**Read Me First – Washington Medicaid**

**Prescription for Speech Language AAC Evaluation**
The physician must write a prescription for a Speech Language AAC Evaluation (can use form DSHS 13-794 or other written order from physician) and it must be dated before the evaluation is started.

**Speech Language Pathologist (SLP) Evaluation for Speech Generating Devices DSHS 15-310**
This required form must be completed and signed by a licensed Speech Language Pathologist. This form must be dated within ninety (90) days of the prescription for the Speech Language AAC Evaluation and less than sixty (60) days from the date PRC submits to WA Medicaid.

The physician must sign the Speech Language AAC Evaluation and the signature date must be on or after the evaluation date.

**Wheelchair Mounts**
If a wheelchair mount is requested, the SLP must include the make, model and serial number of the wheelchair in the Speech Language AAC Evaluation.

**Health and Recovery Services Administration Prescription Form – DSHS 13-794**
This required form must be completed for the requested equipment and signed by the Physician. It must be dated after the Speech Language AAC Evaluation is complete.