

Eli's Rehab Report

Reader Questions: Keep an Eye on the OT-SLP Crossover Zone

Question: I have a speech-language pathologist who wants to bill for the following CPT codes:

97532 (Development of cognitive skills to improve attention, memory, problem solving [includes compensatory training], direct [one-on-one] patient contact by the provider, each 15 minutes) and

97533 (Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct [one-on-one] patient contact by the provider, each 15 minutes).

Correct me if I'm wrong, but aren't these codes more appropriate for an occupational therapist to charge? I would like to give my SLP the go-ahead, but I don't want to bill inappropriately.

-- Massachusetts subscriber

Answer: The American Medical Association develops CPT codes, and they do not apply to just one specific discipline. A health care practitioner can use any CPT code as long as he or she is qualified to do so. What makes one qualified is his education, training, state laws, and state practice act.

Insurance companies also determine which CPT codes they will cover and which discipline can provide the intervention and be reimbursed for it. For example, several Medicare contractors will reimburse for 97532 and 97533 if billed under a SLP POC, but you should check with your specific payer and with any private payer too.

Watch for: If your SLP has performed speech therapy reporting CPT 92507 (Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual) on the same day as reporting 97532, this code combo will flag a CCI edit, so be sure to document separate and distinct procedures and to append a Modifier 59 to 97532 on the claim form.