

Title 23: Division of Medicaid

Part 218: Hearing Services

Chapter 1: General

Rule 1.3: Implantable and Non-Implantable Auditory Osseointegrated Device (AOD)

- A. The Division of Medicaid defines an implantable auditory osseointegrated device (AOD) as a surgically implantable hearing system which transmits sound vibrations through a sound processor to the inner ear by direct bone conduction through the skull.
1. The Division of Medicaid covers implantable AODs in accordance with the Food and Drug Administration (FDA) approved labeling in an Ambulatory Surgical Center (ASC) and the outpatient hospital setting for beneficiaries five (5) years of age and older with conductive, mixed, or single-sided sensorineural hearing loss who can benefit from sound amplification, meets FDA approved audiologic criteria for the prescribed implantable AOD, and meets at least one (1) of the following conditions:
 - a) Congenital, surgical, or acquired malformation(s) of the external ear canal or middle ear,
 - b) Severe chronic otitis externa or otitis media with persistent otorrhea and documented failure with air conducted hearing aids,
 - c) Tumors of the external ear canal and/or tympanic cavity,
 - d) Dermatitis of the external canal, or
 - e) Other anatomic or medical conditions in which an air conduction hearing aid is contraindicated.
 2. The Division of Medicaid does not cover implantable AODs for beneficiaries:
 - a) Under five (5) years of age,
 - b) With bilateral sensorineural hearing loss, or
 - c) With insufficient bone volume or bone quality to support implant placement.
- B. The Division of Medicaid defines a non-implantable AOD as a sound processor attached to the skull using a hard or soft headband in which sound vibrations are transmitted transcutaneously through the bones of the skull to the inner ear.
1. The Division of Medicaid covers non-implantable AODs in accordance with the FDA approved labeling when prior authorized by a Utilization Management/Quality

Improvement Organization (UM/QIO), the Division of Medicaid, or designee for beneficiaries with conductive, mixed, or single-sided sensorineural hearing loss who can benefit from sound amplification, meets FDA approved audiologic criteria for the prescribed non-implantable AOD and meets at least one (1) of the conditions listed in Miss. Admin. Code Part 218, Rule 1.3.A.1.a)-e).

2. The Division of Medicaid does not cover the following:

- a) Non-implantable AODs for bilateral sensorineural hearing loss,
- b) Replacement of lost or stolen processors, or
- c) Non-medically necessary accessories.

C. The Division of Medicaid covers batteries, repairs, and external replacement parts for implantable and non-implantable AODs as outlined in Miss. Admin. Code Part 209, Rule 1.24.

Source: Miss. Code Ann. § 43-13-121.

History: Revised eff. 12/01/2015.

Title 23: Division of Medicaid

Part 218: Hearing Services

Chapter 1: General

Rule 1.3: ~~Bone Anchored Hearing Aid~~ Implantable and Non-Implantable Auditory Osseointegrated Device (AOD)

A. The Division of Medicaid defines an implantable auditory osseointegrated device (AOD) as a surgically implantable hearing system which transmits sound vibrations through a sound processor to the inner ear by direct bone conduction through the skull.

~~A.1.~~ The Division of Medicaid covers implantable AODs in accordance with the Food and Drug Administration (FDA) approved labeling the Bone Anchored Hearing Aid (BAHA) when both audiologic and medical criteria are met: in an Ambulatory Surgical Center (ASC) and the outpatient hospital setting for beneficiaries five (5) years of age and older with conductive, mixed, or single-sided sensorineural hearing loss who can benefit from sound amplification, meets FDA approved audiologic criteria for the prescribed implantable AOD, and meets at least one (1) of the following conditions:

~~1. Audiologic criteria is met if all the following are present:~~

- ~~a) A pure tone average bone conduction threshold of seventy (70) dB or less, and~~
- ~~b) A speech discrimination score greater than sixty percent (60%).~~

~~2. Medical criteria is met if one (1) or more of the following are present:~~

- ~~a) Congenital, ~~or surgically induced~~ or acquired malformation(s) of the external ear canal and/or middle ear, like atresia,~~
- ~~b) Severe chronic infections of the middle or outer ear otitis externa or otitis media with persistent otorrhea/~~discharge~~ and documented failure with air conducted hearing aids,~~
- ~~c) Tumors of the external ear canal and/or tympanic cavity,~~
- ~~d) Otosclerosis with a contraindication to stapedectomy surgery, with the ear requiring stapedectomy is the beneficiary's only hearing ear, Dermatitis of the external canal, or~~
- ~~e) Other anatomic or medical conditions in which an air conduction hearing aid is contraindicated, ~~or~~~~
- ~~f) Single-sided deafness.~~

~~B.2.~~ The Division of Medicaid does not cover implantable AODs for beneficiaries; the following:

~~1.a)~~ BAHA for beneficiaries under five (5) years of age, or

~~2.b)~~ BAHA for beneficiaries with bilateral sensorineural hearing loss, or

c) With insufficient bone volume or bone quality to support implant placement.

B. The Division of Medicaid defines a non-implantable AOD as a sound processor attached to the skull using a hard or soft headband in which sound vibrations are transmitted transcutaneously through the bones of the skull to the inner ear.

1. The Division of Medicaid covers non-implantable AODs in accordance with the FDA approved labeling when prior authorized by a Utilization Management/Quality Improvement Organization (UM/QIO), the Division of Medicaid, or designee for beneficiaries with conductive, mixed, or single-sided sensorineural hearing loss who can benefit from sound amplification, meets FDA approved audiologic criteria for the prescribed non-implantable AOD, and meets at least one (1) of the conditions listed in Miss. Admin. Code Part 218, Rule 1.3.A.1.a)-e).

2. The Division of Medicaid does not cover the following:

a) Non-implantable AODs for bilateral sensorineural hearing loss,

b) Replacement of lost or stolen processors, or

c) Non-medically necessary accessories.

C. The Division of Medicaid covers batteries, repairs, and external replacement parts for implantable and non-implantable AODs as outlined in Miss. Admin. Code Part 209, Rule 1.24.

Source: Miss. Code Ann. § 43-13-121.

History: Revised eff. 12/01/2015.