



AMERICAN  
SPEECH-LANGUAGE-  
HEARING  
ASSOCIATION

September 14, 2004

Naomi Aronson, PhD  
Executive Director  
Technology Evaluation Center  
Blue Cross and Blue Shield Association  
225 North Michigan Avenue  
Chicago, IL 60601

Dear Dr. Aronson:

According to the enclosed letter dated June 28, 2004, Blue Cross and Blue Shield Association (“Association”) is not covering cognitive rehabilitation provided by speech-language pathologists because the treatment, as concluded by the Association, is “investigational.” In a Technology Evaluation Center (TEC) report dated June 1997 and updated in December 2002, the Association states that “available data are considered insufficient to make conclusions on whether cognitive rehabilitation results in beneficial health outcomes.”

On behalf of patients suffering from cognitive deficits, their families, and speech-language pathologists, the American Speech-Language-Hearing Association (ASHA) disagrees with your conclusion that cognitive rehabilitation is “investigational.” This letter provides support for this vital treatment for individuals experiencing cognitive disorders as the result of neurological insult, such as traumatic brain injury (TBI), stroke, and encephalopathy.

In an article entitled “Evidenced-Based Cognitive Rehabilitation: Recommendations for Clinical Practice,” published in the *Archives of Physical Medicine and Rehabilitation* (December 2000), the authors report “clear evidence supporting the effectiveness of cognitive rehabilitation for subjects with acquired TBI or stroke.” A methodical review of the scientific literature reported in this article showed that a significant number of studies support cognitive remediation’s effectiveness for impairments of attention, functional communication, memory, problem solving, and visual scanning.

The enclosed treatment efficacy summary on cognitive-communication disorders resulting from traumatic brain injury shows that patients who receive early intervention services were discharged at higher levels of cognitive functioning. Data gathered from ASHA’s National Outcomes Measurement System (NOMS) show that a large percentage of patients with TBI who received speech-language pathology services made significant gains on the Functional Communication Measures (FCMs)

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in 3 key areas of cognitive-communication skills: attention, memory, and pragmatics (use of language in social contexts). FCMs are a series of seven-point rating scales ranging from least functional (Level 1) to most functional (Level 7) designed to measure improvement in a variety of clinical areas. Functional gains were shown by 84% of the patients treated for memory, 85% for attention, and 87% for pragmatics.

Additional data gathered from the NOMS show positive outcomes for individuals receiving cognitive rehabilitation regardless of the etiology. For TBI patients, 43.6% increased multiple levels for problem solving, while 37.3% of patients with encephalopathy improved memory, 38.0% improved attention. For patients with cerebrovascular disease (right-hemisphere), 36.5% increased multiple levels for attention, 31.0% improved memory, and 41.0% improved in problem solving. For all etiology groups, 33% to 38% increased multiple levels for pragmatics.

Moreover, Medicare recognizes the speech-language pathologist's capabilities and relevance regarding cognitive rehabilitation in CMS Program Memorandum AB-00-14, March 2000 which states that "for cognitive speech therapy, a speech-language pathologist could use either code 92507 or 97532 but not both for the same treatment."

In summary, there is notable support for cognitive rehabilitation services provided by speech-language pathologists. ASHA requests that the Association reconsider its current position that this treatment is "investigational," and make a policy change that provides coverage for this important health service. Please contact me should you have comments or questions.

Sincerely,

Janet McCarty  
Private Health Plans Advisor

Enclosures (2)

cc: Allan M. Korn, M.D.  
Sr. Vice President, BCBS Association