



Tobii ATI provides innovative hardware and software solutions for individuals with disabilities or special education needs.

## Things to Consider Before Writing the Speech Report

1. Make sure you SIGN the report. Insurances will not accept the report without a signature.
2. Make sure you list ALL of the needed parts and accessories in the report.
3. **Please Note:** Medicare **will not fund** a device for a patient receiving Hospice Care or living in a nursing or long term care facility.
4. Make sure you proved a medical justification for all recommended Equipment **including all accessories**. For example:
  - a. If you order an eye-tracking unit, explain that this method is the only way the person can access the communication software.
  - b. If you order an expensive switch explain why that is needed and a cheaper switch won't meet the person's needs.
5. The evaluation must be recent (dated within the last 6 months). If the report is older than 6 months you must provide an addendum verifying that the information in the report is still current and documenting any change in status.
6. Medicare, insurance programs and, in some states Medicaid, only pay for equipment that is medically necessary.
  - a. Assistive Technology is not "covered" by these programs, as it is not medically necessary.
  - b. Speech Generating devices are not Assistive Technology, they are categorized as either durable medical equipment or prosthetic devices
  - c. Computers are not medically necessary. If you recommend an integrated system you must explain why it is medically necessary and provide documentation from a doctor about why it is necessary..
7. Educational or social benefits aren't relevant to the above-mentioned programs. If the rationale for purchasing a system is framed in these terms, it is likely to be denied.
8. Terms like Email, Internet, or Instant Messaging are red flags for these insurance programs as they are computer functions and are not, therefore, considered medically necessary. This is true despite the position statements of a number of medical associations including the American Medical Association, American College of Physicians, and the American Academy of Pediatrics, which encourage the use of electronic communication (email, text and instant messaging) to monitor, educate and treat patients with medical needs, and the existence of a number of studies which have reported on the effectiveness of these forms of communication in improving

patient care. These position statements and studies also site the benefits of Internet use as an educational tool.

9. In some states, a Letter of Medical Necessity must accompany a request for funding. Even when not mandatory, this letter helps strengthen the case for funding and we therefore recommend including one in the funding packet. Either a doctor or an SLP can write this letter. A Dr.'s signature on the letter helps strengthen the case for funding even if the SLP actually wrote it. The letter should list:

- a. the required equipment, and
- b. verify that it is necessary to the care and treatment of the person's condition.
- c. If a doctor feels that communication with his/her office via email, text or instant messaging and internet access is necessary to the care, treatment and education of this person, **they** need to explicitly state this in their letter.

10. In writing your Speech report, keep NY Medicaid's definition in mind:

"Medical assistance" shall mean payment of part or all of the cost of **medically necessary** medical, dental and remedial care, services and supplies, ..., which are **necessary to prevent, diagnose, correct or cure** conditions in the person that cause acute suffering, **endanger life, result in illness or infirmity, interfere with such person's capacity for normal activity, or threaten some significant handicap ....**"

An inability to communicate with health care workers and caregivers meets these criteria.

11. Reports need to provide "Proof" that AAC, as a treatment, is medically necessary.

Proof includes

- a. The existence of certain recognized conditions such as Autism, ALS, Aphasia, advanced Muscular Dystrophy or MS, CP.... For which the benefits of AAC have already been defined.
- b. A receptive /expressive language gap
- c. The presence of anger, frustration; depression, self-injurious behavior... related to the inability to speak or communicate
- d. Inability to participate in medical care and decision making due to an inability to communicate medical status and needs to medical staff or caregivers.

12. Your report needs to document the failure of the person's current modes of communication to address their needs (as defined in No. 6 above) and the proven or assessed benefit of an AAC (**S**peech **G**enerating) **D**evice in improving their abilities.

13. Make sure you discuss attempts at remediation of articulation and prognosis for improvement of these skills.

14. Make sure to tie all the diagnostic and background information together under the implications section. What, for example, are the implications of

- a. The person's visual status on the type of system being recommended, or
  - b. The implications of a parent's techno phobia on the treatment plan for their child.
  - c. The person's motivation and cognitive skills...
15. Make sure you outline the treatment plan and include the training and support necessary to make caregivers and other team members effective participants in remedial efforts.
16. Make sure that you explain why the system being recommended is the best match for the person's needs. Explain why other systems that were tried or considered are less able to meet these needs.
17. In short, make sure that your report covers the following:
- client/patient diagnosis
  - prognosis
  - communication capabilities
  - ability to use the device being recommended
  - a comparison of AAC devices
  - examples of how denial of a communication device could endanger the client/patient's health and/or safety