








2026 CPT Code Checklist



<input type="checkbox"/> Evaluation for Hearing Aid Candidacy- Unilateral or Bilateral Includes: <ul style="list-style-type: none"> Review and integration of audiologic function tests, assessment, and interpretation of hearing needs (eg, SIN, suprathreshold hearing measures), discussion of candidacy results, counseling on treatment options with report, and, when performed, assessment of cognitive and communication status. 		QTY
	92628 First 30-minutes	
	92629 Each Additional 15-min	
		 

<input type="checkbox"/> Hearing Aid Selection- Unilateral or Bilateral Includes: <ul style="list-style-type: none"> Hearing aid selection, review of audiologic testing 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. 		QTY
	92631 First 30-minutes	
	92632 Each Additional 15-min	
Previous codes: 92950- monaural 92591- binaural		 

<input type="checkbox"/> Hearing Aid Fitting Services- Unilateral or Bilateral Includes: <ul style="list-style-type: none"> Device analysis, programming, verification, counseling, orientation, and training, and, when performed, hearing assistive device, supplemental technology fitting services; first 60 minutes 		QTY
	92634 First 60-minutes	
	92635 Each Additional 15-min	
Previous code: V5011		

<input type="checkbox"/> Hearing Aid Post-Fitting Follow-up Services- Unilateral or Bilateral Includes: <ul style="list-style-type: none"> Confirmation of physical fit, validation of patient benefit and performance, sound quality of device, adjustment(s) (eg, 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 		QTY	
	92636	First 30-minutes	
	92637	Each Additional 15-min	
			

Additional Services

- Do not include the time for the following services within the overall time used for reporting 92634, 92636.
- For unilateral procedure, add modifier -52



	CODE	QTY
<input type="checkbox"/> Hearing-aid measurement, verification with probe-microphone	92639	
<input type="checkbox"/> Hearing device verification, electroacoustic analysis	92641	
<input type="checkbox"/> Hearing assistive device, supplemental technology fitting services	92642	