



FUNDING

Your PRC-Salttillo Funding Source

Read Me First – Indiana Medicaid & Managed Care Organizations

Prescription Requirements

- Medicaid requires that the client have a face-to-face examination with their physician no more than 6 months prior to the written order/certificate of medical necessity (CMN) for the speech generating device (SGD).
- The physician must document that the client was evaluated and/or treated for a condition that supports the SGD. This documentation (chart notes or office visit notes) must be provided along with the written order/CMN for the SGD.

Augmentative Communication System Selection – Medicaid Only

Section B of this form should be completed by a Speech Language Pathologist (SLP) and signed by both the SLP and Physician for all clients who are eligible for IN Medicaid.

Prior Authorization Request Form

This form must be signed and dated by the Physician for all clients eligible for IN Medicaid as well as any Managed Care Organizations.

PRC-Salttillo
1022 Heyl Road
Wooster, OH 44691

Phone: 800.268.5224
Fax: 330.202.5840
Email: funding@prc-salttillo.com