

Medical Coverage Policy

Evaluation of Hearing Impairment/Loss

☐ Device/Equipment ☐ Drug ☐ Medical ☐ Surgery ☐ Test ☐ Other			
Effective Date:	5/17/2007	Policy Last Updated:	4/16/2013
☐ Prospective review is recommended/required. Please check the member agreement for preauthorization guidelines.			
□ Prospective review is not required.			

Description:

Hearing impairment/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/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.

The various audiometric/diagnostic tests can be subdivided into:

- 1. standard batteries that are typically used as part of the initial hearing impairment work-up; and
- 2. 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 considered **not medically necessary**:

- 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 considered **not medically necessary**, as there is no scientific literature to support efficacy.

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

Medical Criteria:

None

Medical Policy:

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.

Coverage:

Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage, Subscriber Agreement, Benefit Booklet for applicable Diagnostic Imaging, Lab and Machine Tests/Medical Equipment, Medical Supplies and Prosthetic Devices/Office Visit benefits/coverage.

Coding:

The following codes are classified to be processed as covered under the members Diagnostic Imaging, Lab or Machine Tests benefit: Hearing Tests (routine):

92551, 92552, V5008

Hearing Tests:

92550, 92553, 92555, 92556, 92557, 92563, 92565, 92567, 92568, 92569, 92570, 92571, 92575, 92577, 92579, 92582, 92583, 92584, 92585, 92586, 92587, 92588

The following code is covered for BlueCHiP for Medicare members only under the members Diagnostic Imaging, Lab and Machine Tests benefit:

92596

The following codes follow the unlisted codes process and documentation must be submitted for review:

92700, V5299

The following code will be covered under the member's DME benefit and will apply to the hearing aid benefit maximum when the above guidelines are met: V5020

The following codes are not medically necessary for all product lines: 92559, 92560, 92561, 92562, 92564, 92572, 92576

Related to:

Hearing Aid Mandate
Cochlear Implant Policy
Preventive Services for BlueCHiP for Medicare
Preventive Services for Commercial Members

Published:

Policy Update, July 2013 Provider Update, Apr 2012 Provider Update, Jun 2011 Provider Update, Jul 2010 Policy Update, Dec 2009 Policy Update, Feb 2009 Policy Update, Jul 2007

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