



**News Flash** - The revised publication titled Medicare Billing Information for Rural Providers, Suppliers, and Physicians (October 2008), which consists of charts that provide Medicare billing information for Rural Health Clinics, Federally Qualified Health Centers, Skilled Nursing Facilities, Home Health Agencies, Critical Access Hospitals, and Swing Beds, is now available in downloadable format from the Centers for Medicare & Medicaid Services Medicare Learning Network at <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/RuralChart.pdf> on the CMS website.

MLN Matters Number: MM6292

Related Change Request (CR) #: 6292

Related CR Release Date: February 20, 2009

Effective Date: July 1, 2009

Related CR Transmittal #: R1686CP

Implementation Date: July 6, 2009

**Note:** This article was updated on December 17, 2012, to reflect current Web addresses. All other information remains unchanged.

## Adding a New Specialty Code for Speech Language Pathologists (SLP)

### Provider Types Affected

Speech Language Pathologists and other providers who bill Medicare carriers, fiscal intermediaries (FI), or Medicare Administrative Contractors (MACs) for speech language pathology services provided to Medicare beneficiaries.

### What You Need to Know

CR 6292, from which this article is taken, announces that the Centers for Medicare & Medicaid Services (CMS) has developed a new specialty code to categorize speech pathology services. This new code (specialty code 15) is effective July 1, 2009.

Providers and suppliers use CMS specialty codes to ensure that their claims are processed and paid correctly. Section 143 of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) amends the Social Security Act to permit Speech Language Pathologists (SLP) to apply for enrollment as suppliers in Medicare beginning July 1, 2009. This will allow SLPs in private practice to bill Medicare directly for their services.

#### Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

## Additional Information

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You can find the official instruction, CR6292, issued to your carrier, FI, or MAC by visiting <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R1686CP.pdf> on the CMS website

If you have any questions, please contact your carrier, FI, or A/B MAC at their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

***News Flash*** - **It's Not Too Late to Give and Get the Flu Shot!** In the United States, the peak of flu season typically occurs anywhere from late December through March; however, flu season can last as late as May. Each office visit presents an opportunity for you to talk with your patients about the importance of getting an annual flu shot and a one time pneumococcal vaccination. Protect yourself, your patients, and your family and friends by getting and giving the flu shot. **Don't Get the Flu. Don't Give the Flu.** Remember - Influenza and pneumococcal vaccinations plus their administration are covered Part B benefits. Note that influenza and pneumococcal vaccines are NOT Part D covered drugs. Health care professionals and their staff can learn more about Medicare's Part B coverage of adult immunizations and related provider education resources, by reviewing Special Edition *MLN Matters* article SE0838 <http://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/SE0838.pdf> on the CMS website.

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