## **Appeal Template**

### **Stuttering Treatment**

[Date of Submission]

[Health Plan Name] [Health Plan Address] [City, State Zip]

Re: [Insert Patient Name and Date of Birth] Member ID#: [Insert Member ID Number]

Member Name: [Insert Member Name if not Patient]

Group Name: [Insert Group Name] Group ID#: [Insert Group Number]

#### **Dear Claims Department:**

I am writing in support of payment for speech-language pathology services for [insert child's name], a 7-year-old child with disfluent speech. Coverage was denied by [Health Plan] because services are considered "educational" in nature. [Health Plan] further stated that it would pay for speech-language treatment "if the speech disorder has its origin in a definable illness or injury caused by a diagnosed physiological dysfunction."

Stuttering is a type of fluency disorder. It is an interruption in the flow of speaking characterized by atypical rate, rhythm, and disfluencies (e.g., repetitions of sounds, syllables, words, and phrases; sound prolongations; and blocks), which may also be accompanied by excessive tension, speaking avoidance, struggle behaviors, and secondary mannerisms (American Speech-Language-Hearing Association [ASHA], 1993). Children and adults who stutter also frequently experience psychological, emotional, social, and functional consequences from their stuttering, including social anxiety, a sense of loss of control, and negative thoughts or feelings about themselves or about communication (Boyle, 2015; Craig & Tran, 2014; Iverach et al., 2016; Iverach & Rapee, 2014). Stuttering has been classified and given a diagnostic code in the International Classification of Diseases, 10th Revision.

Determination of medical necessity considers whether the service is essential and appropriate to the diagnosis and/or treatment of an illness or injury. Speech-language pathology services are "essential and appropriate" in treating [insert child's name] stuttering.

Causes of stuttering are thought to be multifactorial and include genetic and neurophysiological factors that contribute to its emergence (Smith & Weber, 2017). Research indicates growing support that stuttering is neurophysiologically based (Chang, 2014; Chang et al., 2019), including gray and white matter differences, neural network connectivity differences, atypical lateralization of hemispheric functions, white matter connections, and reduced blood flow in the brain.

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Speech-language pathologists are responsible for diagnosing and treating people who stutter. Treatment for stuttering results in improvement for about 70% of all cases across the life span. Treatment effectiveness studies of school-age children demonstrate an average of 61% reduction in stuttering frequency. Speech-language pathology services are not "educational" in nature, but instead area health related service. The services are recognized as health care services by the Centers for Medicare & Medicaid Services of the U.S. Department of Health and Human Services.

Please reconsider this claim for speech-language pathology services. The services are medically necessary to treat an illness, and the services are health care related.

Sincerely,

[Treating clinician's name]
[Practice Name]
[Address]
[City, State Zip]
[Phone Number]
[Email]
[NPI]