

DOC Hearing Aid Fee Schedule
Effective 8/1/2014 through 6/30/2015

| HCPCS Code | Description | Modifier | Comments | Allowed Amount |
|------------|-------------------------------------------|-----------------|------------------------------------------------------------|----------------|
| V5014 | Repair/Modification of a hearing aid** | | | \$50 or BR |
| V5160 | Dispensing Fee, binaural* | | PA required | \$725.00 |
| V5241 | Dispensing Fee, monaural* | | | \$375.00 |
| V5256 | HA, digital, monaural, ITE | RT or LT and RA | | \$500.00 |
| V5257 | HA, digital, monaural, BTE | RT or LT and RA | | \$540.00 |
| V5260 | HA, digital, binaural, ITE*** | | PA required | \$960.00 |
| V5261 | HA, digital, binaural, BTE*** | | PA required | \$1,040.00 |
| V5264 | Ear mold/insert, not disposable, any type | RA | Replacement Only - initial mold included in dispensing fee | \$43.00 |
| V5266 | Battery for use in hearing device | | | \$0.75 |
| V5275 | Ear Impression | | | bundled |

Any audiology HCPCS codes not on this schedule, are not covered by the Department

* The dispensing fee includes: initial screening, pre-fitting eval, an ear mold, and post fitting consultations. Device should include a one year repair and one year loss/damage warranty.

**If the hearing aid is no longer under warranty and the repair can be performed in-house, the reimbursement shall be a flat rate of \$50 if the repair requires the hearing aid to be sent to the manufacturer, the provider will be reimbursed the cost the manufacturer charges for the repair and the manufacturers invoice must be submitted with the billing for reimbursement

***Binaural hearing aids are not covered under the Offender Health Plan without prior authorization from the Department