

CHAPTER 69

HEARING AID ASSISTANCE TO THE
AGED AND DISABLED

Authority

N.J.S.A. 30:4D-36 through 42, and 30:4D-7, 7a, b, and c.

Source and Effective Date

R.1993 d.281, effective May 14, 1993.
See: 25 N.J.R. 228(a), 25 N.J.R. 2589(a).

Executive Order No. 66(1978) Expiration Date

Chapter 69, Hearing Aid Assistance to the Aged and Disabled, expires on May 14, 1998.

Chapter Historical Note

Chapter 69, originally Reimbursement to Pharmaceutical Consultants in Long-Term Care Facilities, was adopted as R.1976, d.6, effective January 9, 1976. See: 7 N.J.R. 504(a), 8 N.J.R. 70(c). Chapter 69 was rescinded by Emergency Rule R.1976 d.216, effective July 12, 1976. See: 8 N.J.R. 385(c).

Chapter 69, Hearing Aid Assistance to the Aged and Disabled, was adopted as R.1988 d.250, effective June 6, 1988. See: 20 N.J.R. 519(a), 20 N.J.R. 1220(a). Pursuant to Executive Order No. 66(1978), Chapter 69 was readopted as R.1993 d.281. See: Source and Effective Date. See, also, section annotations for specific rulemaking activity.

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SUBCHAPTER 1. GENERAL PROVISIONS

10:69-1.1 Purpose

(a) The purpose of this chapter, Hearing Aid Assistance to the Aged and Disabled (HAAAD), is to provide a payment of up to \$100.00 in a calendar year in which a hearing aid is purchased to offset the cost of the hearing aid for individuals who meet the age or disability, income and residency requirements of the Pharmaceutical Assistance to the Aged and Disabled (PAAD) Program.

(b) This chapter has been developed as a statement of policy and procedures and is applicable only to eligibility for the HAAAD Program.

10:69-1.2 Legal authority

The New Jersey Program of Hearing Aid Assistance to the Aged and Disabled (HAAAD) is established by Chapter 198, Laws of 1987, (N.J.S.A. 30:4D-36 et seq.) effective February 4, 1988.

SUBCHAPTER 2. DEFINITIONS

10:69-2.1 Definitions

The following words and terms, when used in this chapter, shall have the following meanings, unless the context clearly indicates otherwise.

“Annual income” means all income from whatever source derived, actually received or anticipated.

“Applicant” means an individual who applies for HAAAD, either personally or through an authorized agent.

“Beneficiary” means an individual who has been found eligible for HAAAD benefits.

“Calendar year” means a year beginning January 1 and ending on December 31. “Calendar year” is the base period utilized to determine annual income and HAAAD eligibility.

“Resident” means a person legally domiciled within the State of New Jersey for a period of 30 days immediately preceding the date of application for inclusion in the HAAAD program. Mere seasonal or temporary residence within the State, of whatever duration, does not constitute domicile.

SUBCHAPTER 3. ADMINISTRATIVE ORGANIZATION

10:69-3.1 Department of Human Services

The Department of Human Services is the administrative unit of the State government which has control over the administration of HAAAD. Under the terms of the HAAAD law, the Department is responsible for the general policies governing administration of HAAAD, and for effecting the issuance of rules and procedures in accordance with the Administrative Procedure Act, N.J.S.A. 52:14B-1 et seq., for implementing the statutory provisions.

10:69-3.2 Division of Medical Assistance and Health Services

The Division of Medical Assistance and Health Services is the administrative unit of the Department of Human Services responsible for the administration of the HAAAD Program.

10:69-3.3 Bureau of Pharmaceutical Assistance to the Aged and Disabled

The Bureau of Pharmaceutical Assistance to the Aged and Disabled is the unit of the Division of Medical Assistance and Health Services which has the direct responsibility for the processing of eligibility applications and for authorizing payment of HAAAD benefits.

10:69-3.4 Agency controls

(a) The Division Director shall establish operating policies to expedite the processing of applications and to assure the maximum possible compliance with the standards set forth in this chapter.

(b) The Bureau of Medical Care Surveillance of the Office of Program Integrity within the Division of Medical Assistance and Health Services is assigned the responsibility for investigating beneficiaries in matters involving potential fraud and/or abuse.

SUBCHAPTER 4. APPLICATION PROCESS

10:69-4.1 General provisions

The application process includes all activity relating to a request for eligibility determination. The application process begins with the receipt by the Division of Medical Assistance and Health Services of an eligibility application and continues in effect until there is an official disposition of the request by the Division of Medical Assistance and Health Services.

10:69-4.2 Authorized agent

(a) In those instances where the applicant is incompetent or incapable of filing an eligibility application on his or her own behalf, the Division shall accept any one of the following, listed in the order of priority, as an authorized agent for the purpose of initiating such application:

1. A close relative by blood or marriage, that is, parent, spouse, son, daughter, brother, sister;
2. A representative payee designated by the Social Security Administration;
3. A staff member of a public or private social service agency, of which the person is a client, who has been designated by the agency to so act;
4. A friend.

10:69-4.3 Responsibilities in the application process

(a) The Department of Human Services through the Division of Medical Assistance and Health Services, Bureau of Pharmaceutical Assistance to the Aged and Disabled establishes procedures on the application process consistent with law and supervises the operation with the policy and procedures so established.

(b) The Bureau of Pharmaceutical Assistance to the Aged and Disabled has responsibility in the application process to:

1. Explain the purposes and eligibility requirements of the program and indicate the applicant's rights and responsibilities under its provisions.
2. Process the AP-2 or HA-1 application.
3. Certify to the Treasurer, State of New Jersey, the names of eligible residents and authorize the payment of HAAAD benefits.
4. Microfilm eligibility applications and supporting documents and retain microfilm for audit purposes.

(c) The applicant has the responsibility to do the following:

1. Complete the PAAD eligibility application (AP-2) for those applicants not enrolled in the PAAD Program, or the HAAAD eligibility application (HA-1) for those applicants already enrolled in the PAAD Program. The application shall be legible and accurate. The applicant shall:
 - i. Answer all questions fully;
 - ii. Present all necessary evidentiary documents, including physician's prescription or letter attesting to the medical necessity for obtaining a hearing aid and a receipt for the recent purchase of the hearing aid;
 - iii. Read the certification and authorization statement;

iv. Sign or mark the application.

2. Assist the Division of Medical Assistance and Health Services in securing evidence that corroborates the statements when necessary.

(d) The beneficiary has the responsibility to repay the State of New Jersey, upon request, for the cost of benefits incorrectly paid on his or her behalf.

SUBCHAPTER 5. ELIGIBILITY REQUIREMENTS

10:69-5.1 Age and income standards

(a) To be eligible for HAAAD, the applicant must be 65 years of age or older or must be under 65 and over 18 years of age and receive Social Security Title II disability benefits and have an annual income below \$16,171 if single or \$19,828 combined income if married.

(b) HAAAD eligibility is conferred based upon annual income for the current calendar year.

(c) The HAAAD program shall take necessary action to recover the full amount of payments made on behalf of beneficiaries during an ineligible period, when appropriate.

Amended by R.1991 d.563, effective November 18, 1991.

See: 23 N.J.R. 2623(a), 23 N.J.R. 3514(a).

Income eligibility revised upwards.

Amended by R.1993 d.608, effective December 6, 1993.

See: 25 N.J.R. 3407(a), 25 N.J.R. 5528(b).

10:69-5.2 Citizenship and residence

(a) A person shall not be required to be a citizen of the United States in order to be eligible for HAAAD.

(b) Any resident of this State shall be eligible for HAAAD. (See 10:69-2.1.)

10:69-5.3 Recipient of other assistance and hearing aid coverage

(a) Any person shall be ineligible for HAAAD if he or she is otherwise qualified for assistance for the New Jersey Title XIX (Medicaid) program.

(b) If an otherwise eligible person's hearing aid costs are covered in whole by any other State or Federal government program or insurance contract, the person is not eligible for hearing aid assistance under these rules. If an eligible person's hearing aid costs are covered in part by any other State or Federal government program or insurance contract, the person may be entitled to receive a reduced hearing aid assistance. HAAAD will pay full client liability up to \$100.00. The program will recover from the third party payor in cases where an applicant has partial coverage and total client out-of-pocket expense is less than \$100.00.

10:69-5.4 Certification

The applicant for HAAAD benefits must sign a certification that all the answers to the questions and items on the application form are true and accurate to the best of his or her knowledge.

10:69-5.5 Authorization

By signing or marking the certification and authorization statement on the application form, the applicant authorizes assignment of benefits to the State of New Jersey if he or she or his or her spouse has any other plan of assistance or insurance that covers, at least in part, the cost of hearing aids.

10:69-5.6 Eligibility period

A person eligible for HAAAD is entitled to receive a payment of up to \$100.00 in a calendar year. Only one benefit may be issued in the period between January 1 and December 31 of any year. No benefits will be granted for hearing aids purchased prior to February 4, 1988.

10:69-5.7 Recoveries for benefits incorrectly paid

(a) The Division may take all necessary action to recover the cost of benefits incorrectly paid on behalf of a beneficiary.

1. The term "incorrect payment" includes, but is not limited to:

i. Payment made on behalf of a beneficiary whose hearing aid costs are wholly covered by another source;

ii. Payment made on behalf of a beneficiary who is no longer eligible, or has been incorrectly determined to be eligible to receive benefits;

iii. Payment made as a result of fraud perpetrated by a beneficiary, his or her authorized agent and/or provider.

(b) The Division shall take all reasonable measures to ascertain the legal liability of third parties to pay for hearing aids arising out of injury, disease, or disability, where it is known that a third party is or may be liable to pay all or part of the hearing aid costs for a beneficiary.

10:69-5.8 Appeal process

(a) When the Bureau of PAAD determines that an applicant is ineligible for Hearing Aid Assistance for the Aged and Disabled benefits, the applicant has the right to appeal the decision by submitting a written request for a fair hearing to the Bureau of Pharmaceutical Assistance to the Aged and Disabled, Division of Medical Assistance and Health Services, New Jersey Department of Human Services, CN 715, Trenton, New Jersey 08625-0715, within 20 calendar days from the date of mailing of the notice of ineligibility. The document must clearly state the valid basis for such a request.

(b) The Bureau of PAAD will forward the hearing request to the Office of Administrative Law which will schedule the hearing and notify all parties of the date, time and location.

(c) The petitioner will have the burden of demonstrating that the Bureau of PAAD's determination deviates from the requirements and standards of the regulations and statute.

New Rule, R.1993 d.368, effective July 19, 1993.

See: 24 N.J.R. 4329(a), 25 N.J.R. 3216(a).