

Part B Insider (Multispecialty) Coding Alert

INTERNAL MEDICINE: Earn Extra Dollars For Certain Hearing Services

Here's how one procedure could put \$50 in your pocket

Don't miss out on reimbursement because you believe audiologic codes belong exclusively to ENTs and audiologists.

Reality: "CPT doesn't restrict these codes to any particular physicians," says **Debbie Abel, AuD**, audiologist at **Northern Arizona Speech and Hearing Center** in Sedona, AZ and owner of **Alliance Audiology** in Alliance, OH. And that means internists or their office staff may perform several hearing services including screenings, pure tone audiometry and speech recognition--and your practice still gets paid.

Do this: Check state licensure and insurer regulations before billing audiology services. While some states and payors have limitations, others may allow licensed technicians to perform hearing tests under physician supervision and bill the service as incident-to, says **Bruce Rappoport, MD, CPC**, a board-certified internist who works with physicians on compliance, documentation, coding and quality issues for **Rachlin, Cohen & Holtz LLP** in Fort Lauderdale, FL.

Important: Hearing services must also be medically necessary, as indicated with an appropriate ICD-9 code, Rappoport says. "Coders should check with payors to see what is and what is not covered," he says.

Coverage limitations apply more often to diagnostic tests than to screening services, so knowing how to distinguish these key differences is crucial. You can differentiate a screening exam from a diagnostic hearing test with two factors: 1) the equipment and 2) the service's purpose.

When your internist performs a general population preventive or job-related screening, you should assign code 92551 (Screening test, pure tone, air only), says **Rudy Tacoronti, MD**, director of occupational medicine for **DeKalb Health Systems** in Decatur, GA.

Threshold tests (92552-92557), however, are much more complex. For instance, they require specialized equipment. The internist must use an audiometer that can adjust the decibel level down to zero and measure multiple frequencies. Reporting a screening test (92551) instead of a threshold exam (92552-92557) can mean the difference between \$0 and almost \$50.

Note: Because a screening test is a preventive service, Medicare does not cover 92551.

Benefit: Threshold payment is easier to come by. Codes 92552-92556 are diagnostic tests. Therefore, Medicare covers the exams and pays from \$15.92 to \$49.65 per test.