

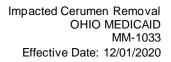
MEDICAL POLICY STATEMENT
OHIO MEDICAID

Policy Name		Policy Number	Date Effective		
Impacted Cerumen Removal		MM-1033	12/01/2020-10/31/2021		
Policy Type					
MEDICAL	Administrative	Pharmacy	Reimbursement		

Medical Policy Statement prepared by CSMG Co. and its affiliates (including CareSource) are derived from literature based on and supported by clinical guidelines, nationally recognized utilization and technology assessment guidelines, other medical management industry standards, and published MCO clinical policy guidelines. Medically necessary services include, but are ()36(t)/iraited/dest(n):43(de):44(de

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A. Subject Impacted Cerumen Removal

B. Background

Cerumen or ear wax is a normal substance that cleans, protects, and lubricates the ear canal. The cerumen can block the ear canal causing symptoms such as pain, hearing loss, fullness, itching, and tinnitus. Methods to removal the cerumen include irrigation, manual removal with instrumentation, and cerumenolytic agents.

C. Definitions

• **Cerumen Impaction** An accumulation of cerumen that is associated with symptoms and/or prevents a necessary ear examination.

D. Policy

- I. No prior authorization is required.
- II. Impacted cerumen removal is medically necessary when performed by a physician or other qualified health care professional such as a nurse practitioner, a physician assistant or a clinical nurse specialist in the following circumstances:
 - A. An accumulation of cerumen is seen on otoscopy and
 - 1. Is associated with symptoms;
 - 2. Prevents ability to manage or evaluate other signs, symptoms, or conditions; or
 - 3. Impedes ability to perform a medically necessary audiometry.
- III. It is not recommended to routinely treat cerumen when members are asymptomatic and ears can be adequately examined.
- IV. Documentation must include the following as applicable:
 - A. Degree of cerumen impaction
 - B. Method of removal
 - C. Instrumentation used
 - D. Resolution of impaction
 - E. Additional treatment provided
 - F. Referrals
 - G. Name and professional credentials of provider
- E. Conditions of Coverage
- F. Related Policies/Rules



