Medically Necessary:

Augmentative and alternative communication (AAC) devices or speech generating devices (SGD) with digitized or synthesized speech output are considered medically necessary when all of the following criteria A through C are met, and when applicable, criteria D or E are met:

A. The device has been recommended by the individual's physician and licensed speech language pathologist who have each conducted and documented a thorough assessment which includes all of the following information:
1. Medical diagnosis, physiological description of the underlying disorder, description of functional limitation, nature and severity of speech or communication impairment, and prognosis for improvement (or deterioration); and
2. Medical justification for the device and documentation that a non-electronic communication device (such as a communication board) is inadequate to meet the individual's functional communication needs; and
3. Therapeutic history including speech, occupational, or physical therapies as appropriate; and
4. Documentation of the cognitive ability to utilize the selected device including, when appropriate, results of at least one validated cognitive and/or developmental test; and
5. Documentation of the visual, auditory, language and motor ability to utilize the selected device including results of any test{s) performed; and
6. Documentation of the specific daily functional communication needs including number of words or sounds used without a device at baseline; and
7. Expected functional communication goals with the device: and
8. Plan of care for the device including: anticipated training needs for the individual and caregiver(s), programming needs and planned evaluations.; ANO
B. The individual has severe expressive speech impairment and alternative natural communication methods such as writing or sign language are not feasible or are inadequate for that individual's daily functional communication needs; AND
C. The individual has tested the device, has demonstrated the ability to use the device and there is documentation of the rationale for the specific device selected which should include the following elements:
1. Duration of device trial (number of trials and length of sessions, total duration in days); and
2. Communication task(s) evaluated (such as initiating communication, responding to questions, making requests, effectively expressing wants, needs, and ideas, participating in conversations); and
3. language functions evaluated {such as making requests, initiating and responding to greetings, expressing feelings, and asking basiclfunctional questions); and
4. Type and number of symbols/pictures and/or words used with each device trial; and
5. Extent to which individual can independently navigate the device.
D. If the individual has a degenerative disease causing the speech impairment, the communication device selected should be capable of modifications necessary to meet the individual's anticipated needs.

E. If the individual is preliterate, the device should be capable of modifications such as spelling and text capabilities to meet the individuals anticipated learning potential.

Accessories such as switch, eyeygaze, head mouse, keyguard, and mounts are considered medically necessary if criteria for the base device are met and the medical necessity for each accessory is clearly documented in the formal evaluation by the speech language pathologist. For any subsequent upgrade of equipment or accessories to a previously issued device, Information regarding the functional benefit to the individual of the upgrade compared to the initially provided device must be submitted to demonstrate medical necessity.