

**Affected Programs:** BadgerCare Plus Benchmark Plan

**To:** Ambulatory Surgery Centers, Audiologists, Federally Qualified Health Centers, Hearing Instrument Specialists, Home Health Agencies, Hospital Providers, Individual Medical Supply Providers, Medical Equipment Vendors, Pharmacies, Physical Therapists, Physician Clinics, Physicians, Rehabilitation Agencies, Speech and Hearing Clinics, Speech-Language Pathologists, Therapy Groups, HMOs and Other Managed Care Programs

## Hearing Instruments and Services Now Covered Under the BadgerCare Plus Benchmark Plan

Effective August 1, 2010, hearing instruments and related services will be covered under the BadgerCare Plus Benchmark Plan for members 17 years of age and younger.

### Hearing Instruments and Services Now Covered Under the Benchmark Plan

Effective August 1, 2010, hearing instruments and related services will be covered under the BadgerCare Plus Benchmark Plan for members 17 years of age and younger. This includes the following items and services:

- Hearing aids and hearing aid batteries, accessories, and repairs (including repairs to hearing aids purchased prior to coverage by the Benchmark Plan).
- Bone-anchored hearing aids (BAHA), BAHA surgeries, accessories, and repairs.
- Cochlear implants, implant surgeries, accessories, and repairs.

### Covered Services and Prior Authorization Requirements and Approval Criteria

The coverage policies and prior authorization (PA) requirements and approval criteria for hearing instruments and services under the Benchmark Plan will be the same as they are under the BadgerCare Plus Standard Plan. For more information regarding service

limitations, PA requirements, and reimbursement for hearing instruments and services covered under the Benchmark Plan, refer to the following chapters and sections of the Hearing service area of the Online Handbook:

- Covered Services and Requirements chapter of the Covered and Noncovered Services section.
- Services Requiring Prior Authorization chapter of the Prior Authorization section.

To access the Online Handbook, click the Online Handbook link in the Providers panel on the ForwardHealth Portal at [www.forwardhealth.wi.gov/](http://www.forwardhealth.wi.gov/).

### Therapy Services Following Bone-Anchored Hearing Aid or Cochlear Implant Surgery

For members 17 years of age and younger, the Benchmark Plan covers up to a maximum of 60 speech-language pathology therapy service visits over a 20-week period following BAHA or cochlear implant surgery. These visits do **not** count toward the Benchmark Plan service limitation of 20 visits per enrollment for each therapy discipline.

## **Durable Medical Equipment Service Limitation Under the Benchmark Plan**

The Benchmark Plan reimburses up to \$2,500.00 for durable medical equipment per member per enrollment year. Hearing aid repairs are subject to the reimbursement limitation. The following items are *not* subject to the reimbursement limitation:

- Bone-anchored hearing aids.
- Cochlear implants.
- Hearing aids, hearing aid batteries, and accessories.

## **Hearing Aid Contract**

The Division of Health Care Access and Accountability signed volume purchase contracts with several hearing aid manufacturers. BadgerCare Plus will only approve the hearing aid models listed under each procedure code in the volume purchase contract. The volume purchase contract provides information regarding procedure codes, procedure code descriptions, purchase rates, and repair rates. Refer to the Covered Services and Requirements chapter of the Covered and Noncovered Services section of the Hearing service area of the Online Handbook for the list of manufacturers and procedure codes covered under the contract.

## **Noncontracted Hearing Aid Models**

Certain hearing aid styles are not available through a volume purchase contract. These noncontracted hearing aid models are covered under the Benchmark Plan; however, PA is required. Refer to the Covered Services and Requirements chapter of the Covered and Noncovered Services section of the Hearing service area of the Online Handbook for a list of noncontracted hearing aid procedure codes.

## **Copayments Under the Benchmark Plan**

Copayment for covered hearing services provided by audiologists and speech and hearing clinic providers is \$15.00 per visit regardless of the number of procedures performed during one visit. If the BadgerCare Plus reimbursement for the hearing service is less than the

established copayment, the member must be charged the lesser amount.

*Note:* Other providers should refer to the Online Handbook for information about copayment policies under the Benchmark Plan.

## **Exemptions**

Providers are reminded that certain members are exempt from copayment requirements under the Benchmark Plan, including the following:

- Pregnant women.
- Members under 18 years of age who are members of a federally recognized tribe.

## **Information Regarding Managed Care Organizations**

This *Update* contains fee-for-service policy and applies to services members receive on a fee-for-service basis only. For managed care policy, contact the appropriate managed care organization. Managed care organizations are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The *ForwardHealth Update* is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Health Care Access and Accountability, Wisconsin Department of Health Services (DHS). The Wisconsin Well Woman Program is administered by the Division of Public Health, Wisconsin DHS.

For questions, call Provider Services at (800) 947-9627 or visit our Web site at [www.forwardhealth.wi.gov/](http://www.forwardhealth.wi.gov/).

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