

Hearing Aid Services Codes

Revised: [May 24, 2023](#)

Hearing Aid Services Codes		
Code	Description	Notes
L8690	Auditory osseointegrated device, includes all internal and external components – use for Baha® system	<p><u>Authorization</u> is always required for the following:</p> <ul style="list-style-type: none"> Auditory osseointegrated devices Non-contract hearing aids, plus related parts and accessories and dispensing fees Replacement aids within a five-year period
L8691	Auditory osseointegrated device, external sound processor, excludes transducer/actuator, replacement – use for Baha®	
L8692	Auditory osseointegrated device, external sound processor, used without osseointegration, body worn, includes headband or other means of external attachment – use for Baha®	
L8693	Auditory osseointegrated device, abutment, any length, replacement only	Repairs over \$400
L8694	Auditory osseointegrated device, transducer/actuator replacement	V5020 is billable during the 90-day hearing aid trial period.
V5020	Conformity Evaluation	V5090 requires a description.
V5030	Monaural, body worn, air conduction	
V5040	Monaural, body worn, bone conduction	
V5050	Monaural, in the ear (ITE)	
V5060	Monaural, behind the ear (BTE)	
V5070	Hearing aid in glasses, air conduction	
V5080	Hearing aid in glasses, bone conduction	
V5090	Dispensing fee, unspecified hearing aid – use when dispensing FM system or vibrotactile device	
V5100	Hearing aid, bilateral, body worn	
V5110	Dispensing fee, bilateral	
V5130	Binaural, ITE	V5274 requires an attachment with a description; use only if a more appropriate code is not available.
V5140	Binaural, BTE	
V5150	Hearing aid in glasses, binaural	
V5190	Hearing aid, contralateral routing, monaural, glasses	
V5230	Hearing aid, contralateral routing system, binaural,	
V5246	Monaural ITE, digitally programmable analog	
V5252	Binaural ITE, digitally programmable	
V5273	Assistive listening device, for use with cochlear implant	
V5274	Assistive listening device, not otherwise specified (use for vibrotactile devices and pocket talkers)	
V5298	Hearing aid, not otherwise classified	
V5120	Binaural, on-the-body	*In-the-canal aids (ITC) are not covered benefits.
V5171	Contralateral routing device, monaural, ITE	
V5172	Contralateral routing device, monaural, in the canal (ITC)*	
V5181	Contralateral routing device, monaural, BTE	
V5211	Contralateral routing system, binaural, ITE/ITE	
V5212	Contralateral routing system, binaural, ITE/ITC*	
V5213	Contralateral routing system, binaural, ITE/BTE	
V5214	Contralateral routing system, binaural, ITC/ITC*	
V5215	Contralateral routing system, binaural, ITC/BTE*	
V5221	Contralateral routing system, binaural, BTE/BTE	

V5247	Monaural BTE, digitally programmable analog	
V5253	Binaural BTE, digitally programmable	
V5256	Monaural ITE, digital	
V5257	Monaural BTE, digital	
V5260	Binaural ITE, digital	
V5261	Binaural BTE, digital	
V5160	Dispensing fee, binaural	One dispensing fee allowed per five calendar years for adults, 21 years and older.
V5200	Dispensing fee, contralateral, monaural	
V5240	Dispensing fee, contralateral routing system, binaural	
V5241	Dispensing fee, monaural hearing aid, any type	
V5266	Battery for use in hearing device (standard batteries only)	Include three standard batteries when dispensing hearing aid(s). Maximum 36 batteries allowed for each 90-day period.
V5267	Hearing aid supplies and accessories, not otherwise specified (use for rechargeable batteries, telecoils, tubes, ear hooks, receivers and other accessories)	Attachment with description required; include manufacturer's invoice or retail cost (MSRP) of the supply or accessory. Do not add service or labor charges when billing this code. Bill services on a separate line.
V5264	Ear mold/insert, not disposable, any type	
V5275	Ear impression, each	
V5281	Assistive listening device, personal FM/DM system, monaural, (1 receiver, transmitter, microphone), any type	Assisted listening devices (ALD) do not require authorization. A claim attachment is required when billing ALD systems V5281 or V5282. List the HCPCS codes, model numbers and contracted prices of the individual components and bill the total amount. Do not bill more than one individual ALD/FM component with HCPCS codes V5283 – V5290 together on the same claim; they will deny due to NCCI conflicts. These codes are only appropriate for dispensing the item in isolation (for example, as a replacement).
V5282	Assistive listening device, personal FM/DM system, binaural, (2 receivers, transmitter, microphone), any type	
V5283	Assistive listening device, personal FM/DM neck, loop induction receiver	
V5284	Assistive listening device, personal FM/DM, ear level receiver	
V5285	Assistive listening device, personal FM/DM, direct audio input receiver	
V5286	Assistive listening device, personal blue tooth FM/DM receiver	
V5287	Assistive listening device, personal FM/DM receiver, not otherwise specified	
V5288	Assistive listening device, personal FM/DM transmitter assistive listening device	
V5289	Assistive listening device, personal FM/DM adapter/boot coupling device for receiver, any type	
V5290	Assistive listening device, transmitter microphone, any type	
V5299	Miscellaneous hearing aid servicing	Attachment with description required to identify the service (labor only). Use for: ear wax removal and cleaning not associated with a

		hearing aid check; Hearing aid maintenance: ear hook, receiver and tube changes, etc. Use for other services that do not have a more specific HCPCS code.
V5011	Hearing aid checks or reprogramming performed by a hearing aid dispenser. Cannot be billed with 92592 and 92593. Refer to the Audiology Service Thresholds when service is performed by an audiologist.	<p>Four hearing aid checks allowed per calendar year. May not be billed during the 90-day trial period.</p> <p>Claims with DOS 90 days after the dispensing date will deny.</p> <p>Monaural hearing aid check: bill 1 unit with LT or RT modifier.</p> <p>Binaural hearing aid check: on same claim, bill one unit with LT modifier and one unit with RT modifier.</p>
V5014	Repair/modification of a hearing aid. Use for labor only, do not include cost of hardware	Attachment with description required. Use for both in-house repairs (replacing battery door, shell modification or other minor repairs), and repairs sent to manufacturer (include manufacturer's invoice.)

Additional Resources

[Electronic claim attachments](#) webpage

[Authorization](#) section under Provider Basics in the Minnesota Health Care Programs (MHCP) Provider Manual

[MN-ITS 837P](#)

[MHCP Provider Resource Center](#)