

112TH CONGRESS  
1ST SESSION

# H. R. 2140

To amend title XVIII of the Social Security Act to provide Medicare beneficiaries coordinated care and greater choice with regard to accessing hearing health services and benefits.

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## IN THE HOUSE OF REPRESENTATIVES

JUNE 3, 2011

Mr. ROSS of Arkansas (for himself, Mr. HEINRICH, Mr. LATHAM, Mr. QUIGLEY, Mr. HIMES, Mrs. EMERSON, Mr. VAN HOLLEN, Ms. TSONGAS, Mr. SIMPSON, Mr. BARROW, Mr. MCGOVERN, and Mr. CHANDLER) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To amend title XVIII of the Social Security Act to provide Medicare beneficiaries coordinated care and greater choice with regard to accessing hearing health services and benefits.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Medicare Hearing  
5 Health Care Enhancement Act of 2011”.

1 **SEC. 2. FINDINGS.**

2 Congress finds the following:

3 (1) Approximately 30,000,000 Americans expe-  
4 rience some degree of hearing loss and by 2030 that  
5 number is expected to increase to 78,000,000 Ameri-  
6 cans.

7 (2) Hearing impairment is one of the most  
8 common conditions affecting older adults, with ap-  
9 proximately 33 percent of Americans aged 60 years  
10 and over and 40 to 50 percent of those aged 75  
11 years and older experiencing hearing loss.

12 (3) Hearing loss is a major barrier to partici-  
13 pating in society, both economically and socially.

14 (4) Hearing loss among senior citizens, if left  
15 untreated, can result in isolation and depression.

16 (5) The Department of Veterans Affairs allows  
17 veterans to directly access audiologists and has re-  
18 ported that this policy, adopted in 1992, provides  
19 high-quality, efficient, and cost-effective hearing  
20 care.

21 (6) The Office of Personnel Management allows  
22 Federal employees and Members of Congress to di-  
23 rectly access audiologists through the Federal Em-  
24 ployees Health Benefits Program.

25 (7) Audiologists are licensed in each State and  
26 the District of Columbia and the scope of services

1 furnished by audiologists is determined by each ju-  
2 risdiction involved.

3 (8) Consistency in federal policy with respect to  
4 hearing health services should be encouraged to the  
5 greatest extent possible.

6 (9) Audiologists hold Master's or Doctoral De-  
7 grees in audiology, completing university training  
8 programs which provide for rigorous theoretical and  
9 clinical education on evaluation, diagnosis, and  
10 treatment.

11 (10) As of January 1, 2010, audiologists are  
12 categorized under a unique broad occupation cat-  
13 egory within the Standard Occupational Classifica-  
14 tion (SOC) system to better reflect the diagnostic  
15 and treatment nature of the services they provide.

16 **SEC. 3. ENABLING MEDICARE BENEFICIARIES TO HAVE**  
17 **THEIR CHOICE OF QUALIFIED HEARING**  
18 **HEALTH CARE PROVIDERS.**

19 Section 1861(l)(3) of the Social Security Act (42  
20 U.S.C. 1395x(l)(3)) is amended by inserting before the  
21 period at the end the following: “, without regard to any  
22 requirement that the individual receiving the audiology  
23 services be under the care of (or referred by) a physician  
24 or other health care practitioner or that such services are

1 provided under the supervision of a physician or other  
2 health care practitioner”.

3 **SEC. 4. INCLUSION OF AUDIOLOGY SERVICES AS MEDICAL**  
4 **SERVICES UNDER MEDICARE PART B; PAY-**  
5 **MENT FOR SUCH SERVICES.**

6 (a) IN GENERAL.—Section 1861(s)(2) of the Social  
7 Security Act (42 U.S.C. 1395x(s)(2)) is amended—

8 (1) in subparagraph (EE), by striking “and” at  
9 the end;

10 (2) in subparagraph (FF), by inserting “and”  
11 at the end; and

12 (3) by adding at the end the following new sub-  
13 paragraph:

14 “(GG) audiology services (as defined in sub-  
15 section (ll)(3));”.

16 (b) PAYMENT UNDER THE PHYSICIAN FEE SCHED-  
17 ULE.—Section 1848(j)(3) of such Act (42 U.S.C. 1395w-  
18 4(j)(3)) is amended by inserting “(2)(GG),” before “(3),”.

19 **SEC. 5. CONSTRUCTION; EFFECTIVE DATE.**

20 (a) CONSTRUCTION.—Nothing in the amendments  
21 made by this Act shall be construed to expand the scope  
22 of audiology services for which payment may be made  
23 under title XVIII of the Social Security Act on December  
24 31, 2010.

1           (b) EFFECTIVE DATE.—The amendments made by  
2 this Act shall take effect with respect to services furnished  
3 on or after January 1, 2012.

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