

HEARING AID/AUDIOLOGY MAXIMUM ALLOWABLE FEE SCHEDULE

THIS IS YOUR WISCONSIN MEDICAID MAXIMUM ALLOWABLE FEE SCHEDULE, WHICH IS IN EFFECT AS OF THE DATE OF THIS REPORT. WISCONSIN MEDICAID CERTIFIED PROVIDERS WILL BE REIMBURSED FOR SERVICES PROVIDED TO PROGRAM RECIPIENTS AT THE LOWER OF THEIR USUAL AND CUSTOMARY CHARGE, OR THE MAXIMUM ALLOWABLE FEE.

SERVICES REIMBURSED BASED ON PROVIDER SPECIFIC (CONTRACTED RATES) AND REGIONAL OR SPECIALTY BASED RATES ARE NOT INCLUDED IN THIS FEE SCHEDULE.

NOTE: BADGERCARE PLUS BENCHMARK PLAN MEMBERS WILL BE COVERED FOR HEARING AID/AUDIOLOGY SERVICES.

THIS REPORT HAS BEEN MODIFIED TO INCLUDE A BENCHMARK COLUMN TO INDICATE WHICH SERVICES ARE COVERED BENEFITS FOR BENCHMARK PLAN MEMBERS.

ALTHOUGH THE FEE SCHEDULE DOES NOT ADDRESS THE VARIOUS COVERAGE LIMITATIONS ROUTINELY APPLIED BY WISCONSIN MEDICAID BEFORE FINAL PAYMENT IS DETERMINED (E.G., RECIPIENT AND PROVIDER ELIGIBILITY, BILLING INSTRUCTIONS, FREQUENCY OF SERVICES, THIRD PARTY LIABILITY, COPAYMENT, AGE RESTRICTIONS, PRIOR AUTHORIZATION, ETC.), IT DOES CONTAIN THE FOLLOWING INFORMATION:

PROC/M1/M2/TM

PROC - THE PROCEDURE CODE RECOGNIZED BY WISCONSIN MEDICAID TO IDENTIFY THE SERVICE PROVIDED.

M1/M2 - ONE OR TWO APPLICABLE MODIFIER(S) AFFECTING REIMBURSEMENT AMOUNT.

TM - DESCRIPTIVE MODIFIER USED TO CONVEY INFORMATION FORMERLY CONVEYED BY TOS.

NOTE: IN CERTAIN INSTANCES THE MODIFIER LISTED IS BEING USED BOTH TO CONVEY INFORMATION FORMERLY CONVEYED BY TOS AND TO AFFECT THE REIMBURSEMENT AMOUNT. IN THESE INSTANCES THE MODIFIER WILL BE DISPLAYED TWICE, ONCE IN THE M1 OR M2 COLUMN AND ONCE IN THE TM COLUMN, EVEN THOUGH IT WILL ONLY BE BILLED ONCE ON THE CLAIM DETAIL.

DESCRIPTION - AN ABBREVIATED DESCRIPTION OF THE PROCEDURE CODE

PROVIDER TYPE - ALL APPLICABLE PERFORMING PROVIDER TYPES FOR THE PROCEDURE CODE. SEE TABLE I FOR A LISTING OF PROVIDER TYPES APPLICABLE TO THIS SCHEDULE.

PAC - THE PRICING ACTION CODE IDENTIFIES NON-COVERED SERVICES OR THE SOURCE AND METHOD OF PRICING THE PROCEDURE (REFER TO TABLE II).

EFFECT DATE - THE EFFECTIVE DATE OF SERVICE ON OR AFTER WHICH THE MAXIMUM ALLOWABLE FEE APPLIES.

MAX FEE - MAXIMUM ALLOWABLE FEES FOR THE PROCEDURE CODES LISTED. IF A MAX FEE IS NOT INDICATED, USE THE PAC AND TABLE II TO DETERMINE THE REASON (E.G., PAC 21J INDICATES INDIVIDUAL CONSIDERATION, ETC.).

BENCHMARK - INDICATES IF A PROCEDURE CODE IS A COVERED BENEFIT FOR BADGERCARE PLUS MEMBERS ENROLLED IN THE BENCHMARK PLAN.

THIS INFORMATION IS INTENDED TO HELP YOU UNDERSTAND THE WISCONSIN MEDICAID MAXIMUM ALLOWABLE FEE SCHEDULE. IF YOU HAVE QUESTIONS, PLEASE CONTACT WISCONSIN MEDICAID PROVIDER SERVICES AT: (608) 221-9883 OR (800) 947-9627*

*WHEN REQUESTING INFORMATION, PLEASE BE SPECIFIC AS TO WHICH PROVIDER TYPE YOU ARE REFERRING (I.E., SPEECH AND HEARING CLINIC, AUDIOLOGIST, HEARING INSTRUMENT SPECIALIST).

TABLE I
PROVIDER TYPES

- 36 - SPEECH AND HEARING CLINIC
- 37 - AUDIOLOGIST
- 84 - HEARING INSTRUMENT SPECIALIST

TABLE II
PRICING ACTION CODES
(PAC)

- 11J, 21J - INDIVIDUAL CONSIDERATION, MEDICAL CONSULTANT
- 170, 270 - PAID AT THE LOWER OF THE BILLED AMOUNT OR MAXIMUM ALLOWABLE FEE ACCORDING TO PROVIDER TYPE

TABLE III
MODIFIERS

| MODIFIER | DESCRIPTION |
|----------|-----------------------------|
| RR | RENTAL |
| TC | TECHNICAL COMPONENT |
| 22 | UNUSUAL PROCEDURAL SERVICES |
| 26 | PROFESSIONAL COMPONENT |
| 52 | REDUCED SERVICES |

PROC DESCRIPTION

| PROC | M1 | M2 | TM | PROVIDER TYPE | PAC | EFFECT DATE | MAX FEE | BENCH MARK |
|-------|----|-------|----|--|-----|-------------|---------|------------|
| 31575 | | | | LARYNGOSCOPY, FLEXIBLE FIBEROPTIC; DIAGNOSTIC | | | | |
| 31575 | | 36 | | | 270 | 07/01/08 | 71.67 | Y |
| 31579 | | | | LARYNGOSCOPY, FLEXIBLE OR RIGID FIBEROPTIC, WITH STROBOSCOPY | | | | |
| 31579 | | 36 | | | 270 | 07/01/08 | 115.06 | Y |
| 69210 | | | | REMOVAL IMPACTED CERUMEN (SEPARATE PROCEDURE), ONE OR BOTH EARS | | | | |
| 69210 | | 36 37 | | | 270 | 07/01/08 | 26.01 | Y |
| 92504 | | | | BINOCULAR MICROSCOPY (SEPARATE DIAGNOSTIC PROCEDURE) | | | | |
| 92504 | | 36 37 | | | 270 | 07/01/08 | 24.10 | Y |
| 92506 | | | | EVALUATION OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PROCESSING | | | | |
| 92506 | | 36 37 | | | 270 | 07/01/08 | 57.76 | Y |
| 92507 | | | | TREATMT OF SPEECH, LANGUAGE, VOICE, COMMUN, &/OR AUDITORY PROCSSING DISORDER; INDIVIDUAL | | | | |
| 92507 | | 36 37 | | | 270 | 07/01/08 | 45.63 | Y |
| 92508 | | | | TREAT OF SPEECH, LANG, VOICE, COMMUN, A/O AUDITORY PRCSING DISORDER; 2 OR MORE INDIVIDU | | | | |
| 92508 | | 36 37 | | | 270 | 07/01/08 | 26.95 | Y |
| 92511 | | | | NASOPHARYNGOSCOPY WITH ENDOSCOPY (SEPARATE PROCEDURE) | | | | |
| 92511 | | 36 | | | 270 | 07/01/08 | 47.12 | Y |
| 92512 | | | | NASAL FUNCTION STUDIES (EG, RHINOMANOMETRY) | | | | |
| 92512 | | 36 | | | 270 | 07/01/08 | 36.38 | Y |
| 92516 | | | | FACIAL NERVE FUNCTION STUDIES (EG ELECTRONEUROGRAPHY) | | | | |
| 92516 | | 36 37 | | | 270 | 07/01/08 | 26.33 | Y |
| 92520 | | | | LARYNGEAL FUNCTION STUDIES (IE, AERODYNAMIC TESTING AND ACOUSTIC TESTING) | | | | |
| 92520 | | 36 | | | 270 | 07/01/08 | 29.58 | Y |
| 92526 | | | | TREATMENT OF SWALLOWING DYSFUNCTION AND/OR ORAL FUNCTION FOR FEEDING | | | | |
| 92526 | | 36 | | | 270 | 07/01/08 | 46.49 | Y |
| 92531 | | | | SPONTANEOUS NYSTAGMUS, INCLUDING GAZE | | | | |
| 92531 | | 36 37 | | | 270 | 07/01/08 | 58.11 | Y |
| 92532 | | | | POSITIONAL NYSTAGMUS TEST | | | | |
| 92532 | | 36 37 | | | 270 | 07/01/08 | 37.49 | Y |
| 92533 | | | | CALORIC VESTIBULAR TEST, EACH IRRIGATION (BINAURAL, BITHERMAL STIMULATION + 4 TESTS) | | | | |
| 92533 | | 36 37 | | | 270 | 07/01/08 | 24.46 | Y |
| 92534 | | | | OPTOKINETIC NYSTAGMUS TEST | | | | |
| 92534 | | 36 37 | | | 270 | 07/01/08 | 42.48 | Y |

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|-------|--|-----|----------|-------|---|--|
| 92541 | SPONTANEOUS NYSTAGMUS TEST, INCLUDING GAZE AND FIXATION | | | | | |
| 92541 | TC 36 37 | 270 | 07/01/08 | 17.21 | Y | |
| 92541 | SPONTANEOUS NYSTAGMUS TEST, INCLUDING GAZE AND FIXATION NYSTAGMUS, WITH RECORDING | | | | | |
| 92541 | 36 37 | 270 | 07/01/08 | 35.02 | Y | |
| 92542 | POSITIONAL NYSTAGMUS TEST, MINIMUM OF 4 POSITIONS, WITH RECORDING | | | | | |
| 92542 | 36 37 | 270 | 07/01/08 | 31.01 | Y | |
| 92542 | POSITIONAL NYSTAGMUS TEST, MINIMUM OF 4 POSITIONS, WITH RECORDING | | | | | |
| 92542 | TC 36 37 | 270 | 07/01/08 | 18.12 | Y | |
| 92543 | CALORIC VESTIBULAR TEST, EACH IRRIGATION (BINAURAL, BITHERMAL = 4 TESTS), W RECORDING | | | | | |
| 92543 | 36 37 | 270 | 07/01/08 | 39.68 | Y | |
| 92543 | CALORIC VESTIBULAR TEST, EACH IRRIGATION (BINAURAL, BITHERMAL), WITH RECORDING | | | | | |
| 92543 | TC 36 37 | 270 | 07/01/08 | 18.80 | Y | |
| 92544 | OPTOKINETIC NYSTAGMUS TEST, BIDIRECTIONAL, FOVEAL OR PERIPHERAL STIMULATION, W RECORDING | | | | | |
| 92544 | 36 37 | 270 | 07/01/08 | 24.01 | Y | |
| 92544 | OPTOKINETIC NYSTAGMUS TEST, BIDIRECTIONAL, FOVEAL OR PERIPHERAL STIMULATION, W RECORDING | | | | | |
| 92544 | TC 36 37 | 270 | 07/01/08 | 14.50 | Y | |
| 92545 | OSCILLATING TRACKING TEST, WITH RECORDING | | | | | |
| 92545 | 36 37 | 270 | 07/01/08 | 20.66 | Y | |
| 92545 | OSCILLATING TRACKING TEST, WITH RECORDING | | | | | |
| 92545 | TC 36 37 | 270 | 07/01/08 | 12.18 | Y | |
| 92546 | SINUSOIDAL VERTICAL AXIS ROTATIONAL TESTING | | | | | |
| 92546 | 36 37 | 270 | 07/01/08 | 26.68 | Y | |
| 92546 | SINUSOIDAL VERTICAL AXIS ROTATIONAL TESTING | | | | | |
| 92546 | TC 36 37 | 270 | 07/01/08 | 79.96 | Y | |
| 92547 | USE OF VERTICAL ELECTRODES (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | | | | | |
| 92547 | 36 37 | 270 | 07/01/08 | 18.34 | Y | |
| 92548 | COMPUTERIZED DYNAMIC POSTUROGRAPHY | | | | | |
| 92548 | 36 37 | 270 | 07/01/08 | 78.69 | Y | |
| 92548 | COMPUTERIZED DYNAMIC POSTUROGRAPHY | | | | | |
| 92548 | TC 36 37 | 270 | 07/01/08 | 47.22 | Y | |
| 92551 | SCREENING TEST, PURE TONE, AIR ONLY | | | | | |
| 92551 | 36 37 | 270 | 07/01/08 | 12.69 | Y | |
| 92552 | PURE TONE AUDIOMETRY (THRESHOLD); AIR ONLY | | | | | |
| 92552 | 36 37 | 270 | 07/01/08 | 16.57 | Y | |
| 92553 | PURE TONE AUDIOMETRY (THRESHOLD); AIR AND BONE | | | | | |
| 92553 | 36 37 | 270 | 07/01/08 | 23.34 | Y | |
| 92555 | SPEECH AUDIOMETRY THRESHOLD; | | | | | |
| 92555 | 36 37 | 270 | 07/01/08 | 14.66 | Y | |
| 92556 | SPEECH AUDIOMETRY THRESHOLD; WITH SPEECH RECOGNITION | | | | | |
| 92556 | 36 37 | 270 | 07/01/08 | 21.55 | Y | |
| 92557 | COMPREHENSIVE AUDIOMETRY THRESHOLD EVALUATION & SPEECH RECOGNITION (92553 & 92556 ONLY) | | | | | |
| 92557 | 36 37 | 270 | 07/01/08 | 38.56 | Y | |
| 92559 | AUDIOMETRIC TESTING OF GROUPS | | | | | |
| 92559 | 36 37 | 270 | 07/01/08 | 22.20 | Y | |
| 92560 | BEKESY AUDIOMETRY; SCREENING | | | | | |
| 92560 | 36 37 | 270 | 07/01/08 | 17.96 | Y | |
| 92561 | BEKESY AUDIOMETRY; DIAGNOSTIC | | | | | |
| 92561 | 36 37 | 270 | 07/01/08 | 7.25 | Y | |
| 92562 | LOUDNESS BALANCE TEST, ALTERNATE BINAURAL OR MONAURAL | | | | | |
| 92562 | 36 37 | 270 | 07/01/08 | 8.39 | Y | |
| 92563 | TONE DECAY TEST | | | | | |
| 92563 | 36 37 | 270 | 07/01/08 | 9.26 | Y | |
| 92564 | SHORT INCREMENT SENSITIVITY INDEX (SISI) | | | | | |
| 92564 | 36 37 | 270 | 07/01/08 | 8.41 | Y | |
| 92565 | STENGER TEST, PURE TONE | | | | | |
| 92565 | 36 37 | 270 | 07/01/08 | 9.09 | Y | |
| 92567 | TYMPANOMETRY (IMPEDANCE TESTING) | | | | | |
| 92567 | 36 37 | 270 | 07/01/08 | 17.20 | Y | |
| 92568 | ACOUSTIC REFLEX TESTING; THRESHOLD | | | | | |
| 92568 | 36 37 | 270 | 07/01/08 | 13.07 | Y | |
| 92569 | ACOUSTIC REFLEX TESTING; DECAY | | | | | |
| 92569 | 36 37 | 270 | 07/01/08 | 14.79 | Y | |
| 92571 | FILTERED SPEECH TEST | | | | | |

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|-------|---|-----|----------|--------|---|
| 92571 | 36 37 | 270 | 07/01/08 | 29.23 | Y |
| 92572 | STAGGERED SPONDAIC WORD TEST | | | | |
| 92572 | 36 37 | 270 | 07/01/08 | 17.52 | Y |
| 92575 | SENSORINEURAL ACUITY LEVEL TEST | | | | |
| 92575 | 36 37 | 270 | 07/01/08 | 17.52 | Y |
| 92576 | SYNTHETIC SENTENCE IDENTIFICATION TEST | | | | |
| 92576 | 36 37 | 270 | 07/01/08 | 17.52 | Y |
| 92577 | STENGER TEST, SPEECH | | | | |
| 92577 | 36 37 | 270 | 07/01/08 | 14.62 | Y |
| 92579 | VISUAL REINFORCEMENT AUDIOMETRY (VRA) | | | | |
| 92579 | 36 37 | 270 | 07/01/08 | 25.54 | Y |
| 92582 | CONDITIONING PLAY AUDIOMETRY | | | | |
| 92582 | 36 37 | 270 | 07/01/08 | 15.22 | Y |
| 92583 | SELECT PICTURE AUDIOMETRY | | | | |
| 92583 | 36 37 | 270 | 07/01/08 | 15.44 | Y |
| 92584 | ELECTROCOCHLEOGRAPHY | | | | |
| 92584 | 36 37 | 270 | 07/01/08 | 50.06 | Y |
| 92585 | AUDITORY EVOKED POTENTIAL FOR EVOKED RESPONSE AUDIOMETRY A/O TEST OF CENTRAL NERVOUS SYS | | | | |
| 92585 | 26 36 37 | 270 | 07/01/08 | 62.84 | Y |
| 92585 | AUDITORY EVOKED POTENTIAL FOR EVOKED RESPONSE AUDIOMETRY A/O TEST OF CENTRAL NERVOUS SYS | | | | |
| 92585 | 36 37 | 270 | 07/01/08 | 152.54 | Y |
| 92585 | AUDITORY EVOKED POTENTIAL FOR EVOKED RESPONSE AUDIOMETRY A/O TEST OF CENTRAL NERVOUS SYS | | | | |
| 92585 | TC 36 37 84 | 270 | 07/01/08 | 94.28 | Y |
| 92587 | EVOKED OTOACOUSTIC EMISSIONS; LIMITED (SINGLE STIMULUS LEVEL, TRANSIENT/DISTORTION PRODUCT) | | | | |
| 92587 | 36 37 | 270 | 07/01/08 | 50.03 | Y |
| 92587 | EVOKED OTOACOUSTIC EMISSIONS; LIMITED (SNGL STIMULUS LEVEL, EITHER TRANSIENT/DISTORTION) | | | | |
| 92587 | TC 36 37 84 | 270 | 07/01/08 | 48.25 | Y |
| 92588 | COMPREHENSIVE OR DIAGNOSTIC EVALUATION (COMPARISON OF TRANSIENT&/OR DISTORTION PRODUCT O | | | | |
| 92588 | 36 37 | 270 | 07/01/08 | 69.01 | Y |
| 92588 | EVOKED OTOACOUSTIC EMISSIONS; COMPREHENSIVE/DIAGNOSTIC EVALUATION (MULTI LEVELS & FREQ) | | | | |
| 92588 | TC 36 37 84 | 270 | 07/01/08 | 54.78 | Y |
| 92590 | HEARING AID EXAMINATION AND SELECTION; MONAURAL | | | | |
| 92590 | 36 37 | 270 | 07/01/08 | 23.16 | Y |
| 92591 | HEARING AID EXAMINATION AND SELECTION; BINAURAL | | | | |
| 92591 | 36 37 | 270 | 07/01/08 | 25.66 | Y |
| 92592 | HEARING AID CHECK; MONAURAL | | | | |
| 92592 | 36 37 | 270 | 07/01/08 | 15.53 | Y |
| 92593 | HEARING AID CHECK; BINAURAL | | | | |
| 92593 | 36 37 | 270 | 07/01/08 | 19.59 | Y |
| 92594 | ELECTROACOUSTIC EVALUATION FOR HEARING AID; MONAURAL | | | | |
| 92594 | 36 37 | 270 | 07/01/08 | 11.50 | Y |
| 92595 | ELECTROACOUSTIC EVALUATION FOR HEARING AID; BINAURAL | | | | |
| 92595 | 36 37 | 270 | 07/01/08 | 14.50 | Y |
| 92596 | EAR PROTECTOR ATTENUATION MEASUREMENTS | | | | |
| 92596 | 36 37 | 270 | 07/01/08 | 10.46 | Y |
| 92597 | EVAL FOR USE &/OR FITTING OF VOICE PROSTHETIC OR AUGMENTATIVE/ALTERNATIVE COMMUNICATION | | | | |
| 92597 | 36 | 270 | 07/01/08 | 72.33 | Y |
| 92601 | DIAGNOSTIC ANALYSIS OF COCHLEAR IMPLANT, PATIENT UNDER 7 YEARS OF AGE; WITH PROGRAMMING | | | | |
| 92601 | 36 37 | 270 | 07/01/08 | 113.32 | Y |
| 92602 | DIAGNOSTIC ANALYSIS OF COCHLEAR IMPLANT, PATIENT UNDER 7 YEARS OF AGE; SUBSEQUENT REPROG | | | | |
| 92602 | 36 37 | 270 | 07/01/08 | 77.67 | Y |
| 92603 | DIAGNOSTIC ANALYSIS OF COCHLEAR IMPLANT, AGE 7 YEARS OR OLDER; WITH PROGRAMMING | | | | |
| 92603 | 36 37 | 270 | 07/01/08 | 70.01 | Y |
| 92604 | DIAGNOSTIC ANALYSIS OF COCHLEAR IMPLANT, AGE 7 YEARS OR OLDER; SUBSEQUENT REPROGRAMMING | | | | |
| 92604 | 36 37 | 270 | 07/01/08 | 49.92 | Y |
| 92607 | EVAL FOR PRESCRIP FOR SPEECH-GENERATING AUGMENTATIVE & ALT COMMUN DEVICE,FACE TO FACE | | | | |
| 92607 | 36 | 270 | 07/01/08 | 60.57 | Y |
| 92608 | EVAL FOR PRESCRIP FOR SPEECH-GENERATING AUGMENTATIVE & ALT COMMUN DEVICE,FACE TO FACE | | | | |
| 92608 | 36 | 270 | 07/01/08 | 30.29 | Y |
| 92609 | THERAPEUTIC SVCS FOR THE USE OF SPEECH-GENERATING DEVICE,INCL PROGRAMMING & MODIFICATION | | | | |
| 92609 | 36 | 270 | 07/01/08 | 45.37 | Y |
| 92610 | EVALUATION OF ORAL AND PHARYNGEAL SWALLOWING FUNCTION | | | | |
| 92610 | 36 | 270 | 07/01/08 | 68.78 | Y |

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|-------|--|-----|----------|--------|---|
| 92611 | MOTION FLUOROSCOPIC EVALUATION OF SWALLOWING FUNCTION BY CINE OR VIDEO RECORDING | | | | |
| 92611 | 36 | 270 | 07/01/08 | 111.35 | Y |
| 92612 | ENDOSCOPIC STUDY OF SWALLOWING FUNCTION (ALSO FIBEROPTIC ENDOSCOPIC EVAL OF SWALLOW (FEE | | | | |
| 92612 | 36 | 270 | 07/01/08 | 132.47 | Y |
| 92614 | SENSORY TESTING DURING ENDOSCOPIC STUDY OF SWALLOWING (ADD ON CODE) REFERRED TO AS FEEST | | | | |
| 92614 | 36 | 270 | 07/01/08 | 124.41 | Y |
| 92620 | EVALUATION OF CENTRAL AUDITORY FUNCTION, WITH REPORT; INITIAL 60 MINUTES | | | | |
| 92620 | 36 37 | 270 | 07/01/08 | 37.93 | Y |
| 92621 | EVALUATION OF CENTRAL AUDITORY FUNCTION, WITH REPORT; EACH ADDITIONAL 15 MINUTES | | | | |
| 92621 | 36 37 | 270 | 07/01/08 | 9.60 | Y |
| 92625 | ASSESSMENT OF TINNITUS (INCLUDES PITCH, LOUDNESS MATCHING, AND MASKING) | | | | |
| 92625 | 36 37 | 270 | 07/01/08 | 37.29 | Y |
| 92626 | EVALUATION OF AUDITORY REHABILITATION STATUS; FIRST HOUR | | | | |
| 92626 | 36 37 | 270 | 07/01/08 | 66.05 | Y |
| 92627 | EVALUATION OF AUDITORY REHABILITATION STATUS; EACH ADDITIONAL 15 MINUTES | | | | |
| 92627 | 36 37 | 270 | 07/01/08 | 16.51 | Y |
| 92630 | AUDITORY REHABILITATION; PRE-LINGUAL HEARING LOSS | | | | |
| 92630 | 36 37 | 270 | 07/01/08 | 80.75 | Y |
| 92633 | AUDITORY REHABILITATION; POST-LINGUAL HEARING LOSS | | | | |
| 92633 | 36 37 | 270 | 07/01/08 | 80.75 | Y |
| 92700 | UNLISTED OTORHINOLARYNGOLOGICAL SERVICE OR PROCEDURE | | | | |
| 92700 | 36 | 21J | 10/01/03 | | Y |
| V5014 | REPAIR/MODIFICATION OF A HEARING AID (TO BE USED FOR MAJOR REPAIR) | | | | |
| V5014 | 36 37 84 | 170 | 10/01/04 | 129.50 | N |
| V5014 | 22 36 37 84 | 170 | 07/01/08 | 61.49 | N |
| V5014 | 52 36 37 84 | 170 | 07/01/08 | 26.79 | N |
| V5050 | HEARING AID, MONAURAL; IN THE EAR | | | | |
| V5050 | 36 37 84 | 170 | 01/01/05 | 347.75 | N |
| V5050 | HEARING AID, MONAURAL; IN THE EAR | | | | |
| V5050 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5070 | HEARING AID, MONAURAL; GLASSES; AIR CONDUCTION | | | | |
| V5070 | 36 37 84 | 170 | 07/01/08 | 334.92 | N |
| V5070 | HEARING AID, MONAURAL; GLASSES; AIR CONDUCTION | | | | |
| V5070 | RR 36 37 84 | 170 | 07/01/08 | 27.61 | N |
| V5080 | HEARING AID, MONAURAL; GLASSES; BONE CONDUCTION | | | | |
| V5080 | 36 37 84 | 170 | 07/01/08 | 334.92 | N |
| V5080 | HEARING AID, MONAURAL; GLASSES; BONE CONDUCTION | | | | |
| V5080 | RR 36 37 84 | 170 | 07/01/08 | 27.61 | N |
| V5100 | HEARING AID, BILATERAL, BODY WORN | | | | |
| V5100 | 36 37 84 | 170 | 03/01/03 | 374.18 | N |
| V5100 | HEARING AID, BILATERAL, BODY WORN | | | | |
| V5100 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5110 | DISPENSING FEE, BILATERAL | | | | |
| V5110 | 36 37 84 | 170 | 07/01/08 | 542.91 | N |
| V5120 | BINAURAL; BODY | | | | |
| V5120 | 36 37 84 | 170 | 03/01/03 | 642.27 | N |
| V5120 | BINAURAL; BODY | | | | |
| V5120 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5130 | BINAURAL; IN THE EAR | | | | |
| V5130 | 36 37 84 | 170 | 01/01/05 | 695.50 | N |
| V5130 | BINAURAL; IN THE EAR | | | | |
| V5130 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5150 | BINAURAL, GLASSES | | | | |
| V5150 | 36 37 84 | 170 | 07/01/08 | 648.69 | N |
| V5150 | BINAURAL, GLASSES | | | | |
| V5150 | RR 36 37 84 | 170 | 07/01/08 | 27.61 | N |
| V5160 | DISPENSING FEE# BINAURAL | | | | |
| V5160 | 36 37 84 | 170 | 07/01/08 | 542.91 | N |
| V5170 | HEARING AID, CROS; IN THE EAR | | | | |
| V5170 | 36 37 84 | 170 | 03/01/03 | 451.54 | N |
| V5170 | HEARING AID, CROS; IN THE EAR | | | | |
| V5170 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5190 | HEARING AID, CROS; GLASSES | | | | |

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|-------|--|-----|----------|--------|---|
| V5190 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5190 | HEARING AIDS, CROS; GLASSES. | | | | |
| V5190 | 36 37 84 | 170 | 03/01/03 | 451.54 | N |
| V5200 | DISPENSING FEE, CROS | | | | |
| V5200 | 36 37 84 | 170 | 07/01/08 | 301.62 | N |
| V5210 | HEARING AID, BICROS; IN THE EAR | | | | |
| V5210 | 36 37 84 | 170 | 03/01/03 | 571.48 | N |
| V5210 | HEARING AID, BICROS; IN THE EAR | | | | |
| V5210 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5230 | HEARING AID, BICROS; GLASSES | | | | |
| V5230 | 36 37 84 | 170 | 03/01/03 | 571.48 | N |
| V5230 | HEARING AID, BICROS; GLASSES | | | | |
| V5230 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5240 | DISPENSING FEE, BICROS | | | | |
| V5240 | 36 37 84 | 170 | 07/01/08 | 542.91 | N |
| V5241 | DISPENSING FEE, MONAURAL HEARING AID, ANY TYPE | | | | |
| V5241 | 36 37 84 | 170 | 07/01/08 | 301.62 | N |
| V5242 | HEARING AID, ANALOG, MONAURAL, CIC (COMPLETELY IN THE EAR CANAL) | | | | |
| V5242 | 36 37 84 | 170 | 03/01/03 | 331.60 | N |
| V5242 | HEARING AID, ANALOG, MONAURAL, CIC (COMPLETELY IN THE EAR CANAL) | | | | |
| V5242 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5243 | HEARING AID, ANALOG, MONAURAL, ITC (IN THE CANAL) | | | | |
| V5243 | 36 37 84 | 170 | 03/01/03 | 331.60 | N |
| V5243 | HEARING AID, ANALOG, MONAURAL, ITC (IN THE CANAL) | | | | |
| V5243 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5244 | HEARING AID, DIGITALLY PROGRAMMABLE, ANALOG, MONAURAL, CIC | | | | |
| V5244 | 36 37 84 | 170 | 03/01/03 | 377.67 | N |
| V5244 | HEARING AID, DIGITALLY PROGRAMMABLE, ANALOG, MONAURAL, CIC | | | | |
| V5244 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5245 | HEARING AID, DIGITALLY PROGRAMMABLE, ANALOG MONAURAL, ITC | | | | |
| V5245 | 36 37 84 | 170 | 03/01/03 | 377.67 | N |
| V5245 | HEARING AID, DIGITALLY PROGRAMMABLE, ANALOG MONAURAL, ITC | | | | |
| V5245 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5248 | HEARING AID, ANALOG, BINAURAL, CIC | | | | |
| V5248 | 36 37 84 | 170 | 03/01/03 | 642.27 | N |
| V5248 | HEARING AID, ANALOG, BINAURAL, CIC | | | | |
| V5248 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5249 | HEARING AID, ANALOG, BINAURAL, ITC | | | | |
| V5249 | 36 37 84 | 170 | 03/01/03 | 642.27 | N |
| V5249 | HEARING AID, ANALOG, BINAURAL, ITC | | | | |
| V5249 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5250 | HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, BINAURAL, CIC | | | | |
| V5250 | 36 37 84 | 170 | 03/01/03 | 755.34 | N |
| V5250 | HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, BINAURAL, CIC | | | | |
| V5250 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5251 | HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, BINAURAL, ITC | | | | |
| V5251 | 36 37 84 | 170 | 03/01/03 | 755.34 | N |
| V5251 | HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, BINAURAL, ITC | | | | |
| V5251 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5254 | HEARING AID, DIGITAL, MONAURAL, CIC | | | | |
| V5254 | 36 37 84 | 170 | 07/01/07 | 312.00 | N |
| V5254 | HEARING AID, DIGITAL, MONAURAL, CIC | | | | |
| V5254 | RR 36 37 84 | 170 | 03/01/03 | 27.34 | N |
| V5264 | EAR MOLD/INSERT, NOT DISPOSABLE, ANY TYPE | | | | |
| V5264 | 36 37 84 | 170 | 07/01/08 | 43.01 | N |
| V5267 | HEARING AID SUPPLIES/ACCESSORIES | | | | |
| V5267 | 36 37 84 | 170 | 07/01/08 | 27.47 | N |
| V5273 | ASSISTIVE LISTENING DEVICE, FOR USE WITH COCHLEAR IMPLANT | | | | |
| V5273 | 36 37 84 | 170 | 07/01/08 | 178.93 | N |
| V5274 | ASSISTIVE LEARNING DEVICE, NOT OTHERWISE SPECIFIED | | | | |
| V5274 | 36 37 84 | 170 | 07/01/08 | 178.93 | N |
| V5274 | ASSISTIVE LEARNING DEVICE, NOT OTHERWISE SPECIFIED | | | | |
| V5274 | RR 36 37 84 | 170 | 07/01/08 | 27.61 | N |

| | | | | | |
|-------|--|-----|----------|---------|---|
| V5275 | EAR IMPRESSION, EACH | | | | |
| V5275 | 36 37 84 | 170 | 07/01/08 | 20.20 | N |
| V5298 | HEARING AID, NOT OTHERWISE CLASSIFIED | | | | |
| V5298 | 36 37 | 170 | 07/01/08 | 2615.90 | N |
| V5299 | HEARING SERVICE, MISCELLANEOUS | | | | |
| V5299 | 36 37 84 | 11J | 03/01/99 | | N |
| V5336 | REPAIR/MODIFICATION OF AUGMENTATIVE COMMUNICATIVE SYSTEM OR DEVICE (EXCL ADAPTIVE HEARIN | | | | |
| V5336 | 36 | 11J | 02/23/98 | | Y |

END OF REPORT