
Audiology Services

4.213 Audiology Services (12/2/2016, GCR 16-076)

4.213.1 Definitions

For the purposes of this rule, the term:

- (a) **“Audiology services”** means services related to the diagnosis, screening, prevention and correction of hearing and hearing disorders.
- (b) **“Hearing aids”** means wearable instruments or devices to compensate for impaired hearing.

4.213.2 Covered Services

- (a) Audiology services approved for coverage are limited to:
 - (1) Audiologic examinations,
 - (2) Hearing screening,
 - (3) Hearing assessments, and
 - (4) Diagnostic tests for hearing loss.
- (b) Covered services for hearing aids include:
 - (1) Analog or digital hearing aids, plus their repair, replacement, or modification,
 - (2) Prescriptions for hearing aid batteries, limited to six batteries per month,
 - (3) Fitting, orientation, and/or checking of hearing aids, and
 - (4) Ear molds specific to hearing aids.

4.213.3 Conditions for Coverage

- (a) Audiology services must be provided by a physician, or licensed audiologist working within the scope of his or her practice and enrolled with Vermont Medicaid.
- (b) Hearing aids are covered only for beneficiaries who have at least one of the following conditions or if otherwise medically necessary for children under the age of 21.
 - (1) Hearing loss in the better ear is greater than 30dB, based on an average taken at 500, 1000, and 2000Hz.
 - (2) Unilateral hearing loss is greater than 30dB, based on an average taken at 500, 1000, and 2000Hz.
 - (3) Hearing loss in the better ear is greater than 40dB, based on an average taken at 2000, 3000, and 4000Hz, or word recognition is poorer than 72%.
- (c) Hearing aid repairs may not exceed 50% of the replacement cost.

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4.213.4 Prior Authorization Requirements

(a) Prior authorization is required for:

- (1) More than one analog or digital hearing aid per ear every three years.
- (2) More than one hearing aid repair or modification per year, or any repair or modification in excess of \$100.

4.213.5 Non-Covered Services

(a) Non-medical items, such as canal aids, maintenance items other than batteries, and fees associated with selection trial periods or loaners, are not covered.