

Affected Programs: BadgerCare Plus, Medicaid

To: Audiologists, Hearing Instrument Specialists, Speech and Hearing Clinics, HMOs and Other Managed Care Programs

Hearing Device Dispensing Fee Policy

This *ForwardHealth Update* provides clarifications and reminders regarding hearing device dispensing fee policy.

Covered Services

Wisconsin Medicaid may reimburse providers for hearing device dispensing fees. A hearing device can be a hearing aid or a non-implant bone-anchored hearing device. As a reminder, Medicaid-enrolled audiologists may dispense both hearing aids and non-implant bone-anchored hearing devices, and Medicaid-enrolled hearing instrument specialists may only dispense hearing aids.

A dispensing fee includes the following services:

- A 12-month service guarantee and any necessary service to maintain proper function of the hearing device.
- Ear mold impression.
- Initial office visit.
- Proper fitting of the hearing device.
- Up to five post-fittings as necessary for adjustments and hearing device orientation. (This includes performance checks.)

Wisconsin Medicaid only reimburses one dispensing fee per member, per ear, per 12-month period after the fitting of a hearing device.

Noncovered Services

According to Wis. Admin. Code § DHS 107.24(5)(g), the following are noncovered:

- Adjustments, orientation, minor and major repairs, performance checks, or fittings related to a hearing device during the 12-month service guarantee.
- Dispensing fees for hearing device rentals.

Wisconsin Medicaid will not reimburse the following:

- Dispensing fees for assistive listening devices.
- Dispensing fees when a hearing device was not dispensed.
- More than one dispensing fee per member, per ear in a 12-month period.

Prior Authorization

The dispensing fee for a hearing device does not require prior authorization (PA).

For specific information regarding PA for hearing devices, providers should refer to the Prior Authorization section of the Hearing service area of the Online Handbook on the ForwardHealth Portal at www.forwardhealth.wi.gov/.

Claims

Providers should refer to the 1500 Health Insurance Claim Form Completion Instructions topic (topic #17797) in the Submission chapter of the Claims section of the Online Handbook for instructions on completing the 1500 Health Insurance Claim Form.

Most Appropriate Dispensing Fee Procedure Code

When submitting a claim for a hearing device dispensing fee, providers are required to indicate the dispensing fee Healthcare Common Procedure Coding System (HCPCS) procedure code that most appropriately reflects the number of hearing devices dispensed. For example, if a provider dispenses one hearing device to a member, the provider is required to indicate the dispensing fee procedure code for a monaural hearing device. Providers should refer to the Noncontracted Hearing Aid Models topic (topic #5277) in the Codes chapter of the Covered and Noncovered Services section of the Hearing service area of the Online Handbook for allowable dispensing fee HCPCS procedure codes.

Usual and Customary Charge

Providers are required to indicate their usual and customary charge for the dispensing of a hearing device. For additional information regarding the usual and customary charge, providers should refer to the Usual and Customary Charges topic (topic #517) in the Responsibilities chapter of the Claims section of the Online Handbook.

Submission

According to Wis. Admin. Code § DHS 107.24(3)(h)(2), providers are required to conduct a performance check for a hearing device 30 days after the dispensing date. Providers may only submit claims for a hearing device and the dispensing fee for a hearing device after the 30-day performance check has been conducted or, if the member does not return for a performance check, 45 days after the dispensing date. ForwardHealth calculates the number of days between the dispensing of the hearing device and the completion of the performance check by counting the calendar days between the “from” date of service for the hearing aid (entered on the claim by the provider) and the date the claim was submitted.

If a claim is submitted prior to the 30-day performance check or before 45 days have elapsed since the dispensing date (if the member did not return for a performance check), the claim will be denied.

Reimbursement

Wisconsin Medicaid reimburses either the provider’s usual and customary charges or the established maximum allowable fee for the dispensing of a hearing device, whichever is less. This applies to both contracted and noncontracted hearing aids.

Twelve-Month Service Guarantee

A dispensing fee includes a 12-month service guarantee supplied by providers that starts on the dispensing date. During this 12-month period, providers should not submit claims to ForwardHealth for the following services related to the hearing device since provision of these services is included in the service guarantee:

- Adjustments.
- Fittings.
- Major repairs.
- Minor repairs.
- Orientation.
- Performance checks.

After the 12-month service guarantee expires, providers may submit claims to ForwardHealth for the above services, as applicable.

Note: For specific information regarding repairs of contracted hearing aids, providers should refer to the Repairs topic (topic #2950) in the Covered Services and Requirements chapter of the Covered and Noncovered Services section of the Hearing service area of the Online Handbook.

Dispensing Fee Policy Specific to Hearing Aids

Hearing Aids Returned After Providers Are Reimbursed

Contracted hearing aids include a 90-day trial period, which begins on the dispensing date. If a member is not satisfied with a hearing aid(s), the provider may return the hearing aid(s) to the manufacturer within the 90-day trial period. The provider may submit a claim for the hearing aid and the

hearing aid dispensing fee after the 30-day performance check has been conducted or, if the member does not return for a performance check, 45 days after the dispensing date; however, if the hearing aid is returned to the manufacturer during the 90-day trial period without being replaced and the provider has already been reimbursed by Wisconsin Medicaid, he or she is required to return the amount reimbursed, including amounts for the hearing aid and the dispensing fee, within 30 days of the hearing aid's return.

Dispensing Fees for Replaced Hearing Aids

Contracted hearing aids are covered by the manufacturer under a 12-month loss and damage warranty. Within that 12-month period, the manufacturer is required to replace lost or damaged hearing aids one time at no cost to the member, provider, or Wisconsin Medicaid.

Wisconsin Medicaid only reimburses providers for one dispensing fee per member, per ear, per 12-month period after the fitting of a hearing aid. Wisconsin Medicaid will not reimburse an additional dispensing fee if a hearing aid is replaced within 12 months of the original dispensing date. Providers are required to indicate on claims the HCPCS procedure code that most appropriately reflects the number of hearing devices dispensed.

Note: The manufacturer determines the loss and damage warranty, equipment warranty, and repair warranty for noncontracted hearing aids.

Information Regarding Managed Care Organizations

This *ForwardHealth 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 AIDS Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health, Wisconsin DHS.

For questions, call Provider Services at 800-947-9627 or visit our website at www.forwardhealth.wi.gov/.

P-1250