APPLICATION STATEMENT

The application of the Clinical Coverage Guideline is subject to the benefit determinations set forth by the Centers for Medicare and Medicaid Services (CMS) National and Local Coverage Determinations and state-specific Medicaid mandates, if any.

DISCLAIMER

The Clinical Coverage Guideline (CCG) is intended to supplement certain standard WellCare benefit plans and aid in administering benefits. Federal and state law, contract language, etc. take precedence over the CCG (e.g., Centers for Medicare and Medicaid Services [CMS] National Coverage Determinations [NCDs], Local Coverage Determinations [LCDs] or other published documents). The terms of a member’s particular Benefit Plan, Evidence of Coverage, Certificate of Coverage, etc., may differ significantly from this Coverage Position. For example, a member’s benefit plan may contain specific exclusions related to the topic addressed in this CCG. Additionally, CCGs relate exclusively to the administration of health benefit plans and are NOT recommendations for treatment, nor should they be used as treatment guidelines. Providers are responsible for the treatment and recommendations provided to the member. The application of the CCG is subject to the benefit determinations set forth by the Centers for Medicare and Medicaid Services (CMS) National and Local Coverage Determinations, and any state-specific Medicaid mandates. Links are current at time of approval by the Medical Policy Committee (MPC) and are subject to change. Lines of business are also subject to change without notice and are noted on www.wellcare.com. Guidelines are also available on the site by selecting the Provider tab, then “Tools” and “Clinical Guidelines”.

BACKGROUND

Hippotherapy is a physical therapy, occupational therapy, and speech-language pathology treatment strategy that uses the multidimensional movement of the horse to improve neuromuscular function and sensory processing in children and adults with movement dysfunction. The term hippotherapy is literally defined as “treatment with the help of the horse” from the Greek word *hippos*, meaning horse. It is part of an integrated treatment strategy performed by healthcare professionals, including specially trained physical and occupational therapists. Hippotherapy is considered a distinct subspecialty of the broad, umbrella term “therapeutic riding.” Therapeutic riding refers to the use of the horse and equine-oriented activities to achieve a variety of therapeutic goals, including physical, emotional, social, cognitive, behavioral, and educational goals. Therapeutic riding generally encompasses both leisure and therapeutic activities and may be conducted by nontherapist riding instructors and
assistants. In contrast, hippotherapy is specialized and is always directed by a licensed healthcare professional. Functional riding and horsemanship skills are not taught during hippotherapy. Rather, the emphasis is on the achievement of specific therapeutic goals facilitated by the movement of the horse. Despite the unusual nature of hippotherapy, its rationale is based on current theories of motor development and control and established neurophysiologic treatment principles. Hippotherapy has been used for a wide variety of conditions and medical disorders since the 1950s. Conditions that may be improved through hippotherapy include abnormal muscle tone; impaired balance responses; impaired coordination; impaired communication; impaired sensorimotor function; postural asymmetry; poor postural control; decreased mobility; and limbic system issues related to arousal, motivation, and attention. Hippotherapy has been used in patients with amputations, autism, back pain, cerebral palsy, developmental disorders, Down syndrome, hemiplegia, genetic syndromes, learning disabilities, multiple sclerosis, muscular dystrophy, posttraumatic stress syndrome, sensory integration disorders, speech-language disorders, spinal cord injury, spina bifida, stroke, and traumatic brain injury. Hippotherapy has been used in patients varying in age from toddler to adult (Hayes, 2009).

**POSITION STATEMENT**

**Applicable To:**
- Medicaid – Florida

Hippotherapy is a covered benefit for a member who:

- Has received clearance from their primary provider;
- Participates in a Case or Disease Management program; **AND,**
- Is a child or adult that are Staywell members through the Managed Medical Assistance (MMA); **AND,**
- Is a child or adult enrolled in Staywell through the Managed Medical Assistance (MMA) plan; **AND,**
- Member has a diagnosis of:
  - cerebral palsy; **OR**
  - an eating disorder; **OR**
  - post-traumatic stress disorder; **OR**
  - Autism spectrum disorder

Benefit is limited to 10 free riding sessions per year at Professional Association of Therapeutic Horsemanship International (PATH) centers, led by certified instructors and equine therapists.

**NOTE:** There is no age requirement to receive coverage for Hippotherapy if all criteria are met. Hippotherapy is recommended for adolescents (age 10-19) while Pet Therapy (HS-226) is more age appropriate for younger children.

**CODING**

**FLORIDA MARKET ONLY Covered CPT® Codes**
97139 Unlisted Therapeutic procedure
97799 Unlisted Physical medicine / rehabilitation service or procedure

**FLORIDA MARKET ONLY HCPCS Level II Code**
S8940 Equestrian / hippotherapy, per session
*“S” Codes are NON COVERED FOR MEDICARE*

**ICD-10-PCD Codes** – No applicable codes.

**FLORIDA MARKET ONLY ICD-10CM Diagnosis Codes**
F43.10 - F43.12 Post-traumatic stress disorder (PTSD)
F50.81 Binge eating disorder
F50.89 Other specified eating disorder
F50.9 Eating Disorder, unspecified
F84.0 Autistic disorder
G80.0 - G80.9 Cerebral Palsy
Coding information is provided for informational purposes only. The inclusion or omission of a CPT, HCPCS, or ICD-10 code does not imply member coverage or provider reimbursement. Consult the member's benefits that are in place at time of service to determine coverage (or non-coverage) as well as applicable federal / state laws.

REFERENCES


MEDICAL POLICY COMMITTEE HISTORY AND REVISIONS

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<td>11/2/2017</td>
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<td>1/12/2017</td>
<td>Approved by MPC. Inclusion of verbiage re: safety, age requirements.</td>
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<tr>
<td>3/3/2016</td>
<td>Approved by MPC. Updated Autism Spectrum Disorder due to revision of DSM-V.</td>
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