

# Wearable Hearing Aids

## Medical Policy

### Utilization Management

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#### I. **DEFINITION:**

**Hearing aids** are electronic amplifying devices designed to bring sound more effectively into the ear. A hearing aid consists of a microphone, amplifier and receiver. Wearable hearing aids, including air conduction hearing aids (ACHAs), bone conduction hearing aids and middle ear hearing aids, are the standard treatment for hearing loss that cannot be medically or surgically corrected.

Air conduction hearing aid devices are defined as the following: behind the ear (BTE); in the ear (ITE) device; in the ear canal (ITC) device; completely in the canal (CIC) device; and contralateral routing of sound (CROS) device for single sided hearing loss.

Coverage for hearing aids may be governed by Federal and/or State mandates. MyAdvocate Medicare Advantage provides coverage for wearable hearing aids that are purchased as a result of a written recommendation by a Physician. Benefits are provided for the hearing aid, and for charges for the associated fitting and testing.

**Conductive hearing loss** occurs when the transmission of sound from the outer ear to the inner ear is disrupted.

**Sensorineural hearing loss** occurs when there is damage to the inner ear (cochlea), or to the nerve pathways from the inner ear to the brain. Sensorineural hearing loss is by far the most common type of hearing loss, representing 80% to 85% of all hearing loss.

**Mixed hearing loss** is a combination of conductive and sensorineural hearing loss.

**Hearing loss severity** - Normal speech and conversation occurs at 40-60 dB (decibels) within a frequency range of 500-3000Hz (Hertz). Hearing loss severity is classified as follows:

Mild	26-40 dBHL
Moderate	41-70 dBHL
Severe	71-90 dBHL
Profound	>91 dBHL

## II. **MEDICARE ADVANTAGE PLANS:**

**No prior authorization is required.**

Refer to the MyAdvocate Medicare Advantage Evidence of Coverage for hearing aid covered benefits.

- A. Diagnostic hearing and balance evaluations performed by your provider to determine medical treatment are covered as outpatient care when furnished by a physician, audiologist, or other qualified provider.
- B. Cover one routine hearing exam, hearing aid fittings and evaluations, and up to two hearing aids per calendar year.
- C. You must use an in-network provider for hearing aids, and you will be limited to select hearing aid brands/types as specified by each in network provider.
- D. The following items are not covered:
  - 1. Ear molds
  - 2. Hearing aid accessories
  - 3. Extra batteries
  - 4. Hearing aid return fees
  - 5. Loss and damage warranty claims
  - 6. Over the counter (OTC) hearing aids

7. Hearing aid checks after 1 year are not covered.

**III. COMMENTS:**

[Wearable Hearing Aids Coding and Packaging Guidelines](#) (For MyAdvocate Medicare Advantage internal use only)

**IV. REFERENCES:**

National Association of the Deaf recommendations:

<https://nad.org/issues/technology/assistive-listening/hearing-aids/coverage>