AAC in Arizona: Navigating the New Managed Care Model

ArSHA

Arizona Speech-Language-Hearing Association

Access Attitude IHD Inclusion

ArSHA AAC Committee Members

- Jeremy Legaspi, M.S. CCC-SLP
- Dr. Elizabeth Morrison (she/her),CCC-SLP, Ethical Practices Chair
- Staci R. McCauley, M. Ed., M.S. CCC-SLP, AAC Committee Chair
- Danika Stampfel, M.S. CCC-SLP

Financial and Non-financial Disclosures

Jeremy Legaspi, M.S. CCC-SLP

Financial Disclosure: He is a salaried employee-owner of PRC.
Non-financial Disclosure: ASHA member, ASHA SIG 12 member, and ArSHA member

Dr. Elizabeth Morrison, CCC-SLP

Financial Disclosure: Co-owner/co-director of Dynamic Interventions Arizona, LLC
Non-financial Disclosure: ASHA member, ArSHA Member, ArSHA Ethical Practices Chair/Executive Board Member, ArSHA AAC Committee Member, Clinical Educator, Northern Arizona University Communication Sciences and Disorders

Financial and Non-financial Disclosures

Danika Stampfel, M. S. CCC-SLP
Financial Disclosure: Speech-language pathologist at North Valley Pediatric Therapy, independent contractor for NAU AAC Evaluation and Training program
Non-financial disclosure: AAC evaluator and trainer, ASHA SIG 12

Staci R. McCauley, M. Ed., M.S. CCC-SLP
Financial Disclosure: SLP for Roosevelt School District, independent contractor for NAU AAC Evaluation and Training Program, Instructor, NAU and Owner, *Speak from the Heart Pediatric Speech Therapy*, LLC.
Non-financial disclosure: ArSHA Board member, ArSHA AAC Committee Chair, ASHA member, SIG 12, SIG 16

Course Objectives:

- Participants will discuss documentation for medical justification
- Participants will be able to explain steps in the new AAC referral process
- Participants will identify critical differences in processes for MercyCare and United HealthCare
- Participants will identify 3 resources for AAC evaluation process

What is AAC? AAC is a ‘Functional Bypass’

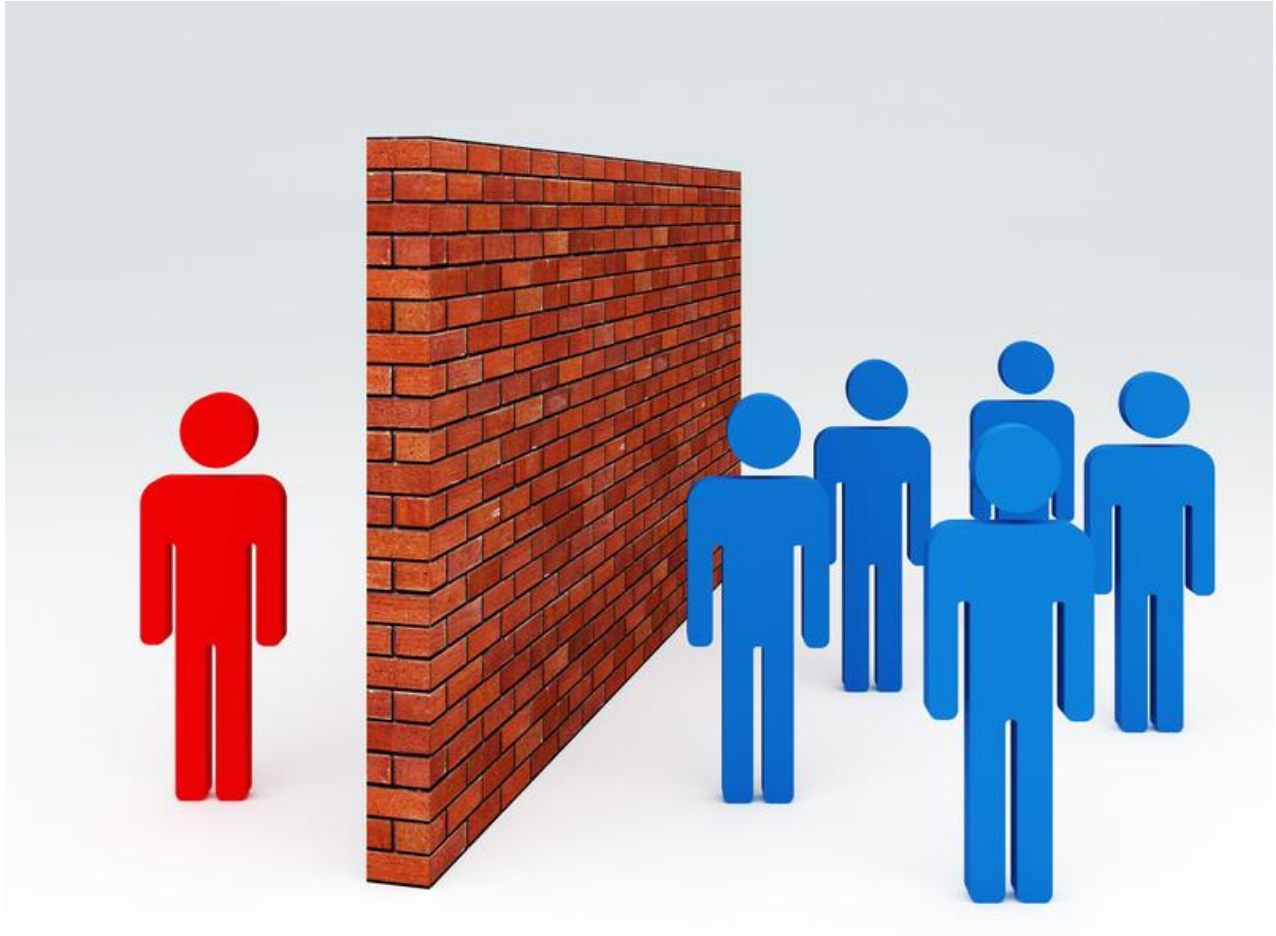
Can the client:

Say anything, to anyone, at anytime, about anything?

If not, then they may need AAC.

SGD Funding Fast Facts - AACFundingHelp

AAC Participation model: Buekelman & Mirenda, (2013)



All barriers require interventions!

Access Barriers

- **Natural ability**
- **Environment**
- **AAC Device**

Opportunity Barriers:

- **Policy**
- **Practice**
- **Facilitator skill**
- **Facilitator knowledge**
- **Attitudes**

Prior to 2021, DDD's AAC referral system looked something like this...

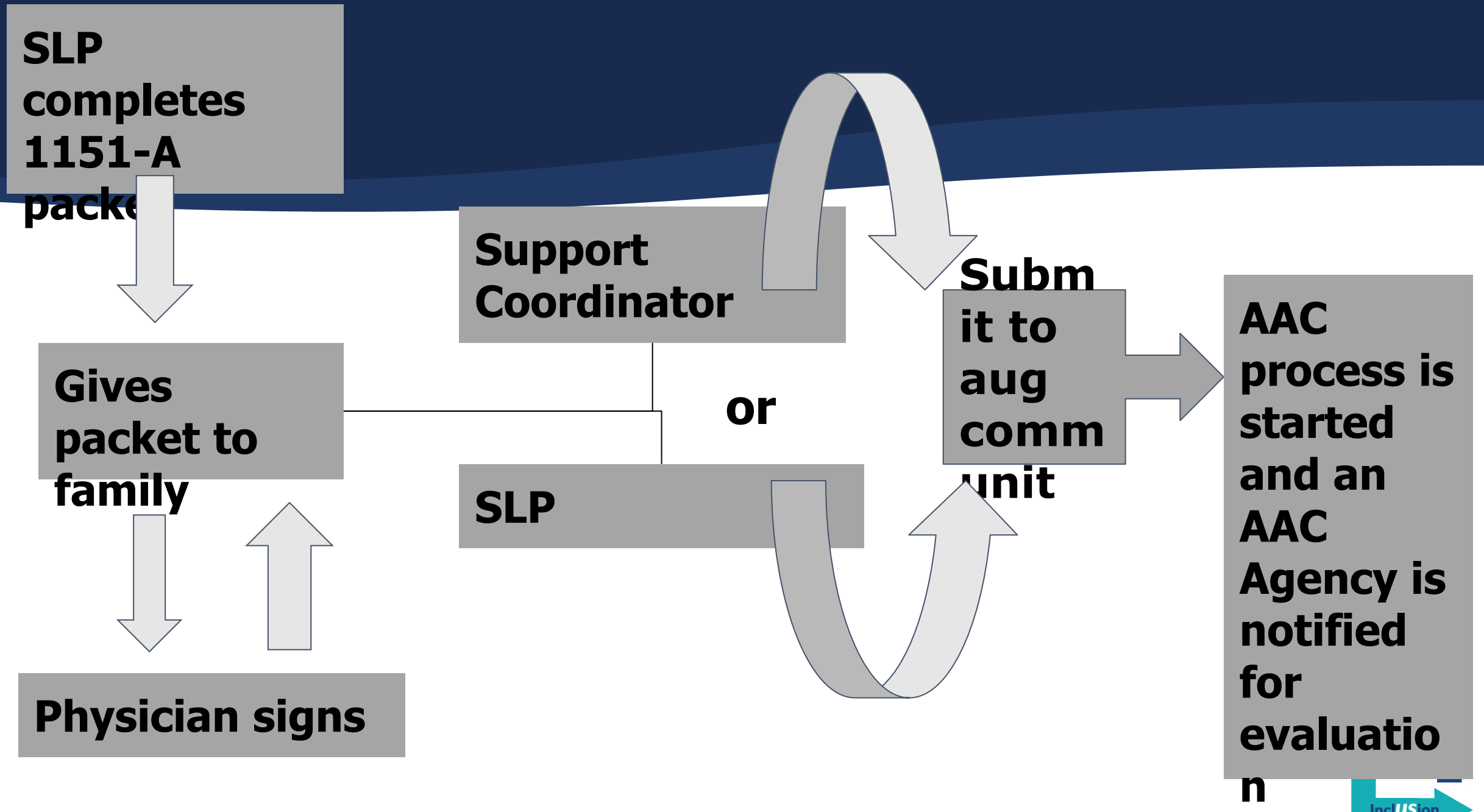
ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Division of Developmental Disabilities

INSTRUCTIONS FOR COMPLETION OF THE AUGMENTATIVE ALTERNATIVE COMMUNICATION REFERRAL PACKET BY A CERTIFIED SPEECH-LANGUAGE PATHOLOGIST

PRIOR TO COMPLETION OF THE AAC REFERRAL PACKET, THE SLP MUST INFORM THE SUPPORT COORDINATOR THAT AN AAC EVALUATION HAS BEEN DETERMINED MEDICALLY NECESSARY FOR THE MEMBER

AAC Referral Packet Contents:

1) Demographic Information.
2) ISP Information: Attach a copy of the most current ISP. If you do not have this information, you will need to request the ISP from the Support Coordinator. The ISP must be submitted with the Packet. If the member does not have an ISP and they are under the age of 3, an IFSP must be submitted.
3) Insurance Information: Include a legible copy of any third party payor card, both front and back (this is the member's private insurance). This includes Medicare. If you do not have this information, you will need to request this from the Support Coordinator. A copy of the insurance card must be submitted with the Packet. The AHCCCS card is not required upon submission.
4) Evaluator Choice: The Speech Language Pathologist will ask the member which provider they would like to have perform the evaluation and training. THIS MUST BE FAMILY CHOICE. In addition, remind the family that the team completing the evaluation will be responsible for the training as well.
5) Communication Skills Questionnaire (CSQ): Must be completed by a Speech Language Pathologist holding their


SLP completes 1151-A packe
Gives packet to family
Physician signs
Support Coordinator
or
SLP
Subm it to aug comm unit
AAC process is started and an AAC Agency is notified for evaluatio n

AAC Eval completed and submitted to DDD

DDD processes evaluation, including medical review to determine the necessity of AAC

Approved:
Device info sent to vendor who prepares for shipment;
Physician signs plan of care
Device shipped to SC
Family receives device from SC
Training auth issued by SC
AAC Implementation training begins.

Denied: Evaluators and or family must appeal and re-submit documentation of medical necessity. Timelines apply.

Resubmit AAC Eval and/or any supporting Docs

Why did this Change Occur?

- To improve member experience and access
- To create a more efficient and timely process
- To promote integration of care
- To integrate responsibility for AAC into the health plans

Augmentative and Alternative Communication Message August 11, 2020 (az.gov)

AHCCCS Revised Policies: 310-P and 1250-E

- Policy 310-P Governs AHCCCS medical equipment, medical appliances, and medical supplies
- This includes AAC evaluations, maintenance of AAC systems and other AAC related services such as mounting, implementation training
- 1250-E Covers rehabilitative and habilitative therapies (OT, PT, Speech) ordered by a PCP and by/under direct supervision of licensed therapists

AdSS Medical Manual Chapter 1250-E (az.gov)

Overview of AHCCCS Policy 310-P

- 310-P specifies requirements for coverage of medically necessary medical equipment, appliances, and supplies.
- AAC Services Must Be:
  - Medically necessary, cost effective, and federally and state reimbursable
  - Reviewed by physician
  - Maximize member's independence and functional levels in the most appropriate setting in which normal activities take place

1250-E Defines Therapy Services As:

- ***Prescribed*** by PCP or attending physician
- Providing ***medically necessary treatment*** that-
  - develops, *improves or restores* functions/skills not attained, are underdeveloped or have been impaired, reduced or permanently lost due to illness or injury.
- Relates to an active written ***Plan of Care*** signed by PCP
- ***Reasonable* and *necessary***

AdSS Medical Manual Chapter 1250-E (az.gov)

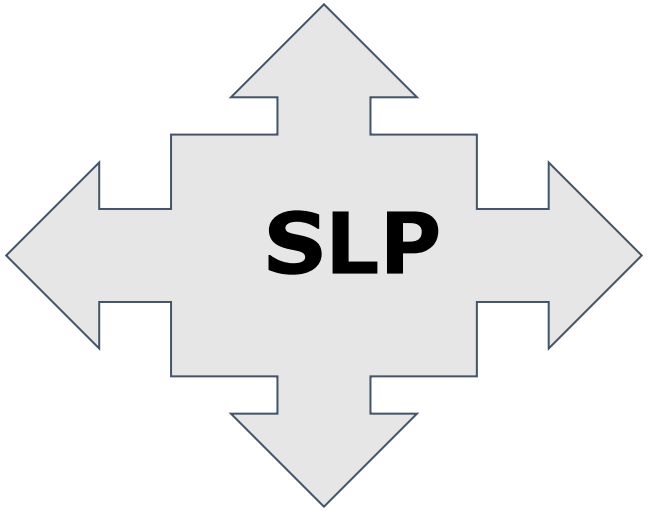
AAC Therapy Services Can Include:

- AAC Evaluations
- Implementation Training
- Mounting
- Repairs

Code of Ethics (asha.org)

Refer to AAC Experts

Part of an interdisciplinary team



Help families navigate the system

Expert in their area, offer ongoing treatment

Before you Refer: Educate and Inform Client's Family

- Discuss client progress, family expectations
- Discuss common myths of AAC
- Address family dynamics- willing to incorporate AAC into their lifestyle?

Before you Refer: Be Aware of Family/Cultural Values

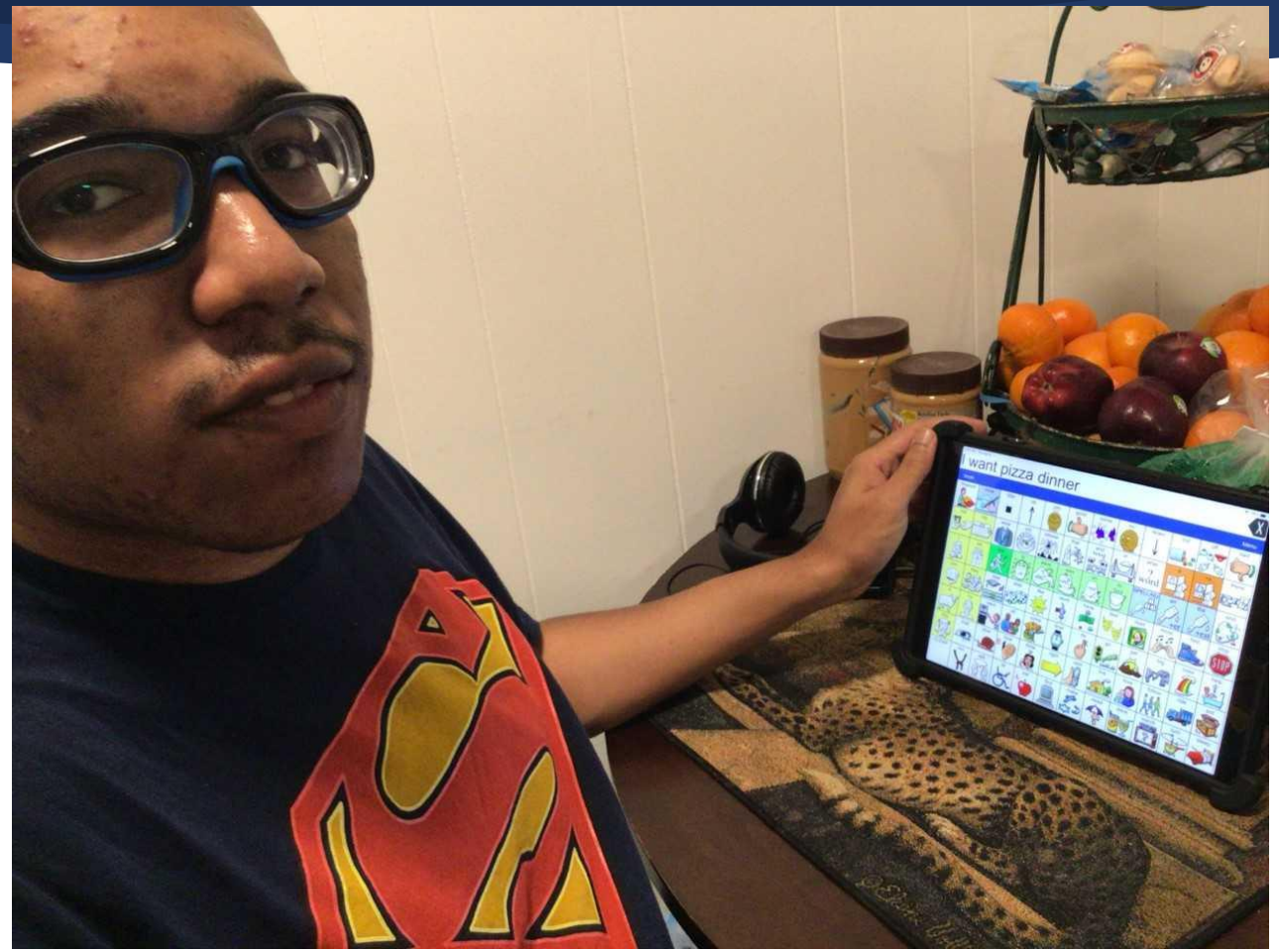
- Culture affects communication
- Cultural backgrounds may affect the family's openness to AAC

Common Myths of AAC (Romski & Sevcik, 2015)

1. AAC is a "last resort" in speech-language intervention.
2. AAC hinders or stops further speech development.
3. Children must have a certain set of skills to be able to benefit from AAC.

www.uncommonsenseblogspot,com) - used with permission

Common Myths of AAC (Romski & Sevcik, 2005)



4. Speech-generating AAC devices are only for children with intact cognition.

5. Children must be old enough to benefit from AAC.

6. There is a representational hierarchy of symbols from objects to written words (traditional orthography)

Before You Refer: Family Gathers Documentation

- Members medical records
- Previous test reports
- Quarterly progress reports (home, school)
- Current Speech-Language evaluation within the past 12 months
- IEPs/METs, IFSPs
- OT/ PT notes

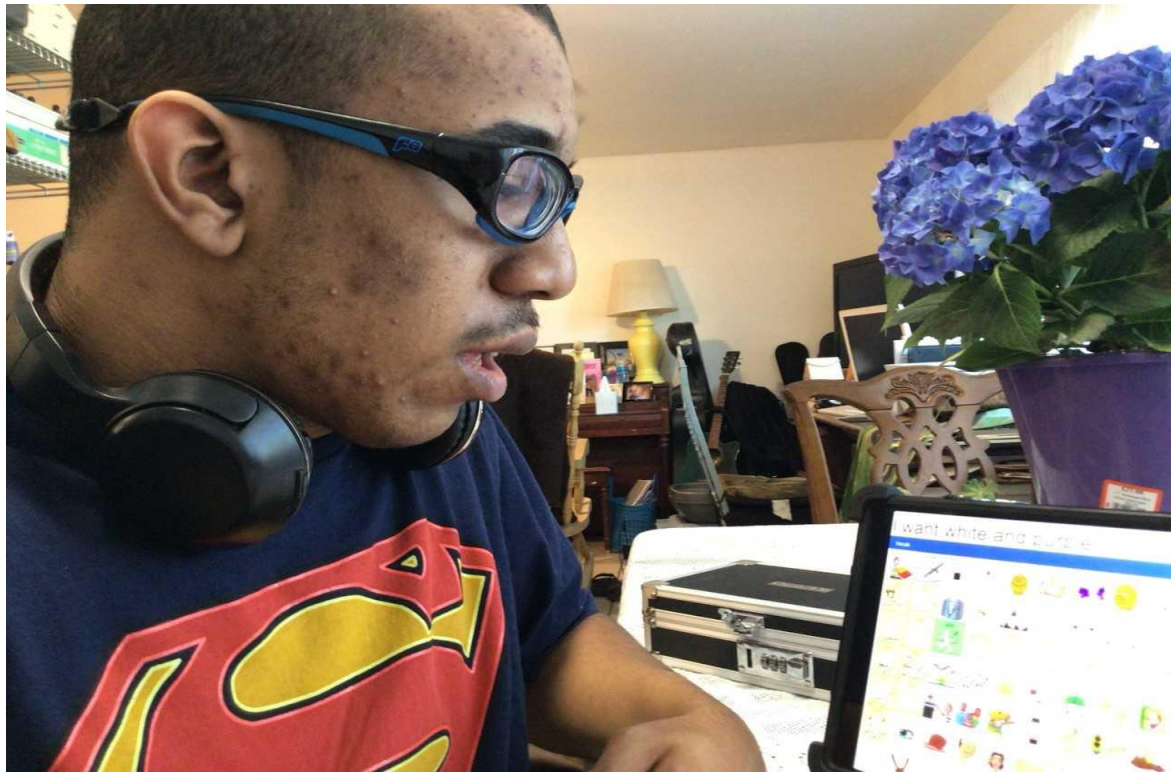
Documentation Demands of the Managed Care Model

Treating SLPs in schools, clinics, and home health settings should document clients with complex communication needs (CCN) in all areas of communication in their:

- Daily SOAP notes
- Quarterly progress reports
- Annual reports (IFSP, IEP)
- Speech-language evaluations (RED, MET)

Before Submitting a Request for an AAC Evaluation:

- It is recommended to have a ***current*** speech and language evaluation on file, completed within the twelve months and submitted along with the referral paperwork
- Document trials for **light tech** devices and why they are **not adequate** to meet client needs



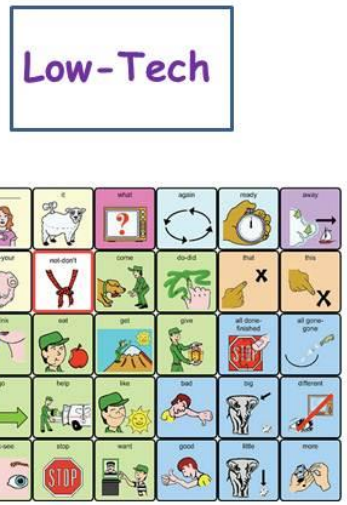
Ready to Refer? Go to the ArSHA website!

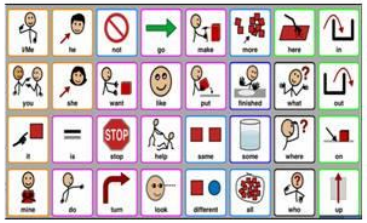
- Download referral form from Arsha website
- Write a brief statement of medical necessity
- Give the client the form to take to their doctor

Lack of Thorough Documentation of Need Can Result In:

- Delays
- Denials
- Decreased confidence in the managed care system

Prior Use of AAC Must be Documented When Referring

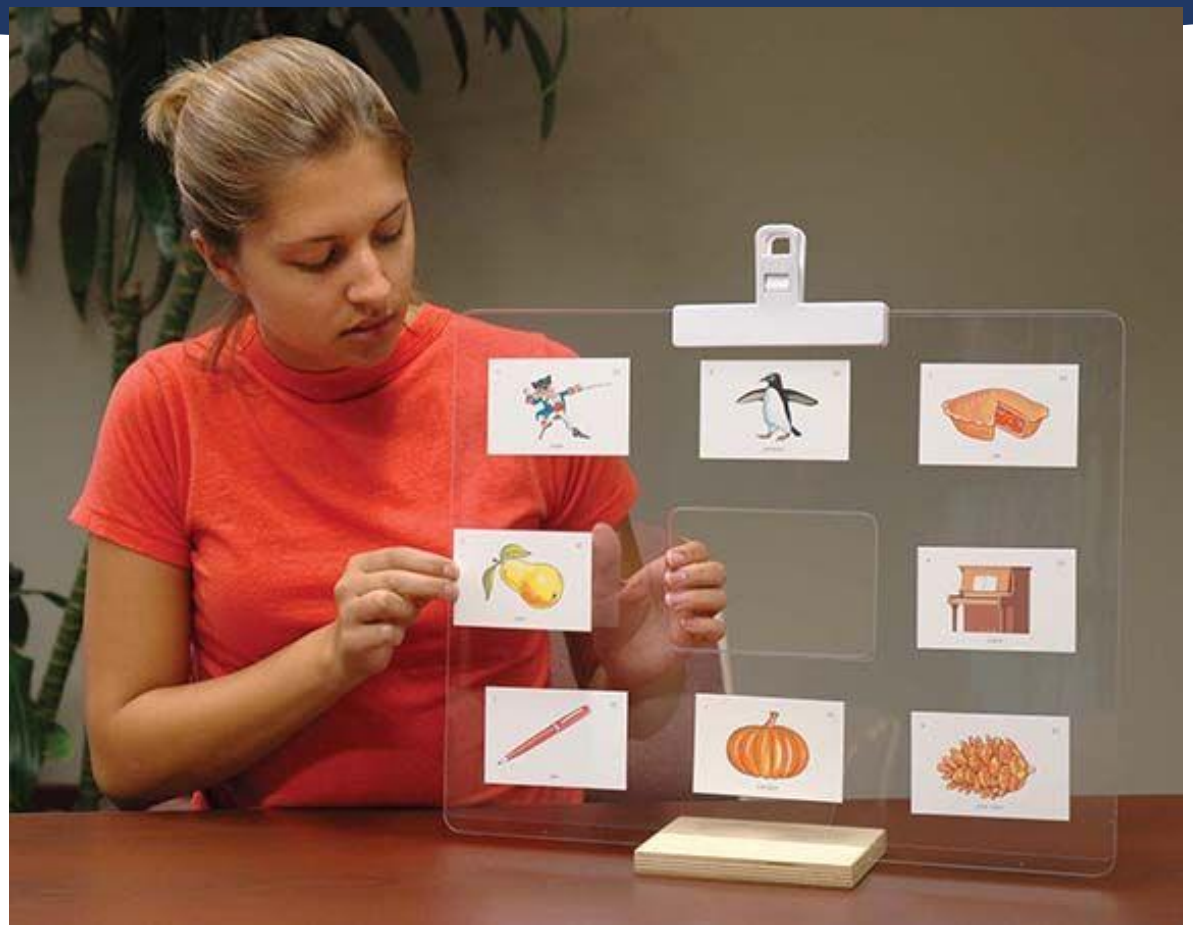




What type of AAC was trialed:

- Light tech core communication boards
- Picture Exchange System (PECS)
- Communication books
- YES/NO apps
- Free/lite versions of apps

Prior Use of AAC Must be Documented When Referring

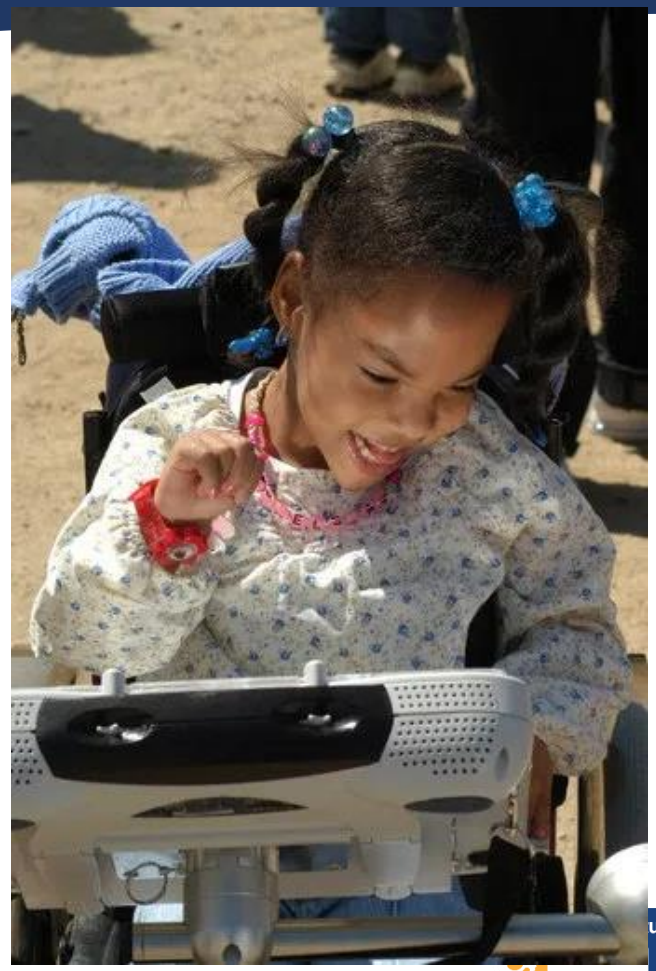


What type of AAC was trialed:

- Switch/switch activated toys
- Light tech eye gaze frame
- Tactile symbol book
- Choosing between real objects
- Mid tech devices

Document the Outcome of AAC Trials

- Describe the trial parameters:
- Device(s) trialed
- Length of time trialed
- What worked?
- What didn’t work?
- Level of prompting needed?
- Length of utterance(s)
- Functions of speech:
  - requesting, protesting, describing, etc.



Assess Expressive/Receptive Communication:

- Voice
- Fluency
- Articulation/Phono.
- Pragmatics
- Semantics
- Syntax
- Morphology
- Oral Motor Exam

- Comprehension
- Literacy
- Foundational Play Skills:
  - Joint attention
  - Eye contact
  - Turn taking
  - Parallel, associative, or cooperative play

Speech and Language Assessment Tools Can Include:

- Criterion referenced assessments
- Standardized assessments
- Non-standard reporting of standardized assessments
- Language samples
- Parent/Teacher Surveys
- Communication Matrix
- Dynamic assessments:
  - Present material
  - Teach, Test
  - Reteach, retest
- AAC Trials
  - Include data and rationale on any AAC trials given

Document the Client's Functions of Language

Can your client…

- Initiate/turn take in Conversation
- Request/ Protest
- Describe
- Direct actions of others
- Tell a story or retell an event

chart used with permission, (Kate Ahern 2020)

See Non-traditional Language and Behavior as Communication

Language:

- Echolalia
- Scripting
- Jargon
- Babbling
- Vocalizations
- Consonant and/or word Inventory

Behavior as Communication:

- Use of gestures
- Response to gestures
- Facial expressions
- Other non-traditional communication, such as leading you to object
- Use of eye gaze

Need to trial a device? Try *AZTAP* Lending Library

- Devices can be borrowed by persons with disabilities, family members, service providers, etc. for *two weeks* at a time.
- Devices may be picked up from the AzTAP office or can be shipped/returned at no cost to the borrower.
- School districts and charter schools can use ADE/AT Short term library
- **Assistive Technology Loan Libraries - AzTAP**

AzTAP ARIZONA Technology Access Program

During Referral Process: Follow up and communicate

- Client's support coordinator
- SC supervisors
- MCO's customer care liason
- Keep in contact with the AAC evaluator/agency the family choses

So, now that I know how to document my clients' communication needs, how do I refer clients who need AAC systems?

(That depends on which health plan the client has.)

United Healthcare Community Plan

Step One: Secure a Prescription from the Client's PCP

1. Both MercyCare and United Health Care need a prescription for AAC assessments

2. Prescriptions valid one year from date they are signed by PCP

3. Treating therapists should document client's need for AAC in a letter the family can take to the physician

Step Two: Family Requests Evaluation from a contracted provider

1. Family chooses a contracted provider from Mercy Care or United Health Care website.
2. Family calls AAC agency/SLP listed on the site to make an appointment

mercy care

United Healthcare Community Plan

Inclusion

Augmentative and Alternative Communication

Provider Training

How does the process work?

- Member's physician writes a prescription/referral for an assessment from an in-network, licensed and registered speech-language pathologist (SLP). **Valid for 12 months.**

- Mercy Care will accept assessments completed by a school SLP however as a best practice we ask that schools coordinate evaluations with a Mercy Care contracted SLP. We want to make sure that all settings are taken into consideration (Schools, Home etc.). The School and contracted SLP can work with MedOne on getting a device. The member still needs to get a prescription from the doctor for the device.

- Member contacts their DDD Support Coordinator, Mercy Care or DDD Liaison for an in network, licensed and registered speech language pathologist (SLP) .

Northern Arizona University - Institute for Human Development

Room 101 Bld 27A

Flagstaff, AZ 856011

928-523-5590

Counties Served: Statewide

Therapy one

108 W University Drive

Mesa, AZ 85201

480-668-1917

Counties Served: Statewide

Advanced Therapy Solutions

690 E Warner Rd #105

Gilbert, AZ 85296

480-820-6366

Counties Served: Maricopa, Pinal, Gila, Yavapai, Cochise, Pima and Yuma

District Medical Group CRS

3141 N 3rd Ave, Suite 100

Phoenix, AZ 85013

602-470-5532

Counties Served: Maricopa

United Cerebral Palsy of Central Arizona

1802 West Parkside Lane

Phoenix, AZ 85027

602-682-1893

Counties Served: Maricopa

To assist with the management of the AAC device systems Mercy Care has chosen MedOne as the preferred vendor for these devices.

MedOne

2330 W. University Dr. Ste. 20

Tempe AZ 85281

Phone: 480-835-9100

Fax: 480-835-9104

Mercy Care also contracts direct with PRC-Saltillo, Tobii Dynavox

High Tech Devices available within Mercy Care's network

QuickTalker by AbleNet

Lincare

Smartbox

PRC

Eyetech

Mitalk

Tobii Dynavox

Boundless

- SLP receives request and coordinates assessment and notifies MedOne
    - SLP in conjunction with other health professionals such as a Physical Therapist (PT) and/or Occupational Therapist (OT) will conduct the assessment
    - Up to three devices and/or apps can be reviewed/trialed for up to 30 days
- When the formal assessment is completed, SLP will send all documents including to MedOne who will then submit request for prior authorization to Mercy Care
- If the SLP determines that a device not provided by MedOne is needed the SLP will send all documents including a request for prior authorization to Mercy Care for review.

- For devices not provided by MedOne
  - AAC Devices and accessories will need Prior Authorization
  - Please complete the prior authorization request form located on the Mercy Care website and fax to 800-217-9345.
  - Documents needed:
    - Member’s medical records
    - Practitioner's office records
    - Therapy service records
    - Other records from healthcare professionals
    - Test reports relevant to the request should be submitted or may be requested to support/demonstrate that the coverage criteria for an AAC device

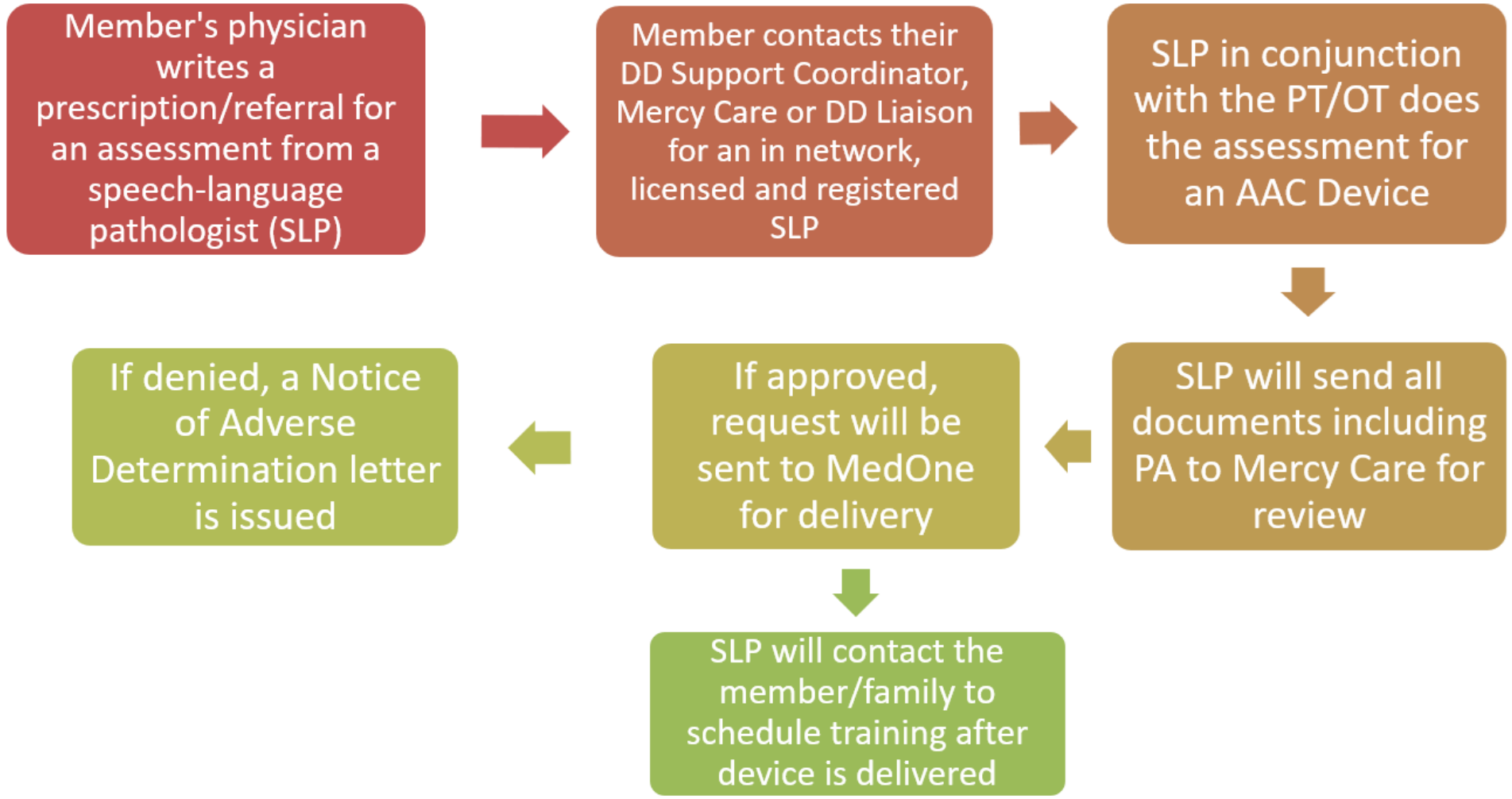
For Devices provided by MedOne

- MedOne will gather documentation and request prior authorization

- Mercy Care has 14 days to review the request and may take an additional 14 days if they need additional information.
- If more time is needed, the member will receive a letter called Notice of Extension (NOE).
  - This will allow an additional 14 days for Mercy Care to review additional documents.
- Total time should not exceed 28 days.
- DDD Support Coordinator (SC) or Speech Language Pathologist (SLP) that need further assistance about authorizations, please contact our PA department at 800-624-3879.

- If Mercy Care approves:
  - Mercy Care faxes out approval to DME vendor, the SLP and the DDD Support Coordinator
  - DDD Support Coordinator notifies the member of the approval
  - Device will be delivered to the member's home
  - SLP will coordinate the training hours with the member/family member, includes ongoing training if need be
  - No separate prior authorization required for training hours

- If Mercy Care denies, Notice of Adverse Determination letter is issued with instructions about the appeal process


Member's physician writes a prescription/referral for an assessment from a speech-language pathologist (SLP)
Member contacts their DD Support Coordinator, Mercy Care or DD Liaison for an in network, licensed and registered SLP
SLP in conjunction with the PT/OT does the assessment for an AAC Device
SLP will send all documents including PA to Mercy Care for review
If approved, request will be sent to MedOne for delivery
SLP will contact the member/family to schedule training after device is delivered
If denied, a Notice of Adverse Determination letter is issued

patient Hub enables “push” notifications to a pc, tablet, or mobile phone every time there is progress or action is needed in the process of getting a Speech Generating Device

You will always know what has just happened and what needs to happen next.

From the initial request for an eval, to the scheduled training after your device is received

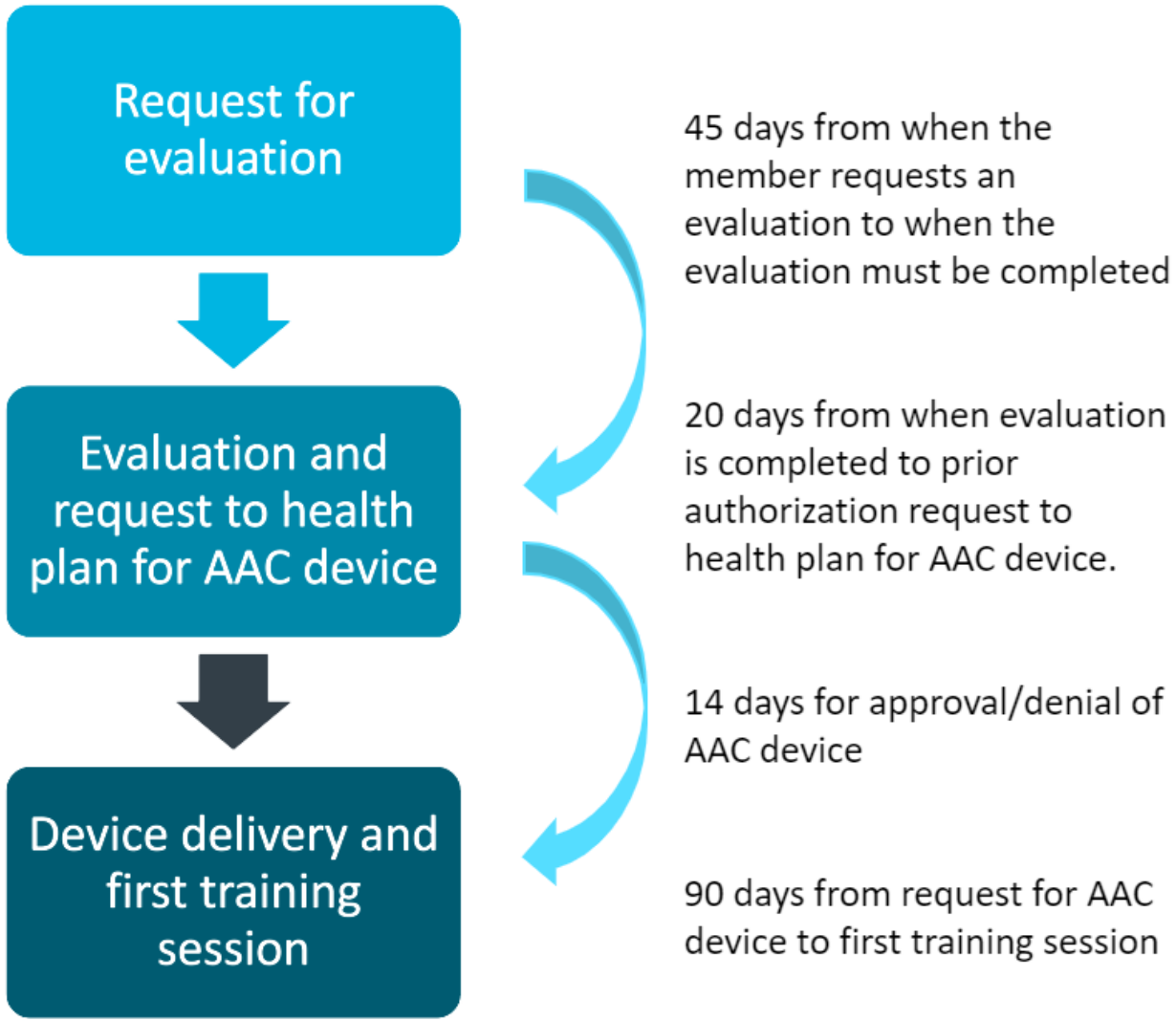
You can also use the app to communicate with MedOne and ask questions, update insurance, and even provide documents

Patient Hub

Members with other primary insurance

- Mercy Care is always the payer of last resort
- If the primary insurance requires authorization you will want to follow their authorization requirements

Timeframe for AAC Device



45 days from when the member requests an evaluation to when the evaluation must be completed

20 days from when evaluation is completed to prior authorization request to health plan for AAC device.

14 days for approval/denial of AAC device

90 days from request for AAC device to first training session

- If member/caregiver does not agree with Mercy Care's PA decision, he/she can file an appeal
- Appeals must be filed within 60 calendar days from the date of the Notice of Adverse Benefits Determination letter
- Mercy Care has 30 calendar days to issue a resolution
- Expedited appeal decisions are issued by Mercy Care within 72 hours from the date the expedited appeal request is received

- To file an appeal, member/caregiver must mail, call or fax the request using the following:
  - **Mail:**
    - Mercy Care
      Appeals Department
      4755 S. 44th Place
      Phoenix, AZ 85040
  - **Phone: 602-453-6098** or **1-800-624-3879**
  - **Fax: 602-230-4503**

- The fastest way to report a grievance is to call Member Services at **602-263-3000** or toll-free **1-800-624-3879** (TTY/TDD **711**).

- Once the device has been received, the SLP will schedule time for the member and family to set up the device and train on the device, and mount the device, if appropriate.
- It can take up to 90 days from the request of the AAC device to when the 1st training is conducted.
- The family will be advised to outreach to the provider for training as soon as the device is delivered.

- **All repairs require prior authorization.**
- Repairs may be covered if the device is the current medically necessary device.
- All repairs out of warranty should to go our preferred DME vendor, MedOne at **480-835-9100**.
- Repairs under warranty should go direct to manufacturer or MedOne

Mercy Care will cover one device repair every 12 months per member due to normal wear and tear unless device is under warranty.

- When loss, stolen or irreparable damage has occurred.
- It has been 3 years since the initial prescription, and the AAC system is no longer functional.
- There is a change in the member's condition that affects the use of the current AAC system.
- The no – we current AAC system is not meeting the member's needs despite adequate training.
- There is documentation, from the manufacturer, that the SGD can no longer be repaired.

- If a replacement is needed, the member must reach out to their physician to obtain a prescription/referral. If the member needs assistance they can reach out to the DDD Support Coordinator.
- PA is needed for replacement devices.

- There may be loaners available through MedOne. Please contact MedOne for more questions. 480-835-9100

Thank you

United Healthcare Community Plan

UHC Process Part One: Setup up the Evaluation

1. Member receives from their physician a prescription/referral for an AAC assessment by a Speech Language Pathologist (SLP). This prescription is good for 12 months.

2. Member may contact the DDD Support Coordinator, UHCCP's member services, and UHCCP DD liaisons to get contact information for an in-network UHCCP licensed and registered SLP. Or the member can do a provider search using UHCCP's member website and use the Provider Lookup feature. Use provider search - add link

UHC Process Step Two: Schedule Evaluation

1. Once the member chooses an SLP, the member calls the SLP to schedule an assessment.

2. ***The assessment requires a Prior-Authorization (PA)***. The SLP will send to UHCCP the member's ISP, IEP, therapy progress notes, and other documentation to support the need for an assessment.

3. Per the UHCCP member handbook, a specialty appointment is to be scheduled within 45 days of when the member calls and asks for the assessment.

4. Once UHCCP receives the PA, a decision must be made within 14 days.

5. If the assessment is approved, the SLP will contact the member to schedule the assessment.

UHC Process Part Three: AAC Evaluation

1. Prior to the assessment, the SLP will determine the appropriate AAC device(s) for the member to try during the assessment visit.

2. The SLP will bring to the assessment up to three AAC devices for the member to try during the visit. Other therapy providers besides the SLP may also contribute to the assessment.

3. During the assessment, a family may choose to trial one of the AAC devices up to 30 days. During the trial period, the SLP will help make sure that the device is meeting the member's needs.

4. After an AAC device has been trialed and the treatment team, member and family agree on the AAC device, the SLP will send the assessment report to the referring physician for signature.

UHC Process Step Four: Post Evaluation

What happens after the AAC assessment?

1. Once the physician signs off on the recommended AAC device, the SLP will submit a PA to UHCCP for the device. The submission of the PA for device will take place within 20 days from the AAC assessment.

2. The PA will include supporting documentation from the assessment, expected training hours, and the list of the necessary accessories for the proper use of the AAC system. Once UHCCP receives the PA, a decision must be made within 14 days.

4. If the AAC device meets medical necessity, and the training and accessories are approved, then UHC sends the order to the AAC device manufacturer.

What if the AAC System needs a repair?

1. All repairs require Prior Authorization by UHCCP.
2. DDD will allow UHCCP to cover one device repair every 12 months due to normal wear and tear unless the device is under warranty.
3. The member can work with the DDD Support Coordinator , the original treating SLP or UHCCP to confirm if the device is under warranty.
4. UHCCP will assist member and DDD Support Coordinator in returning device if under warranty.
5. UHCCP will not cover the replacement of applications that or cannot be accessed due to loss of username and password.

How will member receive the device?

1. The AAC device will be mailed directly to the member's home.
2. Once the member receives the AAC device, the member should contact the SLP to schedule training for the AAC device.
3. UHCCP expects the first training to be completed no later than 90 days from when the AAC device was approved by the health plan.

What if the member needs an AAC replacement?

The device and accessories are expected to last up to 36 months.

The replacement of an AAC system or its components will be considered in the following circumstances:

1. When loss or irreparable damage has occurred.

2. It has been 3 years since the first prescription, and the AAC system is no longer functional.

3. There is a change in the member's condition that affects the use of the current AAC system.

4. The current AAC system is not meeting the member's needs despite adequate training.

References:

AHCCCS 1250E Therapy Policy: AdSS Medical Manual Chapter 1250-E (az.gov)

AHCCCS 310P Policy AMPM Policy 310-P (azahcccs.gov)

Communicative-functions.jpg (960×656) (wp.com)

Copy of Linguistic Competence (aaccommunity.net)

Beukelman, *D. R., & Mirenda, P. (2013). Augmentative and alternative communication: Supporting children and adults with complex communication needs. Baltimore, MD: Brookes Publishing.*

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Light, J.C. (1989). Toward a definition of communicative competence for individuals using augmentative and alternative communication systems. Augmentative and Alternative Communication, 5,4, 137-144.

Romski, MaryAnn, and Rose A. Sevcik. "Augmentative Communication and Early Intervention." *Infants & Young Children*, vol. 18, no. 3, 2005, pp. 174–185., doi:10.1097/00001163-200507000-00002.

Resources

ArSHA AAC Referral Form:

https://www.arsha.org/practicing-in-az/

AZTAP Assistive Technology Loan Libraries

https://aztap.org/at-devices/loan-libraries/

ArSHA

Arizona Speech-Language-Hearing Association

AzTAP ARIZONA Technology Access Program

A Statewide, Phoenix-based program of the Institute for Human Development at NORTHERN ARIZONA UNIVERSITY

Access Attitude IHD Inclusion

Resources

MercyCare DDD for members

https://www.mercycareaz.org/members/ddd-formembers

Mercy Care AAC

https://www.mercycareaz.org/members/ddd-formembers/aac

Resources

United HealthCare: Developmental Disabilities Program

https://www.uhccommunityplan.com/az/medicaid/developmentally-disabled

United HealthCare: AAC Provider List

https://www.uhccommunityplan.com/assets/plandocuments/providerdirectory/AZ-AAC-Provider-List.pdf