
Hearing Aids: Billing Codes and Reimbursement Rates

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This section lists the HCPCS codes and maximum allowances for hearing aids, accessories and related services. Refer to the *Hearing Aids* section in this manual for policy information. Reimbursement will be made at the provider's usual charge to the general public, not to exceed the following maximum allowances (*California Code of Regulations* [CCR], Title 22, Section 51517). Medi-Cal limits the total cost of hearing aid benefits, including sales tax, to \$1,510 per recipient per fiscal year (*Welfare and Institutions Code* [W&I Code], Section 14131.05). For additional information, refer to the *Hearing Aids* section of this manual.

Rental Rates

The daily rental rate for hearing aids and accessories (HCPCS codes V5030 through V5080, V5120 through V5150, V5190, V5230, and V5298) is \$1.53.

One-Unit Wholesale Cost

Wholesale cost is defined as the "unit price" or the "single" unit price as identified in the manufacturer's wholesale catalog less rebates, discounts, taxes or any other factors.

Codes and Rates

Hearing aids and accessories are reimbursed as listed below:

«Reimbursed Hearing Aids and Accessories»

HCPCS Code	Description	Maximum Allowance
V5014 *	Repair/modification of a hearing aid	The lesser of: <ol style="list-style-type: none"> 1. The invoice cost to the dealer plus a 100 percent markup 2. \$37.81 plus invoice cost 3. The factory retail price for the repair service 4. The billed amount
V5264	Ear mold/insert, not disposable, any type	\$27.52
V5265	Ear mold/insert, disposable, any type	By Report

«Reimbursable Hearing Aids and Accessories: Monaural»

HCPCS Code	Description	Maximum Allowance
V5030 ^{1 2}	Hearing aid, monaural, body worn, air conduction	The lesser of: 1. \$883.80 2. The one-unit wholesale cost plus \$635.00 3. The billed amount
V5040 ^{1 2}	Hearing aid, monaural, body worn, bone conduction	The lesser of: 1. \$883.80 2. The one-unit wholesale cost plus \$635.00 3. The billed amount
V5050 ^{1 2}	Hearing aid, monaural, in the ear	The lesser of: 1. \$883.80 2. The one-unit wholesale cost plus \$635.00 3. The billed amount
V5060 ^{1 2}	Hearing aid, monaural, behind the ear	The lesser of: 1. \$883.80 2. The one-unit wholesale cost plus \$635.00 3. The billed amount

«Reimbursable Hearing Aids and Accessories: Monaural (continued)»

HCPCS Code	Description	Maximum Allowance
V5080 ^{1 2}	Glasses, bone conduction	The lesser of: 1. \$883.80 2. The one-unit wholesale cost plus \$635.00 3. The billed amount
V5070 ^{1 2}	Glasses, air conduction	The lesser of: 1. \$883.80 2. The one-unit wholesale cost plus \$635.00 3. The billed amount
V5298 ¹	Hearing aid, not otherwise classified	The lesser of: 1. \$883.80 2. The one-unit wholesale cost plus \$635.00 3. The billed amount

«Reimbursable Hearing Aids and Accessories: Binaural»

HCPCS Code	Description	Maximum Allowance
V5120 ^{1 2}	Binaural, body aid	The lesser of: 1. \$1,480.32 2. The one-unit wholesale cost plus \$1,025.00 3. The billed amount
V5130 ^{1 2}	Binaural, in the ear aid	The lesser of: 1. \$1,480.32 2. The one-unit wholesale cost plus \$1,025.00 3. The billed amount
V5140 ^{1 2}	Binaural, behind the ear aid	The lesser of: 1. \$1,480.32 2. The one-unit wholesale cost plus \$1,025.00 3. The billed amount
V5150 ^{1 2}	Binaural, glasses aid	The lesser of: 1. \$1,480.32 2. The one-unit wholesale cost plus \$1,025.00 3. The billed amount
V5298 ¹	Hearing aid, not otherwise classified	The lesser of: 1. \$1,480.32 2. The one-unit wholesale cost plus \$1,025.00 3. The billed amount

**«Reimbursable Hearing Aids and Accessories: Contralateral Routing System:
Monaural»**

HCPCS Code	Description	Maximum Allowance
V5171 ¹	Hearing aid, contralateral routing system, monaural, in the ear (ITE)	The lesser of: 1. \$883.80, or 2. The one-unit wholesale cost plus \$635.00, or 3. The billed amount
V5172 ¹	Hearing aid, contralateral routing system, monaural, in the canal (ITC)	The lesser of: 1. \$883.80, or 2. The one-unit wholesale cost plus \$635.00, or 3. The billed amount
V5181 ¹	Hearing aid, contralateral routing system, monaural, behind the ear (BTE)	The lesser of: 1. \$883.80, or 2. The one-unit wholesale cost plus \$635.00, or 3. The billed amount
V5190 ¹	Hearing aid, contralateral routing, monaural, glasses	The lesser of: 1. \$883.80, or 2. The one-unit wholesale cost plus \$635.00, or 3. The billed amount

**«Reimbursable Hearing Aids and Accessories: Contralateral Routing System:
Binaural»**

HCPCS Code	Description	Maximum Allowance
V5211 ¹	Hearing aid, contralateral routing system, binaural, ITE/ITE	The lesser of: 1. \$1,480.32, or 2. The one-unit wholesale cost plus \$1,025.00, or 3. The billed amount
V5212 ¹	Hearing aid, contralateral routing system, binaural, ITE/ITC	The lesser of: 1. \$1,480.32, or 2. The one-unit wholesale cost plus \$1,025.00, or 3. The billed amount
V5213 ¹	Hearing aid, contralateral routing system, binaural, ITE/BTE	The lesser of: 1. \$1,480.32, or 2. The one-unit wholesale cost plus \$1,025.00, or 3. The billed amount
V5214 ¹	Hearing aid, contralateral routing system, binaural, ITC/ITC	The lesser of: 1. \$1,480.32, or 2. The one-unit wholesale cost plus \$1,025.00, or 3. The billed amount
V5215 ¹	Hearing aid, contralateral routing system, binaural, ITC/BTE	The lesser of: 1. \$1,480.32, or 2. The one-unit wholesale cost plus \$1,025.00, or 3. The billed amount

**Reimbursable Hearing Aids and Accessories: Contralateral Routing System: Binaural
(continued)**

HCPCS Code	Description	Maximum Allowance
V5221 ¹	Hearing aid, contralateral routing system, binaural, BTE/BTE	The lesser of: 1. \$1,480.32, or 2. The one-unit wholesale cost plus \$1,025.00, or 3. The billed amount
V5230 ¹	Hearing aid, contralateral routing system, binaural glasses	The lesser of: 1. \$1,480.32, or 2. The one-unit wholesale cost plus \$1,025.00, or 3. The billed amount

Reimbursable Hearing Aids and Accessories: Accessories

HCPCS Code	Description	Maximum Allowance
V5267 * 1	Hearing aid supplies/accessories	The lesser of: 1. Retail price, or 2. Dealer wholesale cost plus 60 percent, or 3. The billed amount

«**Note:** For billing policy for bone conduction hearing devices (BCHDs) and cochlear implantation (CI), refer to the [Audiological Services](#) section of the provider manual.»

«Legend»

«Symbols used in the document above are explained in the following table.»

Symbol	Description
«	This is a change mark symbol. It is used to indicate where on the page the most recent change begins.
»	This is a change mark symbol. It is used to indicate where on the page the most recent change ends.
*	Authorization is required for the purchase or trial period rental of hearing aids, and for repairs that cost more than \$25 per repair service. Claims for individual repair services are not cumulative when determining the need for authorization. See the <i>Hearing Aids</i> section in this manual for additional information.
¹	Authorization is required for this procedure. See the <i>Hearing Aids</i> section in this manual for additional information.
²	This procedure requires “By Report” billing.