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CHAPTER NINETEEN

HEARING SERVICES

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## **Chapter 19. Hearing Services**

Rule No. 560-X-19-.01. Hearing Services - General.

(1) Audiological function tests and hearing aids are limited to Medicaid eligible individuals who are eligible for treatment under the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program. Hearing aids are provided through hearing aid dealers who are contracted to participate in the Alabama Medicaid Hearing Aid Program.

An eligible individual with hearing problems may be referred to a private physician or to Crippled Children's Service for medical evaluation. Audiological function tests must be referred by a physician before testing.

(2) Medical Examination:

(a) A hearing aid will not be approved for any Medicaid eligible recipient prior to a medical examination and recommendation for a hearing evaluation by a licensed physician, within sixty (60) days of the time of hearing aid fitting. This is mandatory.

(b) The medical examination should, if possible, be given by a physician specializing in diseases of the ear. If a physician of this type is not available or accessible, referral may be made to Crippled Children Service for otological evaluation, medical clearance and medical approval for the use of earmolds.

(c) Children under six (6) years of age shall be examined by an otologist or otolaryngologist before an aid is fitted.

(d) The examining physician referring the patient to a hearing aid dealer will be required to furnish the dealer with appropriate medical evaluation statements and recommendations, according to program requirements.

(3) Otologic Evaluations: Eligible recipients are authorized one otologic evaluation per calendar year, which shall include one of the following: a. Basic comprehensive audiometry, b. Evoked response audiometry, c. Conditioning play audiometry. Prior authorization is not required for additional evaluations within the current benefit period.

(4) Special Audiological Function Tests. Special audiological function tests are those services not included in a comprehensive evaluation. These services are reported separately using descriptors from the audiological series of the CPT manual. Prior authorization is not required.

Authority: State Plan; 42 C.F.R. Title XIX, Social Security Act; 42 C.F.R. Section 441.56. Rule effective October 1, 1982. Amended June 8, 1985. Effective date of emergency rule is December 1, 1986. Effective date of amendment March 12, 1987. Effective date of emergency rule is October 1, 1990. Effective date of emergency rule is March 18, 1991. Effective date of this amendment is June 12, 1991.

**Rule No. 560-X-19-.02. Participation and Enrollment Requirements:**

(1) Only in-state and borderline out-of-state (within 30-mile radius of state line) audiology and hearing aid providers who meet enrollment requirements are eligible to participate in the Alabama Medicaid program.

Audiology providers: Must hold a valid current State license issued by the state in which they practice. Since licenses are reviewed annually Medicaid will review reference sources such as the Board of Examiners for Speech Pathology and Audiology for determining an audiologist's professional qualifications.

Medicaid's fiscal agent is responsible for enrollment of audiologists. Licensed audiologists desiring to participate in the Alabama Medicaid Program should furnish the following information in a written enrollment request to Medicaid's Fiscal Agent.

- (a) Name
- (b) Address
- (c) Specialty provider type
- (d) Social Security Number
- (e) Tax ID Number
- (f) Copy of current State license

Hearing Aid Dealers - must hold a valid current license issued by the Alabama Board of Hearing Aid Dealers, as issued by the state in which the business is located. Licensed hearing aid dealers desiring to participate in the Alabama Medicaid Program are required to enter into a contractual agreement with the Alabama Medicaid Agency. The dealer should request a contract agreement from the Associate Director of the Hearing Services Program, Alabama Medicaid Agency.

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**Statutory Authority:** State Plan; 42 C.F.R. Title XIX, Social Security Act; 42 C.F.R. Section 441.56.

**History:** Rule effective October 1, 1982, July 9, 1984, October 1, 1990, March 18, 1991, and June 12, 1991. Amended: Filed October 19, 2001; effective February 11, 2002.

**Rule No. 560-X-19-.03. Billing Procedures and Claims Payment:**

(1) Audiologists and hearing aid dealers should refer to Rule 560-X-1-.17, Chapter One, Administrative Code, for provider billing instructions.

(2) Claims forms and billing instructions will be furnished to participating providers by Medicaid's fiscal agent.

(3) An audiologist employed by a physician cannot file a claim for the same services billed by that physician for the same patient, on the same date of service.

(4) Providers may bill an Alabama Medicaid recipient only when the recipient has exhausted all of his/her allowed Medicaid benefits or when the service rendered is a non-covered service.

Authority: State Plan; 42 C.F.R. Section 401, Et seq.; Title XIX, Social Security Act. Rule effective October 1, 1982. Emergency rule effective October 1, 1990. Emergency rule effective March 18, 1991. Effective date of this amendment is June 12, 1991.