

MRT 6204 HEARING AID ADMINISTRATIVE STREAMLINING

July 9, 2014
Division of OHIP Operations
Office of Health Insurance Programs



DIVISION OF OHIP OPERATIONS

Presented by:

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WEBINAR OBJECTIVES

- Background on Medicaid Hearing Aid Reimbursement
- × 2013 changes to Social Services Law



PREVIOUS HEARING AID REIMBURSEMENT

- Screen Pricing
- Paid at acquisition cost with invoice to support
- Required paper claims and invoice submitted by provider
- Required manual pricing and adjudication of claim resulting in possible delays in payment to provider



MRT GOALS

- Decreases administrative burden on both the provider and the Department
- Avoids unnecessary paper work on the part of the provider
- * Avoids unnecessary delays in claim payment



WHAT DOES THE 2013 – 2014 BUDGET LANGUAGE MEAN?

* Grants the Commissioner of the Department of Health the authority to make changes to the reimbursement methodology by developing maximum fees based on an average cost of products representative of each type of hearing aid.



18 NYCRR 505.31

Regulatory Changes to read:

- (iv)(a) Payment for hearings aids must not exceed the lower of:
- (1) the maximum reimbursable amount for the item, as shown in the fee schedule for hearing aid/audiology services and as determined by the Department based on the average cost of products representative of that item; or
- (2) the usual and customary price charged to the general public for the same or similar items.
- (b) When there is no maximum reimbursable amount listed in the fee schedule for hearing aid/audiology services, payment for hearing aids must not exceed the lower of:
- (1) the acquisition cost, net of any discounts or rebates, supported by a copy of the invoice, which must include the brand, model, and serial number of the dispensed hearing aid; or
- (2) the usual and customary price charged to the general public for the same or similar items.



NEW HEARING AID BILLING AND REIMBURSEMENT

- Priced at time of authorization
- Can be billed electronically without the need for paper claims and invoices
- No manual pricing required for hearing aids with established MRAs
- MRAs were established after review of two years of actual invoices submitted and claims data.
- Claims processed in real time at the time of submission
- Will not limit providers from prescribing the appropriate type of hearing aid to meet the medical needs of a beneficiary with hearing loss or impairment



INITIAL MRAS

Code	Description	MRA \$
V5040	Hearing aid, monaural, body work, bone conduction	369
V5050	Hearing aid, monaural, in the ear	232
V5060	Hearing aid, monaural, behind the ear	244
V5220	Hearing aid, BICROS, behind the ear	754
V5253	Hearing aid, digitally programmable, binaural, BTE	616
V5256	Hearing aid, digital, monaural, ITE	317
V5257	Hearing aid, digital, monaural, BTE	337
V5260	Hearing aid, digital, binaural, ITE	610
V5261	Hearing aid, digital, binaural, BTE	665

QUESTIONS/COMMENTS

Provide written questions or comments to: OHIPMedPA@health.state.ny.us



MRT: ADDITIONAL INFORMATION

MRT Website:

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