

New Hearing Device Services Codes At a Glance Effective 1-1-2026

CPT Code	CPT Long Descriptor
92628	Evaluation for hearing aid candidacy, unilateral or bilateral, including review and integration of audiologic function tests, assessment, and interpretation of hearing needs (eg, speech-innoise, suprathreshold hearing measures), discussion of candidacy results, counseling on treatment options with report, and, when performed, assessment of cognitive and communication status; first 30 minutes
	(Do not report 92628 in conjunction with 92631, 92632, 92636, 92637, 92642)
	(Do not report 92628 in conjunction with 92622, 92623, 92626, 92627, if performed on the same ear)
00000	(For hearing testing, see 92550-92588)
+92629	each additional 15 minutes (List separately in addition to code for primary procedure) (Use 92629 in conjunction with 92628)
92631	Hearing aid selection services, unilateral or bilateral, including review of audiologic function tests and hearing aid candidacy evaluation, assessment of visual and dexterity limitations, and psychosocial factors, establishment of device type, output requirements, signal processing strategies and additional features, discussion of device recommendations with report; first 30 minutes
	(Do not report 92631 in conjunction with 92628, 92629, 92636, 92637, 92642)
	(Do not report 92631 in conjunction with 92622, 92623, 92626, 92627, if performed on the same ear)
+92632	each additional 15 minutes (List separately in addition to code for primary procedure)
	(Use 92632 in conjunction with 92631)
92634	Hearing aid fitting services, unilateral or bilateral, including device analysis, programming, verification, counseling, orientation, and training, and, when performed, hearing assistive device, supplemental technology fitting services; first 60 minutes (Do not report 92634 in conjunction with 92636, 92637, 92642)
+92635	each additional 15 minutes (List separately in addition to code for primary procedure)
102000	(Use 92635 in conjunction with 92634)
92636	Hearing aid post-fitting follow-up services, unilateral or bilateral, including confirmation of physical fit, validation of patient benefit and performance, sound quality of device, adjustment(s) (eg, verification, programming adjustment[s], device connection[s], and device training), as indicated, and, when performed, hearing assistive device, supplemental technology fitting services; first 30 minutes (Do not report 92636 in conjunction with 92628, 92629, 92631, 92632, 92634, 92635, 92642)
+92637	each additional 15 minutes (List separately in addition to code for primary procedure) (Use 92637 in conjunction with 92636)

+92638	Behavioral verification of amplification including aided thresholds, functional gain, speech in noise, when performed (List separately in addition to code for primary procedure)
	(Use 92638 in conjunction with 93634, 92636)
	(Do not include the time for 92638 within the overall time used for reporting 92634, 92636)
+92639	Hearing-aid measurement, verification with probe-microphone (List separately in addition to code for primary procedure)
	(Use 92639 in conjunction with 92634, 92636)
	(Do not include the time for 92639 within the overall time used for reporting 92634, 92636)
	(For unilateral procedure, report 92639 with modifier 52)
92641	Hearing device verification, electroacoustic analysis
	(Do not include the time for 92641within the overall time used for reporting 92634, 92636)
	(For unilateral procedure, report 92641 with modifier 52)
92642	Hearing assistive device, supplemental technology fitting services (eg, personal frequency modulation [FM]/digital modulation [DM] system, remote microphone, alerting devices)
	(Do not report 92642 in conjunction with 92631, 92632, 92634, 92635, 92636, 92637, 92638, 92639)