

# FLUENCY DISORDERS AND THE IMPACT OF INSURANCE BENEFITS

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# OVERVIEW

1. International Classification of Functioning and Quality of Life
2. Health Insurance Benefits
3. Fluency Disorder

# ACRONYMS

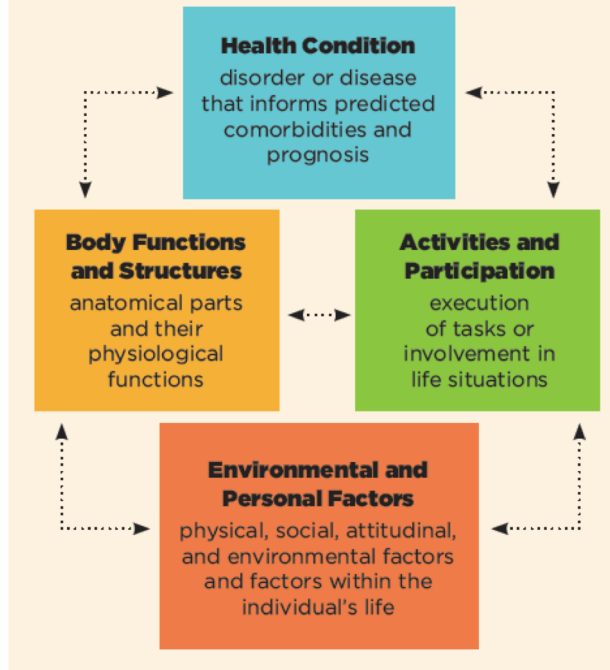
- ICF — International Classification of Functioning
- QOL — Quality of Life
- PWS — People Who Stutter

# International Classification of Functioning and Quality of Life

- ICF: System to describe health outcomes in context with bodily structures, functions, and the ability to participate and interact with their environment<sup>1</sup>
- QOL: individual's self-perception of their life
  - Considers overall goals, opportunities, ideals, and concerns impacted by general health, mental well-being, personal beliefs, relationships with others, and the environment<sup>2</sup>

<sup>1</sup>World Health Organization, 1999, <sup>2</sup>American Speech-language Pathology Association, 2016; World Health Organization, 2001; Kostanjsek, 2010; Mirza & Kim, 2016

## ICF: International Classification of Functioning, Disability and Health



Retrieved from: <https://www.asha.org/uploadedFiles/ICF-Adult-Stuttering.pdf>

# INSURANCE BENEFITS

- Health insurance benefits are critical for improving general well-being
- The National Affordable Care Act (ACA) requires health insurers to provide essential benefits<sup>1</sup>
- Medical policies are supported through evidence-based research
- Lacking insurance benefits are a risk factor for health and developmental outcomes, cause communication jeopardy, and financial burden<sup>3</sup>

<sup>1</sup>Corlette, Lucia & Giovannelli, 2014; Mirza & Kim, 2016, <sup>2</sup>Elrod & DeJong, 2008, <sup>3</sup>Mirza and Kim, 2016

# FLUENCY DISORDER

- Neurological disruptions in speech production impacting speech rate, timing, and smoothness<sup>1</sup>
- Often result in responses of frustration, fear, and avoidance
- Prevalence and Incidence
  - 1% of children, .02% of woman, and .08% of men have a fluency disorder<sup>1</sup>
  - Approximately 3 million people impacted by stuttering in the United States and 55 million worldwide<sup>2</sup>

<sup>1</sup>Nuemann et al., 2017, <sup>2</sup> Büchel & Sommer 2004

# RESEARCH QUESTIONS

1. What are the most influential aspects of QOL for people who stutter (PWS)?
2. What impact does inadequate health insurance benefits have on QOL for PWS?



# METHODS

## Databases : PubMed & Web of Science

### Search Terms:

- 1.) “fluency disorder,” and/or “stutter,” & “quality of life”
- 2.) “health care,” “rehabilitation,” “speech therapy,” & “quality of life”

## Databases found:

- 1.) 236 articles found on QOL for PWS; 4 met focus
- 2.) 83 articles found on impact of insurance on QOL for PWS; 5 met focus

# QOL OF PWS

## Overall Assessment of the Speakers Experience of Stuttering

	Guttormsen, Kefalianos, & Naess, 2015	Carter, Breen, Yaruss, & Beilby, 2017	Gunn, Meenzies, O'Brian, Onslow, Packman, Lowe, Iverach, Heard & Block, 2013	Carter, Breen, & Beilby, 2019
<b>Age Range</b>	8-17	18-77	12-17	18-77
<b>OASES Overall Mean Score</b>	3.14	2.29	2.93	2.41
<b>OASES Severity Rating</b>	Moderate to Severe	Moderate	Moderate	Moderate

# QOL OF PWS

Carter, Breen, Yaruss, & Beilby, 2017	Carter, Breen, Beilby, 2019	TOTAL
<b>Total number of interviews: 39</b>	<b>Total number of Interviews: 29</b>	<b>Combined total: 68</b>
<b><i>Encumbrance (10):</i></b> avoidance, shame, fear, and living a life that is not authentic	<b><i>Influences Internal to PWS (24):</i></b> Inner turmoil, fear of communicating/judgement, avoidance of unknown, desire to eliminate feelings of discomfort, development of coping strategies	34
<b><i>Treatment (8):</i></b> Perspectives on accessing treatment, the impact of treatment, motivation to attend treatment, uniqueness of tailored treatment	<b><i>Treatment (21):</i></b> Perceptions of personal experiences in past fluency intervention(s)	29
<b><i>Support from family/friends, work, support groups (7):</i></b> importance of having a professional and personal support network; social supports	<b><i>Support from Others (18):</i></b> Influence of support from family, friends, colleagues, and peer support groups	25
<b><i>Long Life Journey (10):</i></b> personal quest for fluency and acceptance, resilience, determination, lessons learned, increased empathy, tolerance and compassion	<b><i>General Life Experiences (14):</i></b> Evolution of priorities, perspectives, general outlook on the impact of communication throughout life	24

# QOL OF PWS

## Self-Efficacy Scale for Adult Stutters

	Carter, Breen, Yaruss, & Beilby, 2017	Carter, Breen, & Beilby, 2019
Age Range (in years)	18-77	18-77
Mean Self-Efficacy Score	73.26	69.27

# INSURANCE IMPACT

## Common Themes:

<b>Unmet Needs<sup>1</sup></b>	<b>Secondary Consequences<sup>2</sup></b>	<b>Financial Burden<sup>2</sup></b>
<b>Limiting Definition of Medical Necessity<sup>2</sup></b>	<b>Reduced Social Participation<sup>3</sup></b>	<b>Restrictions to Health Benefits<sup>4</sup></b>

<sup>1</sup>Mcmanus, B. M., Prosser, L. A., & Gannotti, M. E. (2016). <sup>1</sup>Kenney, M. K., & Kogan, M. D. (2011). <sup>2</sup>Benedict, R. E. (2006). <sup>2</sup>Beatty, P. W., Hagglund, K. J., Neri, M. T., Dhont, K. R., Clark, M. J., & Hilton, S. A. (2003). <sup>3</sup>Mirza, M., & Kim, Y. (2016). <sup>3</sup>Yaruss, J. (2007). <sup>4</sup>Elrod, Cathy S., PT, PhD, & DeJong, G., PhD. (2008).

Delaware Medical Coverage for Fluency Disorders (FD)	Private Health Coverage (BCBS) <sup>1</sup>	State Assisted Health Coverage (DE Medicaid) <sup>2</sup>	Federal Health Coverage (Medicare) <sup>3</sup>	Uninsured
F80.81 — Childhood Onset FD	Non-Covered Benefit	Covered Benefit	Covered Benefit	Covered Benefit
F98.5 Adult Onset FD	Non-Covered Benefit	Covered Benefit	Covered Benefit	Covered Benefit
169.23 FD after cerebrovascular disease	Non-Covered Benefit	Covered Benefit	Non-Covered Benefit	Covered Benefit
169.023 FD from nontraumatic subarachnoid hemorrhage	Covered Benefit	Covered Benefit	Covered Benefit	Covered Benefit
169.123 FD from nontraumatic intracerebral hemorrhage	Covered Benefit	Covered Benefit	Covered Benefit	Covered Benefit
169.223 FD from other nontraumatic intracranial hemorrhage	Covered Benefit	Covered Benefit	Covered Benefit	Covered Benefit
169.323 FD from cerebral infarction	Covered Benefit	Covered Benefit	Covered Benefit	Covered Benefit
169.823 FD from other cerebrovascular disease	Covered Benefit	Covered Benefit	Covered Benefit	Covered Benefit
169.923 FD from unspecified cerebrovascular disease	Covered Benefit	Covered Benefit	Covered Benefit	Covered Benefit
R47.82 FD in conditions classified elsewhere	Covered Benefit	Covered Benefit	Covered Benefit	Covered Benefit

<sup>1</sup>Highmark Commercial Medical Policy - Delaware: Speech-language Pathology (2019). <sup>2</sup>Delaware Medicaid. (2009). <sup>3</sup>Medicare. Local Coverage: Billing and Coding: Speech-Language Pathology Services: Communication Disorders (2015)

# CONCLUSION/DISCUSSION

- Use of comprehensive assessments are needed to capture the broad impact stuttering has on the QOL of PWS
- Identify lacking health care benefits and stress the demand for policy change to meet the needs of those with disabilities
- Need for comprehensive systematic reviews and efficacy data on treatment approaches to update insurance medical policies impacting service delivery

## CONCLUSION/DISCUSSION (CONT.)

- Consider modifications of health care plans and the expansion of eligibility requirements
- Modify the medical necessity criteria within medical policies to include benefits for fluency
- Health care reform and further investigation of insurance policies regarding coverage discrepancies to ensure just access to care



# CLINICAL IMPLICATIONS

- SLPs/Future SLPs:
  - Appeal claims with letters of medical necessity
  - Become familiar with billing
- Community members:
  - Educate yourself on healthcare coverage
  - Advocate for the health benefits you need

# Questions?

# Thank you!

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