



IEHP UM Subcommittee Approved Authorization Guideline			
Guideline	Binaural (Analog or Digital) Hearing Aids	Guideline #	UM_DME02
		Original Effective Date	2/28/2008
Section	Durable Medical Equipment	Revision Date	3/26/2018

COVERAGE POLICY

- A. Initial hearing aid batteries are supplied with the initial hearing aid only. Subsequent hearing aid batteries are the patient responsibility.
- B. Eyeglass hearing aids are covered when the requirements of California Code of Regulations (CCR) Title 22, Sections §51319 (Hearing Aids) and §51317 (Eyeglasses, Contact Lenses, Low Vision Aids, Prosthetic Eyes and other Eye Appliances) are met simultaneously.
- C. Evaluation & Assessment Requirements (CCR, 2018)
 - 1. An audiological evaluation including a hearing aid evaluation is performed or supervised by a physician or a licensed audiologist.
 - 2. The hearing aid prescription is provided by an attending physician.
- D. Binaural (analog or digital) hearing aids may be authorized if:
 - 1. Speech communication is effectively improved and auditory contact is necessary for sound awareness (personal safety) in the environment in which the patient exists, and at least one of the following conditions are met:
 - a. The hearing loss is associated with legal blindness.
 - b. For patients 21 years of age or under, tests of each ear reveal a hearing loss level of 30 dB or greater (ANSI, 1969) for 500, 1,000 and 2,000 Hz by pure tone air conduction. Cases shall be referred to California Children’s Services (CCS) for evaluation, consultation or case management for CCS eligible patients.
 - c. For patients over 21 years of age, tests of each ear reveal a hearing loss level of 35 dB or greater (ANSI, 1969) for 500, 1,000 or 2,000 Hertz (Hz) by pure tone air conduction. Where provision of a binaural (analog or digital) hearing aid is the basis for employment, patients with the above hearing loss shall be referred to the California Department of Rehabilitation for evaluation, consultation and case management as provided in CCR Title 22, Section 51014.
 - d. If the difference between the level of 1,000 Hz and 2,000 Hz is 20 dB or more, the average of the air conduction threshold at 500, 1,000 and 2,000 Hz need only be 30 dB hearing level (ANSI, 1969).

COVERAGE LIMITATIONS AND EXCLUSIONS

- A. Replacement of a hearing aid may be authorized only if one of the following criteria are met:
 - 1. The prior hearing aid has been lost, stolen or irreparably damaged due to circumstances beyond the beneficiary’s control. The replacement request shall include each of the following:

- a. A statement describing the circumstances of the loss, theft or destruction of the hearing aid, signed by the beneficiary and the otolaryngologist or the attending physician and
 - b. An audiological evaluation, unless request is for the replacement of a recently acquired hearing aid within the last three months.
2. The hearing impairment of the patient requires amplification or correction not within the capabilities of the patient's present hearing aid.
- B. Replacement hearing aid batteries are not covered
- C. Benefit coverage is limited to one hearing aid assessment in any twelve (12) month period. (American Academy of Audiology, 2015)

ADDITIONAL INFORMATION

None

CLINICAL/REGULATORY RESOURCE

A. Medicare Guidelines:

In general, Medicare does not cover "hearing aids or examination for the purpose of prescribing, fitting, or changing hearing aids." (42 CFR 411.15(d)) However, Medicare will cover, "auditory osseointegrated (code L8699) devices and auditory brainstem (code L8614) devices" as prosthetic devices under certain specified conditions.

1. Medi-Cal recipients younger than 21 years of age must be referred to California Children's Services (CCS) for hearing services. For children younger than 16 years of age, the prescribing physician must be an otolaryngologist.

DEFINITION OF TERMS

None

REFERENCES

1. American Academy of Audiology Clinical Practice Guidelines. Adult Patients with Severe-to-Profound Unilateral Sensorineural Hearing Loss, June 2015. <https://www.audiology.org/sites/default/files/PractGuidelineadultpatients.org> Accessed on 2/26/18.
2. California Code of Regulations. 22 CA ADC § 51319 (2018).
3. PubMed Health. "Hearing Loss." *U.S. National Library of Medicine*. Accessed on February 20, 2018. <https://www.ncbi.nlm.nih.gov/pubmedhealth/?term=Sensorineural+hearing+loss>
4. U.S. Food & Drug Administration (FDA). "Types of Hearing Aids". Last modified January 16, 2018. Etiology of hearing loss in adults. Accessed on 3/6/18. https://google2.fda.gov/search?q=types+of+hearing+aids&spell=1&client=FDAGov&site=FDAGov&lr=&proxystylesheet=FDAGov&requiredfields=-archive:Yes&output=xml_no_dtd&getfields=*&ulang=en&&access=p&sort=date:D:L:d1&entqr=1&entqrm=0&wc=200&wc_mc=1&oe=UTF-8&ud=1

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