Subject: Cochlear Implants*

Effective Date: January 25, 2005

Department(s): Utilization Management

Policy: Cochlear implants (HCPCS L8614 and V5273) are reimbursable under Plans administered by QualCare, Inc.

Objective: To assure proper and consistent reimbursement and to define medical necessity criteria for an implantable hearing prosthesis.

Procedure:

1. Medical necessity documentation must include at least the following:

   **Adults >18 years of age:**
   
   - Bilateral severe to profound sensorineural hearing loss with pure-tone average of ≥70 dB at 500 Hz, 1,000 Hz and 2,000 Hz
   
   - The patient obtains limited or no benefit from appropriately fitted binaural hearing aids (test scores of ≤40% in best-aided listening condition on open-set sentence discrimination).

   **Children from 12 months to 18 years of age:**
   
   - Bilateral profound sensorineural hearing loss with thresholds of ≥90 dB at 1,000 Hz
   
   - The child has limited benefit from appropriately fitted binaural hearing aids: (e.g., lack of progress in the development of simple auditory skills with appropriate amplification and
participation in intensive aural habilitation over a 3 – 6 month period for children age 5 years and younger; less than 20% correct on open-set sentence discrimination on the Multi-Syllabic Lexical Neighborhood Test or Lexical Neighborhood Test, depending on the child’s cognitive ability and linguistic skills for children over age 5 years).

- For all children, a trial of hearing aids has been attempted for at least three months, unless there is a history of pneumococcal meningitis as the cause of hearing loss or evidence of cochlear ossification on computerized tomography.

2. Upgrades of existing cochlear implant systems (CPT 69717, 69718, HCPCS L8615-L8624) are reimbursable under the following circumstances:

- The currently used component is no longer functional and cannot be repaired;

  OR

- The currently used component renders the recipient unable to perform his/her age-appropriate activities of daily living adequately.

3. Upgrading is not reimbursable when done solely to improve appearance or to treat implant-associated psychological complaints.

4. For adults and children, a post-cochlear-implant rehabilitation program is reimbursable within the limits of the individual Plan design. The codes for these are CPT 92601, 92602, 92603, and 92604.

5. Initial and replacement batteries (HCPCS codes L8621, L8622, L8623, L8624) for a cochlear implant are reimbursable.

6. The code for surgical placement of a cochlear implant is CPT 69930 and the codes for placement of temporal bone osseointegrated implants are CPT 69714 and 69715.
7. A hybrid cochlear implant with an external hearing aid (e.g., Cochlear Nucleus® Hybrid™ Implant System) is NOT reimbursable because it is considered experimental, investigational or unproven.

References

Roland JT Jr, Gantz BJ, Waltzman SB, Parkinson AJ; Multicenter Clinical Trial Group. United States multicenter clinical trial of the cochlear nucleus hybrid implant system. Laryngoscope. 2016;126(1):175-8(Jan)


*Consistent with Summary Plan Description (SPD). When there is discordance between this policy and the SPD, the provisions of the SPD prevail.*