Effective Communication Enhances Community Inclusion: A Nationwide Examination of Medicaid Coverage of iPads/Tablets

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Background

Established by Title XIX of the Social Security Act in 1965, Medicaid is a federal and state funded program that provides individuals with low income or those who have disabilities with rehabilitation and other healthcare services. Included in this coverage is financial support for assistive technology (AT) and durable medical equipment (DME). To varying extents, state Medicaid agencies fund augmentative and alternative communication devices (AAC) to reduce or ameliorate significant communication challenges. Speech-generating devices (SGD) provide individuals who have difficulty with language comprehension and/or expression a means to learn and produce language.

In order for any type of assistive technology (AT) to be approved by Medicaid, including an SGD, the request for coverage must establish the equipment as "medically necessary," meaning that it is needed to prevent and/or ameliorate a condition that is impacting the individual's meaningful participation in daily activities. If deemed medically necessary and approved by Medicaid, most states require that the device be "dedicated," meaning that the product's sole purpose is to serve as a communication device. Most states do not cover "non-dedicated devices" because they can be used for other non-medical purposes, such as internet searching, utilizing social media, and playing games.
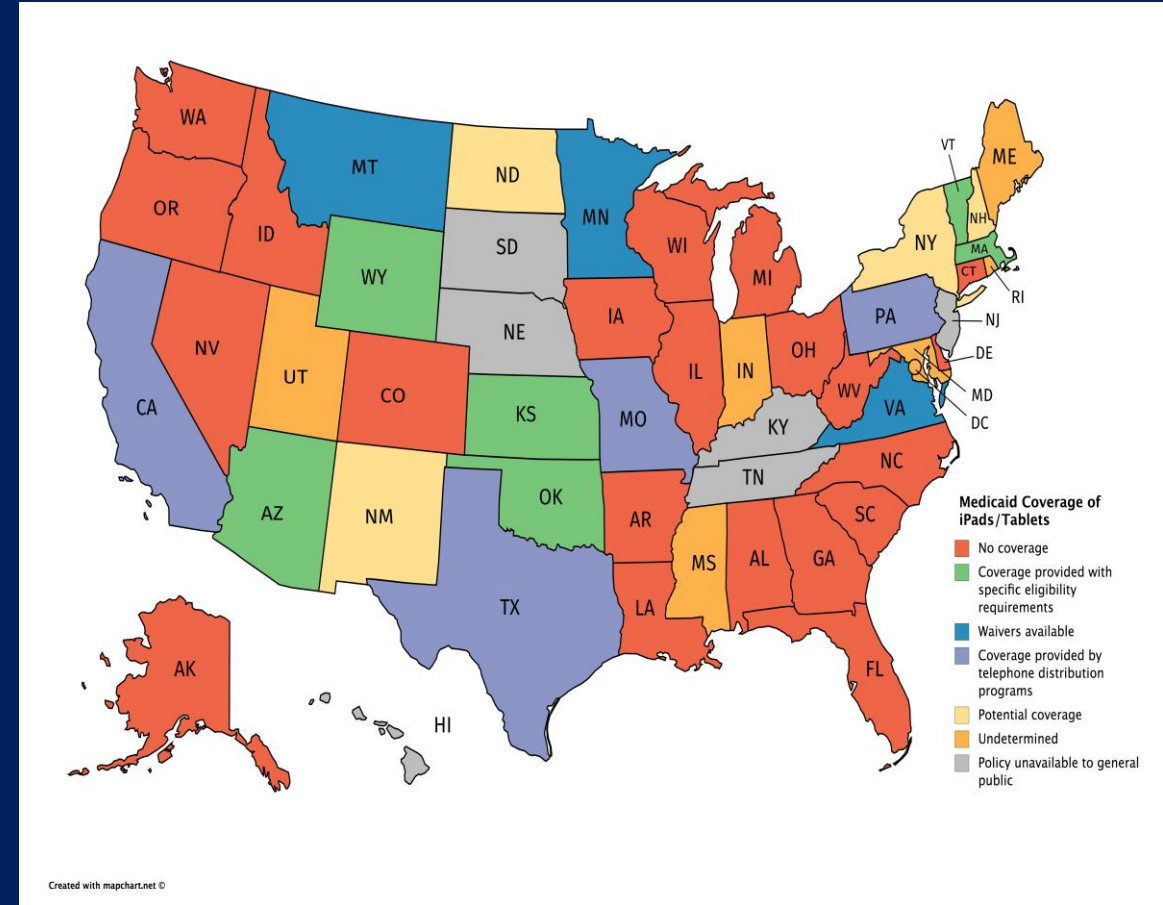
Objective/Motivation

While concern about prudent utilization of Medicaid funds is appropriate, restrictive AAC/SGD policies fail to recognize that the evolution of mainstream technology now makes AAC tools available at a much lower cost and with a broader array of features supporting productivity and community inclusion. Communication is essential for meaningful participation, and many individuals with complex communication needs do not have access to AAC tools that support their language development and self-expression. This project sought to identify the pros and cons of expanding Delaware's Medicaid AAC policy to cover less expensive, more socially accepted, and communicatively effective iPads/tablets. In addition to reviewing the literature supporting the communicative value of these "non-dedicated devices," an investigation of state Medicaid programs was conducted to determine the extent and scope of iPad/tablet coverage throughout the country.

Method

When investigating the pros and cons of iPad/tablet use as communication devices, a literature review was completed through the PubMed and PsycInfo databases. Additionally, a nationwide investigation of each state's current coverage of AAC devices (including the current coverage of iPads/tablets) was completed through internet searches, email exchanges with AT program directors, and phone conversations with state Medicaid offices.

Pros of iPad/tablet coverage	Cons of iPad/tablet coverage
Social acceptance	Diverting focus from communication goals to other purposes (e.g., entertainment)
Affordability	Lack of trained professionals as service providers
Portability	Limited alternative access methods
Availability	Fragility and unestablished repair support
User friendly (familiar devices)	Challenges with device ownership and use by other family members

Medicaid Coverage of iPads/Tablets
- No coverage
- Coverage provided with specific eligibility requirements
- Waivers available
- Coverage provided by telephone distribution programs
- Potential coverage
- Undetermined
- Policy unavailable to general public

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Results

While most states do not provide funding for iPads/tablets, those that do impose specific eligibility requirements related to circumstances and populations. This presentation is intended to promote dialogue among policy makers, professionals, and families in order to potentially expand the communication technology currently available to those with complex communication needs by including iPads/tablets as an assistive device option.

References

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