# Webinar for Medical Providers & Hearing Professionals

## Deep Dive: Provider Manuals

**Hearing Aid Coverage for Children Program**

March 2025

# Accessibility

» **This presentation will be recorded and available online**, along with **slides from today's presentation**, at: https://www.dhcs.ca.gov/services/HACCP/Pages/HACCP-Events.aspx.

» To show automated closed captions during today's presentation, click **Show closed captions** [CC ▾] in the lower-left corner of the Webex webinar window.

» Today's webinar includes a **Question & Answer (Q&A) session**. Kindly let us know if you have any questions, using the Q&A panel in Webex.

# HACCP Provider Manual

» Available online at:
https://mcweb.apps.prd.cammis.medi-cal.ca.gov/file/manual?fn=hearaccp.pdf

» February 2025 Update:
The Department of Health Care Services (DHCS), after consultation with stakeholders, has clarified portions of the coverage and reimbursement policies for HACCP.

## Hearing Aid Coverage for Children Program

«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 Audiological Services: Billing Codes and Reimbursement Rates, *Audiological Services Billing Example: CMS-1500, Hearing Aids: Billing, Hearing Aids: Billing Example* and *Other Health Coverage* (OHC) sections of this manual.»

## Program Coverage and Criteria

«HACCP is a state-only funded program for children and youth who do not qualify for full scope Medi-Cal or hearing aid coverage through 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 web page for additional information about 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.

# HACCP Overview

» Authority: Budget Act of 2020 and Budget Act of 2022

- State-only benefit launched July 1, 2021

- Expanded eligibility effective January 1, 2023

» Program Implementation:

- Based on Medi-Cal Fee-For-Service (FFS) coverage of hearing aid-related benefits for the same age group (under 21 years old)

- Policies and documents incorporate extensive feedback from California Children's Services (CCS) and pediatric audiology stakeholders

- Dedicated support team, provider locator, and online application portal (https://haccp.dhcs.ca.gov)

# HACCP Eligibility

» Children 0-20 years of age

» California resident

» Household income under 600% of Federal Poverty Level (FPL)

» Does not have health coverage for hearing aids:

  • Not eligible for Medi-Cal

  • Not enrolled in California Children's Services (CCS) for a hearing-related condition

  • If enrolled in a health plan, the plan does not include hearing aids **or** limits annual benefits for hearing aids to $1,500 or less

» Enrollment requires a referral from a medical provider or hearing professional **or** a valid hearing aid prescription

  • Resource: [Provider Referral for Patient Enrollment (DHCS 8482)](#)

# HACCP Eligibility (Continued)

## Income Eligibility Comparison Chart for 2025

| Household Size, Including Parents | Medi-Cal for Kids (266% FPL) | C-CHIP* (322% FPL) | HACCP (600% FPL) |
|---|---|---|---|
| 1 | $41,629/year | $50,393/year | $93,900/year |
| 2 | $56,259/year | $68,103/year | $126,900/year |
| 3 | $70,889/year | $85,813/year | $159,900/year |
| 4 | $85,519/year | $103,523/year | $192,900/year |
| Each Additional | Add $14,630/year | Add $17,710/year | Add $33,000/year |

*County Children's Health Initiative Program (C-CHIP) serves eligible children 18 years of age or younger in San Mateo, San Francisco, and Santa Clara Counties.

Note: Based on U.S. Department of Health and Human Services' FPL guidelines. Additional resources available at: https://www.dhcs.ca.gov/services/HACCP/Pages/Families/Eligibility.aspx.

# Provider Manual Navigation

» HACCP Provider Manual lists recipient eligibility requirements, but also *cross-references* another relevant section of the Medi-Cal Provider Manual.

- *Other Health Coverage (OHC)*

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**Recipient**

«To enroll in 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.
- «Annual household income is under 600 percent of the federal poverty level (FPL).
- Enrollment requires a referral from a medical provider or hearing professional or a hearing aid prescription.»

Part 2 – Hearing Aid Coverage for Children Program

- 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.

**Note**: «Refer to the *Billing Medi-Cal After OHC* section in the *Other Health Coverage* (OHC) manual section for information on requesting supplemental HACCP.»

# Finding a Provider Manual

» Provider Manuals are published on DHCS' Medi-Cal Providers website, available at: https://mcweb.apps.prd.cammis.medi-cal.ca.gov/publications/manual

» To search for a manual, select "Manuals" and enter the title, locator key, or a keyword in the search bar.

# HACCP Covered Benefits

» HACCP covers a full range of hearing aid-related benefits, from evaluation to follow-up:

- Hearing aids, including assistive listening devices (ALD) and surface-worn bone conduction hearing devices (BCHD)

- Medically necessary hearing aid accessories

- Supplies, including ear molds and hearing aid batteries

- Hearing aid-related audiology and physician services

» For a comprehensive list, see the Department of Health Care Services' HACCP Provider Manual at: https://mcweb.apps.prd.cammis.medi-cal.ca.gov/file/manual?fn=hearaccp.pdf

» Coverage determinations are based on medical necessity. There is no cap on HACCP-covered benefits if medically necessary.

# HACCP Covered Benefits (Continued)

## Covered Benefits

‹‹HACCP covers hearing aids when supplied by a hearing aid dispenser on the prescription of an otolaryngologist, or the attending physician (in consultation with the evaluating otolaryngologist, if possible) when no otolaryngologist is available in the community. An audiological evaluation, including a hearing aid evaluation performed by, or under the supervision of, the prescribing physician or by a licensed audiologist is required.

**Note**: In accordance with California Business and Professions Code Chapter 7.5, Article 3, Section 3365.6, a recipient 16 years old or younger requires the recommendation of a hearing aid by both a board-certified otolaryngologist and a state-licensed audiologist within six months of the sale of the hearing aid.

HACCP hearing aid benefits, including sales tax, are limited to $1,510 per recipient per fiscal year, which can be exceeded based upon medical necessity (documented with an approved *Treatment Authorization Request* [TAR]).››

HACCP includes the following benefits:

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

# HACCP Covered Benefits (Continued)

## Procedure Codes

‹‹HACCP covers the following benefits, consistent with Medi-Cal policy, applicable to the same age group and subject to medical necessity. In addition, the following guidelines apply when billing HACCP for these procedure codes:

- Supplies needed beyond these limits may be authorized by a TAR. Frequency will be controlled by the TAR.

- Frequency limitations for BCHDs and related supplies and accessories are per unilateral BCHD (per ear/side) as such, if requesting binaural/bilateral BCHDs, a TAR must specify requested quantity as two.››

### ‹‹BCHDs, Supplies and Accessories Procedure Codes››

| Code | Description | ‹‹Authorization and Frequency Restriction›› |
|------|-------------|----------------------------------------------|
| L8621* | Zinc air battery for use with cochlear implant device and auditory osseointegrated sound processors, replacement, each | ‹‹96 batteries allowed in each 12 month period, per device (192 total per year if binaural/bilateral BCHDs)››. |
| L8691 | Auditory osseointegrated device, external sound processor, excludes transducer/actuator, replacement only, each | ‹‹TAR required. One replacement allowed every five years.›› |
| L8692 | Auditory osseointegrated device, external sound processor, used without osseointegration, body worn, includes headband or other means of external attachment | ‹‹TAR required. One device allowed per ear/side, every five years.›› |
| L8694 | Auditory osseointegrated device, transducer/actuator, replacement only, each | ‹‹TAR required. One replacement allowed every five years›› |

# HACCP Enrollment Process

» Apply online at https://haccp.dhcs.ca.gov

» Required documentation:

- ❑ Household income
- ❑ Existing health coverage (if any)
- ❑ Hearing aid prescription or provider referral

» Eligibility will be determined within 10 days from receipt of a complete application. HACCP will confirm your enrollment status by mail.

# HACCP Providers

» Once enrolled, find a participating provider: https://providerca.maximus.com/
**or**

» If an enrolled child is already established with a pediatric hearing aid provider, is their current provider enrolled as a Medi-Cal provider?

- Enrolled Medi-Cal FFS providers may submit claims for covered benefits provided to HACCP clients through the same process they already use for Medi-Cal FFS and CCS.

- If the provider is not already enrolled in Medi-Cal, they can learn more and apply online: https://www.dhcs.ca.gov/provgovpart/Pages/PAVE.aspx

# Treatment Authorization Request (TAR) Process

» Medi-Cal and HACCP use TARs to support appropriate use of covered benefits.

» Some benefits always require a TAR for medical necessity, while others only require a TAR after a certain quantity.

- Hearing aids always require an approved TAR.

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

» DHCS anticipates responding to most TARs within 30 days of receipt.

# TAR Process (Continued)

» When a TAR is required, it can be submitted for review either before or after rendering the service, but must be approved prior to submitting the claim for reimbursement. The claim must include the approved TAR number.

» Additionally, specific documentation must be included with TARs for the following categories of benefits:

- New hearing aids
- Replacement of lost, stolen, or damaged hearing aids
- Replacement of old hearing aids that no longer meet the needs of the recipient
- Hearing aid repairs

# TAR Process (Continued)

## 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.

‹‹HACCP benefits that require authorization must use a 50-1 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 medical necessity standard for recipients under 21 years of age.››

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.

# **Medical Necessity**

» HACCP uses the same standard of medical necessity that applies to Medi-Cal children the same age:

- Does the requested benefit **correct or ameliorate** a defect or physical and mental illness or condition discovered through screening?

» What is the hearing loss threshold to approve a hearing aid TAR for children?

- Measurable improvement of your patient's hearing – with articulated documentation of the improvement and your clinical reasoning.

- Traditional standard: booth testing (pure tone average)

- Alternate, non-booth testing may also be clinically appropriate: otoacoustic emissions, electroacoustic testing

# Explanation of Medical Necessity

» If you have test results measuring comparable hearing or speech perception with and without the hearing aid, or similar, please share those with us.

» If you are relying on non-testing measures of improved hearing or speech perception, please articulate your observations and clinical reasoning to document how this helps your patient.

# Explanation of Medical Necessity: Examples

» Describe the benefits – "The child appears to benefit."

- Insufficient (too vague)

- Solution: Show us <u>why</u> you believe the child benefits from the device. Even a simple explanation can help us justify the expenditure as a responsible use of taxpayer dollars.

» Trial and error – "Let's try it and see if it works."

- Insufficient (too uncertain)

- Solution: Explain your clinical reasoning <u>why</u> your recommended approach will successfully benefit the child.

- If truly uncertain, additional testing and evaluation may be needed.

# Submitting an eTAR

» TARs may be submitted online (eTAR) on the Medi-Cal Provider website (www.medi-cal.ca.gov). From the Provider Portal drop-down menu, select Login to Transaction Services.  For eTAR assistance contact: Telephone Service Center (TSC) at (800) 541-5555.

» The most important thing you can do when submitting an eTAR for HACCP is select the "*Hearing Aid Coverage for Children Program (HACCP)*" **Special Handling code** on the **Patient Information page**. If the provider does not use this special handling, their TAR will be routed incorrectly and may result in a denial.

# Submitting a Paper TAR

» Submitting an eTAR and supporting documentation online is the quickest, most efficient, cost-effective, and secure way of submitting a TAR.

» However, you do have the option of mailing in a paper TAR (50-1 form) and supporting documentation. Paper TARs should be mailed to:

> TAR Processing Center
>
> P.O. Box 13029
>
> Sacramento, CA 95813-4029

» **For paper 50-1 TARs,** providers MUST clearly write "HACCP" in the **Medical Justification section** of the form. If the provider does not, their TAR will be routed incorrectly and may result in a denial.

» For TAR assistance contact: Telephone Service Center (TSC) at 1 (800) 541-5555

# TAR Supporting Documentation

» For <u>new</u> hearing aids, your child's audiologist needs to include these documents when they submit the TAR:

- ❑ Hearing aid **prescription** from an otolaryngologist (or the attending physician when no otolaryngologist is available in the community)

- ❑ Signed medical history and physical **examination by an otolaryngologist**

- ❑ Signed **audiologic report and hearing aid evaluation**

- ❑ **Specification of ear** to be fitted

# Frequently Asked Questions (FAQs) for Authorization Process & Reimbursement

- **Does enrollment in HACCP and receipt of the HACCP ID Card identification give implied authorization for hearing aids and services?**
  No, enrollment and ID card reflect program acceptance; TAR approval is still required.

- **Is the authorization tied to a particular center for all services or can a patient/family seek different services at different centers? If so, can families change providers?**
  The provider who submits the TAR and receives the TAR authorization must also be the provider to submit the claim. If the client changes providers, the new provider must submit a new TAR for any further hearing aid(s) and supplies.

- **How should providers confirm benefits are active or that hearing aids have not been provided by another vendor rendering the patient ineligible for new hearing aids until current hearing aids reach their useful lifetime?**
  Providers may check AEVS to confirm a patient's HACCP eligibility. Duplicate hearing aid requests will be eliminated by the TAR process. If a patient has an HACCP ID card but is not yet showing up in AEVS, please call the HACCP Help Center to confirm current enrollment.

- **Will authorizations be issued as a group (similar to CCS' SCG 04)?**
  No. However, multiple requests for the same patient and billing provider may be included as separate line items within the same eTAR submittal.

# Reimbursement

» HACCP reimburses providers for covered benefits in accordance with Medi-Cal FFS rates and reimbursement policies. More information can be found online: https://files.medi-cal.ca.gov/Rates/RatesHome.aspx

» For services rendered by audiologists, the Budget Act of 2022 restored **full reimbursement rates** following prior budget cuts from Assembly Bill 97 (Chapter 3, Statutes of 2011) which previously reduced payments by ten percent. Implementation is effective retroactively to July 1, 2022.

# Reimbursement (Continued)

» When an HACCP member has OHC, such as through a commercial health plan, providers must bill the member's OHC before submitting a claim to HACCP.

» See: OHC Provider Manual (*oth hlth*)

## Medical Supply Claims: OHC Documentation

OHC documentation requirements for providers billing for medical supplies are simplified. Refer to the *Medical Supplies* section of the appropriate Part 2 manual for information.

## Billing Medi-Cal After OHC

These principles must be followed when billing Medi-Cal after billing OHC:

1. Medi-Cal may be billed for the balance, including OHC copayments, OHC coinsurance and OHC deductibles. Medi-Cal will pay up to the limitations of the Medi-Cal program, less the OHC payment amount, if any.

2. Medi-Cal will not pay the balance of a provider's bill when the provider has an agreement with the OHC carrier/plan to accept the carrier's contracted rate as payment in full.

3. ‹‹An EOB or denial letter from the OHC must accompany the Medi-Cal claim.››

4. The amount, if any, paid by the OHC carrier for all items listed on the Medi-Cal claim form must be indicated in the appropriate field on the claim. Providers should not reduce the charge amount or total amount billed because of any OHC payment. Refer to claim form completion instructions in this manual for more information.

5. Medi-Cal approved HCPCS codes, CPT® codes and modifiers should be billed.

6. Do not bill with HCPCS codes, CPT codes or modifiers where OHC paid, but which Medi-Cal does not recognize or allow.

7. If services normally require a *Treatment Authorization Request* (TAR), the related procedures must be followed. Refer to the TAR Overview section of the Part 1 provider manual for additional information.

# Claims Submission/Billing Example

# Supporting Guidance to Families

» What we're asking families to bring to their child's first appointment:

- ❑ HACCP ID card

- ❑ Health insurance card(s) if your child has other health coverage

- ❑ Documents from earlier appointments (if any), which may include:

  - • Hearing aid prescription signed by your child's otolaryngologist or physician

  - • Medical history and examination notes from your child's otolaryngologist, including medical clearance for hearing aids

  - • Hearing aid recommendation(s) and audiologic report from your child's previous audiologist

- ❑ Any other documents requested by your child's enrolled provider

# FAQs from Members & Families

- **My child is enrolled in CCS. Should we switch to HACCP?**
  No. CCS provides a robust set of hearing aid-related benefits, as well as broader coverage for related services. If your child is enrolled in CCS coverage *for a hearing-related condition*, they do not qualify for HACCP.

- **My child has partial insurance coverage for hearing aids. Do they qualify for HACCP?**
  Families may apply for *supplemental* hearing aid-related coverage through HACCP. Your provider will bill your insurance first.

- **How do I find my insurance plan's explanation of coverage?**
  You should have received an explanation of coverage document when you first enrolled in your plan. You can also call your health plan's member services to request they send you a copy.

- **My child needs a bone conduction hearing device (BCHD). Are these covered?**
  Surface-worn BCHDs are covered when medically necessary. BCHDs require TAR approval.

# FAQs from Members & Families (Continued)

- **Do parents need to pay out of pocket for HACCP-covered services?**
  No, providers bill HACCP directly for covered benefits, just like they do for Medi-Cal/CCS. *Please note*: If you have partial coverage through a health insurance plan, your provider must bill your insurance first.

- **Is authorization needed to see my HACCP-participating audiologist?**
  While certain audiology services do require a TAR, providers may generally submit the TAR either before or after the appointment. As a result, the answer to this question depends on a particular audiologist's billing policies.

- **What happens if my child's application for HACCP enrollment is denied?**
  If your child does not qualify for HACCP, you will receive a letter explaining which eligibility criteria were not met, how to request reconsideration of your application if you feel there was a misunderstanding or if your circumstances have changed, and other programs that may help.

# Additional Resources

» **HACCP Help Center**

- Call (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
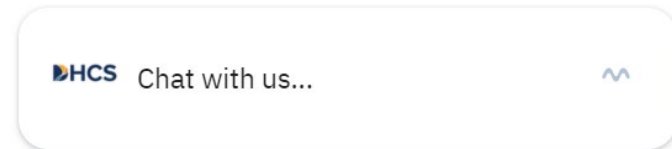
» **HACCP Webpage**

- Visit www.dhcs.ca.gov/HACCP to learn more or find a provider.
- Apply online for coverage at https://haccp.dhcs.ca.gov.

# Thank you for joining us!