## Revision History

<table>
<thead>
<tr>
<th>Description</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy H-02 – rewritten; Policy H-03 – removal of income thresholds for seniors cost share.</td>
<td>August 1, 2017</td>
</tr>
<tr>
<td>Policy H-03 – Change to income levels for hearing aid cost-share exemption.</td>
<td>February 22, 2016</td>
</tr>
<tr>
<td>Policy H-17 – Added to Approved Manufacturers List.</td>
<td>January 1, 2015</td>
</tr>
<tr>
<td>Policy H-02 – revised proof of age.</td>
<td>July 1, 2014</td>
</tr>
<tr>
<td>Policy H-03 Amended – Alberta Seniors Benefits thresholds.</td>
<td>July 1, 2014</td>
</tr>
<tr>
<td>Policy H-11 – added e-mail as contact option.</td>
<td>July 1, 2014</td>
</tr>
<tr>
<td>Policy H-14 – addition of RIC repairs, and removal of real ear measurement requirement.</td>
<td>July 1, 2014</td>
</tr>
<tr>
<td>Policy H-16 – addition of 1 year with full College membership.</td>
<td>July 1, 2014</td>
</tr>
</tbody>
</table>
# Table of Contents

<table>
<thead>
<tr>
<th>Policy H – 01</th>
<th>.................................................................................................................... 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amplification Benefits Background</td>
<td>.................................................................................................................... 6</td>
</tr>
<tr>
<td>Policy Statement</td>
<td>.................................................................................................................... 6</td>
</tr>
<tr>
<td>Policy H - 02</td>
<td>.................................................................................................................... 7</td>
</tr>
<tr>
<td>Hearing Aids Eligibility Criteria</td>
<td>.................................................................................................................... 7</td>
</tr>
<tr>
<td>Policy Statement</td>
<td>.................................................................................................................... 7</td>
</tr>
<tr>
<td>Policy H - 03</td>
<td>.................................................................................................................... 9</td>
</tr>
<tr>
<td>Cost-Share for Hearing Aids</td>
<td>.................................................................................................................... 9</td>
</tr>
<tr>
<td>Policy Statement</td>
<td>.................................................................................................................... 9</td>
</tr>
<tr>
<td>Policy H - 04</td>
<td>.................................................................................................................... 10</td>
</tr>
<tr>
<td>Test Environment</td>
<td>.................................................................................................................... 10</td>
</tr>
<tr>
<td>Policy Statement</td>
<td>.................................................................................................................... 10</td>
</tr>
<tr>
<td>Procedure</td>
<td>.................................................................................................................... 10</td>
</tr>
<tr>
<td>Policy H – 05</td>
<td>.................................................................................................................... 11</td>
</tr>
<tr>
<td>Equipment Requirements</td>
<td>.................................................................................................................... 11</td>
</tr>
<tr>
<td>Policy Statement</td>
<td>.................................................................................................................... 11</td>
</tr>
<tr>
<td>Procedure</td>
<td>.................................................................................................................... 12</td>
</tr>
<tr>
<td>Policy H – 06</td>
<td>.................................................................................................................... 13</td>
</tr>
<tr>
<td>Hearing Assessments</td>
<td>.................................................................................................................... 13</td>
</tr>
<tr>
<td>Policy Statement</td>
<td>.................................................................................................................... 13</td>
</tr>
<tr>
<td>Procedure</td>
<td>.................................................................................................................... 14</td>
</tr>
<tr>
<td>Policy H – 07</td>
<td>.................................................................................................................... 16</td>
</tr>
<tr>
<td>Aural Rehabilitation</td>
<td>.................................................................................................................... 16</td>
</tr>
<tr>
<td>Policy Statement</td>
<td>.................................................................................................................... 16</td>
</tr>
<tr>
<td>Policy H – 08</td>
<td>.................................................................................................................... 17</td>
</tr>
<tr>
<td>Hearing Aid Selection</td>
<td>.................................................................................................................... 17</td>
</tr>
<tr>
<td>Policy Statement</td>
<td>.................................................................................................................... 17</td>
</tr>
<tr>
<td>Procedure</td>
<td>.................................................................................................................... 17</td>
</tr>
<tr>
<td>Policy H – 09</td>
<td>.................................................................................................................... 18</td>
</tr>
<tr>
<td>Fitting and Verification</td>
<td>.................................................................................................................... 18</td>
</tr>
<tr>
<td>Policy Statement</td>
<td>.................................................................................................................... 18</td>
</tr>
<tr>
<td>Procedure</td>
<td>.................................................................................................................... 18</td>
</tr>
<tr>
<td>Policy H – 10</td>
<td>.................................................................................................................... 20</td>
</tr>
<tr>
<td>Trial Period</td>
<td>.................................................................................................................... 20</td>
</tr>
<tr>
<td>Policy Statement</td>
<td>.................................................................................................................... 20</td>
</tr>
<tr>
<td>Procedure</td>
<td>.................................................................................................................... 20</td>
</tr>
<tr>
<td>Policy H – 11</td>
<td>.................................................................................................................... 22</td>
</tr>
<tr>
<td>Validation Certificate</td>
<td>.................................................................................................................... 22</td>
</tr>
<tr>
<td>Policy Statement</td>
<td>.................................................................................................................... 22</td>
</tr>
<tr>
<td>Procedure</td>
<td>.................................................................................................................... 23</td>
</tr>
</tbody>
</table>

© 2017 Government of Alberta
<table>
<thead>
<tr>
<th>Policy H – 12</th>
<th>Hearing Device Replacement</th>
<th>25</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Policy Statement</td>
<td>25</td>
</tr>
<tr>
<td></td>
<td>Procedure</td>
<td>26</td>
</tr>
<tr>
<td>Policy H – 13</td>
<td>Earmold Replacement</td>
<td>27</td>
</tr>
<tr>
<td></td>
<td>Policy Statement</td>
<td>27</td>
</tr>
<tr>
<td></td>
<td>Procedure</td>
<td>27</td>
</tr>
<tr>
<td>Policy H – 14</td>
<td>Hearing Device Repairs</td>
<td>29</td>
</tr>
<tr>
<td></td>
<td>Policy Statement</td>
<td>29</td>
</tr>
<tr>
<td></td>
<td>Procedure</td>
<td>29</td>
</tr>
<tr>
<td>Policy H – 15</td>
<td>Quantity and Frequency Limits</td>
<td>31</td>
</tr>
<tr>
<td></td>
<td>Policy Statement</td>
<td>31</td>
</tr>
<tr>
<td></td>
<td>Procedure</td>
<td>32</td>
</tr>
<tr>
<td>Policy H – 16</td>
<td>Specialty Supplier and Specialty Assessor Qualifications</td>
<td>33</td>
</tr>
<tr>
<td></td>
<td>Policy Statement</td>
<td>33</td>
</tr>
<tr>
<td>Policy H – 17</td>
<td>Approved Manufacturers List</td>
<td>35</td>
</tr>
<tr>
<td></td>
<td>Policy Statement</td>
<td>35</td>
</tr>
<tr>
<td>Policy H – 18</td>
<td>Personal Listening Devices</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>Policy Statement</td>
<td>36</td>
</tr>
<tr>
<td>Policy H – 19</td>
<td>Personal Listening Devices Prior Approval</td>
<td>37</td>
</tr>
<tr>
<td></td>
<td>Policy Statement</td>
<td>37</td>
</tr>
<tr>
<td></td>
<td>Procedure</td>
<td>37</td>
</tr>
<tr>
<td>Policy H – 20</td>
<td>Personal Listening Device Repairs</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>Policy Statement</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>Procedure</td>
<td>38</td>
</tr>
<tr>
<td>Policy H – 21</td>
<td>Frequency Modulation (FM) and Digital Modulation (DM) Systems</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>Policy Statement</td>
<td>40</td>
</tr>
<tr>
<td>Policy H – 22</td>
<td>Frequency Modulation (FM) and Digital Modulation (DM) System Quantity Limits</td>
<td>41</td>
</tr>
<tr>
<td></td>
<td>Policy Statement</td>
<td>41</td>
</tr>
<tr>
<td>Policy H – 23</td>
<td>Eligibility Criteria: Frequency Modulation (FM) and Digital Modulation (DM) Systems</td>
<td>42</td>
</tr>
<tr>
<td></td>
<td>Policy Statement</td>
<td>42</td>
</tr>
<tr>
<td></td>
<td>Procedure</td>
<td>42</td>
</tr>
</tbody>
</table>
Policy H – 01

Amplification Benefits Background

Policy Statement

AADL amplification benefits available to eligible clients include:

- Hearing Aids
- Personal Listening Devices
- FM/DM Systems
- Bone Anchored Hearing Aids
- Cochlear Implant Processors

Amplification benefits are assessed by specialty assessors who are audiologists and/or hearing aid practitioners. Amplification benefits are then provided by specialty suppliers.
Policy H - 02

Hearing Aids Eligibility Criteria

Policy Statement

Clients must have a permanent hearing loss, confirmed by a registered audiologist or registered hearing aid practitioner, to be eligible for a hearing aid or alternate listening device. Hearing impairment is considered ‘permanent’ if it is irreversible by medication or surgery, and is likely to sustain for a period of six months or more. This includes conductive impairment associated with structural anomalies of the ear. Permanent hearing loss must be supported by a diagnostic audiogram.

Childhood hearing loss criteria (0-17 years):
Diagnostic audiogram must reflect either of the following:

- Pure tone average at 500, 1000 and 2000 Hz greater than 20 dBHL
- High frequency hearing loss: pure tone thresholds greater than 20 dB at two or more frequencies at or above 2000 Hz

Adult hearing loss criteria:
Diagnostic audiogram must reflect either of the following, and the client must be motivated to wear a hearing device:

- A total hearing loss of 100 decibels, or greater, when calculated over the speech frequencies of 500, 1000, 2000 and 3000 Hz. To calculate total hearing loss, add the threshold values at 500, 1000, 2000 and 3000 Hz.
- High frequency hearing loss: pure tone average at 2000, 3000 and 4000 Hz greater than 30 dB.

Additional criteria for funding levels:

- **Clients under the age of 18** must be assessed by a registered audiologist and are covered for hearing aid benefits as per the approved product list.

- **Clients between the ages of 18 and 64** may be eligible for cost share exemption if they meet one or more of the following criteria:
  - They are under the current income threshold identified by the program (policy GN-21 of the AADL General Policy and Procedures); or
• They receive assistance under the Assured Income for the Severely Handicapped program or the Income Support Program; or

• They are a full time student, still receiving benefits under the Alberta Health Care Insurance Plan as a dependent under their parents plan and is aged 18 to 24 years. Proof of full time educational enrolment is required. This client is then eligible for all benefits available to those under 18 years of age indicated on the Amplification Approved Products Listing (APL).

• **Clients over the age of 65 and adult dependents of seniors** must submit the Alberta Health Proof of Age form (AHC0312) or the Alberta Seniors Financial Assistance Application (SFA3784) to confirm their age. Albertans are eligible for Seniors’ hearing aid funding the first of the month following their 65th birthday.

Specialty suppliers can verify cost-share exemption status through E-business. For clients who are cost-share exempt the PHN Catalogue Inquiry Screen will state Benefit Year Ending: Qualified for Cost Share Exemption.

**Exclusions**

• Hearing threshold elevations due to middle ear fluid and/or infection are not covered for amplification benefits.

• Clients cannot have the same or similar device in good working order.

• For further quantity and frequency limits, see policy H-15.
Policy H - 03
Cost-Share for Hearing Aids

Policy Statement

Hearing aid benefit eligibility is also based on client household income levels, as per the AADL cost-share policy.

See policy GN-20 and GN-21 of the AADL General Policy and Procedures for more information.

Seniors may qualify for AADL cost-share exemption, however if their income is above the AADL cost-share exemption thresholds, they may also qualify under the Alberta Seniors Benefit Program threshold as per Policy GN-26: Cost-Share Exemption Criteria, listed in the AADL General Policy and Procedures Manual.

Clients need to apply and be eligible for the Alberta Seniors Benefit prior to applying to AADL for cost-share exemption for Hearing Aid Benefits for Seniors.
Policy H - 04

Test Environment

Policy Statement

The environment within which hearing tests and hearing aid evaluations and verifications are performed will meet the following standards:

- If such tests and evaluations are performed within a commercially available sound treated booth, the acoustic characteristics as obtained within the booth following fabrication on site will be noted and retained for conveyance to AADL as required;

- If such tests and evaluations are performed outside a commercially available sound treated booth the acoustic characteristics of the room(s) shall be determined with a sound level meter and noted on the audiogram. The serial number of the sound level meter must also be recorded on the audiogram for audit purposes; and

- Testing may not be performed if the ambient noise level exceeds 40dBA when headphones are used, and 48dBA if insert phones are used.

Procedure

Specialty Suppliers:
1. Retain on file acoustic characteristics of commercial sound treated booths.
2. Conduct sound level meter (SLM) readings of ambient noise prior to any test being performed outside of a sound treated booth.
3. Record SLM reading on audiogram, as well as serial number from SLM.

AADL:
1. Conducts testing environment audits.
Policy H – 05

Equipment Requirements

Policy Statement

The specialty supplier must have specified equipment at each location where clients are assessed.

For children, the following testing equipment is required:

- A sound isolating booth meeting ANSI standards.
- A clinical audiometer capable of air, bone, masking, speech audiometry and sound field testing.
- A middle ear analyzer (capable of tympanograms and acoustic reflexes).
- Otoscope.
- A hearing aid analyzer/test box.
- A probe tube microphone system.

For adults, the following testing equipment is required:

- A sound isolating, wheelchair accessible booth meeting ANSI standards, or a test environment in which the ambient noise levels do not exceed 40dBA SPL when using headphones or 48dBA SPL when using insert phones.
- A clinical audiometer capable of air, bone, masking and speech recognition.
- A middle ear analyzer (capable of tympanograms and acoustic reflexes).
- Otoscope.
- A hearing aid analyzer/test box.
- A probe tube microphone system.
- Sound Level Meter (if performing assessments outside of sound isolating booth).

All test equipment must meet ANSI specifications, and undergo daily, monthly and annual calibrations.
Procedure

**Specialty Suppliers:**

1. Perform daily and monthly biologic calibrations.
2. Annually has all diagnostic equipment used in their clinics calibrated.
3. Retain a copy of all equipment calibration documentation which must be produced upon request by the Hearing and Augmentative Communication AADL Program Manager.

**AADL:**

1. If Specialty Supplier is unable to produce calibration documentation, AADL may take further action until documentation can be provided and verified.
Policy H – 06

Hearing Assessments

Policy Statement

A complete audiological assessment will be taken on all clients fitted with a hearing device. All hearing assessments must be performed by an AADL Specialty Assessor or an audiologist employed by Alberta Health Services. No results from testing performed by physicians will be accepted. If the assessment has been completed less than 6 months prior to the fitting, the assessment need not, but may at the discretion of the Specialty Assessor be repeated.

All unaided and aided test results shall be dated and signed (name of tester and signature) by the assessor and test reliability shall be noted.

Individuals 0 to 17 years of age must be assessed by an audiologist. These audiologists may be employed in either private practice or by Alberta Health Services, and it is strongly recommended that children diagnosed with hearing loss seek medical consultation with an Ear, Nose and Throat Specialist.

Hearing assessments must consist of, but may not be limited to, the following:

- **Case History:** The case history should include identifying information, purpose of referral, communication history and pertinent medical history. For potential hearing aid candidates the history should consider the person’s candidacy by recognizing lifestyle considerations, physical and cognitive capabilities and expectations of hearing aid use. Use of communication inventories (formal or informal) are strongly recommended to assist the Assessor in prescribing amplification.

- **Otoscopic Examination:** Visual and otoscopic examinations are to be completed with all results recorded on the audiogram as part of the assessment process.

- **Standard Pure Tone Audiometry:** Pure tone air and bone conduction thresholds will be obtained for both ears, with masking where appropriate, as per current standards and guidelines. Results will be clearly recorded upon an audiogram and will minimally include air conduction thresholds over the frequency range of 250 to 8000 Hz at octave steps. For Program purposes, air conduction thresholds shall also be obtained at the mid-octave frequency of 3000 and 6000 Hz in both ears. Bone conduction thresholds will be obtained at octave steps between 500 and 4000 Hz in both ears unless the hearing loss is bilaterally symmetrical, in which case thresholds may be established for only one ear.
• **Speech Audiometry**: Assessment must include Speech Recognition Threshold (SRT) or Speech Recognition Scores (SRS) completed on both ears, with masking where appropriate. It is recommended that the test be completed according to recognized guidelines, which specify familiarization, to ensure reliable and valid test results. Additional speech tests, which are deemed relevant to the hearing aid prescription process, such as Word Recognition Scores (WRS) and Speech in Noise may be completed at the discretion of the assessor.

• **Acoustic Impedance Testing**: Acoustic impedance testing will be completed for both ears and will include static compliance, middle ear pressure and canal volumes. Acoustic reflex measurements in the ipsilateral condition are mandatory, and contralateral when applicable. All results are to be entered on the audiogram form.

If test results, or lack thereof, indicate the need for further diagnostic evaluation (i.e. Auditory Brainstem Response, Oto-Acoustic Emissions) to clarify the nature and degree of the hearing loss and the assessor is unable to perform such evaluation, the client must be referred to a clinic capable of such evaluation.

When test results indicate the need for medical examination or intervention, the client must be referred to a physician prior to proceeding with the fitting of amplification and signed off by that physician if no medical intervention is warranted.

### Procedure

**Specialty Assessors:**

1. Ensure the client:
   a) Has a valid Personal Health Number (PHN).
   b) Signs the Client Declaration Form.

2. Complete all aforementioned hearing assessment requirements.
   a) All individuals who exhibit unreliable/inconsistent audiological results and who cannot be tested using conventional test procedures must be referred to a clinic that can meet their needs.
   b) The assessor makes the appropriate referral to a physician if medical consultation is required.

3. Document results of each hearing test and hearing aid evaluation on the audiogram form.
   a) Symbols used must also be noted in a key on the audiogram form and shall conform to current audiometric standards.
   b) Complete a summary of all findings, including assessor’s recommendations and retain on the client file.
4. Explain thoroughly all test results and recommendations to client and/or caregivers.
5. Date and have client sign first line (Hearing Test Date) of AADL Validation Certificate.

**Clients:**

1. Agree to undergo full audiological evaluation, attends and follows assessor’s instructions.
2. If a referral is recommended to meet assessment requirement, the client is responsible to obtain the appropriate documentation before proceeding with a hearing aid fitting.
3. Listen to test results and recommendations as they are explained by the assessor.
4. Sign the test line of the AADL Validation Certificate.

**AADL:**

1. Responds to all questions and/or concerns from assessors and/or clients regarding assessment.
2. Performs regular audit of documentation and adherence to hearing assessment policy and procedures.
Policy H – 07

Aural Rehabilitation

Policy Statement

Besides providing amplification the Specialty Supplier must provide aural rehabilitative counseling in the following areas:

- Understanding their Hearing Loss
- Understanding Hearing Aids and their use
- The use of assistive devices
- Communication strategies and goals for the hearing impaired client and their communication partners

The client and his/her family need to be involved in every decision making process as they are responsible for, and should be comfortable with, all decisions made related to their aural rehabilitation.
Policy H – 08

Hearing Aid Selection

Policy Statement

The Specialty Supplier must offer an entry-level digital or advanced programmable hearing aid within the identified program maximum prices to all clients. If the price of the hearing aid preferred by the client exceeds the limits set by the AADL Program, the Specialty Assessor may bill the client the difference. The hearing aid provided to the client must have a one-year warranty, at minimum.

Procedure

Specialty Suppliers:

1. Discuss a range of amplification options with the client, starting with those available within the program maximum funding and restricted to AADL approved manufacturers.
2. Confirm with client which hearing aid(s) are to be ordered.

Clients:

1. Listen and consider amplification options presented by the Specialty Supplier.
2. Confirm with Specialty Suppliers which hearing aid(s) are to be ordered and whether the aids fall within the program maximum funding.

AADL:

1. Responds to all questions and/or concerns from assessors and/or clients regarding amplification selection.
2. Provides a full listing of approved manufacturers.
Policy H – 09

Fitting and Verification

Policy Statement

At the initial fitting of an amplification benefit, the following must be completed:

- Electroacoustic verification to ascertain that the hearing aid is meeting electroacoustic specifications;
- A subjective listening test of the hearing aid;
- Real Ear Measurements (REM) is the method required by the AADL Program for verifying and optimizing the electro-acoustic characteristics of the hearing aid fitting.

In fitting children 0-17 years of age with amplification, all hearing aid verification procedures must be conducted by either an AADL Specialty Assessor who is a private practice audiologist or an audiologist employed by Alberta Health Services.

Procedure

Specialty Suppliers:

1. Must perform electroacoustic assessments via a hearing aid analyzer test box as well as a listening check prior to the hearing aid being fit on clients.

2. Must perform hearing aid verification using REM at the time of the initial fitting of a client’s amplification.

3. Must perform alternate methods of verification in cases in which Real Ear Measurements cannot be performed. This documentation must be forwarded to the Hearing and Augmentative Communication Program Manager along with a written explanation as to why Real Ear Measures could not be obtained. Consideration of payment for non-compliance will be given by the Program Manager. Copies of this documentation must be entered in the client’s file.

4. Verify functionality of any special features ordered with the hearing aid; e.g., directional microphone, digital noise reduction.

5. Document on the verification, keep copies on the clients file, and provide to AADL upon request the following information:

   - Client’s name
6. Instruct client to date and sign Fitting Line (second line) of AADL Validation Certificate.
7. Collect client’s cost-share portion, if applicable.

**Clients:**
1. Must undergo verification procedures at time of initial fitting.
2. Sign Fitting Line on AADL Validation Certificate.
3. Pay cost-share portion, if applicable, and any upgrade costs.

**AADL:**
1. Responds to all questions and/or concerns from assessors and/or clients regarding verification requirements.
Policy H – 10

Trial Period

Policy Statement

The specialty supplier shall provide eligible clients a trial period of at least twenty-eight (28) days after the fitting of a hearing aid. If applicable, the client shall have the benefit of a personally fitted custom (non-stock) ear mold during the trial period.

The Specialty Assessor must have contact with the client a minimum of once between the initial fitting date and the required Validation appointment at the end of the trial period to address any concerns that may arise.

If the client is refitted with a different model of hearing aid during the trial period, the trial period recommences from the date of the re-fitting with the different model.

The 28-day trial period does not include days when the aid is not in the client’s possession.

Where the client plans to leave for an extended vacation prior to completion of the 28 day trial period the Specialty Supplier must have personal contact with the client a minimum of one week after the initial fitting. The client must provide a written statement in a form acceptable to AADL acknowledging that he or she has not had the benefit of a full trial period and waiving any rights he or she may have related to the full trial period.

Procedure

Specialty Suppliers:

1. Upon completion of the fitting and verification appointment a future validation appointment (minimum 28 days from fitting) is to be scheduled, which designates the end of the client’s trial period with his/her amplification.

2. Must also schedule an interim contact with the client between the initial fitting and the validation appointment.

3. The above-scheduled appointments must be rescheduled to reflect a minimum 28 day trial period if the amplification is returned and a new model of amplification is fitted, or if the client is without their hearing aid for over 24 hours.

4. In cases where the client wishes to waive their rights to a trial period Specialty Suppliers must see the client within one week of the fitting and obtain in writing the client’s statement reporting their request to waive any rights to a full trial period.

5. Must keep all documentation regarding appointments and/or waivers on the client’s file.
Clients:
1. Attend all scheduled appointments required to receive funding for their hearing aid.
2. Address any concerns regarding the trialed hearing aid with the specialty supplier prior to signing the Validation Certificate.
3. If waiving the trial period, must provide in writing their acknowledgment of relieving their rights of return.

AADL:
1. Responds to all questions and/or concerns from assessors and/or clients regarding verification requirements.
2. Retains all requested documentation within the specialty supplier’s file.
Policy H – 11

Validation Certificate

Policy Statement

At the end of the trial period (28 days minimum) the Specialty Assessor shall, in person, validate the effectiveness of the hearing aid fitting with the client.

If the fitting is satisfactory to the client, the Specialty Assessor shall obtain from the client their signature on an AADL Validation Certificate or, where the client is under 18 years of age, the signature of their parent or guardian.

The Validation Certificate is a three-part form, in that the client will sign this form on three separate occasions; at time of assessment, at fitting and following a minimum twenty-eight day trial period. It is mandatory that the Specialty Assessor read and explain to the client what it is they are signing for. No pre-dating or pre-signing of the certificate is permitted. All services are to be provided in person. A copy of the signed Validation Certificate must be given by the Specialty Assessor to the client, on the day the client signs the last line on the certificate, for the client’s personal file.

Where the client refuses to travel back to the clinic to sign the certificate, due to time or distance, the client must provide a written statement to AADL acknowledging that he or she is accepting their hearing aid. The original is kept in the clinic’s client file, and a copy is sent to the Program Manager at AADL.

If a client dies prior to signing the certificate, the amplification device(s) are to be returned to the Specialty Supplier. The Specialty Supplier may then charge a return fee to AADL. If unable to obtain the aid(s), the Specialty Supplier may then charge the manufacturer’s invoice cost of the aid(s), up to the AADL maximum allowed, as well as a return fee.

It is also the Specialty Assessor’s responsibility to have contact, in the form of a letter, e-mail or appointment, with the client following the signing of the Validation Certificate at the following times:

- contact between 90 to 120 days following the signing of the certificate;
- contact between 120 days following the signing of the certificate and the 1 year anniversary date of the initial fitting.
**Procedure**

**Specialty Suppliers:**

1. Obtain validation from the client. Many assistive tools such as inventories, diaries and scales are available to assist the Specialty Assessor to determine the client's satisfaction and capability with the prescribed hearing aid(s). The Specialty Assessor may also devise his/her own tool, providing that client feedback is documented in the records.

2. Record/maintain the documentation of validation in client's file.

3. Read over and discuss the final signing of the Validation Certificate with the client, including the recommendation for insurance coverage related to loss, theft or damage.

4. Have the client sign the final line, stating validation, if the client agrees. Client is to sign their name, in full, for each service or item received.

5. Make alternate decisions regarding the status of the hearing aid if the client does not agree to sign:
   a) Further adjustments to the current aid may need to be made with an extension of the trial period, or
   b) Order and trial another model, or
   c) Return the hearing aid.

6. If (a) is chosen, book another future appointment for the client to be checked prior to the client leaving the office.

7. If (b) is chosen, the trial period process will begin again once the new hearing aid is fitted and the client will re-sign with a new date on the Fitting Line below where the initial fitting date and signature exists.

8. If (c) is the result, no final signature will be obtained on the Validation Certificate.

9. Must obtain in writing from the client their declaration of acceptance and the reason they refuse to come back into the clinic, if the client refuses to travel in to sign the certificate.

10. Forward a copy of the Client’s letter to the attention of the AADL Hearing and Augmentative Communications Program Manager.

11. Submit all clinical documentation and the Validation Certificate, as well as documentation regarding efforts to contact the client, to the AADL Hearing and Augmentative Communications Program Manager if the client refuses to sign the Validation Certificate or alternative and does not return the hearing aid(s).

12. May charge the test and return fees to AADL if the client dies prior to signing the certificate and if the aid(s) are able to be returned. If the aid(s) are unable to be returned, the Specialty Supplier may charge the manufacturer’s invoice cost, to the AADL maximum allowed, as well as the return fee.


14. Give a copy of the signed Validation Certificate to the client, once their signature has been obtained.

**Clients:**

1. Make decision regarding acceptance of his/her hearing aid(s).
   a) If accepting, the client signs and dates the AADL Validation Certificate.
   b) If not accepting, the client discusses alternatives with his/her Specialty Supplier.
2. If the client refuses to attend the end of trial period appointment, he/she must submit in writing a letter stating his/her acceptance of his/her hearing aid(s) and a reason why they refuse to come into the clinic to sign.

3. If the client refuses to sign the Validation Certificate and no alternate arrangements are made, the client is responsible to return the hearing aid(s) to the Specialty Supplier.

4. If the client deceases during the trial period, it is the responsibility of the family to return the hearing aid to the vendor for refund.

5. The client shall receive a copy of the signed Validation Certificate for their personal files.

6. Acknowledge that by signing the Validation Certificate, the client accepts responsibility for the loss, theft or damage of the aid or obtains appropriate insurance coverage.

7. Acknowledge that by signing the Validation Certificate, the client accepts that they are not eligible for further government funding for a replacement aid for a period of five years from their fitting date.

AADL:

1. Responds to all questions and/or concerns from assessors and/or clients regarding the AADL Validation Certificate.

2. Retains all requested documentation within the specialty supplier file.

3. Pays the specialty supplier for the claim submitted following the end of the trial period.
Policy H – 12

Hearing Device Replacement

Policy Statement

Hearing devices may be replaced after five (5) years, up to the AADL maximum, if one or more of the following conditions apply:

- Electroacoustic analysis and/or real ear measurements demonstrate that the client’s hearing aid(s) is no longer appropriate, due to changes in hearing.
- The hearing device requires a major repair and is more than five (5) years old.
- Improvements in design and technology would result in an overall improvement in the client’s ability to hear and ultimately improve their reported satisfaction with their hearing aid.
- The physical ability of the client to manually operate the controls of the hearing aid becomes impaired since the original fitting, to the extent that the aid cannot be effectively used.
- When the hearing device has been lost, stolen or damaged and alternate means of replacement (eg. insurance) have been exhausted.

Hearing devices may be replaced within five (5) years of the original fitting only through the Quantity and Frequency Review (QFR) Process (AADL P and P- GN-31). Consideration will be given only if the client:

- Has undergone a significant change in hearing loss – more than 20dB pure tone average loss for those losses moderate and less, and more than a 10dB pure tone average for those losses moderately-severe to profound; or
- Has undergone a significant change in physical condition (e.g., Stroke) resulting in the hearing aid no longer being appropriate, or
- A major repair of the hearing aid is required and the client is within 6 months of the five year replacement criteria.

AADL funded hearing aids have a minimum one-year purchase and/or repair warranty. Clients must seek repair and replacement through the warranty, if applicable, in that time period.
**Procedure**

**Specialty Suppliers:**
1. Confirm client eligibility for replacement amplification on the IVR system.
2. Confirm client status regarding cost-share or cost-share exemption with the client.
3. Inform the client as to their eligibility status.
4. Must have documentation as to why hearing aid(s) require replacement in the client’s file.
5. If the client is not eligible for replacement, yet meets early replacement criteria a QFR form found at [http://www.health.alberta.ca/documents/AADL-QFR-form.pdf](http://www.health.alberta.ca/documents/AADL-QFR-form.pdf) is to be completed, with pertinent clinical information including audiological test results, current real ear measurements and/or quote for repair.
6. Obtain client signature on the QFR form.
7. Fax the completed QFR form to the AADL QFR Coordinator.
8. Collect client’s cost-share portion, if applicable.

**Clients:**
1. Confirm cost-share eligibility and completes a cost-share exemption form, if applicable.
2. If a QFR is required, the client must sign a QFR form.
3. Pay the cost-share portion, if applicable.

**AADL:**
1. Maintains the Interactive Voice Response (IVR) system.
2. Receives and logs QFR requests.
3. AADL Hearing and Augmentative Communications Program Manager reviews the QFR request.
4. Decisions regarding the QFR request are forwarded to Specialty Supplier and client.
5. Responds to all questions and/or concerns from assessors and/or clients regarding hearing aid replacement guidelines.
6. Retains all relevant documentation received in chronological files.
Policy H – 13

Earmold Replacement

Policy Statement

Earmolds may be replaced once every three months for children (0-3 yrs), once every 6 months for children (4-17yrs) and full time students (18-24 yrs) who meet criteria outlined in policy and once a year for adults (18yrs and up). The replacement of ear molds is not automatic. Ear molds may only be replaced when one of the following conditions apply:

- Significant, age-typical development of the external ear.
- Loose fitting resulting in feedback.
- Inadequate high-frequency response due to feedback.

Procedure

Specialty Suppliers:

1. Confirm client eligibility for replacement earmold on the IVR system or e-business site.
2. Confirm client status regarding cost-share or cost-share exemption through the IVR system with the client.
3. Inform client as to their eligibility status.
4. Re-verify fitting following earmold replacement with Real Ear Measures.
5. Read and instruct client regarding the AADL Service Certificate.
6. Have the client sign the AADL Service Certificate. This form serves as an acknowledgement of the replacement of the earmold(s).
7. Provide the client with a copy of the signed AADL Service Certificate.
8. Retain all related documentation within the client’s file regarding the earmold replacement:
   - Manufacturer’s invoice
   - Real ear verification strips
   - Dated and signed AADL Service Certificate
9. Collects client cost-share portion, if applicable.
Clients:
1. Provide the Specialty Supplier with appropriate information to obtain eligibility information.
2. Undergo Real Ear verification measures with new earmold(s).
3. Date and sign the AADL Service Certificate.
4. Retain a copy of the AADL Service Certificate for their files.
5. Pay the cost-share portion, if applicable.

AADL:
1. Responds to all questions and/or concerns from assessors and/or clients regarding earmold replacement guidelines.
Policy H – 14

Hearing Device Repairs

Policy Statement

The AADL Program will pay, up to the AADL set maximum, towards the manufacturer’s invoice cost for repair of current hearing devices only. Devices are eligible for one major repair per year after the manufacturer’s warranty has expired. A six-month warranty on major repairs is acceptable if there is less than 12 months prior to the next replacement eligibility period.

A client may be eligible for an in-house receiver in the canal (RIC) repair once every year after the manufacturer’s warranty has expired.

All hearing devices must be registered with AADL in order for billing to occur. AADL will fund the repair for a registered hearing aid even if AADL did not contribute to the purchase of that aid, for example:

- If an eligible client moves to Alberta, wearing a pre-existing hearing instrument.
- If a client replaces a lost, stolen or damaged AADL instrument on their own.

A major repair is done when the instrument is sent to the manufacturer’s factory, or to an authorized repair facility. An in-house RIC repair is done when the specialty supplier replaces the receiver in-house.

The following services are not covered by AADL:

- Minor repairs and adjustments, other than RIC receiver replacements.
- Fees for extended warranties, other than a 12-month repair warranty, or rush services.

Procedure

Specialty Suppliers:

1. Confirm client eligibility for a hearing aid repair on the IVR system or e-business site.
2. Confirm client status regarding cost-share or cost-share exemption with the client.
3. Inform the client as to their eligibility status.
4. Inform AADL Hearing and Augmentative Communication staff of the serial number of the hearing aid to be repaired if it is not already on the system by using the e-business website to register the hearing aid with AADL.
5. Ensure hearing aid settings meet client needs.
6. Read and instruct the client regarding the AADL Service Certificate.
7. Have the client sign and date the AADL Service Certificate. This form serves as an acknowledgement of a major repair being done.
8. Provide the client with a copy of the signed AADL Service Certificate for their files.
9. Retain all related documentation within the client’s file regarding the hearing aid repair:
   - Manufacturer’s invoice
   - Dated and signed AADL Service Certificate
10. Collect the client’s cost-share portion, if applicable.

**Clients:**
1. Provide the Specialty Supplier with appropriate information to obtain eligibility information.
2. Ensure repaired hearing aid meets client expectations.
3. Date and sign the AADL Service Certificate.
4. Retain a copy of the AADL Service Certificate for their files.
5. Pay the cost-share portion, if applicable.

**AADL:**
1. Records serial numbers of hearing aids not purchased by AADL.
2. Responds to all questions and/or concerns from assessors and/or clients regarding hearing aid repair guidelines.
Policy H – 15

Quantity and Frequency Limits

Policy Statement

The quantity and frequency of hearing devices and repairs available to eligible clients shall not exceed the following:

Cost-sharing Seniors (65 years of age +):

- One hearing device every five years.
- One earmold every year only for users of behind-the-ear hearing aids.
- A personal assistive listening device may be substituted for a conventional hearing aid only with prior approval.
- One major hearing aid repair a year to currently worn amplification once the original manufacturer’s warranty has expired.

Cost-share exempt Seniors (65 years of age +) and Adults (18-64 years of age):

- One hearing device per affected ear every five years.
- One earmold every year, per affected ear for users of behind-the-ear hearing aids only.
- A personal assistive listening device may be substituted for a conventional hearing aid only with prior approval.
- One major hearing aid repair a year, per aid once original manufacturer’s warranty has expired.

Full Time Students (18 to 24 years of age) and Children (4 to 17 years of age):

- One hearing device per affected ear every five years.
- One earmold every six months, per affected ear for users of behind-the-ear hearing aids only.
- One major hearing aid repair a year, per aid once original manufacturer’s warranty has expired.

Children (0 to 3 years of age):

- One hearing device per affected ear every five years.
• One ear mold every three months, per affected ear for users of behind-the-ear hearing aids only.

• One major hearing aid repair a year, per aid once original manufacturer’s warranty has expired.

Procedure

Specialty Suppliers:
1. Check client eligibility through the IVR system or E-business.

2. If the client is not eligible for the regular quantity and frequency limits but the client meets early replacement criteria as outlined in H-12, submit a Quantity and Frequency Request and provide all supporting clinical documentation for consideration.

3. If the aid was not purchased through AADL, register the aid with AADL prior to the repair.

Clients:
1. Obtain repairs through the manufacturer’s warranty, if available.

2. Sign the QFR form, if appropriate.

AADL:
1. Adjudicates the QFR and provide a response to the client and vendor.

2. Registers aids not originally purchased through AADL.
Policy H – 16

Specialty Supplier and Specialty Assessor Qualifications

Policy Statement

AADL approved amplification specialty suppliers must meet the following criteria:

• Meet AADL’s general vendor criteria as outlined in the General Policy and Procedures Manual.
• Meet AADL’s Approved Product List.
• Must have access to a wheelchair accessible washroom.
• Must employ a minimum of one (1) private practice registered Audiologist or Hearing Aid Practitioner.
• May be subject to monitoring or audits at the discretion of the Program Manager.

Product/Equipment:

• Refer to Policy H-05 for a detailed listing of equipment requirements.

Specialty Assessor Qualifications (Audiologist):

• Audiologist means a person who is a member in good standing with the Alberta College of Speech-Language Pathologists and Audiologist (ACSLPA), and who has a minimum of one year clinical experience providing hearing aid services as a certified audiologist.
• Must have a minimum of one year dispensing experience as a full member of their College to be granted Specialty Assessor status by AADL.
• Audiologists can provide amplification products and services to both adult and child clients.
• All new Specialty Assessors’ work will be monitored by AADL for a minimum of six (6) months.
• Ensure staff are educated on AADL Policies and Procedures as stated in the most current AADL Program Manual, Approved Product List, and updates.
• Ensure staff have the necessary expertise regarding the provision of AADL benefits and associated invoicing and business processes.
Specialty Assessor Qualifications (Hearing Aid Practitioner):

- Hearing Aid Practitioner (HAP) means a person who is a member in good standing with the College of Hearing Aid Practitioners of Alberta (CHAPA), and who has a minimum of one year clinical experience providing hearing aid services as a certified HAP.
- Must have a minimum of one year dispensing experience as a full member of their College to be granted Specialty Assessor status by AADL.
- HAPs can provide amplification products and services to adult clients only.
- All new Specialty Assessors’ work will be monitored by AADL for a minimum of six (6) months.
- Ensure staff are educated on AADL Policies and Procedures as stated in the most current AADL Program Manual, Approved Product List, and updates.
- Ensure staff have the necessary expertise regarding the provision of AADL benefits and associated invoicing and business processes.

Trainees (Audiologists and Hearing Aid Practitioners):

- Specialty Assessor Trainees with less than one (1) year post graduate experience providing hearing aid services must have in-house indirect supervision. In-house means that the supervisor, an AADL Specialty Assessor, must be on site but not necessarily in the same room. Indirect supervision (e.g., phone, e-mail, fax, teleconference, video) will be considered on a case-by-case basis at the discretion of the Program Manager.
- Specialty Assessor Trainees who have not completed:
  - their education requirements;
  - certification exams;
  - and have not received CHAPA or ACSLPA practice permits require direct supervision. Direct supervision means that the supervisor, an AADL Specialty Assessor, must be in the same room and supervising the trainee at all times.
- All AADL documentation must be signed by both the trainee and their supervisor.
- All new Specialty Assessors’ work will be monitored by AADL for a minimum of six (6) months.
- Ensure staff are educated on AADL Policies and Procedures as stated in the most current AADL Program Manual, Approved Product List, and updates.
- Ensure staff have the necessary expertise regarding the provision of AADL benefits and associated invoicing and business processes.

Claims:

- May be subject to monitoring or audits at the discretion of the Program Manager.
Policy H – 17

Approved Manufacturers List

Policy Statement

The following table outlines approved AADL manufacturers who may provide eligible clients with new or replacement and repair of hearing devices.

<table>
<thead>
<tr>
<th>MANUFACTURER</th>
<th>CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Audio Controle</td>
<td>AC</td>
</tr>
<tr>
<td>Beltone</td>
<td>BL</td>
</tr>
<tr>
<td>Bernafon</td>
<td>BR</td>
</tr>
<tr>
<td>Miracle Ear</td>
<td>ME</td>
</tr>
<tr>
<td>NuEar</td>
<td>NU</td>
</tr>
<tr>
<td>Oticon</td>
<td>OT</td>
</tr>
<tr>
<td>Phonak</td>
<td>PK</td>
</tr>
<tr>
<td>ReSound</td>
<td>RS</td>
</tr>
<tr>
<td>Rexton</td>
<td>RE</td>
</tr>
<tr>
<td>SeboTek</td>
<td>SK</td>
</tr>
<tr>
<td>Siemens</td>
<td>SI</td>
</tr>
<tr>
<td>Sonic Innovations</td>
<td>SO</td>
</tr>
<tr>
<td>Starkey</td>
<td>ST</td>
</tr>
<tr>
<td>Unitron</td>
<td>UN</td>
</tr>
<tr>
<td>Vivatone</td>
<td>VI</td>
</tr>
<tr>
<td>Widex</td>
<td>WI</td>
</tr>
</tbody>
</table>
Policy H – 18

Personal Listening Devices

Policy Statement

A Personal listening device is a wired device that is intended to facilitate conversation between a person with hearing loss and another person. It consists of a processor about the size of a small transistor radio, a microphone that connects to the processor, and an output device that also connects to the processor.

The second person speaks into the microphone, and the person with hearing loss uses the output device to improve their speech comprehension. The output device may be a pair of headphones, earbuds or custom fit molds that the person with hearing loss wears.

Some of these devices may be configured for multiple speakers, but they are primarily intended for one-on-one situations.

Testing and Environment, as well as Aural rehabilitation requirements are the same as for hearing aid benefits.

The AADL Program will provide eligible clients one (1) Personal Listening Device every five (5) years, in lieu of a hearing aid.

Replacement after this time period may be requested only if the previous device can no longer be used, or is too costly to repair.
Policy H – 19

Personal Listening Devices Prior Approval

Policy Statement

Any individual who meets the eligibility criteria for hearing aids may substitute a personal listening device, as defined below, for traditional amplification.

A written prior approval request, submitted by a Specialty Assessor, to the AADL Hearing and Augmentative Communication Program Manager is required before approval of a Personal Listening device can occur.

Procedure

Specialty Suppliers:

1. The prior approval request should contain the following:
   a) Patient information/history.
   b) Patient need and description of environments the device will be used in.
   c) Confirmation of family/caregiver support of the use of the system.

2. Submit the written request to the Hearing and Augmentative Communication Program Manager at AADL.

3. Collects the client’s cost-share portion, if applicable.

4. Keeps all documentation, such as the Validation Certificate and Service Certificate.

AADL:

1. Reviews the request and documentation.

2. Approves or denies the request.

3. Advises the Specialty Assessor of the decision in writing.
Policy H – 20

Personal Listening Device Repairs

Policy Statement

The AADL Program will provide eligible clients one (1) Personal Listening Device repair each year outside of the manufacturer’s original warranty.

Procedure

Specialty Suppliers:

1. Confirm client eligibility for a hearing device repair on the IVR system or e-business site.
2. Confirm client status regarding cost-share or cost-share exemption with the client.
3. Inform the client as to their eligibility status.
4. Inform AADL Hearing and Augmentative Communication staff of the serial number of the device to be repaired if it is not already on the system by using the e-business website to register the device with AADL.
5. Re-verify the device setting following the repair.
6. Read and instruct the client regarding the AADL Repair Service Certificate.
7. Have the client sign and date the AADL Repair Service Certificate.
8. Provide the client with copy of the signed AADL Repair Service Certificate for their files.
9. Retain all related documentation within the client’s file regarding the personal listening device repair:
   - Manufacturer’s invoice
   - Fitting verification - settings
   - Dated and signed Repair Service Certificate
10. Collect the client’s cost-share portion, if applicable.

Clients:

1. Provide the Specialty Supplier with appropriate information to obtain eligibility information.
2. Undergo device verification measures with repaired device if electroacoustics have been modified.
3. Date and sign the Repair Service Certificate.
4. Retain a copy of the Repair Service Certificate for their files.
5. Pay the cost-share portion, if applicable.

AADL:
1. Records serial numbers of personal listening devices not purchased by AADL.
2. Responds to all questions and/or concerns from assessors and/or clients regarding personal listening device guidelines.
Policy H – 21

Frequency Modulation (FM) and Digital Modulation (DM) Systems

Policy Statement

Frequency modulation (FM) and digital modulation (DM) are two ways that sound can be transmitted over a distance. FM systems transmit sound using radio waves; DM systems transmit sound using digital signals.

Both systems transmit sound from a microphone that is worn by a teacher, parent or other communication partner directly to a child’s hearing device. Because the microphone is away from the child, both systems are often called remote-microphone hearing assistance technology (RM-HAT).

Children with hearing loss typically use RM-HAT systems that have receivers that attach to hearing aids, cochlear implants or bone conduction devices. Other RM-HAT systems can send the signal directly to a desktop speaker or ear-level receiver that does not require a hearing aid or cochlear implant.
Policy H – 22

Frequency Modulation (FM) and Digital Modulation (DM) System Quantity Limits

Policy Statement

The AADL Program will provide eligible clients one (1) Personal FM or DM System every five (5) years.

Replacement after this time period may be requested only if the previous device can no longer be used, or is too costly to repair. Replacement of devices must demonstrate improved client outcomes.
Policy H – 23

Eligibility Criteria: Frequency Modulation (FM) and Digital Modulation (DM) Systems

Policy Statement

Clients must meet the general AADL eligibility criteria and the following criteria for FM or DM System:

- Individuals must be under 18 years of age, or a full time student, still receiving benefits under the Alberta Health Care Insurance Plan as a dependent under their parent’s plan and are between the ages of 18 to 24 years. Proof of full time educational enrolment is required for those aged 18 to 24.
- The FM/DM system must be used in conjunction with an amplification benefit, or by individuals who present a permanent, unaidable, unilateral hearing loss.
- It must be established that the equipment shall be used in a variety of listening environments, not solely for school use.
- The individual’s caregivers must be trained in the use of the device and motivated to use it in a variety of listening environments.

Procedure

Audiologists:
1. Determine client eligibility.
2. Collect proof of full time educational enrollment from eligible clients aged 18 to 24.

Clients/Families:
1. Provide the Audiologist with appropriate information to obtain eligibility information.

AADL:
1. Answers any questions or concerns regarding FM/DM system eligibility criteria.
Policy H – 24

Fitting, Verification and Validation of Frequency Modulation (FM) and Digital Modulation (DM) Systems

Policy Statement

Personal FM or DM Systems must be fitted and verified by an Audiologist. The Audiologist is the only professional who is qualified to select, evaluate, fit and dispense FM/DM systems through AADL.

The Audiologist will discuss all audiological, developmental, listening environment, and technology issues prior to recommending an FM/DM System.

At the time of fitting and at routine follow-up, the Audiologist should confirm that the electro-acoustic fitting goals have been attained or maintained.

The Audiologist shall provide the eligible client with a trial period of at least 28 days after the fitting of the FM/DM System. The 28 day trial period does not include days when the FM/DM System is not in the client’s possession.

At the end of the trial period, the Audiologist shall, in person, validate the effectiveness of the FM/DM System with the client and/or parents.

If the fitting is satisfactory to the client, the Audiologist shall obtain from the client their signature on an AADL FM/DM Validation Certificate or, where the client is under 18 years of age, the signature of their parent or guardian.

The FM/DM Validation Certificate is a two-part form, in that the client will sign this form on two separate occasions; at time of fitting and at the end of the trial period. It is mandatory that the Audiologist reads and explains to the client what it is they are signing for. No pre-dating or pre-signing of the certificate is permitted. All services are to be provided in person. A copy of the signed Validation Certificate must be given by the Audiologist to the client, on the day they receive the service, for the client’s personal file.

Procedure

Audiologists:

1. Order the FM or DM device from the approved manufacturers list.
2. Fit the FM or DM system and uses verification methods to ascertain adequate benefit.
3. Provide training in the use of the device to family members, and others who may use the
FM/DM system.
4. Provide the client with a minimum 28-day trial period.
5. Collect the client’s cost-share portion if applicable, at the time of the trial.
6. Have the client sign the FM/DM Validation Certificate, both at fitting and at the end of the trial period.

Clients/Families:
1. Train in the use of the FM/DM system.
2. Pay their cost-share portion if not eligible for cost-share exemption.
3. Sign the FM/DM Validation Certificate at fitting and upon satisfaction.

AADL:
1. Pays vendor for submitted claim following successful trial period.
Policy H – 25

Repairs of Frequency Modulation (FM) and Digital Modulation (DM) Systems

Policy Statement

The AADL Program will pay the manufacturer’s invoice cost for repairing FM/DM Systems used by eligible clients. Items, such as receivers and transmitters may be repaired once per year per unit once the device is out of the manufacturer’s original warranty period.

Procedure

Audiologists:

1. Forward device to manufacturer for repair.
2. Obtain a quote for repair cost if the item is not a standard flat rate repair charge.
3. Refit the FM/DM system to the client following the repair.
4. Read and instruct the client regarding the FM/DM Service Certificate.
5. Have the client sign and date the FM/DM Service Certificate.
6. Provide the client with a copy of the signed FM/DM Service Certificate for their files.
7. Retain all related documentation within the client’s file regarding the FM/DM system repair:
   a) Manufacturer’s invoice
   b) Real ear verification documentation
   c) Dated and signed FM/DM Service Certificate
8. Collect client’s cost-share contribution, if applicable.

Clients/Families:

1. See Audiologist for repairs.
2. Receive quote for repair cost if the item is other than a flat rate repair.
3. Undergo refitting following return of the repaired FM/DM system.
4. Sign the FM/DM Service Certificate when the device is returned.
5. Pay the cost-share portion, if applicable.

**AADL:**

1. Responds to any questions or concerns regarding FM/DM system repairs.
Policy H – 26

Approved Manufacturers List

Policy Statement

Personal Frequency Modulation (FM) and Digital Modulation (DM) Systems shall be ordered from the following approved AADL Manufacturers:

<table>
<thead>
<tr>
<th>MANUFACTURER</th>
<th>CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phonak</td>
<td>PK</td>
</tr>
<tr>
<td>Oticon</td>
<td>OT</td>
</tr>
<tr>
<td>Sennheiser</td>
<td>SH</td>
</tr>
</tbody>
</table>
Policy H – 27

Cochlear Implants

Policy Statement

AADL will provide funding for Cochlear Implant Replacement Processors (CI) for AADL clients.

A CI is a complex surgically implanted electronic device that provides a sense of sound to a person who is severe to profoundly hearing impaired. The device consists of an external processor that sits behind the ear and an internal portion that is surgically implanted under the skin.

AADL will fund a replacement CI after seven years of initial implantation. All requests for funding must be prior approved by the AADL Program Manager, Hearing and Augmentative Communication.

Eligibility

Clients must meet general eligibility criteria requirements found in the AADL General Policies and Procedures on-line at http://www.health.alberta.ca/documents/AADL-Policy-Procedures.pdf

Clients must also meet the following benefit specific eligibility criteria:

- Current replacement sound processor is now over seven years old; and
- Replacement of the sound processor has been recommended by their Alberta Health Services (AHS) cochlear implant audiologist.

Applicants cannot have the same or similar devices in good working order. Applicants must trade in their old processor in order to obtain a new one.

Quantity and Frequency Limits

1. The AADL Program will provide eligible clients with one (1) Cochlear Implant external sound processor every seven years, per affected ear.

2. Replacement after this time period may be requested only if the previous processor can no longer be used, or it is too costly to repair. Replacement of devices must demonstrate improved client outcomes.
3. Cochlear Implants may be replaced within seven years of the original fitting only with the submission of a Quantity Frequency Review (QFR) request, and signed approval by the AADL Hearing and Augmentative Communication Program Manager. Consideration will be given only if the client is in need of a major repair of the processor and the client is within 6 months of the seven year replacement criteria.

**Repairs**

AADL will fund one major Cochlear Implant repair a year per device, once the manufacturer’s original warranty has expired. All repairs must come with a minimum six month warranty.

All requests for repairs must be approved by AADL prior to the repair occurring.

**Procedure**

**Audiologists:**

1. Examine clients at Cochlear Implant clinic and make recommendation for Cochlear Implant replacement.

2. Get quote from distributor and forward quotes and prior approval requests to AADL. The prior approval request should include the following:
   a) Patient information/PHN/history
   b) Patient need.
   c) Quote for the cost or repair of the device
   d) Trade-in value of old CI processor
   e) Audiologist’s contact information: address, fax # and e-mail address.

3. Fax request to the AADL program attention: Hearing and Augmentative Communication Benefit Clerk at 780-422-0968.

4. Inform clients of the AADL decision and of the cost-share portion owing to the distributor, if applicable.

5. Fax the device order and the AADL approval letter to the distributor.

6. Fit clients with new processor and sign the External Cochlear Implant Processor Receipt of Equipment Acknowledgement form.

**Distributors:**

1. Receive cost-share payment from the client, if applicable.

2. Ship devices to designated ship to address, once client payment received.

3. Invoice AADL for outstanding portion within six months (invoice minus client portion).

**Clients:**

1. Participate in assessment.

2. Pay their cost-share portion directly to the distributor, if applicable.
3. Are fit with new or repaired external devices and sign CI Receipt of Equipment Acknowledgement form.

**AADL:**

1. Reviews request and documentation.
2. Approves or denies request.
3. Advises the audiologist of the decision.
4. Informs audiologist of client’s cost-share status.
5. Pays distributor’s invoice, minus client cost-share portion.
Policy H – 28

Bone Anchored Hearing Device (Bahd)

Policy Statement

AADL will provide funding for bone anchored hearing device (Bahd) for eligible AADL clients. A Bahd is a type of hearing aid that uses bone conduction to transmit sound and is intended for people who cannot otherwise wear ‘in-the-ear’ or ‘behind-the-ear’ hearing aids.

Children’s skulls are thinner and their bone is softer than an adult’s. Implant placement can only be performed in children age 5 and up, who have stronger and thicker skull bones. Younger children may be fit with a softband Bahd. The softband Bahd is an elastic band with a plastic snap connector disk sewn into the band.

AADL will fund a replacement Bahd after six years of initial implantation. All requests for funding must be prior approved by the AADL Program Manager, Hearing and Augmentative Communication.

Eligibility


Clients must also meet the following benefit specific eligibility criteria:

Softband Bahd:
- Bahd audiologist has recommended the use of a softband Bahd as a temporary solution until the child is old enough for a Bahd implant (generally <5 years old)
- Clients (5yrs+) may choose a Bahd softband as an alternative to traditional bone conduction hearing aids or Bahd implant surgery. However, AADL will only cover the maximum funded amount for a traditional bone conduction hearing aid.

Bahd:
- Must have previously been implanted with a Bahd system for over six years, or current replacement sound processor is now over six years old; and
- Replacement of the sound processor has been recommended by their Bahd audiologist.

Applicants cannot have the same or similar devices in good working order. Applicants must trade in their old processor in order to obtain a new one.
Quantity and Frequency Limits

1. The AADL Program will provide eligible clients with one Bahd external sound processor every six years, per affected ear.

2. Replacement after this time period may be requested only if the previous processor can no longer be used, or it is too costly to repair. Replacement of devices must demonstrate improved client outcomes.

3. Bahd’s may be replaced within six years of the original fitting only with the submission of a Quantity Frequency Review (QFR) request, and signed approval by the AADL Hearing and Augmentative Communication Program Manager. Consideration will be given only if the client:
   a) Has undergone a significant change in hearing loss – more than 20dB pure tone average loss; or
   b) A major repair of the hearing aid is required and the client is within six months of the six year replacement criteria.

Repairs

AADL will fund one major Bahd repair a year per device, once the manufacturer’s original warranty has expired.

All repairs must come with a minimum six month warranty.

All requests for repairs must be approved by AADL prior to the repair occurring.

Procedure

Audiologists:

7. Examine clients at Bahd clinics and make the recommendations for Bahd replacement.

8. Get quote from distributor and forward quotes and prior approval requests to AADL.
   The prior approval request should include the following:
   a) Patient information/PHN/history
   b) Patient need.
   c) Quote for the cost or repair of the device.
   d) Trade-in value of old Bahd processor.
   e) Audiologist’s contact information: address, fax # and e-mail address.

9. Fax request to the Hearing and Augmentative Communication Benefit Clerk at 780-422-0968.

10. Inform clients of the decision and of the cost-share portion owing to the distributor, if applicable.

11. Fax device orders and AADL approval letters to the manufacturer.

12. Fit clients with new processors and has clients sign the Bahd Receipt of Equipment Acknowledgement form.
**Distributors:**

1. Receive cost-share payment from the client, if applicable.
2. Ship devices to designated ship to address, once client payment received.
3. Invoice AADL for outstanding portion within six months (invoice minus client portion if applicable).

**Clients:**

1. Participate in assessment.
2. Pay their cost-share portion directly to distributor, if applicable.
3. Are fit with new or repaired external devices and sign Bahd Receipt of Equipment Acknowledgement form.

**AADL:**

1. Reviews request and documentation.
2. Approves or denies request.
3. Advises the audiologist of the decision.
4. Informs audiologist of client’s cost-share status.
5. Pays distributor’s invoice, minus client cost-share portion.
Policy H – 29

Statement of Account

Policy Statement

Amplification benefit suppliers must provide every client with a statement of account for each hearing service invoiced to the AADL program. The statement of account must include the AADL contribution, the cost-share portion, and any upgrade charges for each amplification benefit (when applicable).

Procedure

Amplification benefit suppliers:

1. Provide the client with a statement of account for AADL amplification benefits when invoiced to the AADL program.
2. For cost-share clients, identify the AADL contribution and the client’s cost-share contribution for each amplification benefit.
3. For cost-share exempt clients, identify AADL’s contribution for each amplification benefit.
4. For all clients, identify any upgrade charges for each amplification benefit.

AADL:

1. Reviews discrepancies of costs with client.