

Welch Allyn Ear Wash System

2016 REIMBURSEMENT INFORMATION



CPT® CODING RESOURCE FOR THE REMOVAL OF IMPACTED CERUMEN & MEDICARE PHYSICIAN FEE SCHEDULE

Code	Description	2016 National Averages ¹	
		Facility	Non-Facility
69210	Removal of impacted cerumen requiring instrumentation unilateral	\$33.66	\$50.13
G0268	Removal of impacted cerumen (one or both ears) by physician on same date of service as audiologic function testing	\$34.73	\$54.42

Rates are subject to change. Effective 1/1/2016.

For reference only. Information does not constitute a guarantee of coverage or payment.

¹National Average from the 2016 Centers for Medicare and Medicaid Services Physician Fee Schedule.

The information contained in this document is provided for convenience only and represents no statement, promise or guarantee by Welch Allyn concerning coverage or levels of reimbursement. Payment will vary by geographic locality. It is always the provider's responsibility to determine accurate coding, coverage and claim information for the services that were provided.

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Facility—Includes hospitals (inpatient, outpatient and emergency department), ambulatory surgery centers (ASCs) and skilled nursing facilities (SNFs).

Non-Facility—Includes all other settings.

MEDICARE Coverage

Use of the Ear Wash System in the physician office may be medically necessary for the removal of impacted cerumen and when a significant amount of physician or physician-supervised work is required.

Providers should refer to their Medicare Contractor's Local Coverage Determinations for specific coverage and billing guidelines.

PRIVATE INSURANCE Coverage

Use of the Ear Wash System in the physician office may be covered by private payers when medically necessary.

Coding

Coding options for use of the Ear Wash System vary by payer and by plan.

CPT Code 69210 Removal of impacted cerumen requiring instrumentation may be appropriate

MEDICAID Coverage

Use of the Ear Wash System in the physician office may be covered by Medicaid programs when medically necessary.

Coding

Confirm coding with individual states.

OTHER CONSIDERATIONS

- Include documentation in the patient's records to indicate medical necessity for a separate service.
- According to the American Medical Association CPT Panel, a key factor in the determination of whether 69210 should be used is if instrumentation, like the use of an otoscope and other instruments, like "wax curettes and wire loops, or an operating microscope and suction plus specific ear instruments (eg, cup forceps, right angle forceps)" are used in the removal of impacted cerumen.²
- The definition of clinically impacted cerumen by the American Academy of Otolaryngology-Head and Neck Surgery is as follows:

If any one or more of the following are present:

1. Visual consideration: Cerumen impairs exam of clinically significant portions of the external auditory canal, tympanic membrane or middle ear condition.
 2. Qualitative considerations: Extremely hard, dry, irritative cerumen causing symptoms such as pain, itching, hearing loss, etc.
 3. Inflammatory considerations: Associated with foul odor, infection or dermatitis.
 4. Quantitative considerations: Obstructive, copious cerumen that cannot be removed without magnification and multiple instrumentations requiring physician skills.
- Confirm that proper ICD-10-CM diagnosis codes are reported to justify medical necessity of removal of impacted cerumen.
 - Documentation should note time, effort and equipment.
 - Some payers may have specific requirements for using certain codes, including prior authorization, restricted medical diagnoses or specialty provider types.

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Please visit our website at

welchallyn.com/en/products/care-settings/primary-care-and-clinics/reimbursement.html
for additional reimbursement support, a list of frequently asked questions and brochures.

For additional questions, please contact the Welch Allyn Customer Care Line at 1.800.535.6663.

Centers for Medicare & Medicaid Services (CMS), Medicare Program: Medicare Physician Fee Schedule for CY 2016, <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched>.

Please note: Medicare fee schedule corrections and changes occur periodically.

²AMA Code Manager Online, CPT Assistant, Coding Update, Auditory System, October 2013.

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