**ACCOUNT NUMBER COST CENTER TITLE**

**7580 AUDIOLOGY**

The Audiology relative value units (RVUs) were developed with the aid of the industry task force under the auspices of and approved by the Health Services Cost Review Commission. The descriptions in this section of Appendix D were obtained from the 2024 edition of the Current Procedural Terminology (CPT) manual, and the 2024 edition of the Healthcare Common Procedure Coding System (HCPCS). In assigning RVUs the group used the 2023 Medicare Physician Fee Schedule (MPFS) released December 15, 2022, and then assigned using the following protocol. For the new 2024 CPT codes we used the 2024 Medicare Physician Fee Schedule (MPFS) released December 13, 2023.

RVU Assignment Protocol

RVUs were proposed based on the Medicare Physician Fee Schedule (MPFS) Non-Facility (NON-FAC) Practice Expense (PE) RVUs. When there is a Technical Component (TC) modifier line item, that value was used. To maintain whole numbers in Appendix D, RVUs were multiplied by ten and rounded to the nearest whole number, where values less than X.5 were rounded down and all other values were rounded up. For example, basic vestibular evaluation CPT of 92540 has a NON-FAC PE RVU of 1.69. 1.69 \* 10 = 16.9. 16.9 rounded = 17. 17 is the proposed RVU.

1) For RVUs utilizing the methodology described above, the rationale in the table of RVUs is noted as MPFS.

2) For RVUs where the calculated RVU appeared too high (because it included significant equipment or other overhead and non-staff costs associated with it) or too low (because it did not properly reflect the facility resources associated with the service), the proposed RVU was modified as noted in the table of RVUs.

a. 92537 Caloric vestibular test, bithermal did not seem reasonable in comparison to other codes. It was determined to mirror CPT 92540 basic vestibular evaluation which is 17 RVUs.

b. 92538 Caloric vestibular test, monothermal did not seem reasonable in comparison to other codes. It was determined that based on the CPT description and resources involved that it would be equal to half of CPT 92537 Caloric vestibular test, bithermal rounded down which is 17 divided by 2= 8.5 rounded down to 8.

c. 92550 Tympanometry and reflex threshold measurements did not seem reasonable in comparison to other codes. It was determined that based on the CPT description and resources involved that it is a combination of CPT 92567 Tympanometry (3 RVUs) and CPT 92568 Acoustic reflex testing (2 RVUs) = 5 RVUs.

d. 92557 Comprehensive audiometry threshold did not seem reasonable in comparison to other codes. It was determined that based on the CPT description and resources involved that it is a combination of CPT 92553 Pure tone audiometry (13 RVUs) and CPT 92556 Speech audiometry threshold (13 RVUs) = 26 RVUs.

e. 92570 Acoustic immittance testing did not seem reasonable in comparison to other codes. It was determined that based on the CPT description and resources involved that it is a combination of CPT 92567 Tympanometry (3 RVUs) and CPT 92568 Acoustic reflex testing (2 RVUs) plus 2 RVUs for decay testing= 7 RVUs.

f. 92579 Visual reinforcement audiometry did not seem reasonable in comparison to other codes. It was determined to mirror CPT 92552 Pure tone audiometry which is 11 RVUs.

g. 92588 Distortion product evoked otoacoustic emissions, comprehensive did not seem reasonable in comparison to other codes. It was determined that based on the CPT description and resources involved that it should be set at double CPT 92587 Distortion product evoked otoacoustic emissions, limited 3\*2 = 6 RVUs.

3) For RVUs without a NON-FAC PE RVU value in the MPFS, the underlying rationale for the RVU has been noted in the table of RVUs.

a. 92630 Auditory rehabilitation, prelingual did not seem reasonable in comparison to other codes. It was determined to mirror CPT 92626 Evaluation of auditory function which is 12 RVUs.

b. 92633 Auditory rehabilitation, postlingual did not seem reasonable in comparison to other codes. It was determined to mirror CPT 92626 Evaluation of auditory function which is 12 RVUs.

4) Unlisted services or services rarely performed have been assigned as By Report (BR). Similar logic should be utilized to assign RVUs to any services that are not found or BR.

•If there are no MPFS RVUs for a service, mirror an existing code that has similar facility resources or mirror an existing code that has similar facility resources with adjustments if needed (for example, if a BR service is slightly less resource intensive than an existing service, the RVU can be lower). The BR methodology for each code must be documented and readily available in the event of an audit.

Other considerations:

1. Routine supply cost is included in the HSCRC rate per RVU.
2. Non-routine supply costs and disposable medical supplies are billable as M/S supplies.
3. Durable Medical Equipment (DME) for inpatient services is billable as M/S supplies. However, DME provided to outpatients are not regulated by HSCRC, and all applicable payor DME billing requirements would apply.
4. The CPT codes reviewed account for most services provided in audiology. There are some CPT codes not listed and new codes may be added in the future. These codes should be considered as “by report” by the individual institution and use the RVU assignment protocols listed above.
5. CPT codes are in a process of constant revision and as such providers should review their institution’s use of CPT codes and stay current with proper billing procedures.
6. Time increments used in this section of Appendix D are for direct patient time. Direct patient time spent evaluating and treating the patient is billable. Time spent on set-up, documentation of service, conference, and other non-patient contact is not reportable or billable.
7. It is expected and essential that all appropriate clinical documentation be prepared and maintained to support services provided.

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| **CODE** | **DESCRIPTION** | **RVU** | **CATEGORY** | **RATIONALE** |
| 92511 | Nasopharyngoscopy with endoscope (separate procedure) | 29 | Non-Time Based | MPFS |
| 92512 | Nasal function studies (e.g., rhinomanometry) | 0 | Non-Time Based | Zero RVUs. Not SLP/AUD. |
| 92516 | Facial nerve function studies (egg, electroneuronography) | 17 | Non-Time Based | MPFS |
| 92517 | Vestibular evoked myogenic potential (vemp) testing, with interpretation and report; cervical (cvemp) | 15 | Non-Time Based | MPFS |
| 92518 | Vestibular evoked myogenic potential (vemp) testing, with interpretation and report; ocular (ovemp) | 15 | Non-Time Based | MPFS |
| 92519 | Vestibular evoked myogenic potential (vemp) testing, with interpretation and report; cervical (cvemp) and ocular (ovemp) | 15 | Non-Time Based | MPFS |
| 92537 | Caloric vestibular test with recording, bilateral; bithermal (i.e., one warm and one cool irrigation in each ear for a total of four irrigations) | 17 | Non-Time Based | Mirror CPT 92540 Based on resources |
| 92538 | Caloric vestibular test with recording, bilateral; monothermal (i.e., one irrigation in each ear for a total of two irrigations) | 8 | Non-Time Based | Set at half of CPT 92537 (rounded down) Based on CPT Description and resources |

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| **CODE** | **DESCRIPTION** | **RVU** | **CATEGORY** | **RATIONALE** |
| 92540 | Basic vestibular evaluation, includes spontaneous nystagmus test with eccentric gaze fixation nystagmus, with recording, positional nystagmus test, minimum of 4 positions, with recording, optokinetic nystagmus test, bidirectional foveal and peripheral stimulation, with recording, and oscillating tracking test, with recording | 17 | Non-Time Based | MPFS |
| 92541 | Spontaneous nystagmus test, including gaze and fixation nystagmus, with recording | 3 | Non-Time Based | MPFS |
| 92542 | Positional nystagmus test, minimum of 4 positions, with recording | 4 | Non-Time Based | MPFS |
| 92544 | Optokinetic nystagmus test, bidirectional, foveal or peripheral stimulation, with recording | 2 | Non-Time Based | MPFS |
| 92545 | Oscillating tracking test, with recording | 2 | Non-Time Based | MPFS |
| 92546 | Sinusoidal vertical axis rotational testing | 35 | Non-Time Based | MPFS |
| 92547 | Use of vertical electrodes (list separately in addition to code for primary procedure) | 3 | Non-Time Based | MPFS |
| 92548 | Computerized dynamic posturography sensory organization test (cdp-sot), 6 conditions (i.e., eyes open, eyes closed, visual sway, platform sway, eyes closed platform sway, platform and visual sway), including interpretation and report | 7 | Non-Time Based | MPFS |
| 92549 | Computerized dynamic posturography sensory organization test (cdp-sot), 6 conditions (i.e., eyes open, eyes closed, visual sway, platform sway, eyes closed platform sway, platform and visual sway), including interpretation and report; with motor control test (mct) and adaptation test (adt) | 6 | Non-Time Based | MPFS |

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| **CODE** | **DESCRIPTION** | **RVU** | **CATEGORY** | **RATIONALE** |
| 92550 | Tympanometry and reflex threshold measurements | 5 | Non-Time Based | Combination of CPT 92567 (3) + 92568 (2) Based on CPT Description and resources |
| 92551 | Screening test, pure tone, air only | 0 | Non-Time Based | Zero RVUs. Screening/No Charge/Part of Clinic Visit performed during visit |
| 92552 | Pure tone audiometry (threshold); air only | 11 | Non-Time Based | MPFS |
| 92553 | Pure tone audiometry (threshold); air and bone | 13 | Non-Time Based | MPFS |
| 92555 | Speech audiometry threshold | 8 | Non-Time Based | MPFS |
| 92556 | Speech audiometry threshold; with speech recognition | 13 | Non-Time Based | MPFS |
| 92557 | Comprehensive audiometry threshold evaluation and speech recognition (92553 and 92556 combined) | 26 | Non-Time Based | Combination of CPT 92553 (13) + CPT 92556 (13) Based on CPT Description and resources |
| 92558 | Evoked otoacoustic emissions, screening (qualitative measurement of distortion product or transient evoked otoacoustic emissions), automated analysis | 1 | Non-Time Based | Typically used for newborn screenings. See DEL rate center when appropriate. |
| 92562 | Loudness balance test, alternate binaural or monaural | 14 | Non-Time Based | MPFS |
| 92563 | Tone decay test | 10 | Non-Time Based | MPFS |
| 92565 | Stenger test, pure tone | 6 | Non-Time Based | MPFS |
| 92567 | Tympanometry (impedance testing) | 3 | Non-Time Based | MPFS |
| 92568 | Acoustic reflex testing, threshold | 2 | Non-Time Based | MPFS |
| 92570 | Acoustic immittance testing, includes tympanometry (impedance testing), acoustic reflex threshold testing, and acoustic reflex decay testing | 7 | Non-Time Based | Combination of CPT 92567 (3) + 92568 (2) + 2 RVUs for decay testing |

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| **CODE** | **DESCRIPTION** | **RVU** | **CATEGORY** | **RATIONALE** |
| 92571 | Filtered speech test | 9 | Non-Time Based | MPFS |
| 92572 | Staggered spondaic word test | 14 | Non-Time Based | MPFS |
| 92575 | Sensorineural acuity level test | 6 | Non-Time Based | MPFS |
| 92576 | Synthetic sentence identification test | 12 | Non-Time Based | MPFS |
| 92577 | Stenger test, speech | 6 | Non-Time Based | MPFS |
| 92579 | Visual reinforcement audiometry (vra) | 11 | Non-Time Based | Mirror CPT 92552 Based on resources |
| 92582 | Conditioning play audiometry | 24 | Non-Time Based | MPFS |
| 92583 | Select picture audiometry | 16 | Non-Time Based | MPFS |
| 92584 | Electrocochleography | 23 | Non-Time Based | MPFS |
| 92587 | Distortion product evoked otoacoustic emissions; limited evaluation (to confirm the presence or absence of hearing disorder, 3-6 frequencies) or transient evoked otoacoustic emissions, with interpretation and report | 3 | Non-Time Based | MPFS |
| 92588 | Distortion product evoked otoacoustic emissions; comprehensive diagnostic evaluation (quantitative analysis of outer hair cell function by cochlear mapping, minimum of 12 frequencies), with interpretation and report | 6 | Non-Time Based | Set at double CPT 92587 Based on resources |
| 92590 | Hearing aid examination and selection; monaural | 0 | Non-Time Based | Zero RVUs, Typically Non-Hospital |
| 92591 | Hearing aid examination and selection; binaural | 0 | Non-Time Based | Zero RVUs, Typically Non-Hospital |
| 92592 | Hearing aid check; monaural | 0 | Non-Time Based | Zero RVUs, Typically Non-Hospital |
| **CODE** | **DESCRIPTION** | **RVU** | **CATEGORY** | **RATIONALE** |
| 92593 | Hearing aid check; binaural | 0 | Non-Time Based | Zero RVUs, Typically Non-Hospital |
| 92594 | Electroacoustic evaluation for hearing aid; monaural | 0 | Non-Time Based | Zero RVUs, Typically Non-Hospital |
| 92595 | Electroacoustic evaluation for hearing aid; binaural | 0 | Non-Time Based | Zero RVUs, Typically Non-Hospital |
| 92596 | Ear protector attenuation measurements | 6 | Non-Time Based | MPFS |
| 92601 | Diagnostic analysis of cochlear implant, patient younger than 7 years of age; with programming | 24 | Non-Time Based | MPFS |
| 92602 | Diagnostic analysis of cochlear implant, patient younger than 7 years of age; subsequent reprogramming | 17 | Non-Time Based | **MPFS** |
| 92603 | Diagnostic analysis of cochlear implant, age 7 years or older; with programming | 22 | Non-Time Based | MPFS |
| 92604 | Diagnostic analysis of cochlear implant, age 7 years or older; subsequent reprogramming | 14 | Non-Time Based | MPFS |
| 92620 | Evaluation of central auditory function, with report; initial 60 minutes | 14 | Time-Based | MPFS |
| 92621 | Evaluation of central auditory function, with report; each additional 15 minutes (list separately in addition to code for primary procedure) | 3 | Time-Based | MPFS |
| 92622 | Diagnostic analysis, programming, and verification of an auditory osseointegrated sound processor, any type; first 60 minutes | 11 | Time-Based | MPFS |
| 92623 | Diagnostic analysis, programming, and verification of an auditory osseointegrated sound processor, any type; each additional 15 minutes (list separately in addition to code for primary procedure) | 3 | Time-Based | MPFS |
| 92625 | Assessment of tinnitus (includes pitch, loudness matching, and masking) | 8 | Non-Time Based | MPFS |
| **CODE** | **DESCRIPTION** | **RVU** | **CATEGORY** | **RATIONALE** |
| 92626 | Evaluation of auditory function for surgically implanted device(s) candidacy or postoperative status of a surgically implanted device(s); first hour | 12 | Time-Based | MPFS. |
| 92627 | Evaluation of auditory function for surgically implanted device(s) candidacy or postoperative status of a surgically implanted device(s); each additional 15 minutes (list separately in addition to code for primary procedure) | 3 | Time-Based | MPFS |
| 92630 | Auditory rehabilitation; prelingual hearing loss | 12 | Non-Time Based | Mirror CPT 92626 Based on resources |
| 92633 | Auditory rehabilitation; postlingual hearing loss | 12 | Non-Time Based | Mirror CPT 92626 Based on resources |
| 92650 | Auditory evoked potentials; screening of auditory potential with broadband stimuli, automated analysis | 6 | Non-Time Based | MPFS |
| 92651 | Auditory evoked potentials; for hearing status determination, broadband stimuli, with interpretation and report | 15 | Non-Time Based | MPFS |
| 92652 | Auditory evoked potentials; for threshold estimation at multiple frequencies, with interpretation and report | 18 | Non-Time Based | MPFS |
| 92653 | Auditory evoked potentials; neurodiagnostic, with interpretation and report | 14 | Non-Time Based | MPFS |
| 92700 | Unlisted otorhinolaryngological service or procedure | By Report | Non-Time Based | Unlisted Code |
| V5240 | Dispensing fee, contralateral routing system, binaural | 0 | Non-Time Based | Zero RVUs, Typically Non-Hospital |