Cochlear[®] Auditory Osseointegrated Implant Systems



For audiologists, surgeons and surgical facilities

Surgical implantation of the Auditory Osseointegrated Implant Systems (AOI)

The codes in this section may be reported by both the surgeon and the surgical facility (ASC/hospital).

Code	When performing procedure
69714	Implantation, osseointegrated implant skull; with percutaneous attachment to external speech processor
69716	Implantation, osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor within the mastoid and/or resulting in removal of less than 100 mm ² surface area of bone deep to the outer cranial cortex
69717	Replacement (including removal of existingdevice), osseointegrated implant, skull; with percutaneous attachment to external speech processor
69719	Replacement (including removal of existing device), osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor, within the mastoid and/or involving a bony defect less than 100 mm ² surface area of bone deep to the outer cranial cortex
69726	Removal, osseointegrated implant, skull; with percutaneous attachment to external speech processor
69727	Removal, entire osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor, within the mastoid and/or involving a bony defect less than 100 mm ² surface area of bone deep to the outer cranial cortex
69728	Removal, entire osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor, outside the mastoid and involving a bony defect greater than or equal to 100 mm ² surface area of bone deep to the outer cranial cortex
69729	Implantation, osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor, outside of the mastoid and resulting in removal of greater than or equal to 100 mm ² surface area of bone deep to the outer cranial cortex

69730	Replacement (including removal of existing
	device), osseointegrated implant, skull; with
	magnetic transcutaneous attachment to
	external speech processor, outside the mastoid
	and involving a bony defect greater than or
	equal to 100 mm ² surface area of bone deep
	to the outer cranial cortex

69799 Unlisted procedure, middle ear

Auditory osseointegrated implant systems

Typically only reported by the surgical facility providing the device.

Medicare defines auditory osseointegrated implants as prosthetic devices and guides ASCs to bill as follows¹:

Prosthetic Devices: Payment for implantable prosthetic devices without OPPS pass-through status is included in the ASC payment for the covered surgical procedure. ASCs may not bill separately for implantable devices without OPPS pass-through status.

Code:	When providing device or service
L8690	Auditory osseointegrated system, including all internal and external components
L8699	Prosthetic implant, not otherwise specified.

Auditory osseointegrated implant abutment

L8693 Auditory osseointegrated device abutment, any length, replacement only

Revenue codes

Revenue codes are used only for hospital/ASC claims.

Code	When providing device or service
0278	Medical/surgical supplies and other implants
0360	Operating room services – general

Modifiers

Add Modifier when a claim reports the following situations:

51	Multiple procedures
52	Reduced services
58	Staged or related procedure or service by the same physician or other qualified health care professional during the postoperative period
59	Distinct Procedural Service
76	Repeat procedure or service by same physician or other qualified health care professional

Note: Payers have differing rules on proper use of modifiers. Consult your payers to confirm policies.

EXAMPLE FACILITY BILLING SCENARIOS

Surgical implantation of the Auditory Osseointegrated Implant Systems (AOI)

To appropriately identify the service performed, please refer to the section "Surgical Implantation of the Auditory Osseointegrated Implant Systems" above and adjust 697XX accordingly.

Code/Modifier: AOI systems implant	
697xx	Surgical placement of the AOI System Implant
L8690	Auditory osseointegrated system, including all internal and external components
Code/Mo	difier: Two-Stage AOI systems implant
697xx-52	Stage 1: Surgical placement of the AOI System Implant
L8690	Auditory osseointegrated system, including all internal and external components
697xx-52, -58	Stage 2 within 90 days of stage 1
697xx-52	Or, Stage 2 more than 90 days after stage 1
Code/Modifier: AOI Implantation with second "sleeper" fixture	
697xx	Surgical placement of the AOI System Implant
1.0600	Auditory appointograted system including

L8690	Auditory osseointegrated system, including all internal and external components
697xx-52, -59	Surgical placement of the AOI "sleeper" implant
L9900	Orthotic and prosthetic supply, accessory, and/or service component of another HCPCS "1" code

Magnet removal/replacement

- **CPT 20670** Removal of implant; superficial, (e.g., buried wire, pin or rod)(separate procedure)
- CPT 69799 Unlisted procedure, middle ear
- CPT 92700 Unlisted otorhinolaryngological service or procedure
- L9900 Orthotic and prosthetic supply, accessory, and/or service component of another HCPCS "1" code

Audiologist/professional services

The codes in this section may be reported by audiologists and other licensed clinicians for services related to pre- and post-operative analysis and rehabilitation of AOI patients. This list is not intended to be comprehensive of all services that may be offered to AOI patients.

CodeWhen performing procedur92521Evaluation of speech fluency92522Evaluation of speech sound provision92523Evaluation of speech sound provision92524Behavioral and qualitative analysion92524Behavioral and qualitative analysion92525Tympanometry and reflex thression92550Tympanometry and reflex thression92551Screening test, pure tone, air or92552Pure tone audiometry threshold92553Pure tone audiometry threshold92555Speech audiometry threshold92556Speech audiometry threshold or recognition92557Comprehensive audiometry threshold or recognition92568Acoustic reflex testing; threshold92570Acoustic immittance testing, in tympanometry (impedance testing, and acoustic reflex threshold testing and acoustic reflex decay testing92582Conditioning play audiometry92583Select picture audiometry92584Electrocochleography92626Evaluation of auditory function implanted device(s) candidacy or status of a surgically implanted first hour92627Evaluation of auditory function implanted device(s) candidacy or status of a surgically implanted first hour	
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	or postoperative
status of a surgically implanted each additional 15 minutes	or postop <mark>erative</mark>
92630 Auditory rehabilitation; pre-ling	ual hearing loss
92633 Auditory rehabilitation; post-lin	gual hearing loss

Post operative services

Code	When performing procedure
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 (list separately in addition to code for primary procedure)
92700	Unlisted otorhinolaryngological service or procedure - may apply if 92622 is less than 31 min threshold

Medicare billing notes

Medicare limits reimbursement for the services below as noted. Commercial and Medicaid plans' guidelines vary from plan to plan.

The following codes are not payable by Medicare when billed by an audiologist: 92522, 92523, 92524, 92551, 92630, 92633

92626 & Payable when billed by an audiologist 92627 or an SLP **92630 &** Not payable by Medicare for any providers. 92633 Medicare instructs providers to bill 92507 instead

Remote Care services

For more specific information related to Remote Assist and telehealth options, please reference CAM HE 033_G: Reimbursement Considerations for Cochlear™ Remote Care Solutions

For this and more reimbursement related resources, please visit: www.cochlear.us/reimbursementhub

Auditory osseointegrated external supplies and repairs

Repair and replacement codes in this section may require a DME license when not provided as part of a surgical procedure. Check with your local payer if DME billing requirements are unknown.

Code	When providing device or service
L8691	Auditory osseointegrated device, external sound processor, excludes transducer/actuator, replacement only, each
L8694	Auditory osseointegrated device, transducer/ actuator, replacement only, each
L9900	Supply, accessory and/or service component of another HCPCS L code

Baha[®] Softband and SoundArc[™]

Code	When providing device or service
L8692	Auditory osseointegrated device, external sound processor, used without osseointegration, body worn, includes headband or other means of external attachment (Softband or SoundArc with sound processor) Baha Softband System or Baha SoundArc System
L9900	Orthotic and prosthetic supply, accessory, and/ or service component of another HCPCS "L" code (replacement headband only)



800 587 6910 codingsupport@cochlear.com www.cochlear.us/reimbursementhub

1. Medicare Claims Processing Manual; Chapter 14-Ambulatory Surgical Centers; 10.4 Coverage of Services in ASCs That Are Not ASC Facility Services of Covered Ancillary Services: Prosthetic Devices.

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