OVERVIEW
Audiology is a specialty focusing on hearing impairment/loss through identification and evaluation, and the rehabilitation of persons with hearing impairment/loss. Audiological services are normally provided by a licensed audiologist who performs audiometric/diagnostic tests that evaluate both sensorineural and conductive hearing impairment/losses.

MEDICAL CRITERIA
Not applicable

PRIOR AUTHORIZATION
Not applicable

POLICY STATEMENT
Medicare Advantage Plans and Commercial Products
Evaluation of hearing impairment tests are considered medically necessary in illnesses or injuries including, but not limited to, the following: Hearing loss; Otitis media; Meniere's disease; Labyrinthitis; Vertigo (dizziness); Tinnitus; Cochlear otosclerosis; Neoplasms of the auditory or central nervous system; Congenital anomalies; Surgery involving the auditory and/or central nervous system, e.g., skull-based tumors such as acoustic neuroma and meningioma; Facial nerve paralysis (Bell's palsy); Bacterial meningitis; Exposure to intense noise; Ototoxic drugs; Fractures of the temporal bone or trauma affecting the central auditory pathways.

Hearing exams and diagnostic hearing tests are covered when furnished by a physician, audiologist or other qualified provider. Audiology studies performed by independently licensed audiologists are covered diagnostic services when they are ordered by a physician or an Advance Practice Provider.

COVERAGE
Benefits may vary between groups/contracts. Please refer to the appropriate Benefit Booklet, Evidence of Coverage, or Subscriber Agreement for applicable benefits for Hearing Services.

BACKGROUND
Hearing impairment or hearing loss is a reduction in the ability to perceive sound. The loss may range from slight to complete deafness caused by sensorineural and/or conductive hearing losses.

Audiology is a specialty focusing on hearing impairment or hearing loss through identification and evaluation, and the rehabilitation of persons with hearing impairment or hearing loss. Audiological services are normally provided by a licensed audiologist who performs audiometric/diagnostic tests that evaluate both sensorineural and conductive hearing impairment/losses.

The various audiometric tests can be subdivided into standard batteries that are typically used as part of the initial work-up of patients presenting with hearing impairment, as well as specialized tests that are typically used in specific clinical situations. The standard batteries vary according to whether the patient is an adult, child, or infant. Tests identified as specialized would not be part of the initial hearing impairment work-up,
but may be considered medically necessary when initial diagnostic tests are inconclusive or not appropriate to the specific condition.

The following tests identify standard and specialized audiology tests for adults, children, and infants:

**Standard Battery of Tests**

**For Adults and Children:**
1. Pure-tone audiometry, air and bone conduction
2. Speech audiometry
3. Word recognition tests
4. Acoustic reflex test and acoustic reflex decay
5. Tympanometry (impedance testing)

**For Children Only:**
1. Select picture audiometry
2. Conditioning play audiometry

**For Infants Only:**
1. Auditory evoked potential, aka Auditory Brainstem Response (ABR)
2. Visual reinforcement audiometry (VRA)
3. Evoked otoacoustic emissions (OAE)
4. Acoustic reflex test

**Specialized Tests for Adults and Children:**
1. Auditory Evoked Potential
2. Electrocochleography (ECochG)
3. Tone decay test
4. Stenger test, pure tone or speech
5. Sensorineural acuity level (SAL) test
6. Evoked otoacoustic emissions

The following audiometric tests are considered obsolete and thus are **not** covered for Medicare Advantage Plans and not medically necessary for Commercial products:

- Lombard test (replaced by the Stenger test and auditory evoked potential);
- Alternate binaural loudness balance test;
- Short increment sensitivity test (replaced by pure tone audiometry, auditory evoked potential);
- Bekesy audiometry.

The following audiometric tests are not covered for Medicare Advantage Plans and not medically necessary for Commercial products as there is no scientific literature to support efficacy:

- Staggered spondaic word test;
- Synthetic sentence identification test.

**CODING**

**Medicare Advantage Plans and Commercial Products**

The following tests are covered:

- **92551** Screening test, pure tone, air only
- **92552** Pure tone audiometry (threshold); air only
- **92557** Comprehensive audiometry threshold evaluation and speech recognition
Hearing Tests:

92550 Tymanometry and reflex threshold measurements
92553 Pure tone audiometry (threshold); air and bone
92555 Speech audiometry threshold;
92556 Speech audiometry threshold; with speech recognition
92563 Tone decay test
92565 Stenger test, pure tone
92567 Tymanometry (impedance testing)
92568 Acoustic reflex testing; threshold
92570 Acoustic immittance testing, includes tympanometry (impedance testing), acoustic reflex
threshold testing, and acoustic reflex decay testing
92571 Filtered speech test
92575 Sensorineural acuity level test
92577 Stenger test, speech
92579 Visual reinforcement audiometry (VRA)
92582 Conditioning play audiometry
92583 Select picture audiometry
92584 Electrocochleography
92585 Auditory evoked potentials for evoked response audiometry and/or testing of the central
nervous system; comprehensive (Code Deleted 12/31/2020)
92586 Auditory evoked potentials for evoked response audiometry and/or testing of the central
nervous system; limited (Code Deleted 12/31/2020)
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
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
92650 Auditory evoked potentials; screening of auditory potential with broadband stimuli, automated
analysis (New Code effective 1/1/2021)
92651 Auditory evoked potentials; for hearing status determination, broadband stimuli, with interpretation
and report (New Code effective 1/1/2021)
92652 Auditory evoked potentials; for threshold estimation at multiple frequencies, with interpretation
and report (New Code effective 1/1/2021)
92653 Auditory evoked potentials; neurodiagnostic, with interpretation and report
(New Code effective 1/1/2021)

The following codes are not covered for Medicare Advantage Plans and not medically necessary for
Commercial products:

92559 Audiometric testing of groups
92560 Bekesy audiometry; screening
92561 Bekesy audiometry; diagnostic
92562 Loudness balance test, alternate binaural or monaural
92564 Short increment sensitivity index (SISI)
92572 Staggered spondaic word test
92576 Synthetic sentence identification test
RELATED POLICIES
Hearing Aid Mandate
Cochlear Implants
Preventive Services for Commercial Members

PUBLISHED
Provider Update, May 2021
Provider Update, May 2020
Provider Update, April 2019
Provider Update, May 2017
Provider Update, June 2016

REFERENCES