

# AAO16: Age-Related Hearing Loss: Audiometric Evaluation

High Priority Status: Yes; Care Coordination NQF Number: N/A

Percentage of patients age 60 years and older who failed a hearing screening and/or who report suspected hearing loss who received, were ordered, or were referred for comprehensive audiometric evaluation within 4 weeks of the office visit.

# **Denominator:**

All patients age 60 years and older who failed a hearing screening and/or report suspected hearing loss at the physician office visit.

## **Denominator Exclusions:**

None

#### **Denominator Exceptions:**

Medical reason(s) for not evaluating for hearing loss include patients who had an audiogram within last year; patients with an active diagnosis of deafness, hearing impairment, head or ear trauma, history of other hearing impairment. Patient refusal.

#### Numerator:

Patients who received, were ordered, or were referred for comprehensive audiometric evaluation.

\*Audiometric Evaluation: The hearing evaluation should include a physical examination of the patient's ears and an evaluation of the patient's hearing acuity using an audiometer in a sound booth. The hearing evaluation may include the use of pure tone audiometry, bone conduction hearing testing, Hearing in Noise Test, speech tests, acoustic reflex text, auditory brainstem response testing (e.g. when patient is not able to complete behavioral audiometry) or other appropriate hearing evaluation tests.

Numerator Exclusions:

None

# **Measure Classifications:**

Measure Type: Process National Quality Strategy (NQS) domain: Communication and Care Coordination Meaningful Measures Area: Preventive Care Care Setting(s): Ambulatory Care: Clinician Office/Clinic Includes Telehealth: Yes Number of Performance Rates: 1 Inverse measure: No Continuous measure: No Proportional measure: Yes Ratio measure: No Risk-adjusted measure: No

© 2022 American Academy of Otolaryngology–Head and Neck Surgery Foundation. All rights reserved.

Limited proprietary coding is contained in the measure specifications for convenience. Users of the proprietary code sets should obtain all necessary licenses from the owners of these code sets. The measures, while copyrighted, can be reproduced and distributed, without modification, for noncommercial purposes, e.g. use by health care providers in connection with their practices. Commercial use is defined as the sale, license, or distribution of the measures for commercial gain, or incorporation of the measures into a product or service that is sold, licensed or distributed for commercial gain. Commercial uses of the measures require a license agreement between the user and the American Academy of Otolaryngology – Head and Neck Surgery Foundation.

The measure is not a clinical guideline, does not establish a standard of medical care, and has not been tested for all potential applications. The measure and specifications are provided "as is" without warranty of any kind. Neither the American Academy of Otolaryngology – Head and Neck Surgery Foundation (AAO-HNSF), nor its members shall be responsible for any use of the measure. The AAO-HNSF and its members disclaim all liability for use or accuracy of any Current Procedural Terminology (CPT<sup>®</sup>) or other coding contained in the specifications.



**QCDR** Measure Flow for:

# AAO16 Age-Related Hearing Loss: Audiometric Evaluation

**INITIAL PATIENT POPULATION (IPP)** 

