



# **Hearing Aid (Adjuncts)**

Home 5 Adjuncts 5 Hearing Aid (Adjuncts)

Coverage under the adjunct plan is individual-only. You may elect to purchase family coverage. Please call the Fund office for more information and the current rate. Family premiums must be paid on a quarterly basis. Enrollment in NYC-CBP basic health insurance, family coverage, is requisite. The Welfare Fund Family Enrollment Supplement form is on the Forms page.

If you need help with your hearing aid during the pandemic office closures, please call TruHearing at 877-653-8867, not your audiologist.

## How does the TruHearing plan work?

Hearing aid benefits are available to you and your covered dependents every 36 months. The Fund has chosen TruHearing to be the exclusive hearing aid network to provide members and their eligible dependents with a program for hearing tests and hearing aids.

You can purchase a hearing aid for a discounted price from TruHearing or use a nonparticipating provider and receive direct reimbursement of up to \$500 every 36 months. For out-of-network claims first contact TruHearing at 1-877-653-8967 prior to your appointment to be eligible for a maximum \$500 direct reimbursement.

To obtain service from TruHearing, members begin by calling the toll-free number (877) 653-8967 to schedule an appointment with a provider. You will be given the names of three participating TruHearing practitioners in your area and the nearest TruHearing

store. You may continue to request additional names of participating practitioners until you are satisfied with your choices. If you have a specific hearing aid manufacturer in mind, you may also request the names of nearby TruHearing participating practitioners who carry hearing aids from that particular manufacturer. TruHearing offers hearing aids from 11 manufacturers.

Members and Dependents are eligible for:

- Free annual hearing screening
- In-plan Hearing Aid Benefit \$1,500 per ear (\$3,000 total) every 36 months.
- Guaranteed price discounts on all hearing aids
- Unlimited visits during the first year of purchase (adjustments, cleaning programming)
- Loaner hearing aids available when your hearing aids are being serviced
- 3-Year Warranty: repair and one-time replacement due to loss or damage (deductible applies)
- 3-Year supply of batteries
- 12-Month interest free financing available
- Out-of-network maximum direct reimbursement of \$500 every 36 months in lieu of in network purchase. For out-of-network claims first contact TruHearing at 1-877-653-8867 prior to your appointment to be eligible for a maximum \$500 direct reimbursement.

To learn more or to make an appointment with a TruHearing provider, you must contact TruHearing directly at 1-877-653-8967 and let them know that you are a member of the PSC-CUNY Welfare Fund, so they can determine your eligibility.

### **Hearing Aid Out-of-Network Reimbursement**

For out-of-network claims, you must first contact TruHeairng at 1-877-653-8967 prior to your appointment to be eligible for a maximum \$250 per ear (\$500 maximum) direct reimbursement.

Please send your hearing aid receipt or proof of payment to:

TruHearing Inc.

Attn: Billing

12936 Frontrunner Blvd #100

Draper, UT 84020

Or you may email your claim to:

Oonclaims@truhearing.com

#### Fax # 561-651-2020

Please attach a letter to your claim stating your name, address, and phone #. Indicate that you are a PSC CUNY Welfare Fund member.

For information on claims processing, please call Shirley Bravo at 800-528-3277 Ext. 106.

#### Save as a pdf

This page

**Entire Summary Plan Description** 

Actives Adjuncts
Eligibility Eligibility

Fund Benefits Fund Benefits

Optional Benefits Thinking of Retiring?

Thinking of Retiring? COBRA

If You Take a Leave of Absence HIPAA

If You Die in Service

CORKA Review and Appeals Other Important Info **HIPAA** Review and Appeals Other Important Info Retirees **Forms** Eligibility **FAQs Fund Benefits** Contacts **Optional Benefits SPDs** When You Retire Survivor Benefits **About the Fund** COBRA HIPAA Review and Appeals Other Important Info