



Ministry of Community and Social Service

**Schedule of Services and Fees for Hearing Aids,
Devices and Services**

April 2016

Not To Be Used Prior To Implementation

1. INTENT

The Ontario Disability Support Program (ODSP) Hearing Aid Benefit provides assistance to eligible members of ODSP benefit units for the purchase of hearing aids and hearing related items and services. The MCSS Schedule of Fees for Hearing Aids, Devices and Services (Schedule) outlines the goods and services that are available to eligible recipients of the ODSP Hearing Aid Benefit.

The Schedule is used in parallel with the Ministry of Health and Long-Term Care's (MOHLTC) Assistive Devices Program (ADP) policies and processes.

2. BENEFIT ELIGIBILITY

Who is Eligible?

The benefits outlined in this Schedule are available to the following clients:

- ODSP recipients, their spouses, and dependent children (0-17 years);
- Persons eligible for the Extended Health Benefit, their spouses, and dependent children (0-17 years); and,
- Children whose families are receiving payments from the Assistance for Children with Severe Disabilities (ACSD) program.

Who is not eligible?

Dependants of ODSP recipients 18 years and over other than the recipient's spouse.

Note:

- Dependent adults are eligible for assessments only.
- Dependent adults on ODSP may seek discretionary funding for hearing devices and services from Ontario Works Administrators.

3. ACCESSING THE BENEFIT

ODSP recipients must meet with their ODSP caseworker to determine eligibility for the Hearing Aid Benefit, and must complete the recipient's section of the ODSP Hearing Aid Benefit Authorization Form. The form will indicate what products/services are approved by the ODSP caseworker.

Once the ODSP caseworker determines that a recipient is eligible for the benefit, the recipient must go to a service provider that is registered with the Ministry of Health and Long-Term Care's (MOHLTC) Assistive Devices Program (ADP) to complete the rest of the process.

The service provider will conduct an assessment and make recommendations about the recipient's need for specific services or devices. The service provider will complete the ADP form and the service provider section of the ODSP Hearing Aid Benefit Authorization Form.

Once the devices are dispensed according to the Schedule, the recipient must sign the ODSP Hearing Aid Benefit Authorization Form verifying that the services were performed and/or the goods were received in good working order. The service provider must then send the completed Hearing Aid Authorization Form to MCSS along with a copy of the recipient's completed ADP form and any relevant additional documents (e.g. audiograms).

MCSS will review the forms to ensure that the device(s) and/or service(s) provided are among those authorized by the schedule. MCSS can authorize payment of the invoices once verification is complete. If a discrepancy exists, the claim will be automatically rejected and returned to the service provider for appropriate action.

Please note the service provider must provide the services and counselling necessary for the proper and effective use, operation, care and maintenance of the hearing aid, ear mold and other related devices.

Payments for the Hearing Aid Benefit

Service providers should mail completed Hearing Aid Benefit Authorization/Invoice forms to the local ODSP office for processing.

4. ITEMS AND SERVICES COVERED UNDER THE SCHEDULE

ASSESSMENTS

The Assessment fee under the schedule was developed to meet the hearing aids Assessment Process under ADP. Under ADP, in order to determine what device(s) is clinically required for ADP funding purposes, the ADP Authorizer must complete an ADP assessment that meets ADP requirements. The assessment must include an audiogram for both ears.

The following will be funded at the levels outlined in the chart. (See pages 9-11)

Assessment:

Hearing Aid Assessments - Adults and Children

- One full assessment once every 12 months over the lifetime of the hearing instruments. Specialized assessments (e.g., visual and play audiometry) are covered under the assessment fee.

Teletypewriter/Flashing Signal Device Assessments – Adults and Children

- One assessment over the lifetime of the device.

DEVICES

The following are available for funding through the ODSP Hearing Aid Benefit and will be funded at the levels outlined in the chart. (See pages 9-11)

Adults

- Mid-level hearing aids (behind the ear, in the ear, canal, completely in the canal).
- Advanced level Hearing Aids may be approved by the caseworker for adults who are actively pursuing employment, employed or in school (behind the ear, in the ear, canal, completely in the canal).
- Advanced level hearing aids (behind the ear, in the ear, canal, completely in the canal) required due to medical indication may be requested under the Exceptional Circumstances policy.

Children (0-17 years)

- Advanced level hearing aids (behind the ear, in the ear, canal, completely in the canal).

Adults and Children

- Implantable Hearing Aids
- Tubes and Domes
- Impressions and Molds
- Batteries
- Flashing Signal Device
- CROS/BiCROS
- Teletypewriters (TTY)
- FM System

5. SERVICE BUNDLES

Hearing Aids

Service bundles are established to simplify the service administration process for service providers, while ensuring that clients receive necessary care. Service bundles will be paid in accordance with the rates and time periods outlined on page 9-11 of the schedule.

Service bundles are intended to cover necessary services over the life of the hearing instrument.

Service bundles are differentiated by age group:

- Adults; and,
- Children (0 to 17 years).

Service bundles are organized in two types of bundles: (1) Initial Care and (2) Ongoing Care.

The Initial Care bundle is the first bundle to be used for adults and children receiving funding for a new hearing instrument.

The duration of the Initial Care bundle is 1 year.

The Ongoing Care bundle is to be used after the Initial Care bundle has expired. The Ongoing Care bundles will be triggered by patient request for services after the previous bundle has ended. The duration of the Ongoing Care bundle is renewable each year over the remaining life of the hearing instrument.

The bundles are to be funded per instrument.

Service Bundles consist of the following services:

- Dispensing (Initial Care Bundle only)
- Impression + Mold (Labour only)
- Readjustment/reprogramming
- Maintenance/cleaning
- Repairs (Labour only)

Dispensing:

Dispensing is provided in the Initial Care Bundle only.

Adults and Children

- The Initial Care bundle includes the following services:
 - Up to four visits to provide necessary programming, counselling, and education during the bundle period.

Impression + Mold (Labour only):

Adults

- Adults are eligible for one impression and one mold every 12 months.

Children

- Children are eligible for one impression and one mold every 6 months.
- It is recognized children aged 0 to 3 years may require more frequent replacement of impressions and molds. Additional impressions and molds may be approved by the caseworker as needed. ODSP only covers the cost of materials for additional impression and molds.
 - The cost of materials used in taking impressions and making molds is not included under the service bundles. (The costs of these materials are covered under the schedule at 100% where the corresponding costs of labour are covered under the bundle.)

Readjustment/reprogramming:

Adults and Children

- For the Initial Care bundle, there will be no additional fee for readjustments and reprogramming. Readjustment and reprogramming is included in dispensing for the full year.
- For the Ongoing Care bundles, the service provider will provide all required readjustments and reprogramming over the duration of each ongoing bundle.

Maintenance/cleaning:

Adults and Children

- The service provider will provide all required maintenance and cleaning over the duration of the Initial Care bundle and Ongoing Care bundles.

Repairs (Labour only):

- The cost of labour associated with repairs is covered at the rate of 1 every 12 months for adults and children after the manufacturer's warranty has expired. Coverage is provided under the Ongoing Care bundle.
 - The cost of parts is not included in the service bundle. (The invoice cost of parts is covered under the Schedule at 100% where the corresponding cost of labour is covered under the service bundle.)

FM Systems

The duration of the bundle is for the lifetime of the device.

The bundle is to be funded per device.

Dispensing:

One set of dispensing fees funded per device (1/bundle), including:

- 1-2 visits to provide necessary programming, counselling, and education during the bundle period.

Readjustment/reprogramming:

- No additional fee. Readjustment/reprogramming are covered under the initial dispensing fee.

Maintenance/cleaning:

- No additional fee. Maintenance and cleaning is covered under initial dispensing fee, including minor office repairs.

Repairs (Labour only)

The cost of labour for repairs is covered in the bundle after the manufacturer's warranty has expired.

The cost of parts is not included in the bundle. (The invoice cost of parts is covered under the Schedule at 100% where the corresponding cost of labour is covered under the service bundle.)

6. COST OF MATERIALS FOR IMPRESSIONS/MOLDS AND THE COST OF PARTS ASSOCIATED WITH REPAIRS

Hearing Aids

Impressions and Molds - Cost of Materials

The cost of materials used in taking impressions and making molds is covered under the schedule at 100% where corresponding cost of labour is covered under the service bundle.

Repairs - Cost of Parts

The invoice cost of parts is covered at 100% where the corresponding cost of labour is covered under the service bundle.

FM Systems

Repairs - Cost of Parts

The invoice cost of parts is covered at 100% where corresponding cost of labour is covered under the service bundle.

7. REPLACEMENT AND RETURN

ODSP aligns with ADP's policies for a replacement device.

For more information on ADP, please refer to the ADP Policy and Administration Manual on the MOHLTC web site at:

<http://www.health.gov.on.ca/en/pro/programs/adp/publications.aspx>

Replacement:

Adults

- Replacements will not be covered during warranty period unless the client is eligible for ADP funding due to a significant change in hearing or a significant change in medical condition.
- Replacements will not be covered outside warranty period unless:

- A client is eligible for ADP funding due to a change in hearing or a significant change in medical condition;
 - A client is eligible for ADP funding for a new device because the existing device is no longer working or cannot be repaired at a reasonable cost.
- If a replacement hearing instrument is approved, the Initial Care Bundle applies.

Children

- In the case of children, replacement may be approved by caseworker. In these cases, funding is in accordance with the amounts set out in the Schedule. Where the child is not eligible for ADP coverage, MCSS will also pay the ADP maximum allowable amount, as set out in the Schedule.

Return:

- Return fees are a charge for the provider's time (e.g., 3-4 visits) before the patient decides to return a device.
- A device is not considered dispensed when it is returned.

Shipping Fees:

- Shipping and related costs are not covered by MCSS.

Schedule

Assessments	MCSS Funding	Frequency
Hearing Aid Assessment (Per Person) ¹	\$146	One full assessment fee is funded once every 12 months over the lifetime of the device.
Teletypewriter/Flashing Signal Device Assessment (Per Device)	\$50.50	1 over the lifetime of the device

Hearing Aids (Per Device)

Category	Funding			Frequency
Hearing Aids	ADP Maximum Allowable Amount	MCSS Maximum Allowable Amount	Total	
Mid-Level	\$500	\$545	\$1,045	Must meet ADP Requirements
Advanced Level	\$500	\$1433	\$1,933	<u>Adults</u> Must meet ADP and MCSS Requirements <u>Children</u> Must meet ADP and MCSS Requirements
CROS/BiCROS	\$500	\$245	\$745	Must Meet ADP Requirements
Implantable Hearing Aids	ADP Maximum Allowable Amount	MCSS Maximum Allowable Amount	Total	Frequency
Bone Anchored Hearing Aid Replacement Sound Processor and Abutment	\$5,200	\$2,370	\$7,570	Must Meet ADP Requirements
Bone Anchored Hearing Aid Replacement Sound Processor	\$4,000	\$3,570	\$7,570	Must Meet ADP Requirements
Cochlear Implant Replacement Speech Processor	\$7,258.67	\$311.33	\$7,570	Must Meet ADP Requirements
Full Kit	N/A	\$9,280	\$9,280	Must Meet MCSS Requirements

Batteries and Tubes and Domes	MCSS Maximum Amount	Frequency
All Types of Batteries	100% of cost as needed	As reasonably required
Tubes and Domes	100% cost if it is not covered under manufacturer's warranty	As reasonably required

Teletypewriters, FM Systems, Flashing Signal Device

Device	ADP Maximum Allowable Amount	MCSS Maximum Allowable Amount	Total	Frequency
Printing Teletypewriter	\$525	\$250	\$775	Must meet ADP Requirements
Non – Printing Teletypewriter	\$325	\$250	\$575	Must meet ADP Requirements
FM System	\$1,350	\$650	\$2000	Must meet ADP Requirements
Flashing Signal Device	\$66	\$21	\$87	Must meet ADP Requirements

Service Bundles (Per Device)

Funded Services	Adults	Children	Frequency
Hearing Aid - Initial Care Bundle (includes dispensing fee)	\$612	\$923	1 over the lifetime of the device
Hearing Aid - Ongoing Care Bundle (Ongoing for the lifetime of the device)	\$297	\$400	1/12 months
FM System Bundle	\$427	\$427	1 for lifetime of device

Costs of Materials and Parts

Funded Services	MCSS Maximum Amount	Frequency
Impressions/Mold - Costs of Materials	100% cost of materials	Must meet MCSS Requirements
Hearing Aids and FM Systems Repairs – Cost of Parts	100% Invoice for cost or parts	Must meet MCSS Requirements

Other Services (Per Device)

Return	\$125 per ear
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1 The Assessment fee under the schedule was developed to meet the hearing aids Assessment Process under ADP. Under ADP, in order to determine what device(s) is clinically required and basic for ADP funding purposes, the Authorizer must complete a thorough assessment. Note that ODSP will not cover services that can be covered by OHIP.

1. EXCEPTIONAL CIRCUMSTANCES

A request under the Exceptional Circumstances Policy may be made where a medical indication for the requested item/service exists.

Requests under the Exceptional Circumstances Policy fall into two categories:

- 1) Items and services not on the Schedule where a medical indication for the requested item/service exists.
- 2) Items on the Schedule where it is specified that approval under the Exceptional Circumstances Policy is required.

Service providers must obtain pre-authorization from the Ministry before dispensing or providing item(s)/service(s) requiring approval under the Exceptional Circumstances Policy. Service providers should advise recipients about the pre-authorization requirement for item(s)/service(s) outside of the fee schedule.

Examples of medical indications that may be considered under the Exceptional Circumstances Policy include:

- The existence of a co-morbidity that is relevant to the hearing impairment
- The presence of tinnitus in addition to a hearing impairment, where the prescriber indicates the need for noise generation options/features that are not available in mid-level hearing aids
- The presence of an anatomical abnormality that would contraindicate the use of a mid-level hearing aid

Service providers should refer to the Hearing Aid Benefit Exceptional Circumstances Form for more details.

Decisions for Exceptional Circumstances requests will be made by the Director and managers of the Social Assistance Centralized Services Branch (SACSB), MCSS

If an item/service is approved under the Exceptional Circumstances Policy for an item/service on the Schedule, payment will be in accordance with the Schedule (i.e. advanced hearing aids required due to medical indication).

If an item/service is approved under the Exceptional Circumstances Policy and the approved item/service is not set out in the fee schedule, the amount payable will be set out by the Director.

1) Submission of Exceptional Circumstances Requests

All Exceptional Circumstances Requests are handled and reviewed by MCSS.

The Hearing Aid Benefit (Exceptional Circumstances) is available to service providers on the Ontario Shared Service Forms repository web portal:

<http://www.forms.ssb.gov.on.ca/> (search for Hearing Aid Benefit)

The service provider must provide the following information:

- A copy of the Hearing Aid Benefit Authorization Form;
- Completed Hearing Aid Benefit (Exceptional Circumstances) (Form 3203) including:
 - Description of item(s)/service(s) being requested;
 - Cost of the item(s)/service(s) being requested
 - Clinical determination and rationale for the requested item(s)/service(s).

Service providers must send their claim form to:

**Ministry of Community and Social Services
ODSP Hearing Aid Benefit Program (Exceptional Circumstances)
77 Wellesley Street West
Box 460
Toronto, On M7A 1N3**

Once received, the Ministry will review the information and issue a decision. A letter will be sent advising approved/not approved and will provide information about the appeal process.

If the information provided is not sufficient to make a decision or if a second estimate is required, a letter will be sent to the service provider requesting additional information.

The service provider will have 10 business days to respond to the request for additional information. If a response is not received within 10 business days, a follow-up call will be made by the Ministry to the service provider.

The Ministry will notify both the recipient and the service provider of the decision within 30 business days.

2) Payment of Approved Exceptional Circumstances Requests

Once an Exceptional Circumstances request is approved by the Ministry, service providers must send the following to receive payment:

- A copy of the service provider's approval letter; and
- a completed Hearing Aid Benefit Authorization form.

The Ministry approval letter and the Hearing Aid Benefit Authorization form should be sent to the local ODSP Office for processing of payment.