

101 CMR 323.00: HEARING AID DISPENSERS

Section

- 323.01: General Provisions
- 323.02: General Definitions
- 323.03: General Rate Provision, Requirements and Rates
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323.01: General Provisions

- (1) Scope, Purpose, and Effective Date. 101 CMR 323.00 governs the payment rates to be used by all governmental units and purchasers under M.G.L. c. 152, § 1 (the Workers' Compensation Act) for hearing aids and authorized services related to the care and maintenance of hearing aids provided to publicly aided individuals and industrial accident patients. 101 CMR 323.00 is effective for services provided on or after October 1, 2012.
- (2) Disclaimer of Authorization of Services. 101 CMR 323.00 is not authorization for or approval of the procedures for which rates are determined pursuant to 101 CMR 323.00. Governmental units that purchase care are responsible for the definition, authorization, and approval of care and services extended to publicly aided clients.
- (3) Administrative Bulletins. EOHHS may issue administrative bulletins to clarify its policy on and understanding of substantive provisions of 101 CMR 323.00 and to update billing codes in accordance with 101 CMR 323.01(4).
- (4) Coding Updates and Corrections. EOHHS may publish procedure code updates and corrections by administrative bulletins. Updates may reference coding systems including, but not limited to, the Healthcare Common Procedure Coding System (HCPCS). Such an administrative bulletin will list
 - (a) codes for which only the code numbers changed, with the corresponding cross-references between new and existing codes;
 - (b) codes for which the code remains the same, but the description has changed;
 - (c) deleted codes for which are no corresponding new codes; and
 - (d) codes for entirely new codes that require pricing. EOHHS may designate these codes as individual consideration until appropriate rates can be developed.
- (5) Authority. 101 CMR 323.00 is adopted pursuant to M.G.L. c. 118E.

323.02: General Definitions

As used in 101 CMR 323.00, terms shall have the meanings ascribed in 101 CMR 323.02.

Accessories. Those items purchased by the dispenser for use in the repair or modification of a hearing aid. These items shall not include non essential items such as carrying cases.

Adjusted Acquisition Cost (AAC). The actual unit price paid to a manufacturer by a hearing aid dispenser for a hearing aid or accessories, including costs for shipping and handling, and excluding postal insurance charges.

BiCROS. A Contra-lateral Routing of Signal (CROS) fitting with the addition of a second microphone to a single receiver. This may be used in the instance when one ear is more severely impaired than the other.

Binaural. The type of fitting or aid necessitated by varying degrees of hearing loss in both ears that requires unparalleled amplification via the use of two microphones and/or receivers.

Binaural Fitting. The fitting of two hearing aids - one to each ear - simultaneously or within six months by a provider.

CROS. Contra-lateral Routing of Signal, which refers to the type of hearing aid configuration that routes sounds from the hearing-impaired ear to the hearing ear via the use of a microphone.

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EOHHS. The Executive Office of Health and Human Services established under M.G.L. c. 6A

Extended Insurance Policy. An agreement between the manufacturer and the dealer that protects hearing aids against loss, theft, or damage for a period in excess of the initial warranty period provided upon initial purchase of an aid or following a major repair. An extended insurance policy may last up to three years from initial purchase and can be used if the governmental unit approves.

Governmental Unit. The Commonwealth, any department, agency, board or commission of the Commonwealth and any political subdivision of the Commonwealth.

Individual Consideration (I.C.). Payment for procedures designated I.C. is individually determined by the purchaser upon the provider's submission of an invoice that describes the services rendered. The purchaser shall determine the appropriate payment in accordance with the following standards and criteria.

- (a) Time required to perform the procedure
- (b) Degree of skill required in the procedure performed
- (c) Severity or complexity of the patient's disease, disorder or disability
- (d) Policies, procedures, and practices of other third-party purchasers of care
- (e) Prevailing ethics and accepted custom of the provider community
- (f) Other standards and criteria as may be adopted by EOHHS

A purchaser may not pay a provider an amount in excess of the usual and customary charge for the service.

Major Repairs. Repairs to a hearing aid that must be made by a repair facility other than the provider's place of business.

Minor Repairs. Repairs performed at the provider's place of business such as, but not limited to, replacement and cleaning of tubing.

Monaural Fitting. The fitting of one hearing aid by a provider.

Out-of-office Rates. Providers should use the appropriate place of service (POS) code when billing for out-of-office services. Out-of-office rates will be 115% of their respective in-office counterparts.

Out-of-office Services. Authorized services provided in a nursing home, school, patient's home, or any other setting where the provider travels from his or her usual place of business to provide the service. Out-of-office services include only the codes in the following sections.

- 101 CMR 323.03(4)(a)1.: *Hearing Aids: Dispensing Fees*
- 101 CMR 323.03(4)(b): *Earmolds*
- 101 CMR 323.03(4)(c): *Ear Impressions*
- 101 CMR 323.03(4)(d): *Batteries*
- 101 CMR 323.03(4)(g): *Minor Repairs*
- 101 CMR 323.03(4)(h): *Major Repairs*

Place of Service (POS). Providers who file claims with MassHealth must use the following CMS POS codes.

- 03 – School
- 04 – Homeless shelter
- 11 – Office
- 12 – Home
- 22 – Outpatient hospital
- 26 – Military treatment facility
- 31 – Skilled nursing facility
- 32 – Nursing facility
- 99 – Other place of service

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Provider. An individual, partnership, corporation, or other entity that dispenses hearing aids and provides services related to the care and maintenance of hearing instruments, and who meets such conditions of participation as have been or may be adopted from time to time by a governmental unit purchasing hearing aids and related services or by Workers' Compensation purchasers. At a minimum, a hearing instrument specialist must be licensed by the Commonwealth of Massachusetts, Division of Professional Licensure, Board of Hearing Instrument Specialists. An audiologist must be licensed by the Commonwealth of Massachusetts, Division of Professional Licensure, Board of Speech-language Pathology and Audiology.

Publicly Aided Individual. A person for whom a governmental unit is in whole or in part liable for his/her medical and other services, under a statutory program

Used Hearing Aid. Any hearing aid that has been worn for any period of time by a user

323.03: General Rate Provisions, Requirements, and Rates

(1) General Rate Provisions. Payment for the purchase of hearing aids and authorized related accessories and services for the care and maintenance of hearing aid instruments, shall be the lowest of the

- (a) provider's usual charge to persons other than publicly-aided individuals and industrial accident patients;
- (b) provider's actual charge submitted; or
- (c) schedule or maximum fees listed in 101 CMR 323.03(4).

(2) Reimbursement as Full Payment. The payment rates under 101 CMR 323.03 are full compensation for care rendered to publicly aided individuals and industrial accident patients, as well as for any related administrative or supervisory duties and costs in connection with the services provided. Each provider shall, as a condition of acceptance of payment made by the purchaser, accept the rate as full payment and discharge of all obligations for the services rendered.

(3) General Requirements and Services Included.

(a) Purchase of Hearing Aids.

- 1. The hearing aid and standard accessories for the proper operation of the hearing aid and proper fitting and instruction in the use, care and maintenance of the hearing aid; and minor repairs and services as usually provided non publicly aided individuals and industrial accident patients which may be necessary from time to time during the operational life of the hearing aid;
- 2. A mandatory one year manufacturer's warranty and/or insurance against loss or damage; and
- 3. Includes the cost of loaner hearing aid when necessary.

(b) Earmold. Earmold impression; and the proper fitting of the earmold on delivery and adjustments as may be needed from time to time. The maximum fee stipulated in 101 CMR 323.03(4)(b) shall not be allowed if an earmold is included in the manufacturer's price of the aid or the client already has an earmold.

(c) Ear Impression. One properly formed ear impression for each in-the-ear aid purchased. The fee stipulated in 101 CMR 323.03(4)(c) shall only be allowed at the time an in-the-ear aid is purchased. The fee listed in 101 CMR 323.03(3)(c) includes provision for all associated costs.

(d) Batteries. Proper freshness of batteries must be assured. The maximum fee listed in 101 CMR 323.03(4)(d) includes provision for all associated costs. Batteries must be new and unused at the time of purchase.

(e) Other Accessories or Options for a Hearing Aid. Proper fitting and adjustment of the accessory must be provided as needed. The maximum fee listed in 101 CMR 323.03(4)(e) includes provision for all associated costs. Accessories must be new and unused at the time of purchase.

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(f) Refitting Services/Other Professional Services. Additional fitting/refitting services will be reimbursed only if the hearing aid was dispensed more than two years prior to the date of service of the refitting services. These professional services include refitting of the aid, orientation, counseling the member or member's family, contact with interpreters, fitting of a loaner aid, and similar services. Reimbursement for such services must include a face-to-face encounter with the publicly aided individual.

(g) Minor Repairs and Office Visits for Evaluation and Management Services. An office visit for evaluation and management services will be reimbursed only when one or more of the following services is required and is provided as part of the visit:

1. Minor adjustments to the hearing aid to assure a proper fitting, such as an earmold adjustment, when a provider is not the provider who initially fit the hearing aid, and the provider who initially fit the hearing aid no longer provides services to publicly aided individuals;
2. Minor office repairs for which the provider customarily charges non-publicly aided individuals;
3. Cleaning of the hearing aid; or
4. Replacement of parts such as, but not limited to, tubing, hooks, battery doors, and replacement. No fee shall be allowed when the provider does not customarily charge clients other than publicly aided individuals and industrial accident patients for these repairs.

(h) Major Repairs. A provider may submit a bill for major repairs to a hearing aid only after all warranties and/or insurance have expired. The hearing aid in need of a major repair must be sent directly to the repair facility or manufacturer that will perform the repair. Handling charges by an intermediary may not be submitted. Repair services shall include a written warranty against all defects for a minimum of six months unless otherwise documented by the repair facility or manufacturer. The provider of the repair services is responsible for the quality of the workmanship and parts, and for ensuring that the repaired aid is in proper working condition. The maximum fee listed in 101 CMR 323.03(4)(h) includes provision for all associated costs.

(i) Extended Insurance Covering Loss and Damage. The manufacturer's insurance policy that provides coverage for the loss or damage of a hearing aid for up to three years following purchase, but not less than one year.

(j) Other Services. No fee shall be allowed when the provider does not customarily charge clients other than publicly aided individuals and industrial accident patients for such items.

(4) Rates. 101 CMR 323.03(4) sets forth maximum fees for the items and services listed as follows:

(a) Maximum Fees for Hearing Aids. The maximum fees shall be the adjusted acquisition cost of the hearing aid, plus the appropriate dispensing fee.

1. Hearing Aids Dispensing Fees.

Code	Description	Rates	
		Effective 10/1/2012	Effective 10/1/2013
V5090	Dispensing fee, unspecified hearing aid	\$273.19	\$276.77
V5110	Dispensing fee, bilateral	\$546.56	\$553.72
V5160	Dispensing fee, binaural	\$546.56	\$553.72
V5200	Dispensing fee, CROS	\$546.56	\$553.72
V5240	Dispensing fee, BICROS	\$546.56	\$553.72
V5241	Dispensing fee, monaural hearing aid, any type	\$273.19	\$276.77

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2. Hearing Aids Purchases.

Code	Description	Rates	Rates
		Effective 10/1/2012	Effective 10/1/2013
V5030	Hearing aid, monaural, body worn, air conduction	AAC	AAC
V5040	Hearing aid, monaural, body worn, bone conduction	AAC	AAC
V5050	Hearing aid, monaural, in the ear	AAC	AAC
V5060	Hearing aid, monaural, behind the ear	AAC	AAC
V5070	Glasses, air conduction	AAC	AAC
V5080	Glasses, bone conduction	AAC	AAC
V5095	Semi-implantable middle ear hearing prosthesis	AAC	AAC
V5100	Hearing aid, bilateral, body worn	AAC	AAC
V5120	Hearing aid, binaural, body worn	AAC	AAC
V5130	Hearing aid, binaural, in the ear	AAC	AAC
V5140	Hearing aid, binaural, behind the ear	AAC	AAC
V5150	Hearing aid, binaural, glasses	AAC	AAC
V5170	Hearing aid, CROS, in the ear	AAC	AAC
V5180	Hearing aid, CROS, behind the ear	AAC	AAC
V5190	Hearing aid, CROS, glasses	AAC	AAC
V5210	Hearing aid, BICROS, in the ear	AAC	AAC
V5220	Hearing aid, BICROS, behind the ear	AAC	AAC
V5230	Hearing aid, BICROS, glasses	AAC	AAC
V5242	Hearing aid, analog, monaural, CIC (completely in the ear canal)	AAC	AAC
V5243	Hearing aid, analog, monaural, ITC (in the canal)	AAC	AAC
V5244	Hearing aid, digitally programmable analog, monaural, CIC	AAC	AAC
V5245	Hearing aid, digitally programmable analog, monaural, ITC	AAC	AAC
V5246	Hearing aid, digitally programmable analog, monaural, ITE (in the ear)	AAC	AAC
V5247	Hearing aid, digitally programmable analog, monaural, BTE (behind the ear)	AAC	AAC
V5248	Hearing aid, analog, binaural, CIC	AAC	AAC
V5249	Hearing aid, analog, binaural, ITC	AAC	AAC
V5250	Hearing aid, digitally programmable analog, binaural, CIC	AAC	AAC
V5251	Hearing aid, digitally programmable analog, binaural, ITC	AAC	AAC
V5252	Hearing aid, digitally programmable, binaural, ITE	AAC	AAC
V5253	Hearing aid, digitally programmable, binaural, BTE	AAC	AAC
V5254	Hearing aid, digital, monaural, CIC	AAC	AAC
V5255	Hearing aid, digital, monaural, ITC	AAC	AAC
V5256	Hearing aid, digital, monaural, ITE	AAC	AAC
V5257	Hearing aid, digital, monaural, BTE	AAC	AAC
V5258	Hearing aid, digital, binaural, CIC	AAC	AAC
V5259	Hearing aid, digital, binaural, ITC	AAC	AAC
V5260	Hearing aid, digital, binaural, ITE	AAC	AAC
V5261	Hearing aid, digital, binaural, BTE	AAC	AAC
V5262	Hearing aid, disposable, any type, monaural	AAC	AAC
V5263	Hearing aid, disposable, any type, binaural	AAC	AAC
V5298	Hearing aid, not otherwise classified	AAC	AAC

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(b) Maximum Fees for Earmolds. Provider's adjusted acquisition cost (AAC), plus a dispensing fee of \$13.52.

Code	Description	Rates	
		Effective	Effective
		10/1/2012	10/1/2013
V5264	Ear mold/insert, not disposable, any type	AAC+\$13.63	AAC+\$13.81
V5265	Ear mold/insert, disposable, any type	AAC+\$13.63	AAC+\$13.81

(c) Maximum Fee for Ear Impressions.

Code	Description	Rates	
		Effective	Effective
		10/1/2012	10/1/2013
V5275	Ear impression, each	\$13.63	\$13.81

(d) Maximum Fees for Batteries.

Code	Description	Rates	
		Effective	Effective
		10/1/2012	10/1/2013
V5266	Battery for use in hearing device	\$1.45	\$1.47
L8621	Zinc air battery for use w/cochlear implant device, replacement, each	AAC	AAC
L8622	Alkaline battery for use w/cochlear implant device, any size, replacement, each	AAC	AAC
L8623	Lithium ion battery for use w/cochlear implant device speech processor, other than ear level, replacement, each	AAC	AAC
L8624	Lithium ion battery for use w/cochlear implant device speech processor, ear level, replacement, each	AAC	AAC

(e) Maximum Fees for Other Accessories. Provider's adjusted acquisition cost (AAC), plus a 40% markup.

Code	Description	Rates	
		Effective	Effective
		10/1/2012	10/1/2013
V5267	Hearing Aid Supplies/Accessories	AAC+40%	AAC+40%
V5274	Assistive listening device, not otherwise specified	AAC+40%	AAC+40%

(f) Maximum Fees for Refitting Services.

Code	Description	Rates	
		Effective	Effective
		10/1/2012	10/1/2013
V5011	Fitting/orientation/checking of hearing aid	\$32.34	\$32.76

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(g) Maximum Fee for Minor Repairs.

Code	Description	Rates	Rates
		Effective	Effective
		10/1/2012	10/1/2013
99499	Unlisted evaluation and management service	\$4.66	\$4.72

(h) Maximum Fees for Major Repairs.

Code	Description	Rates	Rates
		Effective	Effective
		10/1/2012	10/1/2013
V5014	Repair/Modification of a hearing aid	AAC+40%	AAC+40%

(i) Maximum Fees for Extended Insurance. Manufacturer's price for insurance policy to the provider. The dealer may bill the purchasing governmental unit for postage and insurance costs incurred by the dealer when an aid covered by an extended insurance policy is mailed to the manufacturer for repairs and returned to the dealer. The dealer may bill under "Other Services" (*see* 101 CMR 323.03(4)(j)).

(j) Maximum Fee for Other Services. Individual consideration (I.C.).

Code	Description	Rates	Rates
		Effective	Effective
		10/1/2012	10/1/2013
V5299	Hearing service, miscellaneous	I.C.	I.C.

323.04: Severability

The provisions of 101 CMR 323.00 are severable, and if any provision of 101 CMR 323.00 or application of such provision to any provider of hearing aid dispensers or any circumstances shall be held to be invalid or unconstitutional, such invalidity shall not be construed to affect the validity or constitutionality of any remaining provisions of 101 CMR 323.00 or application of such provisions to providers of hearing aid dispensers or circumstances other than those held invalid.

REGULATORY AUTHORITY

101 CMR 323.00: M.G.L. c. 118E.

NON-TEXT PAGE