

**NEW YORK STATE
MEDICAID PROGRAM**

**HEARING AID/AUDIOLOGY
MANUAL**

POLICY GUIDELINES

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Section I - Requirements for Participation in Medicaid

Services Provided to Patients Under 21 Years of Age

Audiology services and hearing aid services provided to eligible patients **under 21 years of age** shall be performed in a **speech and hearing center** *certified by the Physically Handicapped Children's Program*.

Hearing aid services ordered or recommended by such an approved speech and hearing center may be provided by a **qualified hearing aid dealer** or **audiologist/hearing aid dealer**.

Audiometric hearing screening {Screening test, pure tone, air only (Child/Teen Health Plan only)} may be provided by a qualified audiologist when the patient is:

- between the **ages of 3 and 21**,
- identified as eligible for services under the Child/Teen Health Plan (CTHP), and
- referred by a licensed physician enrolled as a CTHP provider.

Services Provided to Patients 21 Years of Age and Over

Audiology services to eligible patients **21 years of age and over** may be provided:

- in an approved speech and hearing center,
- in an Article 28 facility, or
- by a self-employed or salaried audiologist or audiologist/hearing aid dealer or
- by audiologists in group practice.

Hearing aid services to eligible patients **21 years of age and over** may be provided:

- in an approved speech and hearing center,
- in an Article 28 facility, or
- by a hearing aid dealer or audiologist/hearing aid dealer.

Written Statements Required

1. Audiology services shall be supported by a written statement of a physician referring the patient to a qualified audiologist.

The written referral must be maintained with the patient record.

2. Hearing aid services shall be supported by written results of audiometry or equivalent testing as required by a hearing aid recommendation or prescription signed by a qualified audiologist or licensed otolaryngologist.

At the end of the trial period, a statement of an audiologist, primary care giver or the patient himself/herself, providing verification of benefit from use of the hearing aid is required.

Should the patient fail to return and provide such written confirmation, a written explanation from the dispenser may be used in lieu of this confirmation-of-benefit to support billing and for entry into the patient record.

These documents must be maintained with the patient record.

3. A statement of patient rights and obligations shall be provided to the patient by the hearing aid dispenser at the time the hearing aid is dispensed.

This statement shall be signed by the patient, with a copy maintained in the records and shall explain that the thirty days immediately subsequent to dispensing of the hearing aid constitutes a trial period for that aid.

Such statement shall explain the patient's obligation to return to the dispenser for:

- ▶ all necessary adjustments and calibrations of the hearing aid during the 45-day trial period and
- ▶ provide written confirmation of benefit from use of the hearing aid; or
- ▶ to ultimately return an unsatisfactory hearing aid.

Record Keeping Requirements

Hearing aid dealers must meet the record-keeping requirements outlined in **Information For All Providers, General Policy**, available online at:

<http://www.emedny.org/ProviderManuals/AllProviders/index.html>.

Hearing aid dealers must maintain at each of their business locations the records specified in the Official Codes, Rules and Regulations of the New York State (NYS) Department of State available at:

<http://www.dos.state.ny.us/lcns/lawbooks/hearing.htm>.

Out-of-State Prescribers

For persons **21 years of age and older**, out-of-state audiologist, otolaryngologists and health care facilities licensed by the appropriate agency in that state may issue written recommendations for hearing aids for Medicaid recipients. *All such recommendations however, are subject to the prior approval.*

*For persons **under 21 years of age**, all hearing aid recommendations must originate from an approved speech and hearing center.*

Out-of-State Dispensers

In order to participate in the New York Medicaid Program, out-of-state hearing aid dispensers must be enrolled in the New York State Medicaid Program.

Section II - Hearing Aid/Audiology Services

The Medicaid Program provides payment for:

- ▶ audiology services,
- ▶ audiometric screening, and
- ▶ hearing aid services and products

that are furnished to eligible patients, when medically necessary, to alleviate disability caused by the loss or impairment of hearing.

In order to assure that a patient receives maximum and continuing benefit from the use of a hearing aid, there must be a written recommendation from an otolaryngologist or an audiologist for a hearing aid which conforms to the requirements outlined in this policy manual.

The program also provides payment for hearing aid repairs and replacement of accessories when necessary to maintain a patient's hearing aid in functional order.

1. Audiology services shall be made available by a qualified audiologist upon referral of a licensed physician for audiometric examination and testing and, if necessary, a hearing aid evaluation.

A referral is not required for a conformity evaluation.

2. Audiometric hearing screening {Screening test, pure tone, air only (CTHP only)} may be provided by a qualified audiologist when the patient is:
 - ▶ between ages 3 and 21,
 - ▶ identified as eligible for services under the CTHP, and
 - ▶ referred by a licensed physician enrolled as a CTHP provider.
3. Hearing aids shall be made available based upon the results of an audiometric examination or testing by a qualified audiologist or otolaryngologist.

Hearing Aid Recommendation Requirements

All recommendations for hearing aids for Medicaid-eligible patients must be in compliance with Article 37 of the NYS General Business Law.

The written recommendation must indicate that the recipient is in need of a hearing aid and include the results of pure tone and speech (clinical) audiometry conducted in a sound treated room and/or test suite meeting the American National Standard Institute's specifications.

The otolaryngologist or qualified audiologist may either write a general recommendation for a hearing aid, or prescribe a specific device by indicating manufacturer and model required.

In support of a prescription for a specific hearing aid, sound field speech audiometry or equivalent testing methods must be performed. These tests must be conducted by or under the direction and personal supervision of an otolaryngologist or licensed audiologist. When a specific device is prescribed, the dealer must dispense as written.

When a general recommendation is made, the hearing aid dealer may perform hearing measurements by means of an audiometer or other testing equipment used solely for the purpose of selecting, fitting or dispensing an instrument designed to aid or improve human hearing.

Hearing aids must be dispensed within six months of the date of the recommendation.

Source of Recommendations for Persons Under 21

All written recommendations for hearing aids for Medicaid patients **under 21 years of age** must come from speech and hearing centers approved to provide services under the PHCP.

The written recommendation must be signed by an otolaryngologist or qualified audiologist.

Note: For persons *under 21* residing in New York State Developmental Centers or OMRDD-certified residences, the recommendation for a hearing aid may come from either an approved speech and hearing center or from a Developmental Center's employed or consultant audiologist.

Source of Recommendations for Persons 21 Years of Age and Older

It is expected that the services of speech and hearing centers approved by the PHCP will be sought when an adult Medicaid patient requires a hearing aid recommendation.

A written recommendation from an otolaryngologist, or qualified audiologist in private practice, group practice, employed by a hearing aid dealer or employed by an Article 28 Facility that is certified to render speech and hearing or audiology service is sufficient in cases involving adults.

Who May Dispense Hearing Aids – For-Profit Providers

A person, partnership, association, organization, or corporation formally registered under the provisions of Article 37 of the General Business Law, with the NYS Department of State as a hearing aid dealer, and enrolled in the Medicaid program, may

dispense hearing aids to recipients in accordance with the *Hearing Aid/Audiology Services Fee Schedule*, available online at:

<http://www.emedny.org/ProviderManuals/HearingAid/index.html>.

The Secretary of State's approval of an application is contingent upon the applicant's compliance with specific standards. While this Manual elaborates on some, it does not discuss all of these requirements in detail. They may be found in their entirety in the Official Codes, Rules and Regulations of the Department of State, available at:

<http://www.dos.state.ny.us/lcns/lawbooks/hearing.htm>.

Hearing aid dealers must continue to comply with these regulations. Failure to abide by these regulations will cause a hearing aid dealer to have his/her certificate of registration revoked. *When this occurs, the hearing aid dealer automatically forfeits the right to participate in the Medicaid Program.*

Who May Dispense Hearing Aids - Not-for-Profit Providers

Under the Medicaid Program, hearing aid devices and accessories may be dispensed on a not-for-profit basis by a licensed otolaryngologist or certified speech and hearing center which is approved to render services under the PHCP, or by an Article 28 Facility that is eligible to participate under Title XVIII of the Social Security Act and is certified to render speech and hearing or audiology services.

When the costs are not included in the facility's rate, reimbursement for hearing aids will be made at the lower of the price charged by the facility to the general public or the acquisition cost.

Reimbursement for accessories, earmolds and hearing aid batteries will be made at the lowest of the price charged by the facility to the general public or the facility's acquisition cost or the State Maximum Fee Schedule amount.

The administrative and dispensing fees contained in the State Fee Schedule will **not** be paid to not-for-profit facilities.

Facilities may bill for visits at the established clinic rate to cover reasonable and necessary costs for the dispensing of the aid.

Physically Handicapped Children's Program

For Medicaid eligible persons **under age 21** who are receiving care under the auspices of the PHCP, the provider of care is required to comply with PHCP policies.

Section III - Basis of Payment for Services Provided

Audiology services and audiometric screening and hearing aid services shall be reimbursed in accordance with the fee schedule set forth in the NYS Fee Schedule for Hearing Aid/Audiology Supplies and Services.

The fee schedule is available online at:

<http://www.emedny.org/ProviderManuals/HearingAid/index.html>.

Dispensing Fee

The dispensing fee includes, but is not limited to the following, for the life of the hearing aid under normal use:

- all repairs and/or replacement of defective parts plus labor, and
- cleaning by original dispenser,
- all fittings,
- all adjustments,
- all instructions to the recipient in the use of the device,
- a garment bag, if applicable, and
- a one month supply of batteries.

The dispensing fee, as listed on the fee schedule shall be payable to all qualified hearing aid dispensers.

Claims

The claim for the hearing aid, dispensing fees may be submitted upon provision of the aid.

If it is determined during the trial period that the patient will not keep the aid, the claim for the returned aid must be voided and the claim for the dispensing fee code must be adjusted to deduct the amount indicated as “dispensing” in the description of the dispensing fee procedure code.

The dispenser is entitled to retain the payment for the fee portion in such circumstances. The dispensing fee is applicable for the initial or replacement aid and may only be billed by a for-profit dealer.

Only the administrative fee (not the dispensing fee) is applicable for replacement of lost or stolen aids within the manufacturer’s warranty.

Reimbursement

Reimbursement shall be made for the acquisition cost of hearing aid(s), supported by a copy of the invoice.

- The invoice supporting the acquisition cost of a hearing aid shall list the following information for the hearing aid for which reimbursement is requested:
 - ▶ the brand name,
 - ▶ the model number, and
 - ▶ the serial number.

Reimbursement as listed on the fee schedule shall be made to qualified audiologists for a hearing aid evaluation and hearing aid check to confirm benefit from the aid, provided that the audiologist is not the dispenser of the aid and, therefore, ineligible for a dispensing fee (which includes payment for these services).

When benefit of a hearing aid cannot be confirmed and the aid is returned to the dispenser, payment for that aid and the dispensing fee is forfeited.

When benefit can not be confirmed because the patient does not return the aid to the dispenser, the dispensing fee is forfeited and the acquisition cost of the aid may be reimbursable when requests are supported by documentation of reasonable attempts by the dispenser to provide continuity of service.

Should a patient lose eligibility after an earmold(s) and/or hearing aid is ordered but before it is dispensed, Medicaid reimbursement will be made only for the earmold(s).

Hearing Aid Coverage Criteria

Medicaid reimbursement for hearing aids is dependent upon the following criteria, **regardless of order source:**

- **Monaural Hearing Aid**
 - ▶ Hearing loss in the better ear of 30 dBHL or greater (re - ANSI 1969) for the pure tone average of 500, 100 and 200Hz.
 - ▶ A spondee threshold in the better ear of 30 dBHL or greater when pure tone thresholds cannot be established.
 - ▶ Hearing loss in each ear is less than 30 dBHL at the frequencies below 2,000 Hz and thresholds in each ear are greater than 40 dBHL at 2,000 Hz and higher.

- ▶ Documentation of communication need and a statement that the patient is alert and oriented and able to utilize their aid appropriately.
- **Binaural Hearing Aid**
 - ▶ Same as the criteria for Monaural Hearing Aid plus one or more of the following:
 - significant social, vocational or educational demands;
 - previous user of binaural hearing aids;
 - significant visual impairment;
 - children.
 - ▶ *FM Systems are not reimbursable by Medicaid.*

Prior Approval/Authorization Requirements for Persons Under 21 Years of Age

Prior approval of the local PHCP Medical Director is required for all hearing aid services furnished to patients **under 21 years of age**. Recommendations for hearing aids for patients under 21 must be obtained through an approved speech and hearing center.

Note: For patients *under 21* residing in New York State Developmental Centers, the recommendation for a hearing aid may come from either an approved speech and hearing center or from the Developmental Center.

How to Obtain Prior Approval for Persons Under 21 Years of Age

For information, contact the PHCP at the address/telephone number indicated in **Information For All Providers, Inquiry**, available online at:

<http://www.emedny.org/ProviderManuals/AllProviders/index.html>.

Prior Approval/Authorization Requirements for Persons 21 Years of Age and Older

When recommended by an otolaryngologist, qualified audiologists, out-of-state prescribers or facilities licensed and certified under Article 28 of the Public Health Law to provide speech and hearing or audiology services, prior approval of the local Professional Director shall be required for all:

- administrative fees,
- hearing aid(s),
- dispensing fees,
- special fittings and
- repairs costing \$70 or more.

When hearing aids and special fittings are recommended by speech and hearing centers certified by the PHCP, prior approval is not required for these items or for the administrative and dispensing fees.

Repairs costing \$70 or more and batteries not listed in the Fee Schedule shall require prior approval regardless of the source of the order.

How to Obtain Prior Approval for Persons 21 Years of Age and Older

Prior approvals are obtained by submitting eMedNY form 283201 to Computer Sciences Corporation. For complete instructions, see Prior Approval Guidelines available at:

<http://www.emedny.org/ProviderManuals/HearingAid/index.html>.

Section IV - Definitions

For the purposes of the Medicaid Program and as used in this Manual, the following terms are defined to mean:

Article 28 Facility

An article 28 facility is a health facility as defined under Article 28, Section 2805 of the Public Health Law.

In the context of this Manual, the Article 28 facility must be certified to provide speech and hearing services or audiology services.

Audiologist/Hearing Aid Dealer

An audiologist/hearing aid dealer is an individual who, in addition to being licensed to practice audiology, is also duly registered with the NYS Department of State, pursuant to Article 37, Section 781(a) of the General Business Law.

Audiologist/hearing aid dealer also refers to a qualified hearing aid dealer who employs a qualified audiologist(s).

Audiology Services

Audiology services refer to and include:

- audiometric examination or testing,
- hearing aid evaluation,
- conformity evaluation and
- hearing aid prescription or recommendation if indicated.

Child/Teen Health Plan

The Child/Teen Health Plan (CTHP) is New York State's voluntary preventive health program for children **under the age of 21** as described in 18 NYCRR Part 508.

Hearing Aid Services and Products

Hearing aid services and products shall be provided in compliance with Article 37 of the General Business Law.

Services shall include hearing aid:

- selection,

- fitting,
- dispensing,
- checks following dispensing, and
- repairs.

Products shall include:

- hearing aids,
- earmolds,
- batteries,
- special fittings and
- replacement parts.

Otolaryngologist

An otolaryngologist is a licensed physician who is qualified to engage in the practice of otolaryngology by reason of having passed, or received training acceptable for admission to the examination of the American Board of Otolaryngology.

Such a physician normally confines his/her practice to the problems of the ears, pharynx, larynx, nasopharynx, and the tracheo-bronchial tree.

Qualified Audiologist

To participate in the Medicaid Program, an audiologist must be licensed and currently registered to practice audiology in by the NYS Education Department.

Audiology services provided to Medicaid-eligible patients while temporarily out-of-state shall be provided by audiologists qualified to practice audiology by the appropriate licensing agency of the state in which the audiology services are provided.

Qualified Hearing Aid Dealer

A qualified hearing aid dealer is any person, partnership, association or corporation engaged in the selecting, fitting and dispensing of hearing aids and currently registered in NYS by the Department of State pursuant to Article 37, Section 781(a) of the General Business Law may be qualified to participate in the Medicaid Program.

Hearing aids and related services provided to Medicaid-eligible patients while temporarily out-of-state shall be provided by hearing aid dealers properly meeting the registration requirements of the appropriate agency of the state in which the hearing aids and related services are provided.

Replacement Hearing Aid

A replacement hearing aid is a device that is recommended because a recipient attests to the fact that his original device was:

- lost, stolen, or damaged and
- is outside the manufacturer's warranty; or
- to a device that is recommended due to a measurable change in the recipient's hearing loss.

Speech and Hearing Centers Approved by the NYS Physically Handicapped Children's Program

Pursuant to Title V, Article 25 of the Public Health Law, Section 2580, Physically Handicapped Children, the DOH is authorized to approve speech and hearing services in health facilities and to designate facilities meeting the highest professional standards as eligible to provide services to children in the PHCP.

Because of the scope of services in these facilities and the professional staff available through these facilities, their use is recommended as the referral agency under the Medicaid program.

A list of these approved centers may be obtained by calling the *Growing Up Healthy Hotline* at:

(800) 522-5006.