

Addendum to AAC Evaluation Report

Client:	Date of Birth:
Medical and Speech-Language Diagnoses:	
ICD Codes:	Date of Addendum:

BACKGROUND:

(IN THIS SECTION, EXPLAIN THAT YOU RECENTLY SUBMITTED A REQUEST FOR PURCHASE OF -NAME OF DEVICE- FOR -NAME OF CLIENT-. YOU MAY WISH TO MAKE REFERENCE TO THE REPORT DATE – THEY WILL HAVE IT IN THEIR FILES. YOU SHOULD MENTION THAT THE DEVICE WAS DEEMED MEDICALLY NECESSARY AND WAS FUNDED/PROVIDED TO THE CLIENT ON DATE.)

REASON FOR THIS ADDENDUM:

(IN THIS SECTION, EXPLAIN AT THE TIME THE ORIGINAL AAC EVALUATION REPORT WAS WRITTEN, THE CLIENT DID NOT REQUIRE EYE TRACKING TO ACCESS HIS/HER SGD. HOWEVER, AS TIME HAS PROGRESSED AND HIS/HER CONDITION HAS DETERIORATED, THERE IS NOW MEDICAL JUSTIFICATION FOR EYE TRACKING BECAUSE CLIENT IS NO LONGER ABLE TO ACCESS HIS/HER SGD VIA TOUCH ACCESS.)

RECOMMENDATION:

(IN THIS SECTION, YOU ARE GOING TO REITERATE YOUR RECOMMENDATION FOR PURCHASE OF EYE TRACKING.)
As explained in the AAC Evaluation Report, the (DEVICE NAME) was found to be the most cost-effective SGD to meet (CLIENT's) medical communication needs. The DEVICE was funded/provided to the client on DATE. However, at this time, due to disease progression and change in medical status, CLIENT now requires eye tracking technology to continue accessing the SGD. It is recommended that the E2599 Look eye tracking accessory be purchased for (CLIENT) so that he/she can continue to use the SGD to meet medical communication needs.

PHYSICIAN INVOLVEMENT STATEMENT:

This addendum was forwarded to the treating physician, (PHYSICIAN'S NAME, ADDRESS AND PHONE NUMBER), on (DATE). The physician has completed a Certificate of Medical Necessity for the recommended equipment.

STATEMENT OF INDEPENDENCE AND SPEECH-LANGUAGE PATHOLOGIST'S SIGNATURE:

The Speech-Language Pathologist performing this evaluation is not an employee of and does not have a financial relationship with the supplier of any SGD.

(YOUR NAME), M.A., CCC-SLP
Speech-Language Pathologist
ASHA Certificate Number: (TYPE THE NUMBER HERE)

Speech-Language Pathologist's Signature

Date