

MEDICAL POLICY

POLICY TITLE	SPEECH GENERATING DEVICES
POLICY NUMBER	MP-6.032

Original Issue Date (Created):	July 1, 2002
Most Recent Review Date (Revised):	September 24, 2013
Effective Date:	November 1, 2013

I. POLICY

Speech generating devices (SGD), including software and software updates that enable a laptop computer, desktop computer or PDA to function as an SGD, may be considered **medically necessary** when **all** of the following criteria are met:

1. There is clinical documentation that the patient has had a recent formal evaluation of their cognitive and communication abilities by a speech language pathologist (SLP) and the evaluation has been reviewed and approved by the treating/ordering physician. The formal, written evaluation must include at a minimum, the following elements:
 - Current communication impairment, including the type, severity, language skills, cognitive ability, and anticipated course of the impairment;
 - An assessment of whether the individual's daily communication needs could be met using other natural modes of communication;
 - A description of the functional communication goals expected to be achieved and treatment options;
 - Rationale for selection of a specific device;
 - A treatment plan, including a documented training schedule;
 - An assessment of the individual cognitive and physical ability to effectively use the selected device and any accessories to communicate;
 - For subsequent upgrade to a previously issued SGD, information regarding the functional benefit to the patient of the upgrade compared to the initially provided SGD; and
2. The patient's medical condition is one resulting in a severe expressive speech impairment; and
3. The patient's speaking needs cannot be met using natural communication methods; and
4. Other forms of treatment have been considered and ruled out; and
5. The patient's ability to communicate will benefit from the device ordered.

SGD accessories may be considered **medically necessary** if the coverage criteria for the base device are met and the medical necessity for each accessory is clearly documented in

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the formal written evaluation by the speech language pathologist (SLP). Accessories include, but are not limited to:

- Access devices that enable selection of letters, words, or symbols via direct or indirect selection techniques. Examples of access devices include, but are not limited to, optical head pointers, joysticks, switches, wheelchair integration devices and SGD scanning devices;
- Replacement accessories such as batteries, battery chargers and AC adapters are included;
- Mounting systems, which are devices necessary to place the SGD device, switches, and other access devices within the reach of the patient.

Speech pathology services pertaining to patient evaluation and training in use of a medically necessary device may also be considered **medically necessary**.

Cross-reference

MP-8.002 Speech Therapy (Outpatient)

II. PRODUCT VARIATIONS

[N] = No product variation, policy applies as stated

[Y] = Standard product coverage varies from application of this policy, see below

[N] Capital Cares 4 Kids

[N] Indemnity

[N] PPO

[N] SpecialCare

[N] HMO

[N] POS

[N] SeniorBlue PPO

[Y] FEP PPO*

[N] SeniorBlue HMO

*Refer to the contract as this product has a benefit limitation.

III. DESCRIPTION/BACKGROUND

Speech generating devices (SGD), also known as augmentative and alternative communication (AAC) devices, are external speech aids that provide some functions of speech to the individual with severe speech impairment. Individuals with severe speech impairment rely on standard techniques such as facial expressions, gestures, sign language, drawing, and writing for communication. Low technology non-electronic communication

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devices include boards that use words, letters, and symbols, mini boards, and conversation books. High technology devices are electronic and usually computer based. These latter devices convert the patient's entries on a keyboard or other methods of input such as a blink of an eye, wrinkle of an eyebrow or a puff of air into electronic speech.

There are many different devices with a variety of capabilities available. Selection of the communication method usually involves an evaluation by a speech-language pathologist (SLP). A team of professionals works with the patient and family so that caregivers understand how to use the system. Speech generating devices create either digitized speech or synthesized speech. Digitized speech devices use pre-recorded words that a user plays back on command. Synthesized speech translates a user's input into device-generated speech utilizing algorithms, which represent linguistic rules. Synthesized speech devices create individualized messages related to input from the keyboard, touch screen, or other display containing letters or symbols. Speech generating software programs often utilize a desk or laptop computer, or a personal digital assistant (PDA) to function as an SGD.

Accessories for speech-generating devices include, but are not limited to, access devices that enable selection of letters, words, or symbols via direct or indirect selection techniques. Examples of access devices include, but are not limited to, optical head pointers, joysticks, switches, wheelchair integration devices and SGD scanning devices. In addition, accessories such as batteries, battery chargers and AC adapters are necessary for operation of the SGD.

IV. DEFINITIONS

DURABLE MEDICAL EQUIPMENT (DME)-consists of items which are primarily and customarily used to serve a medical purpose; are not useful to a person in the absence of illness or injury; are ordered by a physician; are appropriate for use in the home; are reusable; and can stand repeated use.

V. BENEFIT VARIATIONS

The existence of this medical policy does not mean that this service is a covered benefit under the member's contract. Benefit determinations should be based in all cases on the applicable contract language. Medical policies do not constitute a description of benefits. A member's individual or group customer benefits govern which services are covered, which are excluded, and which are subject to benefit limits and which require preauthorization. Members and providers should consult the member's benefit information or contact Capital for benefit information.

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VI. DISCLAIMER

Capital's medical policies are developed to assist in administering a member's benefits, do not constitute medical advice and are subject to change. Treating providers are solely responsible for medical advice and treatment of members. Members should discuss any medical policy related to their coverage or condition with their provider and consult their benefit information to determine if the service is covered. If there is a discrepancy between this medical policy and a member's benefit information, the benefit information will govern. Capital considers the information contained in this medical policy to be proprietary and it may only be disseminated as permitted by law.

VII. REFERENCES

- Centers for Medicare and Medicaid Services (CMS) National Coverage Determination (NCD) 50.1. Speech Generating Devices. Effective 01/01/01. CMS [Website]: http://www.cms.hhs.gov/mcd/viewncd.asp?ncd_id=50.1&ncd_version=1&basket=ncd%3A50%2E1%3A1%3ASpeech+Generating+Devices Accessed July 19, 2013
- Durable Medical Equipment Regional Carrier (DME MAC A) Region A Local Coverage Determination (LCD) L11534. Speech Generating Devices. Effective 07/01/2007. [Website]: http://www.medicarenhic.com/dme/medical_review/mr_lcds/mr_lcd_current/L11534_2009-12-01_PA_2009-12.pdf Accessed July 19, 2013..
- Happ MB, Roesch TK, Kagan SH. Patient communication following head and neck cancer surgery: a pilot study using electronic speech-generating devices. *Oncol Nurse Forum* 2005; 32 (6): 1179-87.
- Novitas Solutions. Local Coverage Determination (LCD) L27531. Speech Language Pathology (SLP) Services: Communication Disorders.Effective Cardiac Rehabilitation Program Services. Effective 04/02/12.[Website]: <https://www.novitas-solutions.com/policy/mac-ab/l27531-r11.html> Accessed July 19, 2013.

VIII. CODING INFORMATION

Note: This list of codes may not be all-inclusive, and codes are subject to change at any time. The identification of a code in this section does not denote coverage as coverage is determined by the terms of member benefit information. In addition, not all covered services are eligible for separate reimbursement.

Covered when medically necessary:

CPT Codes®							
92607	92608	92609					

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HCPCS Code	Description
E2500	SPEECH GENERATING DEVICE, DIGITIZED SPEECH, USING PRE-RECORDED MESSAGES, LESS THAN OR EQUAL TO 8 MINUTES RECORDING TIME
E2502	SPCH GEN DEVC DIGTIZD>8 MINS <= 20 MINS REC TIME
E2504	SPCH GEN DEVC DIGTIZD>20 MINS<=40 MINS REC TIME
E2506	SPEECH GENERATING DEVICE, DIGITIZED SPEECH, USING PRE-RECORDED MESSAGES, GREATER THAN 40 MINUTES RECORDING TIME
E2508	SPCH GEN DEVC SYNTHSIZD REQ MESS SPELL & CNTCT
E2510	SPCH GEN DEVC SYNTHESIZD MX METH MESS&DEVC ACCSS
E2511	SPEECH GENERATING SOFTWARE PROGRAM, FOR PERSONAL COMPUTER OR PERSONAL DIGITAL ASSISTANT
E2512	ACCESSORY FOR SPEECH GENERATING DEVICE, MOUNTING SYSTEM
E2599	ACCESSORY FOR SPEECH GENERATING DEVICE, NOT OTHERWISE CLASSIFIED
V5336	REPAIR/MODIFICATION OF AUGMENTATIVE COMMUNICATIVE SYSTEM OR DEVICE (EXCLUDES ADAPTIVE HEARING AID)

Specific diagnosis coding does not apply to this policy.

IX. POLICY HISTORY

MP 6.032	CAC 9/30/03
	CAC 10/26/04
	CAC 11/29/05
	CAC 4/25/06
	CAC 2/27/07
	CAC 3/25/08 Consensus
	CAC 3/31/09 Consensus
	CAC 11/24/09 Minor Revision- FEP variation added.

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	CAC 11/30/10 Consensus
	CAC 11/22/11 Consensus. Deleted benefit information
	7/26/13 Admin coding review complete--rsb
	CAC 9/24/13 Consensus. No change to policy statements. References reviewed and updated.

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