



## Health Alliance Medical Plan Speech Therapy Code List

Prior Authorization Proceudre List: Cardiology & Radiology, MSK (Join, Spine, Pain, Massage, Speech), Oncology\*, Radiation Therapy, and Sleep. \*The Oncology CPT<sup>®</sup> Code list for any individual client is highly dependent on the exact program structure selected and can be impacted by multiple

Category	CPT <sup>®</sup> Code	CPT <sup>®</sup> Code Description
Speech Therapy; PT/OT	440	Speech-Language Pathology
Speech Therapy; PT/OT	441	Speech-Language Pathology: Visit Charge
Speech Therapy; PT/OT	442	Speech-Language Pathology: Hourly Charge
Speech Therapy; PT/OT	443	Speech-Language Pathology: Group Rate
Speech Therapy; PT/OT	444	Speech-Language Pathology: Evaluation/ Re-Evaluation
Speech Therapy; PT/OT	31575	Laryngoscopy, flexible fiberoptic; diagnostic
Speech Therapy; PT/OT	31579	Laryngoscopy, flexible or rigid fiberoptic, with stroboscopy
Speech Therapy; PT/OT	92507	Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual
Speech Therapy; PT/OT	92508	Treatment of speech, language, voice, communication, and/or auditory processing disorder; group, 2 or more individuals
Speech Therapy; PT/OT	92520	Laryngeal function studies (ie, aerodynamic testing and acoustic testing)
Speech Therapy; PT/OT	92521	Evaluation of speech fluency (eg, stuttering, cluttering)
Speech Therapy; PT/OT	92522	Evaluation of speech sound production (eg, articulation, phonological process, apraxia, dysarthria);
Speech Therapy; PT/OT	92523	Evaluation of speech sound production (eg, articulation, phonological process, apraxia, dysarthria); with evaluation of language comprehension and expression (eg, receptive and expressive language)
Speech Therapy; PT/OT	92524	Behavioral and qualitative analysis of voice and resonance

Category	CPT <sup>®</sup> Code	CPT <sup>®</sup> Code Description
Speech Therapy; PT/OT	92526	Treatment of swallowing dysfunction and/or oral function for feeding
Speech Therapy; PT/OT	92597	Evaluation for use and/or fitting of voice prosthetic device to supplement oral speech
Speech Therapy; PT/OT	92605	Evaluation for prescription of non-speech-generating augmentative and alternative communication device, face-to-face with the patient; first hour
Speech Therapy; PT/OT	92606	Therapeutic service(s) for the use of non-speech-generating device, including programming and modification
Speech Therapy; PT/OT	92607	Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with the patient; first hour
Speech Therapy; PT/OT	92608	Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with the patient; each additional 30 minutes (List separately in addition to code for primary procedure)
Speech Therapy; PT/OT	92609	Therapeutic services for the use of speech-generating device, including programming and modification
Speech Therapy; PT/OT	92610	Evaluation of oral and pharyngeal swallowing function
Speech Therapy; PT/OT	92611	Motion fluoroscopic evaluation of swallowing function by cine or video recording
Speech Therapy; PT/OT	92612	Flexible fiberoptic endoscopic evaluation of swallowing by cine or video recording;
Speech Therapy; PT/OT	92613	Flexible fiberoptic endoscopic evaluation of swallowing by cine or video recording; interpretation and report only
Speech Therapy; PT/OT	92614	Flexible fiberoptic endoscopic evaluation, laryngeal sensory testing by cine or video recording;
Speech Therapy; PT/OT	92615	Flexible fiberoptic endoscopic evaluation, laryngeal sensory testing by cine or video recording; interpretation and report only
Speech Therapy; PT/OT	92616	Flexible fiberoptic endoscopic evaluation of swallowing and laryngeal sensory testing by cine or video recording;
Speech Therapy; PT/OT	92617	Flexible fiberoptic endoscopic evaluation of swallowing and laryngeal sensory testing by cine or video recording; interpretation and report only

Category	CPT <sup>®</sup> Code	CPT <sup>®</sup> Code Description
Speech Therapy; PT/OT	92618	Evaluation for prescription of non-speech-generating augmentative and alternative communication device, face-to-face with the patient; each additional 30 minutes (List separately in addition to code for primary procedure)
Speech Therapy; PT/OT	96105	Assessment of aphasia (includes assessment of expressive and receptive speech and language function, language comprehension, speech production ability, reading, spelling, writing, eg, by Boston Diagnostic Aphasia Examination) with interpretation and report. per hour
Speech Therapy; PT/OT	96110	Developmental screening (eg, developmental milestone survey, speech and language delay screen), with scoring and documentation, per standardized instrument
Speech Therapy; PT/OT	96112	Developmental test administration (including assessment of fine and/or gross motor, language, cognitive level, social, memory and/or executive functions by standardized developmental instruments when performed), by physician or other qualified health care professional, with interpretation and report; first hour
Speech Therapy; PT/OT	96113	Developmental test administration (including assessment of fine and/or gross motor, language, cognitive level, social, memory and/or executive functions by standardized developmental instruments when performed), by physician or other qualified health care professional, with interpretation and report; each additional 30 minutes (List separately in addition to code for primary procedure)
Speech Therapy; PT/OT	96125	Standardized cognitive performance testing (eg, Ross Information Processing Assessment) per hour of a qualified health care professional's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report
Speech Therapy	97129	Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; initial 15 minutes

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