

Georgia Commission on Hearing Impaired and Deaf Persons
Tuesday, March 16, 2016
1:30 p.m. – 4:30 p.m.
Auditory Verbal Center
1901 Century Place #20
Atlanta, GA 30345

Meeting Minutes

Members Present: Dr. Jiovanne Hughart, Mr. Jim Lynch, Dr. Beth Lytle, Ms. Cathy Torie and Mr. Comer Yates

Members Absent: Mr. Chuck Leavell, Ms. Mary Reed

Staff Present: Ms. Katherine Cadena

The meeting was called to order by Mr. Yates at 1:45.

Mr. Yates thanked everyone for attending. He is working with the Governor's Office on changing the name of the Commission to The Commission for Persons who are Deaf or Hard-of-Hearing.

A motion was made to approve the minutes from the meeting held on February 10, 2016. The motion was seconded and passed.

Mr. Yates thanked Ms. Kelly Jenkins, with Let Georgia Hear, for her commitment to ensuring children have access to hearing aids through mandated insurance coverage. Mr. Yates encouraged members to ask questions regarding Let Georgia Hear. Ms. Jenkins thanked Dr. Beth Lytle for her assistance with receiving and sharing information retained by the Georgia Department of Community Health. Ms. Jenkins collaborates with Ms. Sarah Cogan, another mom with a child who is hard-of-hearing. They worked with the Senate, specifically Senator Charlie Bethel, who was the lead senator for the Autism Bill. She presented the White Paper to Senator Bethel, which contained substantiated data that showed children who received early intervention would cost the state \$420,000 less within their lifetime for special education and one million dollars within a lifetime of taxes, employment and other social issues. A panel of doctors was also present. Senator Bethel will sponsored Resolution 1091, which allows a special study within the senate to review both the cost of legislation and the State of Georgia for children's hearing aids. It is called a Committee on Hearing Aids for Children. It will be comprised of five members of the Senate with two of those members from the minority party. The resolution would require a report to be completed by the end of June or July. The end goal would be that the study would support legislation to require insurance companies to cover hearing aids for children. Last year, Governor Deal added \$800,000 to the State Health Benefit Plan, which covers approximately 600k employees, to allow the purchase of hearing aids for children. However, up until recently, the actual dollar amount of claims was not known. Dr. Lytle stated she and Ms. Jenkins met with Ms. Roberta Green at the Georgia Lions Lighthouse Foundation. Together, they

want to form a work group to discuss ideas to reach families not impacted by legislation who need hearing aids. A motion passed to contact Senator Bethel's office to express support of the resolution for a study committee.

Ms. Cheryl Williams with the Georgia Department of Community Health, State Health Benefit Plan (SHBP) gave the Commission an overview of the hearing aid program. They spent \$115K from January through November 2015. Fifty-six children accessed the benefit. Sixty-eight percent didn't cap at the \$3000 limit. The \$3000 benefit does not include the fitting. They are allowed a hearing aid every five years, however, if they did not use the full \$3,000 then the remainder is available for them to use during that five year period. Debbie Brillling, with the Auditory Verbal Center stated Medicaid allows for new hearing aids every three years and reimburses \$1,268 per aid. Ms. Williams stated that there is not a limit on the number of children who can access the benefit, only on the amount that will be reimbursed during a five year time period. In 2014, approximately 48 children accessed the benefit. Dr. Lytle stated that in 2015, SHBP members aged 0-18 was 121,286. Sixty-four patients accessed the hearing aid coverage benefit. Dr. Stacey Tucci from Georgia Pathway to Literacy stated that 150-250 children born in Georgia each year are identified with hearing loss. Ms. Brillling said Medicaid allows for \$1268 per aid and an automatic three year warranty against loss of damage. Ear molds are covered as well. Ms. Williams stated the SHBP is self-funded. Premiums and costs that are paid by the employers and members are put into a bucket of funds and those funds are allotted and allowed. If there are additional funds, like the \$800,000 that was earmarked, they would be added. The money comes from premiums paid in and member contributions. The \$800,000 is not capped, it is a supplement and represents the increase. If the Commission wants the SHBP to consider offering the hearing aids every three years, instead of five, it would take a legislative change.

Dr. Tucci stated there is not a population density map of children who have been identified with hearing loss. Ms. Williams stated only around 20 children accessed the benefit of cochlear implants in 2015, but it is covered as a standard item and there's no limit on that. There is no census on the number of implants done in Georgia per year. Ms. Williams explained the different plans and the deductibles for each plan.

Ms. Roberta Green spoke on behalf of the Georgia Lions Lighthouse Foundation, GLLF. All members received packets with information, including the annual report and services offered. GLLF was originally founded to provide vision surgeries for children. In 2007, the GLLF started the hearing aid program. The program is funded in part by the Public Service Commission, PSC. From this year to date, they have serviced 1,493 persons. Funding for the adult hearing aid program is at \$450 per month. Because that's not enough to cover the costs associated with the program, they have sought funding through other avenues, such as grants and individual donations. The gap is increasing on the adult program. When the pediatric program started, the goal was to service 100 children. The first year, fifty children received hearing aids. Fourteen couldn't provide the co-pay, but GLLF waived the payments. The cap on hearing aids in the program is \$3,240 for children. The reimbursement rate is \$450 for adults and the provider (audiologist) receives \$175. There is a large inequity in the adult v. child program. The money comes from an .11 cent tax from each land line telephone. That money is given to the PSC and the PSC, in turn, gives GLLF a portion of that to provide hearing services for Georgians. To fund the pediatric program, GLLF went to PSC and asked them to increase the penny tax. At this time,

PSC does not have an interest to increase the funding for the adult program. The pediatric hearing providers are reimbursed \$1,800. There is a great need to increase the funding so that the GLLF can provide services to the adult population in Georgia. GLLF is working with hearing aid manufacturers for negotiated rates.

A discussion ensued regarding Medicaid and Peach Care and other costs associated with hearing loss, such as auditory verbal therapy, speech therapy, occupational therapy, FM systems, etc. Medicaid fraud was also discussed. The Commission discussed ideas for outreach regarding both the GLLF and SHBP hearing aid programs. Hearing loss is an urgency.

Dr. Tucci discussed Georgia Pathway to Language and Literacy. Every child in Georgia who is deaf or hard-of-hearing will be on a trajectory to read proficiency by the third grade by 2020. Dr. Tucci gave a brief introduction of herself and the project. Researchers say that a reading brain is not born, but it is built through transactions starting in the last trimester of pregnancy and the first eight years of life. Dr. Tucci reviewed the strategic plan for Pathway. She discussed the 100 Babies Project, a collaboration with the Georgia Department of Public Health, DPH, and Dr. Brenda Fitzgerald, Commissioner for DPH. The 100 Babies Project is a birth to literacy plan. It outlines the steps of action and transactions that need to happen for children who are born in Georgia with hearing loss in order for them to be on grade level reading at third grade. The program is about language, without regard to modality. Adults need to change behaviors or access information or build capacity. The Better Brains for Babies initiative, also out of DPH, was discussed. Atlanta and the rest of Georgia and resources allocated across the state were discussed. The health disparities and general access disparities between children who are deaf and/or hard-of-hearing and those who are hearing is large. Georgia children who can hear still only have a one in five chance of being literate. Variability in outcomes is determined by socioeconomic status. The book: 30 Million Words by Dana Suskind was discussed. The Commission is invited to a program at the Speech School on April 14. The speaker is a public policy leader and expert on early brain development in babies. Pathway is working on a pilot in South Georgia through a collaboration with Children's Healthcare of Atlanta, CHOA. They are also working with the Marcus Center on tele therapy and tele coaching practices. Pathway created a Medicaid White Paper.

Dr. Hermanns was not present for the meeting, but Commission members were given a copy of the PowerPoint regarding the pilot program for texting for follow-up for babies who did not pass the EHDI screening. In summary, texting parents is effective in having them schedule follow-up appointments from newborn hearing screenings. It is significantly different by districts and payment source, but not by race. Children on Medicaid had the highest percentage of not completing follow-up after texting.

Dr. Hughart discussed Adopt-A-Band. She's awaiting a petition and a letter to the independent schools will be the first action.

There were no updates on Looping, but Mr. Lynch plans to meet with the other interested persons within the next three weeks.

Ms. Torie will contact Ms. Greene with GLLF to discuss next steps.

Ms. Cadena will send out action items discussed in the meeting.

Mr. Yates thanked Ms. Brillling for hosting the meeting.

A motion was made to adjourn the meeting. It was seconded and passed. The meeting was adjourned at 4:30.