

# Service Record – Speech Therapy

<b>Medicaid Number</b>		<b>Last Name</b>		<b>First Name</b>	
<b>WVEIS Number</b>		<b>Diagnosis Code</b>		<b>School</b>	
<b>County</b>	<b>1 Beginning Date</b>	<b>1 Ending Date</b>	<b>1 Procedure</b>	<b>Units</b>	
	<b>2 Beginning Date</b>	<b>2 Ending Date</b>	<b>2 Procedure</b>	<b>Units</b>	
<b>Ind. Provider Name</b>					
	<b>3 Beginning Date</b>	<b>3 Ending Date</b>	<b>3 Procedure</b>	<b>Units</b>	

**Speech Therapy Services:** *Physician's authorization on file. Must be identified on IEP.*

Code	Procedure	Service Unit
92506	Evaluation of speech, language, voice, communication, auditory processing, and/or aural rehabilitation status	1 in 6 mo.
92507	Treatment of speech language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation); Individual therapy session	15 minutes
92508	Treatment of speech language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation); Group, two or more individuals	15 minutes

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*Signature*

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*Date*