

Best Speech Therapy, PLLC
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FILING OUT OF NETWORK BENEFITS

This guide is meant to facilitate the process for filing out of network benefits. Please note: we are unable to bill Medicare.

1. Have the following information ready & available for the call.
 - a. Your name:
 - b. Client's name and date of birth:
 - c. Insurance member ID:
 - d. policy/group numbers:
 - e. Provider: **Best Speech Therapy, PLLC** **Billing NPI: 1932462058**
2. Call the member services phone number on the back of your insurance card.
3. Tell the person you are speak with that you would like to know your coverage for speech therapy with an out of network provider.
 - f. Person you spoke with:
 - g. Date of call:
 - h. Time of call:
 - i. Insurance Codes Discussed:

During our initial phone consultation, I will let you know which of the following codes you should tell your insurance company. They will be my best estimate based on the information you provide but may change after the formal evaluation. See below for more information

4. **Ask these questions while speaking with your insurance company.**

- What is my coverage?
- Do I need pre-authorization for speech therapy?
- If so, how do I obtain it?
- What forms do I need to submit when filing my claim?

- Where can I find the form on your website? Can you email me a copy?
- Can I file my claim online or do I need to mail/fax it to you?
- Do I need to file my claim within a certain amount of time after the date of service?
- Do I need a superbill from the speech therapist?
- Do you need any other information from the speech therapist?
- How long does it take to process my claim?
- What can I do if you deny the insurance claim?

Speech Therapy CPT (procedure) Codes:

- 92507—treatment or the individual therapy sessions
- 92522—evaluation for speech sound production
- 92523—evaluation for speech AND language skills
- 92521- Evaluation of Speech Fluency (stuttering, cluttering)
- 92524 - Behavioral and qualitative analysis of voice and resonance
- 92610 - Evaluation of oral and pharyngeal Swallowing
- 92526 - Treatment of swallowing dysfunction and/or oral function for feeding

Speech Therapy Diagnosis (ICD-10) Codes:

- F80.0—articulation/phonology disorder
- F80.1—expressive language disorder
- F80.2—mixed receptive-expressive language disorder
- F80.4—speech & language delay due to hearing loss (chronic ear infection)
- F80.81—childhood onset fluency (stuttering) disorder
- Q38.1 -- Ankyloglossia (Tongue Tie)
- R13.11 Dysphagia, Oral Phase
- R13.12 Dysphagia, Oropharyngeal Phase
- R27.8 - Other Lack of Coordination
- R27.9 - Unspecified Lack of Coordination
- R47.89 - Other Speech Disturbances Other developmental disorders of speech
- R47.1 Dysarthria and anarthria
- R47.9 Unspecified speech disturbances
- R49.0 Dysphonia Hoarseness
- R49.1 Aphonia Loss of Voice
- R49.21 Hypernasality
- R49.22 Hyponasality
- R49.8 Other voice and resonance disorders
- R63.3 Feeding difficulties
- J38.1 Polyp of vocal cord and larynx
- I69.320 Aphasia
- I60.390 Apraxia
- I69.31 Cognitive deficits following cerebral infarction
- M26.50 Dentofacial functional abnormalities, Unspecified
- M26.59 Other Dentofacial functional abnormalities (tongue thrust)
- R06.5 Mouth Breathing
- Z72.4 Inappropriate diet and eating habits

Some insurances require an additional medical diagnosis of gender dysphoria or a personal history of sex reassignment for insurance reimbursement of transgender voice therapy. These diagnoses are not speech therapy diagnoses and can only be provided by a doctor and/or mental health professional. Please contact your physician and/or mental health professional regarding these codes and inform us of any official medical diagnoses so that we can properly code our billing codes alongside your medical billing codes to increase your chances of reimbursement.

- R49.9 Unspecified Voice and Resonance Disorder (Transgender Voice Therapy)