NICA BENEFIT HANDBOOK ADDENDUMS

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Intensive Therapy (Effective Date January 1, 2024)	2	
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Benefit: Intensive Therapy

(Effective Date January 1, 2024)

Retroactive Benefits:

There are no retroactive benefits related to this policy. Benefits are available only after the effective date.

Description:

Intensive therapy typically involves 1 to 5 weeks of one or more therapies (e.g., physical, occupational, speech therapy), provided for several hours each day, five days a week, by a licensed therapist.

In some cases, summer camps that also include therapy provided by licensed therapists can be considered intensive therapy sessions.

NICA will authorize one intensive session per quarter for each category of therapy. A quarter is defined as the 13-week period beginning with the date of the first attended intensive therapy. For example, a participant may attend a physical therapy intensive and a feeding intensive within the same 13-week period. However, for intensives of the same category, there must be a 9-week gap between the end date of one intensive and the start of the next. This is to ensure that appropriate adherence to maintenance therapy is achieved.

Here are some examples:

- A participant attends a 5-week physical therapy intensive from February 10, 2025, to March 14, 2025. The next time that participant would be eligible to attend another PT intensive would be May 16, 2025, which is 9 weeks from March 14th.
- A participant attends a 2-week physical therapy intensive from February 10,
 2025, to February 21, 2025. The next time that participant would be eligible

- to attend another PT intensive would be at the beginning of the next 13-week period, which would be May 12, 2025, because more than 9 weeks had passed since the end of the initial intensive.
- In the above examples, a participant could also attend Brain Plasticity or Feeding Therapy or some other intensive that is not a physical therapy intensive during the same 13 -week period (February 10, 2025, through May 12, 2025).

Maintenance therapy requirements are based on the recommendation of the intensive therapy provider. When NICA authorizes an intensive therapy session, they will request that the provider document those recommendations when they submit their billing and therapy notes after each intensive.

Insurance denials may be requested for some intensives.

Examples of intensives previously authorized:

Category	Specialty (if applicable)*	Providers Used (more may be added in the future)
		Ability Plus Therapy, Believe Pediatric Physical Therapy, First Step Therapy, John
		Hopkins Medicine, Kenny Rogers Children's Center, Kids PT By the Sea / Sarasota
		Pediatric Physical Therapy, NAPA Center, Neurowerks, Pediatric Therapy Associates,
Physical Therapy	Physical Therapy Intensive	Starlight Intensive, Therapies4Kids
		Ability Plus Therapy, Believe Pediatric Physical Therapy, John Hopkins Medicine, Kenny
		Rogers Children's Center, Lampert's Home Therapy, Inc., NAPA Center, Neurowerks,
Physical Therapy	Therasuit	Therapies4Kids
		Family First Therapy, Kids PT By the Sea / Sarasota Pediatric Physical Therapy, Starlight
Physical Therapy	Dynamic Movement Intervention	Intensive
Physical Therapy	Universal Exercise Unit (Cage)	Believe Pediatric Physical Therapy, John Hopkins Medicine
Physical Therapy	Constraint-Induced Movement Therapy	Intensive Therapeutics
Occupational Therapy		Ability Plus Therapy, John Hopkins Medicine, Intensive Therapeutics, NAPA Center
		Ability Plus Therapy, Brave Bunch Summer Camp, Kenny Rogers Children's Center,
Speech Therapy		Logos Therapy Group, NAPA Center
Feeding Therapy		NAPA Center, NJ Pediatric Feeding Associates
Brain Plasticity		Brainvive, Neurotru PLLC, Plasticity Center of Orlando
Vision		The Children's Home of Pittsburgh
* Specialty Intensives a	re all considered Physical Therapy intensive	es so only one type of Specialty Intensive can be attended every 3 months

Medical Necessity Documentation:

- First Intensive Session: A letter of medical necessity from the primary care physician, physiatrist, or neurologist. For all physical therapy, occupational therapy, speech therapy, and feeding therapy, a letter of medical necessity is also required from the participant's therapist. In many cases, the therapist will prepare the initial letter of medical necessity, and the physician will indicate their concurrence with the recommendation.
 Note that Brain Plasticity intensives require a letter of medical necessity from a neurologist. Separate letters of medical necessity are required for each category and specialty of therapy.
- Subsequent Intensive Sessions: No letter of medical necessity is required, but documentation must show consistent attendance of any recommended maintenance therapy since the last intensive. If maintenance therapy recommended by the intensive provider involves at-home exercises as opposed to therapy, the parent will be asked to confirm that the prescribed maintenance exercises were completed.

Prior Authorization Requirements:

Prior authorization is required for all intensives. Note that if a parent elects to *schedule* an intensive prior to authorization, reimbursement cannot be guaranteed until the intensive is authorized.

Documentation Requirements for Reimbursement:

- Therapy notes
- Invoice
- In addition to above, if reimbursement is to be made to parent, proof of payment to provider (e.g., canceled check, bank statement, credit card statement or sales slip, receipt from vendor, etc.)

Exclusions or Limitations:

Conferences that are not exclusively providing direct care to the participant are excluded.