Overview of Hippotherapy as a Treatment Tool

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The term hippotherapy refers to how occupational therapy, physical therapy and speech-language pathology professionals use evidence-based practice and clinical reasoning in the purposeful manipulation of *equine movement* as a therapy tool to engage sensory, neuromotor and cognitive systems to promote functional outcomes.

Hippotherapy is a treatment tool used by licensed PT, OT, and SLP professionals.
CLARITY OF CONVERSATION

Hippotherapy is not a profession nor a separate service. There is no profession called “equine therapy” or “equine assisted therapy”

- There are no “hippotherapists” nor “equine therapists”.
- There is no time when the therapist stops doing standard PT, OT, or ST and starts doing “hippotherapy” or “equine therapy”.

![Images of people engaging in hippotherapy with horses.]
It is medical necessity, as determined by a physician’s referral, formal diagnosis and therapy evaluation, that determines a client’s “need for Physical Therapy, Occupational Therapy and/or Speech-Language Therapy services”.

Medical necessity is NOT driven by the therapy tools/strategies used by PT, OT and SLP professionals.
CLINICAL RATIONALE FOR EQUINE MOVEMENT AS A THERAPY TOOL

- Multidimensional equine movement can be purposefully manipulated to facilitate the neuromuscular and sensory systems that support functional skills.

- Strong Evidence Based Support for role of neuromuscular/sensory systems in functional skill acquisition and performance.
BEST PRACTICE

➢ Therapists integrate equine movement, along with other therapy tools and/or strategies, to address the treatment goals/functional outcomes for their patients as part of their PT, OT or ST treatment plan.
EQUINE MOVEMENT AS A TOOL

- Equine movement is a multidimensional dynamic medium that provides graded sustained neuromotor input at an average rate of 100 beats/minute. "There is an average of 2000 to 2500 neuromotor inputs per therapy session."

- Examples of other dynamic movement mediums in physical, occupational and speech-language therapy include therapy balls, trampolines, and various swings, just to name a few.
OT, PT and SLP professionals use evidence-based practice and clinical reasoning in the purposeful manipulation of equine movement to engage the sensorimotor and neuromotor systems to create functional change in their patient. Used with other neuromotor and sensorimotor tools/techniques, hippotherapy is one tool used in a patient’s integrated plan of care in occupational, physical or speech-language therapy.

- AHA, Inc. Best Practice Statement, 2019 -
American Physical Therapy Association (APTA)
American Occupational Therapy Association (AOTA)
American Speech-Language-Hearing Association (ASHA)

APTA, AOTA, and ASHA all recognize hippotherapy as a standard scope of practice tool that can be utilized in physical, occupational and speech-language therapy treatments and have considered it so since the 1980s.

Letters from AOTA, APTA and ASHA are available on the AHA, Inc. website
CLINICAL POPULATIONS WHO MIGHT BENEFIT FROM EQUINE MOVEMENT

- Age: 2 years* to Adults

- Impairments: mild to severe neurologic, sensory, oral-motor, communication and/or motor deficits

*Children younger than 2 years should be treated by a specially trained therapist
Currently there are 13 meta-analyses, 102 peer reviewed journal articles and 11 peer reviewed case studies that support the value of equine movement as a treatment tool to improve function within a therapy plan of care.

Subject populations include: Cerebral Palsy, Multiple Sclerosis, Down Syndrome, Postural instability, Spinal Cord Injury, Language-learning Disability, Stroke

Detractors include poor consistency in the terminology used—but common element is the efficacy of “equine movement” as a treatment tool

Health care does not have a “standard” for what constitutes experimental or investigational.

*Equine movement as an intervention tool has more literature support than many commonly accepted scope of practice tools in PT, OT and ST services.*
Inclusion of equine movement as a therapy tool in physical, occupational and/or speech-language therapy plans falls within **standard fee schedules for PT, OT and/or ST services.**

Accountability for documentation of treatment outcomes are part of a therapist’s legal/ethical obligation – **regardless of tools/strategies used in the therapy services rendered.**

This includes assessments, treatment plans, treatment goals, data collection & treatment notes/reports as per discipline and payer source.
MEDICAL BILLING CODES

Therapy professionals use the Healthcare Common Procedure Coding System (HCPCS) Level I Current Procedural Terminology (CPT) codes when coding and billing for occupational therapy, physical therapy, speech-language pathology services where equine movement is part of the skilled intervention that has been incorporated into a plan of care.

This is in accordance with the coding and billing guidelines given by the American Medical Association (AMA) and supported by American Physical Therapy Association (APTA), the American Speech-Language-Hearing Association (ASHA) and the American Occupational Therapy Association (AOTA).
HEALTH CARE BILLING CODES

- **HCPCS Level I (CPT Codes):**
  - Developed and maintained by the AMA
  - HCPCS = Health Care Common Procedure Coding System
  - Level I = CPT which include the Physical Medicine/Special Otorhinolarynologic Codes – used by OT, PT and SLP professionals to code their treatment procedures/services.

- **HCPCS Level II Codes**
  - Standardized coding system used primarily for products, supplies, and related health services not included in the Level I CPT codes.
    - Examples: ambulance services, durable medical equipment, prosthetics, orthotics, AAC devices, and (DMEPOS) when used outside physician's office.

**HCPCS Level II Codes are not used by therapy professionals to code their treatment procedures/therapy services.**
HCPCS LEVEL II CODE “S8940”

S8940: Equestrian Therapy/Hippotherapy, per session:

“Equestrian therapy/hippotherapy, also known as therapeutic horseback riding, is the passive use of the movements of a horse to treat patients with cerebral palsy and neuromuscular disabilities. The therapist tries to facilitate normal muscle tone and discourage abnormal posture by using the horse as a treatment modality.”

Generated by BC/BS on April 1, 2005, as a commercial payer code apparently to monitor fraudulent billing of “therapeutic horseback riding” which is an adaptive sport. Has created confusion and misrepresentation of the role equine movement plays in therapy services and was based on language taken from a therapeutic riding website/literature.
HCPCS Level II Code “S8940”

*S8940: Equestrian Therapy/Hippotherapy, per session*

- No therapy service called “Equestrian Therapy/Hippotherapy”
- No licensed health professionals called “Hippotherapists”
- Therapy professionals do not code “treatment intervention” under the HCPCS Level II Codes

Hippotherapy (equine movement) is a therapy tool—not a procedure, strategy or service.

*Use of this code to describe standard occupational, physical and/or speech-language therapy forces therapy professionals to “code” outside their practice acts.*
HCPCS LEVEL II CODE “S8940”

S8940: Equestrian Therapy/Hippotherapy, per session:

- In 2018 – Blue Cross Blue Shield Association acknowledged that this code was problematic through correspondence with the American Hippotherapy Association.

- The process for eliminating the code was started – and has been complicated by state Medicaids and some commercial insurers continued use of the code as a means of denying or reimbursing a nonexistent therapy service.
HCPCS Level II Code “S8940”

- Potentially fraudulent for a PT/OT/SLP to use this code
  - Does not follow OT, PT and SLP professional practice acts to code a nonexistent “therapy service” as opposed to the therapy service (OT, PT, ST) being rendered.
  - Pairing it with standard CPT codes identifies that therapist simultaneously rendered “2 separate therapy services” - Neither ethical nor legal.
  - Presently, some insurance companies have “modified” the original wording some – but the basic assumption of “hippotherapy” being a separate “therapy service” is consistent. There are no “hippothepists”.
  - The code misrepresents the role that equine movement as a treatment tool plays in occupational therapy, physical therapy, or speech-language therapy.
AMA/CMS CODING GUIDELINES MANDATE THAT TREATING THERAPISTS:

✓ Use the CPT Codes that most accurately describe the clinical treatment services/procedures provided. (CPT Codebook, pg. XV)

✓ Therapy professionals should use the Healthcare Common Procedure Coding System (HCPCS) Level I Current Procedural Terminology (CPT) codes when coding and billing for physical therapy, occupational therapy, and/or speech-language pathology services where hippotherapy is part of the skilled intervention that has been incorporated into a plan of care as per statements from APTA, AOTA and ASHA.

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MEDICAL BILLING CODES MUST SUPPORT THE THERAPY SERVICE RENDERED

**PHYSICAL MEDICINE & REHABILITATION**
- 97161-97164: PT Evaluation Codes
- 97165-97168: OT Evaluation Codes
- 97110: Therapeutic Exercise
- 97112: Neuromuscular Rehab.
- 97530: Therapeutic Activities
- 97533: Sensory Integration

**SPECIAL OTORHINOLARYNGOLOGY SERVICES**
- 92521-92524: ST Evaluation Codes
- 92507: Treatment of speech, language, voice, communication, and/or auditory processing disorder
- 92526: Treatment of swallowing dysfunction and/or oral function for feeding
CLINICAL DOCUMENTATION

- Evaluation with Initial Evaluation Report/Treatment Plan coded with appropriate CPT Evaluation Code
- Therapy coded using the appropriate CPT therapy codes
- Treatment notes following the healthcare standards for occupational therapy, physical therapy and speech-language therapy and supporting the CPT codes used
- Re evaluations to support ongoing need for skilled occupational therapy, physical therapy or speech-language therapy services
- Discharge plans/criteria
CERTIFICATION OF THERAPISTS IN USE OF EQUINE MOVEMENT AS THERAPY TOOL

- Voluntary continuing education certification administered by the American Hippotherapy Certification Board (AHCB)
- Prerequisite is PT, OT or SLP professional with clinical experience.
- ASHA, AOTA and individual state Physical Therapy Boards award CEU’s.

TWO LEVELS OF CERTIFICATION

- AHCB Certified Therapist
- Advanced - Hippotherapy Clinical Specialist (HPCS©)

These Certifications serve to encourage best practice by treating therapists using equine movement as a treatment tool.
EQUINE MOVEMENT IS A STANDARD THERAPY TOOL IN PHYSICAL THERAPY, OCCUPATIONAL THERAPY AND SPEECH-LANGUAGE THERAPY
FOR MORE INFORMATION

• American Hippotherapy Association, Inc. (AHA, Inc.) – a not for profit organization offering continuing education and membership support for licensed therapy professionals who enhance their therapy practice with the inclusion of equine movement as one of their treatment tools.

AHA, Inc.
americanhippotherapyassociation.org