# Quick Guide to Billing for AAC

## **Relevant CPT codes:**



- 92523: Evaluation of speech sound production (e.g., articulation, phonological process, apraxia, dysarthria); with evaluation of language comprehension and expression (e.g., receptive, and expressive language)
- 92507: Treatment of speech, language, voice, communication, and/or auditory processing disorder, individual.

#### - Initial AAC Evaluation

- 92605: Evaluation for prescription of non-speech-generating augmentative and alternative communication device, face-to-face with the patient, first hour
  - » 92618, each additional 30 minutes.
- 92607: Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with the patient, first hour
  - » 92608, each additional 30 minutes.

#### - AAC Treatment

- 92606: Therapeutic service(s) for the use of non-speech-generating augmentative and alternative communication device, including programming and modification.
- 92609: Therapeutic services for the use of speech-generating device, including programming and modification.
- These codes require the patient to be present

## Important information:

- Medicare does not reimburse for codes specific to evaluation or treatment for non-SGDs (92605, 92606) as they view it falls under other services the SLP is performing (such as 92507). Medicaid and private health insurance plans may pay for these services, but you should check with the payer first.
- What's the difference between 92507 and 92609? The use of 92507 should be when speech-language treatment is being provided while 92609 should be used when you are working with the AAC user on use of the device itself or if you are modifying/programming it for their use.

### References:

Ogden, K., & Swanson, N. (2017). Billing for AAC: Device Type Helps Determine Codes: Here's the lowdown on coding and billing for AAC device evaluation, customization and ongoing treatment. The ASHA Leader, 22(2), 36-37.

White, S. C., & McCarty, J. (2011). Reimbursement for AAC devices. The ASHA Leader, 16(2), 3-7. https://doi.org/10.1044/leader. BML.16122011.3



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