AAC in Arizona: Navigating the New Managed Care Model

Brought to you by ArSHA's AAC Committee

ArSHA
Arizona Speech-Language-Hearing Association

The Arizona Speech-Language-Hearing Association

Membership renewal is around the corner!
August - October marks the time to lock in your benefits as an ArSHA member!

ArSHA IS HERE FOR YOU:

- Annual CE offerings
- Networking
- Leadership

- Access to lobbyists for important legislative issues

...And much more!

Visit www.arsha.org

Consider being an ArSHA Mentor!

Mark your calendars! ArSHA is hosting its 4th Annual Membership Happy Hour on Wednesday, September 29th from 6 to 7:15 PM on Zoom.

Global Autism Conference of the Autism Society of Greater Phoenix - Virtual ~ Interactive ~ Live!!

SEP 16 - 18, 2021

REGISTER

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-Saltillo.
Non-financial Disclosure: ASHA member, ASHA SIG 12 member, and ArSHA member,Part-Time Faculty-Institute for Human Development (IHD) Northern Arizona University (AT Certificate Program)

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: Speech-language pathologist for Roosevelt School District, independent contractor for NAU AAC Evaluation and Training Program, Instructor, NAU Disability Studies Graduate Certificate Program 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

Do you have questions? Put them in the chat. There's a question and answer session at the end of the webinar! Thanks!

What is AAC?

From the American Speech Language & Hearing Association (ASHA):

Augmentative and Alternative Communication (AAC) includes all forms of communication (other than oral speech) that are used to express thoughts, needs, wants, and ideas.

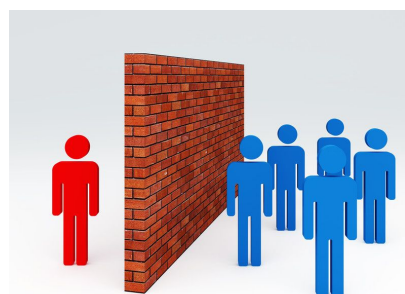*This includes both **Aided & Unaided** methods*

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...

DDD-1151A FORFF (1-18)   ARIZONA DEPARTMENT OF ECONOMIC SECURITY   Page 1 of 9
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

Flowchart

SLP completes 1151-A packet → **Gives packet to family** → **Physician signs** → **Support Coordinator** or **SLP** → **Submit to aug comm unit** → **AAC process is started and an AAC Agency is notified for evaluation** → **AAC Eval completed and submitted to DDD** → **DDD processes evaluation, including medical review to determine the necessity of AAC**

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

Resubmit AAC Eval and/or any supporting Docs

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.

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

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.

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
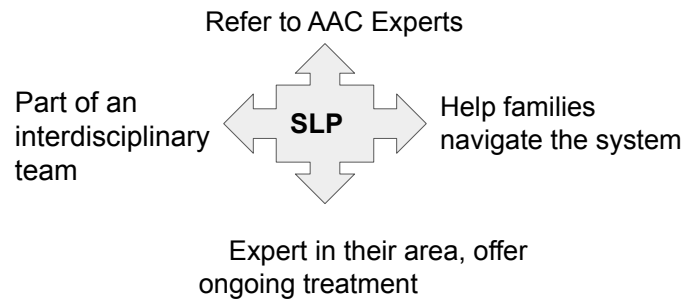
1250-E Defines Therapy Services As:

- *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*

AAC Therapy Services Can Include:

- AAC Evaluations
- Implementation Training
- Mounting
- Repairs

Refer to AAC Experts

Part of an interdisciplinary team ⟵ SLP ⟶ 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
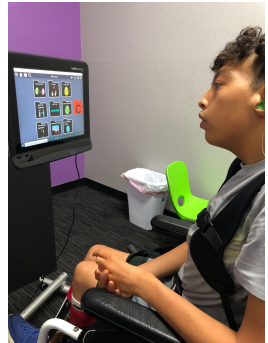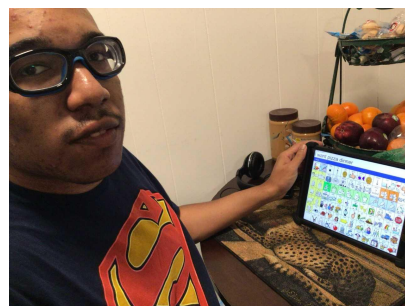

Common Myths of AAC (Romski & Sevcik, 2015)

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.
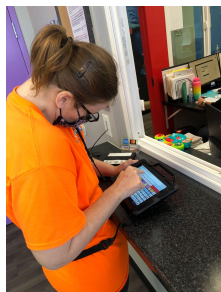
www.uncommonsenseblogspot.com) - used with permission

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
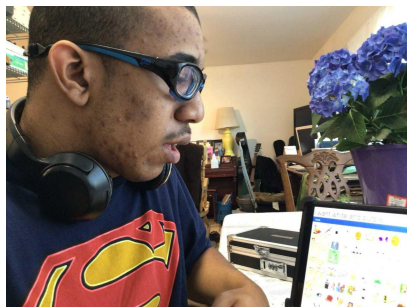- IEPs/METs, IFSPs
- OT/ PT notes

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!

ArSHA
Arizona Speech-Language-Hearing Association

Referral form for families needing a communication device
for Augmentative and Alternative Communication (AAC)

- 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
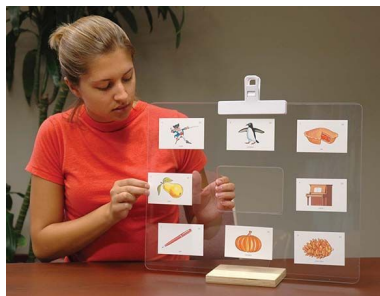- Decreased confidence in the managed care system

Prior Use of AAC Must be Documented When Referring
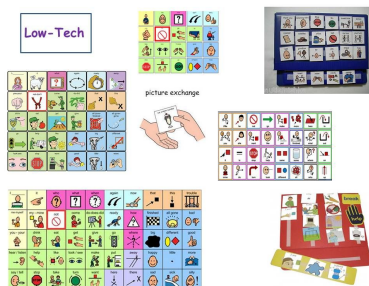
What type of AAC was trialed:

- 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
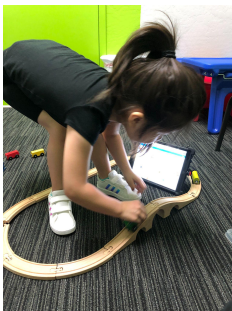- Direct actions of others
- Tell a story or retell an event

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**

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.)

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

Augmentative and Alternative Communication

Provider Training

AAC Assessment Referral Process

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.

49

- 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

50

51
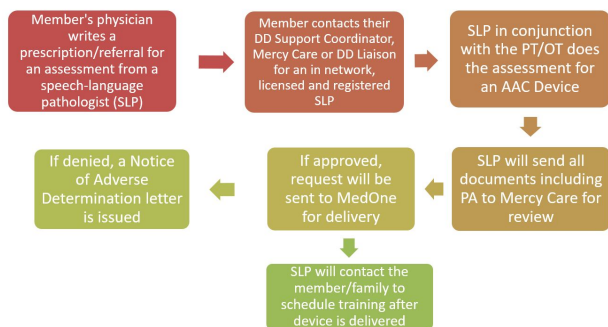
Patient Hub enables "push" notifications to a pc, tablet, or mobile phone every time there is progress or action is needed in the process of getting a Speech Generating Device

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**

52

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

53

Request for evaluation

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

Evaluation and request to health plan for AAC device

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

Device delivery and first training session

90 days from request for AAC device to first training session

54

- 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.

61

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

62

Thank you

mercy care

63

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

United Healthcare Community Plan

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 device, the SLP will send the documentation of the eval, script and details of the needed device equipment and accessories to the AAC DME manufacturer.
2. The AAC DME manufacturer will submit the prior-auth for approval to UHCCP and 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.
3. Once the decision has been made on the device and it meets medical necessity, the AAC DME manufacturer is notified by phone and the SLP is also notified so that prior auth for training may be submitted.

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 members 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.

UnitedHealthcare Community Plan Contacts

UHC Member Services: 1-800-348-4058   **UHC Provider Services: 1-800-445-1638**

Rosemarie San Nicolas, AAC Coordinator/DD Liaison (Member Last Names: A-L)
rosemarie_san_nicolas@uhc.com
602-255-1608

Ryan Lange, DD Liaison (Member Last Names: M-Z)
ryan_lange@uhc.com
602-255-8306

Laurie Ganzermiller, Director Special Programs
Laurie_ganzermiller@uhc.com
602-255-1675

AAC *IS* an AHCCCS Covered Service!

According to the AHCCCS website,

 "*All* AHCCCS health plans provide the *same*

covered medical services."

- **Each health plan may have their own process**
- **Prior Auth may be required**
- **For clients who do not qualify for DDD**

(See link in resources)

AAC *IS* an AHCCCS Covered Service!

Appropriate for AHCCCS members who do not have a qualifying diagnosis for Arizona Long Term Care.
Some examples include:
- Apraxia or Childhood Apraxia of Speech
- Developmental Delay
- Fluency disorder
- Other possibilities?

Services through AzIEP Remain the Same

AzIEP Electronic Referral form:

https://azeip.azdes.gov/AzEIP/AzeipRef/Forms/Categories.aspx

Contact AzIEP:

https://des.az.gov/services/disabilities/developmental-infant/contact-arizona-early-intervention-program

Refer a Child Online

Refer a Child Online

Questions? ArSHA has got the Answers!

The Arizona Speech-Language-Hearing Association

Membership renewal is around the corner!
August - October marks the time to lock in your benefits as an ArSHA member!

ArSHA IS HERE FOR YOU:

- Annual CE offerings
- Networking
- Leadership
- Access to lobbyists for important legislative issues

...And much more!

Visit www.arsha.org

Consider being an ArSHA Mentor!

Mark your calendars! ArSHA is hosting its 4th Annual Membership Happy Hour on Wednesday, September 29th from 6 to 7:15 PM on Zoom.
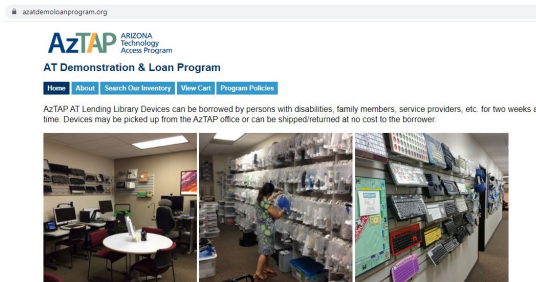
AAC Give Away

Prizes!

Free Stuff

Free stuff

Prizes!

GRAB A PRIZE!

Resources: AZTAP Assistive Technology Loan Libraries

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

AzTAP ARIZONA Technology Access Program

AT Demonstration & Loan Program

Home | About | Search Our Inventory | View Cart | Program Policies

AzTAP AT 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.

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

Resources

ArSHA
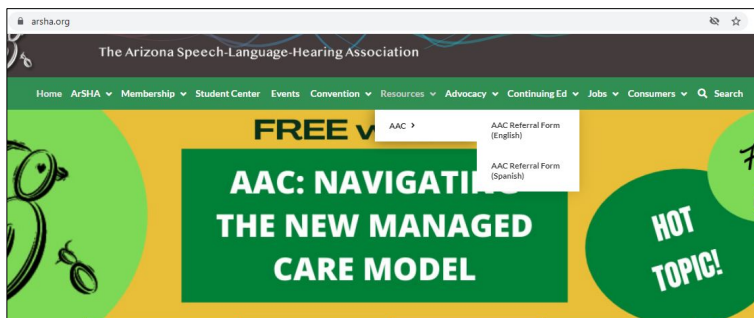Arizona Speech-Language-Hearing Association

https://www.arsha.org/ has:

- AAC referral forms
- List of contracted AAC provider agencies
- Contact info for the insurance companies
- AAC in AZ One Page Reference Guide

How to find AAC Resources at ArSHA

arsha.org

The Arizona Speech-Language-Hearing Association

Home | ArSHA ▾ | Membership ▾ | Student Center | Events | Convention ▾ | Resources ▾ | Advocacy ▾ | Continuing Ed ▾ | Jobs ▾ | Consumers ▾ | Q Search

AAC ›   AAC Referral Form (English)

AAC Referral Form (Spanish)

FREE v

AAC: NAVIGATI[NG] THE NEW MANAGED CARE MODEL

HOT TOPIC!

ArSHA referral forms are available in English and Spanish

ArSHA
Arizona Speech-Language-Hearing Association

Referral form for families needing a communication device

for Augmentative and Alternative Communication (AAC)

Parent instructions: *Bring this form to your pediatrician/family physician when requesting a prescription to start the AAC evaluation process. Once your physician provides the prescription, call the insurance company to choose an AAC evaluation agency. The numbers are listed below:*

Mercy Care AAC at 602-263-3000   *United Healthcare AAC at 602-255-1608*
(Ask for member services)

AAC PROVIDER AGENCIES CONTRACTED WITH MERCYCARE AND UNITED HEALTHCARE

Northern Arizona University - Institute for Human Development
Room 101 Bld 27A
Flagstaff, AZ 856011
928-523-5590
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

United Cerebral Palsy of Central Arizona
1802 West Parkside Lane
Phoenix, AZ 85027
602-682-1893
Counties Served: Maricopa

Therapy one
108 W University Drive
Mesa, AZ 85201
480-668-1917
Counties Served: Statewide

District Medical Group CRS
3141 N 3rd Ave, Suite 100
Phoenix, AZ 85013
602-470-5532
Counties Served: Maricopa

In-network, licensed and registered speech language pathologist (SLP) point of contact

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One Page Reference Guide to AAC Services for DDD Members with Mercy Care and United Health Care

Action steps needed for AAC:	Required by both plans	mercy care	United Healthcare Community Plan
Treating therapist documents need for AAC in letter/referral form the family takes to physician. Family gathers other documentation for medical necessity such as IFSPs, IEPs, METs, progress notes, medical info. Used for medical justification.	Recommended to start process	Recommended to start the process	Recommended to start the process
Physician writes prescription for AAC Evaluation with physician signature, valid one year	X	X	X
Family chooses a contracted provider from the health care plan's website.	X	X	X
AHCCCS/DDD is payer of last resort; primary insurance must be used first. **Primary insurances may have their own prior authorization processes.*	X	X	X
Family calls AAC agency/SLP listed on the site to make evaluation appointment.	X	X	X
Prior authorization needed for AAC eval and training		PA not needed for AAC evaluation or training	X

Other Resources for Parents:

Raising Special Kids:

https://raisingspecialkids.org/start-here/

Application for Arizona Long Term Care: (DDD/ALTCS):

https://www.azahcccs.gov/Members/Downloads/Publications/DE-828_english.pdf

List of AHCCCS Health Plans and links to benefits:

AHCCCS Health Plans

Other Resources for Parents:

Autism Society of Greater Phoenix

https://www.Phxautism.org

Global Autism Conference September 16-18 (Virtual)

https://whova.com/web/aasog_202109/

NAU AAC Evaluation and Training Program Information

NAU AAC Evaluation and Training Program

P.O. Box 5630

Flagstaff, AZ 86011

Fax: 855-819-0087

Email: aacevalprogram@nau.edu

Program Manager: Nikkol Anderson, MA, OTR/L, ATP

Office Phone: 928-523-4628

nikkol.anderson@nau.edu

https://nau.edu/ihd/community-services/

or

https://aztap.org/resources/aac-evaluation-training-resources-2-2/

Mercy Care Resources

MercyCare DDD for members

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

Mercy Care AAC

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

United Health Care 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

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.*

References:

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

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.