

Air Conduction Hearing Aids



Medicaid Medical Coverage Policy

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Description

Hearing loss (HL) results in partial or total inability to hear sound in one or both ears. One or more parts of the auditory system can be the cause, including the outer ear, middle ear, inner ear, auditory nerve or brain. HL may result from genetic defects, congenital malformations, disease, infection, toxicity, trauma or as a natural result of aging. The impact of untreated HL goes beyond limiting the ability to communicate. The risk of dementia, depression, cardiovascular disease and falls has been associated with untreated HL.⁴

Types of hearing loss:

- **Conductive hearing loss** – occurs when sound cannot efficiently pass through the outer or middle ear (eg, earwax buildup, ear infections, eardrum perforation)
- **Sensorineural hearing loss (SNHL)** – caused by damage to the cochlea (inner ear) or the auditory nerve (eg, age-related hearing loss, noise exposure)
- **Mixed hearing loss** – a combination of conductive and SNHL

Air conduction hearing aids – wearable, battery-powered devices that amplify sound. Hearing aids do not restore hearing to normal levels but improves hearing.¹² Typically, an individual may need up to four weeks

to become accustomed to hearing aids. Several visits with an audiometrist may be needed to adjust sound-processing settings with digital devices.

Hearing aid styles for selection:

- Behind the ear (BTE)
- In the ear (ITE)
- In the canal (ITC)

Auditory rehabilitation — Auditory (or aural) rehabilitation is defined as sensory management, instruction, perceptual training and counseling for hearing impairment. Auditory rehabilitation includes interventions such as active listening training, speech reading and communication enhancement. Specific examples include education on reading facial expressions or lip contours of speakers, interpreting contextual cues such as posture to overcome fast speech and addressing environmental factors by ensuring adequate lighting or phasing out competing sound sources. These treatments are usually administered through one-on-one training, as well as in the group setting.¹⁵

Coverage Determination

Humana members may be eligible under the Plan for **air conduction hearing aids (V5211, V5212, V5213, V5214, V5215, V5221)** when the following indications have been met:

- Referred to a licensed audiologist^{3,4,5}; **AND**
- Comprehensive clinical history, including auditory history^{4,5,11}; **AND**
- Physical examination of the ear including^{5,11}:
 - Pneumoscapy; **AND**
 - Pure tone testing at the frequencies of 250, 500, 1000, 2000, 4000 and 8000hz (**92590, 92591, 92593**); **AND**
 - Air and bone conduction testing; **AND**
 - Weber and Rinne tests to distinguish between conductive from SNHL; **AND**
- Audiogram testing with HL of 10 decibels (dB) over two to three frequencies^{4,12}; **AND**
- HL is classified as **ONE** of the following:
 - Conductive hearing loss^{4,5,10,11,13}; **OR**
 - SNHL^{4,5,10,11,13}; **OR**
 - Mixed hearing loss^{4,5,10,11,13}; **AND**

- Audiometrist or hearing aid specialist for hearing aid selection and fitting^{3,4,11} (eg, aided soundfield threshold, assessment signal, gain verification, occlusion effect, output verification, physical fit, verification of special features); **AND**
- Follow-up with an audiologist to assure the fit of the hearing aids and ear mold^{3,4,14}

Coverage Limitations

Humana members may **NOT** be eligible under the Plan for **auditory rehabilitation (92630, 92633)**. This is considered not medically necessary.¹⁵

A review of the current medical literature shows that the **evidence is insufficient** to determine that this service is standard medical treatment. There is an absence of current, widely-used treatment guidelines or acceptable clinical literature examining benefit and long-term clinical outcomes establishing the value of this service in clinical management.

Coding Information

Any codes listed on this policy are for informational purposes only. Do not rely on the accuracy and inclusion of specific codes. Inclusion of a code does not guarantee coverage and/or reimbursement for a service or procedure.

| CPT® Code(s) | Description | Comments |
|---------------------------|--|----------|
| 92590 | Hearing aid examination and selection; monaural | |
| 92591 | Hearing aid examination and selection; binaural | |
| 92593 | Hearing aid check; binaural | |
| 92630 | Auditory rehabilitation; prelingual hearing loss | |
| 92633 | Auditory rehabilitation; postlingual hearing loss | |
| CPT® Category III Code(s) | Description | Comments |
| No code(s) identified | | |
| HCPCS Code(s) | Description | Comments |
| V5211 | Hearing aid, contralateral routing system, binaural, ITE/ITE | |
| V5212 | Hearing aid, contralateral routing system, binaural, ITE/ITC | |
| V5213 | Hearing aid, contralateral routing system, binaural, ITE/BTE | |
| V5214 | Hearing aid, contralateral routing system, binaural, ITC/ITC | |
| V5215 | Hearing aid, contralateral routing system, binaural, ITC/BTE | |
| V5221 | Hearing aid, contralateral routing system, binaural, BTE/BTE | |

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Change Summary

08/05/2025 New Policy.