

Clients Benefit From Hearing Care and Hearing Aids

April 25, 2017

Anthem Blue Cross and Blue Shield contracted with Hearing Care Solutions (HCS) to provide quality hearing care and hearing aids at the lowest possible cost. This fabulous benefit is available to members covered by many of our HMO and PPO Medicare Advantage plans. HCS strives to bring not only quality and value, but simplicity and transparency to hearing care, and offers a vast and growing provider network of over 2,400 provider locations throughout the United States.

What is covered?

The supplemental hearing benefit provides coverage in addition to the Medicare-covered hearing benefits and includes coverage for a routine hearing exam, hearing aid fitting and evaluation, an allowance toward the purchase of hearing aid(s), and one year of service at no charge after a hearing aid is purchased. When the device is purchased through HCS, the member gets a three-year warranty and a one-year supply of batteries.

HMO and DSNP members must access care from a provider in the HCS network in order to receive benefits. If members in HMOs and DSNPs access hearing care from an out-of-network provider, the plans will not cover the services.

For PPO members, costs remaining over and above the plan allowance for the hearing exam and hearing device(s) are the responsibility of the member. Members in PPO plans can access their benefits from out-of-network providers, but they will have significant out-of-pocket costs for the exam, hearing aid repair and batteries.

[Link to FAQs about hearing benefits](#)

How does the benefit work?

Members access the benefit by first scheduling a hearing exam. To find an HCS provider, the member should reference their provider directory or online Provider Finder, or call Hearing Care Solutions at 1-855-312-2545. **Note:** *Members in PPO plans can access their benefits from out-of-network providers but may have higher out-of-pocket costs for those services.*

When using an HCS provider, once the exam is complete, HCS begins the authorization process for the member to obtain the approved, provider-recommended hearing aid(s).

HMO members can select from 7 major manufacturers to obtain two fully digital hearing aids, up to the maximum benefit allowance, with no out-of-pocket expenses.

Upon approval, the provider will place the order and make arrangements to deliver the devices to the member. Due to the popularity of the benefit, it may take up to 45 days for the member to receive their approved device(s).

For questions or to schedule an initial audiogram with an HCS provider, or for help locating an HCS provider, covered members should contact HCS:

- Phone 1-855-312-2545 for the dedicated Anthem line
- Call Patient Services at 1-866-326-8367
- Fax 1-888-456-3047
- Email patientservices@hearingcaresolutions.com
- Visit the website
<http://hearingcaresolutions.com/amerigroup-members/http://hearingcaresolutions.com/anthem-members/>

For detailed information on each plan's coverage, please refer to the 2017 Plan Highlight Chart or Benefit Matrix, or Evidence of Coverage (EOC). If you have questions, please contact Medicare Agent Services by phone at 1-800-633-4368 or email medicareagentsupport@anthem.com.

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This article applies to:

- Wisconsin, Ohio, Nevada, New Hampshire, Missouri, Maine, Kentucky, Indiana, Connecticut, and Colorado
- Senior and Medicare