

AUDIOLOGY

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HYPERACUSIS PATIENT MANAGEMENT PROGRAM

Thank you for contacting the UCSF Audiology Division. Enclosed you will find information regarding the Hyperacusis Patient Management Program at UCSF. The purpose of this program is to establish an individualized hyperacusis management plan designed for your particular needs. It is our belief that hyperacusis patients are best served by a comprehensive, multidisciplinary approach. Therefore, in order to ensure that all appropriate diagnostic test procedures have been completed, we request that all hyperacusis patients seen in this program have been seen, or are scheduled to be seen, by an otologist. In addition, because of the psychological impact of hyperacusis it is quite possible that we will recommend a consultation with a behavioral health specialist. The behavioral health specialist we commonly work with is Dr. Linda Centore, RN, Ph.D. (415-502-6301). If you need a referral to an otologist or ENT specialist, you may phone the UCSF ENT Clinic (415-353-2757).

Because it is important to determine whether your hyperacusis is related to a treatable or a systemic condition, we strongly urge that you have had a recent complete physical examination including laboratory tests designed to identify vascular, renal, and autoimmune disorders, as well as radiologic studies designed to identify benign growths.

If you have not had an audiological evaluation in the past six months, please notify the receptionist when making your appointment so that sufficient time can be scheduled to include this during your appointment here.

Included in this packet is a Hyperacusis Intake Form. Please fill this out and fax or mail it, along with any audiological records, prior to your appointment, or bring them with you to the appointment.

At your appointment, you will be educated about current theories of hyperacusis, as well as treatment and management procedures, including potential advantages and limitations. These procedures are listed on subsequent pages in this packet.

Please be aware that the success of any Hyperacusis management approach depends on your interaction and active participation.

Most insurance companies will not cover the costs for tinnitus counseling. The self-pay fee for the initial session is approximately \$300. This fee does not cover the cost of hearing aids, earplugs, and/or electronic sound generating devices. If additional tests are required, they will be billed to insurance, if coverage is available and if authorization has been obtained.

If you belong to a Health Maintenance Organization (HMO), it is your responsibility to obtain written authorization from your insurance company for the following procedures. If your insurance company does not cover any or all of these procedures, or if you have not obtained pre-authorization for each procedure, you will be expected to pay in full at the time of your appointment.

The insurance CPT codes that your visit may cover for your first visit include:

92626 Evaluation of auditory rehabilitation status/hyperacusis – 1st hour

This procedure encompasses the initial evaluation seeking the cause of the hyperacusis as well as the severity and nature of the hyperacusis and the patient's difficulty coping with the symptom.

92627 Evaluation of auditory rehabilitation status/hyperacusis – each add'l 15 minutes

This procedure encompasses the initial evaluation seeking the cause of the hyperacusis as well as the severity and nature of the hyperacusis and the patient's difficulty coping with the symptom.

92625 Tinnitus Matching

This test matches the loudness and pitch of tinnitus (if it exists) to externally generated stimuli

In addition, if you have not had a hearing test within the past three months, you may need to request authorization for the following tests which would be conducted on an “as needed” basis:

92557 Comprehensive Audiological Evaluation

This extensive audiological testing assesses hearing sensitivity and provides a basis for hyperacusis measurements and management.

92567 Tympanometry

This test measures the pressure-compliance function of the middle-ear system to assist in ruling out middle-ear pathology.

92568 Acoustic Reflex Thresholds

This test measures the contraction of the stapedius muscle in response to sound. It is used as part of the battery to rule out middle ear and auditory nerve dysfunction.

92587 Otoacoustic Emissions-Limited

These tests assess cochlear outer hair-cell function to assist in identifying location of auditory pathology.

For follow up visits, you should request authorization for the following procedure:

92633 Auditory rehabilitation/ hyperacusis– post-lingual (not covered by Medicare)

Various therapeutic and rehabilitative efforts directed toward retraining the brain's perception can be employed to lessen the impact of hyperacusis. These may include further counseling or repetitive auditory exercises designed to emphasize certain regions of the auditory system. This procedure is generally used following initial evaluation.

92630 Auditory rehabilitation/ hyperacusis– pre-lingual (not covered by Medicare)

Various therapeutic and rehabilitative efforts directed toward retraining the brain's perception can be employed to lessen the impact of tinnitus. These may include further counseling or repetitive auditory exercises designed to emphasize certain regions of the auditory system. This procedure is generally used following initial evaluation.

Hearing aids, hearing aid exams, earplugs, earmolds, and/or electronic sound generator devices are not paid by Medicare and are generally not covered by insurance, and must be paid for upon delivery. When appropriate, codes for these devices include:

92591

Hearing Aid Exam and Selection

When hearing loss is present, wearable amplification is known to assist hyperacusis patients by 1) expanding the dynamic range of loudness expected by the central auditory nervous system, and 2) reducing stress and fatigue created by the extra effort required to listen for effective communication.

V5130-5160

Hearing Aids

Speak with the audiologist to receive the exact code for the specific hearing aid arrangement prescribed.

V5267 or V5264

Custom Ear Plugs

Extremely high levels of sound should be avoided. These special custom earplugs assist in protecting the ears by attenuating loud noise. It is NOT advisable to wear earplugs or earmuffs when around sounds of normal loudness.

V5274 or 92700

Sound generators -- Binaural

Sound generators are wearable therapeutic devices that provide a background of non-masking "white" noise. They are designed to assist the hyperacusis habituation process over a period of approximately two years. These devices are neither maskers nor hearing aids and should not be regarded as either by insurance carriers. Sound generators, or other acoustic stimulators are designed to expand an artificially reduced dynamic range. This process has been shown to facilitate retraining of the auditory system to recalibrate loudness perception. Some carriers cover the costs of these therapeutic devices, which assist in converting a condition previously requiring a lifetime of frustrating management into one that should cease being an issue in the patient's life after a finite amount of time, usually under two years. Because of the rich crossover network in the central auditory system, habituation devices are almost always recommended binaurally even though the tinnitus may be perceived in only one ear.

PLEASE INFORM THE RECEPTIONIST IF YOU ARE INVOLVED IN ANY LEGAL ACTION. WE MAY NOT BE ABLE TO ACCEPT YOU AS A PATIENT IN THESE CASES

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