



# THE PAIUTE INDIAN TRIBE OF UTAH

440 North Paiute Drive • Cedar City, Utah 84721 • (435) 586-1112 • Fax (435) 867-1514

## Purchased Referred Care (PRC) HEARING AID POLICY JUNE 2017

**Policy:** Paiute Indian Tribe Members and other eligible AI/AN must follow these procedures when obtaining routine hearing aid devices and audiology services.

**A. Requirements:** The following requirements apply to all categories of eligible AI/AN patients including students, transients, and patients who leave the Purchased Referred Care Delivery Area (PRCDA).

1. No Payment will be made for:
  - a. Hearing devices obtained from Medical providers unless the requirements listed below have been met and prior-authorization for the care and services have been issued to the hearing care provider by the appropriate Health Department official.
  - b. Hearing devices when a patient is non-compliant with alternate resource applications.
  - c. Hearing devices when a patient is non-compliant in following their primary insurance requirements. Patient must use the primary insurance network providers.
2. In non-emergency cases, an eligible AI/AN, an individual or agency acting on behalf of the client or medical care provider, shall:
  - a. Prior to the provision of hearing services, notify the appropriate Paiute Indian Tribe of Utah (PITU) Health Department official of the need for services and supply information upon request, to allow eligibility determination and verification of required referrals.
3. Hearing examinations must be pre-authorized and you must obtain a referral from one of our health center providers. If you do not get pre-authorized, you will be responsible for the cost of your hearing exam.

**B. Scope of Service:**

1. Limits on Hearing Devices:
  - a. Hearing device(s) are limited to \$2,500 dollars (per set of hearing device) and provided to eligible patients once every 5 years.
  - b. Any balance above the \$2,500 limit must be paid in full BEFORE the Tribe makes payment.
  - c. Patients must purchase hearing device insurance that covers damage and loss. You must show proof you purchased the insurance BEFORE the Tribe makes payment.
  - d. Hearing device(s) costing less than \$2,500 dollars will be paid in full up to the \$2,500 dollars but not to exceed this amount. If you do not use the full \$2,500 you will forfeit the balance. Please note: You may use any remaining amount

up to \$2,500 to purchase hearing aid accessories such as batteries or towards your extended warranty.

- e. Hearing device(s) repair and maintenance is solely the responsibility of the patient. The Tribe will not replace broken or stolen hearing device/devices.
- f. Exceptions to this policy may be waived on a case-by-case basis upon review by the Health Department Director.
- g. Clients who are in custody or incarcerated in a city, state or federal prison or jail at the time of service are not covered under PRC.

**C. Procedure:** Procedure and documentation requirements for Hearing Services.

- 1. All patients insurance will be verified before the visit.
- 2. Payment of the patient's portion must be made in full prior to receiving hearing device/devices.
- 3. Checks are not accepted. Payment can be made by cash or credit.
- 4. All Hearing visits will be documented in the patient's electronic health record.
- 5. You must acknowledgement form (attachment A) that states you are aware of the Tribe's Hearing Device Policy and have received a copy.

**D. Compliance:** No payment will be made if prior-authorization has not been obtained by the client, or client representative, any incurred charges become the responsibility of the client or parent/guardian.

**E. Warranty:** In order to obtain full coverage for the cost of the hearing aid device(s). It is required to obtain a warranty to protect you from having to pay out of pocket expenses. Obtaining a one to three comprehensive loss, damage and repair coverage directly from the manufacturer is recommended. **Attachment A:** requires a signed signature acknowledging this requirement is meant before authorization of purchase is made.

**Definitions:**

AI/AN - American Indian/Alaskan Native

PRCDA - Purchased Referred Care Delivery Area (Washington, Millard, Iron or Sevier counties)

IHS - Indian Health Services

PRC - Purchased Referred Care

EHR - Electronic Health Records

This policy was modified to increase limit for Hearing Devices from \$1,000 to \$2,500 per set of hearing devices for tribal members.

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Michele Lefebvre, Health Director

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Date

**A. Warranty:** In order to obtain full coverage for the cost of the hearing aid device(s). It is required that each individual is responsible to purchase and obtain warranty to protect the investment from potential out of pocket expenses due to damage or loss. Warranty cost may vary discussing your options with an audiologist is recommended. Obtaining a comprehensive loss, damage and repair coverage directly from the manufacturer is recommended.  
**Attachment A:** requires a signed signature acknowledging requirement of warranty before authorization of the hearing aid device is made. Providing proof of purchase by receipt from Audiologist is required.

**Attachment A - Warranty**

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I agree to purchase warranty coverage for the hearing aid device and submit proof of purchase before full payment of hearing aid is authorized.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Warranty: \_\_\_\_\_

Submit to Paiute Indian Tribe of Utah - Health Department  
440 North Paiute Drive  
Cedar City, Utah 84721