

School Based Services Tip Sheet for Speech and Language Pathologist



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Therapy - Provider notes must include enough detail to allow reconstruction of what transpired for each service.

Requires Monthly Progress Summary - Must include evaluation of progress and summarize the services reported during the month & must be dated in the month the services were provided - *using the last school day of the month is recommended.*

Modifier Descriptions

HT: MET (Multidisciplinary Evaluation Team) Evaluation – Initial or Redetermination

Use the HT modifier with the evaluation code upon completion of an evaluation resulting in initial certification, recertification, or change in certification (encompasses all observations, meetings (except REED & IEP) and reports. The date of service is the date eligibility is determined (IEP meeting).

TM: IEP Participation

Use the TM modifier with the evaluation code for development, review, and revision of IEP (IEP meeting attendance is not needed if written input was provided before the meeting). The date of service is the IEP meeting date.

TL: REED

Use the TL modifier with the evaluation code for participation in the Review of Existing Evaluation Data (REED). The date of service is the date the IEP team completes its review of data.

GN: Services delivered virtually per the Plan of Care (IEP)

No Modifier:

No modifier is used for evaluations completed for purposes other than the IDEA (Individuals with Disabilities Education Act) Assessment. The date of service is the date the last test is completed.

Procedure Code	Service Type	Description
92507	Individual Therapy	Therapeutic procedure, one or more areas, each 15 minutes. Treatment of speech, language, voice, communication, and/or auditory processing disorder (includes aural rehab); individual
92508	Group Therapy, 2-8 students	Therapeutic procedure(s), group (2 or more individuals, not more than 8). This means the number of students physically present, regardless of Medicaid eligibility.
ATD- Therapy/Evaluations		
97535	ATD - Self-care/home management training	ATD Self-care/Home Management Training: (e.g., activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment), direct 1:1 contact. (Use this code only when billing for speech related ATD services.)
97755	ATD - AT Assessment	Assistive Technology Assessment: (e.g., to restore, augment, or compensate for existing functional tasks and/or maximize environmental accessibility), direct 1:1 contact by provider with written report. If assessments are provided under the Durable Medical Equipment (DME) program, all policies, and procedures applicable to that program must be adhered to. Do not use if assessments for DME are billed by a Medicaid medical supplier.

MET/Evaluation (Initial and 3-Year) - Encompasses all meetings, reports, observations, assessments, tests, evaluations. 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 (Individualized Education Program) meeting date). Speech Services do not need to be included on the IEP/IFSP to report the evaluation if the student receives a special education certification.

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92521 HT 92521 HT	<ul style="list-style-type: none"> • Initial Evaluation: Speech Fluency • Reevaluation: Speech Fluency 	MET/Eval – Evaluation of speech fluency (e.g., stuttering, cluttering).
92522 HT 92522 HT	<ul style="list-style-type: none"> • Initial Evaluation: • Speech Sound Production • Reevaluation: • Speech Sound Production 	MET/Eval – Evaluation of speech sound production (e.g., articulation, phonological process, apraxia, dysarthria).
92523 HT 92523 HT	<ul style="list-style-type: none"> • Initial Evaluation: Speech Sound Production & Language Comp/Expr • Reevaluation: Speech Sound Production & Language Comp/Expr 	MET/Eval – Evaluation of speech sound production with language: speech sound production (e.g., articulation, phonological process, apraxia, dysarthria); <u>with</u> evaluation of language comprehension and expression (e.g., receptive, and expressive language).
92523 52 HT 92523 52 HT	<ul style="list-style-type: none"> • Initial Evaluation: Language Comp/Expr • Reevaluation: Language Comp/Expr 	MET/Eval – Evaluation of language comprehension/expression (e.g., receptive, and expressive language).
92524 HT 92524 HT	<ul style="list-style-type: none"> • Initial Evaluation: Behavioral and Qualitative Analysis of Voice and Resonance • Reevaluation: Behavioral and Qualitative Analysis of Voice and Resonance 	MET/Eval – Evaluation of behavioral and qualitative analysis of voice and resonance.

IEP/IFSP Participation- Participation in the IEP/IFSP meeting. This includes all work done for the IEP. The date of service is the date of the IEP/IFSP meeting.

92521 TM	IEP Meeting: Speech Fluency	IEP – Speech fluency (e.g., stuttering, cluttering).
92522TM	IEP Meeting: Speech Sound Production	IEP – Speech sound production (e.g., articulation, phonological process, apraxia, dysarthria).
92523 TM	IEP Meeting: Speech Sound Production and Language Comp/Expr	IEP – Speech sound with language: Speech sound production (e.g., articulation, phonological process, apraxia, dysarthria); <u>with</u> evaluation of language comprehension and expression (e.g., receptive, and expressive language).
92523 52 TM	IEP Meeting: Language Comp/Expr	IEP – Language comprehension/expression (e.g., receptive, and expressive language).
92524 TM	IEP Meeting: Behavioral and Qualitative Analysis of Voice and Resonance	IEP- Behavioral and qualitative analysis of voice and resonance.

REED (Review of Existing Evaluation Data)- Participation in the Review of Existing Evaluation Data (REED). The date of service is the date the IEP/IFSP.

92521 TL	REED: Speech Fluency	REED – Speech fluency (e.g., stuttering, cluttering).
92522 TL	REED: Speech Sound Production	REED – Speech sound production (e.g., articulation, phonological process, apraxia, dysarthria).

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92523 TL	REED: Speech Sound Production and Language Comp/Expr	REED – Speech sound with language: speech sound production (e.g., articulation, phonological process, apraxia, dysarthria); <u>with</u> evaluation of language comprehension and expression (e.g., receptive, and expressive language).
92523 52 TL	REED: Language Comp/Expr	REED – Language comprehension/expression (e.g., receptive, and expressive language).
92524 TL	REED: Behavioral and Qualitative Analysis of Voice and Resonance	REED – Behavioral and qualitative analysis of voice and resonance.

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OTHER Evaluations (not part of the initial or recertification process)		
92521 HT	Other Evaluation: Speech Fluency	Evaluation of speech fluency (e.g., stuttering, cluttering).
92522 HT	Other Evaluation: Speech Sound Production	Evaluation of speech sound production (e.g., articulation, phonological process, apraxia, dysarthria)
92523 HT	Other Evaluation: Speech Sound Production & Language Comprehension/Expression	Evaluation of speech sound production with language speech sound production (e.g., articulation, phonological process, apraxia, dysarthria); <u>with</u> evaluation of language comprehension and expression (e.g., receptive, and expressive language)
92523 52 HT	Other Evaluation: Language Comprehension/Expression	Evaluation of language comprehension/expression (e.g., receptive, and expressive language).
92524 HT	Other Evaluation: Behavioral and Qualitative Analysis of Voice and Resonance	Evaluation of behavioral and qualitative analysis of voice and resonance.
Record Keeping Only		
Other		-
Communication		-
No School Day		-
Consultation		-
Student Absent/Unavailable		-
Provider Absent/Unavailable		-
Non-billable Group (size 9+)		Record services for groups larger than 8

Services: Speech, language, and hearing services include

- Group therapy is provided in a group of 2 to 8 students.
- Articulation, language, and rhythm
- Swallowing dysfunction and/or oral function for feeding
- Voice therapy
- Speech, language, or hearing therapy
- Speech reading/aural rehabilitation
- Esophageal speech training therapy
- Speech defect corrective therapy
- Fitting and testing of hearing aids or other communication devices

General Service Information

- Provider Notes must include enough detail to allow reconstruction of what transpired for each service.
- Notes are vital in determining what occurred on the service date and the result.
- **Monthly progress notes are REQUIRED for all months for which ATD, Individual, and Group Therapy services are reported:**
 - Must include evaluation of progress and summarize the services reported during the month
 - Must be dated in the month the services were provided - using the last school day of the month is recommended
- Consult services are not separately reimbursable. If you are providing consult services, use the service type "Consultation" to document the service.
- Reimbursable group therapy must be provided in groups of 2-8 students – if the group is larger than 8, use the procedure "Non-billable Group (size 9+)" to document the service.
- Services provided as part of a regular classroom activity are not reimbursable. When regularly scheduled attention is given to one student in the class currently in session, the service is not reimbursable.

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