

Local Educational Agency Medi-Cal Billing Option Program (LEA BOP) Stakeholder Meeting



**Hearing Aid Coverage
for Children Program**

April 26, 2023

School-Based Referrals



**Hearing Aid Coverage
for Children Program**

HACCP Overview

- » State-funded program launched July 1, 2021 and expanded January 1, 2023
- » Covered benefits:
 - 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
 - Hearing aid-related audiology and post-evaluation services

HACCP Overview (Continued)

- » Not an LEA BOP benefit, but a related program that serves students
- » Based on Fee-For-Service (FFS) Medi-Cal coverage of hearing aid-related benefits for the same age group (under age 21)
- » Enrolled Medi-Cal providers submit claims for covered benefits provided to HACCP-enrolled patients through the same process they already use for FFS Medi-Cal and California Children's Services (CCS) patients

HACCP Eligibility

- » Children 0-20 years of age
- » Must reside in California
- » Not otherwise eligible for Medi-Cal
- » Not currently enrolled in CCS for a hearing-related condition
- » Enrollment requires a valid hearing aid prescription or a referral from a medical provider or hearing professional
 - Includes referrals from school-based hearing screenings
 - Resource: [Provider Referral for Patient Enrollment \(DHCS 8482\)](#)

HACCP Eligibility (Continued)

- » Household income under 600% of federal poverty level (FPL)

Household / Family Size (including parents)	600% FPL (household combined gross income)
1	\$87,480 per year (\$7,290 per month)
2	\$118,320 per year (\$9,860 per month)
3	\$149,160 per year (\$12,430 per month)
4	\$180,000 per year (\$15,000 per month)
Each Additional	Add \$30,840 per year (\$2,570 per month)

HACCP Eligibility (Continued)


- » Does not have other health coverage for hearing aids and related services

OR

- » Has other health coverage that limits annual benefit for hearing aids to \$1,500 or less
- » Documentation options:
 - Denial of coverage notice from other health insurance/coverage
 - Explanation of coverage from other health insurance/coverage
 - Attestation of no other health insurance/coverage (see application)

HACCP Resources

State of California – Health and Human Services Agency
Provider Referral for Patient Enrollment

Department of Health Care Services
 **Hearing Aid Coverage for Children Program**

You can send this completed form, a hearing aid prescription, or provider referral letter to us by:

1. **Online Portal:** Sign in and upload with your HACCP application at www.haccp.dhcs.ca.gov
2. **Chat:** Online at www.dhcs.ca.gov/haccp (click "Chat with us..." in the bottom corner of your screen, then select "Upload Documents")
3. **Fax:** Toll-free to 1 (833) 774-2227
4. **Mail:** Hearing Aid Coverage for Children Program
P.O. Box 138000
Sacramento, CA 95813

All fields marked as required must be filled

Date of Referral: _____

Patient's Information

Name (required): _____ Birth Date: _____
Address: _____
City: _____ State: _____ Zip Code: _____

Reason for Referral (required)

☐ Hearing Aid
☐ Hearing Screening
☐ Hearing Aid Evaluation
☐ Other hearing aid-related coverage: _____

Referring Medical Provider or Hearing Professional

Individuals who can refer a patient to the HACCP may include the following:

*Audiologist *Otolaryngologist *Physician
*Audiometrists *Any other trained/licensed hearing or medical professional

Name (required): _____
Title (required): _____
Office/Center Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____

DHCS 8482 (03/2023)

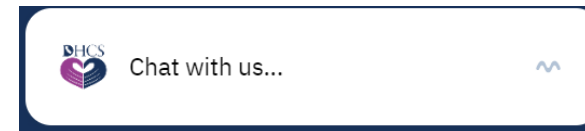
» HACCP webpage:
www.dhcs.ca.gov/haccp

- Apply Online
- Find A Provider
- Webinars
- **Resources for Community Partners**
- FAQs

HACCP Resources (Continued)

» HACCP Help Center

- **Call 1 (833) 774-2227**
 - Translators available
 - Video relay, TTY/TTD
- Chat with us online at www.dhcs.ca.gov/haccp
 - English and Spanish
 - Can upload documents
- Email HACCP@maximus.com



Questions?

