



Reading Disorders – Early Identification and Affordable Treatment

By Linda Balsiger, M.S., CCC-SLP

An estimated 1 in 5 children have a formal reading disorder, yet many of them never get the intervention they need to succeed in school. Research shows that the majority of children who are reading below grade level in third grade never achieve grade level reading skills. A high percentage of children with reading disabilities lose confidence in their learning abilities, begin to dislike school, and are at risk of dropping out. The cost to society is enormous. According to published statistics, 60-80% of prison inmates are functionally illiterate and 1 in 7 adults nationwide lack the literacy skills needed to read and understand a newspaper article.

The majority of children with reading disorders are identified at one of two points in time: kindergarten/first grade or third grade. Children may be flagged as early as kindergarten if they struggle with pre-literacy skills. These include rhyming, isolation of initial and final sounds in words, learning alphabet-sound correspondences, and blending three written letters into a word (e.g. C+A+T = CAT). In first grade, problems with learning long vowel combinations, irregular vowel digraphs, sight words, and common word parts and patterns may be warning signs of a disorder.

Many children with reading disorders have no apparent problem in kindergarten or first grade, but in third grade they begin to fall progressively behind in reading fluency and accuracy. This is because they have been masking their underlying decoding weaknesses by memorizing words, and using the context of a sentence or story to guess at words. Guesses are often made by looking at the word “shape” and the initial and final sounds of the word, causing substitutions such as *how/who*, *hard/hold*, *coach/couch*, *tall/tail*, and *jaw/jay*. Because reading is so effortful, these children often begin to dislike or avoid reading.

For many families, cost is an issue when it comes to seeking a formal diagnosis or treatment for reading disorders. They may first try tutoring centers, reading groups, or summer “camps” in hopes that these will help their children catch-up. While these can be helpful for students who are not significantly behind, children with reading disorders often make little progress with these approaches. Rather than tutoring, these children typically need 1:1 intervention from a specialist in reading disabilities. This type of specialized treatment may be slightly more expensive than tutoring, and many parents are unaware of financial resources that can help to defray the cost.

First of all, many health insurance plans cover treatment of reading disorders if it is provided by a licensed, certified healthcare professional. Coverage varies by insurance carrier and plan, and it is important to find out the co-pay, any deductible, and the maximum number of visits covered in a calendar year. If an in-network preferred provider is selected, the out-of-pocket cost is often limited to a co-pay (typically 20%), and the service provider bills the insurance company directly for the remainder of the fee.



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In addition, treatment services provided by a licensed healthcare professional may be tax-deductible as medical expenses. This includes any fees not paid for by insurance, as well as costs such as deductibles and co-pays. Medical costs must typically exceed 10% of adjusted gross income to be tax-deductible. A medical diagnostic code and a statement of fees and services signed by the healthcare provider should be obtained in writing for tax purposes. Healthcare providers are not qualified to provide tax advice - so consultation with a qualified tax professional is recommended. For families with a Health Care Spending Account (HCSA), that account may also be used to pay for treatment services from a licensed healthcare professional.

If a reading disorder is suspected, early identification and treatment is critical for long-term success in reading and in school. In third and fourth grade, the focus begins to shift from “learning to read” to “reading to learn.” Children who fall behind in reading may begin to struggle in all academic areas. If you suspect a problem, the first step is an assessment to determine whether your child meets formal criteria for a reading disorder. Armed with this information, you can begin to navigate the options available for successful treatment and remediation.

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