

DEVELOPMENTAL DELAY AND LEARNING DISABILITIES

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Covered benefits are listed in three (3) Sections - A, B and C. All services must be medically necessary. Each benefit plan contains its own specific provisions for coverage, limitations and exclusions as stated in the member's Evidence of Coverage (EOC)/Schedule of Benefits (SOB). If there is a discrepancy between this policy and the member's EOC/SOB, the member's EOC/SOB provision will govern.

Essential Health Benefits for Individual and Small Group

For plan years beginning on or after January 1, 2014, the Affordable Care Act of 2010 (ACA) requires fully insured non-grandfathered individual and small group plans (inside and outside of Exchanges) to provide coverage for ten categories of Essential Health Benefits ("EHBs"). Large group plans (both self-funded and fully insured), and small group ASO plans, are not subject to the requirement to offer coverage for EHBs. However, if such plans choose to provide coverage for benefits which are deemed EHBs (such as maternity benefits), the ACA requires all dollar limits on those benefits to be removed on all Grandfathered and Non-Grandfathered plans. The determination of which benefits constitute EHBs is made on a state by state basis. As such, when using this guideline, it is important to refer to the member specific benefit document to determine benefit coverage.

This benefit interpretation policy applies to members with diagnosed or suspected Developmental Delay, either global or limited to a specific developmental area (e.g., speech/language, motor).

A. FEDERAL/STATE MANDATED REGULATIONS

For UnitedHealthcare of Oregon (Clark County, Washington) members only

RCW 48.44.450 Neurodevelopmental Therapies Employer-Sponsored Group Contracts.

- (1) Each employer-sponsored group contract for comprehensive health care service which is entered into, or renewed, on or after twelve months after July 23, 1989, shall include coverage for neurodevelopmental therapies for covered individuals age six and under.
- (2) Benefits provided under this section shall cover the services of those authorized to deliver occupational therapy, speech therapy, and physical therapy. Benefits shall be payable only where the services have been delivered pursuant to the referral and periodic review of a holder of a license issued pursuant to chapter 18.71 or 18.57 RCW or where covered services have been rendered by such licensee. Nothing in this section shall prohibit a health care service contractor from requiring that covered services be delivered by a provider who participates by contract with the health care service contractor unless no participating provider is available to deliver covered services. Nothing in this section shall prohibit a health care service contractor from negotiating rates with qualified providers.
- (3) Benefits provided under this section shall be for medically necessary services as determined by the health care service contractor. Benefits shall be payable for services for the maintenance of a covered individual in cases where significant deterioration in the patient's condition would result without the service. Benefits shall be payable to restore and improve function.
- (4) It is the intent of this section that employers purchasing comprehensive group coverage including the benefits required by this section, together with the health care service contractor, retain authority to design and employ utilization and cost controls. Therefore, benefits delivered under this section may be subject to contractual provisions regarding deductible amounts and/or copayments established by the employer purchasing coverage and the health care service contractor. Benefits provided under this section may be subject to standard waiting periods for preexisting conditions, and may be subject to the submission of written treatment plans.
- (5) In recognition of the intent expressed in subsection (4) of this section, benefits provided under this section may be subject to contractual provisions establishing annual and/or lifetime benefit limits. Such limits may define the total dollar benefits available or may limit the number of services delivered as agreed by the employer purchasing coverage and the health care service contractor.

RCW 48.46.520

Neurodevelopmental Therapies—Employer-Sponsored Group Contracts.

- (1) Each employer-sponsored group contract for comprehensive health care service which is entered into, or renewed, on or after twelve months after July 23, 1989, shall include coverage for neurodevelopmental therapies for covered individuals age six and under.
- (2) Benefits provided under this section shall cover the services of those authorized to deliver occupational therapy, speech therapy, and physical therapy. Covered benefits and treatment must be rendered or referred by the health maintenance organization, and delivered pursuant to the referral and periodic review of a holder of a license issued pursuant to chapter [18.71](#) or [18.57](#) RCW or where treatment is rendered by such licensee. Nothing in this section shall prohibit a health maintenance organization from negotiating rates with qualified providers.
- (3) Benefits provided under this section shall be for medically necessary services as determined by the health maintenance organization. Benefits shall be provided for the maintenance of a covered enrollee in cases where significant deterioration in the patient's condition would result without the service. Benefits shall be provided to restore and improve function.
- (4) It is the intent of this section that employers purchasing comprehensive group coverage including the benefits required by this section, together with the health maintenance organization, retain authority to design and employ utilization and cost controls. Therefore, benefits provided under this section may be subject to contractual provisions regarding deductible amounts and/or copayments established by the employer purchasing coverage and the health maintenance organization. Benefits provided under this section may be subject to standard waiting periods for preexisting conditions, and may be subject to the submission of written treatment plans.

- (5) In recognition of the intent expressed in subsection (4) of this section, benefits provided under this section may be subject to contractual provisions establishing annual and/or lifetime benefit limits. Such limits may define the total dollar benefits available, or may limit the number of services delivered as agreed by the employer purchasing coverage and the health maintenance organization.

RCW 48.21.310

Neurodevelopmental Therapies—Employer-Sponsored Group Contracts.

- (1) Each employer-sponsored group policy for comprehensive health insurance which is entered into, or renewed, on or after twelve months after July 23, 1989, shall include coverage for neurodevelopmental therapies for covered individuals age six and under.
- (2) Benefits provided under this section shall cover the services of those authorized to deliver occupational therapy, speech therapy, and physical therapy. Benefits shall be payable only where the services have been delivered pursuant to the referral and periodic review of a holder of a license issued pursuant to chapter [18.71](#) or [18.57](#) RCW or where covered services have been rendered by such licensee. Nothing in this section shall prohibit an insurer from negotiating rates with qualified providers.
- (3) Benefits provided under this section shall be for medically necessary services as determined by the insurer. Benefits shall be payable for services for the maintenance of an insured in cases where significant deterioration in the patient's condition would result without the service. Benefits shall be payable to restore and improve function.
- (4) It is the intent of this section that employers purchasing comprehensive health insurance, including the benefits required by this section, together with the insurer, retain authority to design and employ utilization and cost controls. Therefore, benefits delivered under this section may be subject to contractual provisions regarding deductible amounts and/or copayments established by the employer purchasing insurance and the insurer. Benefits provided under this section may be subject to standard waiting periods for preexisting conditions, and may be subject to the submission of written treatment plans.
- (5) In recognition of the intent expressed in subsection (4) of this section, benefits provided under this section may be subject to contractual provisions establishing annual and/or lifetime benefit limits. Such limits may define the total dollar benefits available or may limit the number of services delivered as agreed by the employer purchasing insurance and the insurer.

B. STATE MARKET PLAN ENHANCEMENTS

None

C. COVERED BENEFITS

IMPORTANT NOTE: Covered benefits are listed in Sections A, B and C. Always refer to Sections A and B for additional covered benefits not listed in this Section.

Note: For special mandated coverage of neurodevelopmental therapies for individuals aged 6 and under, see Section A.

Initial assessment and coordination of care by the member's pediatrician or PCP (e.g., history, physical and management of medications).

Referral for consultation and evaluation of individuals with suspected developmental and/or behavioral problems for confirmation of diagnosis.

Evaluation and treatment for Development Delays are covered due to diagnosable medical causes such as autism, prematurity, or cerebral palsy. (Benefits provided will cover the services of those authorized to deliver occupational therapy, speech therapy and physical therapy. Benefits will be payable to restore and improve function and for the maintenance of a condition where significant deterioration in the child's condition would result without the service.)

Refer to the following Benefit Interpretation Policies for additional information: [Attention Deficit Hyperactivity Disorder \(ADHD\)](#), [Inpatient and Outpatient Mental Health](#), [Pervasive Developmental Disorder and Autism Spectrum Disorder](#), and [Rehabilitation Services \(Physical, Occupational, and Speech Therapy\)](#)

D. NOT COVERED

Note: For special mandated coverage of neurodevelopmental therapies for individuals aged 6 and under, see Section A.

1. Therapy for a Developmental Delay is not covered except when the Developmental Delay is caused by a defined illness, disease, injury or surgery, e.g., congenital hypothyroidism, delay in speech due to documented hearing loss from ear infections. **Note:** Individuals should be referred to appropriate community resources for non-covered Developmental Delay therapies (e.g., school district, regional center) for these services.
2. Assessment and therapy for Learning Disabilities (e.g., reading, mathematics and/or written expression disorders), except when the Learning Disability is caused by a defined illness, disease, injury or surgery.
3. Other non-medical therapies or treatment programs. Examples include, but are not limited to:
 - a. Non-crisis mental health counseling
 - b. Behavior modification program
 - c. Vocational and community living skills program
 - d. Learning or reading disorders program
 - e. Psychoanalysis
 - f. Biofeedback
 - g. Residential living programs
 - h. Non-crisis family counseling
 - i. Treatment by learning consultants, non-licensed health professionals and licensed counselors
 - j. Music Integration therapy
 - k. Sensory Integration Therapy
 - l. Coordination Therapy
4. Educational services are not covered. Specifically, services that are primarily focused on the following:
 - a. Building skills and capabilities in communication
 - b. Social interaction and learning
 - c. Solely educational in nature or otherwise paid under state or federal law for purely educational services and tuition or services that are school-based for children and adolescents required to be provided by, or paid for by the school under the Individuals with Disabilities Education Act.

NOTE: This exclusion does not apply to Covered Services when they are authorized, part of a Medically Necessary treatment plan, provided by or rendered under the direct supervision of a licensed or certified health care professional and are provided by a provider acting within the scope of his or her license.

E. DEFINITIONS

1. **Developmental and Neurodevelopmental Testing** – Developmental and Neurodevelopmental Testing is a battery of diagnostic tests for the purpose of determining a Member's developmental status and need for early intervention services. This may include, but is not limited to, psychological and behavioral developmental profiles.
2. **Developmental Delay:** Delayed attainment of age appropriate milestones in the areas of speech-language, motor, cognitive, and/or social development.

2. **Learning Disability:** A condition which manifests as a significant discrepancy between estimated cognitive potential and actual level of educational performance and which is not a result of generalized Intellectual Disability, educational or psychosocial deprivation, psychiatric disorder or sensory loss.
3. **Intellectual Disability and Related Conditions:** An individual is determined to have intellectual disability based on the following three criteria: Intellectual functioning level (IQ) is below 70-75; significant limitations exist in two or more adaptive skill areas; and the condition is present from childhood (defined as age 18 or less).
4. **Neurodevelopment Therapy –** Neurodevelopment therapies are services rendered to Member’s who have developmental delay due to diagnosable medical cause such as autism, prematurity, or cerebral palsy.

F. POLICY HISTORY/REVISION INFORMATION

Date	Action/Description
10/01/2018	<ul style="list-style-type: none"> • Updated policy header to reflect the most current UnitedHealthcare West branding
09/01/2018	<p>Federal/State Mandated Regulations</p> <ul style="list-style-type: none"> • Updated code title for <i>RCW 48.44.450 Neurodevelopmental Therapies: Employer-Sponsored Group Contracts</i>; previously titled <i>RCW 48.44.450 Neurodevelopmental Therapies</i> • Revised language pertaining to <i>RCW 48.44.450 Neurodevelopmental Therapies: Employer-Sponsored Group Contracts</i> • Added language pertaining to: <ul style="list-style-type: none"> ○ <i>RCW 48.46.520</i> ○ <i>RCW 48.21.310</i> <p>Definitions</p> <ul style="list-style-type: none"> • Added definition of: <ul style="list-style-type: none"> ○ Developmental and Neurodevelopmental Testing ○ Neurodevelopment Therapy • Archived previous policy version BIP041.D