

## Internal Medicine Coding Alert

### Reader Question: Use 92553 for Presbycusis Treatment

**Question:** How should we report audiometry treatment for presbycusis? Also, which diagnosis codes can we use?

Idaho Subscriber

**Answer:** For audiometry, you have several coding options: 92552 (Pure tone audiometry [threshold]; air only), 92553 (... air and bone), 92555 (Speech audiometry threshold;), and 92556 (... with speech recognition). But if your internist performs both 92553 and 92556 during the same visit, you should report 92557 (Comprehensive audiometry threshold evaluation and speech recognition [92553 and 92556 combined]).

Your first option for diagnosis codes should be 388.01 (Presbycusis). Make sure to avoid using 389.9 (Unspecified hearing loss), because insurers may deny those claims.

Also, your internist should use diagnosis codes based on the patient's presbycusis type. For example, most patients' presbycusis results from sensorineural hearing loss (389.1x), which is an inner-ear disorder of the cochlea or auditory nerve. Sometimes patients have presbycusis because of a conductive hearing disorder (389.0x), meaning that the loss results from outer- or middle-ear problems.