Speech-Language Pathologist Assessment for a Speech Device

Date of AAC Evaluation	10/01/2023
Evaluating Speech-Language Pathologist	Susan Pathologist
Email Address of Evaluating Speech-Language Pathologist	fundingservices@ablenetinc.com

Demographic Information

Patient's Name	John Smith
Patient's Date of Birth	03/01/2019

Background Information

Medical history with summary of speech therapy intervention	John's mother reported he was a full-term baby born without complications. John walked alone at 15 months, used single words to communicate at approximately one year of age. He used an expressive vocabulary of >10 words and participated in joint attention routines such as pat-a-cake and peek-a-boo. At 18 months, John began to withdraw and no longer made eye contact or responded when spoken to. His expressive vocabulary shrank to two words (no and water, which he used only infrequently). He was diagnosed with Autism in August 2020. John has received speech therapy (ST) consistently since his diagnosis and has demonstrated significant progress toward the development of functional communication skills. He is now able to use alternative/augmentative communication to request preferred items/activities, makes consistent eye contact during shared routines, and in vocal play.
Current living environment	Home with family
Speech & Language ICD 10 Code & Description (Select all that apply)	F80.2 – Mixed Receptive-Expressive Language Disorder, F84.0 – Autistic Disorder

Current Communication Impairment and Limitation

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Current Communication Impairment and Limitation	Family and therapists have noted John's production of words such as ball, book, daddy, bed, mom, baby, and up. John does not consistently produce words/word approximates directed at communication partners (he will sometimes [<10% of opportunities] produce words intentionally during communication routines). He is able to use an SGD to consistently request items/activities either independently or when given cues. When AAC is unavailable, he will point/reach, lead caregivers to desired objects, or produce "happy" or "upset" vocalizations to indicate preference. John is able to consistently follow single-step directions.
Given the severity of the communication impairment as described above, does the patient require the use of a speech generating device (SGD) for functional communication?	Yes

Comprehensive Assessment

Does hearing status influence the patient's communication and/or the choice or use of a device?	No
Does the patient show adequate hearing abilities to effectively use a SGD?	Yes
Comments - Hearing Status	John completed a hearing screening in September 2022, hearing is within functional limits.
Does vision status influence the patient's communication and/or the choice or use of a device?	No
Does the patient show adequate vision abilities to effectively use a SGD?	Yes
Comments - Vision Status	John completed a vision assessment in September 2022, vision is within functional limits. There are no concerns with vision.
Functional Ambulation/Mobility	Independent Ambulation
Communication device to be used in the following positions:	Standing, Walking, or Seated, Patient has reliable and consistent motor response sufficient to operating a SGD

Comprehensive Assessment

Cognitive Status	John interacts with family, peers and school staff appropriately in social and academic settings. John demonstrates the necessary cognitive prerequisites for appropriate use of AAC/SGD (e.g. simple cause and effect, object permanence and procedural memory for the operation of the device). John is currently working on receptive language skills in sessions. He has demonstrated the ability to maintain his attention to tasks. He has demonstrated the ability to locate icons/vocabulary on an SGD, independently. John demonstrates ability to use a speaking device to express a sequence of information with limited prompting. John demonstrates the cognitive abilities to use an SGD, high tech device.
Does the patient demonstrate the necessary cognitive abilities (i.e. attention, memory and problem-solving) skills to learn to use a SGD to achieve functional communication goals?	Yes
Does the patient's linguistic performance indicate the necessary language skills required to functionally communicate using a SGD?	Yes
Expressive Language Skills: Is the use of an SGD necessary for the patient to be able to adequately express ideas, thoughts, feelings or emergent information?	Yes
Receptive Language Skills: Is the patient able to adequately understand and has the potential to respond in conversation with the assistance of a SGD?	Yes
Comments - Language Skills	John has severe speech and language impairment. However, John can respond to yes/no questions by shaking his head. John's intelligibility is 10% with unfamiliar communication partners and 20% with familiar communication partners. John can independently create sentences using the device, however he is unable to vocalize to communication partners. The prognosis for speech production is poor. Receptively, John is able to follow multi-step directions independently. He is able to understand more than he is able to express. John is very responsive when asked a question. He responds using a communication device. He does not often initiate communication with peers or school staff. John exhibits the receptive abilities to use the requested speech device.

Daily Communication Needs

Daily Communication Needs

Must be able to communicate about:	Personal Needs, Personal Information, Medical Needs, Social Interaction, School Tasks
Where will the device be used:	Home, School, Community, Day Program
With whom will the device be used to communicate with:	Family, Friends, Therapists, People in the Community
Comments - Daily Communication Needs	John needs to communicate basic wants and needs such as when he is hungry, sick, needs help, etc. His current communication methods do not allow John to meet his daily communication needs. John needs to communicate with family, friends, school staff, and caregivers in the home, community, and school settings. Daily communication activities for John include expressing wants and needs, express how he feels and how he interact with peers.

Other Communication Methods Attempted

Method 1	Communication Boards
Reason this method does not meet communication needs	This method is too cumbersome for John and family to have constant, quick access to necessary vocab. John is ready for a faster and more robust system to meet his needs.
Method 2	Sign Language
Reason this method does not meet communication needs	John has tried sign language throughout his time in speech therapy. He is able to use sign to answer yes/no questions. These are the only signs that John is able to use in communication. Through attempts to teach more signs, it has been unsuccessful and John has not retained any new signs.

Device Recommendation

Device Model	QuickTalker Freestyle

Device Recommendation

Prognosis Using the Above Outlined Device	John has demonstrated significant progress toward the acquisition of functional communication skills through use of an SGD. However, the device he has been trained on does not belong to him/his family and he is unable to use it outside of speech therapy sessions. The implementation of an SGD that he is able to use 24/7 would significantly improve his ability to communicate functional information and basic wants/needs across communication contexts. A QuickTalker Freestyle fulfills John's need for a device which travels with him across home, educational, and community contexts, allows for vocabulary growth as his language skills improve, and ease of access. John's prognosis for improved communicative function with continued skilled treatment and generalization of SGD is good-toexcellent based on his cognitive capacity, improving pragmatic skills, and prior success with AAC. Implementation of an SGD across communication contexts (home/social, school, therapy) improves the likelihood of his ability to develop functional communication skills and relate functional information will a wide variety of communication partners.
Why are you recommending an out-of-network proider for your client's speech generating device?	I am recommending the QuickTalker Freestyle over other in-network options due to AbleNet's offering of warranty and flexibility. The QuickTalker Freestyle has no restrictions on the number of warranty claims associated with their 5-year warranty program. This warranty program will provide John and his family with unparalleled peace of mind knowing that if the device breaks, they will get a replacement or repair without any barriers. As John grows, they will also have the option to change his speech application to meet his needs without any cost. An iOS based device, such as the QuickTalker Freestyle, is medically necessary and being recommended due to the John and his family's familiarity with iOS based devices and their lighter weight and portability. It is my clinical determination that a QuickTalker Freestyle is the most appropriate and cost effective device for John.

The QuickTalker Freestyle meets all medical necessity requirements for my client's communication needs while being the most cost-effective device compared to all other alternatives. The QuickTalker Freestyle comes with a 5-year warranty, while all other speech-generating device manufacturers only offer a 1-year, 2-year, or 3-year warranty. Additionally, the device comes with an exclusive technical support program, ableCARE. The ableCARE program allows my client and their family members to access AbleNet's technical staff quickly and easily to ensure the device is not only operable but successfully used so that we meet or exceed the goals outlined in my speech assessment.

The QuickTalker Freestyle (HCPCS code E2510) is a dedicated speech-generating device that, when configured by our technology team, only allows the user to use the device for communication purposes, making it a dedicated device. This dedicated speech-generating device has been recommended by a licensed speech-language pathologist and the client's prescribing physician.

Goals

Goal 1	Yes/no goal

Goals

1 - Yes/ no goal	John will respond to preferential yes/no questions, with 85% accuracy over 3 sessions, using SGD.
Goal 2	Language functions
2 - Language functions	John will navigate pages appropriately to request, protest, or respond to a question 8/10 times given language stimulation and fading models.
Goal 3	Daily and medical needs goals
3 - Daily and medical needs goals	John will use his QuickTalker Freestyle to effectively express his daily and medical needs with 80% accuracy within 1 month.
Treatment Plan	John's primary caregivers have shown great support and the need for him to have a dedicated device of his own. John will attend speech therapy 1x/week for the next 3 months to ensure his goals as stated above are met. Not only will the family and myself be there to support John with a funded device, but the ableCARE Product Success Team at AbleNet will be there to offer endless support, troubleshoot issues, help with updates and any other problems that arise.

Speech-Language Pathologist Signature

The recipient of the QuickTalker Freestyle will be the sole user of the SGD.

A copy of this evaluation and recommendation has been forwarded to the member's treating provider for review and completion of DME order.

I am not an employee of, nor do I have, a financial relationship with AbleNet Inc., the QuickTalker Freestyle speech device supplier.

Date	10/05/2023
Name	Susan Pathologist
Credentials	CCC-SLP
Signature	*Example*