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## Hearing Aid Coverage for Children Program (HACCP) Overview

### Program Overview

The [Budget Act of 2020](#) (Assembly Bill 89, Chapter 7, Statutes of 2020), authorized [HACCP](#), which launched on July 1, 2021. This new state-only program serves California children who are not eligible for Medi-Cal or hearing-related coverage through California Children's Services Program (CCS) and live in a household with income up to 600 percent of the federal poverty level (FPL). Children can qualify for HACCP regardless of immigration status. Without medically necessary hearing aids, deaf and hard-of-hearing children are at high risk for developmental and educational delays. Children who are deaf and hard-of-hearing must be able to utilize every medical assistance and device available to ensure continued learning. HACCP was initially available to children under 18 without insurance or whose insurance does not cover hearing aids and related services. Effective January 1, 2023, the [Budget Act of 2022](#) (Assembly Bill 179, Chapter 249, Statutes of 2022) expanded the age criteria for HACCP to children under the age of 21, and broadened coverage to children who had other insurance with coverage of \$1,500 or less for hearing aids.

### Benefit Structure and Reimbursement

HACCP uses the Medi-Cal fee-for-service (FFS) [billing and claims structure](#), [FFS provider network](#), and [reimbursement rates](#). HACCP covers hearing aid-related audiology and diagnostic assessments, hearing aids, including assistive listening devices (ALDs) and surface-worn bone conduction hearing devices (BCHDs); supplies, including ear molds and hearing aid batteries; medically necessary hearing aid accessories; and hearing aid-related audiology and physician services. For a more comprehensive list of covered services, see DHCS' [HACCP Provider Manual](#).

## Eligibility and Case Management

DHCS currently utilizes the services of administrative vendor, Maximus, to conduct eligibility determinations and perform ongoing case management for HACCP. The current responsibilities of Maximus include the following: 1) performing case intake by reviewing applications to approve/deny applicants for program enrollment, 2) enrolling approved children into the program, 3) operating a call center, 4) developing required program informing and other related materials, 5) maintaining a database for ongoing case management purposes, and 6) conducting program monitoring and reporting.

## HACCP Action Plan: DHCS' Call to Action

On October 7, 2023, Governor Newsom returned [Senate Bill 635](#) (Menjivar and Portantino, 2023) to the California State Senate without his signature. The Governor's [veto message](#) identified a need explore increases to Medi-Cal provider payments with the goal of incentivizing additional provider participation in HACCP. In addition, the Governor reiterated California's commitment to ensuring deaf and hard-of-hearing (DHH) children have access to services and supports they need, including hearing aids, and directed DHCS to take a variety of steps to help individuals maximize benefits. In response, DHCS identified avenues to feasibly improve HACCP and also produced an [HACCP Action Plan](#), along with two historical addendums in [2024](#) and [2025](#), to address the Governor's six enumerated steps, which were as follows:

1. Partner with other State entities to promote participation and awareness of HACCP;
2. Complete translations for HACCP-related materials into threshold languages;
3. Implement a streamlined annual eligibility review (AER) process to simplify enrollment;
4. Conduct outreach to Medi-Cal providers not yet participating in HACCP to support their participation;
5. Host quarterly webinars with providers and stakeholders; and
6. Continue to identify potential service improvements and strategies to increase HACCP success.

Since HACCP is now fully in the maintenance and operations phase, this 2026 addendum will be the final, annual one produced by DHCS. This final 2026 addendum to DHCS' original [HACCP Action Plan](#) (February 2023) and the [2024](#) and [2025](#) addendums outlines DHCS' continued efforts to further increase awareness of and participation in HACCP, from both the provider engagement and member enrollment perspectives. The following table summarizes DHCS' implementation strategies to date, many of which will continue in the future as part of DHCS' ongoing commitment:

## Action

### 1. Partner with other State entities to promote participation and awareness of HACCP.

- » Partner with California Department of Education (CDE), DHCS' Medi-Cal Local Education Assistance – Billing Options Program, and large school districts to include HACCP materials with referrals generated from school hearing screenings and to educate school audiometrists about the program and DHH teachers and intervention providers.
- » Partner with Newborn Hearing Screening Program (NHSP) to cross-promote HACCP in relevant NHSP webpages, packets, and appropriate other publications.
- » Partner with CCS for coordinated referrals to HACCP for families who are ineligible for CCS (including those who are no longer eligible), as appropriate.
- » Partner with Department of Developmental Services (DDS) regarding HACCP outreach to Early Start recipients and providers, Regional Centers, and Family Resource Center (FRC) staff.
- » Partner with Covered California to identify opportunities for including and disseminating HACCP information directly to health plans and individuals obtaining health care coverage through the exchange.
- » Partner with Department of Consumer Affairs (DCA) regarding opportunities to include provider outreach materials in audiology licensing renewal correspondence.
- » Partner with the California Children and Families Commission (CCFC) and First 5 regarding relevant opportunities to include HACCP in educational resources.

DHCS began this work in Fall 2022 and has continued to expand and enhance its efforts since that time.

DHCS has held meetings with the State entities mentioned above, as applicable, to discuss opportunities for cross-promotion of HACCP. DHCS continues to develop these collaborative relationships, prioritizing those related to the inclusion of HACCP information in materials and information distributed by other State entities, alongside their community partners throughout the state, to relevant California residents and providers. Outcomes of these important partnerships include: incorporation of HACCP resources on other State entity webpages and in their publications; integration of HACCP into existing State processes to support broader community awareness and enrollment; development of targeted materials for dissemination through other State entities, such as informational trainings/webinars; and distribution of tailored materials to support outreach efforts by community partners, such as through [Covered California's Special](#)

[Enrollment Period Toolkit](#). Looking forward, DHCS will continue to foster these important relationships and engage with various State entities serving DHH children and youth, along with the specialty providers they rely on for hearing-related services, as needed, to expand current outreach efforts and identify additional opportunities for improved coordination of education and outreach.

## **2. Continue to offer HACCP-related materials in relevant languages.**

- » Program flyers and materials, such as those for webinars or requested by community partners for specific events, will be available in threshold languages as requested or as most relevant to a particular event.

DHCS' websites, including HACCP webpages, are accessible and viewable in DHCS' 19 threshold languages through Google Translate. [The HACCP online application portal](#) and key [program outreach materials](#), including the HACCP Communications Toolkit and program overview brochure, are similarly available in threshold languages. Additionally, internal DHCS processes are in place to ensure that current and future HACCP materials are made available in threshold languages and are also periodically reviewed to ensure they are up to date. For example, DHCS has been examining website analytics to determine how often members download documents. DHCS has also revamped the images in the HACCP brochure and the communications toolkit to ensure they are culturally competent and relatable for members and their families. In addition, DHCS created and posted to the HACCP website a process map for the member enrollment process (i.e., for determining eligibility for HACCP), including anticipated timelines, reminders and other touch points.

## **3. Enhance AER resources to support timely and convenient renewal of coverage.**

- » Each year, members must complete an [AER](#) to confirm their continued eligibility to remain enrolled in continuous coverage for hearing aids and related services through HACCP.
- » Optimize AER-related outreach to provide coordinated support for members during their AER window.
- » Identify additional barriers to prospective members enrolling in, or renewing, HACCP coverage.
- » Enhance communication with current HACCP members of importance to renew in order to avoid any lapses in coverage.

Since April 2024 and ongoing, the enhanced, streamlined [HACCP AER Application](#) and corresponding [instructions](#) are

available for members to use during the annual process that helps them keep their hearing aid coverage for the next 12 months. The AER application is now available online. DHCS has also worked and will continue to work to update AER-related correspondence to members to emphasize the importance of ongoing coverage for follow-up services, as well as continued access to medically necessary supplies and accessories that may be required sooner than the expected replacement of their new hearing aid(s) (e.g. using envelopes with attention-grabbing text). DHCS' coordinated expansion of AER follow-up strategies, such as additional correspondence and outbound calls, will continue to further support member awareness of the relevant timeframe for completing their AER on time to prevent a lapse in coverage. Going forward, DHCS will also continue to engage with key stakeholders in this space, as needed, to identify additional opportunities for optimization.

#### **4. Conduct outreach to increase provider availability to serve HACCP-enrolled children and youth.**

- » Conduct strategic, intentional, and targeted outreach to relevant providers in a variety of settings, such as Medi-Cal FFS providers with the highest claim volume and highest procedure counts for HACCP's covered benefits, who are not yet participating in HACCP. Outreach will focus on increasing provider awareness, addressing provider questions, and supporting engagement of relevant providers.
- » DHCS will continue and expand its targeted outreach campaign to recruit these existing Medi-Cal FFS providers already rendering services for Medi-Cal (including CCS) members to actively serve HACCP members.
  - o Outreach materials will include notices for upcoming provider webinars, materials promoting HACCP eligibility criteria and enrollment instructions, brochures for providers to display in their offices, and other resources available to support these providers' awareness and participation in HACCP.
- » Implement parallel targeted outreach to encourage HACCP-participating providers to list their practice location(s) and contact information in the [HACCP Provider Locator](#), facilitating more convenient access to care for HACCP members.
- » Broader outreach to providers includes Provider Bulletins and Newsflashes to let Medi-Cal enrolled providers, regardless of specialty, know about resources like the [HACCP Provider Referral Form](#) for helping non-Medi-Cal patients referred for hearing-related services with accessing coverage through HACCP for those services.
- » Together with audiology professionals and DHH-focused community-based organizations (CBOs), collaboratively

improve understanding of challenges faced in providing services to children – both in general and specific to HACCP.

- » Target outreach to otolaryngologists and audiologists who are not yet enrolled in Medi-Cal, with a geographic emphasis on underserved areas of California.
- » Engage with larger-scale health systems that offer pediatric audiology services in California to identify any logistical challenges to their participation in HACCP and co-create solutions to facilitate organization-wide participation.
- » Continue building relationships with provider organizations, including promoting program visibility by participating in or hosting exhibits at conferences and events.
- » Partner with audiology educators in California to promote HACCP among graduating audiologists and university-based clinics.

Since 2023 and ongoing, DHCS has been taking a data-driven approach to identify the highest-billing Medi-Cal FFS providers to conduct additional outreach to increase awareness of HACCP and encourage provider participation. For example, Kaiser Permanente Hearing Centers in Northern California (KPNC), which includes 23 locations, is now participating in HACCP and available to better meet the needs of Kaiser members receiving services through HACCP at KPNC hearing centers. To support smoother onboarding, DHCS worked closely with KPNC and provided technical assistance, including training on billing, provider enrollment, and electronic Treatment Authorization Request processes. DHCS has also attended the annual California Academy of Audiology Conference and hopes to continue to do so in the future as it provides a valuable opportunity to meet with audiology providers from across the state of California to better understand enrollment, billing, and provider network issues to inform development of potential solutions. Moving forward, DHCS will continue to identify and explore additional opportunities to facilitate relevant providers' engagement with Medi-Cal and HACCP, including efforts related to reimbursement for hearing aid-related benefits and geographically informed outreach.

## **5. Host quarterly webinars with providers, families, and stakeholders.**

- » HACCP Webinars for Medical Providers and Hearing Professionals are opportunities to present providers with information to help pediatric patients and their families to maximize the HACCP benefits. The training sessions will address the program requirements for families to apply for coverage and the claims submission process for

audiologists, otolaryngologists, physicians, and their office staff.

- » HACCP Webinars for Families and Community Partners share guidance with interested families about applying for hearing aid coverage and helps new members and their families to maximize their HACCP benefits once enrolled. These webinars also provide program updates and tools for stakeholders, educators, and other community partners to support families and children in accessing coverage through HACCP.

Since December 2023, DHCS has regularly met with a small group of key HACCP stakeholders to collaboratively identify new opportunities and follow up on important issues, including but not limited to those enumerated items within this Addendum. Going forward, DHCS will continue to engage with key stakeholders in this space, as needed.

#### **6. Continue to identify and implement potential service improvements and strategies to improve program awareness among families of children and youth who need hearing aids.**

- » Continuous optimization of web content and organization for more contextual and intuitive navigation.
- » Periodically re-review HACCP covered benefits to ensure completeness.
- » Continue rollout of DHCS' updated visual identity resources in program materials.
- » Further enhance [HACCP Provider Locator](#) functionality.
- » Partner with advocates to identify DHH events where Department participation may be effective in promoting HACCP to eligible community members.

DHCS continues to periodically review and make any necessary refinements to HACCP web content to ensure it is intuitive to navigate, easy to understand, and provides the appropriate level of detail. As necessary going forward, DHCS will also continue to develop new and refine existing HACCP materials, and work with stakeholders to identify additional relevant outreach channels and opportunities to share these tools with families to increase awareness. DHCS will also continuously evaluate HACCP coverage and billing policy to identify opportunities for improvement and, where appropriate, alignment with Medi-Cal. For example, DHCS updated the Medi-Cal Provider Manual and made associated billing system edits to add CPT codes 92622 and 92623 as both Medi-Cal and HACCP benefits. DHCS has also offered provider billing training courses and has been actively working to address various billing and invoicing challenges for providers to ensure appropriate and accurate billing. Moreover, DHCS will also continue to undertake efforts to improve HACCP data quality

and public reporting on the [HACCP Program Data](#) webpage. DHCS will also continue to maintain the [HACCP Provider Locator](#) tool. Lastly, as needed, DHCS will continue to foster its relationships with providers and other key partners to help more effectively promote HACCP. Ultimately, DHCS' work involves continuous process improvement, which will continue future forward.