

Update December 2015

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Affected Programs: BadgerCare Plus, Medicaid

To: Audiologists, Hearing Instrument Specialists, Home Health Agencies, Individual Medical Supply Providers, Medical Equipment Vendors, Pharmacies, Speech and Hearing Clinics, HMOs and Other Managed Care Programs

Overview and Clarification of Hearing Instrument Battery Policy

Wisconsin Medicaid reimburses providers for hearing instrument batteries when the batteries are medically necessary and are provided in accordance with specific claims submission instructions and limitations. This *ForwardHealth Update* provides an overview and clarification of hearing instrument battery coverage policy.

Batteries for Hearing Instruments

Wisconsin Medicaid reimburses providers for hearing instrument batteries when the batteries are medically necessary and are provided in accordance with specific claims submission instructions and limitations as outlined in the Hearing service area of the ForwardHealth Online Handbook. Providers are reminded of the following:

- Prior authorization is required to request batteries beyond the battery quantity threshold as outlined in the Durable Medical Equipment Index and the Disposable Medical Supply Index, available on the ForwardHealth Portal at www.forwardhealth.wi.gov/WIPortal/content/ provider/medicaid/MedicalEquipmentVendor/ resources_25.htm.spage.
- A physician's prescription is not required for hearing instrument batteries, per Wis. Admin. Code § DHS 107.02(2m).
- Hearing instrument batteries are not included in the nursing home or home care daily rates and may be separately reimbursed.

Noncovered Services

Wisconsin Medicaid reimburses only for services that are medically necessary as defined under Wis. Admin. Code § DHS 101.03(96m). An item is not considered medically necessary solely because the life expectancy has been met. In accordance with this requirement, as well as the claims submission requirements outlined in Wis. Admin. Code § DHS 106.03(3), hearing instrument batteries will not be covered when dispensed as follows:

- To a member who no longer uses a hearing instrument
- To a member who no longer owns a hearing instrument
- On a routine monthly basis, without record that the member needs additional batteries
- To an institution on a member's behalf, such as a school district, nursing home, or assisted living facility, with no documentation that the member is or will be the recipient of the batteries

Documentation Requirements on Dispensing Date

Providers are reminded that certain written documentation is required to be included in a member's medical record, per Wis. Admin. Code § DHS 106.02(9)(b):

- Documentation of the following details regarding delivery of the batteries to the member (obtained on the dispensing date):
 - $\checkmark \quad \text{Date of delivery}$
 - ✓ Member's printed name

- ✓ Member's signature and date signed acknowledging receipt of the batteries (or if member is not able to sign, the printed name of the person accepting delivery, as well as his or her signature, date signed, and relationship to the member)
- ✓ Quantity, brand, and size of hearing aid batteries issued
- If batteries are mailed or shipped to a member, each time the product is mailed or shipped the provider must document the member's need for additional batteries
- If the batteries are dispensed to an institution on a member's behalf, (such as a school district, nursing home, or assisted living facility) each time the product is dispensed the provider must document the member's need for additional batteries and document confirmation that the member is the recipient of the batteries

Record Retention Reminder

Providers are required to retain documentation for at least five years from the date of reimbursement. Ending participation as a provider does not end a provider's responsibility to retain and provide access to fully maintained records unless an alternative arrangement of record retention and maintenance has been established.

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/*.

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