochlear implants for another. These parents were able to give up things and provide for their girls. One is a lovely young teenager with a grade point average of 4.0 and is in mainstream classes not special education. She is delightful and lives a wonderful normal life -- thanks to hearing aids.

The other young girl is only five years old, but she got cochlear implants very young and hears and speaks beautifully. In fact she plays the violin and is also in mainstream classes at school. This little girl has a smile that could stop a battleship and I think she might set the world on fire one day.

My grandmother loss her hearing at five years old and read lips the rest of her life. I would like to see Wisconsin make hearing aids and cochlear implants available for all of the hearing impaired children. Supporting and voting for this to happen is just the right thing to do.

Kind regards,

Patricia A. Coleman





Wisconsin Chapter

Wisconsin Chapter 210 Green Bay Road Thiensville, WI 53092 Phone: 262/490-9075 E-mail: KLaBracke@aap.net

Wisconsin Chapter Executive Committee

President

Jeffrey H. Lamont, MD, FAAP
Department of Pediatrics
Marshfield Clinic, Wausau Center
2727 Plaza Drive
Wausau, WI 54401
Phone: 615/847-3575
E-mail:
lamont.jeffrey@marshfieldclinic.org

Vice President

LuAnn Moraski, DO, FAAP Internal Medicine and Pediatrics Medical College of Wisconsin 8701 Watertown Piank Road Milwaukee, WI 53226 Phone: 414/266-6809 E-mail: Imoraski@mcw.edu

Secretary/Treasurer

James A. Meyer, MD, FAAP
Department of Pediatrics
Marshfield Clinic, Adolescent Section
1000 North Oak Avenue
Marshfield, WI 54449
Phone: 715/387-5240
E-mail:
meyer.james@marshfieldclinic.org

Immediate Past President

Carl Eisenberg, MD, FAAP 11042 N. Hedgewood Lane Mequon, Wi 53092-4910 E-mail: ceisenberg@aapscot.org

Chapter Executive Director

Kia K. LaBracke 210 Green Bay Road Thiensville, WI 53092 Phone: 262/490-9075 E-mall: KLaBracke@aap.net

Chapter Web site www.wisaap.org

AAP Headquarters

141 Northwest Point Bivd Elk Grove Village, IL 60007-1098 Phone: 847/434-4000 Fax: 847/434-8000 E-mail: kidsdocs@aap.org Web: www.aap.org

VIA EMAIL AND FAX

March 14, 2009

Senator Jon Erpenbach, Chair Senate Committee on Health, Health Insurance, Privacy, Property Tax Relief, and Revenue P.O. Box 7882 Madison, WI 53707-7882

Honorable Senator Erpenbach,

On behalf of the Wisconsin Chapter of the American Academy of Pediatrics (WIAAP), I am writing this letter of support for Senate Bill 27. This bill appropriately assures insurance benefits for children with hearing impairments.

Thank you for your consideration.

Sincerely Yours,

AMERICAN ACADEMY OF PEDIATRICS, Wisconsin Chapter

Jeffrey H. Lamont, MD, FAAP, President

cc: Senators Carpenter, Darling, Kanavas, Lassa, Lazich and Robson



From: Heun, Mary A [heunma@milwaukee.k12.wi.us]

Sent: Sunday, March 15, 2009 7:42 PM

To: Rep.Cullen
Cc: Sen.Sullivan

Subject: Senate Bill 27 & Assembly Bill 16

Dear Senator Sullivan and Representative Cullen,
I am writing in behalf my family and all others who are in support of Senate Bill 27 and Assembly Bill16...

Myself and my 9 year-old daughter who is hearing impaired, will be in Madison this Wednesday to show our support of these Bills by testifying at the public hearing in front of the Assembly and Senate and I am urging you to support both of them, also. Your support will make a tremendous difference in the lives of thousands of children in WI if these bills are passed.

Thanks you for your time and support.

Sincerely, Mary Heun 414-445-0254 heunma@milwaukee.k12.wi.us







From:

bob & arlene ramstack [boarstack@charter.net]

Sent:

Sunday, March 15, 2009 12:18 PM

To:

Rep.Cullen

Subject: support ab16

Dear Member of the Assembly Committee on Insurance,

I am writing to inform you that despite my absence at the hearing on March 18, I am in full support of the Assembly Bill 16 which would mandate insurance coverage of hearing aids and cochlear implants up to the age 18. Proper hearing is imperative for the academic learning and success of children. Children with hearing loss have difficulty with all areas of academic achievement, especially reading and mathematical concepts. Children with mild to moderate hearing losses, on average, achieve one to four grade levels lower than their peers with normal hearing, unless appropriate management occurs. Children with severe to profound hearing loss usually achieve skills no higher than the third- or fourth-grade level, unless appropriate educational intervention occurs early. The gap in academic achievement between children with normal hearing and those with hearing loss usually widens as they progress through school. The level of achievement is related to parental involvement and the quantity, quality, and timing of the support services children receive (facts provided by ASHA). With hearing aids costing \$1000-5000 per ear, many parents cannot afford to purchase hearing aids for their children; thus, decreasing future potential of that child. Support Assembly Bill 16 and let *ALL kids hear* without financial detriment to their families!

Sincerely,

Robert Ramstack & Arlene Ramstack N8592 Linden Beach Road Fond du Lac, WI 54937





From:

Anna Benton [benton@dcemail.com]

Sent:

Monday, March 16, 2009 9:36 PM

To:

Rep.Cullen; Rep.Molepske; Rep.Ziegelbauer; Rep.Parisi; Rep.Berceau; Rep.Hebl; Rep.Nygren;

Rep.Suder; Rep.Vos; Rep.Roth

Cc:

Sen.Plale; Rep.Richards

Subject:

[Possible Spam] In support of Assembly Bill 16

Importance: Low

Dear Insurance Committee Members and Legislators,

Helena is our only child. My husband and I adopted her when she was 7 months old. Because there were so many other adjustment issues, we did not find out that she had bilateral, permanent hearing loss until January of this year, when she was almost two. She's been wearing hearing aids for around one month now, and is enrolled in Birth to Three, working with a speech therapist on a weekly basis. Her speech is significantly delayed – she has the vocabulary of a typical one-year-old.

After her final hearing test in January, the audiologist leaned over and gave us the diagnosis that shook our world, and in the same breath she told us that insurance wouldn't cover the \$4,000 hearing aids. Talk about adding insult to injury.

Our family doesn't have a large income: I work for local government, and my husband's small start-up business has yet to make a profit. But of course we will scrimp, save, and sacrifice to get our beloved daughter everything that she needs to have a chance at a normal, happy life. What terrifies me is that if we couldn't do this – if we were like so many other families out there without any resources – our daughter might actually have to do without the technology that will hopefully enable to her to function. HOW can the insurance companies, which cover treatment for a thousand semi-necessary 'treatments', deny coverage for hearing aids and cochlear implants? How can anybody possibly argue that these are not absolutely bare-bones essential for the development of a child with hearing loss?

As I'm learning now, hearing loss is a devastating diagnosis. My daughter is never going to be able to hear and interact normally in group settings. She's going to have to be extra careful while crossing the street. She might not be able to use a telephone without special equipment. Meals out with friends may leave her feeling isolated and excluded because she won't be able to follow the conversation. It may well inhibit her professional life. But getting her these hearing aids and therapy will give her the best shot she has to overcome all the odds and have a fulfilled life.

If the bill doesn't pass, my family will have to buy 4-6 pairs of hearing aids until she is 18, at a cost of \$4,000 each. That's \$16,000 - \$24,000, out of pocket. Insurance companies have gotten away with denying coverage for essential items like this for too long. Speaking for myself, and for all the many families who have no voice, I hope very much that this bill passes.

Thank you,

Anna Benton, Nikolai Usack, and our daughter Helena

Washington DC's Largest FREE Email service. ---> http://www.DCemail.com ---> A Washington Online Community Member ---> http://www.DCpages.com







From:

The Covert's [iroicovert@wi.rr.com]

Sent:

Wednesday, March 11, 2009 8:21 PM

To:

Rep.Cullen

Subject: Support Assembly Bill 16

Dear Representative Cullen: Member of the Assembly Committee on Insurance,

I am writing to inform you that despite my absence at the hearing on March 18, I am in full support of the Assembly Bill 16 which would mandate insurance coverage of hearing aids and cochlear implants up to the age 18. Proper hearing is imperative for the academic learning and success of children. Children with hearing loss have difficulty with all areas of academic achievement, especially reading and mathematical concepts. Children with mild to moderate hearing losses, on average, achieve one to four grade levels lower than their peers with normal hearing, unless appropriate management occurs. Children with severe to profound hearing loss usually achieve skills no higher than the third- or fourth-grade level, unless appropriate educational intervention occurs early. The gap in academic achievement between children with normal hearing and those with hearing loss usually widens as they progress through school. The level of achievement is related to parental involvement and the quantity, quality, and timing of the support services children receive (facts provided by ASHA). With hearing aids costing \$1000-5000 per ear, many parents cannot afford to purchase hearing aids for their children; thus, decreasing future potential of that child. Support Assembly Bill 16 and let ALL kids hear without financial detriment to their families!

Sincerely,

Isaac & Rachelle Covert N69 W6855 Bridge Road Cedarburg, Wisconsin 53012 #262-375-6915



From:

jeanne gustafson [jeannegustafson@att.net]

Sent:

Tuesday, March 17, 2009 1:59 PM

To:

Rep.Cullen

Subject:

Assembly Bill 16

Attachments: Madeline's letter.doc

Hi,

We are not able to attend the hearing scheduled for Assembly Bill 16 on Wednesday, March 18th. Attached is a short testimony of support for the bill from my daughter, who is hard-of-hearing, and myself. If you could please distribute these to the other Assembly members on the Insurance committee, we would greatly appreciate it. Thank you for your help.

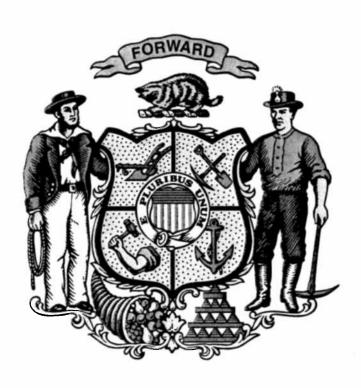
Jeanne Gustafson 11149 47th Ave. Chippewa Falls, WI 54729 715-720-1439 jeannegustafson@att.net My name is Madeline Gustafson and I'm fourteen years old. I am in eighth grade at Chippewa Falls Middle School. I am active in a couple of sports throughout the year- volleyball, track and softball. I am a straight A student and I like all my classes. Some of my favorite things to do in my free time are listen to my Ipod, go outside (if it is nice out), read books and magazines, and go on the internet.

I've had hearing aids pretty much all my life. I've basically had them since I was four months old. I use them everyday and take good care of them. I like my hearing aids because they are important- they help me hear. Without them it is very hard for me to hear a person talk, unless they speak loudly and clearly. A day would be hard to get by without hearing aids.

Madeline Gustafson 11149 47th Avenue Chippewa Falls, WI 54729 715-720-1439



My name is Jeanne Gustafson and I am the mother of Madeline Gustafson. Madeline was born on February 24, 1995, almost 10 weeks prematurely. She was transferred to an NICU at birth and fortunately, grew and overcame many medical difficulties. At the time, it was routine for the NICU to screen infant's hearing before releasing them to lower level of care nurseries, and Madeline did not pass her hearing screening. After she was transferred to our local hospital, she was more thoroughly tested, and we were told she had a hearing loss. After one more test after her release, we were given the complete results: she has a bilateral loss that is severe to profound hearing at high frequency, moderate hearing loss at medium frequency, and a mild loss at low frequency.



From:

Kemper, John A [kemper5780@mstc.edu]

Sent:

Tuesday, March 17, 2009 10:35 AM

To:

Rep.Cullen

Subject: AB 16, SB 27

We are writing you to express our SUPPORT AB 16, SB 27, in advance of the public hearing on 3/18/2009. This bill which will enable deaf and hard-of-hearing children to have their hearing aids and cochlear implants, essential medical equipment, covered by private health insurance; is long overdue. Parents of children with special needs face many, many challenges. Having to pay thousands and thousands of dollars in out-of-pocket expenses to pay for this essential equipment is one challenge they should not face.

We are parents of a 15 year old autistic deaf-blind boy. His hearing loss is not correctable by aids or implants, therefore this legislation would not directly benefit our family. John's employer is also self-insured and we understand this legislation does not apply to self-insured companies. However, we have witnessed first hand the financial struggles families have faced paying for implants or aids.

Please vote YES and send this bill on for a vote by the whole body.

Sincerely,

John A. and Linda L. Kemper 210 Nob Hill Lane De Pere, WI 54115





Debra Mielke 105 Hidden Ridges Way Combined Locks, WI 54113 (920) 788-5431

Email: rickdeblnk@sbcglobal.net

March 17, 2009

Dear Representative Cullen, Senator Erpenbach, Senator Lassa, and members of the Committee on Health, Health Insurance, Privacy, Property Tax Relief, and Revenue:

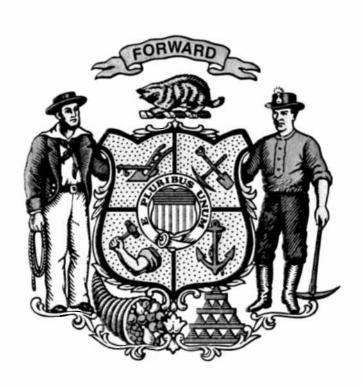
I am writing is strong support of Senate Bill 27 and Assembly Bill 16 to provide insurance coverage for hearing aids and cochlear implants for deaf/hard of hearing children in Wisconsin under the age of 18. Having worked as an educational audiologist in this state for 22 years, I know first hand the turmoil most families go through; not only in dealing with the grief of their child's permanent hearing loss, but then the frustration and sacrifice that typically accompanies the funding efforts for the necessary treatment (hearing aids or a cochlear implant). While lower income families receive coverage for introductory level hearing aid technology and cochlear implants via Medical Assistance, middle income families with private group or individual insurance plans receive little (\$500 per hearing aid) or NO coverage for hearing aids. Why do we deny coverage for these hard working families? In addition, the moderate-income levels of these "typical" Wisconsin families, prevents them from qualifying for most of the hearing aid assistance programs available through hearing aid organizations or service foundations. For approximately five children per school year, I spend hours contacting funding sources, writing letters, talking to dispensing audiologists, and speaking to service groups in hopes of piecing together funding options for my students who need hearing aids. This applies to students initially identified with hearing loss as well as for each subsequent time that replacement hearing aids are needed (children's aids need to be replaced approximately every 5 years).

As an educator, I feel strongly that "unamplified" (via hearing aids or cochlear implant) time is LOST time for each child. The benefits of early identification (mandated newborn hearing screening) are lost if we cannot get appropriate treatment/amplification for our children. The cost of hearing aids are a fraction of the cost of ongoing special education services that will be needed if a child's speech, language, auditory, and social skills are significantly delayed as a result of hearing loss.

Thank you for bringing this bill back and for accepting public comments. I appreciate your dedication to our children's health and education. I will forward this letter to my legislators as well.

Sincerely,

Debra N. Mielke, M.S.



From:

Richard Mielke [rickdeblnk@sbcglobal.net]

Sent:

Tuesday, March 17, 2009 7:36 PM

To:

Rep.Cullen; Sen.Erpenbach; Sen.Lassa

Cc:

acheh95@yahoo.com

Subject:

Fw: Obama Letter -support SB27/AB16

Attachments: stat3806.jpg; stat4639.jpg; stat5414.jpg; stat3806.jpg; stat4639.jpg; stat5414.jpg

Dear Representative Cullen, Senator Erpenbach, and Senator Lassa -

Please see the letter written below by one of my 14 year old hard of hearing students. She wrote the letter to President Obama for a class assignment, but her topic is very appropriate for your committee members to see.

Acheh - great job on this letter!! Thank you for letting me share it with our Wisconsin legislators when they talk about insurance funding for hearing aids tomorrow!

Deb Mielke

--- On Tue, 3/17/09, acheh fonkem <acheh95@yahoo.com> wrote:

From: acheh fonkem <acheh95@yahoo.com>

Subject: Obama Letter

To: mielkedebra@aasd.k12.wi.us, rickdeblnk@sbcglobal.net

Date: Tuesday, March 17, 2009, 7:21 PM



Mrs. Mielke,

Here you go. I typed up my letter, my brother helped me with some grammatical errors and I think I am set for you to read and check it some more. Hope you like it!!

Acheh

Dear, Barack Obama,

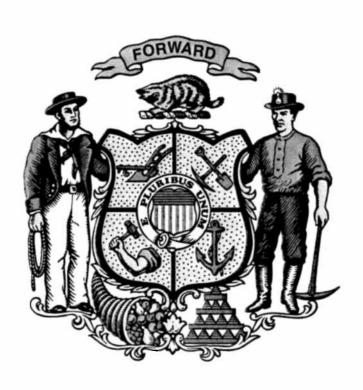
My name is Acheh-leke Fonkem and I am fourteen years old. First off, I would like to congratulate you on becoming the President of the United States of America.

There is something else I wanted to talk to you about. I am hard of hearing meaning I do not hear very well so I

require the use of hearing aids. Just recently, I aguired new hearing aids last January. Do you know how much they cost? They cost about \$1,630 each. The ear molds I think are around the same cost. The cost of hearing aids have increased. My parents had to pay for them out of their pockets. Fortunately, my audiologists, Dr. Holly Rusch-Clothier and Mrs. Debra Mielke suggested searching for companies that might sponsor us. My parents started calling these companies for a few weeks until we got a letter from one of the companies saying that they approved our request and would give us the money for one hearing aid. So that only left us one more hearing aid to get. My audiologist later on found another contributor. The Lions Foundation. They loaned my parents most of the money for my second hearing aid. They still paid \$200, but compared to the total original cost, it was a pretty good deal.

The reason I am writing to you is that I am wondering if you could look into the hearing aid insurance policy and see if you could reduce the cost of hearing aids fro everyone with hearing disabilities. I would very much appreciate it, especially with the worsening state of the economy.

Thank you for your time! Acheh-leke Fonkem





Penny Bernard Schaber

STATE REPRESENTATIVE 57th ASSEMBLY DISTRICT

Serving the heart of Appleton

March 17, 2009

Letter in Support of the Cochlear Implant Bill

I am not able to appear before the committee this morning due to a pre-scheduled Informational Hearing for the Health and Health Care Reform Committee.

As a School Based physical therapist who has seen the very positive impacts of the cochlear implant on students, I want to present my full support for this bill.

The true impact of this bill on a child with a hearing deficit can not be clearly known by those of us who can hear. I have observed children in school before and after the devise is implanted. The joy and excitement on the face of a child who is able to hear because of these devices is indescribable.

Also as a School Based physical therapist I know that the fiscal impact of this bill for the school districts can be very positive. It will allow the school districts to limit the amount of one to one and interpreter assistance that a child needs in school due to a hearing loss. This will save school districts and the state money used to pay for these services.

For these reasons, I would like to submit my full report for this bill.

Respectfully, Lindy Berland Schalin

DISTRICT (920) 739-9001 815 E. Washington St. Appleton, WI 54911 rep.bernardschaber@legis.wi.gov STATE CAPITOL PO Box 8953 Madison, WI 53708 FAX: (608) 282-3657 Toll-free: (888) 534-0057 or (608) 266-3070





My 5 years old son, Dylan, was diagnosed with a sensorineural hearing loss when he was 3 ½ years old. He was ultimately diagnosed with his hearing loss through a sedated Auditory Brainstem Response (ABR) test. Dylan was still under sedation when the audiologist informed us of the severity of his hearing loss and without hesitation she then preceded to tell us that most likely our insurance carrier would not pay for his hearing aids. So as we were trying to grasp the concept that our child had not been hearing us, now we were being told the tools he needed to help him hear would most likely not be covered by our insurance coverage. And she was correct. Our insurance carrier denied him hearing aids. We could not understand why our insurance company was denying him the tools that we were told would help him hear and develop language.

My family was fortunate to be at Children's Hospital where in just a matter of weeks he was fitted with his first pair of hearing aids. Dylan quickly went from saying a few new words to forming sentences all because he had the tools to help him hear and verbally communicate. He adjusted easily to his new world of sound.

It is hard enough to take my son to a hearing test worrying if his hearing is getting worse, but even harder to imagine that if it is he may require a new technical device that I can't afford to buy. As a parent, it is heart aching to be faced with these financial worries along with the stresses of raising a child with a special need.

I don't believe taxpayers would want to pay hundreds of thousands of dollars to educate a child that would need little intervention with the use of hearing aids. My son is now enrolled in 5K and is receiving an exemplary education with normal hearing children. I see the gap between Dylan and his hearing peers closing more and more. Dylan is able to receive the education he not only deserves, but also is entitled to because of his hearing aids. And don't we all tell our children that education is the backbone of everything?

Our expectations for him are no lower than they are for his normal hearing siblings. We do not now nor will we ever accept or expect any less of him. He will be given the same opportunities and advantages in life and will be a contributing member to society. All because of hearing aids.

I am asking you today to support SB27 and AB16. This bill will not only help my son Dylan but the nearly 200 children born each year in the state of Wisconsin who are either deaf or hearing impaired. Hearing should not be a privilege but the right of all children. This is not about politics, but about our children and their future that they not only deserve but they are entitled to receive.

Amy Boehler and Dylan, 5 years old







State of Wisconsin Department of Health Services

Jim Doyle, Governor Karen E. Timberlake, Secretary

> The Assembly Committee on Insurance Hearing on AB 16 and SB 27

Rachel Currans-Sheehan, Legislative Liaison March 18, 2009

Mr. Chairmen, and members of the Committees, thank you for the opportunity to testify today.

Every day, 33 babies (or 12,000 each year) are born in the United States with permanent hearing loss. With 3 of every 1,000 newborns having a hearing loss, it is the most frequently occurring birth defect.¹

Approximately 200 babies are born each year in Wisconsin who are deaf or hard of hearing. Fifty-four percent (54%) of parents surveyed by the Wisconsin Chapter of Hands and Voices did not have insurance that covered any of the cost for hearing aids for their children. The average out-of-pocket expense for hearing aids for these parents is approximately \$4,100. Parents with partial coverage for hearing aids did not fair much better; their out-of-pocket expenses average around \$3,727.

In 1999, the State of Wisconsin passed a bill to support Universal Newborn Hearing Screenings. Wisconsin hospitals are now screening newborns for hearing loss. Since July, 2002 our Department has monitored the mandatory statewide newborn screening program to identify babies with hearing loss. This program has been very successful in identifying babies who may be deaf or hard of hearing and referring families for further testing.

However, screening alone does not benefit the child or family. Identification early is the avenue for providing the habilitative support (i.e. access to amplification) necessary to help the child achieve their potential, and AB 16 and SB 27 will help with the intervention component that is necessary following the identification of hearing loss.

Research shows that when children do not receive early intervention, there are social and economic costs that occur.

Why does this bill make good Public Health sense? "The reason to screen is to intervene!"

Hearing aids and cochlear implants represent a relatively inexpensive intervention considering the amount of benefit gained, especially when calculating the long-term benefits of early intervention, not only to children but to society.

Impact is immediate and life-long. The impact of delayed access to appropriate amplification during the critical time period for speech and language acquisition is severe and irreversible. Delaying access to sound through amplification reduces the child's ability to stimulate neural pathways in the brain. Scientific research indicates that these auditory pathways will re-organize to enhance other senses, such as vision, if not stimulated.

¹ Winte, K. R. (October, 1997). The scientific basis for newborn hearing screening. Issues and evidence, invited keynote address to the Larly Hearing Detection and Intervention (FIIDI) Workshop sponsored by the Centers for Disease Control and Prevention, Atlanta, Georgia.

This bill may prevent disability. Prior to early identification and early access to intervention such as amplification, individuals with hearing loss rarely achieved greater than a fourth grade reading level. We no now that with early identification and access to technology such as hearing aids and cochlear implants, children can develop speech, language, and cognitive functioning commensurate with their hearing peers.²

This bill will save money. Research shows that by the time a child with hearing loss graduates from high school, more than \$400,000 per child can be saved in special education costs if the child is identified early and given appropriate educational, medical, and audiological services. These savings in special education costs will pay for this hearing aid legislation many times over.³

It is important to Wisconsin citizens. Families and their children and ultimately, Wisconsin tax payers will benefit. Families in Wisconsin are struggling to pay for hearing aids and cochlear implants for their children. The Wisconsin Sound Beginnings Program receives several inquiries per month regarding assistance paying for hearing aids and cochlear implants for children. Supporting these children so that they can someday be contributing members of society is good for our state.

An ever-growing body of literature supports early intervention for hearing loss, and the positive impact on speech development and quality of life is large. Wisconsin has been a leader in research in this area, and it makes sense that Wisconsin remain at the forefront of coverage as well.

Thank you.

Harrison, M., & Roush, J. (1996). Age of suspicion, identification, and intervention for infants and young children with hearing loss: A national study. Ear and Hearing, 17, 55-62.

³ White, K. R., & Maxon, A. B. (1995). Universal screening for infant hearing impairment: Simple, beneficial, and presently justified. International Journal of Pediatric Otorhinolaryngology, 32, 201-211.







State of Wisconsin / OFFICE OF THE COMMISSIONER OF INSURANCE

Jim Doyle, Governor Sean Dilweg, Commissioner

Wisconsin.gov

125 South Webster Street • P.O. Box 7873 Madison, Wisconsin 53707-7873 Phone: (608) 266-3585 • Fax: (608) 266-9935 E-Mail: ociinformation@wisconsin.gov Web Address: oci.wi.gov

Testimony of Commissioner Sean Dilweg
To the Senate Committee on Health, Health Insurance, Privacy, Property Tax
Relief and Revenue

The Assembly Committee on Insurance SB 27 and ASA 1 to AB 16 March 18, 2009

Chairmen Erpenbach and Cullen and Members of the Committees:

Thank you for the opportunity to testify on Senate Bill 27 and Assembly Substitute Amendment 1 to Assembly Bill 16, relating to health insurance coverage of hearing aids and cochlear implants for children under the age of 18.

Advocates and professionals serving children with hearing loss point to hospital newborn hearing screening programs as critical to early identification, but also emphasize access to hearing instruments and cochlear implant devices as a key factor in helping identified children avoid delayed communication, learning and social skills.

The Department of Health Services indicates that approximately 200 babies are born each year with hearing problems severe enough to require hearing aids or cochlear implants. However, several large group health insurers specifically exclude coverage for hearing aids and implantable hearing devices.

For many families, it is difficult to cover the full cost of hearing aids or cochlear implants, in some cases leading to delayed access for children or the purchase of hearing aids designed to meet a child's most basic hearing needs. The bills before you today will help ensure more children have improved access to cochlear implants and hearing aids suited to meet their needs for optimal speech and language skill development. According to the Coordinator of the Koss Cochlear Implant Program at the Medical College of Wisconsin, receipt of cochlear implants soon after the age of one often results in children developing speech and language skills like children born with the ability to hear.

Information from the Wisconsin Hospital Association Information Center, LLC, indicates 15 records with cochlear implant-related procedure codes for patients under the age of 18 in the period 4th quarter 2007 through 3td quarter 2008. The average charge on those records was \$60,585 dollars. Given the Wisconsin Hospital Association does not receive explicit patient identifiers; the 15 records may not represent 15 separate patients. Also, the data includes the cost of the operating room, nursing care, room charges and pre- and post-operative care but does not include the surgeon's professional charges.

A more detailed social and financial analysis from my office is forthcoming.

Thank you again for this opportunity to testify on SB 27 and ASA 1 to AB 16.

Sincerely,

Sean Dilweg Commissioner



March 18, 2009

Monica & Ryan Dull 901 Sunset Bay Waunakee, WI 53597 (608) 850-4278

Hello. My name is Monica Dull. My husband Ryan and I are the parents of Sara Dull who will be 3 years old May 9, 2009. Sara was diagnosed back in 9/08 with a mild to moderate sensorineural hearing loss. Sensorineural means that this hearing loss is permanent. We SUPPORT Senate Bill 27, Assembly Bill 16, which will allow children who are deaf and hard of hearing to get hearing aids and cochlear implants covered by health insurance.

This issue is very important to us because our daughter Sara could not function without her hearing aids. She cannot hear the sound of soft letters as (S, F, TH, etc). Imagine trying to have a conversation with someone without being able to hear these sounds. You would only be able to hear and understand about 40% of the conversation. The first thing Sara says when she gets up in the morning or after her nap is "Hearing in." She knows that with her hearing aids, she can hear much better.

Sara passed her new born hearing screening. Somewhere between birth and 2 years old, she started to loose her hearing. She was diagnosed with a sensorineural hearing loss at 2 years old. We found out through our insurance that her hearing aids were only covered a couple hundred dollars per aid. So that meant that my husband and I had to come up with a few thousand dollars on our own. That was a shock to us to find this money in order for our daughter to hear. We did not qualify for any grants or assistance. So we were on our own to buy the hearing aids out of pocket. When you are raising a family, coming up with 4 thousand dollars is a very scaring place to be.

A fact that is hard for us to deal with is that a sensorineural hearing loss is permanent. It will not get better. At this point we do not know if Sara's hearing will become a progressive hearing loss where her hearing could get worse over time. Having hearing aids covered by health insurance would make the blow of this possibility a little easier to deal with knowing the financial burden would be covered.

Thank you for your time,

Monica & Ryan Dull