Coding with Confidence: CPT, HCPCS, Modifiers & ICD-10

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Coding Considerations: Procedure (CPT, HCPCs) and Diagnosis (ICD-10)

- Code for test/procedure(s) completed
- Code as specifically as possible
- Code based on test/procedure outcomes
- Code based on the reason for visit
- Code based on the chief complaint
- Code based on symptoms
Documentation Considerations

• Legal document and can be subpoenaed

• Report should begin with statement about patient’s chief complaint/symptoms - reason for the visit

• Relevant case history information

• Test/procedure(s) including results AND interpretation
  ◦ Don’t assume anyone reviewing the results knows what they mean

• Based on the results, indicate the recommendations/treatment plan
Case 1

• 45 year old female

• Chief complaint:
  ◦ Ringing in both ears and difficulty understanding following a fire alarm going off in hotel
  ◦ Aural fullness following event

• No other report of dizziness, ear pain, ear surgery, exposure to excessive noise, family history of HL
Case 1

<table>
<thead>
<tr>
<th>Frequency (Hz)</th>
<th>Right ipsi</th>
<th>Right contra</th>
<th>Left ipsi</th>
<th>Left contra</th>
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</thead>
<tbody>
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<td>500 Hz</td>
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<td>4k Hz</td>
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SRT

- **Right ear**: 10, 96, 50
- **Left ear**: 10, 100, 50
What CPT to code?

- 92557
  - Comprehensive audiological assessment
92557: Comprehensive audiological assessment

- Bundled code
- Includes:
  - Air conduction threshold
  - Bone conduction threshold
  - Speech audiometry threshold
  - Speech recognition
What CPT to code?

- **92557**
  - Comprehensive audiological assessment

- **92557-52**
  - Comprehensive audiological assessment with reduced services
What is the appropriate use of -52 modifier?

A. Some elements of procedure were not completed and you cannot properly interpret the test results.

B. Some requirements of code were intentionally not completed because they were not necessary; interpretation of results will be incomplete.

C. Patient became ill during testing and some elements of procedure were not completed.

D. Some requirements of code were not completed, but interpretation of test results will not be affected.
What is the appropriate use of -52 modifier?

A. Some elements of procedure were not completed and you cannot properly interpret the test results.

B. Some requirements of code were intentionally not completed because they were not necessary; interpretation of results will be incomplete.

C. Patient became ill during testing and some elements of procedure were not completed.

D. Some requirements of code were not completed, but interpretation of test results will not be affected.
What CPT to code?

- **92557**
  - Comprehensive audiological assessment
- **92557-52**
  - Comprehensive audiological assessment with reduced services
- **92567 & 92568**
  - Tympanometry (impedance testing), Acoustic reflex testing; threshold
What CPT to code?

- **92557**
  - Comprehensive audiological assessment

- **92557-52**
  - Comprehensive audiological assessment with reduced services

- **92567 & 92568**
  - Tympanometry (impedance testing), Acoustic reflex testing, threshold

- **92550**
  - Tympanometry and reflex threshold measurements
OAE Codes

• 92558
  ◦ Evoked OAEs, screening (qualitative measurement of distortion product or transient evoked OAEs), automated analysis

• 92587
  ◦ DPOAEs; limited evaluation (to confirm presence or absence of hearing disorder, 3-11 frequencies) OR TEOAEs, with interpretation & report

• 92588
  ◦ Comprehensive diagnostic evaluation (quantitative analysis of outer hair cell function by cochlear mapping, minimum of 12 frequencies), with interpretation & report
OAE Codes

- **92558**
  - Evoked OAEs, screening (qualitative measurement of distortion product or transient evoked OAEs), automated analysis

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  - DPOAEs; limited evaluation (to confirm presence or absence of hearing disorder, 3-11 frequencies) OR TEOAEs, with interpretation & report

- **92588**
  - Comprehensive diagnostic evaluation (quantitative analysis of outer hair cell function by cochlear mapping, minimum of 12 frequencies), with interpretation & report
ICD-10 Coding Options

• Code based on test/procedure outcomes
  ◦ Outcomes of test/procedure(s) were all within normal limits

• Code based on symptoms

• Code based on the chief complaint

• Code based on reason for the visit
  ◦ Patient reported ringing and difficulty understanding
ICD-10 Coding

• Code based on test/procedure outcomes
  ◦ Outcomes of test/procedure(s) were all within normal limits
    • Z01.10 - not likely to be reimbursed for this code
      ◦ Encounter for examination of ears and hearing without abnormal findings
ICD-10 Coding

• Code based on test/procedure outcomes
  ◦ Outcomes of test/procedure(s) were all within normal limits
    • Z01.10 - not likely to be reimbursed for this code
      ◦ Encounter for examination of ears and hearing without abnormal findings

• Code based on symptoms / chief complaint / reason for the visit
  ◦ Patient complained of ringing and difficulty hearing following a fire alarm going off in hotel
    • H93.13
      ◦ Tinnitus, bilateral
    • H93.299
      ◦ Other abnormal auditory perceptions, unspecified ear
    • Z77.122
      ◦ Contact with and (suspected) exposure to noise
Case 1

<table>
<thead>
<tr>
<th>Frequency [Hz]</th>
<th>Right ear</th>
<th>Left ear</th>
</tr>
</thead>
<tbody>
<tr>
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Word Recognition

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<tbody>
<tr>
<td>dB HL</td>
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<td>10</td>
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SRT (Subjective Response Threshold)

- 392557-52 (Comprehensive Audio, reduced)
- 92550 (Tymps & ARTs)
- 92587 (DPOAEs, limited)

- H93.12 (Tinnitus, bilateral)
- H93.299 (Abnormal auditory perception)
- Z77.122 (Exposure to noise)
Case 2

• 58 year old female

• Chief complaint: Hearing loss
  ◦ CHARGE Syndrome
  ◦ History of chronic middle ear disease, multiple surgeries
  ◦ Auditory anomalies in all family members with CHARGE, with hearing levels ranging from normal to profound

Case 2

<table>
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<th>4k Hz</th>
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<td>Abs</td>
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<tr>
<td>Right contra</td>
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<tr>
<td>Left ipsi</td>
<td>Abs</td>
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<tr>
<td>Left</td>
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<table>
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<th>dB HL</th>
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<td>Right ear</td>
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<td>40</td>
</tr>
<tr>
<td>Left ear</td>
<td>25</td>
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</table>
What CPT to code?

- 92557
  - Comprehensive audiological assessment

- 92550
  - Tympanometry and reflex threshold measurements
H90 Sensorineural Hearing Loss

- **H90.3** SNHL, bilateral
- **H90.4** SNHL, unilateral with *unrestricted* hearing on contralateral side
  - **H90.41** SNHL, unilateral, right ear, with *unrestricted* hearing on contralateral side
  - **H90.42** SNHL, unilateral, left ear, with *unrestricted* hearing on contralateral side
- **H90.5** Unspecified SNHL
H90 Mixed Hearing Loss

- **H90.6** Mixed conductive and SNHL, bilateral

- **H90.7** Mixed CHL and SNHL, unilateral with *unrestricted* hearing on contralateral side
  - **H90.71** Mixed CHL and SNHL, unilateral, right ear, with *unrestricted* hearing on contralateral side
  - **H90.72** Mixed CHL and SNHL, unilateral, left ear, with *unrestricted* hearing on contralateral side

- **H90.8** Mixed CHL and SNHL, unspecified
ICD-10 Coding Options

- **H90.3**
  - SNHL, bilateral

- **H90.6**
  - Mixed conductive and SNHL, bilateral

- **H90.42 & H90.71**
  - SNHL, unilateral, left ear, with *unrestricted* hearing on the contralateral side
  - Mixed CHL and SNHL, unilateral, right ear, with *unrestricted* hearing on the contralateral side

- **H90.8 & H90.5**
  - Mixed CHL and SNHL, unspecified
  - Unspecified SNHL
New for 2017

- **H90.A1** Conductive hearing loss, unilateral, with *restricted* hearing contralateral side
  - H90.A11 CHL, unilateral, right ear with *restricted* hearing on the contralateral side
  - H90.A12 CHL, unilateral, left ear with *restricted* hearing on the contralateral side

- **H90.A2** Sensorineural hearing loss, unilateral, with *restricted* hearing contralateral side
  - H90.A21 SNHL, unilateral, right ear with *restricted* hearing on contralateral side
  - H90.A22 SNHL, unilateral, left ear with *restricted* hearing on contralateral side

- **H90.A3** Mixed hearing loss, unilateral, with *restricted* hearing on contralateral side
  - H90.A31 Mixed CHL and SNHL, unilateral, right ear with *restricted* hearing on contralateral side
  - H90.A32 Mixed CHL and SNHL, unilateral, left ear with *restricted* hearing on contralateral side
ICD-10 Coding Options

- **H90.3**
  - SNHL, bilateral

- **H90.6**
  - Mixed conductive and SNHL, bilateral

- **H90.42 & H90.71**
  - SNHL, unilateral, left ear, with *unrestricted* hearing on the contralateral side
  - Mixed CHL and SNHL, unilateral, right ear, with *unrestricted* hearing on the contralateral side

- **H90.8 & H90.5**
  - Mixed CHL and SNHL, unspecified
  - Unspecified SNHL

- **H90.A22 & H90.A31**
  - SNHL, unilateral, left ear with restricted hearing on the contralateral side
  - Mixed CHL and SNHL, unilateral, right ear with restricted hearing on contralateral side
Case 2

- **92557** (Comprehensive Audio)
- **92550** (Tymps & ARTs)
- **H90.A22** (SNHL left, restricted right)
- **H90.A31** (Mixed CHL & SNHL right, restricted left)

<table>
<thead>
<tr>
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<tr>
<td>SRT</td>
<td>Word Recognition</td>
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<td>Abs</td>
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</table>
Case 3

- 53 year old male

- Chief complaint:
  - Dizziness, exacerbated by stress

- Reports high blood pressure not controlled by medication, and high stress lifestyle/job

- Significant anxiety reported on HADS
Case 3

Spontaneous Nystagmus
- Fixation
- No Fixation

Horizontal Gaze
- Left Gaze
- Right Gaze

Pursuit

Dix-Hallpike Right

Dix-Hallpike Left

Positional Head

Note: The image contains various graphs and charts related to nystagmus and gaze testing, but the specific details and measurements are not transcribed in the provided text.
What CPT to code?

- 92540
  - Basic vestibular evaluation

Includes:
- Spontaneous nystagmus test including gaze & fixation nystagmus
- Positional nystagmus test (minimum 4 positions)
- Optokinetic nystagmus test, bidirectional foveal & peripheral stimulation
- Oscillating tracking test
CPT Coding Options

- **92540**
  - Basic vestibular evaluation

- **92541, 92542, 92545**
  - Spontaneous nystagmus test with eccentric gaze fixation nystagmus, with recording
  - Positional nystagmus test, minimum of 4 positions, with recording
  - Oscillating tracking test, with recording
Modifiers?

- **-52 Reduced services**
  - Procedure partially reduced or eliminated

- **-59 Distinct procedural service**
  - Unbundling portions of bundled code
    - 92541-59
    - 92542-59
    - 92545-59
## Unbundling

### 2010
- **92541** - Spontaneous: $51.31
- **92542** - Positional: $52.46
- **92544** - OPK: $42.96
- **92545** - Tracking: $40.04
  - Total: $186.77
- **92540** - Vestib eval: $97.40

### 2017
- **92541** - Spontaneous: $25.88
- **92542** - Positional: $29.38
- **92544** - OPK: $17.91
- **92545** - Tracking: $16.10
  - Total: $89.27
- **92540** - Vestib eval: $106.35
Vestibular Testing: Calorics

• 92543:
  ◦ Caloric vestibular test, each irrigation, with recording
  ◦ 92543 x4

• New in 2016:
  ◦ 92537:
    • Caloric vestibular test with recording, bilateral; bithermal
  ◦ 92538:
    • Caloric vestibular test with recording, bilateral; monothermal
Vestibular Testing: Calorics

- **92543:**
  - Caloric vestibular test, each irrigation, with recording
  - 92543 x4

- New in 2016:
  - **92537:**
    - Caloric vestibular test with recording, bilateral; bithermal
  - **92538:**
    - Caloric vestibular test with recording, bilateral; monothermal
How are you billing for VEMP?

A. 92585
   ◦ Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; comprehensive

B. 92586
   ◦ Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; limited

C. 92700
   ◦ Unlisted otorhinolaryngological service or procedure

D. 95927
   ◦ Short latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from central nervous system, in trunk or head
How are you billing for VEMP?

A. 92585
   - Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; comprehensive

B. 92586
   - Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; limited

C. 92700
   - Unlisted otorhinolaryngological service or procedure

D. 95927
   - Short latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from central nervous system, in trunk or head
Advanced Beneficiary Notice

- **Required** notification that informs beneficiary the item or service *may not meet the definition of medical necessity* in this incidence of care.

- **Voluntary** notification or a notification of non-coverage that informs the beneficiary that the item or service is *statutorily excluded* or does not meet the definition of a Medicare benefit.
Medicare Modifiers

- **GA**: “Waiver of Liability Statement Issued as Required by Payer Policy”
  - When a denial is expected
  - Required ABN on file

- **GX**: “Notice of Liability Issued, Voluntary Under Payer Policy”
  - For services statutorily excluded
  - Voluntary ABN on file

- **GY**: “Notice of Liability Not Issued, Not Required Under Payer Policy”
  - Item or service statutorily excluded or does not meet the definition of a Medicare benefit

- **GZ**: “Item or Service Expected to Be Denied as Not Reasonable & Necessary”
  - No ABN on file
Based on the information presented, how would you code this VEMP?

A. 92700-GA
   ◦ Waiver of Liability Statement Issued as Required by Payer Policy

B. 92700-GX
   ◦ Notice of Liability Issued, Voluntary Under Payer Policy

C. 92700-GX & -GY
   ◦ Notice of Liability Issued, Voluntary Under Payer Policy
   ◦ Notice of Liability Not Issued, Not Required Under Payer Policy

D. 92700-GZ
   ◦ Item or Service Expected to Be Denied as Not Reasonable and Necessary
Based on the information presented, how would you code this VEMP?

A. 92700-GA
   - Waiver of Liability Statement Issued as Required by Payer Policy

B. 92700-GX
   - Notice of Liability Issued, Voluntary Under Payer Policy

C. 92700-GX & -GY
   - Notice of Liability Issued, Voluntary Under Payer Policy
   - Notice of Liability Not Issued, Not Required Under Payer Policy

D. 92700-GZ
   - Item or Service Expected to Be Denied as Not Reasonable and Necessary
ICD-10 Coding Options

- **H83.8X1**
  - Other specified diseases of right inner ear

- **R42**
  - Other specified diseases of right inner ear
Case 3

- 92541-59 (Spontaneous with gaze)
- 92542-59 (Positionals)
- 92545-59 (Oscillating tracking)
- 92537 (Monothermal calorics)
- 92700-GA (VEMP)
- R42 (Dizziness)
Case 4

- 55 year old female, dental technician
- 2010 evaluation revealed an asymmetrical hearing loss and abnormal ABR findings
- Imaging confirmed a meningioma, removed in 2011
Hearing Instrument Consultation
What CPT/HCPCS to code? What ICD-10?

• **V5010** -OR- 92590
  ◦ Assessment for hearing aid (V5010)
  ◦ Hearing aid examination and selection, monaural (92590)

• **V5275 x2**: Ear impression, each

• **V5264 x2**: Earmold/insert, not disposable

• **H90.41** SNHL, unilateral, right ear, with *unrestricted* hearing on contralateral side
Hearing Instrument Fitting
What CPT/HCPCS to code?

- **V5011**: Fitting/orientation/checking of hearing aid
- **V5180**: Hearing aid, CROS, BTE
- **V5200**: Dispensing fee, CROS
- **92594**: Electroacoustic evaluation for HA, monaural
- **V5020**: Conformity evaluation
- **V5266**: Battery for use in hearing device (per battery)
- **V5267**: Hearing aid supplies/accessories
- **V5299**: Hearing service, miscellaneous
Hearing Instrument Follow-Up/Check

What CPT/HCPCS to code?

- **92592**: Hearing aid check, monaural
- **92595**: Electroacoustic evaluation for HA, binaural
- **V5014**: Repair/modification of HA
- **V5020**: Conformity evaluation
- **V5266**: Battery for use in hearing device (per battery)
- **V5299**: Hearing service, miscellaneous
- **92633**: Auditory rehabilitation, postlingual
Case 5

- 7 year old male
- 2.5 month NICU stay
- Delayed speech and language
- Difficulty reading, phonics, auditory memory
### Case 5

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#### SRT and Word Recognition

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<tr>
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<td>Dichotic Digits Test</td>
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What CPT to code?

- **92557**
  - Comprehensive audiological assessment

- **92550**
  - Tympanometry and reflex threshold measurements

- **92571**
  - Filtered Speech Test

- **92572**
  - Staggered Spondaic Word Test

- **92620**
  - Evaluation of central auditory function, with report; initial 60 minutes

- **92621**
  - Evaluation of central auditory function, with report; each additional 15 minutes
Timed CPT Codes

• 92620 & 92621
  ◦ Evaluation of central auditory function, with report; initial 60 minutes (92620); each additional 15 minutes (92621)

  1 unit: 8 minutes to < 23 minutes
  2 units: 23 minutes to < 38 minutes
  3 units: 38 minutes to < 53 minutes
  4 units: 53 minutes to < 68 minutes
  5 units: 68 minutes to < 83 minutes
  6 units: 83 minutes to < 98 minutes

• APE with report = 1 hour 50 minutes
  ◦ 92620
  ◦ 92621 x3
ICD-10 Coding Options

- **H93.25**
  - Central auditory processing disorder

- **F80.2**
  - Mixed receptive-expressive language disorder
Type 1 & Type 2 Exclusions

Type 1

2017 ICD-10-CM Diagnosis Code H93.25

Central auditory processing disorder

Approximate Synonyms
- Acquired auditory processing disorder
- Auditory processing disorder
- Both sides acquired auditory processing disorder
- Left acquired auditory processing disorder
- Right acquired auditory processing disorder

Type 1 Excludes
- Mixed receptive-expressive language disorder (F80.2)

Approximate Synonyms
- Developmental receptive language delay
- Developmental receptive language disorder
- Expressive/receptive language disorder
- Language disorder, receptive
- Mild receptive language delay
- Mixed receptive expressive language disorder
- Moderate receptive language delay

Type 2

Diseases of the ear and mastoid process (H60-H95)

Type 2 Excludes
- Certain conditions originating in the perinatal period (P04-P96)
- Certain infectious and parasitic diseases (A00-B99)
- Complications of pregnancy, childbirth and the puerperium (O00-O9A)
- Congenital malformations, deformations and chromosomal abnormalities (Q00-Q99)
- Endocrine, nutritional and metabolic diseases (E00-E88)
- Injury, poisoning and certain other consequences of external causes (S00-T88)
- Neoplasms (C00-D49)
- Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified

- H50-H62 Diseases of external ear
- H65-H75 Diseases of middle ear and mastoid
- H80-H83 Diseases of inner ear
- H90-H94 Other disorders of ear
- H85-H95 Intraoperative and postprocedural complications
Case 5

- **92557** (Comprehensive Audio)
- **92550** (Tymps & ARTs)
- **92620** (CAP eval, 1st hour)
- **92621 x3** (CAP eval, add’l 50 min)
- **H93.25** (CAPD)

### Test Findings

<table>
<thead>
<tr>
<th>Test</th>
<th>Findings</th>
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<tbody>
<tr>
<td>Masking Level Difference</td>
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<tr>
<td>Gaps in Noise</td>
<td>Auditory temporal decoding delay</td>
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<tr>
<td>Staggered Spondaic Word Test</td>
<td>Auditory integration &amp; output-organization deficits</td>
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<tr>
<td>Dichotic Digits Test</td>
<td>Auditory decoding deficits</td>
</tr>
<tr>
<td>Pitch Pattern Sequence</td>
<td>Auditory integration</td>
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<tr>
<td>Competing Sentences Test</td>
<td>Auditory integration</td>
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<td>SCAN-3</td>
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<td>Filtered Words</td>
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<tr>
<td>Auditory Figure-Ground</td>
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<tr>
<td>Time Compressed Sentences</td>
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### ART Test Results

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<tr>
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<th>500 Hz</th>
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<tbody>
<tr>
<td>Right ipsi</td>
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<td>95</td>
<td>85</td>
<td>85</td>
</tr>
<tr>
<td>Right contra</td>
<td>95</td>
<td>100</td>
<td>95</td>
<td>95</td>
</tr>
<tr>
<td>Left ipsi</td>
<td>80</td>
<td>85</td>
<td>80</td>
<td>85</td>
</tr>
<tr>
<td>Left contra</td>
<td>Abs</td>
<td></td>
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</table>
Case 6

• 67 year old female

• Chief complaint:
  ◦ Tinnitus, described as a pulsing
  ◦ Hearing in background noise

• Blood pressure medication

• No other report of dizziness, ear pain, ear surgery, exposure to excessive noise, family history of HL
Case 6

### SRT

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<tr>
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<tr>
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<tr>
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<td>Left ear</td>
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### ECV

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<td>Left</td>
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### ART

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<th>1k Hz</th>
<th>2k Hz</th>
<th>4k Hz</th>
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<td>95</td>
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<td>110</td>
<td>CNT</td>
</tr>
<tr>
<td>Left ipsi</td>
<td>95</td>
<td>100</td>
<td>Abs</td>
<td>Abs</td>
</tr>
<tr>
<td>Left contra</td>
<td>100</td>
<td>100</td>
<td>CNT</td>
<td>CNT</td>
</tr>
</tbody>
</table>
Case 6

Tinnitus Questionnaires:

- Tinnitus Reaction Questionnaire (TRQ)
  - Patient score = 12
  - Not clinically significant

- Tinnitus Functional Index (TFI)
  - Patient score = 24
  - Suggesting “small problem” particularly in areas of relaxation and sleep

Tinnitus Evaluation:

- Pitch Matching:
  - 2000 Hz for right, left and binaural

- Residual Inhibition:
  - Small decrease in intensity & pitch

- Minimum Masking Level (white noise):
  - Right: 5 dB SL
  - Left: 8 dB SL
  - Binaural: 5 dB SL

- Loudness Matching:
  - Right: 6 dB SL
  - Left: 7 dB SL
  - Binaural: 8 dB SL
What CPT to code?

- **92557**
  - Comprehensive audiological assessment

- **92550**
  - Tympanometry and reflex threshold measurements

- **92550-52**
  - Tympanometry and reflex threshold measurements; reduced

- **92567**
  - Tympanometry

- **92625**
  - Assessment of tinnitus

- **92625-52**
  - Assessment of tinnitus; reduced
Tympanometry & Acoustic Reflexes

- Tympanometry and acoustic reflex thresholds were completed
- However, only 12 of 16 ART’s were completed
- What CPT code would we bill?

<table>
<thead>
<tr>
<th>ART</th>
<th>500</th>
<th>1000</th>
<th>2000</th>
<th>4000</th>
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<td>Right contra</td>
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<tr>
<td>Left ipsi</td>
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<td>100</td>
<td>Abs</td>
<td>CNT</td>
</tr>
<tr>
<td>Left contra</td>
<td>100</td>
<td>100</td>
<td>CNT</td>
<td>CNT</td>
</tr>
</tbody>
</table>
What are the rules for billing ARTs? How many need to be completed?

A. At least 8, both ipsilateral and contralateral, each ear
B. At least 10, both ipsilateral and contralateral, each ear
C. At least 12, both ipsilateral and contralateral, each ear
D. At least 16, both ipsilateral and contralateral, each ear
Acoustic reflex threshold measurements

- **92550**, Tympanometry and reflex threshold measurements
  - Bundled code used to bill 92567 and 92568 when they are performed on the same patient on the same date

- **92568**, Acoustic reflex testing; threshold
  - “Comprehensive acoustic reflex measures (ipsilateral and contralateral for *at least two frequencies*); not reflex screening at one frequency; use -52 modifier if only one ear is tested”
What CPT to code?

- **92557**
  - Comprehensive audiological assessment

- **92550**
  - Tympanometry and reflex threshold measurements

- **92550-52**
  - Tympanometry and reflex threshold measurements; reduced

- **92625**
  - Assessment of tinnitus

- **92625-52**
  - Assessment of tinnitus; reduced

- **92567**
  - Tympanometry
92625: Assessment of Tinnitus

- CPT specifies pitch matching, loudness matching and masking have been assessed and documented
Did this assessment meet the coding requirements?

**Tinnitus Evaluation:**

✓ • **Pitch Matching:**
  ◦ 2000 Hz for right, left and binaural

✓ • **Residual Inhibition:**
  ◦ Small decrease in intensity & pitch

✓ • **Minimum Masking Level (white noise):**
  ◦ Right: 5 dB SL
  ◦ Left: 8 dB SL
  ◦ Binaural: 5 dB SL

✓ • **Loudness Matching:**
  ◦ Right: 6 dB SL
  ◦ Left: 7 dB SL
  ◦ Binaural: 8 dB SL
How would you diagnose this patient?

- **H93.1  Tinnitus**
  - H93.11 Tinnitus, right ear
  - H93.12 Tinnitus, left ear
  - H93.13 Tinnitus, bilateral
  - H93.19 Tinnitus, unspecified ear

- **H93.A  Pulsatile Tinnitus**
  - H93.A1 Pulsatile Tinnitus, right ear
  - H93.A2 Pulsatile Tinnitus, left ear
  - H93.A3 Pulsatile Tinnitus, bilateral
  - H93.A9 Pulsatile Tinnitus, unspecified ear
How would you diagnose this patient?

- **H93.1 Tinnitus**
  - H93.11 Tinnitus, right ear
  - H93.12 Tinnitus, left ear
  - H93.13 Tinnitus, bilateral
  - H93.19 Tinnitus, unspecified ear

- **H90.3 SNHL, bilateral**

- **H93.A Pulsatile Tinnitus**
  - H93.A1 Pulsatile Tinnitus, right ear
  - H93.A2 Pulsatile Tinnitus, left ear
  - H93.A3 Pulsatile Tinnitus, bilateral
  - H93.A9 Pulsatile Tinnitus, unspecified ear
Case 6

TRQ: Normal
TFI: Small problem
Pitch matching:
   2000 Hz Right, Left Binaural
Residual inhibition:
   Small decrease
Minimum masking level:
   Right: 5 db SL
   Left: 8 db SL
   Binaural: 5 db SL
Loudness matching:
   Right: 6 db SL
   Left: 7 db SL
   Binaural: 8 db SL

- 92557 (Comprehensive Audio)
- 92550 (Tymps & ARTs)
- 92625 (Tinnitus eval)
- H93.A3 (Pulsatile Tinnitus, bilateral)
- H90.3 (SNHL, bilateral)
Case 7

- 27 month old male
- Delayed speech and language
- Mom reports no concerns regarding hearing
### Case 7

<table>
<thead>
<tr>
<th>SAT</th>
<th>Word Recognition</th>
<th>25C</th>
<th>50C</th>
<th>1K</th>
<th>2K</th>
<th>4K</th>
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</thead>
<tbody>
<tr>
<td>Right</td>
<td>CNT</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Left</td>
<td>CNT</td>
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<tr>
<td>Soundfield</td>
<td>25</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Soundfield (SF)**

- Frequency -- Hz
- audstudent
CPT Coding Options

- **92557**
  - Comprehensive audiological assessment

- **92557-52**
  - Comprehensive audiological assessment with reduced services

- **92582**
  - Conditioned play audiometry

- **92582 & 92555**
  - Conditioned play audiometry & speech threshold audiometry

- **92579**
  - Visual reinforcement audiometry

- **92579 & 92555**
  - Visual reinforcement & speech threshold audiometry

- **92579, 92582 & 92555**
  - Visual reinforcement audiometry, conditioned play audiometry & speech threshold audiometry
92557: Comprehensive audiological assessment

- Bundled code
- Includes:
  - Air conduction threshold
  - Bone conduction threshold
  - Speech audiometry threshold
  - Speech recognition
CPT Coding Options

- 92557
  - Comprehensive audiological assessment

- 92557-52
  - Comprehensive audiological assessment with reduced services

- 92582
  - Conditioned play audiometry

- 92582 & 92555
  - Conditioned play audiometry & speech threshold audiometry

- 92579
  - Visual reinforcement audiometry

- 92579 & 92555
  - Visual reinforcement & speech threshold audiometry

- 92579, 92582 & 92555
  - Visual reinforcement audiometry, conditioned play audiometry & speech threshold audiometry
92557-52: Comprehensive audiological assessment with reduced services

- Reduced services
  - Procedure partially reduced or eliminated

- Does it affect your ability to interpret the results?
  - Air conduction threshold
  - Bone conduction threshold
  - Speech audiometry threshold
  - Speech recognition
CPT Coding Options

- **92557**
  - Comprehensive audiological assessment

- **92557-52**
  - Comprehensive audiological assessment with reduced services

- **92582**
  - Conditioned play audiometry

- **92582 & 92555**
  - Conditioned play audiometry & speech threshold audiometry

- **92579**
  - Visual reinforcement audiometry

- **92579 & 92555**
  - Visual reinforcement & speech threshold audiometry

- **92579, 92582 & 92555**
  - Visual reinforcement audiometry, conditioned play audiometry & speech threshold audiometry
92582: Conditioned Play Audiometry

• Takes the place of
  ◦ 92552: Pure tone air conduction threshold
  ◦ 92553: Pure tone air & bone conduction threshold
  ◦ 92557: Comprehensive audiometry threshold evaluation with speech

• Does not include speech testing
  ◦ Could bill speech threshold with it
CPT Coding Options

- **92557**
  - Comprehensive audiological assessment
- **92557-52**
  - Comprehensive audiological assessment with reduced services
- **92582**
  - Conditioned play audiometry
- **92582 & 92555**
  - Conditioned play audiometry & speech threshold audiometry
- **92579**
  - Visual reinforcement audiometry
- **92579 & 92555**
  - Visual reinforcement & speech threshold audiometry
- **92579, 92582 & 92555**
  - Visual reinforcement audiometry, conditioned play audiometry & speech threshold audiometry
92579: Visual Reinforcement Audiometry

• Takes the place of:
  ◦ 92552: Pure tone air conduction threshold
  ◦ 92553: Pure tone air & bone conduction threshold
  ◦ 92557: Comprehensive audiometry threshold evaluation with speech
  ◦ 92555: Speech audiometry threshold
  ◦ 92556: Speech audiometry threshold and speech recognition

• DOES include speech testing
  ◦ Cannot also bill speech threshold
CPT Coding Options

- **92557**
  - Comprehensive audiological assessment

- **92557-52**
  - Comprehensive audiological assessment with reduced services

- **92582**
  - Conditioned play audiometry

- **92582 & 92555**
  - Conditioned play audiometry & speech threshold audiometry

- **92579**
  - Visual reinforcement audiometry

- **92579 & 92555**
  - Visual reinforcement & speech threshold audiometry

- **92579, 92582 & 92555**
  - Visual reinforcement audiometry, conditioned play audiometry & speech threshold audiometry
CPT Coding Options

- **92557**
  - Comprehensive audiological assessment
- **92557-52**
  - Comprehensive audiological assessment with reduced services
- **92582**
  - Conditioned play audiometry
- **92582 & 92555**
  - Conditioned play audiometry & speech threshold audiometry
- **92579**
  - Visual reinforcement audiometry
- **92579 & 92555**
  - Visual-reinforcement & speech threshold audiometry
- **92579, 92582 & 92555**
  - Visual reinforcement audiometry, conditioned play audiometry & speech threshold audiometry
CPA or VRA?

- Greater work involved than comprehensive
- Conditioned play audiometry *implies* ear specific thresholds obtained
- Visual reinforcement audiometry *does not imply* specificity

- No thresholds
- No ear-specific pure tone information
- Soundfield SAT
CPT Coding Options

- **92557**
  - Comprehensive audiological assessment

- **92557-52**
  - Comprehensive audiological assessment with reduced services

- **92582**
  - Conditioned play audiometry

- **92582 & 92555**
  - Conditioned play audiometry & speech threshold audiometry

- **92579**
  - Visual reinforcement audiometry

- **92579 & 92555**
  - Visual reinforcement & speech threshold audiometry

- **92579, 92582 & 92555**
  - Visual reinforcement audiometry, conditioned play audiometry & speech threshold audiometry
What ICD-10 to code?

- **Z01.10**
  - Encounter for examination of ears and hearing without abnormal findings

- **H91.90**
  - Unspecified hearing loss, unspecified ear

- **F80.4**
  - Speech and language development delay due to hearing loss

- **R62.0**
  - Delayed milestone in childhood
Case 7

<table>
<thead>
<tr>
<th></th>
<th>SATA</th>
<th>Word Recognition</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
<tr>
<td>Soundfield</td>
<td>25</td>
<td></td>
</tr>
</tbody>
</table>

- 92579 (VRA)
- R62.0 (Delayed milestone)