

NC Division of Services for the Blind Policies and Procedures Independent Living Older Blind

Hearing Aid Rate Schedule

Current effective date: 08/24/2020

North Carolina Division of Services for the Blind (DSB) shall reimburse for hearing aid(s), Assistive Listening Devices, and related services according to the limits and procedures established within this policy. Rates are statewide fees for services that are established by the Division of Medical Assistance using the prevailing Medicaid rates. DSB will utilize those hearing aid vendors who provide a full range of services and who are approved vendors of the State Agency. Approved vendors are those vendors who have successfully completed and returned the Hearing Aid Agreement (On-Line DSB-4048 Hearing Aid Agreement with instructions). This includes servicing of aids dispensed and providing loaner aids.

Physicians who meet this requirement can provide otological and hearing aid evaluations and dispense hearing aids. DSB payment will not exceed the cost indicated on the manufacturer's invoice to the vendor and will cover the costs of shipping and handling of aids. Charges for warranty and 24-hour service will not be covered.

DSB recognizes that Medicare does not cover routine hearing exams, hearing aids, or exams for fitting hearing aids and NC Medicaid does not cover hearing aid services for beneficiaries 21 years of age and older. Therefore, it is not necessary to consider Medicare or NC Medicaid as comparable benefits in these circumstances. Counselors should work with clients to review private insurance policies with regard to hearing aids benefits and if available, work with the vendor to utilize any comparable benefit.

Vocational Rehabilitation Counselors must contact the approved vendor prior to issuing an authorization in order to determine the manufacturer's invoice cost of the aid (s) being purchased, the cost of the custom ear mold and the wholesale cost of batteries. DSB will itemize the fees for each of the above items plus the dispensing on DSB's authorization form in the space labeled "Other."

Example:

Brand and type, manufacturer's invoice cost	\$xxx.xx
Dispensing fee (V5090)	\$xxx.xx
One package of batteries	\$xx.xx
Custom ear mold (V5264), manufacturer's invoice cost	\$xx.xx
Total	\$x,xxx.xx

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The approved vendor must provide a copy of the manufacturer's invoice showing the serial number of the aid and submit a bill listing the hearing aid's serial number, manufacturer's cost, dispensing fee, manufacturer's invoice cost of the ear mold and the wholesale cost of the batteries (limited to 6).

Fee Schedule: The Agency will reimburse the following amount for hearing aid(s) and related services:

1. New hearing aid(s);

Manufacturer's invoice cost of the hearing aid(s) at the single unit price of the aid(s) monaural V5050 and Binaural V5130; plus,

- a. Manufacturer's invoice cost of the ear mold(s) (V5264); plus,
- b. Manufacturer's cost to the dispenser of other accessories designated on the authorization such as a telecoil (V5267) (not to exceed Medicaid rate); dry aid kit (V5267) invoice cost; plus,
- c. Wholesale cost of one package of batteries (V5266), limited to 6; not to exceed Medicaid rate; plus,
- d. A dispensing fee not to exceed Medicaid rate (V5090) for monaural or Medicaid rate (V5110) for binaural fitting.
- e. An ear mold impression fee (not to exceed Medicaid rate) (V5275).

Telecoils

When appropriate, ALL hearing aids purchased by the Agency should have a telecoil switch (T-switch). The "T-switch" functions like an antenna for the hearing aid, providing direct amplification from the electromagnetic energy of the hearing aid, converting the energy into sound. The "T-switch" makes it possible for individuals to utilize the telephone without disruptive whistling feedback and allows individuals to have many more options in receiving amplification in large groups such as with an FM system and other assistive technology devices.

2. Replacement Hearing Aid(s)

Allowable reimbursement for an aid that is a replacement for an aid that was purchased by the Agency within the preceding 12 months is determined as follows:

- a. Manufacturer's invoice cost of the hearing aid(s) at the single unit price of the aid; plus,

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- b. Manufacturer's cost to the dispenser of other accessories designated on the authorization; plus,
- c. Wholesale cost of one package of batteries (not to exceed Medicaid rate), limited to 6; plus,
- d. Manufacturer's invoice cost of the ear mold(s); plus,
- e. A dispensing fee of Medicaid rate (V5241).

3. Hearing Aid Repairs Not Under Warranty

Allowable reimbursement for repair of a hearing aid (V5014) not under warranty and authorized by the Agency is determined as follows:

- a. Manufacturer's invoice cost of repair(s); plus,
- b. A service fee not to exceed Medicaid rate (V5240).

4. Loaner Hearing Aids or Hearing Aid Rentals

Reimbursement for "Loaner Hearing Aids" or "Hearing Aid Rentals" are as follows:

- a. A dispensing fee of Medicaid rate (V5299)
- b. An additional Medicaid rate per week for the rental aid.

5. Replacement of Accessories

Allowable reimbursement for replacement of extra cord(s), hearing aid garment(s) or harness(es) is (are) determined as follows:

- a. Manufacturer's cost to the dispenser; plus,
- b. A dispensing fee not to exceed Medicaid rate (V5299).

6. Replacement of Custom Ear Mold(s)

Allowable reimbursement for replacement of custom ear mold not related to the purchase of a hearing aid is determined as follows:

- a. Manufacturer's invoice charge to the dispenser; plus,
- b. A dispensing fee not to exceed Medicaid rate (V5299).

7. Custom Ear Mold for Hearing Aid Evaluation

If the audiologist advises the Agency of unusual circumstances that warrant

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the fitting and purchase of a custom ear mold in connection with the hearing aid evaluation, the Agency can issue an authorization to an approved hearing aid dispenser to make the mold.

Allowable reimbursement is determined as follows:

- a. Manufacturer's invoice charge to the dispenser for the mold; or,
- b. An ear mold impression fee, not to exceed Medicaid rate (V5275); plus
- c. A dispensing fee not to exceed Medicaid rate (V5299).

In the event that the Agency purchases an aid from the vendor, the Medicaid rate (V5299) dispensing fee paid for the ear mold will be deducted from the Medicaid rate (V5090) dispensing fee that is normally paid for a new hearing aid. In other words, if the Agency has already paid the dealer the cost of the mold plus the Medicaid rate for making the ear mold, the authorization for the dispensing fee for the hearing aid should be Medicaid rate (V5090) so that the dispensing fee is not paid twice.

1. To accept the previously stated reimbursement rate(s) as the full fee for the hearing aid(s), accessories and services, enumerated in the Hearing Aid Agreement.
2. When authorization for a hearing aid is issued, the hearing aid dispenser agrees to supply the individual with the following:
 - a. New instrument(s) and receiver(s), if designated on the authorization;
 - b. Custom ear mold(s);
 - c. One 6-count package of batteries per hearing aid;
 - d. Extra cord(s), if designated on the authorization; and,
 - e. Hearing aid garment(s) or harnesses (es), if designated on the authorization.

Vendors must give written explanation to the Agency of any extenuating circumstances that would delay delivery of an aid. The vendor is not required to deliver the aid to the individual's home but may require the individual to come to the vendor's place of business for delivery of the aid. The appropriate Vocational Rehabilitation Counselor shall be notified prior to the date of the appointment. The appropriate Vocational Rehabilitation Counselor shall also be notified within 10 days that the individual did not keep the appointment.

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3. To instruct the individual on the use and care of the hearing aid and accessories.
4. To provide appropriate maintenance and repair service for a period of at least 3 years from the delivery date of the hearing aid. This should include the use of a "loaner aid" of adequate acoustic characteristics. This Agency does not require servicing of the aid at the individual's home.
5. To maintain an adequate inventory of supplies and necessary parts; for example, batteries, tubing, ear mold materials, and wires. To provide services available and accessible in an identifiable fixed place of business during the business week.
6. To notify the Vocational Rehabilitation Counselor who issued the authorization that delivery of the aid has been made to the individual.
7. To provide a manufacturer's warranty of at least 12 months from the delivery date of each aid that covers material and workmanship. The term of such warranty of services requires the dispenser to perform regular maintenance and servicing as recommended by the manufacturer.
8. To accept the return of the instrument(s) within 30 days of delivery to the individual should the prescriber determine that the aid is unacceptable. This agreement does not apply, if the instrument was misused, abused or if there were alterations to the instrument not supplied by the original provider.

The Agency will reimburse the vendor a service fee of Medicaid rate for aids that are returned during this timeframe.

9. To provide a copy of the manufacturer's invoice for the aid, including the serial number of the instrument. To submit a bill to the Agency listing the serial number, the cost, the dispensing fee, the manufacturer's invoice costs of the ear mold for the aid and the wholesale cost of one package of batteries limited to 6 batteries.