

## Audiology Services Procedure Codes

Revised: [January 6, 2026](#)

CPT Code	Description	Notes
92517	Vestibular evoked myogenic potential testing, with interpretation and report; cervical	
92518	Vestibular evoked myogenic potential testing, with interpretation and report; ocular	
92519	Vestibular evoked myogenic potential testing, with interpretation and report; cervical and ocular	
92531 – 92547	Audiologic Function Tests	No limit; bill 1 treatment session per test
92550 – 92557		
92562 – 92588		
92558		
92601	Analysis and programming of inner ear implant (younger than 7 years)	
92602	Analysis and reprogramming of inner ear implant (younger than 7 years)	
92603	Analysis and programming of inner ear implant (7 years or older)	
92604	Analysis and reprogramming of inner ear implant (7 years or older)	
92620	Evaluation of hearing function brain responses, first hour	
92621	Evaluation of hearing function brain responses, each additional 15 minutes	
92622	Diagnostic analysis, programming, and verification of an auditory osseointegrated sound processor, any type; first 60 minutes	
92623	Diagnostic analysis, programming, and verification of an auditory osseointegrated sound processor, any type; each additional 15 minutes	
92625	Evaluation of hearing ringing in ear	
92596	Measurement of adequacy of hearing protection device	1 treatment session per calendar year, any combination of codes
92597	Evaluation and use and/or fitting of voice prosthetic device to supplement oral speech	
92650	Auditory evoked potentials; screening of auditory potential with broadband stimuli; automated analysis	
92651	Auditory evoked potentials; for hearing status determination, broadband stimuli; with interpretation and report	
92652	Auditory evoked potentials; for threshold estimation at multiple frequencies, interpretation, and report	
92653	Auditory evoked potentials; neurodiagnostic with interpretation and report	
92700	Other procedure on ear, nose, or throat	Requires description

	bilateral, including review and integration of audiologic function tests, assessment, and interpretation of hearing needs (for example, speech-in-noise, 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	
92629	Each additional 15 minutes (List separately in addition to code for primary procedure)	Up to 4 units per calendar year.  Must use 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	1 treatment session per calendar year.  Do not report 92631 with 92628, 92629, 92636, 92637, 92642  Do not report 92631 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)	Up to 4 units per calendar year.  Must use 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	1 treatment session per calendar year.  Do not report 92634 with 92636, 92637, 92642
92635	Each additional 15 minutes (List separately in addition to code for primary procedure)	Up to 4 units per calendar year.  Must use 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) (for example, 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 bill during 90 day trial period.  Up to 4 treatment sessions per calendar year.  Do not report 92636 with 92628, 92639, 92631, 92632, 92634, 92635, 92642
92637	Each additional 15 minutes (List separately in addition to code for primary procedure)	Must use with 92636  Up to 8 units per calendar year.
92638	Behavioral verification of amplification including	Up to 4 treatment

	aided thresholds, functional gain, speech-in-noise, when performed (List separately in addition to code for primary procedure)	sessions per calendar year. Must use with 92634 or 92636 Not time based
92639	Hearing-aid measurement, verification with probe-microphone (List separately in addition to code for primary procedure)	Up to 4 treatment sessions per calendar year. Must use with 92634 or 92636 Not time based
92641	Hearing device verification, electroacoustic analysis	Up to 4 treatment sessions per calendar year. Not time based
92642	Hearing assistive device, supplemental technology fitting services (for example, personal frequency modulation [FM]/digital modulation [DM] system, remote microphone, alerting devices)	Up to 4 treatment sessions per calendar year. Do not report with 92631, 92632, 92634, 92635, 92636, 92637, 92638, 92639 Not time based

**Note:** Each modality equals one treatment session.