

## Medicare Expands Telehealth Services to Audiologists and SLPs During the COVID-19 Pandemic

Medicare [will now temporarily cover telehealth services](#) [PDF] provided by audiologists and speech-language pathologists (SLPs) via the waiver authority it was granted by the Coronavirus Aid, Relief, and Economic Security (CARES) Act (P.L. 116-136). Medicare reimbursement of telehealth services provided by audiologists and SLPs will only last the duration of the public health emergency (PHE) and is retroactive to March 1, 2020.

### Covered Audiology Current Procedural Terminology (CPT)® Codes

The following codes representing audiology services are covered Medicare telehealth services:

- **92601:** Diagnostic analysis of cochlear implant, patient younger than 7 years of age; with programming
- **92602:** Diagnostic analysis of cochlear implant, patient younger than 7 years of age; with programming; subsequent programming
- **92603:** Diagnostic analysis of cochlear implant, age 7 years or older; with programming
- **92604:** Diagnostic analysis of cochlear implant, age 7 years or older; with programming; subsequent programming

### Covered Speech-Language Pathology Current Procedural Terminology (CPT)® Codes

The following codes representing speech-language pathology services are covered Medicare telehealth services:

- **92507:** Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual
- **92508:** Treatment of speech, language, voice, communication, and/or auditory processing disorder; group
- **92521:** Evaluation of speech fluency (e.g., stuttering, cluttering)
- **92522:** Evaluation of speech sound production (e.g., articulation, phonological process, apraxia, dysarthria);
- **92523:** with evaluation of language comprehension and expression (e.g., receptive and expressive language)
- **92524:** Behavioral and qualitative analysis of voice and resonance

**Note:** Audiologists and SLPs will not be able to enter into private pay arrangements with Medicare beneficiaries and must bill Medicare for telehealth services because telehealth services are now covered.

### Institutional Billing

Institutional settings, such as skilled nursing facilities and home health agencies, do not appear

able to bill for telehealth services but ASHA is seeking clarification and will advocate for additional waivers as necessary. As noted in a [fact sheet](#) [PDF] associated with waivers provided for home health services under the PHE, CMS states that only in-person services can be reported via the home health claim even when the plan of care is developed or updated to include the use of telecommunication technology. In a similar [fact sheet](#) [PDF] developed for skilled nursing facilities, the only eligible telehealth services are the physician and nonphysician practitioner in-person visits (SLPs are considered suppliers under Medicare). However, Medicare officials [have stated](#) that services provided via audiovisual equipment—such as a smartphone or platforms like FaceTime or Skype—in the same building as the patient or through the patient’s window are allowed but are considered in-person services and not telehealth services.

Under the expanded coverage, audiologists and SLPs should also consider the following:

- For codes that are not authorized telehealth services, you can continue to maintain private contracts with Medicare beneficiaries.
- If you have taken cash from a Medicare beneficiary since March 1 for covered telehealth services, you should reimburse the beneficiary and submit the claim to Medicare.
- If you are not currently enrolled in Medicare, you must enroll in order to provide covered telehealth services. Federal law requires mandatory enrollment and claim submission for Medicare covered services.
- If you are not a Medicare enrolled provider and delivered telehealth services to a Medicare beneficiary at any time since March 1 via a private pay arrangement, you should return those funds and will not be able to bill Medicare for those services.

### **Resources**

ASHA provides coding and billing guidance for Medicare telehealth services during the public health emergency <https://www.asha.org/Practice/reimbursement/medicare/Providing-Telehealth-Services-Under-Medicare-During-the-COVID-19-Pandemic/>. Contact [reimbursement@asha.org](mailto:reimbursement@asha.org) for additional information.