



Options: A/AC When Insurance Denies Coverage — BLOG POST

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Within the last year in returning to a SNF setting from a home health setting, one of my biggest surprises in this transition was the news of denial of A/AC coverage by many payor sources, solely because patients are residing in the long-term care setting.

While not all payor sources are opting for this decision, many are.

My first thought was: “This cannot be accurate!” Communication is a human right, as defined in our Code of Ethics by ASHA. How can insurance deny this right, just because of location of residence? As one of a body of professionals, I need to be advocating for coverage. How to do this more effectively needs to be explored, because not allowing a person access to technology when it is indicated for basic communication, to me, is a human’s right issue.

I desire to be discussing this and crying out from the rooftops that coverage needs to occur for all.

In advocating for funding for all in insurance coverage — regardless of location, and coming up with a plan of action for relaying that as a profession, this is an important topic. Wheelchairs are a necessity; insurance companies provide this equipment, no matter the location. Just how necessary are the technology that allows for the practical and functional mobility that is communication?

And, as we consider this, day after day, there are those who are without a voice in a capacity that is meeting their needs. To many, is no access.

In addition, the big question is: “What do we do now to meet the needs of our patients?”

We have to look outside of the box of payor sources and pursue what is in the marketplace, and through non-traditional means. What are the available choices? This resource list is not exhaustive, but a starting place on the journey to find solutions to this problem. Listed are the most affordable options to fund technology for the SNF patients whose A/AC technology need is not covered by a payor source, or for any individual for which augmentative/assistive communication is indicated but for any reason, is not available via traditional funding.

Options for non-traditional funding for A/AC:

- [Lingraphica’s “Compassion Program.”](#) Lingraphica has a sliding-scale program for individuals to pay out-of-pocket for a device, based on current income status details. The bottom of this scale is currently \$500, and includes all but accessories. There is an application process that has to be pursued prior to knowing what the dollar amount will be for the individual. In the process of evaluation, a trial device can be obtained for a 3-week period and a company consultant is available for assistance in the trial-period process. Lingraphica helps to customize the trial device prior to shipping to the SLP at the facility, and



the SLP can upload to the cloud the updated version of the customization following the trial so that if a device is purchased, the brand-new device can have the customization downloaded prior to shipping to the patient (all of the work done to individualize it during the trial is not lost). Not all of the \$500 is required up front for purchase, as there is an option for payment plans. I have recently

- Alexicom Tech's App options. Downloading these apps to a new or used iPad or tablet can be a great option, especially if a device is readily available and doesn't need to be purchased.
 - "Alexicom AAC" App. This is light-tech app is only \$0.99 (one-time purchase) on iOS and currently free on android devices. This app includes over 50 editable, pre-made pages for immediate use. It also has the capacity for recordable voices, unlimited page creation, has a text-to-speech option with keyboard, has word-prediction/frequency tracking with the keyboard, and has the option for data collection with the goal to analyze use of the system.
 - Alexicom Tech "Elements" Core 280, a text-based app (\$9.99 app, one-time purchase). It has 280 core words and has the option to customize and add pages. All the words are color coded with Fitzgerald Key. It's focus is main vocabulary and the option to build on it with the keyboard by clicking on the text box (includes word prediction and vocabulary tracking for commonly-used words).
 - Alexicom Tech "Elements" Adult Home, \$19.99, one-time purchase. This app includes age-appropriate real images and utilizes vocabulary that is focused on the adult population. It includes over 100 pre-made pages.
 - Alexicom Tech has several other \$0.99 apps in the "Elements" line for ER, ICU, Rehab settings for one-time purchases.
 - "Alexicom Tech Pro" is subscription service that provides the following: instant backup of customization, syncing to multiple devices, several page set options to choose from, publishing ability on any device through the "Alexicom AAC" app, remote editing, options for other languages (Spanish or German), and support from A/AC specialists through support@alexicomtech.com. SLPs can [receive access to peruse subscription](#) options prior to purchase. This service is 9.99/month or if paid in full for the year at \$96, translates to \$7.99/month.

Alexicom Tech has availability for older models for iPad and tablets, which is an option for those who have older devices at hand and desire an inexpensive way to gain access to A/AC. On iOS, Alexicom Tech has versions available for older iPads at iOS 5 and 6, available on iTunes. Alexicom Tech iOS apps also have the capability to be used all of the way back to first generation technology, just without camera access. For android devices, Alexicom Tech apps can be utilized on Android 2.2 technology.



- [Tobii Dynavox Snap App](#) (\$49), a one-time purchase. This is an iOS app, for iPads only. It was created specifically for persons with aphasia and is customizable. SLPs, if they contact Tobii Dynavox, can obtain a code in order to have access to the app complimentary so to trial the app with patients prior to their purchase. At the time of this blog post publishing, this app is compatible with iOS 11 devices or higher, such as:
 - 12.9-inch iPad Pro (2nd generation)
 - 12.9-inch iPad Pro (1st generation)
 - iPad Pro (10.5-inch)
 - iPad Pro (9.7-inch)
 - iPad Air 2
 - iPad Air
 - iPad (6th generation)
 - iPad (5th generation)
 - iPad mini 4
 - iPad mini 3
 - iPad mini 2

- Seeking funding through organizations. Local support groups all the way to national groups have opportunities for accessing technology, in such capacities as:
 - Applying for grants;
 - Requesting loaner technology out of “loaner closets”;
 - Connecting with caregivers who may donate technology that can be customized to a new user; and,
 - Some organizations that may have available information for alternative funding routes include:
 - [Team Gleason](#). Technology, assistance and more can be found at this organization which is dedicated to those who are living with ALS.
 - [ALS Association](#). Linking up with the local ALS chapter may mean access to equipment. As well, There is a grant process called the “[ALS Foundation for Life.](#)”
 - [Bridging Voice](#). This organization provides speech and other services to those with neurodegenerative conditions which require technology interventions. In the past, they have also made referrals to organizations that can assist with funding, if possible.
 - [The Stroke Recovery Foundation’s “Stroke Victor Recovery Fund,”](#) which allows patients with diagnoses of CVAs apply for individualized treatment and case management following insurance coverage terming.
 - [Easter Seals](#). Contacting this charity may result in assistance in funding, or other assistance.
 - [National Multiple Sclerosis Society](#)
 - [United Cerebral Palsy](#)



- [State Assistive Technology Assistance Programs](#). Each state in the US has an office that is dedicated to providing loaner devices, resources and other services, funded by the Assistive Technology Act, which was put into place in 1997. Funding for devices in the form of loans or other venues may be available. To find your particular state's website, [The Association of Assistive Technology Act Programs \(ATAP\)](#) has a search page.

As we voice our displeasure with policies that deny access to our patients, we still have to face the reality that there are patients, right now, on our caseloads in long-term care facilities whose payor sources are saying "no." All the while, there are patients in our facilities who do not have the current tools to be able to do the same.

So, let's do what we can, altogether, to make that change.

Wilson Nice, SLP, is the owner of [Nice Speech Lady](#), a platform for medical SLPs to have free access to practical clinical resources. Nice also works full-time as a medical SLP in New Mexico.

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