

Instructions for Hearing Aid Compatibility Status Reporting Form (FCC Form 655)

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I. PURPOSE

The FCC's electronic Form 655 collects information on the status of compliance with the Federal Communications Commission's hearing aid compatibility requirements by digital commercial mobile radio service providers and manufacturers of devices used in the delivery of these services. Use of FCC Form 655 will help each filer ensure that its report ("Hearing Aid Compatibility Report") includes all of the required information in a consistent format and will facilitate the Commission's compilation of data from the reports. The electronic form will also provide the public with improved access to review the filed status reports.

II. WHO MUST FILE THIS FORM?

Both service providers and device manufacturers are required to use this electronic form to provide the Commission with hearing aid compatibility information. Specifically, these reporting requirements apply to "providers of digital CMRS in the United States to the extent that they offer real-time, two-way switched voice or data service that is interconnected with the public switched network and utilizes an in-network switching facility that enables the provider to reuse frequencies and accomplish seamless hand-offs of subscriber calls, and such service is provided over frequencies in the 800 MHz-950 MHz or 1.6-2.5 GHz bands using any air interface for which technical standards are stated in the standard document 'American National Standard for Methods of Measurement of Compatibility between Wireless Communications Devices and Hearing Aids,' American National Standards Institute (ANSI) C63.19-2007 (June 8, 2007)." 47 C.F.R. § 20.19(a)(1). These requirements also apply to "the manufacturers of the wireless handsets that are used in the delivery of the[se aforementioned] services." 47 C.F.R. § 20.19(a)(2).

III. INSTRUCTIONS FOR COMPLETING FCC FORM 655

Hearing Aid Compatibility Reports must be filed electronically on FCC Form 655 by July 15 for device manufacturers and January 15 for service providers each year. When the 15th of the month falls on a weekend or holiday, the report is due on the next business day.

A. Company Information

Provide the requested information for the reporting entity.

- Type of Company: Indicate whether the reporting entity is a manufacturer or service provider.

- *De Minimis* Exception:
 - Answer the first question: Did you offer more than two handsets over any air interface to service providers (if you are a device manufacturer) or to subscribers (if you are a service provider) during this reporting period?
 - Select Yes if the reporting entity offered more than two handsets over **ANY** air interface to service providers (if you are a device manufacturer) or to subscribers (if you are a service provider) during this reporting period.
 - Otherwise, select No and answer the second question: Did you offer any handsets to service providers (if you are a device manufacturer) or to subscribers (if you are a service provider) during this reporting period?
 - Select Yes if you offered at least one handset through these channels during the reporting period.
 - Select No if you are a manufacturer who did not offer any handsets to service providers, or if you are a service provider who did not offer any handsets to subscribers.
- Company Name: Provide the company name for the reporting entity. If the reporting entity also has a “Doing Business As (dba)” name, include both the company name and the dba name in the Company Name box. The format can be “Company Name dba Doing Business As Name.”
- Company Address: Provide the company address for the reporting entity. If you are a non-US company, please use your US business office address for filing purpose. If you do not have a US business office address, please use your US agent's address
- Company Contact Information: Provide the name, phone number, FAX number, and e-mail address of the contacting person for the reporting company.
- Filing Agent: If the report is being filed by an agent on behalf of a manufacturer or service provider, select “Yes” and provide name, address and contact information for the agent as well.

B. Handset Model Information

You must complete a separate Handset Model Information screen for each handset model you offered that counts as a unique model for hearing aid compatibility purposes. If you marketed the same model under more than one name, all of those names must be reported on a single screen. For purposes of compliance with the hearing aid compatibility deployment requirements, two handsets marketed as separate models must be counted as a single model if they do not differ in form, features, or capabilities (for example, if they differ only in being marketed through different service providers or in cosmetic respects such as color). A difference in hearing aid compatibility rating is considered a difference in form, features, or capabilities.

For example, manufacturer X markets two models, the TalkMaster X1 and the Talk2Me, that are indistinguishable in form, features, and capabilities. It also produces another model, the TalkMaster X2, that offers different features from the TalkMaster X1. All of these models are certified under the same FCC ID number. The manufacturer must report the TalkMaster X1 and the Talk2Me on the same screen, and the TalkMaster X2 on a different screen.

HANDSET MAKER: This is the manufacturer of the handset. Select the Handset Maker from the dropdown list in the Handset Maker box. If the Handset Maker is not on the list, select "Other" at the bottom of the list and enter the name in the box on the right of the Handset Maker box.

HANDSET MODEL: Select “No” if you marketed the Handset Model under only one name,

“Yes” if you marketed the Handset Model under multiple names.

- If “Yes” is selected
 - Provide one name per box.
 - Provide the associated FCC ID in the FCC ID box (one per box if there are multiple FCC IDs associated with the handset model name).
 - Click “Add Another Handset Model Name” to add another marketing name.
 - Repeat until all marketing names have been entered.
- If “No” is selected
 - Provide the Handset Model name either by selecting a name from the dropdown list in the Handset Model Name box or by selecting “Other” from the dropdown list and entering a new Handset Model name in the box to the right of the Handset Model Name box.
 - Provide the associated FCC ID for the Handset Model in the FCC ID box (one per box if there are multiple FCC IDs associated with the handset model name). Some handset models may have multiple FCC IDs that have to be entered in separate FCC ID boxes.
- If you initially select “Yes” and later need to remove model names, you can do that by choosing the edit icon for the handset on the Report Summary screen (appears after finishing the Handset Information section) and selecting the delete icon for the unneeded model name(s) on the Handset Model Name Summary screen.
- If you initially select “No” and later need to add model names, you can do that by choosing the edit icon for the handset on the Report Summary screen (appears after finishing the Handset Information section) and selecting the “Add Another Handset Model Name” button on the Handset Model Name Summary screen.

AIR INTERFACES / FREQUENCY BANDS: Select the air interface technology(ies) (*e.g.*, CDMA, GSM, WCDMA, iDEN) and corresponding frequency band(s) used by this handset for voice communications (do not include the Wi-Fi air interface). If a handset operates over multiple air interfaces or frequency bands usable to provide voice communications, select all of those air interfaces and frequency bands.

WI-FI INTERFACE: Select “Yes” if this handset is capable of Wi-Fi voice operation. Otherwise select “No.”

DATES: Enter “Starting Available Date” and “Ending Available Date” in the relevant boxes in the “MM/YY” format. For example, April 2008 should be entered as 04/08 only, not 04/2008 or 4/08. If this handset is still being offered as of the end of the reporting period, enter the ending month of the reporting period as the ending available date.

M-RATING:

- For Device Manufacturer
 - Select “No” if the handset model has not received an M-Rating certification.
 - Select “Yes” if the handset model has received an M-Rating certification.
 - Select the appropriate rating from the dropdown list in the M-Rating box.
 - Provide the M-Rating Certification Date in the format MM/DD/YY.
 - Click the “2006” or “2007” button to indicate which version of the ANSI C63.19 standard was used during the certification process.
- For Service Provider
 - Select the appropriate rating from the dropdown list in the M-Rating box. If the handset has not received an M-Rating certification, select “N/A.”

T-RATING:

- For Device Manufacturer
 - Select “No” if the handset model has not received a T-Rating certification.
 - Select “Yes” if the handset model has received a T-Rating certification.
 - Select the appropriate rating from the dropdown list in the T-Rating box.
 - Provide the T-Rating Certification Date in the format MM/DD/YY.
 - Click the “2006” or “2007” button to indicate which version of the ANSI C63.19 standard was used during the certification process.
- For Service Provider
 - Select the appropriate rating from the dropdown list in the T-Rating box. If the handset has not received a T-Rating certification, select “N/A.”

FUNCTIONALITY LEVEL: *Applies to service providers only.* Each service provider is required to offer customers a range of hearing aid-compatible models with differing levels of functionality (e.g., operating capabilities, features offered, prices). Each service provider may determine the criteria for determining these differing levels of functionality. This entry should indicate which provider-defined level of functionality each individual handset model falls into. If this handset is not rated either M3 or M4, you may enter N/A. Filers who are reporting only one hearing aid-compatible handset may also enter N/A.

C. Consumer Outreach

PRODUCT LABELING:

Question 1: Do all hearing aid-compatible handsets include labeling? Under Section 20.19(f) of the Commission’s rules, manufacturers and service providers must ensure that the rating of hearing aid-compatible handsets is clearly displayed on the packaging material of the handset. In the event that a hearing aid-compatible handset achieves different radio frequency (RF) interference or inductive coupling ratings over different air interfaces or different frequency bands, the RF interference reduction and inductive coupling capability ratings displayed shall be the lowest rating assigned to that handset for any air interface or frequency band. An explanation of the ANSI C63.19 rating system must also be included in the device’s user’s manual or as an insert in the packaging material for the handset.

Answer Yes if all of your handsets comply with this requirement. If not all of your handsets comply with this requirement, answer No and explain.

Question 2: Do all hearing aid-compatible handsets with the Wi-Fi air interface have clear and effective disclosure that the handset has not been rated for hearing aid compatibility with respect to its Wi-Fi voice operation? Each manufacturer and service provider must ensure that, wherever it provides hearing aid compatibility ratings for a handset model that incorporates a Wi-Fi air interface, it discloses to consumers, by clear and effective means, that the handset has not been rated for hearing aid compatibility with respect to Wi-Fi voice operation.

Answer Yes if all of your handsets that are equipped for Wi-Fi voice operation include this disclosure. If not all handsets include this disclosure, answer No and explain. If you do not offer any handsets equipped for Wi-Fi voice operation, answer Yes.

PUBLIC WEBSITE: Under Section 20.19(h) of the Commission’s rules, service providers and manufacturers that are subject to the hearing aid compatibility requirements of that section and

which operate a publicly-accessible website must include on that website a list of all hearing aid-compatible models currently offered, the ratings of those models, and an explanation of the rating system. Service provider websites must also include the levels of functionality that the service provider has defined, the level that each hearing aid-compatible model falls under, and an explanation of how the functionality of the handsets varies at the different levels.

Answer Yes if you maintain such a website, and provide the website address. One website address is sufficient if the information is clearly accessible from that page, even if there are multiple sub-pages. If you do not maintain a website with this information, answer No and explain (*e.g.*, the reporting entity does not maintain any public website).

CONSUMER OUTREACH: Provide information on the reporting entity's outreach efforts with regard to hearing aid compatibility within the reporting period.

METHODOLOGY FOR FUNCTIONALITY LEVELS: *Applies to service providers only.* Provide an explanation of the methodology used to define functionality levels for handsets offered to consumers, pursuant to Section 20.19(d)(4)(ii) of the Commission's rules. Each service provider is required to offer customers a range of hearing aid-compatible models with differing levels of functionality (*e.g.*, operating capabilities, features offered, prices). Each service provider may determine the criteria for determining these differing levels of functionality. Filers who are not reporting more than one hearing aid-compatible handset model may enter N/A.

HEARING AID TESTING: *Applies to manufacturers only.* Enter the number of handset models that were tested for hearing aid compatibility during the reporting period. You need not include models that have not received certification from the FCC.

REPORT REMARKS: Add any other information you may choose to provide.

IV. FCC NOTICE REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995

We have estimated that each response to this collection of information will take, on average, two and a half (2.5) hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain the required data, enter the data in the Form 655 on-line template, and submit it electronically. If you have any comments on this estimate, or how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PER, Washington, D.C. 20554, Paperwork Reduction Project (3060-0999). We also will accept your comments via the Internet if you send them to PRA@fcc.gov. **DO NOT SEND COMPLETED FCC FORM 655 TO THIS ADDRESS.**

Remember – You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid Office of Management and Budget (OMB) control number. This collection has been assigned an OMB control number of 3060-0999.

Reporting entities failing to file FCC Form 655 in a timely fashion may be subject to penalties under the Communications Act, including sections 502 and 503(b).

THE FOREGOING NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C.

SECTION 3507.