

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	Recommended	Recommended to	Recommended to
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.	to start process	start the process	start the process
Physician writes prescription for AAC Evaluation with physician signature, valid one year	Х	Х	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.	Х	X	Х
Prior authorization needed for AAC eval and training		PA not needed for AAC evaluation or training	Х
Prior authorization (PA) required for AAC devices	X	PA needed for AAC devices not pre-authorized through their contractor, MedOne	PA needed for all devices
45-day turn-around time for completing evaluations	X	X	X
Insurance company makes decision w/in 14 days	X	X	Х
AAC devices should ship within 90 days	X	X	Х
Appeals must be filed within 60 days	X	X	Х
AAC repairs/replacements require prior authorization. (Projected device life of 36 months)	X	X	X