142 - Limited Licensed Speech-Language Pathologist

HABILITATIVE AND REHABILITATIVE SERVICES

The American Medical Association (AMA) created modifiers to distinguish between habilitative and rehabilitative services. This applies to the procedure codes below with a (*).

Modifier 96 - Habilitative Services: Habilitative services help an individual learn skills and functions for daily living that the individual has not yet developed and then keep or improve those learned skills. Habilitative services also help an individual keep, learn, or improve skills and functioning for daily living.

Modifier 97 - Rehabilitative Services: Rehabilitative services help an individual keep, get back, or improve skills and functioning for daily living that have been lost or impaired because the individual was sick, hurt, or disabled.

MET/EVAL

The evaluation should be reported only once, even if the evaluation is administered over several days. The date of service is the date eligibility is determined (IEP mtg). Note: An evaluation must be completed to use this type of service.

Procedure Code	Procedure Code/Service Type
92521 HT*	Evaluation of Fluency (e.g., stuttering, cluttering).
92522 HT*	Evaluation - Sound Production (e.g., articulation, phonological process, apraxia, dysarthria).
92523 HT*	Evaluation - Sound Production (e.g., articulation, phonological process, apraxia, dysarthria); **with** evaluation of language comprehension and expression (e.g., receptive and expressive language).
92523:52 HT*	Evaluation – Language Comprehension/Expression (e.g., receptive and expressive language).
92524 HT*	Evaluation – Behavioral Qualitative Analysis of Voice (and resonance).

IEP/IFSP

Participation in the IEPT/IFSP meeting. Encompasses all work done for the IEP. The date of service is the date of the meeting.

Procedure Code	Procedure Code/Service Type
92521 TM*	Evaluation of Fluency (e.g., stuttering, cluttering).
92522 TM*	Evaluation - Sound Production (e.g., articulation, phonological process, apraxia, dysarthria).
92523 TM*	Evaluation - Sound Production (e.g., articulation, phonological process, apraxia, dysarthria); **with** evaluation of language comprehension and expression (e.g., receptive and expressive language).
92523:52 TM*	Evaluation – Language Comprehension/Expression (e.g., receptive and expressive language).
92524 TM*	Evaluation - Behavioral Qualitative Analysis of Voice (and resonance).

REED

Participation in the Review of Existing Evaluation Data (REED). The date of service is the date the team completes its review of data (REED FAPE Date).

Procedure Code	Procedure Code/Service Type
92521 TJ*	Evaluation of Fluency (e.g., stuttering, cluttering).
92522 TJ*	Evaluation - Sound Production (e.g., articulation, phonological process, apraxia, dysarthria).
92523 TJ*	Evaluation - Sound Production (e.g., articulation, phonological process, apraxia, dysarthria); **with** evaluation of language comprehension and expression (e.g., receptive and expressive language).
92523:52 TJ*	Evaluation – Language Comprehension/Expression (e.g., receptive and expressive language).
92524 TJ*	Evaluation - Behavioral Qualitative Analysis of Voice (and resonance).

EVALS NOT RELATED TO MET OR IEP

Evaluations completed for purposes other than the IDEA Assessment. The date of service is the date the test is completed.

Procedure Code	Procedure Code/Service Type
92521*	Evaluation of Fluency (e.g., stuttering, cluttering).
92522*	Evaluation - Sound Production (e.g., articulation, phonological process, apraxia, dysarthria).
92523*	Evaluation - Sound Production (e.g., articulation, phonological process, apraxia, dysarthria); **with** evaluation of language comprehension and expression (e.g., receptive and expressive language).
92323:52*	Evaluation – Language Comprehension/Expression (e.g., receptive and expressive language).
92524*	Evaluation – Behavioral Qualitative Analysis of Voice (and resonance).
96105	Assessment for Aphasia Expressive/Receptive speech w/Interpretation & Report

THERAPY/ATD (Assistive Technology Device)

Procedure Code	Procedure Code/Service Type
92507*	Individual Speech/Language/Hearing Therapy – (Treatment of speech, language, voice, communication, and/or auditory processing disorder {includes aural rehab}) **Minimum of 5 minutes**
92508	Group Speech/Hearing therapy (2-8 students) **Minimum of 5 minutes**

Non-Billable Code

Procedure	Procedure Code/Service Type
Consult Only	Use for logging students with consult-only services listed in the programs/services section of their IEP
Behavior Plan	Use to log students with a behavior plan only
Communication	Use to log communications with parents, other providers, staff
Attendance	Use to log when a student is missing therapy(ies) due to absences
No School Day	Use to document snow days or other non-school days
Observation	Use to document time observing students for evaluation purposes

BILLING INFORMATION

Service History Notes:

1. **Describe** what occurred on the date of service. Ensure that the Service History Note (daily note) is sufficiently detailed to allow reconstruction of what transpired for each service billed.
2. **Describe** the "medical" goal of the service.
3. **Indicate** the result of the therapy session (student's response).
4. **Avoid** discussing academic goals/issues or attendance.

Example of Service Note Detail: Group Therapy 92508:96 – Student played "Go Fish" with picture cards and was able to say /k/ sound in carrier phrases with 65% accuracy with moderate prompting. We will continue to focus on the /k/ sound.

Monthly History Notes:

1. **Summarize** (Evaluate) the student's monthly progress toward your medical/health-related goal.
2. **Include** any changes in medical/mental status and changes in treatment with rationale for change.
3. Service History Notes (Daily and Monthly History Notes (Progress) **must not match**.

Example of Summary Note: Student is making consistent progress toward meeting the goal of consistently producing the /k/ sound. The student is currently able to produce /k/ in carrier phrases with an average of 70% accuracy at an independent level. Continuing /k/ at the phrase level.

Billing for Evaluations:

Evaluations can be billed, even when the results are Consult Only services. A prescription/referral is not needed to bill for the evaluation.

Record Keeping:

Keep copies of all supporting documentation related to this service for 8 years (FY+7), regardless of the change in ownership or termination of participation in Medicaid.