

A Listing of the Otologic and Audiologic CPT Codes

Vestibular Function Tests, With Observation and Evaluation by Physician, Without Electrical Recording

CODE DESCRIPTION

92531 Spontaneous nystagmus, including gaze

92532 Positional nystagmus

92533 Caloric vestibular test, each irrigation (binaural, bithermal stimulation constitutes four tests)

92534 Optokinetic nystagmus

Vestibular Function Tests, with Recording (e.g. ENG, PENG), and Medical Diagnostic Evaluation

CODE DESCRIPTION

92540 Basic Vestibular evaluation (Includes: 92541, 92542, 92544 and 92545)

*Do not report 926x2 in conjunction with 92542, 92544, or 92545

92541 Spontaneous nystagmus, with recording

92542 Positional nystagmus test, minimum of four positions, with recording

92543 Caloric vestibular test, each irrigation (binaural, bithermal stimulation constitutes four tests), with recording

92544 Optokinetic nystagmus test, bidirectional, foveal and peripheral stimulation, with recording

92545 Oscillator tracking test, with recording

92546 Sinusoidal vertical axis rotational testing

92547 Use of vertical electrodes (List separately in addition to code for primary procedure I.E. use

92547 in conjunction with codes 92541-92546)

92548 Computerized dynamic posturography

92599 Unlisted vestibular tests

Otoacoustic Emission Tests with Medical Diagnostic Evaluation

CODE DESCRIPTION

92558, "Evoked otoacoustic emissions, screening (qualitative measurement of distortion product or transient evoked otoacoustic emissions), automated analysis"

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 Comprehensive diagnostic evaluation (quantitative analysis of outer hair cell function by cochlear mapping, **minimum of 12 frequencies**), with interpretation of the test, with a report.

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Brain Stem Response Tests, With Medical Diagnostic Evaluation

CODE DESCRIPTION

92584 Electrocochleography

92585 Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system

92586 Limited

Audiologic Function Tests, With Medical Diagnostic Evaluation

CODE DESCRIPTION

92550 Tympanometry and reflex Threshold (New for 2010) *Do not report 92550 in conjunction with 92567, 92568

92551 Screening test, pure tone, air only

92552 Pure tone audiometry (threshold); air only

92553 Pure tone audiometry (threshold); air and bone

92555 Speech audiometry threshold

92556 Speech audiometry threshold; with speech recognition

92557 Comprehensive audiometry threshold evaluation and speech recognition

*Note: For hearing aid evaluation and selection, see 92590-92595

92559 Audiometric testing of groups

92560 Bekesy audiometry; screening

92561 Bekesy audiometry; diagnostic

92562 Loudness balance test, alternate binaural or monaural

92563 Tone decay test

92564 Short increment sensitivity index (SISI)

92565 Stenger test, pure tone

92567 Tympanometry (impedance testing)

92568 Acoustic reflex test

92569 Acoustic reflex decay test

92570 Acoustic immittance, includes tympanometry, acoustic reflex threshold & reflex decay (new for 2010)

*Do not report 92570 in conjunction with 92567, 92568

92571 Filtered speech test

92572 Staggered spondaic word test

92573 Lombard Test

92575 Sensorineural acuity level test

92576 Synthetic sentence identification test

92577 Stenger test, speech

92579 Visual reinforcement audiometry (VRA)

92582 Conditioning play audiometry

92583 Select picture audiometry

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CAP and Hearing Aid Evaluation

CODE DESCRIPTION

92589 Central auditory function test(s) (specify)

92590 Hearing aid examination and selection; monaural

92591 Hearing aid examination and selection; binaural

92592 Hearing aid check; monaural

92593 Hearing aid check; binaural

92594 Electroacoustic evaluation for hearing aid; monaural

92595 Ear protector attenuation measurements

92597 Evaluation for use and/or fitting of voice prosthetic or augmentative/alternative communication device to supplement oral speech

92598 Modification of voice prosthetic or augmentative/alter native communication device to supplement oral speech

Other Procedures:

CODE DESCRIPTION

92599 Unlisted otorhinolaryngological service or procedure 93585-52 ABR Screening

CPT coding notes:

* Select CPT codes based on CPT descriptor OR literature support if descriptor is not clear.

* DO NOT select codes based solely on manufacturer's or representative's recommendation.

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