Device Trial Checklist and Decision

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| 1. Trial plan outlined | |
| * *Trial process overview* * *AAC apps overview* * *Insurance denial confirmed* * *App and iPad identified* * *Home/school plans created* | |
| 1. Data collection forms completed | | |
| * *Baseline form completed* * *Student data and anecdotal information recorded across settings* * Endline form completed (at end) | |

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| 1. Medicaid Evaluation Form:  * *Demographics* * *“present levels” content each area* * *Trial process* * *Decision process* * *Trial results* |
| 1. Medicaid Prescription and Plan  * *Selected device, app, accessories and their sources* * *Treatment, training, care and safety plans* * *Physician and family signatures* |
| 1. Submit All forms to VT Medicaid Vendor |

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| End of Trial Team Decision: |
| Team Decision: Approve current hardware and software / Continue current trial / Different hardware or software / Discontinue trial process – no AAC / Do not know |
| Final Documentation Submission: If the trial is successful trial, the SLP will submit the following forms to the Medicaid vendor (device company or Herron and Smith)   * ***VT Medicaid Evaluation Report*** * ***Baseline Endline*** *Form* * ***VT Agreement*** *form checked off and signed by SLP, family* * ***VT Prescription*** *with equipment list signed by SLP, physician, family* * ***VT Medical Necessity Form*** *completed and signed by physician* * *Additional docs for device company if applicable* |