McLAREN FLINT – SPEECH/LANGUAGE PATHOLOGY CHARGE SHEET

Client: _____ Acct#: _____

Medical Record # _____ Room #: _____

Key: U = Untimed T = Timed

Bill Code		Description	CPT																				
48800233	U	Speech Fluency Evaluation	92521																				
48800236	U	Speech Sound Production Eval.	92522																				
48800239	U	Speech Sound Prod & Lang Eval.	92523																				
48800243	U	Speech Voice & Resounce Eval.	92524																				
48800005	U	Swallow Eval	92610																				
48800006	U	Videoflouroscopy	92611																				
48800007	T	Aphasia Eval with Report per hour	96105																				
48800023	U	Prosthetic Device Eval	92597																				
48800014	T	Standardized Cog Test (l hr)	96125																				
48800018	U	Speech Tx	92507																				
48800022	U	Speech Tx Grp (30 min) (2 or more)	92508																				
48800021	U	Speech Tx Grp (60 min) (2 or more)	92508																				
48800004	U	Swallow Tx	92526																				
48800009	U	Cognitive Training	97127																				
48800016	T	Sensory Integration (each 15 min)	97533																				
48800024		No Charge Visit																					
80003460		Passy-Muir Trach Valve																					
80003457		LP Voice Prosthesis																					
80003458		Duckbill Voice Prosthesis																					
80003459		Indwelling VP Replacement																					
				1	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**	**11**	**12**	**13**	**14**	**15**	**16**	**17**	**18**	**19**	**20**

M-28000X (2/18)

Visit #