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Hearing aid

Adjudication Guideline

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Abstract

For Members

Hearing aids are sound-amplifying devices designed to aid people who have a hearing impairment.

A hearing aid has three basic parts: a microphone, amplifier, and speaker. The hearing aid receives sound through a microphone, which converts the sound waves to electrical signals and sends them to an amplifier. The amplifier increases the power of the signals and then sends them to the ear through a speaker ².

For Medical Professionals

Different types of hearing aids are as follows:

- **Behind-the-ear (BTE) aids:** Most parts are contained in a small plastic case that rests behind the ear. This style is often chosen for young children because it can accommodate various ear mold types, which need to be replaced as the child grows. Also, the BTE aids are easy to be cleaned and handled.
- **In-the-ear (ITE) aids:** All parts of the hearing aid are contained in a shell that fills in the outer part of the ear. The ITE aids are larger than the in-the-canal and completely-in-the-canal aids.
- **In-the-canal (ITC) aids and completely-in-the-canal (CIC) aids:** These hearing aids are contained in tiny cases that fit partly or completely into the ear canal.

Approved by:
Daman

Responsible:
Medical Standards & Research

Related Adjudication Guidelines: NA

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Scope

This Adjudication Rule highlights the medical overview along with coverage and payment requirements by Daman as per policy terms and conditions for hearing aids.

Adjudication Policy

Eligibility / Coverage Criteria

Clinical indications based on current guidelines for hearing aid:

- the tone audiometric hearing loss in the better hearing ear should be at least 30 dB in at least one of the test frequencies between 500 and 4000 Hz, and
- speech audiometry should reveal an understanding in the better hearing ear with headphones in the Freiburg monosyllabic test of not more than 80% at 65 dB

Requirements for Coverage

- ICD and CPT codes must be coded to the highest level of specificity.
- Failure to submit, upon request or when requesting a clinical history, indication the need for testing will result in rejection of claim.

Non-Coverage

- Hearing aids will not be covered for visitors plan and plans with no DME benefit /hearing aid as per policy terms and conditions.

Payment and Coding Rules

Please apply DOH payment rules and regulations and relevant coding manuals for ICD, CPT.

Denial codes

Code description
Service is not clinically indicated based on good clinical practice
Service is not clinically indicated based on good clinical practice, without additional supporting diagnosis/ activities
Service /supply may be appropriate, but too frequent
Service(s) is (are) not covered
Payment is included in allowance for another service

Appendices

A. References

- <https://www.fda.gov/medicaldevices/productsandmedicalprocedures/homehealthandconsumer/consumerproducts/hearingaids/ucm181470.htm>
- <https://www.nidcd.nih.gov/health/hearing-aids>
- <https://www.healthyhearing.com/help/hearing-aids/types>
- <https://www.audi-lab.com/types-of-hearing-aids-advantages-disadvantages>
- http://www.who.int/healthinfo/statistics/bod_hearingloss.pdf
- <https://www.asha.org/uploadedfiles/ais-hearing-loss-types-degree-configuration.pdf>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5738937/>
- <https://emedicine.medscape.com/article/994159-treatment>
- <https://emedicine.medscape.com/article/1822962-overview#showall>
- <https://careweb.careguidelines.com/ed21/index.html>

B. Revision History

Date	Change(s)
05/12/2019	Release of V1.0