



AMERICAN  
SPEECH-LANGUAGE-  
HEARING  
ASSOCIATION

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# **2016 Medicare Fee Schedule for Audiologists**

**American Speech-Language-Hearing Association**

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## General Information

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This document was developed by the American Speech-Language-Hearing Association (ASHA) to provide an analysis of the 2016 Medicare Physician Fee Schedule (MPFS), including comments on relevant policy changes, a list of Current Procedural Terminology (CPT® American Medical Association) codes used by audiologists with their national average payment amounts, and useful links to additional information.

Audiologists should always consult their local [Medicare Administrative Contractor](#) for final rates and coverage guidelines.

Additional information regarding the MPFS—including background information, how providers should calculate Medicare payment, and audiology-specific payment and coding rules—can be found on [ASHA's Outpatient MPFS](#) website. For questions, contact [reimbursement@asha.org](mailto:reimbursement@asha.org).

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## Overview

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On April 16, 2015, President Obama signed into law the [Medicare Access and CHIP Reauthorization Act of 2015](#). This legislation repealed the flawed sustainable growth rate (SGR) formula and prevented the 21% cut in reimbursement that would have gone into effect on April 1, 2015. Medicare Physician Fee Schedule (MPFS) rates will now receive a 0.5% payment update annually through 2019. Payments are then frozen with a 0.0% update from 2020 through 2025. Additional payment changes apply after 2025 based upon participation in alternative payment models (APMs).

Rates associated with individual Current Procedural Terminology (CPT® American Medical Association) codes may continue to fluctuate due to adjustments to practice expense and malpractice insurance values that are part of the fee calculation. Additionally, the Centers for Medicare & Medicaid Services (CMS) may request review and reevaluation of certain codes that are flagged as potentially misvalued services.

This document includes regulations and rates for implementation on January 1, 2016, for audiologists providing services to Medicare Part B beneficiaries under the MPFS. Key policies addressed in this analysis include new codes for caloric irrigation, the process for establishing values for new, revised, and potentially misvalued codes, and new requirements for the Physician Quality Reporting System (PQRS). National payment rates for audiology-related services are also included.

Additional information regarding the MPFS—including background information, instructions for calculating Medicare payment, and audiology payment and coding rules—can be found on [ASHA's Outpatient MPFS](#) website. For questions, please contact [reimbursement@asha.org](mailto:reimbursement@asha.org).

## Analysis of the 2016 Medicare Physician Fee Schedule (MPFS)

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ASHA's Health Care Economics and Advocacy Team reviewed relevant sections of the 2016 MPFS. The narrative below is an analysis of key issues for audiologists.

### Reimbursement Rates

Audiologists will see some changes in 2016 reimbursement rates because of two factors: 1) the conversion factor (CF) established by a statutory formula and 2) changes in the *practice expense*—one of several costs factored into the value of any given procedure code—for audiology codes. See the appendix (p. 10-17) for a listing of audiology-related procedures and corresponding national payment rates. Visit ASHA's webpage on calculating Medicare fee schedule rates for information on how to access [fees based on locality](#).

CMS predicts a -1% total impact of proposed fee changes for audiology services. ASHA's analysis corroborates the CMS assessments, revealing only small rate adjustments upwards or downwards. This is a positive sign of increased stability in audiology rates.

### Conversion Factor (CF)

The CF is used to calculate MPFS reimbursement rates. CMS established a calendar year 2016 CF of **\$35.8279**, which is slightly lower than the 2015 CF of \$35.9335. See [Table 1](#) of the appendix (p. 11) for the national rates for audiology related CPT codes. This conversion factor reflects the elimination of the sustainable growth rate (SGR) formula discussed in the overview.

### Relative Value Units

The value of each CPT code is calculated by separating the cost of providing the service into relative value units (RVUs) in three components: 1) professional work, 2) technical expenses (practice expense), and 3) professional liability (malpractice) insurance. The total RVUs for each service is the sum of the three components (components

are adjusted for geographical differences); the RVUs for any particular CPT code are multiplied by the CF to determine the corresponding fee.

Over the past few years, ASHA, through its Health Care Economics Committee, has worked with other audiology and physician groups to present data to the American Medical Association (AMA) Relative Value Update Committee (RUC) Health Care Professionals Advisory Committee (HCPAC) to systematically transfer the audiologist's time and effort out of the practice expense and into professional work. Professional work RVUs do not typically change over time, unlike practice expense values that fluctuate according to CMS payment formula policies. This effort is not yet complete, leaving some codes with only practice expense and malpractice components. ASHA will continue to work collaboratively with the American Academy of Audiology (AAA) and other audiology and specialty societies to address these issues.

See [Table 3](#) (p. 18) for a detailed chart of final 2016 RVUs.

### **Potentially Misvalued Codes**

CMS is required to periodically identify, review, and adjust for potentially misvalued procedure codes in the MPFS. In the proposed rule published earlier this year, CMS had identified 118 potentially misvalued codes, including two audiology codes—92557 (Comprehensive audiometry) and 92567 (Tympanometry)—that would have required re-review of their values and a potential decrease in payment rates. However, ASHA and the American Medical Association requested removal of 92557 and 92567 from the list of potentially misvalued codes because they did not meet the criteria stated by CMS. In the final rule, CMS agreed and has removed the codes from the list.

### **New Codes for Caloric Vestibular Testing**

ASHA collaborated with the American Academy of Audiology (AAA), the American Academy of Otolaryngology-Head & Neck Surgery (AAO-HNS), and the American Academy of Neurology (AAN) to develop two new codes for caloric vestibular testing, which were approved and valued through the American Medical Association's CPT Editorial Panel and Relative Value Update Committee (RUC). The new codes are effective January 1, 2016, and will replace CPT code 92543 (Caloric vestibular testing, with recording). They are

- **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)
- **92538**, Caloric vestibular test with recording, bilateral; monothermal (i.e., one irrigation in each ear for a total of two irrigations)

Despite strong objections submitted to CMS by ASHA, AAA, AAO-HNS, AAN, and the AMA, the new payment rates do not reflect the full values that were recommended to CMS. The table below shows the AMA recommendations, CMS' final decision, and the final national rates for each code. Unfortunately, audiologists will need to prepare for an overall decrease in payment for caloric irrigations.

| CPT                   | Recommended Work RVU | CMS Final Work RVU | CY2016 National Rate |
|-----------------------|----------------------|--------------------|----------------------|
| 92537 (4 irrigations) | 0.80                 | 0.60               | <b>\$40.84</b>       |
| 92538 (2 irrigations) | 0.55                 | 0.30               | <b>\$20.78</b>       |

ASHA will continue to work with other specialty stakeholders to address CMS' lack of acceptance of code values recommended through the AMA's rigorous valuation process. See [Table 1](#) of the appendix (p. 11) for the national rates for 92537 and 92538.

Additional information on the use of the new codes is available on [ASHA's reimbursement website](#).

## **“Incident to” Services**

“Incident to” services are those generally provided by auxiliary personnel under the direct supervision of a physician, and billed under the physician National Provider Identifier (NPI) as the rendering provider of the service. Medicare prohibits hearing and balance services performed by an audiologist to be billed “incident to” a physician and requires that the audiologist is a Medicare enrolled provider. The purposes of “incident to” billing is to provide services that are integral to the care provided by the physician. However, concerns regarding the provision of services by appropriately trained and supervised personnel have led to additional oversight for “incident to” billing. As a result, CMS has finalized the following language for clarity in the policy and to ensure appropriate physician supervision:

*In general, services and supplies must be furnished under the direct supervision of the physician (or other practitioner). Services and supplies furnished incident to transitional care management and chronic care management services can be furnished under general supervision of the physician (or other practitioner) when these services or supplies are provided by clinical staff. The physician (or other practitioner) supervising the auxiliary personnel need not be the same physician (or other practitioner) who is treating the patient more broadly. However, only the supervising physician (or other practitioner) may bill Medicare for incident to services to exclude all continuing education providers, rather than a select few. (Code of Federal Regulations, §410.26(b)(5))*

## **Physician Compare**

ASHA has been working closely with CMS contractor Westat in regard to the [Physician Compare website](#), the CMS provider search website intended for beneficiary use. In its comments, ASHA noted that the most recent iteration of the site, that includes audiologists, was lacking information regarding training, certification, and specialty board recognition many of our members possess. CMS indicated in response to comments that they will meet with specialty boards to determine if the data and standards are comparable to other credentialing organizations, and consider the addition of certification and specialty certification in future rules.

## **Physician Quality Reporting System (PQRS)**

PQRS applies to audiologists in private practice, group practice, university clinics, and critical access hospitals who bill under Method II and submit fee-for-service claims. It began as a voluntary incentive payment program for reporting patient data. As the program has continued, however, the incentive payment decreased was phased out for claims in 2015.

All eligible providers in private or group practices submitting Medicare Part B claims as rendering providers with Individual National Provider Identification (NPI) numbers are subject to the claims adjustment. Eligible providers will see a -2.0% adjustment to claims submitted in 2018 if they do not meet benchmark requirements in 2016.

## **Qualified Clinical Data Registeries (QCDR)**

In the 2014 final rule, CMS delineated standards for the QCDR as an additional reporting option for eligible providers. ASHA is investigating the potential development of a QCDR for audiologists, to serve as a permanent method for reporting quality and outcomes for all payers as the health care payment landscape transitions from fee-for-service to payment based on quality, outcomes, and efficiency.

## **Benchmarks for Participation**

The 2018 -2.0% payment adjustment is based on 2016 participation rates. CMS finalized the continuation of the claims-based reporting option, requiring nine measures covering at least three National Quality Strategy domains, or for eligible professionals without nine measures, reporting on as many measures that are applicable. Eligible professionals that report less than nine measures will continue to be subject to the measures applicability

validation (MAV) process, which will determine if the provider reported on the appropriate measures. The 2016 MAV process has not yet been released.

Visit ASHA's [PQRS webpage](#) for more information regarding measures and the MAV process.

### **Measures for Reporting**

Audiologists must report that they completed the positive action of the applicable measures for 50% of the qualifying Medicare patient visits:

| <b>Audiology/Ear Disorder Measures</b>       |   |
|--|---|
| Measure #261                                 | Referral for Otologic Evaluation for Patients With Acute or Chronic Dizziness         |
| <b>Medication/Preventative Care Measures</b> |   |
| Measure #130                                 | Documentation of Current Medications in the Medical Record                            |
| Measure #134                                 | Preventative Care and Screening: Screening for Clinical Depression and Follow-Up Plan |
| Measure #226                                 | Tobacco Use: Screening and Cessation Intervention                                     |
| <b>Falls Measures</b>                        |   |
| Measure #154                                 | Falls: Risk Assessment  |
| Measure #155                                 | Falls: Plan of Care   |

Measure #261 must be reported one time for the calendar year per qualifying beneficiary, based on the reported ICD-9-CM/ICD-10-CM code and CPT code combination.

Measure #130 should be reported with every Medicare patient visit. Medications should be collected at the first visit, reviewed by the audiologist, and reviewed with each subsequent visit. It is only required once per date of service on the claim with the audiology diagnostic CPT codes. Documentation of medication does not include a pharmacological review, but should include the name of the medication or supplement, dosage, frequency, and route.

Measure #134 should only be reported by audiologists covered by their state license scope of practice to perform standardized screenings and referrals for depression. Additionally, Measure #134 only applies to Medicare patients receiving a tinnitus evaluation. It must be reported with the tinnitus evaluation CPT code, 92625, one time a year.

Measure #226 requires the audiologist to ask the patient if they use tobacco products, and with affirmative answers, offer less than 3 minutes of counseling regarding the adverse effects to health. It is required once a year for the comprehensive audiology evaluation, vestibular evaluation, or tinnitus evaluation.

Measures #154 and #155 are two-part measures reported in conjunction with a vestibular evaluation. For patients that have experienced more than two falls in 24-months or one fall with an injury, it requires a balance/gait assessment along with either a vision assessment, home falls hazards counseling, medication evaluation, or postural blood pressure. For patients that have experienced more than two falls in 24-months or one fall with an injury, regardless if the risk assessment was provided, a plan of care must be documented.

For the technical specifications and instructions for each measure, see ASHA's [PQRS webpage](#).

### **Value-Based Modifier (VM)**

The value-based payment modifier is a method of including both cost and quality data for calculating payment. In 2013, the VM was applied to physicians and groups of physicians for payment adjustments starting in 2015,

Consistent with the statute, CMS proposed to apply the VM to all eligible professionals for participation in 2015 and payment adjustments in 2017. In the 2015 final rule, CMS decided to postpone the application of the VM until 2018. With the passage of the MACRA in April, CMS proposed and finalized that the VM would not apply to audiologists.



## Appendix

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## 2016 Medicare Physician Fee Schedule (MPFS) for Audiology Services

The following table contains full descriptors and national payment rates for audiology-related services. Calculations were made using the 2016 CF (\$35.8279). Please see [ASHA's Outpatient MPFS](#) website for other important information on Medicare CPT coding rules and Medicare fees calculations, including information on how to find rates by locality.

### How to Read the MPFS and RVU Tables

#### Modifiers:

**26** = "Professional component," the portion of diagnostic test that involves a physician's work and allocation of the practice expense.

**TC** = "Technical component," for diagnostic tests, the portion of a procedure that does not include a physician's participation. *The TC value is the difference between the global value and the professional component (26).*

**No Modifier** = "Global value," includes both professional and technical components.

#### N/A in Fee Columns:

**Non-Facility**—No rate established because service is typically performed in the hospital. If the contractor determines the service can be performed in the non-facility setting, it will be paid at the facility rate.

**Facility**—No rate established because service is not typically paid under the MPFS when provided in a facility setting. These services, including "incident to" and the TC portion of diagnostic tests, are generally paid under the hospital OPDS or bundled into the hospital inpatient prospective payment system. In some cases, these services may be paid in a facility setting at the MPFS rate, but there would be no payment made to the practitioner under the MPFS in these situations.

**Table 1. National Medicare Part B Rates for Audiology Services**

Audiology services are paid at both [facility and non-facility rates](#), depending on setting. Note that a separate payment system applies to hospital outpatient departments.

See also: [How to Read the MPFS and RVU Tables](#) (p. 10)

| CPT Code | Mod | Descriptor  | 2016 National Fee (\$) |          |
|----------|-----|---|------------------------|----------|
|          |     |   | Non-Facility           | Facility |
| 92516    |     | Facial nerve function studies (eg, electroneuronography)  | \$71.66                | \$23.65  |
| 92537    |     | Caloric vestibular test with recording, bilateral; bithermal (ie, one warm and one cool irrigation in each ear for a total of four irrigations)   | \$40.84                | N/A      |
| 92537    | TC  | Caloric vestibular test with recording, bilateral; bithermal  | \$8.60                 | N/A      |
| 92537    | 26  | Caloric vestibular test with recording, bilateral; bithermal  | \$32.25                | \$32.25  |
| 92538    |     | monothermal (ie, one irrigation in each ear for a total of two irrigations)   | \$20.78                | N/A      |
| 92538    | TC  | monothermal   | \$4.66                 | N/A      |
| 92538    | 26  | monothermal   | \$16.12                | \$16.12  |
| 92540    |     | Basic vestibular evaluation, includes <ul style="list-style-type: none"> <li>• spontaneous nystagmus test with eccentric gaze fixation nystagmus, with recording,</li> <li>• positional nystagmus test, minimum of 4 positions, with recording,</li> <li>• optokinetic nystagmus test, bidirectional foveal and peripheral stimulation, with recording, and</li> <li>• oscillating tracking test, with recording</li> </ul> | \$102.83               | N/A      |
| 92540    | TC  | Basic vestibular evaluation...  | \$22.21                | N/A      |
| 92540    | 26  | Basic vestibular evaluation...  | \$80.61                | \$80.61  |
| 92541    |     | Spontaneous nystagmus test, including gaze and fixation nystagmus, with recording   | \$24.36                | N/A      |
| 92541    | TC  | Spontaneous nystagmus test...   | \$3.22                 | N/A      |
| 92541    | 26  | Spontaneous nystagmus test...   | \$21.14                | \$21.14  |
| 92542    |     | Positional nystagmus test, minimum of 4 positions, with recording   | \$28.30                | N/A      |
| 92542    | TC  | Positional nystagmus test...  | \$2.87                 | N/A      |
| 92542    | 26  | Positional nystagmus test...  | \$25.44                | \$25.44  |
| 92544    |     | Optokinetic nystagmus test, bidirectional, foveal or peripheral stimulation, with recording   | \$16.84                | N/A      |
| 92544    | TC  | Optokinetic nystagmus test...   | \$2.51                 | N/A      |
| 92544    | 26  | Optokinetic nystagmus test...   | \$14.33                | \$14.33  |
| 92545    |     | Oscillating tracking test, with recording   | \$15.41                | N/A      |
| 92545    | TC  | Oscillating tracking test...  | \$2.15                 | N/A      |
| 92545    | 26  | Oscillating tracking test...  | \$13.26                | \$13.26  |

| CPT Code | Mod | Descriptor   | 2016 National Fee (\$) |                 |
|----------|-----|--|------------------------|-----------------|
|          |     |  | Non-Facility           | Facility        |
|          |     |  | <i>Non-Facility</i>    | <i>Facility</i> |
| 92546    |     | Sinusoidal vertical axis rotational testing  | \$103.90               | N/A             |
| 92546    | TC  | Sinusoidal vertical axis rotational testing  | \$88.85                | N/A             |
| 92546    | 26  | Sinusoidal vertical axis rotational testing  | \$15.05                | \$15.05         |
| 92547    |     | Use of vertical electrodes (List separately in addition to code for primary procedure)   | \$6.09                 | N/A             |
| 92548    |     | Computerized dynamic posturography   | \$103.18               | N/A             |
| 92548    | TC  | Computerized dynamic posturography   | \$76.67                | N/A             |
| 92548    | 26  | Computerized dynamic posturography   | \$26.51                | \$26.51         |
| 92550    |     | Tympanometry and reflex threshold measurements   | \$21.50                | N/A             |
| 92552    |     | Pure tone audiometry (threshold); air only   | \$31.53                | N/A             |
| 92553    |     | Pure tone audiometry (threshold); air and bone   | \$37.62                | N/A             |
| 92555    |     | Speech audiometry threshold;   | \$23.29                | N/A             |
| 92556    |     | with speech recognition  | \$37.62                | N/A             |
| 92557    |     | Comprehensive audiometry threshold evaluation and speech recognition (92553 and 92556 combined)  | \$37.98                | \$32.96         |
| 92561    |     | Bekesy audiometry; diagnostic  | \$38.34                | N/A             |
| 92562    |     | Loudness balance test, alternate binaural or monaural  | \$46.93                | N/A             |
| 92563    |     | Tone decay test  | \$31.17                | N/A             |
| 92564    |     | Short increment sensitivity index (SISI)   | \$28.30                | N/A             |
| 92565    |     | Stenger test, pure tone  | \$16.12                | N/A             |
| 92567    |     | Tympanometry (impedance testing)   | \$14.69                | \$11.11         |
| 92568    |     | Acoustic reflex testing, threshold   | \$16.12                | \$15.76         |
| 92570    |     | Acoustic immittance testing, includes tympanometry (impedance testing), acoustic reflex threshold testing, and acoustic reflex decay testing | \$32.60                | \$30.45         |
| 92571    |     | Filtered speech test   | \$27.23                | N/A             |
| 92572    |     | Staggered spondaic word test   | \$36.19                | N/A             |
| 92575    |     | Sensorineural acuity level test  | \$73.09                | N/A             |
| 92576    |     | Synthetic sentence identification test   | \$36.19                | N/A             |
| 92577    |     | Stenger test, speech   | \$16.84                | N/A             |
| 92579    |     | Visual reinforcement audiometry (VRA)  | \$42.64                | \$38.34         |
| 92582    |     | Conditioning play audiometry   | \$68.43                | N/A             |
| 92583    |     | Select picture audiometry  | \$52.67                | N/A             |
| 92584    |     | Electrocochleography   | \$74.16                | N/A             |
| 92585    |     | Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; comprehensive                        | \$136.86               | N/A             |
| 92585    | TC  | Auditory evoked potentials...comprehensive   | \$109.63               | N/A             |

| CPT Code | Mod | Descriptor  | 2016 National Fee (\$) |          |
|----------|-----|---|------------------------|----------|
|          |     |   | Non-Facility           | Facility |
| 92585    | 26  | Auditory evoked potentials...comprehensive  | \$27.23                | \$27.23  |
| 92586    |     | Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; limited   | \$86.35                | N/A      |
| 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 | \$21.86                | N/A      |
| 92587    | TC  | Distortion product evoked otoacoustic emissions...limited   | \$3.22                 | N/A      |
| 92587    | 26  | Distortion product evoked otoacoustic emissions...limited   | \$18.63                | \$18.63  |
| 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 | \$33.32                | N/A      |
| 92588    | TC  | Distortion product evoked otoacoustic emissions...comprehensive   | \$3.94                 | N/A      |
| 92588    | 26  | Distortion product evoked otoacoustic emissions...comprehensive   | \$29.38                | \$29.38  |
| 92596    |     | Ear protector attenuation measurements  | \$42.64                | N/A      |
| 92601    |     | Diagnostic analysis of cochlear implant, patient younger than 7 years of age; with programming  | \$143.31               | \$121.81 |
| 92602    |     | subsequent reprogramming  | \$90.64                | \$70.58  |
| 92603    |     | Diagnostic analysis of cochlear implant, age 7 years or older; with programming   | \$153.34               | \$124.32 |
| 92604    |     | subsequent reprogramming  | \$90.29                | \$68.79  |
| 92620    |     | Evaluation of central auditory function, with report; initial 60 minutes  | \$95.30                | \$83.84  |
| 92621    |     | each additional 15 minutes (List separately in addition to code for primary procedure)  | \$22.57                | \$19.35  |
| 92625    |     | Assessment of tinnitus (includes pitch, loudness matching, and masking)   | \$70.94                | \$63.42  |
| 92626    |     | Evaluation of auditory rehabilitation status; first hour  | \$90.64                | \$77.39  |
| 92627    |     | each additional 15 minutes (List separately in addition to code for primary procedure)  | \$22.21                | \$18.27  |
| 92640    |     | Diagnostic analysis with programming of auditory brainstem implant, per hour  | \$114.65               | \$97.09  |

**Table 2. National Medicare Part B Rates for Treatment, Electrophysiology, or Non-Benefit Services**

The procedures in this table are not billable by audiologists to Medicare, but are within the scope of practice of ASHA-certified audiologists. Medicare reimburses audiologists for hearing and balance diagnostic services; screenings, treatment, hearing aid, and electrophysiological services outside the hearing and balance systems are not recognized by Medicare when performed by an audiologist. Services in this table that are included as a Medicare benefit may be billed to Medicare when performed under the supervision of a physician and billed under the physician's National Provider Identifier (NPI) number. Services listed in [Table 1](#) that are part of the audiology benefit must be billed under the audiologists' NPI and may *not* be billed "incident to" a physician (i.e., under the physician's NPI).

| CPT Code | Mod | Descriptor  | 2016 National Fee (\$) |          | Notes   |
|----------|-----|---|------------------------|----------|---|
|          |     |   | Non-Facility           | Facility |   |
| 69209    |     | Removal impacted cerumen using irrigation/lavage, unilateral  | \$12.90                | N/A      | New in 2016. Medicare does not allow use of this code by audiologists.  |
| 69210    |     | Removal impacted cerumen requiring instrumentation, unilateral (for bilateral procedure, report 69210)  | \$50.16                | \$33.78  | Medicare does not allow use of this code by audiologists.   |
| 92531    |     | Spontaneous nystagmus, including gaze   | \$0.00                 | \$0.00   | Vestibular tests <i>without</i> recording are not covered by Medicare. See <b>92537-92548</b> in <a href="#">Table 1</a> for vestibular tests with recording. |
| 92532    |     | Positional nystagmus test   | \$0.00                 | \$0.00   |   |
| 92533    |     | Caloric vestibular test, each irrigation (binaural, bithermal stimulation constitutes 4 tests)  | \$0.00                 | \$0.00   |   |
| 92534    |     | Optokinetic nystagmus test  | \$0.00                 | \$0.00   |   |
| 92551    |     | Screening test, pure tone, air only   | \$0.00                 | \$0.00   | Screenings are not covered by Medicare.   |
| 92558    |     | Evoked otoacoustic emissions, screening (qualitative measurement of distortion product or transient evoked otoacoustic emissions), automated analysis | \$0.00                 | \$0.00   | Screenings are not covered by Medicare.   |
| 92559    |     | Audiometric testing of groups   | \$0.00                 | \$0.00   | Not covered under the audiology benefit.  |
| 92560    |     | Bekesy audiometry; screening  | \$0.00                 | \$0.00   | Screenings are not covered by Medicare.   |
| 92591    |     | Hearing aid examination and selection; binaural   | \$0.00                 | \$0.00   | Services related to hearing aids are not covered by Medicare.   |
| 92592    |     | Hearing aid check; monaural   | \$0.00                 | \$0.00   |   |
| 92593    |     | Hearing aid check; binaural   | \$0.00                 | \$0.00   |   |
| 92594    |     | Electroacoustic evaluation for hearing aid; monaural  | \$0.00                 | \$0.00   |   |
| 92595    |     | Electroacoustic evaluation for hearing aid; binaural  | \$0.00                 | \$0.00   |   |

| CPT Code | Mod | Descriptor  | 2016 National Fee (\$) |          | Notes  |
|----------|-----|---|------------------------|----------|--|
|          |     |   | Non-Facility           | Facility |  |
| 92630    |     | Auditory rehabilitation; prelingual hearing loss  | \$0.00                 | \$0.00   | Not covered under the audiology benefit.     |
| 92633    |     | Auditory rehabilitation; prelingual hearing loss  | \$0.00                 | \$0.00   | Not covered under the audiology benefit.     |
| 95907    |     | Nerve conduction studies; 1–2 studies   | \$96.74                | N/A      | Covered under the supervision of a physician |
| 95907    | TC  | ...1–2 studies  | \$42.28                | N/A      |  |
| 95907    | 26  | ...1–2 studies  | \$54.46                | \$54.46  |  |
| 95908    |     | Nerve conduction studies; 3–4 studies   | \$119.67               | N/A      | Covered under the supervision of a physician |
| 95908    | TC  | ...3–4 studies  | \$51.95                | N/A      |  |
| 95908    | 26  | ...3–4 studies  | \$67.71                | \$68.71  |  |
| 95909    |     | Nerve conduction studies; 5–6 studies   | \$146.18               | N/A      | Covered under the supervision of a physician |
| 95909    | TC  | ...5–6 studies  | \$64.49                | N/A      |  |
| 95909    | 26  | ...5–6 studies  | \$81.69                | \$81.69  |  |
| 95910    |     | Nerve conduction studies; 7–8 studies   | \$194.19               | N/A      | Covered under the supervision of a physician |
| 95910    | TC  | ...7–8 studies  | \$84.91                | N/A      |  |
| 95910    | 26  | ...7–8 studies  | \$109.28               | \$109.28 |  |
| 95911    |     | Nerve conduction studies; 9–10 studies  | \$234.67               | N/A      | Covered under the supervision of a physician |
| 95911    | TC  | ...9–10 studies   | \$98.17                | N/A      |  |
| 95911    | 26  | ...9–10 studies   | \$136.50               | \$136.50 |  |
| 95912    |     | Nerve conduction studies; 11–12 studies   | \$262.98               | N/A      | Covered under the supervision of a physician |
| 95912    | TC  | ...11–12 studies  | \$101.03               | N/A      |  |
| 95912    | 26  | ...11–12 studies  | \$161.94               | \$161.94 |  |
| 95913    |     | Nerve conduction studies; 13 or more studies  | \$300.60               | N/A      | Covered under the supervision of a physician |
| 95913    | TC  | ...13 or more studies   | \$108.92               | N/A      |  |
| 95913    | 26  | ...13 or more studies   | \$191.68               | \$191.68 |  |
| 95925    |     | Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in upper limbs | \$157.28               | N/A      | Covered under the supervision of a physician |

| CPT Code | Mod | Descriptor  | 2016 National Fee (\$) |          | Notes   |
|----------|-----|---|------------------------|----------|---|
|          |     |   | Non-Facility           | Facility |   |
| 95925    | TC  | Short-latency somatosensory evoked potential study...in upper limbs   | \$128.62               | N/A      |   |
| 95925    | 26  | Short-latency somatosensory evoked potential study...in upper limbs   | \$28.66                | \$28.66  |   |
| 95926    |     | Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in lower limbs           | \$139.01               | N/A      | Covered under the supervision of a physician                          |
| 95926    | TC  | Short-latency somatosensory evoked potential study...in lower limbs   | \$111.07               | N/A      |   |
| 95926    | 26  | Short-latency somatosensory evoked potential study...in lower limbs   | \$27.95                | \$27.95  |   |
| 95938*   |     | Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in upper and lower limbs | \$345.02               | N/A      | *Out of numerical order. Covered under the supervision of a physician |
| 95938    | TC  | Short-latency somatosensory evoked potential study...in upper and lower limbs   | \$298.09               | N/A      |   |
| 95938    | 26  | Short-latency somatosensory evoked potential study...in upper and lower limbs   | \$46.93                | \$46.93  |   |
| 95927    |     | Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in the trunk or head     | \$143.67               | N/A      | Covered under the supervision of a physician                          |
| 95927    | TC  | Short-latency somatosensory evoked potential study...in the trunk or head   | \$115.72               | N/A      |   |
| 95927    | 26  | Short-latency somatosensory evoked potential study...in the trunk or head   | \$27.95                | \$27.95  |   |
| 95930    |     | Visual evoked potential (VEP) testing central nervous system, checkerboard or flash   | \$129.34               | N/A      | Covered under the supervision of a physician                          |



| CPT Code | Mod | Descriptor  | 2016 National Fee (\$) |          | Notes  |
|----------|-----|---|------------------------|----------|--|
|          |     |   | Non-Facility           | Facility |  |
| 95930    | TC  | Visual evoked potential (VEP) testing...checkerboard or flash   | \$110.71               | N/A      |  |
| 95930    | 26  | Visual evoked potential (VEP) testing...checkerboard or flash   | \$18.63                | \$18.63  |  |
| 95937    |     | Neuromuscular junction testing (repetitive stimulation, paired stimuli), each nerve, any 1 method   | \$82.40                | N/A      | Covered under the supervision of a physician     |
| 95937    | TC  | Neuromuscular junction testing...   | \$47.29                | N/A      |  |
| 95937    | 26  | Neuromuscular junction testing...   | \$35.11                | \$35.11  |  |
| 95940    |     | Continuous intraoperative neurophysiology monitoring in the operating room, one on one monitoring requiring personal attendance, each 15 minutes (List separately in addition to code for primary procedure)                        | N/A                    | \$33.32  | Covered under the supervision of a physician     |
| 95941    |     | Continuous neurophysiology monitoring, from outside the operating room (remote or nearby) or for monitoring of more than one case while in the operating room, per hour (List separately in addition to code for primary procedure) | \$0.00                 | \$0.00   | Not covered by Medicare. <b>See G0453 below.</b> |
| G0453    |     | Continuous intraoperative neurophysiology monitoring, from outside the operating room (remote or nearby), per patient, (attention directed exclusively to one patient) each 15 minutes (list in addition to primary procedure)      | N/A                    | \$33.32  | Covered under the supervision of a physician     |
| 95992    |     | Canalith repositioning procedure(s) (e.g., Epley maneuver, Semont maneuver), per day  | \$43.71                | \$37.98  | Not covered under the audiology benefit.         |

**Table 3. Detailed Relative Value Units (RVUs) for Audiology Services**

This table contains RVUs only for those codes that are covered under the audiology benefit ([Table 1](#)). For geographically-adjusted RVUs, go to Addenda E in the [CMS CY2016 PFS Final Rule Addenda Files](#) [ZIP].

See also: [How to Read the MPFS and RVU Tables](#) (p. 10)

| CPT Code | Mod | Professional Work | Non-Facility Practice Expense | Facility Practice Expense | Malpractice | Non-Facility Total | Facility Total |
|----------|-----|-------------------|-------------------------------|---------------------------|-------------|--------------------|----------------|
| 92516    |     | 0.43              | 1.54                          | 0.19                      | 0.03        | 2.00               | 0.66           |
| 92537    |     | 0.60              | 0.51                          | N/A                       | 0.03        | 1.14               | N/A            |
| 92537    | TC  | 0.00              | 0.23                          | N/A                       | 0.01        | 0.24               | N/A            |
| 92537    | 26  | 0.60              | 0.28                          | 0.28                      | 0.02        | 0.90               | 0.90           |
| 92538    |     | 0.30              | 0.26                          | N/A                       | 0.02        | 0.58               | N/A            |
| 92538    | TC  | 0.00              | 0.12                          | N/A                       | 0.01        | 0.13               | N/A            |
| 92538    | 26  | 0.30              | 0.14                          | 0.14                      | 0.01        | 0.45               | 0.45           |
| 92540    |     | 1.50              | 1.31                          | N/A                       | 0.06        | 2.87               | N/A            |
| 92540    | TC  | 0.00              | 0.61                          | N/A                       | 0.01        | 0.62               | N/A            |
| 92540    | 26  | 1.50              | 0.70                          | 0.70                      | 0.05        | 2.25               | 2.25           |
| 92541    |     | 0.40              | 0.26                          | N/A                       | 0.02        | 0.68               | N/A            |
| 92541    | TC  | 0.00              | 0.08                          | N/A                       | 0.01        | 0.09               | N/A            |
| 92541    | 26  | 0.40              | 0.18                          | 0.18                      | 0.01        | 0.59               | 0.59           |
| 92542    |     | 0.48              | 0.28                          | N/A                       | 0.03        | 0.79               | N/A            |
| 92542    | TC  | 0.00              | 0.07                          | N/A                       | 0.01        | 0.08               | N/A            |
| 92542    | 26  | 0.48              | 0.21                          | 0.21                      | 0.02        | 0.71               | 0.71           |
| 92544    |     | 0.27              | 0.18                          | N/A                       | 0.02        | 0.47               | N/A            |
| 92544    | TC  | 0.00              | 0.06                          | N/A                       | 0.01        | 0.07               | N/A            |
| 92544    | 26  | 0.27              | 0.12                          | 0.12                      | 0.01        | 0.40               | 0.40           |
| 92545    |     | 0.25              | 0.16                          | N/A                       | 0.02        | 0.43               | N/A            |
| 92545    | TC  | 0.00              | 0.05                          | N/A                       | 0.01        | 0.06               | N/A            |
| 92545    | 26  | 0.25              | 0.11                          | 0.11                      | 0.01        | 0.37               | 0.37           |
| 92546    |     | 0.29              | 2.58                          | N/A                       | 0.03        | 2.90               | N/A            |
| 92546    | TC  | 0.00              | 2.46                          | N/A                       | 0.02        | 2.48               | N/A            |
| 92546    | 26  | 0.29              | 0.12                          | 0.12                      | 0.01        | 0.42               | 0.42           |
| 92547    |     | 0.00              | 0.17                          | N/A                       | 0.00        | 0.17               | N/A            |
| 92548    |     | 0.50              | 2.35                          | N/A                       | 0.03        | 2.88               | N/A            |
| 92548    | TC  | 0.00              | 2.13                          | N/A                       | 0.01        | 2.14               | N/A            |
| 92548    | 26  | 0.50              | 0.22                          | 0.22                      | 0.02        | 0.74               | 0.74           |
| 92550    |     | 0.35              | 0.23                          | N/A                       | 0.02        | 0.60               | N/A            |
| 92552    |     | 0.00              | 0.87                          | N/A                       | 0.01        | 0.88               | N/A            |
| 92553    |     | 0.00              | 1.04                          | N/A                       | 0.01        | 1.05               | N/A            |
| 92555    |     | 0.00              | 0.64                          | N/A                       | 0.01        | 0.65               | N/A            |
| 92556    |     | 0.00              | 1.04                          | N/A                       | 0.01        | 1.05               | N/A            |
| 92557    |     | 0.60              | 0.43                          | 0.29                      | 0.03        | 1.06               | 0.92           |
| 92561    |     | 0.00              | 1.05                          | N/A                       | 0.02        | 1.07               | N/A            |
| 92562    |     | 0.00              | 1.30                          | N/A                       | 0.01        | 1.31               | N/A            |
| 92563    |     | 0.00              | 0.86                          | N/A                       | 0.01        | 0.87               | N/A            |

| CPT Code | Mod | Professional Work | Non-Facility Practice Expense | Facility Practice Expense | Malpractice | Non-Facility Total | Facility Total |
|----------|-----|-------------------|-------------------------------|---------------------------|-------------|--------------------|----------------|
| 92564    |     | 0.00              | 0.78                          | N/A                       | 0.01        | 0.79               | N/A            |
| 92565    |     | 0.00              | 0.44                          | N/A                       | 0.01        | 0.45               | N/A            |
| 92567    |     | 0.20              | 0.20                          | 0.10                      | 0.01        | 0.41               | 0.31           |
| 92568    |     | 0.29              | 0.14                          | 0.13                      | 0.02        | 0.45               | 0.44           |
| 92570    |     | 0.55              | 0.33                          | 0.27                      | 0.03        | 0.91               | 0.85           |
| 92571    |     | 0.00              | 0.75                          | N/A                       | 0.01        | 0.76               | N/A            |
| 92572    |     | 0.00              | 1.00                          | N/A                       | 0.01        | 1.01               | N/A            |
| 92575    |     | 0.00              | 2.02                          | N/A                       | 0.02        | 2.04               | N/A            |
| 92576    |     | 0.00              | 1.00                          | N/A                       | 0.01        | 1.01               | N/A            |
| 92577    |     | 0.00              | 0.46                          | N/A                       | 0.01        | 0.47               | N/A            |
| 92579    |     | 0.70              | 0.44                          | 0.32                      | 0.05        | 1.19               | 1.07           |
| 92582    |     | 0.00              | 1.89                          | N/A                       | 0.02        | 1.91               | N/A            |
| 92583    |     | 0.00              | 1.46                          | N/A                       | 0.01        | 1.47               | N/A            |
| 92584    |     | 0.00              | 2.05                          | N/A                       | 0.02        | 2.07               | N/A            |
| 92585    |     | 0.50              | 3.28                          | N/A                       | 0.04        | 3.82               | N/A            |
| 92585    | TC  | 0.00              | 3.04                          | N/A                       | 0.02        | 3.06               | N/A            |
| 92585    | 26  | 0.50              | 0.24                          | 0.24                      | 0.02        | 0.76               | 0.76           |
| 92586    |     | 0.00              | 2.38                          | N/A                       | 0.03        | 2.41               | N/A            |
| 92587    |     | 0.35              | 0.24                          | N/A                       | 0.02        | 0.61               | N/A            |
| 92587    | TC  | 0.00              | 0.08                          | N/A                       | 0.01        | 0.09               | N/A            |
| 92587    | 26  | 0.35              | 0.16                          | 0.16                      | 0.01        | 0.52               | 0.52           |
| 92588    |     | 0.55              | 0.36                          | N/A                       | 0.02        | 0.93               | N/A            |
| 92588    | TC  | 0.00              | 0.1                           | N/A                       | 0.01        | 0.11               | N/A            |
| 92588    | 26  | 0.55              | 0.26                          | 0.26                      | 0.01        | 0.82               | 0.82           |
| 92596    |     | 0.00              | 1.17                          | N/A                       | 0.02        | 1.19               | N/A            |
| 92601    |     | 2.30              | 1.56                          | 0.96                      | 0.14        | 4.00               | 3.40           |
| 92602    |     | 1.30              | 1.16                          | 0.6                       | 0.07        | 2.53               | 1.97           |
| 92603    |     | 2.25              | 1.93                          | 1.12                      | 0.10        | 4.28               | 3.47           |
| 92604    |     | 1.25              | 1.22                          | 0.62                      | 0.05        | 2.52               | 1.92           |
| 92620    |     | 1.50              | 1.1                           | 0.78                      | 0.06        | 2.66               | 2.34           |
| 92621    |     | 0.35              | 0.27                          | 0.18                      | 0.01        | 0.63               | 0.54           |
| 92625    |     | 1.15              | 0.78                          | 0.57                      | 0.05        | 1.98               | 1.77           |
| 92626    |     | 1.40              | 1.08                          | 0.71                      | 0.05        | 2.53               | 2.16           |
| 92627    |     | 0.33              | 0.28                          | 0.17                      | 0.01        | 0.62               | 0.51           |
| 92640    |     | 1.76              | 1.37                          | 0.88                      | 0.07        | 3.20               | 2.71           |