



Letter of Agreement between the North Carolina Department of Health and Human Services, Division of Services for the Blind (DSB), and _____

(Name of Vendor)

(City and State of Vendor)

The DSB shall utilize hearing aid vendors who provide a full range of services including the servicing of hearing aids dispensed and the provision of loaner hearing aids. Physicians who meet this requirement can provide otological examinations, conduct hearing aid evaluations and dispense hearing aids. All parties to this agreement are currently in compliance with Title I of the Civil Rights Act of 1964, and section 504 of the Rehabilitation Act. This agreement may be modified by mutual consent of both parties and may be terminated by either party hereto on sixty (60) days written notice. This agreement shall be for the above referenced vendor. All other vendors bearing the same name in different locations shall each complete the vendor agreement form to indicate compliance with DSB established guidelines.

Hearing Aid Vendors interested in working with the DSB agree to the following:

1. To hold, and maintain a current and valid Hearing Aid Dealers License from the North Carolina State Hearing Aid Dealers and Fitters Board while providing services to the above agency, unless exempt under North Carolina General Statutes.
2. To accept state rates for reimbursement according to the "Reimbursement Rates for Hearing Aids and Accessories" when authorized by the DSB, as the full fee for the hearing aid(s), accessories and services, enumerated in this Agreement which includes
 1. Manufacturer's invoice cost of the hearing aid(s) at the single unit price of the aid; plus
 2. Manufacturer's invoice cost of the ear mold(s); plus
 3. Manufacturer's cost to the dispenser of other accessories designated on the authorization; plus
 4. Wholesale cost of one package of batteries, limited to 6; plus
 5. The corresponding dispensing fee for monaural or binaural fitting.
3. To supply, after written authorization received, the following items to the individuals within the time frames specified by the agencies policies:
 - a. a new instrument(s)
 - b. custom ear mold(s)
 - c. six (6) batteries per hearing aid
 - d. extra cord(s) if authorized
 - e. hearing aid garment(s), or harness (es) if designated on authorization
4. To instruct the individual on the use and care of the instrument.



HEARING AID AGREEMENT

- 5.To keep available stock supplies and parts (e.g., batteries, wires, tubing, ear mold materials) available and accessible in an identifiable place during the business week in order to provide appropriate maintenance/repair service and to provide the use of a “loaner aid” of adequate acoustic characteristics if necessary.
- 6.To notify authorizing staff when the aid is delivered, and to instruct the individual (parent/guardian) to the clinic for a hearing aid check.
- 7.To provide for twelve (12) months, a warranty by the manufacturer on material and workmanship, and to provide for the term of such warranty such services as the warranty manufacturer requires the dispenser to provide including the performance of regular maintenance and servicing as recommended by the manufacturer.
- 8.To accept the return of an aid(s) within thirty (30) days of delivery to the individual when the prescriber determines that the aid is unacceptable. This paragraph does not apply if the instrument was misused, abused, or if there were alterations to the instrument not supplied by the original provider.

This agreement is entered into on this the _____ day of _____ of the year _____. The parties have hereunto signed this agreement in their official capacities on the day and year listed below.

Signed by _____ Position _____

License No. _____

Name of Business _____

Address _____

Telephone No. _____

Name(s)	License(s) No.
_____	_____
_____	_____

Director, Division of Services for the Blind

Date

***Return this signed Letter of Agreement to:
Chief, Vocational Rehabilitation Programs and Facilities,
NC-DHHS: Division of Services for the Blind, 2601 Mail Service Center, Raleigh, NC 27699-2601***