

Hearing Services Fee Schedule
Effective March 2, 2009

| Code | Mod | Description | 00-20 Max Fee | 00-20 PC Fee | 21+ Max Fee | 21+ PC Fee | Units | Spec |
|-------|-----|---|------------------|-----------------|----------------|---------------|-------|------|
| 69210 | | REMOVAL IMPACTED CERUMEN (SEPARATE PROCEDURE), ONE OR BOTH EARS | 24.27 | | 23.34 | | 1 | |
| 92541 | | SPONTANEOUS NYSTAGMUS TEST, INCLUDING GAZE AND FIXATION NYSTAGMUS, WITH RECORDING | 31.71 | 10.77 | 30.49 | 10.36 | 1 | |
| 92542 | | POSITIONAL NYSTAGMUS TEST, MINIMUM OF 4 POSITIONS, WITH RECORDING | 33.08 | 8.81 | 31.81 | 8.47 | 1 | |
| 92543 | | CALORIC VESTIBULAR TEST, EACH IRRIGATION (BINAURAL, BITHERMAL STIMULATION CONSTITUTES FOUR TESTS), WITH RECORDING | 15.27 | 2.74 | 14.68 | 2.63 | 1 | |
| 92544 | | OPTOKINETIC NYSTAGMUS TEST, BIDIRECTIONAL, FOVEAL OR PERIPHERAL STIMULATION, WITH RECORDING | 26.62 | 6.85 | 25.60 | 6.59 | 1 | |
| 92545 | | OSCILLATING TRACKING TEST, WITH RECORDING | 25.45 | 6.07 | 24.47 | 5.84 | 1 | |
| 92546 | | SINUSOIDAL VERTICAL AXIS ROTATIONAL TESTING | 42.67 | 7.63 | 41.03 | 7.34 | 1 | |
| 92547 | | USE OF VERTICAL ELECTRODES (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | 3.33 | | 3.20 | | 1 | |
| 92552 | | PURE TONE AUDIOMETRY (THRESHOLD); AIR ONLY | 12.33 | | 11.86 | | 1 | |
| 92553 | | PURE TONE AUDIOMETRY (THRESHOLD); AIR AND BONE | 15.86 | | 15.25 | | 1 | |
| 92555 | | SPEECH AUDIOMETRY THRESHOLD; | 8.61 | | 8.28 | | 1 | |
| 92556 | | SPEECH AUDIOMETRY THRESHOLD; WITH SPEECH RECOGNITION | 11.19 | | 10.76 | | 1 | |
| 92557 | | COMPREHENSIVE AUDIOMETRY THRESHOLD EVALUATION AND SPEECH RECOGNITION (92553 AND 92556 COMBINED) | 27.10 | | 26.06 | | 1 | |
| 92567 | | TYMPANOMETRY (IMPEDANCE TESTING) | 10.80 | | 10.38 | | 1 | |
| 92568 | | ACOUSTIC REFLEX TESTING; THRESHOLD | 8.42 | | 8.10 | | 1 | |
| 92569 | | ACOUSTIC REFLEX TESTING; DECAY | 7.66 | | 7.37 | | 1 | |
| 92571 | | FILTERED SPEECH TEST | 9.00 | | 8.65 | | 1 | |
| 92572 | | STAGGERED SPONDAIC WORD TEST | 11.55 | | 11.11 | | 1 | |
| 92579 | | VISUAL REINFORCEMENT AUDIOMETRY (VRA) | 21.92 | | 21.08 | | 1 | |

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| 92582 | | CONDITIONING PLAY AUDIOMETRY | 23.88 | | 22.96 | | 1 | |
| 92585 | | AUDITORY EVOKED POTENTIALS FOR EVOKED RESPONSE AUDIOMETRY AND/OR TESTING OF THE CENTRAL NERVOUS SYSTEM; COMPREHENSIVE | 53.83 | 13.51 | 51.76 | 12.99 | 2 | |
| 92586 | | AUDITORY EVOKED POTENTIALS FOR EVOKED RESPONSE AUDIOMETRY AND/OR TESTING OF CENTRAL NERVOUS SYSTEM; LIMITED | 31.71 | | 30.49 | | 2 | |
| 92587 | | EVOKED OTOACOUSTIC EMISSIONS; LIMITED (SINGLE STIMULUS LEVEL, EITHER TRANSIENT OR DISTORTION PRODUCTS) | 28.28 | 3.93 | 27.19 | 3.78 | 2 | |
| 92588 | | EVOKED OTOACOUSTIC EMISSIONS; COMPREHENSIVE OR DIAGNOSTIC EVALUATION (COMPARISON OF TRANSIENT AND/OR DISTORTION PRODUCT OTOACOUSTIC EMISSIONS AT MULTIPLE LEVELS AND FREQUENCIES) | 31.52 | 9.59 | 30.31 | 9.22 | 2 | |
| 92601 | | DIAGNOSTIC ANALYSIS OF COCHLEAR IMPLANT, PATIENT YOUNGER THAN 7 YEARS OF AGE; WITH PROGRAMMING | 97.02 | | 93.29 | | 1 | |
| 92602 | | DIAGNOSTIC ANALYSIS OF COCHLEAR IMPLANT, PATIENT YOUNGER THAN 7 YEARS OF AGE; SUBSEQUENT REPROGRAMMING | 66.97 | | 64.39 | | 1 | |
| 92603 | | DIAGNOSTIC ANALYSIS OF COCHLEAR IMPLANT, AGE 7 YEARS OR OLDER; WITH PROGRAMMING | 69.69 | | 67.01 | | 1 | |
| 92604 | | DIAGNOSTIC ANALYSIS OF COCHLEAR IMPLANT, AGE 7 YEARS OR OLDER; SUBSEQUENT REPROGRAMMING | 41.50 | | 39.90 | | 1 | |
| 92620 | | EVALUATION OF CENTRAL AUDITORY FUNCTION, WITH REPORT; INITIAL 60 MINUTES | 39.07 | | 37.57 | | 1 | |
| 92621 | | EVALUATION OF CENTRAL AUDITORY FUNCTION, WITH REPORT; EACH ADDITIONAL 15 MINUTES | 9.82 | | 9.44 | | 1 | |
| 92626 | | EVALUATION OF AUDITORY REHABILITATION STATUS; FIRST HOUR | 40.64 | | 39.08 | | 1 | |
| 92627 | | EVALUATION OF AUDITORY REHABILITATION STATUS; EACH ADDITIONAL 15 MINUTES (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | 9.42 | | 9.06 | | 4 | |
| 92630 | | AUDITORY REHABILITATION; PRELINGUAL HEARING LOSS | 71.61 | | 68.86 | | 1 | |
| 92633 | | AUDITORY REHABILITATION; POSTLINGUAL HEARING LOSS | 71.61 | | 68.86 | | 1 | |
| 92640 | | DIAGNOSTIC ANALYSIS WITH PROGRAMMING OF AUDITORY BRAINSTEM IMPLANT, PER HOUR | 26.50 | | 25.48 | | 1 | |
| 92700 | | UNLISTED OTORHINOLARYNGOLOGICAL SERVICE OR PROCEDURE | | | | | 1 | R |

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|-------|-----|--|------------------|-----------------|----------------|---------------|-------|------|
| 99070 | | SUPPLIES AND MATERIALS (EXCEPT SPECTACLES), PROVIDED BY THE PHYSICIAN OVER AND ABOVE THOSE USUALLY INCLUDED WITH THE OFFICE VISIT OR ORHTER SERVICES RENDERED (LIST DRUGS, TRAYS, SUPPLIES, OR MATERIALS PROVIDED) | | | | | | R |
| L7510 | | REPAIR OF PROSTHETIC DEVICE, REPAIR OR REPLACE MINOR PARTS | | | | | | PA |
| L8614 | | COCHLEAR DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS | | | | | 1 | |
| L8615 | | HEADSET / HEADPIECE FOR USE WITH COCHLER IMPLANT DEVICE, REPLACEMENT | | | | | 1 | PA |
| L8616 | | MICROPHONE FOR USE WITH COCHLER IMPLANT DEVICE, REPLACEMENT | | | 288.00 | | 1 | PA |
| L8617 | | TRANSMITTER COIL FOR USE WITH COCHLER IMPLANT DEVICE, REPLACEMENT | | | | | 1 | PA |
| L8618 | | TRANSMITTER CABLE FOR USE WITH COCHLER IMPLANT DEVICE, REPLACEMENT | | | | | 1 | PA |
| L8619 | | COCHLEAR IMPLANT EXTERNAL SPEECH PROCESSOR, REPLACEMENT | | | | | 1 | PA |
| L8621 | | ZINC AIR BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT, EACH | | | | | 2 | PA |
| L8622 | | ALKALINE BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE, ANY SIZE, REPLACEMENT, EACH | | | 7.50 | | 2 | PA |
| L8623 | | LITHIUM ION BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE SPEECH PROCESSOR, OTHER THAN EAR LEVEL, REPLACEMENT, EACH | | | | | 1 | PA |
| L8624 | | LITHIUM ION BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE SPEECH PROCESSOR, EAR LEVEL, REPLACEMENT, EACH | | | | | 1 | PA |
| L8690 | | AUDITORY OSSEOINTEGRATED DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS | | | | | 1 | PA |
| L8691 | | AUDITORY OSSEOINTEGRATED DEVICE, EXTERNAL SOUND PROCESSOR, REPLACEMENT | | | | | 1 | PA |
| L8699 | | PROSTHETIC IMPLANT, NOT OTHERWISE SPECIFIED | | | | | 1 | PA |
| V5010 | | ASSESSMENT FOR HEARING AID | | | 45.00 | | 1 | |
| V5014 | | REPAIR/MODIFICATION OF A HEARING AID (USE FOR FACTORY REPAIR) | | | 114.00 | | 2 | |
| V5014 | TS | REPAIR/MODIFICATION OF A HEARING AID (USE FOR OFFICE REPAIR) | | | 15.00 | | 2 | |
| V5050 | | HEARING AID; MONAURAL, IN THE EAR (USE FOR CATEGORY 2 HEARING AIDS) | | | 228.00 | | 2 | |
| V5050 | SC | HEARING AID; (USE FOR CATEGORY 1 HEARING AIDS) | | | 176.00 | | 2 | |
| V5090 | | DISPENSING FEE, UNSPECIFIED HEARING AID | | | 115.00 | | 2 | |
| V5200 | | DISPENSING FEE, CROS | | | 25.00 | | 1 | |

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|-------|-----|---|------------------|-----------------|----------------|---------------|-------|------|
| V5240 | | DISPENSING FEE, BICROS | | | 50.00 | | 1 | |
| V5264 | | EARMOLD/INSERT, NOT DISPOSABLE, ANY TYPE. | | | 18.00 | | 2 | |
| V5299 | | HEARING SERVICE, MISCELLANEOUS | | | | | | PA |