

**DEPARTMENT OF SPECIAL SERVICES  
TOWNSHIP OF UNION PUBLIC SCHOOLS  
M-E-M-O-R-A-N-D-U-M**

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**TO: Greg Tatum**

**C: Annie Moses  
Diane Cappiello  
Julia Vicidomini**

**From: Kim Conti**

**Re: Board Agenda**

**Date: March 4, 2016**

**Please place the following on the board agenda:**

**The committee recommends and I so move that approval be given Summit Speech School to provide Audiological Evaluations at the rate of \$285.00 ( CPT code 92557 and CPT code 92567) per evaluation and an extensive evaluation of aided benefit at the rate of \$400.00 (CPT code 92626) not to exceed \$2,000.00 for the 2015-2016 School Year.  
Acct# 11-000-219-320-02-19**

**SUMMIT SPEECH SCHOOL AUDIOLOGY**  
**705 Central Avenue, New Providence, NJ 07974**  
**908-508-0011**  
**Taxpayer ID: 22-1829502**

|                            |                          |
|----------------------------|--------------------------|
| <b>Patient:</b>            | <b>Insured:</b>          |
| <b>Date of Birth:</b>      | <b>Insurance Plan:</b>   |
| <b>Date(s) of Service:</b> | <b>Insurance Plan #:</b> |

**Diagnosis:**

|                             |                        |
|-----------------------------|------------------------|
| <b>Primary (Audiology):</b> | <b>ICD-10 CM Code:</b> |
|                             |                        |

| <b>CPT</b>   | <b>Procedure</b>  | <b>Charge</b>   |
|--|---|-----------------|
| <b>Audiological Assessment Procedures</b>            |   |                 |
| 92550  | Tympanometry and reflex threshold measurements                  |                 |
| 92552  | Pure tone audiometry; air conduction                            | <b>\$125.00</b> |
| 92553  | Pure tone audiometry; air and bone conduction                   | <b>\$175.00</b> |
| 92555  | Speech audiometry threshold                                     |                 |
| 92566  | Speech audiometry threshold; w/speech recognition               |                 |
| 92557  | Comprehensive audiometry threshold; w/ speech recognition       | <b>\$235.00</b> |
| 92567  | Tympanometry  | <b>\$50.00</b>  |
| 92568  | Acoustic reflex testing   | <b>\$40.00</b>  |
| 92579  | Visual Reinforcement audiometry                                 | <b>\$150.00</b> |
| 92582  | Conditioned play audiometry                                     | <b>\$235.00</b> |
| <b>Hearing Aid Assessment and Fitting Procedures</b> |   |                 |
| 92592  | Hearing aid check; monaural                                     | <b>\$75.00</b>  |
| 92593  | Hearing aid check; binaural                                     | <b>\$100.00</b> |
| 92594  | Electroacoustic evaluation of hearing aid; monaural             |                 |
| 92595  | Electroacoustic evaluation of hearing aid; binaural             |                 |
| V5011  | Fitting/Orientation/Checking of Hearing Aid                     |                 |
| V5014  | Repair/Modification of hearing aid                              |                 |
| <b>Habilitative/Rehabilitative Services</b>          |   |                 |
| 92626  | Evaluation of auditory rehabilitation status                    | <b>\$400.00</b> |
| 92627  | Evaluation of auditory rehab status; each additional 15 minutes | <b>\$50.00</b>  |
| <b>Baha Sound Processors</b>                         |   |                 |
| L9900  | Baha Softband headband only                                     |                 |
| L8692  | External sound processor (including softband)                   |                 |
| 92700  | Fitting of sound processor                                      |                 |