# EARLY STEPS TAXONOMY

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<th>SERVICE SHORT DESCRIPTION</th>
<th>CODE FOR FORM</th>
<th>CODE FOR PROVIDER TO AUTHORIZE</th>
<th>CODE FOR PROVIDER TO SUBMIT FOR PAYMENT</th>
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<th>EARLY STEPS MAX RATE</th>
<th>BILLING UNIT = ONE UNIT FOR EACH</th>
<th>INCREMENT</th>
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<td>37</td>
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## EARLY STEPS TAXONOMY

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<th>CODE FOR PROVIDER TO SUBMIT FOR PAYMENT</th>
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<th>INCREMENT REFLECTED BELOW</th>
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<td>71.44</td>
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<td>UF Codes</td>
<td>Service Short Description</td>
<td>Code for Form</td>
<td>Code for Provider to Submit for Authorizations</td>
<td>Authorizing Unit; 1 Unit =</td>
<td>Early Steps Unit Rate</td>
<td>Early Steps Max Rate</td>
<td>Billing Unit = One Unit for Each Increment Reflected Below</td>
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<td>Eval by Licensed PT, Initial</td>
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<td>79 RSPT</td>
<td>Respite *(formerly T1005)</td>
<td>RSPT</td>
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<td>Screening</td>
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<td>91 SPCH</td>
<td>Behavioral and Qualitative Analysis of Voice and Resonance</td>
<td>92524</td>
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<td>$51.05</td>
<td>Each Eval</td>
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<tr>
<td>92 SPCH</td>
<td>Evaluation of Speech Fluency (E.G., Stuttering, Cluttering)</td>
<td>92521</td>
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<td>Each Eval</td>
<td>$51.05</td>
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<td>Each Eval</td>
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<td>93 SPCH</td>
<td>Evaluation of Speech Sound Prodigation (E.G., Articulation, Phonological Process, Apraxia, Dysarthria)</td>
<td>92522</td>
<td>92522</td>
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<td>94 SPCH</td>
<td>Evaluation of Speech Sound Prodigation (E.G., Articulation, Phonological Process, Apraxia, Dysarthria); with Evaluation of Language Comprehension and Expression (E.G. Receptive and Expressive Language) Group SLP Session Per Child</td>
<td>92508</td>
<td>92508</td>
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<td>$13.88</td>
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<td>98 TRAV</td>
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<td>99 TRAV</td>
<td>Provider Travel, Evaluations Round-Trip - By Mile (A0080)</td>
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<td>101 VISD</td>
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<td>1 Eval</td>
<td>$57.27</td>
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<td>Each Eval</td>
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*Rate TBD, not auto calculated
# Early Steps Taxonomy

<table>
<thead>
<tr>
<th>UF Codes</th>
<th>Service Short Description</th>
<th>Code for Form G for Authorizations</th>
<th>Code for Provider to Submit for Payment</th>
<th>Authorizing Unit; 1 Unit =</th>
<th>Early Steps Unit Rate</th>
<th>Early Steps Max Rate</th>
<th>Billing Unit = One Unit for Each Increment</th>
<th>Reflected Below</th>
<th>Notes</th>
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<td>104 VISD</td>
<td>Vision Eval Diag (Simple)</td>
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<td>$51.05</td>
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*The IFSP Team will review the agreement to ensure the respite rate negotiated by the family is reasonable and necessary based on the needs of the child.

**Taxonomy rates subject to change based on Medicaid rate changes and Department of Health discretion.**

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<tr>
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Title 21 considered TPI
Title 19 considered Medicaid
Both billed via UF NCES to CMSN, Ped-I-Care

Note: SLP CPT Code 92506 has been replaced.
See link for more info.

[http://www.asha.org/Practice/reimbursement/coding/New-CPT-Evaluation-Codes-for-SLPs/](http://www.asha.org/Practice/reimbursement/coding/New-CPT-Evaluation-Codes-for-SLPs/)

As of 10.01.2015