

SERVICE TYPE	CPT Code	Rate Code	DESCRIPTION	Session Time /Units	Payment Rate
Speech	92506	2023	EVALUATION OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/ OR AUDITORY PROCESSING	1 per evaluation	\$122.94
Speech	92507	2024	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/ OR AUDITORY PROCESSING DISORDER; INDIVIDUAL	1 per session	\$50.57
Speech	92508	2025	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PROCESSING DISORDER; GROUP, 2 OR MORE INDIVIDUALS	1 per session	\$24.85
Speech	92520	2026	LARANGAL FUNCTION STUDIES (I.E. AERODYNAMIC TESTING AND ACOUSTIC TESTING)	1 per session	\$48.07
Speech	92526	2027	TREATMENT OF SWALLOWING DYSFUNCTION AND/OR ORAL FUNCTION FOR FEEDING	1 per session	\$77.73
Speech	92597	2028	EVALUATION FOR USE AND/OR FITTING OF VOICE PROSTHETIC DEVICE TO SUPPLEMENT ORAL SPEECH	1 per session	\$82.17
Speech	92626	2029	EVALUATION OF AUDITORY REHABILITATION STATUS; FIRST HOUR	60 minutes	\$62.56
Speech	92627	2030	EVALUATION OF AUDITORY REHABILITATION STATUS; EACH ADDITIONAL 15 MINUTES (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	15 minutes	\$15.11

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Physical Therapy	97001	2058	PHYSICAL THERAPY EVALUATION	1 per evaluation	\$54.81
Physical Therapy	97002	2059	PHYSICAL THERAPY RE-EVALUATION	1 per evaluation	\$29.74
Occupational or Physical Therapy	97010	2060	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; HOT OR COLD PACKS	1 per session	\$3.91
Occupational or Physical Therapy	97012	2061	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; TRACTION, MECHANICAL	1 per session	\$11.45
Occupational or Physical Therapy	97014	2062	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ELECTRICAL STIMULATION (UNATTENDED)	1 per session	\$10.70
Occupational or Physical Therapy	97016	2063	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; VASOPNEUMATIC DEVICES	1 per session	\$12.45
Occupational or Physical Therapy	97018	2064	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; PARAFFIN BATH	1 per session	\$6.53
Occupational or Physical Therapy	97022	2065	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; WHIRLPOOL BATH	1 per session	\$14.51
Occupational or Physical Therapy	97024	2066	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; DIATHERMY (EG, MICROWAVE)	1 per session	\$4.49
Occupational or Physical Therapy	97026	2067	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; INFRARED	1 per session	\$3.91
Occupational or Physical Therapy	97028	2068	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ULTRAVIOLET	1 per session	\$5.04
Occupational or Physical Therapy	97032	2069	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ELECTRICAL STIMULATION (MANUAL) EACH 15 MINUTES	15 minutes	\$12.92
Occupational or Physical Therapy	97033	2070	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; IONTOPHORESIS, EACH 15 MINUTES	15 minutes	\$20.18

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Occupational or Physical Therapy	97034	2071	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; CONTRAST BATHS, EACH 15 MINUTES	15 minutes	\$12.11
Occupational or Physical Therapy	97035	2072	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ULTRASOUND THERAPY, EACH 15 MINUTES	15 minutes	\$9.20
Occupational or Physical Therapy	97036	2073	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; HUBBARD TANK, EACH 15 MINUTES	15 minutes	\$21.25
Occupational or Physical Therapy	97110	2074	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; THERAPEUTIC EXERCISES TO DEVELOP STRENGTH AND ENDURANCE, RANGE OF MOTION AND FLEXIBILITY	15 minutes	\$22.19
Occupational or Physical Therapy	97112	2075	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; NEUROMUSCULAR REEDUCATION OF MOVEMENT, BALANCE, COORDINATION, KINESTHETIC SENSE, POSTURE; AND/OR PROPRIOCEPTION FOR SITTING AND/OR STANDING ACTIVITIES	15 minutes	\$23.29
Occupational or Physical Therapy	97113	2076	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; AQUATIC THERAPY WITH THERAPEUTIC EXERCISES	15 minutes	\$28.04
Occupational or Physical Therapy	97116	2077	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; GAIT TRAINING (INCLUDES STAIR CLIMBING)	15 minutes	\$19.65
Occupational or Physical Therapy	97124	2078	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; MASSAGE, INCLUDING EFFLEURAGE, PETRISSAGE AND/OR TAPOTEMENT (STROKING, COMPRESSION, PERCUSSION)	15 minutes	\$17.99
Occupational or Physical Therapy	97140	2080	MANUAL THERAPY TECHNIQUES (EG, MOBILIZATION/MANIPULATION, MANUAL LYMPHATIC DRAINAGE, MANUAL TRACTION), 1 OR MORE REGIONS, EACH 15 MINUTES	15 minutes	\$20.77
Physical Therapy	97150	2081	THERAPEUTIC PROCEDURE(S), GROUP (2 OR MORE INDIVIDUALS)	1 per session	\$14.33
Occupational Therapy	97003	2082	OCCUPATIONAL THERAPY EVALUATION	1 per evaluation	\$59.11
Occupational Therapy	97004	2083	OCCUPATIONAL THERAPY RE-EVALUATION	1 per evaluation	\$34.98

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Occupational or Physical Therapy	97530	2084	THERAPEUTIC ACTIVITIES, DIRECT (ONE-ON-ONE) PATIENT CONTACT BY THE PROVIDER (USE OF DYNAMIC ACTIVITIES TO IMPROVE FUNCTIONAL PERFORMANCE), EACH 15 MINUTES	15 minutes	\$23.96
Occupational or Physical Therapy	97532	2085	DEVELOPMENT OF COGNITIVE SKILLS TO IMPROVE ATTENTION, MEMORY, PROBLEM SOLVING (INCLUDES COMPENSATORY TRAINING), DIRECT (ONE-ON-ONE) PATIENT CONTACT BY THE PROVIDER, EACH 15 MINUTES	15 minutes	\$19.00
Occupational or Physical Therapy	97533	2086	SENSORY INTEGRATIVE TECHNIQUES TO ENHANCE SENSORY PROCESSING AND PROMOTE ADAPTIVE RESPONSES TO ENVIRONMENTAL DEMANDS, DIRECT (ONE-ON-ONE) PATIENT CONTACT BY THE PROVIDER, EACH 15 MINUTES	15 minutes	\$20.75
Occupational or Physical Therapy	97535	2087	SELF-CARE/HOME MANAGEMENT TRAINING (EG, ACTIVITIES OF DAILY LIVING (adl) AND COMPENSATORY TRAINING, MEAL PREPARATION, SAFETY PROCEDURES, AND INSTRUCTIONS IN USE OF ASSISTIVE TECHNOLOGY DEVICES/ADAPTIVE EQUIPMENT) DIRECT ONE-ON-ONE CONTACT BY THE PROVIDER, EACH 15 MINUTES	15 minutes	\$23.94
Occupational or Physical Therapy	97537	2088	COMMUNITY/WORK REINTEGRATION TRAINING (EG, SHOPPING, TRANSPORTATION, MONEY MANAGEMENT, AVOCATIONAL ACTIVITIES AND/OR WORK ENVIRONMENT/MODIFICATION ANALYSIS, WORK TASK ANALYSIS, USE OF ASSISTIVE TECHNOLOGY DEVICE/ADAPTIVE EQUIPMENT), DIRECT ONE-ON-ONE CONTACT BY PROVIDER, EACH 15 MINUTES	15 minutes	\$21.32
Occupational or Physical Therapy	97542	2089	WHEELCHAIR MANAGEMENT (EG, ASSESSMENT, FITTING, TRAINING), EACH 15 MINUTES	15 minutes	\$21.61
Occupational Therapy	97150	2100	THERAPEUTIC PROCEDURE(S), GROUP (2 OR MORE INDIVIDUALS)	1 per session	\$14.33
Occupational or Physical Therapy	97760	2107	ORTHOTIC(S) MANAGEMENT AND TRAINING (INCLUDING ASSESSMENT AND FITTING WHEN NOT OTHERWISE REPORTED), UPPER EXTREMITY(S), LOWER EXTREMITY(S) AND/OR TRUNK, EACH 15 MINUTES	15 minutes	\$25.61
Occupational or Physical Therapy	97761	2108	PROSTHETIC TRAINING, UPPER AND/OR LOWER EXTREMITY(S), EACH 15 MINUTES	15 minutes	\$22.70
Occupational or Physical Therapy	97762	2109	CHECKOUT FOR ORTHOTIC/PROSTHETIC USE, ESTABLISHED PATIENT, EACH 15 MINUTES	15 minutes	\$28.07

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Psychological Counseling	90832	2008	PSYCHOTHERAPY, 30 MINUTES WITH PATIENT AND/OR FAMILY MEMBER	30 minutes	\$48.30
Psychological Counseling	90833	2009	PSYCHOTHERAPY, 30 MINUTES WITH PATIENT AND/OR FAMILY MEMBER WHEN PERFORMED WITH AN EVALUATION AND MANAGEMENT SERVICES (LIST SEPARATELY IN ADDITION TO THE CODE FOR PRIMARY PROCEDURE)	30 minutes	\$31.82
Psychological Counseling	90834	2010	PSYCHOTHERAPY, 45 MINUTES WITH PATIENT AND/OR FAMILY MEMBER	45 minutes	\$61.83
Psychological Counseling	90836	2011	PSYCHOTHERAPY, 45 MINUTES WITH PATIENT AND/OR FAMILY MEMBER WHEN PERFORMED WITH AN EVALUATION AND MANAGEMENT SERVICE (LIST SEPARATELY IN ADDITION TO THE CODE FOR PRIMARY PROCEDURE)	45 minutes	\$51.63
Psychological Counseling	90837	2012	PSYCHOTHERAPY, 60 MINUTES WITH PATIENT AND/OR FAMILY MEMBER	60 minutes	\$90.44
Psychological Counseling	90838	2013	PSYCHOTHERAPY, 60 MINUTES WITH PATIENT AND/OR FAMILY MEMBER WHEN PERFORMED WITH AN EVALUATION AND MANAGEMENT SERVICE (LIST SEPARATELY IN ADDITION TO THE CODE FOR PRIMARY PROCEDURE)	60 minutes	\$83.48
Psychological Counseling	90785	2014	INTERACTIVE COMPLEXITY (LIST SEPARATELY IN ADDITION TO THE CODE FOR PRIMARY PROCEDURE)	1 per session	\$3.66
Psychological Counseling	90847	2020	FAMILY PSYCHOTHERAPY (CONJOINT PSYCHOTHERAPY) (WITH PATIENT PRESENT)	1 per session	\$82.97
Psychological Counseling	90853	2021	GROUP PSYCHOTHERAPY (OTHER THAN OF A MULTIPLE-FAMILY GROUP)	1 per session	\$24.50

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