



Montana Healthcare Programs Provider Notice

October 1, 2026

Effective October 1, 2026

Update

Audiologist, Durable Medical Equipment, Hearing Aid Dispenser, Indian Health Service (IHS), Pharmacy, Physician, Mid-Level, and Tribal 638 Providers

Updated Hearing Aid and Hearing Aid Systems Coverage Criteria

Beginning October 1, 2026, providers will no longer be required to submit [Montana Medicaid Hearing Aid Prior Authorization Request](#) or [Montana Medicaid Certificate of Medical Necessity](#) for services that meet applicable coverage authorization criteria. While the forms are no longer required, all hearing aids require prior authorization. When submitting a request for prior authorization, providers must include documentation demonstrating medical necessity.

In addition, effective October 1, 2026, the coverage criteria for hearing aids and hearing aid systems have been updated. The updated criteria are provided below.

1. Monaural Hearing Aid – remains the same

2. Binaural Hearing Aids

- **Members aged 21 and older**

To be eligible for coverage, all the following criteria must be met:

- The two-frequency average at 1 kHz and 2 kHz must be greater than 40 decibels in both ears.
- The two-frequency average at 1 kHz and 2 kHz must be less than 90 decibels in both ears.
- The two-frequency average at 1 kHz and 2 kHz must have an interaural difference of less than 15 decibels.
- The interaural word recognition or speech discrimination score must have a difference of less than 20%

- **Members aged 20 and under**

To be eligible for coverage, all the following must be met.

- The two-frequency average at 1 kHz and 2 kHz must be greater than 25 decibels in both ears;
- The two-frequency average at 1 kHz and 2 kHz must be less than 75 decibels in both ears;
- The two-frequency average at 1 kHz and 2 kHz must have an interaural difference of less than 15 decibels;
- The interaural word recognition or speech discrimination score must have a difference of less than 20%

3. CROS Hearing Aid Systems

- **All Members**

To be eligible for coverage, all the following criteria must be met:

- Unilateral profound hearing loss; defined as 81dB or greater
- Normal to mild hearing loss in the better ear.

AND any of the following:

- Conductive hearing loss is unresponsive to medical or surgical interventions.
- Sensorineural hearing loss.
- Mixed hearing loss.

4. BICROS Hearing Aid Systems

- **All Members**

All the following criteria must be met:

- Unilateral profound hearing loss, defined as 81dB or greater
- Moderate hearing loss in the better ear.

AND any of the following:

- Conductive hearing loss is unresponsive to medical or surgical interventions. Sensorineural hearing loss.
- Mixed hearing loss.

Contact and Website Information

If you have questions, please contact Maggie Irby, Durable Medical Equipment Program Officer, at (406) 444-4518 or email Margaret.Irby@mt.gov.

The Mountain Pacific website now refers to their drug PA team (1-800-395-7961). See [Pharmacy Resources - Mountain Pacific](#)

For claims questions or additional information, contact Montana Provider Relations at (800) 624-3958 or (406) 442-1837 or email [Montana Provider Relations Helpdesk](#).

Visit the [Montana Healthcare Programs Provider Information website](#) to access your provider type page. Choose Resources by Provider Type in the left-hand menu.

Visit the [Contact Us page](#) on the Provider Information website for additional DPHHS contact numbers.