

Sample Appeal Letter: Client Already Has Device from PRC or Other Vendor

(DATE)

(INSURANCE NAME)

(INSURANCE ADDRESS)

(INSURANCE CITY, STATE ZIP)

RE: (FULL NAME OF CLIENT)

DOB: (DATE OF BIRTH)

To whom it may concern:

I recently submitted a request for purchase of the (DEVICE NAME) for my client, (CLIENT'S NAME), who has a medical diagnosis of (DIAGNOSIS) and a speech-language diagnosis of (DIAGNOSIS). These diagnoses have left (HIM/HER) functionally nonverbal and unable to adequately express (HIS/HER) medical needs in an effective way without the use of Augmentative-Alternative Communication (AAC). As outlined in the AAC Evaluation Reported dated (DATE OF YOUR ORIGINAL REPORT), it is medically necessary for (CLIENT) to have access to a speech-generating device (SGD) so that (HIS/HER) medical needs can be expressed and met. (DOCTOR'S NAME) was in agreement with my recommendation for purchase of the (DEVICE NAME) as the most cost-effective solution for meeting (CLIENT'S) current medical communication needs.

On (DATE), I received notice that the E2510 (DEVICE NAME) was denied due to the following explanation:

*(*INSERT THE WORDING TO MATCH WHAT WAS SAID IN YOUR DENIAL DOCUMENT)*

Presently, (CLIENT) does have access to a (DEVICE NAME) that is in working order. However, contrary to your denial reason, it is **not** currently meeting HIS/HER medical communication needs for each of the following reasons: (*DISCUSS ANY OF THE FOLLOWING THAT ARE APPLICABLE IN YOUR CLIENT'S CASE)

- Vocabulary Options available on his/her current SGD compared to the one you're recommending for purchase. Do they have access to core vocabulary in their current SGD? Do they have access to the specific vocabulary file you're recommending (i.e. LAMP: Words for Life or Unity 60-sequenced or CoreScanner)?
- Portability of the system – how much does the current SGD weigh compared to the new one (see <https://www.prentrom.com/search?q=weight&sa=Search>)? Does it have a carrying handle? Consider having the O.T. or P.T. insert a statement here verifying that the size/weight of the current SGD prohibits the client from independently accessing it throughout the day. Emphasize the fact that if the client cannot independently access his/her SGD, it is NOT meeting medical communication needs.
- Difference in screen size or screen resolution (if the person has vision considerations). See <https://www.prentrom.com/search?q=dimensions&submit=Search>.
- Difference in access method (if applicable) – for example, the current SGD doesn't accommodate eyegaze and the client's medical condition is such that he/she now must access his/her SGD via eyegaze technology.
- Battery life – even with a new battery, how long would the current SGD last compared with the one you're recommending?
- Access to training/support from the vendor in operations and programming of the SGD to make it as functional as possible for meeting the client's medical needs. If you've struggled to get training/support with the manufacturer of the current SGD, resulting in it not being as functional as possible and not meeting the client's medical needs, you

might discuss the value in having readily available access to your local PRC Consultant who will ensure the client's team is trained and the device is setup properly to enhance implementation and overall success of use.

If further information is needed to substantiate this request, please contact me. Thank you for your time.

Sincerely,

(YOUR NAME AND CREDENTIALS)

(TITLE)

(EMPLOYER NAME)

(EMPLOYER ADDRESS)

(EMPLOYER CITY, STATE, ZIP)

(PHONE)

(FAX)

(EMAIL)