

Early Intervention Procedure Code List for Rhode Island Providers

The following is a list of procedure code(s) that Rhode Island early intervention providers may bill in accordance with the codes set forth by the Rhode Island Department of Human Services. The absence and/or presence of a CPT procedure code is not an indication and/or guarantee of coverage and/or payment.

Code	Description
92506	Speech evaluation
92507	Speech (use modifier HN for speech-SLPA)
92508	Speech group (use modifier HN for speech-SLPA)
92557	Comprehensive audiometry threshold evaluation
96111	Psychological developmental testing
96151	Developmental monitoring
96153	Family training education and support
96154	Health and behavior intervention – child and family
97161	Physical therapy (PT) evaluation; low complexity
97162	PT evaluation; moderate complexity
97163	PT evaluation; high complexity
97164	Re-evaluation of PT established plan of care
97165	Occupational therapy (OT) evaluation; low complexity
97166	OT evaluation; moderate complexity
97167	OT evaluation; high complexity
97168	Re-evaluation of OT established plan of care
97110	Physical therapy (use modifier HM for PT-PTA)
97150	Center group – rehab Note: use the following modifier(s), as appropriate: <ul style="list-style-type: none"> • GO (OT) • GO and HM (OT group-COTA) • GP (PT) • GP and HM (PT group-PTA)
97530	Occupational therapy (use modifier HM for OT-COTA)
97535	Assistive technology
99205	Functional vision evaluation
H0046	Supervision Note: Use modifier(s) HN (bachelor’s level), HO (master’s level) or HP (doctoral level), as appropriate
H2000	Comprehensive multidisciplinary evaluation
H2015	Comprehensive community support services, each 15 minutes
H2016	File management
S9446	Family education and support – parent education
T1013	Translator/interpreter
T1016	Transition planning
T1023	Intake/family assessment (use modifier TL for IFSP meeting)
T1024	Team treatment
T1027	Family training education and support
T2004	Transportation
T5999	Assistive technology device
V2799	Vision service

V5008	Hearing screening
V5010	Assessment for hearing aid

AUDIT AND DISCLAIMER INFORMATION

Tufts Health Plan reserves the right to conduct audits on any provider and/or facility to ensure compliance with the guidelines stated in this payment policy. If such an audit determines that a provider/facility did not comply with this payment policy, Tufts Health Plan will expect the provider/facility to refund all payments related to noncompliance. For more information about Tufts Health Plan’s [audit policies](#), refer to the Provider website.

This policy provides information on Tufts Health Plan claims adjudication processes. As every claim is unique, this policy is neither a guarantee of payment, nor a final indication of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization and utilization management requirements (when applicable), adherence to plan policies and procedures, and claims editing logic. An authorization is not a guarantee of payment. Claims for services subject to authorization may be reviewed for accuracy and compliance with payment policies.