



Levels	Molina Dual & Other Dual Fitting Fee* (per hearing aid)	Medicaid Fitting Fee* (per hearing aid)
Level 5	\$700	Not covered
Level 4	\$600	Not covered
Level 3	\$500	Not covered
Level 2	\$400	Not covered
Level 1	\$150 - \$300 varies by manufacture	\$150 - \$200 varies by manufacture

Warranty Period	Varies by technology level, view member program details
Batteries	Varies by Plan, view member program details listed on the Provider Appt Confirmation Pg.
L & D	Varies by manufacture, see L&D Chart below. Collect fee from member if applicable & reorder replacement device. Zero cost for Medicaid within 1 st year. No paperwork needed from HUSA.
Included Follow-Up Visits	Unlimited for the 1 st 6mos (dual) 1 year at no cost to Medicaid member for all plans.
Trial Period	All plans are 30 days from date of delivery, except AARP receives 90 days.
Return Policy/ Fee	All plans have a \$75.00 per aid restocking fee in the event of a return, except Medicaid zero cost to members. Members must sign & agree to terms on day of fitting. Fee will be deducted from members refund or members responsibility.