

MEDICAID BILLING FOR CPT CODES

05.23.2005

State Medicaid programs that allow audiologists to bill independently: CPT codes that they can bill and receive reimbursement for no matter what the amount.

STATE	COMMENTS
AL	<p>In Alabama, audiologists can bill for all their services. I am not sure if APD testing is covered but most others services are. We are required to have two numbers - one number relates to audiological services, while the other number relates to hearing aid purchase, repairs, earmolds, batteries, etc. If you need specific CPT codes, please get back to me - I did not have time to pull that this afternoon but did want to respond.</p> <p>Pat LaCoste</p>
FL	<p>Florida DID cover most of the CPT codes for diagnostic testing, and audiologists could bill with physician referral. Due to budget shortfalls, all adult Medicaid audiology services were cut last year. Now in Florida, only children's hearing aid services and infant hearing screening services are covered.</p> <p>Fred Rahe</p>
GA	<p>I am attaching the provider manual for CIS (children's intervention services) for Georgia Medicaid, also called Peachcare, Medicaid specifically for children in Georgia. An audiologist that is enrolled in CIS as a provider can bill for many services that are listed on page 25 & 26 of the attached manual, which is in PDF format. Audiologists cannot be paid for diagnostics performed on adults in Georgia. Doctors that do not do any audiological testing can be paid for diagnostics but not audiologists when testing adults.</p> <p>Roger F. Clem</p>
IL	<p>When I first came here audiologists could only bill IDPA for 4 codes. We changed that a few years ago and we can now bill 24 CPT codes for any age patient. About the only things we can't bill for directly are vestibular code and the new ABR code that differentiates between screening and diagnostic ABR because the new ABR code came out after we opened all the new codes. We haven't been able to get any more changes on codes because of the state budget deficit even though it wouldn't change the amount they actually pay-just whom they pay it to.</p> <p>Kathy Campbell</p>
MA	<p>Massachusetts Audiologists can bill medicaid directly for all audiology codes for both children and adults. To my knowledge there are no restrictions.</p> <p>Dierdre Anderson Au.D. Audiology Network Services</p>
ME	<p>The short answer is audiologists can bill independently and be reimbursed for services for adults and children. Children are defined under 21.</p> <p>The longer answer is Maine Medicaid currently uses different codes for audiology services performed by an audiologist with an independent provider number and those billed under a physician. If services are billed under a</p>

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	<p>physician, (but typically performed by the audiologist, like when I worked at an ENT practice) the typical HCFA CPT codes 92557, 92567, 92588 etc are used for billing and reimbursement is based on these fee for service codes. If these same services, Air, bone, speech, discrim, tymps and comprehensive OAE's are performed and billed by an audiologist using an independent provider number, then we use HCFA Common Procedure Coding System (HCPCS) Level II and Level III codes that are based on units of time. For example, 6040 1/4 hour increment, "audiologic diagnostic services at physician's request"... or 6015 "Hearing and/or Hearing aid periodic recheck 1/4 hour." If our assessment takes 45 minutes, then three units are billed. I am not aware of a limit regarding the number of times a provider can be reimbursed for services within a given time frame.</p> <p>There are two kinds of Medicaid in Maine. Primecare is a managed care plan. No referral is needed for regular Mainecare. With Primecare, all services must have a written referral issued for services to be covered for adults or children. These referrals either specify a period of time, 6 months for example, or a specific number of visits, typically three, with an additional date that the referral expires.</p> <p>If medicaid is the primary insurance, the provider is reimbursed for services for both children and adults. If a patient has Medicaid as a secondary insurance, Medicaid only pays in certain circumstances. For example, if Medicare is the primary insurance and the audiologic evaluation is not covered under Medicare, such as for the purpose of getting a hearing aid, I don't believe Medicaid covers it either. If a primary insurance carrier pays more than the Medicaid allowed rate, then the Medicaid does not pay. Because of the discrepancy between how independent audiologists bill for audiologic services (HCPCS) vs. services billed under a physician (traditional CPT), it makes it challenging to collect the amount not covered by a primary payer. As of March 2005 audiologists were supposed be able to bill using traditional CPT codes. This has not gone into effect yet.</p> <p>For most services independent audiologists are reimbursed \$11.75 per 1/4 hour unit, and \$23.50 per 1/2 hour unit. Aural Rehab (Speech reading etc) is reimbursed at \$7.80 per 1/4 hour unit and \$15.60 per 1/2 hour unit.</p> <p>Hearing aid services are only provided for children under 21. Binaural hearing aids are available for children with prior authorization but reimbursement never exceeds \$400 per hearing aid, plus time increments for the services related to fitting and follow up for the hearing aid. I was under the impression Medicaid only paid invoice cost including shipping, but recently another audiologist told me Medicaid will pay any amount you request prior</p>

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	<p>authorization for, up to \$400. This is unclear to me. Ear molds for hearing aids are paid over and above the hearing aid and are generally reimbursed at \$25 per mold. It doesn't matter if your invoice exceeds \$25, Medicaid will only pay \$25. Hearing aid repairs exceeding \$50 require prior authorization and are authorized at the actual invoice amount to the best of my knowledge. Speech and Hearing Clinics... I believe, are reimbursed a minimally higher rate for some services, including ear molds. I am not certain what makes you eligible to be a speech and hearing clinic, but know that I in private audiology only practice am not eligible.</p> <p>There is one other exception for hearing aid eligibility by an adult. It is so difficult to meet the criteria, I hardly know what they are.. but believe eligibility is linked to a spend down (pt contribution before eligible for Medicaid) and must reside in a nursing facility or group home. I'm not sure of the details. It is virtually impossible to get reimbursed.</p> <p>Carolyn Gaiero, AuD Hearing Solutions Belfast, ME 04915</p>
MI	<p>In Mississippi, Audiology services for Medicaid recipients is for 21 and under only.</p> <p>Judy Hammack</p>
MN	<p>In Minnesota, I know of no audiologists that have difficulty in billing Medicaid for any audiology services, including hearing instruments (what they pay is another matter). I personally have never experienced any problems whatsoever. Medicaid is a federal program and should have nationally published guidelines for coding and reimbursement. It is my understanding that the determination of who can perform what test should not be up to any individual state. It seems as if there should be a place within federal guidelines that can be referenced to show the state of Kentucky this.</p> <p>John Coverstone</p>
MO	<p>Missouri is restricted to physician referral only for adults - and adults are covered only for Air/Bone/Speech 92557 (\$20) and tympanometry (\$4.25).</p> <p>Children are much less restrictive - we do not have to have physician referral and the procedures cover all basic audiology, including OAE. I believe ABR may be by physician referral - I do not deal with ABR, but I do know that we have been reimbursed for OAE (screening and diagnostic).</p> <p>Steve Brown, AuD President - Missouri Academy of Audiology</p>
NC	<p>NC can only bill for children</p>

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	Jill Howard
NE	<p>In Nevada, audiologists may apply for and receive a provider number independent of a physician. They can bill and (attempt to) collect for assessments and hearing aids. Here is the link to the page http://dhcfp.state.nv.us.</p> <p>The column on the left includes "Rates", which might be helpful. Also the "Manuals" portion includes the "Services" manual - audiology is in several sections there. Medicaid will pay hearing aid specialists for hearing aids but not hearing tests, which is half right!</p> <p>Susan Lloyd, Au.D. University of Nevada,</p>
NJ	<p>In New Jersey, a private practice audiologist has never been able to (and probably in the future will never be able to) bill Medicaid for diagnostic services. Just hearing aid services (one aid every three years but repairs and other minor repairs at any time). I've been practicing in NJ since 1977 - the law hasn't changed. They still reimburse \$175.00 over single unit price (also unchanged in 28 years).</p> <p>Audiologists who work in ENT offices will do diagnostic tests but the physician does the billing.</p> <p>Bob DiSogra Freehold, NJ</p>
OH	<p>Ohio does NOT allow private practice audiologists to bill independently for diagnostic procedures. Audiologists may bill Medicaid for just hearing aids, earmolds, and batteries.</p> <p>An audiologist can bill Medicaid for diagnostic procedures via a physician's billing # as long as that physician was onsite or unless they are at a rehab facility.</p> <p>Debbie Abel, Au.D.</p> <p>In Ohio, private practitioners can bill Medicaid for hearing aids only (durable medical equipment) and dispensing fees. Only "Clinics" such as Speech & Hearing Centers, physician's offices and hospitals can bill for diagnostic services.</p> <p>Erin L. Miller, Au.D. Board Certified in Audiology Neuro-Communication Services, Inc. Youngstown, Ohio 44512 330-726-8155</p>

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	<p>FAX 330-726-8612 auderin@zoominternet.net</p> <p>In Ohio, private practice audiologists cannot bill for both diagnostics and hearing aids. If you are set up as a hearing aid provider then the diagnostics need to be done elsewhere or you eat the cost. Speech and hearing centers can bill for both.</p> <p>Helene Levenfus</p>
TN	<p>Private practice audiologists who are providers can bill TennCare (TN medicaid) for diagnostic and rehabilitative services. Hearing aids are restricted to patients under the age of 21.</p> <p>Reed Norwood, AuD Board Certified in Audiology amsi@citlink.net</p>
TX	<p>In Texas, Medicaid recipients under the age of 21 are eligible for audiological evaluations, OAE's, ABR, hearing aid evals, hearing aids and earmolds through the Texas Department of State Health Services. An ENT evaluation is required, but contracted audiologists can bill and be paid for services as individual providers. At the present time audiologists cannot be paid for 92557, 92567 & 92568 for adults age 21 through 65, with the exception of certain adults in this age range who have both Medicaid and Medicare (due to a special handicap). A physician's (any specialty) is required, and audiologists are paid directly. There is no Medicaid coverage for hearing aids for adults, although there are two bills before the Texas Legislature, which would restore this benefit. For other adults who are 65 and over who have both Medicaid as well as Medicare, audiologists can bill and be paid for 92557, 92567 & 92568; however, there is no hearing aid benefit. A physician's (any specialty) recommendation is required and audiologists are paid directly.</p> <p>Todd H. Porter, AuD</p> <p>In Texas, audiologists may not bill Medicaid for any services unless billing incident to a physician. Both the Texas Academy of Audiology and the Texas Speech-Language-Hearing Association have communicated with Texas Medicaid about this issue, and are awaiting a response from the medical director of Medicaid</p> <p>Phillip L. Wilson, Au.D., CCC/A Vice President of Professional Issues Texas Academy of Audiology (214) 905-3036</p>

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VT	<p>In the state of Vermont I can bill for the following codes:</p> <p>92551 Screen Ac 92552 Audiometry Ac 92553 " " Ac/Bc 92555 " " SRT 92566 SrT/Discrim 92567 Comprehensive 92566 Impedance 92568 tymps</p> <p>Robert Hartenstein</p>
WI	<p>Wisconsin audiologists are reimbursed all the audiology CPT codes 92551-92599 plus the V5000 hearing aid codes; all are subject to physician referral to document medical necessity. The reimbursement rate is drastically reduced from usual and customary; often 30-40 cents on the dollar. The reimbursement schedules are available at http://dhfs.wisconsin.gov/medicaid/audiology_37/index.htm</p> <p>Meredy Hase, Au.D. Doctor of Audiology President Hearing Services Limited Waukesha, Wisconsin 53186-1683 Voice: 262-547-2227 Fax: 262-547-5222 Website: www.oh2hear.com E-mail: meredy@execpc.com</p>
WY	<p>Wyoming lets all audiologist's bill independently and for all ages, they even cover hearing aids. We can bill the same CPT codes that we do for medicare and other insurances.</p> <p>Shane Hunsaker Wyoming State Leader</p>