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# Hearing Aid Coverage for Children Program

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This section contains information about hearing aids and program coverage for the Hearing Aid Coverage for Children Program (HACCP). For additional information about billing, refer to the *Hearing Aids: Billing* and *Hearing Aids: Billing Example* sections of this manual.

## **Program Coverage and Criteria**

HACCP is a state-only funded program and is not considered a Medi-Cal or California Children's Services (CCS) program. Children ages zero to 20 who are not eligible for Medi-Cal may qualify for state-only coverage of hearing aids and related services through HACCP. Providers may refer to the [Hearing Aid Coverage for Children Program webpage](#) on the Department of Health Care Services ([DHCS website](#)) for additional information about HACCP eligibility, benefits, and claim authorization.

## **Eligibility Requirements**

### **Provider**

Only enrolled Medi-Cal providers may submit claims for HACCP-covered benefits. For a provider to receive reimbursement, the recipient must be enrolled in HACCP on the date of service. Providers may verify a recipient's HACCP enrollment status in the DHCS Automated Eligibility Verification System (AEVS) using their HACCP identification number. For additional information regarding Medi-Cal provider enrollment, refer to the *Provider Guidelines* section, in Part 1 of the Medi-Cal Provider Manual.

### **Recipient**

For a recipient to qualify for HACCP, the following criteria must be met:

- Recipient is under 21 years of age.
- Recipient resides in California.
- Recipient is not eligible for Medi-Cal.
- Recipient is not enrolled in CCS for a hearing-related condition.
- Enrollment requires a provider referral or a hearing aid prescription.
- Recipient does not have other health coverage for hearing aids or has other health coverage with a coverage limit of \$1500 or less for hearing aids.
- Annual household income is under 600 percent of the federal poverty level (FPL).

**Note:** Enrollment requires a provider referral or a hearing aid prescription.

## **Covered Benefits**

HACCP includes the following benefits:

- Hearing aids, including:
  - Assistive listening devices
  - Surface-worn bone conduction hearing devices (BCHDs)
- Medically necessary hearing aid supplies and accessories, including ear molds and hearing aid batteries
- Hearing aid-related audiology and post-evaluation services

## **Authorization Required**

Authorization is required for the purchase or trial period rental of hearing aids and for repairs that cost more than \$25 per repair service. Claims for individual repair services are not cumulative when determining the need for authorization.

**Note:** Refer to the “Programmable or Digital Hearing Aid Systems” section in the *Hearing Aids: Billing* manual section for authorization information on programmable or digital hearing aid systems.

Refer to the “Hearing Aid Supplies and Accessories for Specific Needs” section in the *Hearing Aids: Billing* manual section for authorization information on hearing aid supplies and accessories necessary to meet the specific needs of individual recipients.

HACCP covers new and replacement hearing aids and accessories as outlined in the “Covered Benefits” section above for enrolled participants subject to medical necessity.

Most HACCP benefits require authorization with a 50-1 *Treatment Authorization Request* (TAR) form or an electronic TAR (eTAR). The TAR shall include documentation that demonstrates the recipient meets the criteria listed below for the requested item or service.

To expedite TAR processing, select the special handling code “Hearing Aid Coverage for Children Program (HACCP)” in the eTAR system. If submitting a 50-1 form, indicate “HACCP” in the special instructions section to ensure proper routing.

## Criteria

HACCP follows Medi-Cal policy for the same services being provided for the same age group, including the Early and Periodic Screening, Diagnostic, and Treatment Services (EPSDT) definition of medical necessity for those under 21 (services are medically necessary or a medical necessity if they correct or ameliorate defects and physical and mental illnesses and conditions discovered through screening).

The pediatric audiologist and otolaryngologist are considered the experts on the medical needs of the recipient and the technology best suited for the condition. It is the responsibility of the audiologist and otolaryngologist to provide justification for medical necessity to support the request for a hearing aid and accessories.

The determination of whether a service is medically necessary for an individual must be made on a case-by-case basis, considering the specific hearing needs of the recipient within the scope of HACCP benefits.

### New Hearing Aids

HACCP covers new hearing aids when the following criteria are met:

- Medical necessity is demonstrated for new hearing aids.
- Appropriate and recent (generally within 12 months) medical documentation to support the need for new hearing aids are included in requests for new hearing aids.

### Bone Conduction Hearing Devices

HACCP covers surface-worn BCHDs as an alternative to a standard hearing aid for individuals with hearing problems in their outer or middle ear. Indications for a BCHD may be demonstrated by the following conditions:

- Mixed or conductive hearing loss.
- Unilateral or asymmetrical hearing loss.
- Congenital or acquired malformations of the external ear or middle ear, including those that are surgically induced. Examples include microtia, aural atresia, and anotia.
- Severe and persistent (or chronic) infections involving the external and/or internal ear.
- For individuals with copious chronic ear drainage that are unlikely to receive adequate benefit from traditional (air conduction) hearing aids.

**Note:** For TARs and claims for BCHDs, indicate a quantity of one for monaural and a quantity of two for binaural devices.

### Replacement Hearing Aids

HACCP covers replacement of medically necessary hearing aids when the current hearing aids have been lost, irreparably damaged, or no longer meet the patient's needs.

A new TAR with required documentation is required.

### Ear Molds

Ear molds only require a TAR if a child needs more than two ear molds at a time, or more than four ear molds per year.

## **TAR Documentation**

The following documentation is required with any TAR for hearing aids:

### New Hearing Aids

- Appropriately signed prescription from an otolaryngologist or the attending physician (in consultation with the evaluating otolaryngologist, if possible), when no otolaryngologist is available in the community
- Appropriately signed medical history and physical examination by an otolaryngologist
- Appropriately signed audiologic report and hearing aid evaluation, regardless of the recipient's ability to speak English
- Specification of ear to be fitted

### Replacement of Lost, Stolen, or Irreparably Damaged Hearing Aids

- Detailed description of hearing aid loss or events leading to damage, signed by the recipient
- Completed audiometric report, dated within the last 12 months, unless the TAR is for the replacement of a recently purchased hearing aid within the last three months
- Replacement of a stolen hearing aid requires a copy of a police report

**Note:** A request for replacement of a hearing aid that may be repairable must have a statement from the manufacturer that the aid is not repairable.

Replacement of Old Hearing Aids That No Longer Meet the Recipient’s Needs

- Comparative audiometric reports used for fitting old aid and new hearing aid
- Documentation that the old hearing aid is performing to specifications but is no longer adequate
- Documentation that hearing improved with the new hearing aid

Hearing Aid Repairs

- Description of the problem requiring repair
- Specification of ear to be fitted
- Hearing aid manufacturer’s name, unit, model designation, date of purchase and serial number

**Procedure Codes**

HACCP covers the following benefits, subject to medical necessity, and reimburses providers based on the applicable fee-for-service Medi-Cal rate for the same HCPCS or CPT® procedure code.

**Hearing Aids, Supplies, and Accessories Procedure Codes**

<b>Code</b>	<b>Description</b>	<b>Authorization</b>
L8621	Zinc air battery for use with cochlear implant device and auditory osseointegrated sound processors, replacement, each	Generally, a TAR is not required.
L8691	Auditory osseointegrated device, external sound processor, excludes transducer/actuator, replacement only, each	TAR required.
L8692	Auditory osseointegrated device, external sound processor, used without osseointegration, body worn, includes headband or other means of external attachment	TAR required. Specify requested quantity (for example: two, if using the same device binaurally).
L8694	Auditory osseointegrated device, transducer/actuator, replacement only, each	TAR required.
L9900	Orthotic and prosthetic supply, accessory, and/or service component of another HCPCS L code	TAR required. With the TAR, specify description of supply/accessory requested on a separate line per item, and include product details with cost (for example: the manufacturer’s catalog page).

**Hearing Aids, Supplies, and Accessories Procedure Codes (continued)**

<b>Code</b>	<b>Description</b>	<b>Authorization</b>
V5014	Repair/modification of a hearing aid	Generally, a TAR is not required.
V5030	Hearing aid, monaural, body worn, air conduction	TAR required.
V5040	Hearing aid, monaural, body worn, bone conduction	TAR required.
V5050	Hearing aid, monaural, in the ear	TAR required.
V5060	Hearing aid, monaural, behind the ear	TAR required.
V5070	Glasses, air conduction	TAR required.
V5080	Glasses, bone conduction	TAR required.
V5120	Binaural, body	TAR required.
V5130	Binaural, in the ear	TAR required.
V5140	Binaural, behind the ear	TAR required.
V5150	Binaural, glasses	TAR required.
V5171	Hearing aid, contralateral routing device, monaural, in the ear (ITE)	TAR required.
V5172	Hearing aid, contralateral routing device, monaural, in the canal (ITC)	TAR required.
V5181	Hearing aid, contralateral routing device, monaural, behind the ear (BTE)	TAR required.
V5190	Hearing aid, contralateral routing, monaural, glasses	TAR required.
V5211	Hearing aid, contralateral routing system, binaural, ITE/ITE	TAR required.
V5212	Hearing aid, contralateral routing system, binaural, ITE/ITC	TAR required.
V5213	Hearing aid, contralateral routing system, binaural, ITE/BTE	TAR required.
V5214	Hearing aid, contralateral routing system, binaural, ITC/ITC	TAR required.
V5215	Hearing aid, contralateral routing system, binaural, ITC/BTE	TAR required.
V5221	Hearing aid, contralateral routing system, binaural, BTE/BTE	TAR required.
V5230	Hearing aid, contralateral routing system, binaural, glasses	TAR required.

**Hearing Aids, Supplies, and Accessories Procedure Codes (continued)**

<b>Code</b>	<b>Description</b>	<b>Authorization</b>
V5264	Ear mold/insert, not disposable, any type	Generally, a TAR is not required. However, a TAR is required if quantity exceeds two per date of service or four per year.
V5265	Ear mold/insert, disposable, any type	Generally, a TAR is not required
V5267	Hearing aid or assistive listening device/supplies/accessories, not otherwise specified	TAR required. With the TAR, specify description of supply/accessory requested on a separate line per item, quantity of each, and include product details with cost (for example: manufacturer's catalog page).
V5298	Hearing aid, not otherwise classified	TAR required. With the TAR, specify device in description, and include product details with cost (for example: manufacturer's catalog page).
Z5822	Hearing aid batteries, replacement	Generally, a TAR is not required.
Z5946	Assistive Listening Device, not otherwise specified	TAR required. With the TAR, specify device in description, and include product details with cost (for example: manufacturer's catalog page).

### Audiology Procedure Codes

<b>Code</b>	<b>Description</b>	<b>Authorization</b>
92590	Hearing aid examination and selection; monaural	Generally, a TAR is not required.
92591	Hearing aid examination and selection; binaural	Generally, a TAR is not required.
92594	Electroacoustic evaluation for hearing aid; monaural	Generally, a TAR is not required.
92595	Electroacoustic evaluation for hearing aid; binaural	Generally, a TAR is not required.
V5010	Assessment for hearing aid	TAR required (specific exceptions may apply).
X4500	Diagnostic audiological evaluation, including pure tone audiometry, speech reception threshold, and discrimination	TAR required (specific exceptions may apply).
X4501	Pure tone audiometry (with complete audiogram)	TAR required (specific exceptions may apply).
X4522	Evoked response audiometry test, physician evaluation	TAR required (specific exceptions may apply).
X4526	Hearing therapy (individual) per hour	TAR required (specific exceptions may apply).
X4530	Impedance audiometry (bilateral)	TAR required (specific exceptions may apply).
X4532	Electroacoustic analysis of hearing aid as a monaural procedure	TAR required (specific exceptions may apply).
X4535	Unlisted audiological services	TAR required (specific exceptions may apply).
X4540	Tympanometry	TAR required (specific exceptions may apply).
X4542	Electroacoustic analysis of hearing aid as a binaural procedure	TAR required (specific exceptions may apply).
X4544	Diagnostic evaluation for severely physically/mentally handicapped person over age seven	TAR required (specific exceptions may apply).
Z5930	Real ear measurements, monaural	TAR required.
Z5932	Real ear measurements, binaural	TAR required.



**Outpatient Procedure Codes**

<b>Code</b>	<b>Description</b>	<b>Authorization</b>
99202 thru 99215*	Otolaryngologist/physician outpatient office visit	Generally, a TAR is not required.
99241 thru 99245*	Otolaryngologist/physician outpatient consultation	Generally, a TAR is not required.
99417*	Otolaryngologist/physician outpatient office visit	Generally, a TAR is not required.

## **Legend**

Symbols used in the document above are explained in the following table.

<b>Symbol</b>	<b>Description</b>
<<	This is a change mark symbol. It is used to indicate where on the page the most recent change begins.
>>	This is a change mark symbol. It is used to indicate where on the page the most recent change ends.
*	The description associated with this code or code range is abbreviated to assist with interpreting and navigating the content. Providers are responsible for referencing the appropriate codebooks for up-to-date full descriptions when considering which code is appropriate to bill for the services rendered.