

New RSA-911 Codes for Sensory/Communicative Impairments

The following information is to provide clarification regarding new codes for impairments to be used for identifying individuals with sensory/communicative impairments. In particular, questions have been raised about the following codes:

- 03 - Deafness, Primary Communication Visual**
- 04 - Deafness, Primary Communication Auditory (Oral)**
- 05 - Hearing Loss, Primary Communication Visual**
- 06 - Hearing Loss, Primary Communication Auditory**
- 07 - Other Hearing Impairment (Tinnitus, Meniere's Disease, hyperacusis, etc.)**
- 08 - DeafBlindness**
- 09 - Communicative Impairments (expressive/receptive)**

03 – Deafness (primary communication – sign language)

Receptive Communication – primarily uses some form of sign language

Expressive Communication – primarily uses some form of sign language

Most rely on sign language interpreters as their first choice for communication access with hearing people.

Generally use TTY and TTY Relay Services.

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04 – Deafness (primary communication – visual)

Receptive Communication – primarily depends on speechreading and/or visual communication such as speech to text translation (captioning, etc.).

Expressive Communication – primarily uses spoken language.

Have been identified in the past as being oral deaf or late deafened adults and may also include individuals who use cochlear implants.

Generally use TTY and TTY Relay services, including Voice Carry-over (VCO) option.

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05 – Hearing Loss – (primary communication – auditory and visual)

Receptive Communication – primarily depends on auditory input aided by hearing aids and assistive listening technology and often relies on visual cues such as speech reading, body language, text translation or an English based sign language to supplement auditory input.

Expressive Communication – primarily uses spoken language.

Generally use amplified telephone with hearing aid T switch and may use TTY/VCO.

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06 – Hearing Loss – (primary communication – auditory)

Receptive Communication – primarily uses remaining residual hearing, generally with the use of hearing aids and can benefit from assistive listening technology use in some situations.

Expressive Communication – primarily uses spoken language.

Generally use telephone with appropriate amplification and/or T switch.

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07 – Other Hearing Impairments (Tinnitus, Meniere’s Disease, Hyperacusis, etc.)

While hearing loss is a major form of hearing impairment, there are other conditions of the hearing mechanism that bring with them functional limitations leading to disability such as the constant head noise of Tinnitus, the dizziness of Meniere’s Disease or the extreme sensitivity to sound of hyperacusis. Such conditions require thorough evaluation by trained physicians and a variety of interventions are available requiring consultation with trained hearing health specialists. The problems associated with the hearing loss and other functional limitations will need to be addressed with these conditions.

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08 – DeafBlindness

The term “individual” who is deafblind means any individual –

(A)(1) who has a central visual acuity of 20/200 or less in the better eye with corrective lenses, or a field defect such that the peripheral diameter of visual field subtends an angular distance no greater than 20 degrees, or a progressive visual loss having a prognosis leading to one or both of these conditions:

(2) who has a chronic hearing impairment so severe that most speech cannot be understood with optimum amplification, or a progressive hearing loss having a prognosis leading to this condition; and

(3) for whom the combination of impairments described in clauses (1) and (2) cause extreme difficulty in attaining independence in daily life activities, achieving psychological adjustment, or obtaining a vocation;

(B) who despite the inability to be measured accurately for hearing and vision loss due to cognitive or behavioral constraints, or both, can be determined through functional performance assessment to have severe hearing and visual disabilities that cause extreme difficulty in attaining independence in daily life activities, achieving psychosocial adjustment, or obtaining vocational objectives.

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09 – Communicative Impairments (expressive/receptive)

Speech and Language impairments for the most part come in combination with other impairments such as cerebral palsy, TBI, stroke, mental retardation, multiple sclerosis, etc., requiring significant intervention in addition to those provided relative to identified major disabling conditions. It is essential that communicative disabilities be recognized and attended to as either the major or secondary disability and appropriate interventions such as the use of augmentative and alternative communication (AAC) systems be implemented.

SERVED BY GENERAL COUNSELOR UNLESS HEARING LOSS IS ALSO PRESENT