

MODULE 7

BILLING, CLAIMS & REVENUE SYSTEMS

HEARING AID ACOUSTICIANS



3 Ethics CEUs • ON-DEMAND • SELF-PACED • OPEN TO MEMBERS & NON-MEMBERS

Getting the clinical work right is only half the job; getting paid fairly and legally for it is the other half.

This module walks hearing aid acousticians through the full billing-to-revenue chain: coding a claim correctly, understanding what happens to it after submission, and building a practice that stays financially sustainable over the long term.



Billing & Coding

COID, medical scheme tariffs and ICD-10 coding, common billing errors, documentation requirements, non-coding claim complications and claim reversals.



Claims, Reimbursement and Compliance

How medical schemes assess claims, why claims are rejected or underpaid, and the documentation and compliance principles that protect practice revenue.



Revenue Optimisation and Sustainability

What drives practice revenue, where revenue leakage occurs, and how to balance patient affordability with practice viability.



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By the end of this module, you will be able to:

- Code and bill for services falling within the HAA scope of practice, using the appropriate ICD-10 and tariff codes.
- Recognise and prevent the most common billing and coding errors before a claim is submitted.
- Follow a claim through the full revenue cycle and determine why claims are rejected, delayed or underpaid.
- Identify and close the most common sources of revenue leakage in a private practice.

Who it's for: Hearing aid acousticians who want to strengthen their billing and coding practices, reduce rejected or underpaid claims, improve revenue-cycle management and maintain ethical, compliant billing systems

Members – R800 • Non-members – R1 050

How it works: Watch the pre-recorded presentations, complete the practical activities and then pass a short, auto-marked online assessment (multiple-choice questions, with a pass mark of 80%) to earn 3 Ethics CEUs. The module is practical and aligned with HPCSA requirements throughout.

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