

How has your state approached Medicaid Reimbursement for dispensing and fitting fees related to monaural (V5241) and binaural (V5160) hearing aids?

STATE	COMMENTS
NJ	Don't use New Jersey as a model. We get a whopping \$175 for a monaural fit and \$280 for a binaural fit under Medicaid in addition to the wholesale cost of the instrument(s). Gran Brady, Au.D.
OH	<p>Ohio has recently gone through a very bad experience regarding this very issue. It is a very long and tedious story that actually began in June of 2004 when Medicaid approached an audiologist who is a member of OAA and asked for assistance in revising the Ohio Department of Job's and Family Services Rules and Regulations regarding Hearing Aids. I would be more than glad to speak with this individual from Vermont, but I have to tell you email is not the easiest way to discuss this issue. OAA's Winter newsletter, which should be out soon, has some information in it about this very issue. I would be more than glad to direct the individual to our website once this is available. Also, Gail Whitelaw has asked that I, and another GAC member, write an article about this very issue for the state leaders network. We will be working on this at a meeting towards the end of the week. Let me know if there is anything else you would like me to do.</p> <p>Erin L. Miller, Au.D. Board Certified in Audiology Neuro-Communication Services, Inc. 755 Boardman-Canfield Road Southbridge West, Bldg. C-1 Youngstown, Ohio 44512 330-726-8155 FAX 330-726-8612 auderin@zoominternet.net</p>
WI	<p>Wisconsin Medicaid, Department of Health and Family Services (DHFS), has recently signed contracts with nine hearing aid manufacturers (joining Minnesota and citing its success in that state). <u>This is a major change in policy with substantial ramifications and has repeatedly been opposed by WSHA.</u></p> <p>See attached Wisconsin Speech Pathology and Audiology Association reports. Go to: http://dhfs.wisconsin.gov/medicaid/updates/2004/2004-86.htm for this policy, just released Dec. 1, 2004. Go to http://dhfs.wisconsin.gov/medicaid4/index.htm, search by provider type audiologist, for past policy handbooks and updates.</p> <p>Good luck!</p> <p>Meredy Hase, Au.D. Vice President- Audiology Wisconsin Speech Pathology and Audiology Association</p>
IL	I think we would need more information. We did get rid of pre-approval for binaurals for children but our reimbursement rates are still awful. If s/he wants to know how to get rid of pre-approvals we can help. If their rates are worse than ours, which would

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	<p>surprise me, we could help. If they want to open billing codes, maybe we can help but that doesn't sound like the issue. Kathleen Campbell</p>
ND	<p>North Dakota only allows one instrument per patient. It is different for children, however. They continually want to lower the dispensing fee and guidelines. Currently, the average PTA has to 40dB or greater. Brian Qvammen</p>
MO	<p>In response to Medicaid hearing aid services in other states - In the state of MISSOURI.....</p> <p>Adults = only one hearing every four years = total reimbursement \$510 for ITE [includes hearing aid (\$385), ear impression (\$5), the dispensing fee (\$95) and the post-fit evaluation (\$25). The reimbursement for BTE is \$535 (\$25 for earmold).</p> <p>Children (Birth to 21) = two hearing aids every four years - replacements available sooner with approval. Reimbursement varies according to instruments dispensed. Missouri does not restrict technology, the only restriction on size - they will not approve CIC devices for those under age 13.</p> <p>For children, hearing instruments are reimbursed at 20% above manufacturers (single unit) cost. Service fees (dispensing, earmolds etc) are the same as for adults. However, we are allowed to bill a fee for both right and left (i.e. dispensing fee for each ear, post-fit evaluation fee for each ear etc). In addition, Medicaid also covers the cost of FM systems - again at a 20% above cost reimbursement level.</p> <p>As for diagnostic fees: 92557 (ABS) \$20, 92567 (Tymp) \$5, 92579 (VRA) \$20, 92588 (OAE) \$95.</p> <p>Hopefully, this info is of help.</p> <p>Steve Brown, AuD Brown and Willen Audiology Center Cape Girardeau, MO</p>
IA	<p>In Iowa, we bill Title XIX for hearing testing, usually \$87 for 92557. If the patient is non-Medicare, we receive a payment of \$50. However, we receive nothing if the patient is a Medicare patient. Title XIX insists that we bill Medicare first, get a denial, and then bill them.</p> <p>The fitting fee for a monaural fitting is \$249. For binaural, it's \$498.</p> <p>Ken Lowder Iowa Audiology & Hearing Aid Centers 415 Tenth Avenue Coralville, IA 52241</p>

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CT	<p>In Connecticut, Medicaid hearing aids are bundled as V5050 for a monaural ITE, and V5060 for a monaural BTE. Binaurals are V5130 and V5140 for ITEs and BTEs, respectively.</p> <p>Our reimbursement for a monaural aid is \$439.00, which includes the dispensing. Binaurals are reimbursed at \$781.75. We are also reimbursed \$25.00 per earmold.</p> <p>Art Tepper Advanced Specialty Care Danbury, CT (203) 830-4705</p>
UT	<p>Similar to what was being done in Vermont, our State Association (USHA) has created an ad-hoc committee to look into four different issues.</p> <p>One of these is the same as Vermont, as we are looking to revamp our Medicaid reimbursement rates for hearing aids. We would be interested in knowing what other state Medicaid policies are reimbursing. The Utah policy has been in place for approximately 15 years and reimburses \$500 for a monaural fitting and \$800 for a binaural fitting.</p> <p>This ad-hoc committee will also be discussing some of the pressing licensure issues that are facing the country such as: 1) a doctorate degree being the entry level degree by Jan. 2007, 2) Audiology state licensure statutes vs. hearing aid dispenser licensure statute, and 3) possible provisional licensure for 4th year Au.D. externs. Where we could use the most help concerning these licensure issues is with the 3rd one concerning Au.D. externs.</p>