

PROVIDER BULLETIN

Volume 45 Number 14

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July 29, 2022

RATE UPDATE FOR AUDIOLOGY SERVICES

Applies to: AUDIOLOGY PROVIDERS

Effective date: 07/01/2022

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- **Maximum Allowable Rate Increase**
 - **Unit and Maximum Quantity Changes**
 - **Applicability**
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Maximum Allowable Rate Increase

Pending Centers for Medicare & Medicaid Services (CMS) approval, effective for dates of service on and after July 1, 2022, the MO HealthNet Division (MHD) will increase the fee-for-service maximum allowable rates for audiology services listed in Attachment A. Upon approval of the State Plan amendment by CMS, MHD will update the claims processing system with the indicated maximum allowable reimbursement rates and reprocess claims paid for dates of service on or after July 1, 2022.

Attachment A lists the affected procedure codes and the new rates.

Unit and Maximum Quantity Changes

Effective July 1, 2022, MHD is aligning procedure codes for audiology services with CMS' Medically Unlikely Edits (MUEs) resulting in a change to the maximum quantity for some audiology procedure codes. The maximum quantity allowed amount for each code is listed in Attachment A.

Applicability

The information in this bulletin applies to the MO HealthNet (MHD) fee-for-service program and may apply to the MHD managed care program, as well. MHD's fee-for-service policies set the basic coverage policies for benefits and limitations in the managed care program. The managed care health plans have additional flexibilities in operating their respective programs, such as determining which services require prior authorization, and details required for claims submission. Certain services, such as pharmacy, are "carved out" of managed care and will be paid through the fee-for-service program. To ensure your understanding of this bulletin's

applicability to each managed care health plan, please contact your health plan directly, or contact MHD.MCCommunications@dss.mo.gov.

Provider Bulletins are available on the MO HealthNet Division (MHD) website at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD website at <http://dss.mo.gov/mhd/> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the MO HealthNet card or by calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the MO HealthNet ID card.

Provider Communications Hotline
573-751-2896

Attachment A

Procedure Code	Description	Maximum Quantity	Rate as of 7/1/22
92507 TM	SPEECH/HEARING THERAPY	1	\$65.67
92507	SPEECH/HEARING THERAPY	1	\$65.67
92517 TM	VEMP TEST I&R CERVICAL	1	\$58.43
92517	VEMP TEST I&R CERVICAL	1	\$58.43
92518 TM	VEMP TEST I&R OCULAR	1	\$54.99
92518	VEMP TEST I&R OCULAR	1	\$54.99
92519 TM	VEMP TST I&R CERVICAL&OCULAR	1	\$90.79
92519	VEMP TST I&R CERVICAL&OCULAR	1	\$90.79
92540	BASIC VESTIBULAR EVALUATION	1	\$94.81
92541	SPONTANEOUS NYSTAGMUS TEST	1	\$21.76
92542	POSITIONAL NYSTAGMUS TEST	1	\$24.98
92544	OPTOKINETIC NYSTAGMUS TEST	1	\$15.36
92545	OSCILLATING TRACKING TEST	1	\$14.48
92546	SINUSOIDAL ROTATIONAL TEST	1	\$106.35
92547	SUPPLEMENTAL ELECTRICAL TEST	1	\$8.90
92550 TM	TYMPANOMETRY & REFLEX THRESH	1	\$19.14
92550	TYMPANOMETRY & REFLEX THRESH	1	\$19.14
92552 TM	PURE TONE AUDIOMETRY AIR	1	\$28.40
92552	PURE TONE AUDIOMETRY AIR	1	\$28.40
92553 TM	AUDIOMETRY AIR & BONE	1	\$34.43

92553	AUDIOMETRY AIR & BONE	1	\$34.43
92555 TM	SPEECH THRESHOLD AUDIOMETRY	1	\$21.51
92555	SPEECH THRESHOLD AUDIOMETRY	1	\$21.51
92556 TM	SPEECH AUDIOMETRY COMPLETE	1	\$33.86
92556	SPEECH AUDIOMETRY COMPLETE	1	\$33.86
92557 22	COMPREHENSIVE HEARING TEST	1	\$32.19
92557 TM	COMPREHENSIVE HEARING TEST	1	\$32.19
92557	COMPREHENSIVE HEARING TEST	1	\$32.19
92562 TM	LOUDNESS BALANCE TEST	1	\$39.02
92562	LOUDNESS BALANCE TEST	1	\$39.02
92563 TM	TONE DECAY HEARING TEST	1	\$26.96
92563	TONE DECAY HEARING TEST	1	\$26.96
92565 TM	STENGER TEST PURE TONE	1	\$16.05
92565	STENGER TEST PURE TONE	1	\$16.05
92567 TM	TYMPANOMETRY	1	\$14.19
92567	TYMPANOMETRY	1	\$14.19
92568 TM	ACOUSTIC REFL THRESHOLD TST	1	\$13.36
92568	ACOUSTIC REFL THRESHOLD TST	1	\$13.36
92570 TM	ACOUSTIC IMMITANCE TESTING	1	\$28.14
92570	ACOUSTIC IMMITANCE TESTING	1	\$28.14
92572 TM	STAGGERED SPONDAIC WORD TEST	1	\$34.71
92572	STAGGERED SPONDAIC WORD TEST	1	\$34.71
92577 TM	STENGER TEST SPEECH	1	\$15.77
92577	STENGER TEST SPEECH	1	\$15.77
92579 TM	VISUAL AUDIOMETRY (VRA)	10	\$39.44
92579	VISUAL AUDIOMETRY (VRA)	10	\$39.44
92582 TM	CONDITIONING PLAY AUDIOMETRY	1	\$65.41
92582	CONDITIONING PLAY AUDIOMETRY	1	\$65.41
92583 TM	SELECT PICTURE AUDIOMETRY	1	\$42.76
92583	SELECT PICTURE AUDIOMETRY	1	\$42.76
92584 TM	ELECTROCOCHLEOGRAPHY	1	\$98.19
92584	ELECTROCOCHLEOGRAPHY	1	\$98.19
92601	COCHLEAR IMPLT F/UP EXAM <7	1	\$139.77
92602	REPROGRAM COCHLEAR IMPLT <7	1	\$88.35
92603	COCHLEAR IMPLT F/UP EXAM 7/>	1	\$130.84
92604	REPROGRAM COCHLEAR IMPLT 7/>	1	\$78.85
92620 TM	AUDITORY FUNCTION 60 MIN	99	\$78.08
92620	AUDITORY FUNCTION 60 MIN	99	\$78.08
92621 TM	AUDITORY FUNCTION + 15 MIN	99	\$18.88
92621	AUDITORY FUNCTION + 15 MIN	99	\$18.88
92626 TM	EVAL AUD FUNCJ 1ST HOUR	16	\$75.51

92626	EVAL AUD FUNCJ 1ST HOUR	16	\$75.51
92627 TM	EVAL AUD FUNCJ EA ADDL 15	16	\$17.72
92627	EVAL AUD FUNCJ EA ADDL 15	16	\$17.72
92651 TM	AEP HEARING STATUS DETER I&R	1	\$75.51
92651	AEP HEARING STATUS DETER I&R	1	\$75.51
92652 TM	AEP THRSHLD EST MLT FREQ I&R	1	\$99.02
92652	AEP THRSHLD EST MLT FREQ I&R	1	\$99.02