

## SOCIAL DEVELOPMENT HEARING AID POLICY 2014

### PURPOSE

The Health Services Hearing Aid Program provides clients of the Department of Social Development with coverage for the purchase and maintenance of hearing aids.

### WHO IS ELIGIBLE

- Department of Social Development clients and their dependents who hold a valid NBCase (white) Health Card indicating
  - “Supplementary” in the BASIC HEALTH ELIGIBILITY section
  - OR
  - “HA.” (hearing aid) in the ADDITIONAL HEALTH ELIGIBILITY section
- Department of Social Development clients who hold a valid NBFamilies (yellow) Health Card that indicates
  - a “Y” under the OTH in the VALID ONLY FOR box
- Social Development clients who hold a valid NBCase (yellow) Health Card indicating
  - an “X” under SUPP in the VALID ONLY FOR box

**Clients must not have any other medical coverage to be eligible for full benefits.**

### REQUESTS FOR PRIOR APPROVAL

- Prior approval must be obtained from the Health Services Program for all services
- The Exceptional Circumstances form must be submitted for all children who are followed by the Special Needs Children program, whose families have private insurance.

### BENEFITS

#### Important Notes:

1. Replacement of a hearing aid is not automatic once the time restriction has expired and the need for replacement must be demonstrated.
2. Only hearing aids that meet the client’s **basic** hearing needs in the most cost effective manner will be approved.
3. Benefits must be obtained from a New Brunswick supplier unless the equipment or service is not available to the client in this province

Benefits	Criteria/ Limitations	Documentation Required	Eligible service providers
Hearing Aids	1. Client has a hearing limitation that:	<ul style="list-style-type: none"> <li>• Certified audiologist’s report, including</li> </ul>	<ul style="list-style-type: none"> <li>• licensed hearing aid</li> </ul>

	<ul style="list-style-type: none"> <li>impairs their ability function normally on a daily basis</li> <li>can be improved with assistance of a hearing aid</li> </ul> <ol style="list-style-type: none"> <li>Only basic models are eligible</li> <li>Only 1 hearing aid for the same ear can be provided every 5 years</li> <li>A maximum of \$1000 can be paid per hearing aid. (suppliers <b>cannot</b> bill the client for any costs in excess of this amount)</li> </ol>	<p>specifications</p> <ul style="list-style-type: none"> <li>Copy of audiogram</li> <li>1 estimate on a Health Services invoice</li> <li>Serial number</li> <li>Physician's Rx when testing done outside a hospital (initial request only)</li> <li>Warranty information <ul style="list-style-type: none"> <li>Details of warranty coverage</li> <li>expiry date</li> </ul> </li> </ul>	<p>providers registered with the NB Hearing Aid Society</p>
Repairs	<ol style="list-style-type: none"> <li>Hearing aid must have been purchased by the Health Services Program or, where purchased elsewhere, be a model eligible through the Program</li> <li>Only repairs that are authorized under the manufacturer's warranty can be approved once the warranty has expired</li> <li>Repairs must be feasible and cost effective</li> </ol>	<ul style="list-style-type: none"> <li>1 cost estimate on a Health Services invoice, preferably from the original supplier</li> <li>A complete description of the repair required, including: <ul style="list-style-type: none"> <li>make, model, serial number</li> <li>which part(s) of the aid is (are) being repaired</li> </ul> </li> <li>Date of purchase and who purchased the aid, <u>if not purchased by Health Services</u></li> </ul>	<ul style="list-style-type: none"> <li>licensed hearing aid providers registered with the NB Hearing Aid Society</li> </ul>
Ear molds	<ol style="list-style-type: none"> <li>Hearing aid must have been purchased by the Health Services Program or, where purchased elsewhere, be a model eligible through the Program</li> <li>Eligible once per year for adults and once every 6 months for children</li> <li>Purchased for behind the ear (BTE) hearing aids only</li> </ol>	<ul style="list-style-type: none"> <li>1 cost estimate on a Health Services invoice.</li> </ul>	

### **NON-BENEFIT SERVICES**

The following items are not covered by the Health Services Hearing Aid Program:

- CIC or Bi-cross hearing aids
- BAHA hearing aids
- Personal FM systems
- Cochlear implants

- Hearing aids for cochlear implants
- Batteries for hearing aids or cochlear implants
- Hooks, filters, tubing
- Convenience options such as T-coil, directional microphone, etc.
- Cleaning/ drying
- Pocket Talker
- Hearing tests or evaluation