

SPEECH SERVICES

ISSUE DATE: April 19, 1983

AUTHORITY: 32 CFR 199.4(g)(45), 32 CFR 199.5(c), and Public Law 107-107

I. CPT¹ PROCEDURE CODE RANGE

92506 - 92508

II. DESCRIPTION

Medical services that provide evaluation, treatment, habilitation, and rehabilitation of speech, language, and voice dysfunctions resulting from congenital anomalies, disease, injury, hearing loss, communication or pervasive developmental disorders or a therapeutic process.

III. POLICY

A. Speech services provided or prescribed and supervised by a physician may be cost-shared.

B. Speech therapy to improve, restore, or maintain function, or to minimize or prevent deterioration of function of a patient when prescribed by a physician is covered in accordance with the rehabilitative therapy provisions found in [Chapter 7, Section 18.1](#).

IV. EXCLUSIONS

A. Services provided to address speech, language, or communication disorders resulting from occupational or educational deficits.

B. For beneficiaries under the age of 3, services and items provided in accordance with the beneficiary's Individualized Family Service Plan as required by Part C of the Individuals with Disabilities Education Act, and which are otherwise allowable under the TRICARE Basic Program or the Extended Care Health Option (ECHO) but determined not to be medically or psychologically necessary, are excluded.

C. For beneficiaries ages 3 to 21 who are receiving special education services from a public educational agency, cost-sharing of outpatient speech services that are required by the

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TRICARE POLICY MANUAL 6010.54-M, AUGUST 1, 2002

CHAPTER 7, SECTION 7.1

SPEECH SERVICES

Individuals with Disabilities Education Act and which are indicated in the beneficiary's Individualized Education Program (IEP), may not be cost-shared except when the intensity or timeliness of speech services as proposed by the educational agency are not appropriate medical care.

D. Myofunctional or tongue thrust therapy is unproven.

E. Maintenance therapy that does not require a skilled level after a therapy program has been designed (see Chapter 7, Section 18.1).

F. Videofluoroscopy evaluation in speech pathology is unproven.

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