



Clinical Review Criteria Related to Hearing Aids

Massachusetts

1. Criteria for Approval

- A. The member must be age twenty-one or younger
- B. A written statement from the member's treating physician stating that the hearing aids are medically necessary

2. Coverage

Coverage for hearing aids includes the following:

- A. Expenses incurred for the full cost of one (1) hearing aid per hearing impaired ear up to two thousand dollars (\$2,000) for each hearing aid every 36 months (benefit limit does not apply to related covered services).
- B. All related services prescribed by a licensed audiologist or hearing instrument specialist, for a member age 21 or younger (from birth through age 21). as defined in that section, Related services include the initial hearing aid evaluation, one hearing aid for each hearing-impaired ear; fitting and adjustments of the hearing aid, and supplies such as (but not limited to) ear molds.
- C. The insured may choose a higher priced hearing aid and may pay the difference in cost above the two thousand dollar (\$2,000) limit as provided in this section without any financial or contractual penalty to the insured or to the provider of the hearing aid (This limit does not apply for any covered services related to the hearing aid.)
- D. No coverage for replacement hearing aid batteries

New Hampshire

1. Criteria for Approval

- A. The hearing aid must be prescribed and dispensed by a licensed audiologist or health instrument specialist
- B. MHI covers hearing aids and related service for members regardless of age



2. Coverage

Coverage for hearing aids includes the following:

- A. The cost of a hearing aid for each ear, as needed, including any parts, attachments or accessories, including ear molds, as well as related services necessary to assess, select, and fit the hearing aid. "Hearing aid" means any instrument or device designed, intended, or offered for the purpose of improving a person's hearing and any parts, attachments, or accessories, including ear molds.
- B. A hearing aid must be prescribed, fitted, serviced and dispensed by an In-Plan Audiologist or other In-Plan Provider who is a hearing instrument dispenser or other hearing care professional. Otherwise, no benefits are available.

3. What is Not Covered

- A. Back-up hearing aids that serve a duplicative purpose.
- B. Charges for batteries, cords, and individual or group auditory training devices and any instrument or device used by a public utility in providing telephone or other communication services.

Please Note (Applies to MA and NH):

Payment responsibilities and other requirements that are part of the member's plan apply to this coverage. The benefits in this section shall not be subject to any greater deductible, coinsurance, copayments or out-of-pocket limits than any other benefits provided by the insurer.

REFERENCES:

Massachusetts General Law, Chapter 233 of the Acts of 2012.
New Hampshire RSA 415:18-u