

Humana Healthy Horizons in Kentucky Speech Code List

Category	CPT [®] Code	CPT [®] Code Description
Speech Therapy	31575	Laryngoscopy, Flexible Fiberoptic; Diagnostic
Speech Therapy	31579	Laryngoscopy, Flexible Or Rigid Fiberoptic, With Stroboscopy
Speech Therapy	92507	Treatment Of Speech, Language, Voice, Communication, And/Or Auditory Processing Disorder; Individual
Speech Therapy	92508	Treatment Of Speech, Language, Voice, Communication, And/Or Auditory Processing Disorder; Group, 2 Or More Individuals
Speech Therapy	92511	Nasopharyngoscopy With Endoscope (Separate Procedure)
Speech Therapy	92520	Laryngeal Function Studies (Ie, Aerodynamic Testing And Acoustic Testing)
Speech Therapy	92521	Evaluation Of Speech Fluency (Eg, Stuttering, Cluttering)
Speech Therapy	92522	Evaluation Of Speech Sound Production (Eg, Articulation, Phonological Process, Apraxia, Dysarthria);
Speech Therapy	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	92524	Behavioral And Qualitative Analysis Of Voice And Resonance
Speech Therapy	92526	Treatment Of Swallowing Dysfunction And/Or Oral Function For Feeding
Speech Therapy	92597	Evaluation For Use And/Or Fitting Of Voice Prosthetic Device To Supplement Oral Speech
Speech Therapy	92605	Evaluation For Prescription Of Non-Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour
Speech Therapy	92606	Therapeutic Service(S) For The Use Of Non-Speech-Generating Device, Including Programming And Modification
Speech Therapy	92607	Evaluation For Prescription For Speech-Generating Augmentative And Alternative Communication Device, Face-To-Face With The Patient; First Hour
Speech Therapy	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	92609	Therapeutic Services For The Use Of Speech-Generating Device, Including Programming And Modification
Speech Therapy	92610	Evaluation Of Oral And Pharyngeal Swallowing Function
Speech Therapy	92611	Motion Fluoroscopic Evaluation Of Swallowing Function By Cine Or Video Recording
Speech Therapy	92612	Flexible Fiberoptic Endoscopic Evaluation Of Swallowing By Cine Or Video Recording;
Speech Therapy	92613	Flexible Fiberoptic Endoscopic Evaluation Of Swallowing By Cine Or Video Recording; Interpretation And Report Only
Speech Therapy	92614	Flexible Fiberoptic Endoscopic Evaluation, Laryngeal Sensory Testing By Cine Or Video Recording;
Speech Therapy	92615	Flexible Fiberoptic Endoscopic Evaluation, Laryngeal Sensory Testing By Cine Or Video Recording; Interpretation And Report Only
Speech Therapy	92616	Flexible Fiberoptic Endoscopic Evaluation Of Swallowing And Laryngeal Sensory Testing By Cine Or Video Recording;
Speech Therapy	92617	Flexible Fiberoptic Endoscopic Evaluation Of Swallowing And Laryngeal Sensory Testing By Cine Or Video Recording; Interpretation And Report Only
Speech Therapy	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)

Effective: 1/1/2024

Category	CPT [®] Code	CPT [®] Code Description
Speech Therapy	92626	Evaluation Of Auditory Rehabilitation Status; First Hour
Speech Therapy	92627	Evaluation Of Auditory Rehabilitation Status; Each Additional 15 Minutes (List Separately In Addition To Code For Primary Procedure)
Speech Therapy	92630	Auditory Rehabilitation; Prelingual Hearing Loss
Speech Therapy	92633	Auditory Rehabilitation; Postlingual Hearing Loss
Speech Therapy	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	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
Speech Therapy	97130	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; each additional 15 minutes (List separately in addition to code for primary procedure)
Speech Therapy	97533	Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands; each 15 minutes.
Speech Therapy	G0153	Services performed by a qualified speech language pathologist in the home health or hospice settings, each 15 minutes
Speech Therapy	G0161	Services performed by a qualified speech-language pathologist, in the home health setting, in the establishment or delivery of a safe and effective speech-language pathology maintenance program, each 15 minutes
Speech Therapy	G0451	Development testing, with interpretation and report, per standardized instrument form
Speech Therapy	S9128	Speech therapy, in the home, per diem
Speech Therapy	S9152	Speech therapy, re-evaluation

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