

**STATE OF MICHIGAN**  
**DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES**  
**Before the Director of Insurance and Financial Services**

**In the matter of:**

██████████,  
**Petitioner,**

v

**File No. 146993-001**

**Molina Healthcare of Michigan,**  
**Respondent.**

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Issued and entered  
this 28<sup>th</sup> day of April 2015  
by Randall S. Gregg  
Special Deputy Director

**ORDER**

**I. BACKGROUND**

On March 25, 2015, ██████████, on behalf of her minor son ██████████ (Petitioner), filed a request with the Director of Insurance and Financial Services for an external review under the Patient's Right to Independent Review Act, MCL 550.1901 *et seq.*

The Petitioner receives health care benefits through Molina Healthcare of Michigan (Molina), a health maintenance organization for Medicaid beneficiaries. The Director immediately notified Molina of the external review request and asked for the information it used to make its final adverse determination. The Director received Molina's response on March 26, 2015. After a preliminary review of the information submitted, the Director accepted the request on April 2, 2015.

The case involves medical issues so it was assigned to an independent review organization which provided its analysis and recommendation to the Director on April 16, 2015.

**II. FACTUAL BACKGROUND**

The Petitioner's benefits are defined in a certificate of coverage issued by Molina (the certificate).<sup>2</sup>

The Petitioner stutters. His school provides speech therapy but a speech pathologist recommended additional help for his condition outside the school. The Petitioner received speech

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<sup>1</sup> ██████████.  
<sup>2</sup> Revised August 2014.

therapy for a time from the Division of Speech-Language Sciences and Disorders in [REDACTED] Hospital's Department of Neurology. That therapy was covered by Molina.

On February 18, 2015, Molina received a request to cover additional speech therapy visits for the Petitioner at [REDACTED] Hospital. Molina denied the request on the basis that the treatment is experimental or investigational.

The Petitioner's mother appealed the denial through Molina's internal grievance process. At the conclusion of that process Molina maintained its denial and issued a final adverse determination dated March 4, 2015. The Petitioner now seeks a review of that final adverse determination from the Director.

### III. ISSUE

Did Molina correctly deny authorization for the Petitioner's speech therapy?

### IV. ANALYSIS

#### Respondent's Argument

In its March 4, 2015, final adverse determination Molina explained its denial of coverage to the Petitioner's mother:

The requested service has been denied because it is not a covered benefit under Molina Healthcare Evidence of Coverage Guidelines.

Per the Molina Healthcare Medical Coverage Guidance: Speech Therapy for Stuttering criteria guideline, Speech Therapy for developmental, neurogenic (abnormalities in signaling between the brain and the nerve fibers and muscles controlling speech) or psychogenic (caused by an emotional problem) stuttering is considered experimental and or investigational with insufficient data to recommend coverage.

#### Petitioner's Argument

In a March 17, 2015, letter of appeal to Molina, the Petitioner's mother explained why she is seeking coverage for additional speech therapy at [REDACTED]:

This letter is to appeal your recent decision to deny ongoing speech therapy for my son . . . who has been unfortunate to have a stuttering speech impediment. Prior to the start of his speech therapy at [REDACTED], he was very reluctant to speak out in most circumstances and would permit his younger sister to speak for him. He has since being . . . taught to cope with his stuttering and the therapy is ongoing. He is managing reasonably well and he is slowly able to speak a little in public - something he is made to do by the speech therapist at [REDACTED].

He is about to go to Middle School - a challenge for most children. The demands placed will be great on most children - more demanding classes and meeting new children. I am

quite sure that [he] is anxious about this upcoming life-changing event. I expect he will most likely start stuttering more frequently and become more withdrawn.

I would very much like his speech to continue till the speech pathologist feels he has acquired and mastered all the skills he will need to cope with his impediment. It is a decision that the speech pathologist should be able to make - not a panel who are not familiar with his condition and the vast improvements he has made since working with the speech pathologist at [REDACTED]. He can certainly discontinue any service he gets at school because at this point in time his care is managed by the speech pathologist at [REDACTED]-[REDACTED].

I would strongly urge you to reconsider your earlier decision and allow [the Petitioner] to continue with the speech therapy at [REDACTED]. It would be a big benefit to him at this critical phase of his development.

Also included with the external review request was a March 11, 2015, letter from the Petitioner's speech language pathologist at [REDACTED] Hospital:

I have been working with [the Petitioner] for stuttering. He has made dramatic improvements in the therapy that he has been receiving. Unfortunately, he is unable to receive appropriate therapy in his school system despite his mother's attempts to get him the type of therapy that he needs. [He] has received approval for services to work with me in the past, but recent requests have been denied. As stated in my progress summary . . . , the patient continues to require services to carry over his strategies into regular speaking situations. If we abandon therapy at this point, there is a strong likelihood that he will regress and require even more therapy in the future.

Much of the difficulty [he] continues to have with carry over is in the anxiety he faces in certain speaking situations. However, [he] does not have a generalized anxiety deficit. All of his anxiety is centered around speaking and is specifically related to the stuttering. Psychological services are not appropriate for this anxiety because most psychologists are not trained in working with children who stutter. He has been working on decreasing his anxiety and increasing his self confidence in many different types of speaking situations and has been making improvements. However, he continues to need targeted therapy to meet his maximum potential and become a confident communicator.

I strongly recommend that [the Petitioner] continue his therapy here at [REDACTED] Hospital. He has not been aided by other therapy he has had in the past and continues to improve here at [REDACTED] . . .

#### Director's Review

Appendix C of the certificate has this exclusion for experimental or investigational treatment (pp. 26, 27):

Any services, equipment or supplies excluded or limited under the Medicaid Contract are excluded or limited under the Member Agreement, even when recommended by a Prima-

ry Care Provider or Participating Provider and/or written on a Plan referral form. Exclusions and limitations include, but are not limited to, the following:

\* \* \*

**14. Experimental, Investigational or Research Drugs, Biological Agents Devices, Supplies, Treatments, Procedures or Equipment.** These services are not covered.

Molina also cited a provision from its medical guideline “Speech Therapy for Stuttering” as the basis for its denial. In the guideline’s Initial Coverage Criteria section (p.1) it says, “Speech therapy for developmental, neurogenic or psychogenic stuttering is considered *experimental/investigational* with insufficient data to recommend coverage.” The same language is found in the Coverage Exclusions section (p.2) of the guideline.

The question of whether the speech therapy the Petitioner seeks is experimental or investigational for his condition was presented to an independent review organization (IRO) as required by section 11(6) of the Patient’s Right to Independent Review Act, MCL 550.1911(6).

The IRO physician reviewer is board certified in physical medicine and rehabilitation, specializes in pediatric physical medicine and rehabilitation, and has been in practice more than ten years. The IRO report contained the following analysis and recommendation:

The physician consultant, who is familiar with the medical management of patients with the member’s condition, has examined the medical record and the arguments presented by the parties.

The results of the consultant’s review indicate that this case involves an 11 year-old male who has a history of stuttering. At issue in this appeal is whether the requested speech therapy services are experimental/investigational for treatment of the member’s condition.

The physician consultant explained that according to the peer reviewed literature, a connection between stuttering and language ability was not supported. An alternative perspective is that children who [stutter] have a compromised motor control system that makes it difficult for them to move forward in speech and that the tie to language lies not in a deficient language system, but in difficulty expressing the intended meaning via a fully functional speech system. The physician consultant noted that studies indicate that speech therapy has helped children with their stuttering. However, the consultant indicated that the literature also states that further research is needed about treatment of children who stutter.

Pursuant to the information set forth above and available documentation, the physician consultant determined that the requested speech therapy services are experimental/investigational and not medically necessary for treatment of the member’s condition.

The Director is not required to accept the IRO's recommendation. *Ross v Blue Care Network of Michigan*, 480 Mich 153 (2008). However, the IRO's recommendation is afforded deference by the Director. In a decision to uphold or reverse an adverse determination the Director, must cite "the principal reason or reasons why the [Director] did not follow the assigned independent review organization's recommendation." MCL 550.1911(16)(b). The IRO's analysis is based on extensive experience, expertise and professional judgment. Furthermore, it is not contrary to any provision of the Petitioner's certificate of coverage. MCL 550.1911(15).

The Director, discerning no reason why the IRO's recommendation should be rejected, finds that Molina's denial of coverage for the requested speech therapy is consistent with the terms of the Petitioner's coverage.

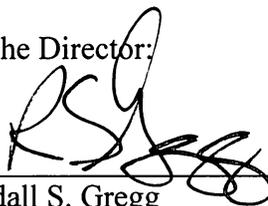
### V. ORDER

The Director upholds Molina's final adverse determination of March 4, 2015.

This is a final decision of an administrative agency. Under MCL 550.1915, any person aggrieved by this Order may seek judicial review no later than 60 days from the date of this Order in the circuit court for the Michigan county where the covered person resides or in the circuit court of Ingham County. A copy of the petition for judicial review should be sent to the Department of Insurance and Financial Services, Office of General Counsel, Post Office Box 30220, Lansing, MI 48909-7720.

Annette E. Flood  
Director

For the Director:



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Randall S. Gregg  
Special Deputy Director