

Speech Therapy CPT codes

Here is a comprehensive table of common Speech Therapy CPT codes with descriptions, typical service times, reimbursement rate info (2025 estimates based on Medicare fee schedules), and applicable modifiers:

CPT Code	Description	Service Time	Reimbursement Rate (2025 est.)	Common Modifiers
92507	Treatment of speech, language, voice, communication, and/or auditory processing disorder, individual	Usually 15 minutes	~\$36 - \$42 per 15 min	GN (therapy by SLP), KX (medically necessary continued care), 95 (telehealth)
92508	Treatment of speech, language, voice, communication, and/or auditory processing disorder; group (2 or more)	Group session	Less than individual rate; varies	GN, KX, 95
92521	Evaluation of speech fluency (e.g., stuttering, cluttering)	Evaluation session	~\$80 - \$100 per session	22 (increased service)

92522	Evaluation of speech sound production (articulation, phonological process, apraxia, dysarthria)	Evaluation session	~\$80 - \$100 per session	22
92523	Evaluation of speech sound production w/ language comprehension and expression	Evaluation session	~\$100 - \$120 per session	22
92524	Behavioral and qualitative analysis of voice and resonance	Evaluation session	~\$100 - \$120 per session	22
92526	Treatment of swallowing dysfunction and/or oral function for feeding	Each 15 min	~\$30 - \$40 per 15 min	GN, KX, 95
92606	Therapeutic services for the use of a non-speech-gener ating augmentative and alternative communication (AAC) device	Varies by service	Medicare limits vary	GN

92609	Therapeutic services for speech-generatin g device (SGD), including programming and training	Varies	Medicare limits vary	GN
97129	Therapeutic interventions focused on cognitive function and compensatory strategies; first 15 minutes	15 minutes	~\$35 - \$45 per 15 min	GN, KX
97130	Each additional 15 minutes of cognitive therapy	An additional 15 minutes	~\$35 - \$45 per 15 min	GN, KX

Notes:

- Service times are generally 15 minutes per unit or session for treatment CPTs.
- Reimbursement rates can vary significantly by payer, provider location, and contract agreements. The provided rates are typical Medicare fee schedule ranges for 2025.
- Common modifiers used in speech therapy billing include:
 - GN: Service provided by a speech-language pathologist
 - KX: Medically necessary continued treatment beyond therapy cap limits
 - 95: Telehealth synchronous service
 - 22: Increased procedural services (must be justified/documented)

This summary provides commonly used CPT codes, billing considerations, timing, and reimbursement ranges to support speech therapy billing and coding needs.