

Auditory Integration Therapy

Also known as	<div>1. AIT</div> <div>2. Auditory integration training</div>						
Description	<p>Auditory Integration is a procedure intended to reduce painful hypersensitivity to sound. During auditory integration training (AIT), children listen to music with hypersensitive frequencies filtered out. The program intends to retrain the auditory system and helps the child to focus, as well as reduce behavioral problems. Prior to therapy, an audiogram is performed to determine which sound frequencies result in hypersensitivity.</p> <p>AIT has been suggested for treatment of learning disabilities and developmental delays associated with hearing distortions, hyper-acute hearing, and sensory processing anomalies in children, as well as with autism, Attention Deficit Disorder (ADD), and Attention Deficit Hyperactivity Disorder (ADHD).</p>						
See also	<p>Similar, related, or easily confused documents.</p> <ul style="list-style-type: none">Applied Behavioral Analysis (ABA) - This treatment program uses time-intensive behavioral techniques to treat children with autism spectrum disorders.Pervasive Developmental Disorder (PDD) Evaluation and Treatment - Refers to a group of five disorders characterized by delays in the development of multiple basic functions including socialization and communication. The pervasive developmental disorders are: Pervasive developmental disorder not otherwise specified (PDD-NOS), which includes atypical autism, Autism, Asperger syndrome, Rett syndrome, and Childhood disintegrative disorder (CDD).Sensory Integration Therapy - A form of occupational therapy in which exercises are used to address sense of touch, sense of balance, and sense of where the body and its parts are in space.						
Table of Contents	<p>The following topics are included in this document:</p> <ul style="list-style-type: none">CommercialGovernment ProgramsIndividual and Family Business (IFB)						
Document history	<p>The document history for the past 12 months is outlined below.</p> <table><tr><th>Date</th><th>Description</th></tr><tr><td>1.19.24</td><td>BIC re-review.</td></tr><tr><td>1.19.24</td><td>Updated to new template.</td></tr></table>	Date	Description	1.19.24	BIC re-review.	1.19.24	Updated to new template.
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Commercial

Introduction	<p>This section applies to all Commercial members. Benefit details depend on the member’s brand: Dean (including Dean Health Plan (DHP) and Prevea360), Mayo Medical Plan (MMP), or Medica (including MHPS).</p>						
Dean (DHP, Prevea360)	<p>A Medical Policy, <i>Non-covered Medical Procedures and Services (MP9415)</i>, applies.</p> <p>Tip: For instructions on locating policies, see Coverage and Prior Authorization Guidelines.</p> <ul style="list-style-type: none">• Considered investigative, not covered.						
Mayo Medical Plan (MMP)	<p>A Coverage Policy, <i>Sensory and Auditory Integration Therapies</i>, applies.</p> <p>Tip: For instructions on locating policies, see Coverage and Prior Authorization Guidelines.</p> <ul style="list-style-type: none">• Considered investigative, not covered.						
Medica (including MHPS)	<p>A Coverage Policy, <i>Sensory and Auditory Integration Therapies</i>, applies.</p> <p>Tip: For instructions on locating policies, see Coverage and Prior Authorization Guidelines.</p> <ul style="list-style-type: none">• Considered investigative, not covered.						
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Government Programs

Introduction	This section applies to all Medicaid and Medicare products.								
AccessAbility (SNBC), Minnesota Senior Care Plus (MSC+)	<p>Medicaid only groups:</p> <ul style="list-style-type: none">Refer to Medicaid below. <p>Medicare eligible groups:</p> <ul style="list-style-type: none">Considered investigative, not covered.<ul style="list-style-type: none">Note: If the member says this is medically necessary, offer an Organization Determination. Refer to Member-Initiated PA (Organization Determination) Request.Follows Medicare guidelines.Medicare is the primary payer.If no Medicare eligibility, Medicaid applies. Refer to Medicaid below.								
AccessAbility Enhanced (I-SNBC), DUAL (MSHO)	<p>A Coverage Policy, <i>Sensory and Auditory Integration Therapies</i>, applies.</p> <p>Tip: For instructions on locating policies, see Coverage and Prior Authorization Guidelines.</p> <ul style="list-style-type: none">Considered investigative, not covered.<ul style="list-style-type: none">Note: If the member says this is medically necessary, offer an Organization Determination. Refer to Member-Initiated PA (Organization Determination) Request.Medica is the only payer.								
Cost (Prime)	<p>Check for an LCD or NCD. If one does not exist, Medica’s Coverage Policy, <i>Sensory and Auditory Integration Therapies</i>, applies.</p> <p>Tip: For instructions on locating policies, see Coverage and Prior Authorization Guidelines.</p> <ul style="list-style-type: none">Considered investigative, not covered.<ul style="list-style-type: none">Note: If the member says this is medically necessary, offer an Organization Determination. Refer to Member-Initiated PA (Organization Determination) Request.Follows Medicare guidelines.								
Med Advantage	<p>A Coverage Policy, <i>Sensory and Auditory Integration Therapies</i>, applies.</p> <p>Tip: For instructions on locating policies, see Coverage and Prior Authorization Guidelines.</p> <ul style="list-style-type: none">Considered investigative, not covered.<ul style="list-style-type: none">Note: If the member says this is medically necessary, offer an Organization Determination. Refer to Member-Initiated PA (Organization Determination) Request.Follows Medicare guidelines.Medica is the only payer.								
Med Supp (Select, Signature)	<p>Considered investigative, not covered.</p> <ul style="list-style-type: none">Follows Medicare guidelines.Medicare supplement.Medicare is the primary payer.								
Medicaid	<p>A Coverage Policy, <i>Sensory and Auditory Integration Therapies</i>, applies.</p> <p>Tip: For instructions on locating policies, see Coverage and Prior Authorization Guidelines.</p> <ul style="list-style-type: none">Considered investigative, not covered.								
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Individual and Family Business (IFB)

Introduction	<p>This section applies to all Individual and Family Business (IFB) members. Benefit details depend on the member’s brand: Dean (including Dean Health Plan (DHP), Medica (formerly WellFirst), and Prevea360) or Medica.</p>						
Dean (DHP, Medica formerly WellFirst, Prevea360)	<p>A Medical Policy, <i>Non-covered Medical Procedures and Services (MP9415)</i>, applies.</p> <p>Tip: For instructions on locating policies, see Coverage and Prior Authorization Guidelines.</p> <ul style="list-style-type: none">• Considered investigative, not covered.						
Medica	<p>A Coverage Policy, <i>Sensory and Auditory Integration Therapies</i>, applies.</p> <p>Tip: For instructions on locating policies, see Coverage and Prior Authorization Guidelines.</p> <ul style="list-style-type: none">• Considered investigative, not covered.						
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