# IHCP bulletin

INDIANA HEALTH COVERAGE PROGRAMS

BT202012 FEBRUARY 25, 2020

# IHCP revises policy for augmentative and alternative communication devices

Effective March 25, 2020, the Indiana Health Coverage Programs (IHCP) will revise policy regarding medical necessity requirements for augmentative and alternative communication (AAC) devices. The IHCP reimburses for an AAC device, with prior authorization (PA), if a medical doctor or a doctor of osteopathy orders the device in writing.

The IHCP grants authorization for an AAC device only when the documentation presented substantiates all the following:

- The member has demonstrated sufficient mental and physical capabilities to benefit from the use of the device.
- In the absence of a communication device, the member cannot effectively make himself or herself understood by others in his or her communication environment. Note: The lack of previous AAC device requests or usage will not be considered a reason for denial.



- The provider reasonably expects that the member's medical condition will necessitate use of the device for at least 2 years.
- The device will be used to compensate for the loss or impairment of communication function.

Requesting practitioners must include the following with the PA request:

- Medical necessity documentation
- A speech-language pathologist's clinical evaluation, substantiating the medical necessity for the communication device
- Documentation that identifies all communication devices that would meet the member's communication needs taking into account the physical and cognitive strengths and weaknesses of the member and the member's communication environment
- Recommendation for the least expensive communication device

# **QUESTIONS?**

If you have questions about this publication, please contact Customer Assistance at 1-800-457-4584.

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