

DIAGNOSTIC TESTING	Code	DIAGNOSIS
Audiometry for Hearing Aid (BC/BS)	31531	SPEECH-LANGUANGE DISORDER
Comprehensive Audiometry	31534	SPEECH AND LANG DEVELOPMENTAL DELAY DUE TO HEARING LOSS
Screening Test, Pure Tone, Air Only	31539	ARTICULATION DISORDER
Pure Tone Audiometry, Air Only	340	MULTIPLE SCLEROSIS
Pure Tone Audiometry, Air & Bone	38181	EUSTACHIAN TUBE DYSFUNCTION
Speech Audiometry Threshold w/ Speech Discrmination	3829	OTITIS MEDIA, UNSPECIFIED
Speech Audiometry Threshold	38420	TM PERFORATION, UNSPECIFIED
Tympanometry	38600	UNSPECIFIED MENIERE'S DISEASE
Acoustic Reflex Testing	38610	PERIPHERAL VERTIGO UNSPECIFIED
Visual Reinforced Audiometry	38611	BEN PAROXYSMAL POSITIONAL VERTIGO
Conditioned Play Audiometry	38612	VESTIBULAR NEURONITIS
ENG 1 Spontaneous Nystagmus	3862	VERTIGO OF CENTRAL ORIGIN
ENG 2 Positional Nystagmus	38630	UNSPECIFIED LABYRINTHITIS
ENG 3 Caloric Vestibular Tests x _____	3879	UNSPECIFIED OTOSCLEROSIS
ENG 4 Optokinetic Nystagmus	38811	ACOUSTIC TRAUMA TO EAR
ENG 5 Oscillating Tracking	38812	NOISE-INDUCED HEARING LOSS
ABR/BSER/BEAR testing	3882	UNSPECIFIED SUDDEN HEARING LOSS
OAE Testing, Limited	38830	UNSPECIFIED TINNITUS
OAE Testing, Comprehensive	38840	UNSPEC ABNORMAL AUDITORY PERCEPTION
NC Hearing Screening	38842	HYPERACUSIS
SERVICES		
Office Visit, Established Patient, Minimal problem	38844	OTH ABN AUDITRY PERCEPT RECRUITMENT
Office Visit, Established Patient	38845	ACQUIRED AUDITORY PROCESSING DISORDER
Office Visit, New Patient	3885	DISORDERS OF ACOUSTIC NERVE
Hearing Aid Check 1 monaural	38860	UNSPECIFIED OTORRHEA
Hearing Aid Check 2 binaural	38870	UNSPECIFIED OTALGIA
Hearing Aid Exam 1 monaural	3888	OTHER DISORDERS OF EAR
Hearing Aid Exam 2 binaural	3889	UNSPECIFIED DISORDER OF EAR
Dispensing Fee	38905	CONDUCTIVE HEARING LOSS, UNILATERAL
Earmold Impression Fee	38906	CONDUCTIVE HEARING LOSS, BILATERAL
SVC (charge) _____	38915	SENSORINEURAL HEARING LOSS, UNILATERAL
SVC (charge) _____	38916	SENSORINEURAL HEARING LOSS, ASYMMETRICAL
NC Demonstration	38918	SENSORINEURAL HEARING LOSS, BILATERAL
NC EM Remake/ Adjust	38921	MIXED HEARING LOSS, UNILATERAL
NC HA / EM Fitting	38922	MIXED HEARING LOSS, BILATERAL
NC HA CK Adj/Rep	3898	OTHER SPECIFIED FORMS HEARING LOSS
NC HA Consultation	3899	UNSPECIFIED HEARING LOSS
NC Pick up Repair	758	DOWN'S SYNDROME
Six Month Check	7804	DIZZINESS
Two Week Check	78342	LATE TALKER
REPAIR SERVICE		
Repair 1 yr. Starkey + C	9609	POISONING BY UNSPECIFIED ANTIBIOTICS
Repair Starkey Add'l Prog. + P	V192	FAMILY HISTORY
Repair Starkey Add'l Digital + D	V7211	HEARING EXAMINATION FOLLOWING FAILED HEARING SCREENING
Starkey 1 year warranty Recase Refaceplate	V7212	ENCOUNTER FOR HEARING CONSERVATION AND TREATMENT
Repair Phonak - Conventional Programmable Digital	V7219	OTHER EXAMINATION OF EARS AND HEARING
Supplies Misc		
Tube Change Std. Thick		
Clean Hearing Aid		
Battery Door Replaced L R ITC ITE CIC		
Faceplate ReGlued		
Warranty Extension 1 year		
Warranty Extension 2 years		
Softcoat/Build-up Aid		
Earmold L R Lucite Silicone JB1000		
Batteries PowerOne 6 pk 10/___ 312/___ 13/___ 675/___		
01 B-Day 02 New HA 03 Courtesy 04 Promo 06 Bad 07 HCl		

VISA MC DISCOVER CHECK #

CASH FILE INSURANCE OTHER _____

CHARGE: _____

PAYMENT: _____

PATIENT NAME: _____

1 - No Loss	R	L	AU
2 - Mild	R	L	AU
3 - Moderate	R	L	AU
4 - Severe	R	L	AU
5 - Profound	R	L	AU
6 - Unaidable	R	L	AU
Incomplete Test	R	L	AU
Did not test	R	L	AU
Sensorineural	R	L	AU
Conductive	R	L	AU
Mixed	R	L	AU
Other	R	L	AU