

# PAYMENT REIMBURSEMENT POLICY



**Title:** PRP-10 Hearing Aids and Services

**Category:** Compliance

**Effective Date:** 12/06/2021

Physicians Health Plan  
PHP Insurance Company  
PHP Service Company

## 1.0 Guidelines:

This policy applies to all network and non-network providers, including but not limited to percent of charge contract providers. This policy does not guarantee benefits or solely determine reimbursement. Benefits are determined and/or limited by an individual member's benefit coverage document (COC, SPD, etc.). The Health Plan reserves the right to apply clinical edits to all medical claims through coding software and accuracy of claim submission according to industry billing standards. Clinical edits are derived from nationally recognized billing guidelines such as the Centers for Medicare and Medicaid Services (CMS), National Correct Coding Initiative (NCCI), the American Medical Association (AMA), and specialty societies. The Health Plan may leverage the clinical rationale of CMS or other nationally sourced edits and apply this rationale to services that are not paid through CMS but which are covered by the Health Plan to support covered benefits available through one of the Health Plan's products. Prior approval does not exempt adherence to the following billing requirements. The provider contract terms take precedence if there is a conflict between this policy and the provider contract.

## 2.0 Description:

Health Plan reimburses covered hearing aid services based on the member's benefit plan. Coverage is usually through a rider but a small number of plans cover hearing aids and services as a base benefit. Please refer to member's benefit document for specific coverage and limitations. Costs associated with excluded items and those above coverage limits are the responsibility of the member and are not covered by the benefit plan.

## 3.0 Policy:

### A. Coverage for:

1. Hearing aids and services that are required for the correction of a hearing impairment (a reduction in the ability to perceive sound, which may range from slight to complete deafness).
2. Audiometric examinations.
3. Hearing aid evaluations and tests to determine actual hearing acuity and the specific type or brand of hearing aid needed.
4. Purchase and fitting of either monaural or binaural hearing aid(s), which must be one of these types:
  - a. Behind the ear (BTE).
  - b. Invisible in the canal (IIC).
  - c. Completely in the canal (CIC).
  - d. In the canal (ITC).
  - e. In the ear (ITE).
  - f. On the ear (OTE).
  - g. Other special hearing aids, not to exceed the benefits that would have been provided for a type of unilateral hearing aid, as described above.

5. Hearing aid checks following the fitting.
- B. The benefit plan does not cover:
1. Hearing aids except as specified above, including but not limited to disposable hearing aids and assistive listening devices.
  2. Hearing aid batteries.
  3. Hearing aid accessories other than ear molds and ear impressions.
  4. Replacement of hearing aids that are lost or broken.
  5. Other hearing aid replacement parts and repairs.
  6. Non-network services.
- C. Limitations and Exclusions:
1. Reimbursement for hearing aids and hearing aid services is limited to one of the following coverage options below as defined in members benefit plan. Refer to members benefit plan for specific limitations:
    - a. \$880 for a monaural hearing aid; or \$1,600 for binaural hearing aids.
    - b. \$500 for a monaural hearing aid; or \$1,000 for binaural hearing aids.
    - c. \$750 for a monaural hearing aid; or \$1,500 for binaural hearing aids.
    - d. If more than one type of covered hearing aid can meet the member's functional needs, benefits are available for the hearing aids that meet the minimum specifications that are medically necessary.
  2. Reimbursement is rendered in accordance to the benefit limitation of once every 36 months.

#### 4.0 Coding and Billing:

1. LT or RT modifiers must be used on monaural codes.
2. LT or RT modifiers should not be used on bilateral or binaural codes as the "bi" indicates two.
3. Hearing Aid Services HCPCS Section V5008-V5364.

Covered Code	Description	Prior Approval
V5008	Hearing Screening	N
V5273	Assistive listening device, for use with cochlear implant <b>(PA Required)</b>	Y
V5362	Speech screening <b>(PA Required)</b>	Y
V5363	Language screening <b>(PA Required)</b>	Y
V5364	Dysphagia screening <b>(PA Required)</b>	Y
S0618	Audiometry for hearing aid evaluation to determine the level and degree of hearing loss	N
92590	Hearing aid examination and selection; monaural	N
92591	Hearing aid examination and selection; binaural	N
92592	Hearing aid check; monaural	N
92593	Hearing aid check; binaural	N
92594	Electroacoustic evaluation for hearing aid; monaural	N
92595	Electroacoustic evaluation for hearing aid; binaural	N

<b>Covered Code</b>	<b>Description</b>	<b>Prior Approval</b>
V5010	Assessment for hearing aid	N
V5011	Fitting/orientation/checking of hearing aid	N
V5014	Repair/modification of a hearing aid	N
V5020	Conformity evaluation	N
V5030	Hearing aid, monaural, body worn, air conduction	N
V5040	Hearing aid, monaural, body worn, bone conduction	N
V5050	Hearing aid, monaural, in the ear	N
V5060	Hearing aid, monaural, behind the ear	N
V5070	Glasses, air conduction	N
V5080	Glasses, bone conduction	N
V5090	Dispensing fee, unspecified hearing aid	N
V5095	Semi-implantable middle ear hearing prosthesis	N
V5100	Hearing aid, bilateral, body worn	N
V5110	Dispensing fee, bilateral	N
V5120	Binaural, body	N
V5130	Binaural, in the ear	N
V5140	Binaural, behind the ear	N
V5150	Binaural, glasses	N
V5160	Dispensing fee, binaural	N
V5171	Hearing aid, contralateral routing device, monaural, in the ear (ITE)	N
V5172	Hearing aid, contralateral routing device, monaural, in the canal (ITC)	N
V5181	Hearing aid, contralateral routing device, monaural, in the ear (ITE)	N
V5190	Hearing aid, CROS, glasses	N
V5200	Dispensing fee, CROS	N
V5211	Hearing aid, contralateral routing system, binaural, ITE/ITE	N
V5212	Hearing aid, contralateral routing system, binaural, ITE/ITC	N
V5213	Hearing aid, contralateral routing system, binaural, ITE/BTE	N
V5214	Hearing aid, contralateral routing system, binaural, ITC/ITC	N
V5215	Hearing aid, contralateral routing system, binaural, ITC/BTE	N
V5221	Hearing aid, contralateral routing system, binaural, BTE/BTE	N
V5230	Hearing aid, BICROS, glasses	N
V5240	Dispensing fee, BICROS	N
V5241	Dispensing fee, monaural hearing aid, any type	N

<b>Covered Code</b>	<b>Description</b>	<b>Prior Approval</b>
V5242	Hearing aid, analog, monaural, CIC (completely in the ear canal)	N
V5243	Hearing aid, analog, monaural, ITC (in the canal)	N
V5244	Hearing aid, digitally programmable analog, monaural, CIC	N
V5245	Hearing aid, digitally programmable analog, monaural, ITC	N
V5246	Hearing aid, digitally programmable analog, monaural, ITE (in the ear)	N
V5247	Hearing aid, digitally programmable analog, monaural, BTE (behind the ear)	N
V5248	Hearing aid, analog, binaural, CIC	N
V5249	Hearing aid, analog, binaural, ITC	N
V5250	Hearing aid, digitally programmable analog, binaural, CIC	N
V5251	Hearing aid, digitally programmable analog, binaural, ITC	N
V5252	Hearing aid, digitally programmable, binaural ITE	N
V5253	Hearing aid, digitally programmable, binaural BTE	N
V5254	Hearing aid, digital, monaural, CIC	N
V5255	Hearing aid, digital, monaural, ITC	N
V5256	Hearing aid, digital, monaural, ITE	N
V5257	Hearing aid, digital, monaural, BTE	N
V5258	Hearing aid, digital, binaural, CIC	N
V5259	Hearing aid, digital, binaural, ITC	N
V5260	Hearing aid, digital, binaural, ITE	N
V5261	Hearing aid, digital, binaural, BTE	N
V5264	Ear mold/insert, not disposable, any type	N
V5275	Ear impression, each	N
		N

<b>Non-Covered Code</b>	<b>Description</b>
V5262	Hearing aid, disposable, any type, monaural
V5263	Hearing aid, disposable, any type, binaural
V5265	Ear mold/insert, disposable, any type
V5266	Battery for use in hearing device
V5267	Hearing aid or assistive listening device/supplies/accessories, not otherwise specified
V5268	Assistive listening device, telephone amplifier, any type
V5269	Assistive listening device, alerting, any type
V5270	Assistive listening device, television amplifier, any type

Non-Covered Code	Description
V5271	Assistive listening device, television caption decoder
V5272	Assistive listening device, TDD
V5274	Assistive listening device, no otherwise specified
V5281	Assistive listening device, personal FM/DM system, monaural, (1 receiver, transmitter, microphone), any type
V5282	Assistive listening device, personal FM/DM system, binaural, (2 receivers, transmitter, microphone), any type
V5283	Assistive listening device, personal FM/DM neck, loop induction receiver
V5284	Assistive listening device, personal FM/DM, ear level receiver
V5285	Assistive listening device, personal FM/DM, direct audio input receiver
V5286	Assistive listening device, personal blue tooth FM/DM receiver
V5287	Assistive listening device, personal FM/DM receiver, not otherwise specified
V5288	Assistive listening device, personal FM/DM transmitter assistive listening device
V5289	Assistive listening device, personal FM/DM adapter/boot coupling device for receiver, any type
V5290	Assistive listening device, transmitter microphone, any type
V5298	Hearing aid, not otherwise classified
V5299	Hearing service, miscellaneous
V5336	Repair/modification of augmentative communicative system or device (excludes adaptive hearing aid)

### 5.0 Reimbursement:

The members' benefit plan will determine if a fee schedule rate or coverage limit will be applied. In some instances, the member may be billed for the remaining balance between the allowable and the cost of the hearing aids.

### 6.0 Documentation Requirements:

Proper documentation is required for unlisted codes.

### 7.0 Verification of Compliance:

Claims are subject to audit, and prepayment and post payment review in order to validate compliance with the terms and conditions of this policy.

### 8.0 Terms & Definitions:

Audiologist – health care professional who has specialized training in identifying and measuring the type and degree of hearing loss and recommending treatment options. They may also be licensed to fit hearing aids.

Conventional Hearing Aids – have a microphone that gathers sound, an amplifier that increases the volume of sound, and a receiver that transmits this amplified sound to the ear. These instruments may have a manual volume control for the user. These devices have screw-set controls mounted onto the hearing aids for the licensed provider to adjust

Digital Hearing Aids - analyze incoming sound, transforms it by converting the sound into digital bits and manipulates the frequency and output characteristics of the sound before the sound is amplified. Digital hearing aids are programmed with a computer and contain multiple memories, microphones, and channels. The digital processor permits the hearing aid to change its parameters, to reduce background noise, and/or manage feedback without adversely affecting the benefits for the user

Hearing aid specialist – person who is licensed by the state to conduct and evaluate basic hearing tests, offer counseling, and fit and test hearing aids.

Programmable Hearing Aids – utilize analog technology that is controlled by modifying the frequency and output characteristics using a computer. It may contain multiple microphones, multiple memories and multiple channels, and may operate with a remote control.

Types of hearing aids:

BTEs—behind the ear; are about one inch long and fit snugly behind your outer ear. Innovations have made these styles cosmetically appealing and house features for a variety of hearing losses from mild to profound, ample battery life and are easy to handle.

IICs – invisible-in-the-canal and CICs; completely in the canal, are the smallest ITEs. Cosmetically, they may be the most flattering, but their tiny size can be a real disadvantage in handling.

ITCs—in the canal; are smaller. They sit in the lower portion of the outer ear bowl, making them comfortable and easy to use. Because they are slightly larger than the CIC styles, they have a longer battery life, are easier to handle and can fit a wider range of hearing losses.

ITEs—in the ear; are custom-fitted to your outer ear’s contours.

OTEs—on the ear; are a new style of BTE that is extremely small and sits on top of the outer ear

**9.0 References, Citations, Resources & Associated Documents:**

BCP-21 Hearing Aids

**10.0 Revision History:**

Original Effective Date: 08/22/2019

Next Review Date: 10/01/2022

<b>Revision Date</b>	<b>Reason for Revision</b>
10/20	Annual review; no changes, approved by CCSC 12/1/20.
9/21	Annual review, updated verbiage on the Guidelines, changed wording under Reimbursement to benefit plan from evidence, approved by CCSC 10/5/2021 ,