Cost Comparison of Instrumental Swallowing Assessments:

Benefits of providing a FEES Program:

1. Mobile service keeps Residents in the facility. No transportation stress to the Resident, no loss of staff to accompany the Resident, no loss of other therapy or nursing treatment time, and the facility SLP is able to participate in the assessment.
2. Test results are immediately available to facility staff and physician.
3. Consistent assessment of pharyngeal dysphagia has been shown to reduce incidence of pneumonia and related discharges to the hospital.
4. Consistent assessment of pharyngeal dysphagia can reduce the unnecessary use of thickened liquids which are costly to the facility.
5. Justifies initiating and/or continuing a skilled dysphagia treatment plan.

Hospital MBS	Portable MBS	Portable FEES
$500- $750.00	**$475-$600.00**	**$300.00**

CMS regulations require speech therapy services be billed directly to the facility. Under Medicare Part B, private insurances and HMOs, you may recover monies for the speech therapy code(s) indicated on your invoice utilizing the UB-04 or similar form. These codes total about $170.00 to $242.00.

CPT/ HCPCS

92612 FEES $170.00 (Medicare) $113.00 (Medicaid)

92526 Swallowing Therapy (may need -59 modifier) $75.00 (Medicare) $39.94 (Medicaid)

ICD-9 codes

787.22, 787.23, 787.29 acceptable dysphagia codes

478.30 unspec. vocal cord paralysis

478.6 edema of the larynx

438.82 dysphagia cerebrovascular disease