

Humana Healthy Horizons™ in Louisiana

Department: Utilization Management	Policy and Procedure No:		
Policy and Procedure Title: Speech Therapy Clinical Coverage Policy			
Process Cycle: Annually		Responsible Departments: Clinical	
Approved By: Patricia Jones, RN		Issue Date: 1/1/23	Revised:

PURPOSE: The purpose of this policy is to define Speech Therapy and the criteria for medical necessity for Humana Healthy Horizons in Louisiana.

POLICY AND PROCEDURE:

Policy: Speech Therapy Clinical Coverage Policy

Procedure:

Speech therapy involves the diagnosis, study and treatment of verbal communication and language in people of all ages to enable them to communicate to the best of their ability. Speech therapy is also used to evaluate and treat swallowing disorders.

Speech therapy services are provided by, or under the direction of, licensed speechlanguage pathologists. Speech-language pathologists (also referred to as speech therapists) assess, diagnose, help prevent and treat disorders related to fluency (flow of speech), language, speech, swallowing and voice.

Speech therapy services may be considered rehabilitative OR habilitative:

- **Rehabilitative** services refers to speech therapy services that help an individual regain or improve skills and functioning for daily living that have been lost or impaired because an individual was sick, injured or disabled.
- **Habilitative** services refer to speech therapy services that help an individual keep, learn or improve skills and functioning for daily living. An example would include therapy for a child who isn't talking at the expected age.

Melodic intonation therapy (MIT) is a treatment technique that uses melodic and rhythmic components to purportedly assist in speech recovery for individuals with aphasia (eg, loss of the ability to produce or understand language). (Refer to Coverage Limitations section)

Coverage Determination

Rehabilitative Speech Therapy

Most certificates limit the duration or number of visits. Any services for rehabilitative speech therapy that are considered primarily educational or training in nature are generally NOT covered under most Humana benefit Plans.

General Criteria for Rehabilitative Speech Therapy

Humana members may be eligible under the Plan for rehabilitative speech therapy when ALL of the following criteria are met:

Humana Healthy Horizons™ in Louisiana

Department: Utilization Management	Policy and Procedure No:		
Policy and Procedure Title: Speech Therapy Clinical Coverage Policy			
Process Cycle: Annually		Responsible Departments: Clinical	
Approved By: Patricia Jones, RN		Issue Date: 1/1/23	Revised:

- Individual's participating physician or other licensed healthcare professional acting within their state specific licensure has determined that the individual's condition can improve significantly within three months of the date that therapy begins; AND
- Rehabilitative speech therapy may be performed for conditions related to a defect, developmental delay*, functional impairment** or pain as evidenced by supporting documentation recorded in medical records submitted for review; AND
- Rehabilitative speech therapy services must be performed by a duly licensed and certified, if applicable, provider. All services provided must be within the applicable scope of practice for the provider in their licensed jurisdiction where the services are provided; AND
- Rehabilitative speech therapy services provided must be of the complexity and nature to require that they are performed by a licensed speech-language pathologist or provided under their direct supervision by a licensed ancillary person as permitted under state laws; AND
- Rehabilitative speech therapy services must be provided in accordance with an ongoing, written, individualized plan of care that is reviewed with and approved by the treating physician or other licensed healthcare professional acting within their state specific licensure. The plan of care should be of sufficient detail and include appropriate objective and subjective data to demonstrate the medical necessity of the proposed treatment. This information should include at least the following:
 - o Speech therapy evaluation; AND
 - o Frequency and duration of the treatments provided must be reasonable and customary under the generally accepted standards of practice for speech therapy; AND
 - o Reasonable estimate as to the time when these goals will be achieved; AND
 - o Short- and long-term goals that are specific, quantifiable (measurable) and objective; AND
 - o Specific speech therapy techniques, treatments or exercises to be used; AND
- Signatures, license numbers and professional license designations of the treating speech-language pathologist and treating physician or other licensed healthcare professional acting within their state specific licensure must be affixed to the evaluation and/or ongoing treatment reports. The individual must be reevaluated at least monthly and the results of these evaluations recorded in a standard format. The individual's progress towards achieving the stated goals must be assessed and if needed, changes made in the treatment program as a result of the evaluations; AND
- Rehabilitative speech therapy may be appropriate for acute episodes or significant exacerbations of chronic/longstanding/previously known medical or surgical conditions
 - *Developmental delay describes the condition in which a child is not developing and/or achieving skills according to the expected time frame
 - **Functional impairment describes a direct and measurable reduction in physical performance of an organ or body part

Rehabilitative speech, language and communication evaluation may be appropriate for the following conditions including, but not limited to:

Humana Healthy Horizons™ in Louisiana

Department: Utilization Management	Policy and Procedure No:	
Policy and Procedure Title: Speech Therapy Clinical Coverage Policy		
Process Cycle: Annually	Responsible Departments: Clinical	
Approved By: Patricia Jones, RN	Issue Date: 1/1/23	Revised:

- Autism spectrum disorders; OR
- Behavioral disabilities; OR
- Intellectual disability/intellectual development disorder (impairments of general mental abilities that impact adaptive functioning from conceptual, social and practical domains); OR
- Learning disabilities

Rehabilitative speech therapy may be medically necessary in the treatment of communication disabilities and/or dysphagia (swallowing disorders) that are the result of the following conditions including, but not limited to

- Cerebral anoxia/hypoxia including neonatal asphyxia; OR
- Cerebrovascular accident (CVA); OR
- Congenital anomaly; OR
- Head injury; OR
- Neuromuscular disorders (such as Parkinson's disease); OR
- Postoperative conditions; OR
- Surgery of the larynx or vocal cords

Habilitative Speech Therapy

Refer to specific certificate language regarding habilitative speech therapy. Most certificates limit the duration or number of visits.

General Criteria for Habilitative Speech Therapy

Humana members may be eligible under the Plan for habilitative speech therapy when ALL of the following criteria are met:

- Individual's participating physician or other licensed healthcare professional acting within their state specific licensure has determined that the habilitative speech therapy is expected to result in an improvement or stabilization of the individual's condition within a reasonable and generally predictable period of time; AND
- Habilitative speech therapy may be provided for an individual with a congenital anomaly*, defect or developmental delay** as evidenced by supporting documentation recorded in medical records submitted for review; AND
- Habilitative speech therapy services must be performed by a duly licensed and certified, if applicable, provider. All services provided must be within the applicable scope of practice for the provider in their licensed jurisdiction where the services are provided; AND
- Habilitative speech therapy services provided must be of the complexity and nature to require that they are performed by a licensed speech-language pathologist or provided under their direct supervision by a licensed ancillary person as permitted under state laws; AND
- Habilitative speech therapy services must be provided in accordance with an ongoing, written, individualized plan of care that is reviewed with and approved by the treating physician or other licensed healthcare professional acting within their state specific licensure. The plan of care should be of sufficient detail and include appropriate objective and subjective data to

Humana Healthy Horizons™ in Louisiana

Department: Utilization Management	Policy and Procedure No:	
Policy and Procedure Title: Speech Therapy Clinical Coverage Policy		
Process Cycle: Annually	Responsible Departments: Clinical	
Approved By: Patricia Jones, RN	Issue Date: 1/1/23	Revised:

demonstrate the medical necessity of the proposed treatment. This information should include at least the following:

- o Speech therapy evaluation; AND
- o Frequency and duration of the treatments provided must be reasonable and customary under the generally accepted standards of practice for speech therapy; AND
- o Reasonable estimate as to the time when these goals will be achieved; AND
- o Short- and long-term goals that are specific, quantifiable (measurable) and objective; AND
- o Specific speech therapy techniques, treatments or exercises to be used; AND
- Signatures, license numbers and professional license designations of the treating speech-language pathologist and treating physician or other licensed healthcare professional acting within their state specific licensure must be affixed to the evaluation and/or ongoing treatment reports. The individual must be reevaluated at least monthly and the results of these evaluations recorded in a standard format. The individual's progress towards achieving the stated goals must be assessed and if needed, changes made in the treatment program as a result of the evaluations; AND
- Habilitative speech therapy may be appropriate for acute episodes or exacerbations of chronic/longstanding/previously known medical or surgical conditions
 - *Congenital anomaly describes an abnormality of the body that is present from the time of birth
 - **Developmental delay describes the condition in which a child is not developing and/or achieving skills according to the expected time frame

Habilitative speech, language and communication evaluation may be appropriate for the following conditions including, but not limited to:

- Autism spectrum disorders; OR
- Behavioral disabilities; OR
- Intellectual disability/intellectual development disorder (impairments of general mental abilities that impact adaptive functioning from conceptual, social and practical domains); OR
 - Learning disabilities Habilitative speech therapy may be medically necessary in the treatment of communication disabilities and/or dysphasia (swallowing disorders) that are the result of the following conditions including, but not limited to:
 - Autism spectrum disorders; OR
 - Cerebral anoxia/hypoxia including neonatal asphyxia; OR
 - Cerebrovascular accident (CVA); OR
 - Congenital anomaly; OR
 - Head injury; OR
 - Neuromuscular disorders (such as Parkinson's disease); OR
 - Postoperative conditions; OR
 - Surgery of the larynx or vocal cord

Humana Healthy Horizons™ in Louisiana

Department: Utilization Management	Policy and Procedure No:	
Policy and Procedure Title: Speech Therapy Clinical Coverage Policy		
Process Cycle: Annually	Responsible Departments: Clinical	
Approved By: Patricia Jones, RN	Issue Date: 1/1/23	Revised:

Coverage Limitations

Rehabilitative Speech Therapy Humana members may NOT be eligible under the Plan for rehabilitative speech therapy for any indications other than those listed above including, but not limited to, the following:

- Articulation disorders; OR
- Central processing dysfunction; OR
- Duplicate therapy – receiving multiple therapies (physical, occupational and/or speech therapy) for the same clinical condition. When multiple therapies are used, each must have separate written treatment plans and must provide significantly different treatments and not be seen as generally duplicating each other; OR
- Educational purposes, as such services are generally excluded in the certificate (Refer to specific certificate language regarding coverage of treatments for educational purposes); OR
- Functional dysphonia (absence of an anatomic laryngeal abnormality); OR
- Group therapy (as this is not one-on-one and individualized to the specific individual's needs); OR
- Hearing loss related to the aging process; OR
- Maintenance care consists of activities that generally are intended to preserve the individual's present level of function and/or prevent regression of that level of function including, but may not be limited to the following (may be excluded in the certificate):
 - o Maintenance begins when the therapeutic goals of the treatment program are achieved or when no further significant progress is made or reasonably seen as occurring; AND
 - o Individual has achieved generally accepted normal levels of function and/or muscle strength and has reached a plateau (generally a period of 4 weeks or less, depending on the specific condition and/or individual situation); OR
- Melodic intonation therapy (MIT); OR
- Noncompliance with therapy program; OR
- Psychoneurotic or psychotic conditions; OR
- Self-correcting conditions (eg, hoarseness or natural dysfluency in young children or developmental articulation errors); OR
- Stuttering or stammering; OR
- Tongue thrust; OR
- Treatment of speech, language and/or communication deficits/difficulties for the following conditions:
 - o Autism spectrum disorders; OR
 - o Behavioral disabilities; OR
 - o Intellectual disability/intellectual development disorder; OR
 - o Learning disabilities; OR

Humana Healthy Horizons™ in Louisiana

Department: Utilization Management	Policy and Procedure No:	
Policy and Procedure Title: Speech Therapy Clinical Coverage Policy		
Process Cycle: Annually	Responsible Departments: Clinical	
Approved By: Patricia Jones, RN	Issue Date: 1/1/23	Revised:

- o Voice training; OR
- When there is no potential for significant improvement documented in the speech evaluation

All other indications are considered not medically necessary as defined in the member's individual certificate. Please refer to the member's individual certificate for the specific definition.

Habilitative Speech Therapy

Humana members may NOT be eligible under the Plan for habilitative speech therapy for any indications other than those listed above including, but not limited to, the following:

- Duplicate therapy – receiving multiple therapies (physical, occupational and/or speech therapy) for the same clinical condition. When multiple therapies are used, each must have separate written treatment plans and must provide significantly different treatments and not be seen as generally duplicating each other; OR
- Group therapy (as this is not one-on-one and individualized to the specific individual's needs); OR
- Hearing loss related to the aging process; OR
- Melodic Intonation Therapy (MIT); OR
- Noncompliance with therapy program; OR
- Psychoneurotic or psychotic conditions; OR
- Self-correcting conditions (eg, hoarseness or natural dysfluency in young children or developmental articulation errors); OR
- Stuttering or stammering; OR
- Tongue thrust; OR
- Voice training

All other indications are considered not medically necessary as defined in the member's individual certificate. Please refer to the member's individual certificate for the specific definition

Background

Additional information about speech disorders (eg, articulation deficiencies, dysfluencies, voice disorders) may be found from the following websites:

- American Speech-Language Hearing Association
- National Library of Medicine

References:

1. American Academy of Neurology (AAN). Evidence based guideline summary: evaluation, diagnosis and management of congenital muscular dystrophy. <http://www.aan.com>. Published March 31, 2015. Updated September 18, 2021. Accessed October 22, 2021.

Humana Healthy Horizons™ in Louisiana

Department: Utilization Management	Policy and Procedure No:	
Policy and Procedure Title: Speech Therapy Clinical Coverage Policy		
Process Cycle: Annually	Responsible Departments: Clinical	
Approved By: Patricia Jones, RN	Issue Date: 1/1/23	Revised:

2. American Academy of Neurology (AAN). Practice parameter: neuroprotective strategies and alternative therapies for Parkinson disease (ARCHIVED). <http://www.aan.com>. Published April 2, 2006. Accessed October 22, 2021.
3. American Academy of Otolaryngology – Head and Neck Surgery (AAO-HNS). Clinical practice guideline: hoarseness (dysphonia). <http://www.entnet.org>. Published March 1, 2018. Accessed October 26, 2021.
4. American Academy of Otolaryngology – Head and Neck Surgery (AAO-HNS). Position Statement. Voice therapy in the treatment of dysphonia. <http://www.entnet.org>. Published September 28, 2005. Updated March 20, 2016. Accessed October 26, 2021.
5. American Academy of Pediatrics (AAP). Clinical Report. Promoting optimal development: identifying infants and young children with developmental disorders through developmental surveillance and screening. <http://www.aap.org>. Published January 2020. Accessed October 26, 2021.
6. American Speech-Language-Hearing Association (ASHA). Guidelines. Admission/discharge criteria in speech-language pathology. <http://www.asha.org>. Published 2004. Accessed October 26, 2021.
7. American Speech-Language-Hearing Association (ASHA). Preferred practice patterns for the profession of speech-language pathology. <http://www.asha.org>. Published 2004. Accessed October 26, 2021.
8. Centers for Medicare & Medicaid Services (CMS). National coverage determination (NCD) for melodic intonation therapy (170.2). <https://www.cms.gov>. Published March 11, 1983. Accessed October 22, 2021.
9. Centers for Medicare & Medicaid Services (CMS). National coverage determination (NCD) for speech-language pathology services for the treatment of dysphagia (170.3). <https://www.cms.gov>. Published October 1, 2006. Accessed October 22, 2021.
10. ClinicalKey. Craine RM, Rogers J. Stuttering. In: Ferri FF. Ferri's Clinical Advisor 2022. Elsevier; 2022:1429.e4-1429.e5. <http://www.clinicalkey.com>. Accessed October 21, 2021.
11. ClinicalKey. Samlan RA. Voice evaluation and therapy. In: Flint PW. Cummings Otolaryngology. 7th ed. Elsevier; 2021:819-826.e3. <http://www.clinicalkey.com>. Accessed October 21, 2021.
12. ClinicalKey. Velez C, Pandolfino JE, Krishnan K. Dysphagia and esophageal obstruction. In: Kellerman RD, Rakel DP. Conn's Current Therapy 2021. Elsevier; 2021:205-210. <http://www.clinicalkey.com>. Accessed October 21, 2021.
13. Hayes, Inc. Health Technology Assessment. Lee Silverman voice treatment (LSVT) LOUD for speech and voice problems in Parkinson disease. <https://evidence.hayesinc.com>. Published November 9, 2020. Accessed October 20, 2021.
14. Hayes, Inc. Health Technology Brief (ARCHIVED). Speech therapy for pervasive developmental disorders. <https://evidence.hayesinc.com>. Published April 28, 2008. Updated April 13, 2010. Accessed October 20, 2021.
15. Hayes, Inc. Health Technology Brief (ARCHIVED). Speech therapy for treatment of adults with primary progressive aphasia. <https://evidence.hayesinc.com>. Published June 23, 2016. Updated June 7, 2018. Accessed October 20, 2021.
16. MCG Health. Acquired apraxia of speech rehabilitation. 25th edition. <http://mcg.com>. Accessed October 1, 2021.

Humana Healthy Horizons™ in Louisiana

Department: Utilization Management	Policy and Procedure No:		
Policy and Procedure Title: Speech Therapy Clinical Coverage Policy			
Process Cycle: Annually		Responsible Departments: Clinical	
Approved By: Patricia Jones, RN		Issue Date: 1/1/23	Revised:

17. MCG Health. Developmental language disorders rehabilitation. 25th edition. <http://mcg.com>. Accessed October 1, 2021.
18. MCG Health. Developmental speech disorders rehabilitation. 25th edition. <http://mcg.com>. Accessed October 1, 2021.
19. MCG Health. Dysarthria rehabilitation. 25th edition. <http://mcg.com>. Accessed October 1, 2021.
20. MCG Health. Dysphagia rehabilitation. 25th edition. <http://mcg.com>. Accessed October 1, 2021.
21. MCG Health. Voice disorders rehabilitation. 25th edition. <http://mcg.com>. Accessed October 1, 2021.
22. UpToDate, Inc. Alaryngeal speech rehabilitation. <http://www.uptodate.com>. Updated September 2021. Accessed October 20, 2021.
23. UpToDate, Inc. Ankyloglossia (tongue-tie) in infants and children. <http://www.uptodate.com>. Updated September 2021. Accessed October 20, 2021.
24. UpToDate, Inc. Aphasia: prognosis and treatment. <http://www.uptodate.com>. Updated October 6, 2021. Accessed October 20, 2021.
25. UpToDate, Inc. Evaluation and treatment of speech and language disorders in children. <http://www.uptodate.com>. Updated September 2021. Accessed October 20, 2021.
26. UpToDate, Inc. Expressive language delay ("late talking") in young children. <http://www.uptodate.com>. Updated September 2021. Accessed October 20, 2021.
27. UpToDate, Inc. Fragile X syndrome: management in children and adolescents. <http://www.uptodate.com>. Updated September 2021. Accessed October 20, 2021.
28. UpToDate, Inc. Frontotemporal dementia: treatment. <http://www.uptodate.com>. Updated September 2021. Accessed October 20, 2021.
29. UpToDate, Inc. Hoarseness in children: evaluation. <http://www.uptodate.com>. Updated September 2021. Accessed October 20, 2021.
30. UpToDate, Inc. Inducible laryngeal obstruction (paradoxical vocal fold motion). <http://www.uptodate.com>. Updated September 2021. Accessed October 20, 2021.
31. UpToDate, Inc. Locked-in syndrome. <http://www.uptodate.com>. Updated September 20, 2021. Accessed October 20, 2021.
32. UpToDate, Inc. Multiple system atrophy: prognosis and treatment. <https://www.uptodate.com>. Updated September 2021. Accessed October 20, 2021.
33. UpToDate, Inc. Nonpharmacologic management of Parkinson disease. <http://www.uptodate.com>. Updated October 5, 2021. Accessed October 20, 2021.
34. UpToDate, Inc. Speech and swallowing rehabilitation of the patient with head and neck cancer. <http://www.uptodate.com>. Updated September 2021. Accessed October 20, 2021.
35. US Department of Veterans Affairs (VA). VA/DoD Clinical Practice Guideline. Management of stroke rehabilitation. <http://www.va.gov>. Published July 2019. Accessed October 22, 2021.
36. US Government Publishing Office. Electronic code of federal regulations: part 156 - health insurance issuer standards under the Affordable Care Act, including standards related to exchanges. <http://www.ecfr.gov>. Published February 25, 2013. Updated April 17, 2018. Accessed October 26, 2021.

Humana Healthy Horizons™ in Louisiana

Department: Utilization Management	Policy and Procedure No:		
Policy and Procedure Title: Speech Therapy Clinical Coverage Policy			
Process Cycle: Annually		Responsible Departments: Clinical	
Approved By: Patricia Jones, RN		Issue Date: 1/1/23	Revised:

37. US Preventive Services Task Force (USPSTF). Recommendation Statement. Screening for speech and language delay and disorders in children age 5 years or younger.

<http://www.uspreventiveservicestaskforce.org>. Published July 7, 2015. Accessed October 26, 2021

ADDITIONAL RESOURCES:

VERSION CONTROL:

Version.Review.Approval History				
Department:	Purpose of Review	Reviewed and Approved By:	Date:	Additional Comments:
Clinical	Policy Development	Tiffany LeBlanc	8/18/2022	
Clinical	Policy Review	Patricia Jones/Cali Brou	8/22/2022	
Clinical	Policy Review	Dr. Ian Nathanson, VP Medicaid Clinical	8/22/2022	
Clinical	Adoption Review	Medicaid Quality Governance Committee	8/25/2022	Committee approved. Ben Thompson, Committee Chair

DISCLAIMER:

Humana follows all federal and state laws and regulations. Where more than one state is impacted by an issue, to allow for consistency, Humana will follow the most stringent requirement.

This document is intended as a guideline. Situations may arise in which professional judgment may necessitate actions that differ from the guideline. Circumstances that justify the variation from the guideline should be noted and submitted to the appropriate business area for review and documentation. This (policy/procedure) is subject to change or termination by Humana at any time. Humana has full and final discretionary authority for its interpretation and application. This (policy/procedure) supersedes all other policies, requirements, procedures or information conflicting with it. If viewing a printed version of this document, please refer to the electronic copy maintained by CMU to ensure no modifications have been made.

NON-COMPLIANCE:

Humana Healthy Horizons™ in Louisiana

Department: Utilization Management	Policy and Procedure No:		
Policy and Procedure Title: Speech Therapy Clinical Coverage Policy			
Process Cycle: Annually		Responsible Departments: Clinical	
Approved By: Patricia Jones, RN		Issue Date: 1/1/23	Revised:

Failing to comply with any part of Humana's policies, procedures, and guidelines may result in disciplinary actions up to and including termination of employment, services or relationship with Humana. In addition, state and/or federal agencies may take action in accordance with applicable laws, rules and regulations.

Any unlawful act involving Humana systems or information may result in Humana turning over all evidence of unlawful activity to appropriate authorities. Information on handling sanctions related to non-compliance with this policy may be found in the Expectations for Performance, and Critical Offenses policies, both of which may be found in the Associate Support Center via Humana's secure intranet of Hi! (Workday & Apps/Associate Support Center).