AAC: CLINIC, CLASSROOM, COLLABORATION

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Disclosures

Financial:
- We did not receive payment for this presentation.

Non-financial:
- Camber provides AAC services at The Children’s Center Rehabilitation Hospital
- Emily provides AAC services in Edmond Public Schools.
Objectives

1. Understand principles of an AAC assessment
2. Recognize the differences in clinical and educational criteria of AAC assessment and implementation in different environments.
3. Identify strategies to collaborate with peers, family, and other professionals to implement and increase AAC use.
AAC is...

- An integrated group of components used to enhance communication, including the
  - forms of AAC (aided or unaided), symbols, selection techniques, strategies ([www.asha.org](http://www.asha.org))

- A system, not a single entity
Assessment vs. Evaluation

• How an individual responds to an evaluation task may give more insight than whether the response is correct/incorrect
• Evaluation is more than a battery of tests and a written report
• Assessment is not a one shot deal, it is an ongoing process
• AAC assessment involves more than assessing the individual- it looks at the potential AAC user, the environment and the communication partner
• May be formal or informal
• Should be multidisciplinary!
AAC Evaluation Resources

- Evaluation Wizard on AAC device-PRC
- Gail Van Tatenhove Materials
- Feature Matching Guide
- WATI Forms
- Every Move Counts
- SETT & Environmental Observation Guide

- Test Of Aided-Communication Symbol Performance
- AAC Profile: A Continuum of Learning
- AAC Evaluation Genie
- Communication Matrix
Communication Matrix

- [http://www.communicationmatrix.org/](http://www.communicationmatrix.org/)
- An assessment tool for the earliest stages of communicative learning
- Across seven levels of communication, four “reasons” to communicate, and nine categories of communicative behavior
- Allows for alternative communication for responding
The AAC Assessment Process

- Collect pertinent data on the individual:
  - Abilities, Sensory Needs, Access Methods
  - Current Methods of Communication
- Communicative Needs & Goals
- Environments
- Barriers
- Feature Match
- Trials
- Funding
Assess: Collect Pertinent Data

- Hearing
- Vision
- Mobility
- Positioning
- Physical Abilities and Access
Assess: Collect Pertinent Data

Current Methods of Communication

- Review prior speech language evaluations or conduct new evaluations
- Interview parents/teachers/therapists/caregivers
- Observe in typical environment
Assess: Current Levels of Communication

- Vocalizations
- Eye gaze
- Written language
- Gestures
- Verbalizations/speech
- AAC system
- Facial expression

- Postural/position changes
- Pointing
- Crying
- Screaming/hitting/ biting/ other undesired behaviors
Assess: Communicative Needs and Goals

- Communicate
  - reject, request, negate, respond, comment, etc.
- Learn Language
- Initiate Language
- Social interactions
- Gain Independence
- Learn Academic Content
- Participate in Class or Workplace
- Replace negative behaviors
In which environments and settings does the individual communicate or want/need to be able to communicate? And with whom?

- Home
- School
- Doctor
- Community
- Strangers
- Family

- Friends
- Church
- Playground
- Restaurants
- Sporting events
- Emergency personnel
Assess: Barriers

- Lack of support
- Access
- Attitude
- Low expectations
- Not enough time
- Fears
- Lack of equipment
- Funding
- Lack of knowledge
- Lack of confidence
- Behaviors
- Motivation
Feature Match

- Match the individual’s skills and needs with the features and options of device systems

- Symbols/message keys
- Vocab organization
- Navigation
- Message display types
- Speech output

- Access-direct vs. indirect
- Keyboards
- Portability
- Power sources
- Tech support
Device/System Trials:

- Trial with devices/systems. (at least 3)
- Videotape individual using the equipment.
- Determine if alternate equipment will meet the need.
- Look at similar lower cost devices.
- Weigh out pros and cons to see exactly what features are necessary.
Equipment/Device Trial Resources:

Borrow devices:

- Oklahoma AbleTech
  www.okabletech.org
- AAC Device company representatives
- Ipad Apps-evaluation copies
- www.omazingkidslc.com/2016/06/11/aac-tips-how-slps-can-get-free-access-to-aac-apps-aac-app-user-groups-funding-options-more/
Assessment vs. Instruction

- A key component to the AAC evaluation is to remember that some individuals will require a higher level of ongoing instruction in the use of the device in order to be independent and successful.

- How the individual responds to instruction can be a determining factor in device selection.
AAC Evaluation Process - Clinical vs. Education
### 1. Referral

<table>
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<th>Clinical</th>
<th>Education</th>
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<tbody>
<tr>
<td><strong>Receive referral and prior authorizations</strong></td>
<td><strong>Identify need for current students on caseload or new students</strong></td>
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</table>
| • Initiated by family/individual through their physician or their SLP | • Someone on the IEP team identifies the need for a communication system  
  o Parent, teacher, SLP, etc. |
| • Must acquire physician prescription for treatment or evaluation* | • No prescription for evaluation required |
| • Obtain medical insurance information | • Team MAY decide to amend IEP to include additional service times for assessment |
# 2. Gathering History

<table>
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<tr>
<td>Review</td>
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<td></td>
<td>- medical history,</td>
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<td>- previous evaluations,</td>
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<tr>
<td></td>
<td>- talk to parents and other professionals regarding current communication and needs</td>
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<tr>
<td></td>
<td>- history,</td>
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<tr>
<td></td>
<td>- previous evaluations,</td>
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<tr>
<td></td>
<td>- talk to parents, classroom teachers, other therapists regarding current communication and needs</td>
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<td>- Refer to “Questions” handout</td>
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Funding Sources

• Private-if the individual has private insurance and Medicaid and the private insurance does not cover DME, you must submit to private insurance and get a denial in order to submit to Medicaid.

• Public-Medicaid and Medicare are “last payer”

• TEFRA-for families that would otherwise qualify for Medicaid, but make too much money. Based on child’s income.

• Tricare-military insurance
ANSWERS I NEED TO COMPLETE THE COMMUNICATION DEVICE REPORT/REQUEST:

1. Is the child covered by private insurance or military insurance? If so:
   a. Which one? Please list all that the child has.
      • Name of insurance(s)
      • ID number
      • Contact name
      • Contact phone
      • Contact fax
      • Billing address (including city, state, zip)
   b. If you have private insurance, see below. If not, skip to c.
      • It is helpful if you will call your private insurance provider
        o Ask if they cover "durable medical equipment" under the CPT/HCPCS Code E2599 - Accessory for Speech-Generating Device, Not Otherwise Classified
        o If they do NOT cover the above, ask if they will provide you an explanation of benefits (EOB) stating that your request has been denied. (They may say you have to submit the request first. And they may go ahead and send you an EOB. I've had both scenarios happen.)
        o Ask which forms need to be completed, where to find them, and who to turn them into.
        o Provide me this information and I'll get on the paperwork for it.
        o Also, feel free to provide the insurance contact person with my name and number if needed. And get the name and number of the person you speak to.
   c. If you do not have private insurance, see below.
      • If the child covered by military insurance, see below.
      • If the child covered by other insurance, see below.
      • If the child is covered by Medicaid or an HMO, see below.
3. Determine Next Steps

<table>
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<tr>
<th>Clinical</th>
<th>Education</th>
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<tr>
<td>• Conduct formal speech/language evaluation if needed</td>
<td>• Determine appropriate device(s) and acquire those devices for trials.</td>
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<tr>
<td>• *Obtain authorizations for expressive language treatment sessions</td>
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*Unless...
## 4. Trials

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<tr>
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<tr>
<td>• AAC exploration within treatment sessions</td>
<td>• Introduce device during therapy sessions and use in functional activities.</td>
</tr>
<tr>
<td>• If no treatment sessions, help family obtain trial device.</td>
<td>• Train teachers/family if device will be trialed in those environments</td>
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<tr>
<td>• Train family if device will be trialed at home</td>
<td>• Assist families in obtaining device for trial at home</td>
</tr>
<tr>
<td>• Assist families in obtaining device for trial at home</td>
<td>• Ongoing video use during sessions.</td>
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<tr>
<td>• Video device use during sessions or at home</td>
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5. Final Decision

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<tr>
<td>• Determine desired device.</td>
<td>• Determine desired device.</td>
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<tr>
<td>• Communicate with family about recommended device.</td>
<td>• Communicate with IEP team including the family about recommended device.</td>
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<tr>
<td>• *Prior authorization for AAC evaluation</td>
<td></td>
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<tr>
<td>• *Physician prescription needed for AAC eval.</td>
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6. Report

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<tbody>
<tr>
<td>Write AAC eval report</td>
<td>Write AAC eval report</td>
</tr>
<tr>
<td>Write Certificate of Medical Necessity (CMN)</td>
<td>Write Certificate of Medical Necessity (CMN)</td>
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<tr>
<td>Send both to physician for signature</td>
<td>Send both to family with instructions to provide physician with report.</td>
</tr>
<tr>
<td>Request prescription for device and accessories</td>
<td>Physician must sign CMN and provide prescription for requested device and accessories.</td>
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Additional Funding Paperwork

- If using public insurance, will also need doctor’s notes from the most recent face-to-face appointment (within the year) OR a letter from the doctor stating the patient has been seen personally in the last year.

- Also, remember to match the terminology in your report with the funding source.
  - i.e. medical insurance
Funding Assistance

- Contact representative of the device's company. They want to sell their product so they're gonna help ya!
- Consider using online report writing services:
  - www.tobiidynavox.com
  - www.prentrom.com
  - www.aacfundinghelp.com
  - www.aac-rerc.com (select: "Medicare SGD/AAC Funding")
7. Submit to Funding Source

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<tr>
<td>If seeking a dedicated device (i.e. Tobii Dynavox I15, PRC Accent, Saltillo NovaChat, etc), utilize the device company’s funding department.</td>
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<tr>
<td>If seeking an iPad with communication app (i.e. LAMP WFL, Proloquo, TouchChat, etc), utilize AbleTech as a DME vendor.</td>
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<td>Note: a prior authorization is required but they will complete that for you</td>
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8. Wait...and wait...and wait...

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<tr>
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<tbody>
<tr>
<td>Once the paperwork is submitted, it can take anywhere from 4 weeks to 4 months to receive a denial or acceptance.</td>
<td>Device company funding departments will assist with this</td>
</tr>
<tr>
<td>If no word after 3 months, make contact. Be the squeaky wheel.</td>
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<tr>
<td>Device company funding departments will assist with this</td>
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<tr>
<td>If denied-</td>
<td></td>
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<tr>
<td>Ask for the denial in writing</td>
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<td>Correct any issues, appeal, and re-apply</td>
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AAC Assessment-Clinical Billing Codes

- **92607** - Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with the patient; first hour.

- **92608** - Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with the patient; each additional 30 minutes (list separately in addition to code for primary procedure).

- **92609** - Therapeutic services for the use of speech-generating device, including programming and modification.
AAC Assessment- DME Codes

- E2510-Speech generating device, synthesized speech, permitting multiple methods of message formulation and multiple methods of device access
- E2512-Accessory for SDG, Mounting System
- E2599-Accessory for SDG, Not otherwise classified (Case)

http://aacfundinghelp.com/general_resources.html
Implementation of AAC

- Goals for AAC
- Collaboration between private/clinical SLP and school SLP
- Family participation
- AAC use in all environments
- Group vs individual therapy sessions
Goals for AAC

Types of Goals

- Linguistic Competence
- Social Competence
- Strategic Competence
- Operational Competence
- Emotional Competence
Goals for AAC - Educational/IEP

- XXX will use 75% of the following core words: “eat, drink, no, yes, more, stop, go, turn, like, don’t, up, down, happy, mad, sad, sleep, want, good, bad”.
- Given a model, XXX will use new vocabulary words and phrases in language activities 80% of opportunities with non-verbal (pointing) cues.
- XXX will use single words (verbally, sign, voice output device) to 1) direct another person’s actions (ex. go, turn) 2) request (eat, want) 2) express negatives (no, don’t) 3) comment (like, sad) 80% of opportunities with moderate cueing.
- XXX will combine 2-3 words (verbally, sign, voice output device) to 1) direct another person’s actions (ex. Turn it) 2) request (want eat) 3) express negatives (don’t like) 4) comment (feel sad) 80% of opportunities with moderate cueing.
- XXX will answer questions regarding self or states of being (name, feelings, pain, etc.) 80% of opportunities with minimal cueing.
Goals for AAC-Clinical

• XXX will communicate basic/medical needs and feelings to family/caregivers independently with 80% accuracy.
• When asked, XXX will select desired activities with 80% accuracy.
• XXX will use the SGD to express feelings and opinions with 80% accuracy.
Recourses for Goal Writing

- www.praacticalaac.org/practical/practical-suggestions-writing-goals-for-people-learning-aac/
- www.aaclanguagelab.com
- www.aacfunding.com
• Handing a device to a child doesn’t make him/her a communicator.
  – Teach the child **AND** caregivers how and when to use it.
  – Keep it functional and meaningful.
  – Respond naturally to child’s attempts.
  – Use natural consequences.
  – Start with what motivates them…NOT you.
  – Begin with requests for highly motivating items/activities, and with messages for social interaction/gaining attention.
Family Participation

- Include parents and siblings in therapy sessions
- Video record sessions
- Teach all caregivers to use device
- Teach how to model
- Teach how to provide processing time
Including Siblings & Peers in AAC

- Play “Simon Says” with AAC
- Allow AAC user to “Be the Teacher”
- Allow others to explore device
- Read books together
- Program
Using AAC at School
Beginning Communicators

- Acknowledge all communication attempts as intentional and purposeful at first
- Accept all forms of communication - be careful to not force use of device
- Aided Language Stimulation - MODEL, MODEL, MODEL
- AAC is like a slot machine. The more I play the better life gets.
Imagine preparing an activity for language impaired students. Make a list of things they may need to say during the activity.

- Favorite books - find core words in books
- Favorite characters - have them “perform”
- Circle Time / share time
- Typical toys & games - look at naturally occurring vocabulary
- Writing activities - Mad Libs
- Arts / crafts
- Cooking
- Other technologies - iPad, PowerPoints, etc.
Speak the Language

- PRC Devices
- NuVoice Pass software-download simulator to create icons/symbols for games, books, cooking, crafts

https://www.prentrom.com/downloads/pass
Speech 9-26-18

XXXXXX came in today and went straight to the Candyland game. He brought it to the table and sat so sweetly. So Candyland we played! Lol.

I’m trying to get him to do more 2 word combinations so here are a few we targeted during the game.
Speak the language

- Chat Editor – Saltillo Device
- Free software download - https://saltillo.com/products#chat-editor
Incorporating Other Technology

• Using PowerPoints
• Where is Blue?
• iPad apps
• Pogg app
• Tarheel Reader
• Tarheel GamePlay
• PRC-Core Words, Directing Actions
Other ideas?

• What are you using?
• Favorite games, apps activities
10 Wishes from a Student Who Uses Augmentative Communication

1. I wish my friends would joke with me.
2. I wish my teacher would learn how to work my communication device.
3. I wish adults would stop shouting at me like I can’t hear.
4. I wish my therapist wouldn’t have a heart attack when my machine doesn’t work.
5. I wish people would remember that I don’t always spell very well.
6. I wish my friends would have more patience with me.
7. I wish my teacher would call on me for “Share Day”.
8. I wish everyone would just give me enough time to say what I’m thinking.
9. I wish people wouldn’t hit my machine when it doesn’t work. That’s my mouth they are hitting.
10. I wish I could walk and talk like my sister and brother.

Information gathered from PRC www.prentrom.com
Two things

1. Identify at least two things you learned during this presentation that you will apply in your personal or professional life.

2. Identify three steps you will take in the next month to implement what you learned in your personal or professional life.
Presuming that a nonverbal child has nothing to say is like presuming an adult without a car has nowhere to go.

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