



NEBRASKA

Myofunctional Specialties

Date:

RE:
DOB:

Referred by:

Policy ID:

Dear Sir:

This is to inform you that the above-named patient is under my care for orofacial myofunctional therapy. This patient has been referred by their physician and orthodontist since these services are unavailable within their offices. We are submitting a GAP exception claim for payable benefits for remedial treatment with the plan, including frequency and duration for review.

Phase one treatment: Developing new muscle patterns - 8-10 visits weekly.

Includes: Awareness of the oral mechanism, elimination of noxious oral habits, tongue and lips rest postures, nasal breathing with diaphragm, stimulation of orofacial musculature and the ability to execute proprioceptive techniques to adjust muscle tone and reactivity, lingual mandibular differentiation, and saliva/water movements to simulate the simplest form of a swallow.

Phase two treatment: Integrate movements into functional patterns – 7-9 visits weekly.

Includes: Natural saliva swallow, swallowing successively thicker foods, chewing, and drinking without positive air pressure, ability to maintain correct tongue and lip rest postures for increasing periods of time, nasal breathing, continuous swallows, and pill swallows.

Phase three treatment: Integrating patterns into lifestyle - 4-5 visits bi-weekly.

Includes: Ability to carry over new patterns of chewing and swallowing throughout the day and night, ability to swallow with ease, with relaxed lips and cheek posture, during rapid swallowing tasks, correct meal eating and drinking, ability to maintain continuous correct resting postures when not taking or eating, elimination of nighttime mouth breathing, all leading to subconscious acquisition.

Phase four treatment: Retain learned patterns – 4 habituation visits at 1, 3, 6, and 12 months following active therapy.

Orofacial myofunctional therapy is the treatment of an orofacial muscle disorder, a deviate swallowing pattern, or complete labial incompetency with a high incidence of facial bony growth malformation which may lead to chronic mouth breathing and upper respiratory difficulties. It is a psycho-physiological program of therapeutic neuromuscular retraining and proprioception; involving the coordination of full range of motion aimed at the establishment of a correct deglutition pattern and improved orofacial musculature. The treatment being performed with the above patient is a form of oral orthopedics and physical therapy of the face. These both serve to develop normal neuromusculature and function. The process is a complex one involving the coordination of many nerve and muscle groups. In the beginning stages of treatment, therapy is performed on a conscious level utilizing neuromuscular facilitation. As soon as possible, treatment moves to a more subconscious level where stabilization of muscle function and synchronization of deglutition are achieved.

This treatment is highly specialized and is performed by certified orofacial myologists, who are independently tested through the IAOM. This is a profession shared by dental hygienists, physical therapists, and speech language pathologists. Certification requirements include formal post graduate education, internships, and case studies, culminating with didactic and clinical patient-based board exams.

Thank you for your prompt attention to this matter. If there are any questions, please contact me by email or at one of the telephone numbers below.

Sincerely,

Patricia Brinkman-Falter

Patricia Brinkman-Falter, RDH, MS, COM®
Board Certified Orofacial Myologist