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| Assistive Technology Device | Any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve the functional capabilities of children with disabilities*.* The term does not include a medical device that is surgically implanted, including a cochlear implant, or the optimization (e.g., mapping), maintenance, or replacement of that device. |

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|  | **6.4.0 Assistive Technology** | |
| **Policy** | | **Reference/Related Documents** |
| MCMP00121_0000[1] | 6.4.1 An [assistive technology](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#assistive_technology_service) [assessment](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#assessment) must be completed before purchasing an [assistive technology device](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#assistive_technology_device). | [Policy Handbook 3.4.5](http://www.cms-kids.com/home/resources/es_policy/3-FirstContactsEvaluationAssessment/Comp3_Handbook.doc#P3_4_5)  [Policy Handbook 3.4.6](http://www.cms-kids.com/home/resources/es_policy/3-FirstContactsEvaluationAssessment/Comp3_Handbook.doc#P3_4_6)  [Policy Handbook 3.4.7](http://www.cms-kids.com/home/resources/es_policy/3-FirstContactsEvaluationAssessment/Comp3_Handbook.doc#P3_4_7)  [Policy Handbook 3.6.3](http://www.cms-kids.com/home/resources/es_policy/3-FirstContactsEvaluationAssessment/Comp3_Handbook.doc#P3_6_3) |
| MCMP00121_0000[1] | 6.4.2 The assistive technology assessment must be conducted by the [[IFSP team](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#IFSP_team)](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#IFSP_team). | [Operations Guide 6.4.2](http://www.cms-kids.com/home/resources/es_policy/6-ServicesSupports/Comp6_Guide.doc#G6_4_2) |
| MCMP00121_0000[1] | 6.4.3 The IFSP team must include at least one of the following for children needing an assistive technology assessment:   1. Audiologist 2. Local Assistive Technologist (LATS) 3. Occupational Therapist 4. Orientation and Mobility [Specialist](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#specialist) 5. Physical Therapist 6. Speech-Language Pathologist. |  |
| MCMP00121_0000[1] | 6.4.4 Recommendations from the [assistive technology](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#assistive_technology_service) [[assessment](http://www.floridahealth.gov/AlternateSites/CMS-Kids/home/resources/es_policy/6-ServicesSupports/Definitions.doc#assessment)](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#assessment) must include needed services, supports and devices determined necessary by the IFSP team to assist the child to achieve an identified [outcome](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#outcome). The [Assistive Technology Assessment form](http://www.cms-kids.com/home/resources/es_policy/Attachments/6_Assistive_Technology_Assessment.doc) may be used for this purpose. | [Operations Guide 6.4.4](http://www.cms-kids.com/home/resources/es_policy/6-ServicesSupports/Comp6_Guide.doc#G6_4_4) |
| MCMP00121_0000[1] | 6.4.5 All [assistive technology devices](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#assistive_technology_device) must be purchased through the local [CMS](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#Childrens_Medical_Services) area office unless:   1. The item is billable to Medicaid or private insurance, or 2. The item is less expensive if purchasing directly from the manufacturer.   [Local Early Steps](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#local_early_steps_office) will work with their respective local CMS area office to ensure effective cooperation and coordination. | [Operations Guide 6.4.5](http://www.cms-kids.com/home/resources/es_policy/6-ServicesSupports/Comp6_Guide.doc#G6_4_5)  [CMS Network Statewide Offices](http://www.cms-kids.com/home/contact/area_offices.html) |
| MCMP00121_0000[1] | 6.4.6  A. If a vendor accepts Medicaid, it is considered payment in full.  B. Equipment that is not covered by Medicaid’s [Durable Medical Equipment and Medical Supply Services Coverage and Limitations Handbook](http://portal.flmmis.com/FLPublic/provider_providersupport_providerhandbooks/tabid/42/default.aspx), which is purchased from an [assistive technology](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#assistive_technology_device) vendor, should be reimbursed at no more than 80% of the usual and customary charge to the general public.  C. If the vendor is unwilling to accept a reduced amount and bills the parents for the remaining difference for a child without Medicaid, the parents are not required to pay and Part C funds may be used to cover the remaining balance. | [Handbook Policy 1.8.6](http://www.cms-kids.com/home/resources/es_policy/1-GeneralSupervisonAdministration/Comp1_Handbook.doc#P1_8_6)  [Operations Guide 6.4.6](http://www.cms-kids.com/home/resources/es_policy/6-ServicesSupports/Comp6_Guide.doc#G6_4_6)  [Handbook Policy 1.4.5](http://www.cms-kids.com/home/resources/es_policy/1-GeneralSupervisonAdministration/Comp1_Handbook.doc#P1_4_5)  [Handbook Policy 1.4.10](http://www.cms-kids.com/home/resources/es_policy/1-GeneralSupervisonAdministration/Comp1_Handbook.doc#P1_4_10)  [Handbook Policy 1.8.7](http://www.cms-kids.com/home/resources/es_policy/1-GeneralSupervisonAdministration/Comp1_Handbook.doc#P1_8_7)  [Handbook Policy 1.5.5](http://www.cms-kids.com/home/resources/es_policy/1-GeneralSupervisonAdministration/Comp1_Handbook.doc#P1_5_5) |
| MCMP00121_0000[1] | 6.4.7 The [[IFSP team](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#IFSP_team)](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#IFSP_team) must follow Medicaid’s [durable medical equipment](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#durable_medical_equipment) requirements for Medicaid recipients when purchasing [assistive technology devices](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#assistive_technology_device). | [Durable Medical Equipment and Medical Supply Services Coverage and Limitations Handbook](http://mymedicaid-florida.com/) *[After clicking on this link, click on* Public Information for Providers*, then* Provider Support*, then* Provider Handbooks*, then on the* Coverage and Limitations Handbook *with this name]* |
| MCMP00121_0000[1] | 6.4.8 Any needed assistive technology device must be available to enable the child/[[family](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#family)](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#family) to benefit from other [[early intervention services](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#early_intervention_services)](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#early_intervention_services). |  |
| MCMP00121_0000[1] | 6.4.9 [[[LES](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#local_early_steps_office)](http://www.floridahealth.gov/AlternateSites/CMS-Kids/home/resources/es_policy/6-ServicesSupports/Definitions.doc#local_early_steps_office)](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#local_early_steps_office) that maintain lending libraries for assistive technology devices must develop local procedures that outline the rights and responsibilities of families regarding the lending and returning of such devices. | [Operations Guide 6.4.9](http://www.cms-kids.com/home/resources/es_policy/6-ServicesSupports/Comp6_Guide.doc#G6_4_9) |
|  | 6.4.10 [Assistive technology](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#assistive_technology_device) does not include a medical device that is surgically implanted, or the replacement of such device. | [IDEA §602(1)(B)](http://idea.ed.gov/explore/view/p/%2Croot%2Cstatute%2CI%2CA%2C602%2C1%2CB%2C)  [34 CFR §303.16(c)](http://ecfr.gpoaccess.gov/cgi/t/text/text-idx?c=ecfr;sid=d34e0ee365c1114e9c06283a751b1fad;rgn=div5;view=text;node=34%3A2.1.1.1.2;idno=34;cc=ecfr#34:2.1.1.1.2.1.102.16) |
| MCMP00121_0000[1] | 6.4.11 [LES](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#local_early_steps_office) must inform families who are temporarily provided assistive technology devices or who use the lending library, of their right to request that an assistive technology device be transferred with the child when transitioning to another agency if the child will profit from continued use of the device. | [Operations Guide 6.4.11](http://www.cms-kids.com/home/resources/es_policy/6-ServicesSupports/Comp6_Guide.doc#G6_4_11)  [1003.575, F.S.](http://www.leg.state.fl.us/statutes/index.cfm?mode=View%20Statutes&SubMenu=1&App_mode=Display_Statute&Search_String=1003.575&URL=1000-1099/1003/Sections/1003.575.html)  [Florida Interagency Agreement for the Transfer of Assistive Technology](http://info.fldoe.org/docushare/dsweb/Get/Document-3967/k12-06-131.pdf) |
| MCMP00121_0000[1] | 6.4.12 Families that decide to request the transfer of a loaned assistive technology device must do so in writing. | [Operations Guide 6.4.12](http://www.cms-kids.com/home/resources/es_policy/6-ServicesSupports/Comp6_Guide.doc#G6_4_12)  [1003.575, F.S.](http://www.leg.state.fl.us/statutes/index.cfm?mode=View%20Statutes&SubMenu=1&App_mode=Display_Statute&Search_String=1003.575&URL=1000-1099/1003/Sections/1003.575.html)  [Florida Interagency Agreement for the Transfer of Assistive Technology](http://info.fldoe.org/docushare/dsweb/Get/Document-3967/k12-06-131.pdf) |
| MCMP00121_0000[1] | 6.4.13 The [LES](http://www.cms-kids.com/home/resources/es_policy/Definitions.doc#local_early_steps_office) must acknowledge receipt of a written request to transfer a loaned assistive technology device and return a signed copy of the request to the family within 10 working days. | [Operations Guide 6.4.13](http://www.cms-kids.com/home/resources/es_policy/6-ServicesSupports/Comp6_Guide.doc#G6_4_13)  [1003.575, F.S.](http://www.leg.state.fl.us/statutes/index.cfm?mode=View%20Statutes&SubMenu=1&App_mode=Display_Statute&Search_String=1003.575&URL=1000-1099/1003/Sections/1003.575.html)  [Florida Interagency Agreement for the Transfer of Assistive Technology](http://info.fldoe.org/docushare/dsweb/Get/Document-3967/k12-06-131.pdf) |
| MCMP00121_0000[1] | 6.4.14 The LES must notify the family of approval or denial of the transfer of a loaned assistive technology device within 30 working days of the written request. | [Operations Guide 6.4.14](http://www.cms-kids.com/home/resources/es_policy/6-ServicesSupports/Comp6_Guide.doc#G6_4_14)  [1003.575, F.S.](http://www.leg.state.fl.us/statutes/index.cfm?mode=View%20Statutes&SubMenu=1&App_mode=Display_Statute&Search_String=1003.575&URL=1000-1099/1003/Sections/1003.575.html)  [Florida Interagency Agreement for the Transfer of Assistive Technology](http://info.fldoe.org/docushare/dsweb/Get/Document-3967/k12-06-131.pdf) |