

# Funding Your Assistive Technology

A Guide to Funding Resources in Pennsylvania



# About this Guide

One of the leading obstacles for obtaining assistive technology (AT) is finding the money to pay for it. This Guide has been compiled by Pennsylvania Assistive Technology Foundation (PATF) in an effort to provide Pennsylvanians with disabilities, older Pennsylvanians, and their families help in navigating the complex web of funding options for AT devices and services.

When using this Guide, please keep in mind that programs, policies, and procedures are constantly changing. We have made every attempt to be as current as possible, but we cannot guarantee the completeness of the information in this Guide.

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# Foreword

by Jeffry Parker, Former PATF Board Member

## A shoehorn, a hanger, and a clothesline.

Not what you typically think of as assistive technology (AT), but they worked for me. As a matter of fact, they made a world of difference. When I first came to Pittsburgh, I brought a 15-inch shoehorn with me. Of course, it was wonderful that I could use it to very easily slip my feet into my shoes from my wheelchair. But I found out that I had many other uses for that shoehorn!

I found that I could:

- Push the shoehorn up under a light switch on the wall that was a little too high and it was lights on!
- Press the too-far-to-reach buttons on a washing machine.
- Pry the cabinets over my sink open even though I couldn't get to their handles.
- Easily knock bags of chips and pretzels from the shelves down into my lap.

Nothing that had been jammed all the way to the back of the freezer or pushed into a corner could escape the wrath of my shoehorn. Nothing loosens the lid of a jar like tapping it with a 15-inch piece of brass either.

It worked so well at home that I started carrying it with me wherever I went. Elevator call buttons, no matter how high they were (before the ADA, of

course), could be easily lit up with a deftly placed stroke. I brandished this shoehorn like it was my own Star Wars light saber. It was a multitasking tool that rivaled Batman's utility belt, the gadgets from *Mission Impossible* or any jury-rigged device that MacGyver could have concocted.

I did find, though, that my shoehorn didn't measure up to the challenge posed by doors. That's where my old trusty wire coat hanger came in handy. I hooked one end of it around the doorknob and held onto it while I backed my wheelchair out of my apartment. My success was always verified by the good, loud slamming sound that followed me as I continued down the hallway.

And, there was the clothesline. I used a lengthy piece of it on my refrigerator door handle. I wrapped the other end around my hand, backed up the wheelchair until the line was taut, and with an adept snap of my wrist, a very challenging heavy refrigerator door helplessly submitted and opened wide. I just had to be careful I didn't pull the door off its hinges. With that shoehorn, nothing in my day was unreachable. With a hanger and a clothesline, nothing could keep me in or out. Were they assistive technology? You bet—but I hadn't seen anything yet.

Today, there's a whole universe of assistive technology just waiting to be discovered—and more importantly, just waiting to be used. These days I watch elevating wheelchairs float my friends right up to those light switches, elevator buttons, and pretzels on the shelf that I used to attack with my shoehorn. New assistive technology has its own way of making things reachable. I now have automatic doors which, years ago, you would only

find in grocery stores. Technology like this brings new meaning to the phrase, “When one door closes another one opens.”

I’ve had other successes with assistive technology bringing new meaning to the terms “reachable” and “opening doors,” too. After purchasing my van adapted with a ramp, my world really had a makeover. It was no longer just things that were

lock but I’ve got those covered, too, by just telling my voice-operated assistant Echo things like, “Turn off lamp,” just like on the commercials. With AT, my home sweet home is becoming my home smart home.

It always amazes me how far I’ve managed to upgrade my assistive technology. I’ve come a long way from sporting that shoehorn, hanger, and

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Today, there’s a whole universe of assistive technology just waiting to be discovered, and more importantly, just waiting to be used.

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becoming reachable in my life, but places were, too. Equally as dramatic was the experience of riding up the two-story wheelchair lift built inside my house for the first time. The lift door opened to a whole new world, a second floor I’d never seen.

For more than a year, I anxiously awaited the arrival of my new wheelchair Bluetooth joystick. Now, right from my wheelchair, I operate my digital tablet and my smart phone just by moving the same joystick I use to drive my chair. And, did I mention that my joystick also moonlights as a remote for both my televisions? Yes, if it isn’t marvelous enough to have a wheelchair that can speed everywhere at seven miles per hour, thanks to assistive technology I also use it for that virtual traveling we all do on our computers, phones, and TV’s. There are still many other appliances and things to turn on/off, open/close, regulate, and

clothesline. For me there is still so much more to learn about the assistive technology that’s out there and how it can make a world of difference. With so much more to take advantage of, the real challenge now is to know the right questions to ask and how to find the right answers.

Questions like:

- What exactly is assistive technology (AT)?
- How do you go about choosing what you need?
- How will you pay for the AT that you choose?

Reading this guide will help you find these answers—answers that we know will make all the difference in the world.

# About Pennsylvania Assistive Technology Foundation

PATF is a statewide, non-profit organization with a mission to provide education and financing opportunities, and advocate for people with disabilities and older Pennsylvanians, helping them acquire assistive technology devices and services that improve the quality of their lives. Originally funded by the federal Assistive Technology Act as Pennsylvania's Alternative Financing Program (AFP), PATF has also become a Community Development Financial Institution (CDFI).

## PATF Programs

### Information and Assistance

PATF staff provides information at no cost about assistive technology, funding sources, tips on how to access public and/or private resources, and referrals to recommended vendor companies.

### Financial Loan Programs

PATF has two loan programs that are designed to help individuals with disabilities, including older Pennsylvanians, and their families purchase the AT they want:

- 1. Mini-Loans:** The Mini-Loan is a small, credit-building loan for amounts that range from \$100 to \$2,000 at 0% interest and no fees. The repayment terms are as low as \$20/month. Repayments are conveyed to the three credit reporting bureaus so that borrowers have an opportunity to improve their creditworthiness.
- 2. Low-Interest Loans:** For devices that cost a little more, Low-Interest Loans can range from \$2,000 to \$60,000 with a fixed interest rate of 3.75% (as of 2019) with no fees. The repayment terms are based on the useful life of the AT device. If an applicant's overall credit does not meet conventional lending standards, PATF may guarantee a low-interest loan up to \$35,000.

### PATF helps Pennsylvanians of all:

- + AGES
- + INCOME LEVELS
- + DISABILITIES
- + HEALTH CONDITIONS

### Financial Education

PATF staff provides financial education coaching and counseling to applicants and borrowers in an effort to increase their understanding of money matters as well as improve their overall creditworthiness. PATF also provides financial education opportunities to the disability community through trainings and access to the first-of-its kind, comprehensive financial education book, *Cents and Sensibility: A Guide to Money Management*. This book is available in both English and Spanish. PATF has also created an educator's companion guide and an accessible website, [www.studymoney.us](http://www.studymoney.us).



PATF makes every effort to ensure that materials are accessible, including for non-English speakers.

## CHAPTER 1

# What Is Assistive Technology?

**Assistive technology (AT)** devices are items that help a person with a disability, or an older individual, do the things they want to do that would otherwise be difficult or impossible. Assistive technology can be anything from simple, hand-made devices to items that are highly complex and specially-designed.

Some examples of AT include:

- A chair with side and feet supports that is made of cardboard for a toddler who cannot sit independently.
- A vehicle that is adapted to include a lowered floor, ramp, tie-downs, and hand controls, making it possible for a wheelchair user to go out into the community, go to work, and visit friends.
- A computer or tablet that has specialized applications to help a person who has a learning disability communicate with others and complete schoolwork.
- A hearing aid that amplifies sound so a person who has a hearing loss can communicate more easily with friends, family, and colleagues.

Assistive technology services are those services that help individuals with disabilities choose the right AT device, design any needed modifications, learn how to use it, and then get it fixed if it breaks.

### How Can AT Devices and Services Help You and Why Are They So Important?

Assistive technology can help you live more

independently and safely. AT can make it possible for you to get out of your home and participate in the community more fully. Assistive technology benefits everyone from individual users to family members, employers, teachers, friends, and others who interact with users of AT. By improving accessibility, AT increases opportunities for participation—and that benefits us all.

### Assistive Technology: It's All About the Function

When thinking about the kinds of assistive technology devices and services that might help you, it's useful to start by determining the function: "What am I trying to do?" or "What do I need the technology to help me accomplish?" With your goal in mind, you can take a look at the options available to you and choose the technology that will fit your situation and support you best. In Chapter 3 we'll walk you through the process of choosing the technology that best fits your wants and needs.



## Federal Definition of Assistive Technology

**Assistive technology devices and services are more formally defined by the Assistive Technology Act of 1998, as amended in 2004, (PL 108 - 364). It states:**

"An assistive technology device is any item, piece of equipment, or product system, whether acquired commercially, modified, or customized, that is used to increase, maintain, or improve functional capabilities of individuals with disabilities. An assistive technology service is any service that directly assists an individual with a disability in the selection, acquisition, or use of an assistive technology device. Services include designing, fitting, customizing, adapting, maintaining, repairing, or replacing AT devices."

## Examples of Assistive Technology Devices

Because AT is all about helping you achieve your goals, it can be useful to categorize devices by function as you decide which AT would meet your needs and as you search for funding resources.

- **Communication:** Includes augmentative communication devices, Tobii eye-tracking computers, voice carry-over telephones, and tablets with specialized apps.
- **Daily Living and Personal Care:** Includes adapted eating utensils, toothbrushes with weighted handles, devices for dressing (e.g., button hooks), raised toilet seats, bidets, motion sensor faucets, and shower chairs.
- **Farm Equipment:** Includes steps onto a tractor, utility terrain vehicles, ergonomic seats, gardening stools, and skid steer platforms.
- **Hearing:** Includes hearing aids, smart phones, bed shakers, FM systems, visual alerting systems, and amplified or captioned phones.
- **Home Automation (also called Smart Home or Environmental Controls):** Includes “smart” electronic devices that can control or monitor lights, thermostats, fans, locks, appliances, entertainment systems, and medicine dispensers.
- **Home Modifications:** Includes barrier-free showers, elevators, widened doorways, lowered kitchen counters, grab bars, porch lifts, and ramps into and out of the home.
- **Mobility:** Includes manual and power wheelchairs, scooters, walkers, canes, seat lift chairs, and track lifts.
- **Recreation, Sports, and Leisure Equipment:** Includes all-terrain power wheelchairs, pulse oximeters, adapted bicycles, lightweight wheelchairs, mono-skis and bi-skis, adapted fishing equipment, switches for toys, and eye gaze technology for gaming.
- **Remembering:** Includes pill reminders and smart technology.
- **Vehicle Adaptations:** Includes hand controls, lowered floor and ramp, tie-downs, and power chair or scooter lift.
- **Vision:** Includes eyeglasses, magnifiers, braille watches, enlarged print on tablets or computers, and color identifiers.

## Examples of Assistive Technology Services

The list of examples of AT services below will give you an idea of the range available as you determine what you may want and need.

- Providing information about various services and equipment available.
- Consultations and specialized programs associated with delivering/providing the technology.
- Assessing your needs for modifications or for a piece of equipment based on your physical functioning capabilities.
- Recommending a modification, specific aid, or device to help meet your need.
- Ordering the equipment from a manufacturer, commercial vendor, or other source.
- Fitting the device, perhaps with some modifications, to you.
- Fabricating a custom piece of equipment or making a modification that meets your needs.
- Evaluating how well the proposed solution helps solve your original problem.
- Training on how to use the device.
- Maintaining and/or repairing the equipment.
- Follow-up appointments to see how well the solution is working, make changes, and address any needs for services, aids, or modifications.

## Assistive Technology or Durable Medical Equipment... What's the Difference?

Durable Medical Equipment (DME) is a medical term for devices. An AT device may be considered a piece of DME and would therefore be paid for by a health insurance policy if it meets these criteria:

- It is reasonable and necessary for the individual patient;
- It can withstand repeated use;
- It is primarily used to serve a medical purpose;
- It is not helpful to a person who does not have a disability, an illness or injury; and
- It is appropriate for use in the home.

Examples include wheelchairs, scooters, hospital beds, and Hoyer lifts.



## CHAPTER 2

# Choosing My Assistive Technology

Assistive technology can make it possible to learn, communicate, work, develop and maintain relationships, volunteer, and have autonomy. However, it's not always easy to figure out which device(s) will work best for you. This section will include some things to think about as you choose the AT that will best fit your wants and needs.

### Getting Started

No matter the assistive technology device, where it will be used, or the age of the AT user, these basic principles will help ensure that the device you choose will help you do what you want to do.

### Use a Team Approach

Technology assessment teams usually include people from different disciplines, and the makeup can vary to fit your abilities and needs. Traditionally, this team includes the AT user (you), a family member or friend, medical professionals, rehabilitation specialists, AT specialists, and occupational, physical, and/or speech therapists. Team members can also include people who are good at building or creating things, an artist, or an engineer—people who may look at the issues differently and can provide valuable insights.

### The User and His/Her Family are the Most Critical Members

When you, the AT user, are central to making the decision, the process is more likely to effectively promote your independence and ultimately meet

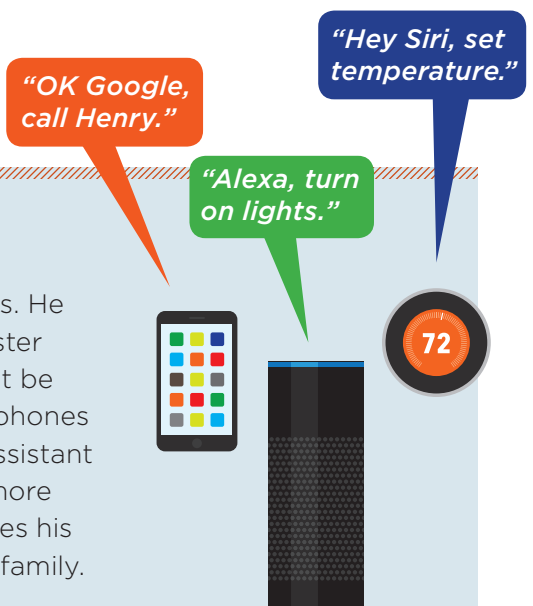
your wants and needs. Family is often critical, especially when the AT user is a child. Parents will provide the reinforcement, maintenance, training, and support for the technology the child will use. Keep in mind that while an appropriate technology solution may dramatically decrease your need for help, or even eliminate it all together, you may still need support from others when your equipment needs repairs or replacement.

### Remember: Focus on the Function

You aren't buying a device, you're solving a problem. Look at your objective first and work backwards from there: "What am I trying to do?" and then, "What technology or device would best support me in reaching this goal?" It's easy to be wooed by fancy marketing and flashy technology, but by focusing attention on the task you are trying to accomplish—the functional skill—you are more likely to find the device that most closely fits your wants and needs.

## AT for Independence

Michael has cerebral palsy and cannot independently use his hands. He wants to answer his phone and call his friends all by himself. His sister has an iPhone and uses Siri for hands-free calls. Thinking this might be the perfect solution to his problem, Michael tried out a few smart phones with voice-control capability, only to find that Android's Google Assistant (activated with "Ok Google") understands his voice better and is more sensitive to the way he pronounces words. Now he successfully uses his Android to independently make and receive calls with friends and family.



## It Can Be Simple

Even though there are thousands of technology gadgets available, the goal is usually to find the simplest, most efficient way to accomplish the task. While it is your choice which solution you prefer, bear in mind that keeping solutions simple often reduces maintenance and repair costs. Simple solutions can also be easier to use and, therefore, more likely to be used.

## Questions to Keep in Mind

There are many solutions to any given problem, and as a technology user, it is important to be an informed consumer. The following questions and considerations will help you determine how the technology will work for you, how the device will help you accomplish your goals, and whether it is a good fit for your wants, needs, and individual situation or circumstances.

### Personal Considerations

» **Does the device help me do what I want or need to do?** If it doesn't, then don't get it! Many people get technology that, from day one, does not work for them. By making sure the technology does what you want (or need) it to do in the first place, you can avoid wasting time and money. This is an example of why you, as the AT user, must be an integral member of the assessment team, and the team must not tell you what will work for you without your input. *As a user of technology and services, it is critical to speak up for yourself and your needs.*

» **Are there any limitations or risks?** While the benefits of a device are often obvious, it's easy to overlook the downsides. Some technology may help you do what you want to do, while also limiting other aspects of your life. Think carefully about your goals, weigh the pros and cons, and consider how your wants and needs may change in the future before making a decision. For example, you may invest in Apple smart home devices to play music and read recipes only to discover several months later that Google has a product you'd like to have, such as a smart microwave. Unfortunately, if the devices aren't compatible on the same hub, you'll need to choose between

spending the extra money to get the necessary connectors or doing without the new microwave.

» **Is the device comfortable to use? Does it work for you?** If it isn't comfortable or doesn't work for your situation, it will eventually be discarded. Better to speak up during the assessment process than wait until it's over and the device is in the closet, with you no closer to your goal.

» **May I have a trial period to see if the device works for me?** Don't get caught in the trap of thinking you have to purchase the device outright before you have an opportunity to try it in a real-world setting. You may be able to borrow the device from a friend. Or, it may be possible for you to borrow the device from the vendor. Perhaps there is a 30- to 60-day return policy



## Your AT Should Work for You

A speech and language therapist recommended that Josh use an augmentative and alternative communication (AAC) device such as a Smart/Scan Pro. But, Josh found the device difficult to program and too large—it doesn't fit in his pocket and he doesn't like the idea of hauling it around. He wants, instead, Proloquo2Go on a smart phone. With his mom's help, Josh advocated for his preference, and now he loves using his Proloquo2Go to communicate with friends, family, and teachers, and to ask his Amazon Alexa about the latest Phillies score!



As a user of technology and services, it is critical to speak up for yourself and your needs. When you, the AT user, are central to making these decisions, the process is more likely to effectively promote your independence and ultimately meet your wants and needs.

on the device if it does not work for you. You may also be able to borrow the device from PA's free AT equipment lending library, administered by TechOWL, <https://techowlpa.org/service/lending-library>. If you're in school and the AT device will help you with your education, your teacher, school therapist, or a school administrator may be able to borrow the device from the PA Training and Technical Assistance Network (PaTTAN) Assistive Technology Short-Term Loan Program, [www.pattan.net/assistive-technology/at-acquisition/at-and-short-term-loan](http://www.pattan.net/assistive-technology/at-acquisition/at-and-short-term-loan).

### Training Considerations

» **Is the device ready to use, and if not, how do I set it up?** Make sure you ask about the set-up of the device you're interested in. It may seem easy to use, but may have taken hours to set up. Ask what you will need to know about using it and ask how you can access all of the features of the device.

» **What skills do I need to learn to make the best use of the device?** This is an incredibly important, and sometimes overlooked, question. If you're not able to learn how to use the device, then the device won't work for you. However, many times it is simply a matter of learning a new set of skills that will make it possible for you to use the device. Remember, training required to learn how to use the device is considered an AT "service" and it's often included in the cost of the device or covered by funding resources.

» **Where can I complete training? Is it included in the purchase price?** Will the person who conducts the assessment for the device also provide your training? Do you have a good rapport with him/her? Will the training come from the sales representative? Is there a 24-hour support line available should you need it? How long will the support be available to you? Are you responsible to pay for your and others' training? Be sure you're

comfortable with the method of training and support, as well as with the trainer, so you can learn as efficiently and effectively as possible.

### Access Considerations

» **Where can I use the AT?** Think about how you want to use the AT device. If you will use it in multiple settings, how well will it travel? Can you use it indoors and outside? How will moisture affect how it works? Is there room for the device where you'll use it? Is the device noisy? Will it disturb others around you when you use it? Will it need to be reprogrammed for use in different settings? Who will do the reprogramming? Is the device bulky? Can you use it where and when you want to use the device?

» **Does the device need a battery? If so, what is the life of the battery? Is the battery replaceable?**

Battery life is an important issue when considering certain technology. For instance, if the device requires recharging after three hours of use, and you need to use it for six hours at a time, you'll need extra batteries. And, batteries eventually wear out. Find out if you will be able to replace the batteries yourself. Be sure to ask these questions prior to the purchase, to avoid having a non-functioning device at a time when you need it.

» **If the device can/must be plugged in for power, is there a power source where you want to use it?** You can often conserve battery life by "plugging in." So, think about places where you can hook your technology into an electrical outlet.



## AT in the Community

Linda needed a cane to walk safely on the uneven sidewalks in her neighborhood. A friend gave her a single-prong cane, but she continued to fall. After an evaluation with a physical therapist, it was recommended that she get a quad cane. Now she visits her friends and shops at the corner store with confidence.

### Repair and Maintenance Considerations

» **Is the AT device reliable?** Often the best way to learn if the AT device is reliable is to ask other users. People who have direct experience with using the device will know its features, reliability, and any of its quirks. To find other users, contact a vendor, a local independent living center ([www.pasilc.org](http://www.pasilc.org)), or other disability-related social service agency. Ask them to help you find someone who has the device. If the device is available online, sometimes you can find other user reviews online as well. Remember that the vendors and manufacturers are in business to sell their products; they may not be completely straightforward about the product's reliability.

» **What is the life expectancy and average use of the device?** Nothing lasts forever and at some point, your technology will reach the end of its working life. Knowing the life expectancy of a device will help you decide when it's time to repair or replace the device. At some point, replacing the device will be far more cost effective and/or efficient than repairing it. Also, not all devices can be used constantly. Find out what the manufacturer considers an average amount of use for the device, as this will likely have an effect on its life expectancy.

» **What does the guarantee or warranty cover?** Some manufacturers provide a year-long (or even a life-time) warranty that covers all the problems

you may experience with a device. Others may only cover a manufacturer's defect. Find out what the guarantee or warranty covers before you buy the device.

» **Will it be easy and convenient to get your device repaired?** Find out where the device will need to go for maintenance and repair. If you need to send it several states away, it's going to take a long time to get it there and back. It may also be very expensive. Perhaps, however, you can get the service you need locally. Also, find out if the vendor can loan you a device while your device is being repaired.

» **What is considered regular maintenance for the device?** You may be able to perform some of the maintenance yourself. Or, perhaps a friend or family member can do the maintenance. Some types of maintenance may require specialized training. Find out what kind of maintenance your device may need to prolong its life. Remember to follow maintenance instructions carefully.

This website has an extensive directory for information on AT products and resources: <https://abledata.acl.gov>.

## CHAPTER 3

# Developing a Successful Funding Strategy for Acquiring Assistive Technology

There are a variety of funding resources that may be available for the assistive technology you want, and often resources can be combined if there isn't one that will cover the entire expense. The process of finding funding can be challenging, but don't give up! No two experiences with funding will be alike: some will be quick and easy, while others may be confusing and frustrating. Acquiring funding for assistive technology can take time, research, and work, but the process will be easier if you are resourceful, flexible, persistent, and informed. The following steps describe the process and provide helpful hints.

### Step 1 » Define the need.

Start by being prepared: know what you are trying to do—this is your **need**.

### Step 2 » Document the need.

Prove you need the assistive technology by collecting information that documents your need from professionals (i.e., speech therapists, physical therapists, occupational therapists, rehabilitation engineers, etc.). Examples include a letter from your therapist, a video taken by your family member, or notes from your doctor. The documentation may also include input from a combination of professionals, some or all of whom may be willing to provide assistance throughout the request process.

### Step 3 » Identify the device or service needed.

Match your need with a specific device and/or service. Obtain written prescriptions or recommendations from professionals to substantiate the specific request. Find out prices of the device and service, and what company can best provide it. As you look at prices and options,

be aware of alternative devices and services that you could use. Knowing alternatives can give you options with funding sources later. Remember, the right technology is crucial if it is to be used successfully after it is acquired.

### Step 4 » Determine if no- or low-cost alternatives are available.

Before applying for funding, investigate alternatives and options. For example, would an adaptation suffice, or could the device be borrowed from an equipment loan closet or equipment lending library?

Check to see if the same device or service is available at a lower cost. Also, determine if private insurance, Medical Assistance (i.e., Medicaid), or Medicare will cover the cost.



**Important:** If there are no alternatives, have the facts well documented to show that all options have been explored prior to applying for funding in case this is a requirement.



It may also be possible to acquire the items at little to no cost through an assistive technology reuse program, such as the Used Equipment Exchange through TechOWL, <https://techowlpa.org/service/reep>.



### Step 5 » Identify appropriate funding source(s).

This Guide will be a resource to you as you search for appropriate funding sources. Determine if you need full- or partial-funding, and match your need to possible funding resources.

Don't limit your options, keep a list of possible funding sources and decide where to start first. Get as much support and guidance as possible from your service or supports coordinator and the rest of your team to ensure all funding options are identified.

### Step 6 » Submit a request to the funding source.

Contact the funding source to learn what you need to do to submit a request. Try to get as much information on the process and required paperwork before submitting the request.

It helps to find one person in the agency as a contact during the process. Write down the first and last name of the person you speak with and ask for their telephone extension number. As you collect information and prepare the request, call or email your contact at the agency with questions and concerns. Keep a written record of all contacts with the agency.

Complete the application and send in all of the needed information with the request, keeping copies of everything that is sent. Do not be surprised if a funding source asks for re-submission with additions and/or changes, particularly on a request for expensive items. Once the request is submitted and has met all the required criteria, the only thing to do is wait for the decision.

### Step 7 » Approval or Denial

If notification of approval or denial of a request is not received within the indicated time-frame, a courtesy phone call or email to the funding source may be helpful.

## Approval

It's wonderful news if your request for funding is approved! Please be sure to read the award notice carefully so that you'll understand how much money was approved and so you'll know if there are specific conditions and terms that you must meet. (Be mindful of these details!)

You may have some remaining questions.

» **Will you receive the check or will the check go directly to the vendor/supplier of the AT?** If the check goes to the vendor, then you'll want to contact the company and verify that it has everything needed to process the order as soon as possible. If, on the other hand, the check is mailed to you, then the vendor will only begin processing the order after they receive the money from you.

» **What should you do if funding is approved for only part of the device?** You still have several choices. You can look for additional grants from other funding resources, you can investigate your options for a traditional bank or credit union loan, or you can apply for a no-interest or low-interest loan from Pennsylvania Assistive Technology Foundation (PATF), [www.patf.us](http://www.patf.us).

## Denial

If your request for funding is denied, contact the funding source and make sure that you understand why your request was denied. You may be able to appeal this decision.

If the denial was caused by a lack of information or a misunderstanding, supply the missing information or correct the misunderstanding and ask for a reconsideration.

If your request for a reconsideration is denied, ask how to file an appeal. If the funding source is a governmental agency, you have a right to request an appeal and to have your appeal heard and reviewed. If it is not a government agency, the funding resource may still have an appeals process that you can take advantage of.

- Remember to pay attention to timelines.
- How much time do you have to submit an appeal or a letter requesting a reconsideration?

- What additional information should you include?
- Did you try this device and did it work for you?
- Are you replacing a device?
- Has this funding source funded this device before?
- Did you explain how this device will help you?  
Make sure that the information you submit is complete and accurate.

## Other Options

There are several organizations in Pennsylvania that may be able to help you with the appeals process or help you pursue other options. They are:

### Community Legal Services of Philadelphia (CLS)

CLS provides free legal advice and representation to low income residents of Philadelphia, including representing seniors and people with disabilities in challenges to denials of Medicaid, Medicare, and decisions by managed care (health care) organizations to deny care.

**215-227-2400; 215-918-3700;**  
**<https://www.clsphila.org>**

### Disability Rights Pennsylvania (DRP)

DRP provides free information, referral, and short-term advocacy (including advocacy for access to AT) to Pennsylvanians with disabilities.

**800-692-7443; [www.disabilityrightspa.org](http://www.disabilityrightspa.org)**

### Legal Clinic for the Disabled (LCD)

LCD advises and represents people with disabilities (including people who are Deaf or hard of hearing) who live in SE Pennsylvania and have a legal matter relating to access to Medicaid or Medicare.

**215-587-3350** (intake on Wednesdays);  
**[www.lcdphila.org](http://www.lcdphila.org)**

### Pennsylvania Client Assistance Program (CAP)

CAP helps people who are seeking services from the Office of Vocational Rehabilitation, Blindness and Visual Services, and the Centers for Independent Living.

**888-745-2357; [www.equalemployment.org](http://www.equalemployment.org)**

### Pennsylvania Health Law Project (PHLP)

PHLP provides free legal help to Pennsylvanians throughout the Commonwealth who are seeking health coverage through publicly-funded programs, or have been denied a medically necessary service (including denials of eligibility for Medicaid and denials of services, such as durable medical equipment and home modifications via a Home and Community-Based Waiver program).

**800-274-3258; [www.phlp.org](http://www.phlp.org)**

*Note: For more information specifically about appealing a waiver denial, see page 33.*

## Final Thoughts

We at PATF know it's not always easy to find the funding you need for AT devices and services. But, don't give up! In our experience, we have found it most helpful to:

- Be as organized as possible;
- Explain to funders why the AT device or service you need is important;
- Keep a record of who you've talked with and what they said;
- Keep all letters and other correspondence;
- Talk with your team, friends, and colleagues to learn about new possible funding resources;
- Exercise self-advocacy; and
- Be persistent.



## CHAPTER 4

# Home and Community-Based Waiver Programs

Pennsylvania offers several programs known as Home and Community-Based Waivers, which fund a variety of in-home and community services and supports, including assistive technology, for persons with disabilities and older adults. Pennsylvania's Department of Human Services (DHS) is responsible for these waivers, administering them through the Office of Long-Term Living (OLTL) and the Office of Developmental Programs (ODP). Starting January of 2018, Pennsylvania began enacting Medicaid managed care with a new waiver called Community HealthChoices (CHC). People who are enrolled in the waivers from OLTL are being transferred into CHC, with the exception of people with autism in OLTL's OBRA Waiver. In this chapter, you will learn about accessing AT through a waiver and how to appeal if you're denied.

### Who is Eligible to Enroll in Waiver Programs?

Individuals who meet both the functional and financial requirements can qualify for a waiver program. There may be a waiting list to enroll.

- **Functional eligibility:** A person must have substantial limitations in several areas of functioning (e.g., mobility, activities of daily living, cooking, etc.). An agency or the county (depending on the waiver applied for) will do an assessment to determine functional eligibility.
- **Financial eligibility:** Individuals who are not employed must have a countable income below \$2,250/month (2018) (for an individual) and countable resources ("assets") below \$8,000 (includes savings accounts, stocks, and bonds).

Individuals who are employed can qualify with higher incomes under a special eligibility category

called **Medical Assistance for Workers with Disabilities** (MAWD). The exact amount depends on how much of their income is from earnings versus Social Security or other unearned income. Employed individuals can have up to \$10,000 in countable assets. Employment consists of being paid for work by a company, business, or other individual or self-employment. There is no minimum number of hours an individual must work to qualify for MAWD. However, the individual must provide written proof of employment. A person who qualifies for MAWD gets full Medical Assistance coverage. If they meet the functional eligibility requirements for a waiver (see chart on page 17), they are also considered to meet the financial eligibility requirements for a waiver, even if their income and assets are above the regular limits for the waiver.



## AT at Home

Mary lives in the same home she's had for 15 years. When she started having trouble getting around because of Parkinson's disease, she got a walker through her health insurance and her Aging waiver paid for her stairlift. With these and a few other adaptations she is able to age in place.



Waiver	Assistive Technology (AT)	Independent Living Technology	Home Accessibility Adaptations	Vehicle Accessibility Adaptations
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The following waivers are administered by the Office of Long-Term Living (OLTL), PA Department of Human Services, and include older adults, adults with physical disabilities, adults with traumatic brain injury, and some people with autism. Find more information at: <http://dhs.pa.gov/learnaboutdhs/waiverinformation>.

<b>Aging Waiver</b>	No limit	N/A	No limit	Not Available
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**Older Pennsylvanian**

Age of eligibility: 60 years  
[bit.ly/2DGG9IZ](http://bit.ly/2DGG9IZ)

<b>CommCare Waiver</b>	No limit	N/A	No limit	No limit
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**Traumatic brain injury**

Age of eligibility: 21 years  
[bit.ly/2qLk5OI](http://bit.ly/2qLk5OI)

<b>Independence Waiver</b>	No limit	N/A	No limit	No limit
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**Physical disability**

Age of eligibility: 18 years  
[bit.ly/2A2AbaP](http://bit.ly/2A2AbaP)

<b>OBRA Waiver</b>	No limit	N/A	No limit	No limit
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**Developmental disability**

Age of eligibility: 18 years  
[bit.ly/2Fw1TIU](http://bit.ly/2Fw1TIU)

The following waiver is contracted by OLTL but administered by Medicaid managed care. Starting January 2018, people enrolled in the Aging, CommCare, and Independence waivers listed above began the process of being transferred to Community HealthChoices (CHC). Find more information at: <http://www.healthchoices.pa.gov/info/about/community>.

<b>Community HealthChoices (CHC)</b>	No limit	N/A	No limit	No limit
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**Covers all of the above except OBRA**

Age of eligibility: 21 years  
[bit.ly/2TcHEN9](http://bit.ly/2TcHEN9)

The following waivers are administered by the Office of Developmental Programs (ODP), PA Department of Human Services, and include children and adults with intellectual disabilities and autism. Find more information at: <http://dhs.pa.gov/learnaboutdhs/dhsorganization/officeofdevelopmentalprograms>.

<b>Autism Waiver</b>	\$10,000 lifetime limit	N/A	\$20,000 during a 10-year period in the same home. A new \$20,000 limit starts when participant moves to a new home or when the 10-year period ends.	\$10,000 over a 5-year period.
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**Autism**

Age of eligibility: 21 years  
[bit.ly/2Dpk3Dc](http://bit.ly/2Dpk3Dc)

Waiver <i>(Continued)</i>	Assistive Technology (AT)	Independent Living Technology	Home Accessibility Adaptations	Vehicle Accessibility Adaptations
<p><b>Consolidated Waiver</b></p> <p><b>Intellectual disability</b> Age of eligibility: Birth <a href="http://bit.ly/2TbHhSU">bit.ly/2TbHhSU</a></p>	<p>\$10,000 lifetime limit. While generators have a separate lifetime limit of \$5,000, the amount spent on a generator is included in the overall AT lifetime limit of \$10,000. The lifetime limit for AT may be exceeded by using the standard Office of Developmental Programs (ODP) variance process.</p>	<p>\$5,000 annual limit for remote monitoring as part of independent living technology (separate from AT lifetime limit).</p>	<p>\$20,000 during a 10-year period in the same home. A new \$20,000 limit starts when participant moves to a new home or when the 10-year period ends.</p>	<p>\$20,000 during a 10-year period. The 10-year period begins with the first utilization of this service.</p>
<p><b>Community Living Waiver</b></p> <p><b>Intellectual disability, autism, or developmental disability</b> Age of eligibility: No age limit for individuals with intellectual disability or autism. Individuals with developmental disability with a high probability of resulting in an intellectual disability or autism are eligible from age 0 through 8. <a href="http://bit.ly/2zV90hl">bit.ly/2zV90hl</a></p>	<p>\$10,000 lifetime limit. While generators have a separate lifetime limit of \$5,000, the amount spent on a generator is included in the overall AT lifetime limit of \$10,000. The lifetime limit for AT may be exceeded by using the standard Office of Developmental Programs (ODP) variance process.</p>	<p>\$5,000 annual limit for remote monitoring as part of independent living technology (separate from AT lifetime limit).</p>	<p>\$20,000 during a 10-year period in the same home. A new \$20,000 limit starts when participant moves to a new home or when the 10-year period ends.</p>	<p>\$20,000 during a 10-year period. The 10-year period begins with the first utilization of this service.</p>
<p><b>Person/Family Directed Support Waiver</b></p> <p><b>Intellectual disability</b> Age of eligibility: Birth <a href="http://bit.ly/2TeM6uB">bit.ly/2TeM6uB</a></p>	<p>\$10,000 lifetime limit. While generators have a separate lifetime limit of \$5,000, the amount spent on a generator is included in the overall AT lifetime limit of \$10,000. The lifetime limit for AT may be exceeded by using the standard Office of Developmental Programs (ODP) variance process.</p>	<p>\$5,000 annual limit for remote monitoring as part of independent living technology (separate from AT lifetime limit).</p>	<p>\$20,000 during a 10-year period in the same home. A new \$20,000 limit starts when participant moves to a new home or when the 10-year period ends.</p>	<p>\$20,000 during a 10-year period. The 10-year period begins with the first utilization of this service.</p>

\*Each waiver includes Assistive Technology, Home Accessibility Adaptations, and Vehicle Accessibility Adaptations. Some waivers administered by ODP also include Independent Living Technology. Please refer to each waiver's individual documentation for a complete description of what is covered.

# How Participants Enrolled in Home and Community-Based Waiver Programs Can Access Assistive Technology

This section addresses access to assistive technology through Home and Community-Based Waiver programs with the exception of Community HealthChoices. Accessing assistive technology through Community HealthChoices is a different process and is explained in detail starting on page 21.

To access assistive technology through a Home and Community-Based Waiver, you should obtain an evaluation of your need for the assistive technology and your ability to use it. Documentation of this should be provided to your service or supports coordinator along with the cost. The service or supports coordinator should add a goal (such as “increased independence”), an identified need, and an action step or service to your Individual Service Plan (ISP). This is submitted, along with other documentation regarding the requested assistive technology, to the Office of Long-Term Living (OLTL) or Office of Developmental Programs (ODP). The Office will make a decision on the request and if denied, a written notice will be sent to you which can be appealed (see page 33, “What Should You Do if Your Request is Denied?”).

As a participant enrolled in the Consolidated, Community Living, or Person/Family Directed Support (PFDS) waivers, you may want a device or service that falls outside of the limit set forth by your waiver. In these cases, it is possible to apply for an exception to this limit, also called a “variance.”

## **How to Request a Variance to the \$10,000 Limit on Assistive Technology Under the Consolidated, Community Living, and PFDS Waivers**

Individuals enrolled in the Consolidated, Community Living, or PFDS waivers can request an exception (variance) to the \$10,000 lifetime limit on assistive technology.

As the waiver participant, you should obtain an evaluation from a therapist that provides the documentation in support of the particular

assistive technology being sought. If the new assistive technology would replace a device that was previously paid for by the waiver, you should make sure the evaluation specifies why the old assistive technology no longer meets your needs. The evaluation should also contain information as to which less costly alternatives were considered and why they were not adequate.

After the documentation is obtained, you should contact your supports coordinator and ask that he/she fill out the form to request the exception. This form is called the Waiver Variance Form, currently form DP 1086. The supports coordinator fills out the first page and Section 5, pp. 12-13. The supports coordinator should then submit the form to your county Intellectual Disability (ID) agency, otherwise known as the Administrative Entity (AE). The AE will review it and make a recommendation as to whether the device should be approved or not, then forward the recommendation to the ODP regional office. The ODP regional office will make a decision on the variance request. If the variance request is denied, you have the right to appeal (see page 33).

For more information about waivers, visit the Department of Human Services website: <http://dhs.pa.gov/learnaboutdhs/waiverinformation>.

## How to Request a Variance to the \$20,000 Limit on Home Accessibility Adaptations Under the Consolidated, Community Living and PFDS Waivers

You and your family can request an exception (variance) to the \$20,000 limit for Home Accessibility Adaptations for the following two situations listed in the waiver:

1. Maintenance or repair to existing home accessibility adaptations when it is not covered by a warranty or home owners' insurance; or
2. Track lift systems that exceed the limit and will reduce the need for other services.

In addition, a variance request has to be completed to install an additional door to ensure safe entry and exit from the home (called an "egress" door) even if the cost of the door does not exceed the \$20,000 limit.

The supports coordinator will fill out Section 6, pp. 14-15 of the Waiver Variance Form, DP 1086, and must provide the appropriate documentation.

If the exception (variance) to the \$20,000 cap is being requested for maintenance or repair of the **home accessibility adaptations**, you must provide the supports coordinator with:

1. Verification that the repair is not covered by a warranty or homeowners' insurance;
2. How it was determined to be a cost-effective option, including more cost-effective than replacement; and
3. Documentation that this proposed home accessibility adaptation meets your needs.

For **track lift systems**, you will need to provide information as to how the system will reduce the need for other services (typically, in-home and community supports or companion services) as well as how the track lift system meets your needs.

For an **additional entry/exit (egress) door**, describe the circumstances that require the additional door, and include the current means of entering and exiting the home.

The supports coordinator then submits the form to your county ID agency (AE). They will review it, make a recommendation as to whether it should be approved, then forward it to the ODP Regional Office. The ODP Regional Office will make a decision on the variance request. If the variance request is denied, the participant/family has the right to appeal (see page 33).

## How to Request an Exception to the \$20,000 Limit on Home Accessibility Adaptations Under the Adult Autism Waiver

In the Adult Autism Waiver, exceptions to this limit may be considered based upon a needs assessment and require prior authorization by the Bureau of Autism Services. The exception request is submitted in writing to the Bureau by your supports coordinator on your behalf on a form designated by the Bureau.

## AT at Home

Kelvin lives in a home that he owns with two friends who also have physical disabilities. Kelvin has his own bathroom with modifications that include grab bars, an accessible shower, and a wall-mounted sink, all funded by his waiver. Read more about Kelvin's living situation by visiting: [www.patf.us/who-we-are/publications/homeworks](http://www.patf.us/who-we-are/publications/homeworks).



# How Participants Enrolled in Community HealthChoices Can Access Assistive Technology

Most Pennsylvanians with disabilities and seniors who are eligible for, or already receive, support services from the Department of Human Services, Office of Long-Term Living, are transitioning into a new Medicaid managed care program called Community HealthChoices. This includes participants who are currently enrolled in the Aging, Attendant Care, Independence, and CommCare waivers. People who are “dual eligible”—meaning they receive Medicaid and Medicare services—are also transitioning into Community HealthChoices. Participants who are enrolled in the Act 150 Attendant Care Waiver who are not “dual eligible” and OBRA Waiver participants who are not Nursing Facility Clinically Eligible, are excluded from this program. **For general information about eligibility for waiver standards, go to Pennsylvania Health Law Project’s website, [www.phlp.org](http://www.phlp.org), and click on Resources and Publications.**

Pennsylvanians who participate in the new Community HealthChoices (CHC) managed care program and need Assistive Technology (AT) will get the AT they need from the CHC plan in which they are enrolled. AT devices, however, may be covered by one or more source(s) of coverage and under one or more covered service(s). This may cause confusion for Participants and CHC – Managed Care Organizations (CHC-MCOs). This section outlines how different AT devices may be covered and, we hope, will help Participants advocate for getting the AT devices they need approved.

*Note: Throughout this section, “Participant” refers to the individual with a disability or older Pennsylvanian who is enrolled in the Community HealthChoices (CHC) Waiver program.*

## Medicare

Medicare covers some AT devices. CHC is a Medicaid program, or, as often referred to in Pennsylvania, a Medical Assistance (MA) program. It is not a Medicare program and, therefore, CHC does not change what Medicare covers, nor does it change a person’s Medicare plan. Each Participant’s CHC plan, however, has an obligation to provide comprehensive coordination with his/her Medicare plan. Accordingly, while the Medicare coverage of AT devices is no different for a person enrolled in CHC, access to Medicare coverage of AT should be improved through the CHC plan’s

involvement in facilitating access to the devices because service coordinators are required to coordinate Medicare services for CHC Participants.

## Medicaid

The Medicaid (also referred to as Medical Assistance) State Plan covers some AT devices. The CHC program makes no changes to what is covered under the Medicaid State Plan.



**Important:** While CHC Participants who have Medicare are not required to have a Primary Care Physician (PCP) that participates in the CHC program and can continue to see the PCP they have been seeing through their Medicare, we recommend making sure the PCP understands all the coverage rules and procedures of the CHC program. Additionally, while it is not required that someone picks a PCP who participates in their CHC network, picking a CHC-MCO that already includes the Participant’s PCP would best ensure that the PCP is equipped to work within both the Medicare and the CHC-MCO coverage rules. To learn which plan the current provider (the PCP) is contracted with, use the provider directory located at [www.enrollchc.com](http://www.enrollchc.com), or you can call the Independent Enrollment Broker toll free **844-824-3655** or **833-254-0690 (TTY)**.



For example, those items that fall under Durable Medical Equipment (DME) and Medical Supplies will continue to be covered services. All three CHC-MCOs are required to cover the Medicaid State Plan AT devices. For some who have been in Medicaid Fee-For-Service and are used to getting coverage using their ACCESS card, enrollment into CHC will present a different way of getting their covered services since it is Medicaid managed care and not Medicaid Fee-For-Service. CHC enrollment will mean requests for devices will be submitted to the managed care plan instead of Pennsylvania's Department of Human Services (DHS).

### Medicaid Home and Community-Based Services (HCBS) Waiver

Just as AT has been covered through some of the DHS Home and Community-Based Services (HCBS) Waiver programs in the past, AT will be available through the CHC Waiver for persons enrolled in CHC. This is a new HCBS Waiver for the CHC program. In it, AT devices are covered through five separately defined services with the following titles:

1. Assistive Technology
2. Durable Medical Equipment (DME)
3. Home Adaptations
4. Specialized Medical Equipment and Supplies
5. Vehicle Modifications

See page 26 for complete definitions of each of these services.

### How to Request Assistive Technology

Requests for AT will be directed to the Participant's service coordinator. Participants may mention their need or desire for AT during their periodic comprehensive assessments or person-centered planning meetings. **Participants may also request AT from their service coordinator at any time.** The requested AT must be included in the Participant's person-centered service plan (PCSP) to be funded. If the item is one that Medicare might cover, the CHC-MCO must assist the Participant in pursuing coverage through his/her Medicare plan. If a Participant has other coverage, he/she may have to request the AT through primary insurance first, depending on the item and whether it is something that Medicare or private insurance is likely to cover.



**Important:** Keep all denial notices.

There may be several levels of appeal for a single AT device under the primary insurance plans. It is important to hold onto all the letters from the insurers denying coverage because the CHC-MCO may ask to see them. For more information on appealing a denial, see page 33.

### Who Can Recommend or Prescribe AT?

- **Medicare Durable Medical Equipment (DME):** Physician or other Primary Care Physician (PCP).
- **Medicaid Durable Medical Equipment (DME):** Physician or certain authorized non-physician practitioners (NPPs) document the occurrence of a face-to-face encounter with the Medicaid eligible beneficiary within reasonable timeframes. NPPs are Physician Assistants (PAs), Certified Registered Nurse Practitioners (CRNPs), Certified Nurse Midwives (CNMs), and Clinical Nurse Specialists (CNSs).
- **Assistive Technology:** AT devices must be recommended by an independent evaluator or by a physician with a physician's prescription. iPads, Amazon Echo/Alexa, and other forms of smart devices are reimbursable examples of electronic devices within the category of Assistive Technology.
- **Home Adaptations:** This service does not include, but requires, an independent evaluation that can be provided by another service. Depending on the type of adaptation, and in accordance with their scopes of practice and expertise, the independent evaluation may be conducted by an occupational therapist; a speech, hearing, and language therapist; or a physical therapist who meets all applicable DHS standards, including regulations, policies and procedures relating to provider qualifications. Home Adaptations must be obtained at the lowest cost and additional requirements apply in rented homes.
- **Specialized Medical Equipment and Supplies:** Requires an independent evaluation and a physician's prescription (for example, a physician evaluation for hearing aids from a physician certified by the American Board

## “Braiding” Funding

Alexa braided three funding sources to modify her new home. The Office of Vocational Rehabilitation paid for a ceiling-mounted lift and the installation of an electric door opener on the front door. The Independence Waiver paid for modifications to her floors, walls, and three other doors. And, a grant from the Cumberland County Housing and Redevelopment Authority was used to install the Universal Remote Control home automation system (a type of “smart home” technology). For a video of Alexa showing her modified house, [vimeo.com/169888493](https://vimeo.com/169888493).



of Otolaryngology (ear, nose, and throat physician.)) The independent evaluation may be conducted by an occupational therapist; a speech, hearing, or language therapist; or a physical therapist who meets all applicable DHS standards, including regulations, policies, and procedures relating to provider qualifications. Such assessments may be covered through one of the following services offered through the waiver: physical therapy, occupational therapy, or speech therapy, or through the Medicaid State Plan as appropriate. Hearing aids must be purchased and fitted by a Pennsylvania registered hearing aid fitter, licensed audiologist, or licensed physician associated with a registered hearing aid dealer. Hearing aid purchases are limited to once every three years.

- **Vehicle Modifications:** Depending on the type of modification, and in accordance with their scopes of practice and expertise, the independent evaluation may be conducted by an occupational therapist, physical therapist, or



**Important:** The language of the CHC governing documents (provided in the attached chart) does not list audiologists as an appropriate prescriber for hearing aids. Check with your CHC-MCO and ask if they will accept a prescription from a licensed audiologist for an evaluation for hearing aids under CHC.

mobility specialist meeting all applicable DHS standards, including regulations, policies and procedures relating to provider qualifications. See page 30 for more information on Vehicle Modification coverage.

### Who Can Provide AT Devices?

- **Medicare Durable Medical Equipment (DME):** Approved DME Provider. Use this link to enter your zip code and find approved DME Providers in your area: [www.medicare.gov/supplierdirectory/search.html](http://www.medicare.gov/supplierdirectory/search.html)
- **Medicaid Durable Medical Equipment (DME):** Home Health Agencies, Medical Suppliers, and Pharmacies that are within the CHC-MCO’s network or approved out-of-network providers. Use these plan contact numbers and websites to either contact the CHC-MCO’s Participant Services Department and ask about the provider network, or search the CHC-MCO’s online provider directory on their website:
  - » AmeriHealth Caritas/Keystone First Community HealthChoices: **855-235-5115;** [www.amerihealthcaritaschc.com](http://www.amerihealthcaritaschc.com)
  - » Pennsylvania Health & Wellness: **844-626-6813;** [www.PAHealthWellness.com](http://www.PAHealthWellness.com)
  - » UPMC Community HealthChoices: **844-833-0523;** [www.upmchealthplan.com/chc](http://www.upmchealthplan.com/chc)

- **Assistive Technology:** A Contractor or a DME Agency that is within the CHC-MCO's network or approved out-of-network providers.
- **Exceptional DME:** Nursing Facilities may use Medicaid approved contractors for procuring these items for residents who require them.
- **Home Adaptation:** A Contractor or a DME Agency that is within the CHC-MCO's network or approved out-of-network providers.
- **Specialized Medical Equipment and Supplies:** A Pharmacy, a DME Agency, a Hearing Aid Dealer that is within the CHC-MCO's network, or approved out-of-network providers.
- **Vehicle Modifications:** Vehicle Modifications Contractors that are within the CHC-MCO's network or approved out-of-network providers.

### How Does an AT Provider Become a CHC Provider?

There are several steps to becoming an approved CHC provider, beginning with becoming a Medicaid-approved provider. Below you will find an enrollment checklist, a base (standard) application, and a HCBS-specific application which are part of the Medicaid enrollment process.

1. Enrollment Checklist: [www.dhs.pa.gov/cs/groups/webcontent/documents/document/c\\_209454.pdf](http://www.dhs.pa.gov/cs/groups/webcontent/documents/document/c_209454.pdf)
2. Provider Enrollment Base Application: <https://provider.enrollment.dpw.state.pa.us>
3. Provider Enrollment, specific services: [www.dhs.pa.gov/cs/groups/webcontent/documents/document/c\\_209451.pdf](http://www.dhs.pa.gov/cs/groups/webcontent/documents/document/c_209451.pdf)

Additionally, a provider will have to apply separately to each of the CHC-MCOs. CHC-MCO provider enrollment contact information for each plan is as follows:



**Important:** Make sure the provider is participating in the Participant's CHC-MCO network. Also, most adapted vehicle vendors can provide an independent evaluation if they have a mobility specialist on site.

1. AmeriHealth Caritas/Keystone  
First: [CHCProviders@amerihealthcaritas.com](mailto:CHCProviders@amerihealthcaritas.com)  
or **800-521-6007**
2. Pennsylvania Health and Wellness:  
[information@pahealthwellness.com](mailto:information@pahealthwellness.com) or  
**844-626-6813** (select option 3)
3. UPMC: [CHCProviders@upmc.edu](mailto:CHCProviders@upmc.edu) or  
**844-860-9303**



**Important:** Participants should ask for out-of-network AT vendors when their CHC-MCO network does not have a vendor or has an insufficient number of vendors.

### Can Out-of-Network Providers Provide AT Devices?

Generally, to provide CHC covered services, a provider must be approved through the Pennsylvania Medicaid program and participating within the CHC-MCO's provider network. Participants may use out-of-network providers who do not have a contract with the Participant's CHC-MCO when they are obtaining CHC covered services if they obtain permission from their CHC-MCO. The CHC-MCO must give permission when it cannot offer a choice of two qualified providers or does not have an adequate number of providers within the time and distance standards.

### What Standard is Applied to Requests for AT?

AT devices that would be covered under Medicare or the Medicaid State Plan coverage are generally subject to a fixed coverage standard or "medical necessity" determination. Typically, AT devices covered under the Medicaid HCBS Waiver must be covered if the device would help the Participant achieve a more independent and productive life and a request does not need to satisfy a "medical necessity" standard.

*Important Note: According to the approved CHC HCBS Waiver, AT devices will only be approved when an independent evaluation specifies that the item is primarily used for a Participant's specific therapeutic purpose and serves as a less costly alternative than other suitable devices and*



alternative methods. This is confusing and appears to narrow other Waiver language that more broadly says that AT is intended to ensure the health, welfare, and safety of the Participant and to increase, maintain, or improve a Participant's functioning in communication, self-help, self-direction, life supports, or adaptive capabilities. Participants should obtain approval for any AT that helps him/her achieve a more independent and productive life. If a Participant's Medicare denies coverage, the CHC-MCO should review whether the device is coverable under the Medicaid State Plan or under the CHC HCBS Waiver package of services.

### How Exactly Does CHC Define AT Services?

The exact language used by the state to define services can be found on page 26. This language comes directly from the CHC Waiver and/or CHC-MCO Agreement. This language will be important to have when advocating with CHC-MCOs.

It may also be helpful to check the Department of Human Services' website, [www.healthchoices.pa.gov/info/resources/publications/community/index.htm](http://www.healthchoices.pa.gov/info/resources/publications/community/index.htm), to find the most up-to-date information.



**Important:** If you're not receiving a timely response from your service coordinator or MCO, call the OLTL Participant Line: **800-757-5042**.

### Who Do I Contact at the Plan with AT Problems?

Each CHC-MCO has a designated point person for addressing AT questions and issues. These are:

- AmeriHealth Caritas/Keystone First:  
Danielle Bruette, **484-496-7635**,  
[dbruetted@amerihealthcaritas.com](mailto:dbruetted@amerihealthcaritas.com)
- PA Health and Wellness:  
Scott W. Evans, **717-551-7133**,  
[Scott.W.Evans@pahealthwellness.com](mailto:Scott.W.Evans@pahealthwellness.com)
- UPMC: Andrea Farrell,  
**412-454-5685**,  
[farrellam2@upmc.edu](mailto:farrellam2@upmc.edu)

### Where Can I Find a Copy of the Community HealthChoices Waiver?

A copy of the Community HealthChoices Waiver can be found at [www.healthchoices.pa.gov/cs/groups/webcontent/documents/document/c\\_264258.pdf](http://www.healthchoices.pa.gov/cs/groups/webcontent/documents/document/c_264258.pdf).



## AT at Work

Latrice combined two funding resources to pay for her modified van: the Office of Vocational Rehabilitation (OVR) paid for the modifications and a PATF low-interest loan financed the chassis (body of the vehicle). She uses her van to drive to her office where she sees patients as a mental health professional, to go to medical appointments, and to visit friends. For more information about OVR funding for AT related to employment, visit: <https://www.dli.pa.gov/Individuals/Disability-Services/ovr/Pages/default.aspx>.

# Names and Definitions of CHC Services that Include AT

Excerpted from the CHC Waiver Application and CHC-MCO Agreement

Source: *Waiver Application<sup>1</sup> and CHC Agreement<sup>2</sup>*

## Assistive Technology

Assistive Technology service is an item, piece of equipment, or product system—whether acquired commercially, modified, or customized—that is needed by the participant, as specified in the participant’s person-centered service plan (PCSP) and determined necessary in accordance with the participant’s assessment. The service is intended to ensure the health, welfare, and safety of the participant and to increase, maintain, or improve a participant’s functioning in communication, self-help, self-direction, life supports, or adaptive capabilities. Assistive Technology includes supports to a participant in the selection, acquisition or use of an Assistive Technology device. Training to utilize adaptations, modifications, and devices is included in the purchase, as applicable. Independent evaluations conducted by a certified professional, not otherwise covered under the State Plan or other waiver services, may be reimbursed as a part of this service.

### Assistive Technology is limited to:

- Services consisting of purchasing, leasing, or otherwise providing for the acquisition of Assistive Technology devices for participants;
- Services consisting of selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing Assistive Technology devices. Repairs are covered when it is more cost effective than purchasing a new device;
- Electronic systems<sup>3</sup> that enable someone with limited mobility to control various appliances, lights, telephone, doors, and security systems in their room, home, or other surroundings;
- Training or technical assistance for the participant, paid caregiver, and unpaid caregiver;
- An independent evaluation of the Assistive Technology needs of a participant.

This includes a functional evaluation of the Assistive Technology needs and appropriate services for the participant in his/her customary environment;

- Extended warranties;
- Ancillary supplies, software, and equipment necessary for the proper functioning of Assistive Technology devices, such as replacement batteries and materials necessary to adapt low-tech devices. This includes applications for electronic devices that assist participants with a need identified through the evaluation described below; and
- Generators to power life-sustaining equipment, which are covered for participants residing in private homes when the following has been documented: The generator purchased is the most cost-effective to ensure the health and safety of the participant; AND the participant’s health and safety is dependent upon electricity as documented by a physician.

All items shall meet the applicable standards of manufacture, design, and installation. If the participant receives speech, occupational, or physical therapy, or behavior support services that may relate to, or are impacted by, the use of the Assistive Technology, the Assistive Technology must be consistent with the participant’s behavior support plan or speech, occupational, or physical therapy service. Specify applicable (if any) limits on the amount, frequency, or duration of this service: Assistive Technology services may only be funded through the waiver when the services are not covered by the State Plan or a responsible third-party, such as Medicare or private insurance. service coordinators must assure that coverage of services provided under the State Plan or a responsible third-party continues until the State Plan limitations have been reached or a determination of non-coverage

has been established prior to this service's inclusion in the service plan. Documentation in accordance with Department of Human Services (DHS) requirements must be maintained in the participant's file by the service coordinator and updated with each reauthorization, as applicable. This service excludes those items that are not of direct medical or remedial benefit to the participant. Assistive technology devices must be recommended by an independent evaluation or physician's prescription. They will only be approved by the Office of Long-Term Living (OLTL) when an independent evaluation specifies that the item is primarily used for a participant's specific therapeutic purpose and serves as a less costly alternative than other suitable devices and alternative methods.

**The following are specifically excluded from this service definition:**

- Recreational items; and
- Items that do not provide direct remedial benefit or improve the participant's ability to communicate with others.

Depending on the type of technology, and in accordance with their scopes of practice and expertise, the independent evaluation may be conducted by an occupational therapist; a speech, hearing or language therapist; physical therapist; or other certified professional meeting all applicable Department standards, including regulations, policies, and procedures relating to provider qualifications. Independent evaluations conducted by a certified professional as defined in the provider qualifications for this service, not otherwise covered under the State Plan or other waiver services, may be reimbursed as a part of this service. Except as permitted in accordance with requirements contained in DHS guidance, policy, and regulations, this service may not be provided

on the same day and at the same time as services that contain elements integral to the delivery of this service. This service does not include TeleCare services. Data plans are excluded from coverage.

## Home Adaptations

Home adaptations are physical adaptations to the private residence of the participant, as specified in the participant's person-centered service plan (PCSP) and determined necessary in accordance with the participant's assessment, to ensure the health, welfare, and safety of the participant, and enable the participant to function with greater independence in the home. This includes primary egress into and out of the home, facilitating personal hygiene, and the ability to access common shared areas within the home. Home adaptations consist of installation, repair, maintenance, permits, necessary inspections, and extended warranties for the adaptations.

**Home Adaptations are limited to the following:**

- Ramps from street, sidewalk or house;
- Installation of specialized electric and plumbing systems that are necessary to accommodate the medical equipment and supplies necessary for the health, welfare, and safety of the participant;
- Vertical lifts;
- Track lift systems: A track lift system involves the installation of a "track" in the ceiling for moving a participant with a disability from one location to another. (*Note: Portable lift systems are covered by the MA State Plan.*);<sup>4</sup>
- Handrails/grab-bars in and outside the home;
- Accessible alerting systems for smoke/fire/ carbon monoxide for participants with sensory impairments;

<sup>1</sup>The CHC Waiver Application outlined to Centers for Medicare and Medicaid Services (CMS), and was approved by CMS, included a list of the services (including service definitions) that DHS proposed to include in the CHC program.

<sup>2</sup>The CHC agreement outlines the requirements in place for each managed care plan (CHC-MCO), including the list of which services the CHC-MCOs must cover and the service definitions for many of those services.

<sup>3</sup>**Important Note:** Electronic systems include electronic devices and smart home technology.

<sup>4</sup>**Important Note:** Many people are not aware that track lifts are often available through Medicare and private insurance.

- Outside railing to safely access the home;
- Widened doorways, landings, and hallways;
- Swing-clear and expandable offset door hinges;
- Flush entries and leveled thresholds;
- Slip-resistant flooring;
- Kitchen counter, sink, and other cabinet modifications (including brackets for appliances);
- Bathroom adaptations for bathing, showering, toileting, and personal care needs;
- Stair gliders and stair lifts. A stair lift is a chair or platform that travels on a rail, installed to follow the slope and direction of a staircase, which allows a user to ride up and down stairs safely;
- Raised electrical switches and sockets; and
- Other adaptations, subject to OLTL approval, to address specific assessed needs as identified in the service plan.

All adaptations to the home shall be provided in accordance with applicable building codes. Home Adaptations shall meet standards of manufacture, design, and installation. Home Adaptations must be an item of modification that the family would not be expected to provide to a family member without a disability or specialized needs.

Specify applicable (if any) limits on the amount, frequency, or duration of this service. Home Adaptations may only be funded through the waiver when the services are not covered by a responsible third-party, such as Medicare or private insurance. Service coordinators must assure that coverage of services provided under a responsible third-party continues until the plan limitations have been reached, or a determination of non-coverage has been established prior to this service's inclusion in the service plan. Documentation in accordance with OLTL requirements must be maintained in the participant's file by the service coordinator and updated with each authorization.

This service does not include, but requires, an independent evaluation. Depending on the type of adaptation, and in accordance with their scopes of practice and expertise, the independent evaluation may be conducted by an occupational therapist;

a speech, hearing, and language therapist; or physical therapist meeting all applicable DHS standards, including regulations, policies, and procedures relating to provider qualifications. Such assessments may be covered through another waiver service, as appropriate. Home Adaptations included in the service plan and begun while the person was institutionalized are not considered complete and may not be billed until the date the participant leaves the institution and enters the waiver. Home adaptations must be obtained at the lowest cost. Building a new room is excluded. Specialized Medical Equipment and Supplies is excluded. Also excluded are those adaptations or improvements to the home that are of general maintenance and upkeep, and are not of direct medical or remedial benefit to the participant—this includes items that are not up to code. Adaptations that add to the total square footage of the home are excluded from this benefit, except when necessary for the addition of an accessible bathroom when the cost of adding the bathroom is less than retrofitting an existing bathroom. Materials and equipment must be based on the participant's need as documented in the PCSP.

**Rented property adaptations must meet the following:**

- There is a reasonable expectation that the participant will continue to live in the home;
- Written permission is secured from the property owner for the adaptation, including that there is no expectation that waiver funds will be used to return the home to its original state; and
- The landlord will not increase the rent because of the adaptation.

Except as permitted in accordance with requirements contained in DHS guidance, policy, and regulations, this service may not be provided on the same day and at the same time as services that contain elements integral to the delivery of this service. This service may not be included on the same service plan as Residential Habilitation.



## Specialized Medical Equipment and Supplies

Specialized Medical Equipment and Supplies are services or items that provide direct medical or remedial benefit to the participant and are directly related to a participant's disability.

These services or items are necessary to ensure health, welfare, and safety of the participant and enable the participant to function in the home and community with greater independence.

This service is intended to enable participants to increase, maintain, or improve their ability to perform activities of daily living. Specialized Medical Equipment and Supplies are specified in the participant's PCSP and are determined necessary in accordance with the participant's assessment.

### Specialized Medical Equipment and Supplies includes:

- Devices, controls, or appliances specified in the service plan that enable participants to increase, maintain, or improve their ability to perform activities of daily living;
- Equipment repair and maintenance, unless covered by the manufacturer warranty;
- Items that exceed the limits set for Medicaid State Plan covered services; and
- Rental equipment.

In certain circumstances, needs for equipment or supplies may be time-limited. The service coordinator must initially verify that the rental costs cannot be covered by the State Plan. If the State Plan does not cover the rental for the particular piece of equipment needed, then the cost of the rental can be funded through Specialized Medical Equipment and Supplies Non-Covered Items:

- All prescription and over-the-counter medications, compounds, and solutions (except wipes and barrier cream);
- Items covered under third party payer liability;
- Items that do not provide direct medical or remedial benefit to the participant and/or are not directly related to a participant's disability;
- Food, food supplements, food substitutes (including formulas), and thickening agents;

- Eyeglasses, frames, and lenses;
- Dentures;
- Any item labeled as experimental that has been denied by Medicare and/or Medicaid; and
- Recreational or exercise equipment and adaptive devices for such.

(Examples of Specialized Medical Equipment and Supplies include hearing aids, catheters, incontinence supplies, seat cushions, wheelchairs, and specialized mattresses.) All items shall meet applicable standards of manufacture, design, and installation. If the participant receives speech, occupational, or physical therapy or behavior support services that may relate to, or are impacted by, the use of the Specialized Medical Equipment and Supplies, the Specialized Medical Equipment and Supplies must be consistent with the participant's behavior support plan or Speech, Occupational or Physical Therapy service. Specify applicable (if any) limits on the amount, frequency, or duration of this service: Specialized Medical Equipment and Supplies may only be funded through the waiver when the services are not covered by the State Plan or a responsible third-party, such as Medicare or private insurance. Service coordinators must assure that coverage of services provided under the State Plan or a responsible third-party continues until the State Plan limitations have been reached or a determination of non-coverage has been established prior to this service's inclusion in the service plan. Documentation in accordance with DHS requirements must be maintained in the participant's file by the service coordinator and updated with each reauthorization, as applicable. This service does not include, but requires, both an independent evaluation and a physician's prescription. The independent evaluation may be conducted by an occupational therapist; a speech, hearing or language therapist; or physical therapist meeting all applicable DHS standards, including regulations, policies, and procedures relating to provider qualifications. Such assessments may be covered through one of the following services offered through the waiver: Physical Therapy, Occupational Therapy, or Speech Therapy, or the State Plan as appropriate. Hearing aids require, but this service

does not cover, an evaluation conducted by a physician certified by the American Board of Otolaryngology (ear, nose, and throat physician). Hearing aids must be purchased and fitted by a Pennsylvania registered hearing aid fitter, licensed audiologist, or licensed physician associated with a registered hearing aid dealer. Hearing aid purchases are limited to once every three years. Specialized Medical Equipment and Supplies exclude Assistive Technology. Except as permitted in accordance with requirements contained in DHS guidance, policy, and regulations, this service may not be provided on the same day and at the same time as services that contain elements integral to the delivery of this service.

## Vehicle Modifications

Vehicle Modifications are modifications or alterations to an automobile or van that is the participant's means of transportation in order to accommodate the special needs of the participant. Vehicle Modifications are modifications needed by the participant, as specified in the service plan and determined necessary in accordance with the participant's assessment, to ensure the health, welfare, and safety of the participant, and enable the participant to function in the home and community with greater independence and integrate more fully into the community. The vehicle that is modified may be owned by the participant, a family member with whom the participant lives, or a non-relative who provides primary support to the participant and is not a paid provider agency of services. The following are specifically excluded:

- Modifications or improvements to the vehicle that are of general utility and are not of direct medical or remedial benefit to the participant; and
- Regularly scheduled upkeep and maintenance of a vehicle, including warranties that cover the entire vehicle, except upkeep and maintenance of the modifications.

The waiver cannot be used to purchase the chassis (body of the vehicle) for participants, their families, or legal guardians; however, this service can be used to fund the portion of a new

or used vehicle purchase that relates to the cost of accessibility adaptations. In order to fund these types of adaptations, a clear breakdown of purchase price versus adaptation is required. Vehicle Modifications funded through the waiver are limited to the following:

- Vehicular lifts;
- Portable ramps when the sole purpose of the ramp is for the participant to access the vehicle;
- Interior alterations to seats, head and leg rests, and belts;
- Customized devices necessary for the participant to be transported safely in the community, including tie-downs and wheelchair docking systems;
- Driver control devices, including hand controls and pedal adjusters;
- Modifications needed to accommodate a participant's special sensitivity to sound, light or other environmental conditions;
- Raising the roof or lowering the floor to accommodate wheelchairs; and
- The vehicle must be less than 5 years old, and have less than 50,000 miles for vehicle modification requests over \$3,000.

All Vehicle Modifications shall meet applicable standards of manufacture, design, and installation. Specify applicable (if any) limits on the amount, frequency, or duration of this service: A vehicle is required to have passed all applicable State standards. This service does not include, but requires, an independent evaluation. Participants receiving Vehicle Modifications cannot be authorized for Residential Habilitation services during the same time period. Depending on the type of modification, and in accordance with their scopes of practice and expertise, the independent evaluation may be conducted by an occupational therapist, physical therapist or Mobility Specialist meeting all applicable DHS standards, including regulations, policies, and procedures relating to provider qualifications. Such assessments may be covered through another waiver service or the State Plan, as appropriate.

# Home Adaptations Request Process

Question	Keystone First	PA Health & Wellness (PHW)	UPMC
<p><b>How long does a service coordinator (SC) have to submit a request for an assessment, if needed, for a home modification after the participant has requested the service?</b></p>	<p>After a Comprehensive Needs Assessment has been completed that identifies the need for a Home Adaptation, the service coordinator (SC) will secure an independent evaluation (by a physical, occupational, or speech therapist) of the participant in his/her home to ensure that the proposed adaptations are suitable to enhance the independence and safety of the participant. The evaluation will be reviewed with the participant, SC, NHT (Nursing Home Transition) coordinator (when applicable), and members of the participant's Person-Centered Service Plan Team (PCPT).</p>	<p>Service coordinators (SCs) and Service Coordinating Entities (SCEs) are required to submit requests within 24 hours of receiving the request, excluding holidays and weekends.</p>	<p>Service coordinators (SCs) are expected to complete a request within 5 business days of receiving the request from a participant.</p>
<p><b>How long does the Managed Care Organization (MCO) have to respond to a request for a home adaptation (home modification)?</b></p>	<p>The MCO works with the participant, SC, NHT coordinator (when applicable), and all others who are involved in order to gather the information (identify the need and provide a justification) to review the request. Home Adaptations require an independent evaluation in the participant's home environment no greater than 90 days prior to submission for review.</p>	<p>PHW will respond with its standard turnaround times. PHW will review the prior authorization request and information that the participant or provider submits. PHW will inform the participant &amp; provider of the decision within 2 business days of the date PHW received the request assuming PHW has enough information to decide that the service or item is medically necessary and the service is appropriate. If PHW does not have enough information to make the determination, PHW will tell the provider within 48 hours of receiving the request that more information is needed. The participant or provider has up to 14 days to gather and present the information to PHW. PHW will notify the participant and provider of the decision within 2 business days of receiving the additional information. The participant and provider will receive a written notice telling him/her if the request is approved or denied; and if denied, the reason for the denial.</p>	<p>The MCO will confirm receipt of the request and will respond as quickly as possible. Defined time limits will be provided in a forthcoming policy document.</p>

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# Home Adaptations Request Process

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Question	Keystone First	PA Health & Wellness (PHW)	UPMC
<p><b>How long does the SC have to compile the needed information and bids to submit to the MCO?</b></p>	<p>The SC is trained to secure all required adaptation information as expeditiously as possible. Any Home Adaptation request \$6,800 or larger will require two contractor estimates. Home Adaptations must be obtained at the lowest cost.</p>	<p>Required documentation should be submitted as soon as possible but no more than 14 days from the date of request. It is not the responsibility of the SC/SCE to obtain the bids—rather, this is the responsibility of the Program Coordination unit.</p>	<p>The SC is not required by UPMC to compile bids before submitting a request for review. There is a request form that the SC fills out that provides the MCO with the information about the participant, his/her home, and the requested modifications. If the participant is eligible, and the modifications are allowed under the service definition, then the project moves on to independent evaluation so that the scope can be clearly defined by an expert before multiple providers submit bids.</p>
<p><b>How long does the MCO have to review the request?</b></p>	<p>The MCO will follow the review criteria outlined in the CHC agreement when a request contains all of the necessary information and documentation.</p>	<p>PHW will respond with its standard turnaround times. PHW will review the prior authorization request and information that the participant or provider submit. PHW will inform the participant &amp; provider of the decision within 2 business days of the date PHW received the request if PHW has enough information to decide if the service or item is medically necessary and service appropriate. If PHW does not have enough information to decide the request, PHW will tell the provider within 48 hours of receiving the request. The participant or provider has 14 days to gather and present the information that is requested. PHW will notify the participant and provider of the decision within 2 business days of receiving the additional information. The participant and provider will receive a written notice telling him/her if the request is approved or denied; and if denied, the reason for the denial.</p>	<p>The defined time limit will be outlined in the policy document.</p>
<p><b>If denied (for a portion or for the entire request), how long does the SC have to “fix” the issue, to obtain another bid, or to notify the participant?</b></p>	<p>When a request is incomplete, the SC must submit the completed information within 14 days. (This is in accordance of the CHC agreement.)</p>	<p>N/A. Standard complaint, grievance, and appeal procedures apply.</p>	<p>All authorizations, including Home Adaptations, are valid for 6 months. UPMC is working on defining tighter time limits for the providers to complete work and submit his/her close-out documentation. More detail will be provided in a forthcoming policy.</p>



# What Should You Do if Your Request is Denied?

Note: Our sincere thanks to Pennsylvania Health Law Project (PHLP) for granting us permission to borrow the following information about how to appeal a waiver denial, and the valuable description of the new appeal process under CHC.



Please visit [www.phlp.org](http://www.phlp.org) to learn more.

As a waiver applicant or participant, you have the right to appeal if any of the following happens:

- Your waiver application is denied;
- Your waiver is ending;
- Your request for a specific type or amount of waiver service is denied;
- Your current waiver services are being reduced or changed;
- You are not given a choice of service providers or you are denied the provider you choose;
- You are not given the choice between receiving your long term care services in a facility (for example, a nursing home) or getting the services in your home or community; or
- You experience an unreasonable delay by the State or the agency that manages the waiver locally in getting your waiver approved, having your waiver services start, or responding to your request for a change to your waiver service plan.

In many of the situations listed above, you will receive a notice of a decision by the state or local waiver agency. This notice should tell you that you have a right to appeal the decision and give you instructions for how to file an appeal. Generally, you have 30 days from the date of the notice to file an appeal. **If you have been receiving waiver services that are ending or that are being reduced or changed, you must appeal within 10 days of the date on the notice in order to keep receiving your waiver benefit and/or services going during the appeal process!**

Appeal requests must be made in writing. Usually, you request an appeal by completing a

section of the notice of decision from the state or waiver agency; but, you could also write a letter requesting an appeal. If possible, you should mail your appeal request via certified mail, return receipt requested, or some other way that gives you proof of when the appeal request was mailed.

In some cases, you may not receive a written notice of a decision with instructions on how to file an appeal (such as in the situation where there is an unreasonable delay by the local waiver agency in starting your services). In these situations, please contact PHLP's Helpline at **800-274-3258** for advice.

All appeals regarding waiver services are heard through the Department of Human Services (formerly the Department of Public Welfare) Fair Hearing process. After you file your appeal, you will be contacted by the Bureau of Hearings & Appeals (BHA) and scheduled for a Fair Hearing either in-person or by telephone, depending on what you requested when you filed your appeal. BHA has 90 days from the date you requested an appeal to hold a hearing and make their decision, so a hearing may not be scheduled right away.

Once a hearing is scheduled, you will be mailed a notice telling you of the date and time of the hearing. **You need to respond to the notice to let BHA know if you are available on that day or not and if you still want to have a telephone or in-person hearing.** You can change how the appeal is done, so if you first requested a telephone hearing and you later decide you want to change it to an in-person hearing (or vice versa), you can note the change when responding to the notice of hearing date and time.

## Fair Hearing Process

At the Fair Hearing, an Administrative Law Judge (ALJ) will review the case and will issue a decision about whether to uphold or to overturn the decision being appealed. The ALJ usually does not make a decision at the Fair Hearing. Instead, you will receive the hearing decision by mail in the weeks following the hearing.

The Fair Hearing is tape-recorded. The ALJ listens to both sides and can ask questions of both sides. You can represent yourself or have a representative (such as an attorney, family member, friend, or other advocate) at the hearing with you. You can have witnesses (such as your doctor) attend in person or by phone to testify in support of your case. You can present the reasons why you disagree with the decision and you can present documents or other information to the ALJ that support your case.

If the ALJ upholds the original decision, you can request Reconsideration from the Secretary of the Department of Human Services (instructions for doing this will be included in the ALJ's decision letter). If you are unsuccessful at that level, you can appeal further to the Commonwealth Court.

## How to Appeal a Denial in Community HealthChoices (CHC)

Appealing a denial in Community HealthChoices is a different process than appealing a denial made by the Office of Long-Term Living or the Office of Developmental Programs, because Community HealthChoices is administered by Medicaid Managed Care Organizations.

If your Community HealthChoices managed care plan denies your request for a service, such as personal care assistance, you have the right to appeal.

You can also appeal if your plan stops or reduces a service you have been getting. You can also appeal a denial if the plan determines that the service was not “medically necessary.” Here is how to appeal:

### Step 1: Ask for a Grievance

A grievance is a review of the service denial by a panel of three people, including a doctor employed by the CHC plan. You have the right to take part in the grievance review, either in person or by phone. You also have the right to have your doctor or others take part on your behalf. If the reason for denial was that the service is not medically necessary, ask your doctor to take part, or to write a letter that explains why the service is in fact medically necessary for you. The panel must give you a decision within 30 days from when you ask for the grievance.

Ask for a grievance by calling your CHC plan or by completing the form that came with your denial letter. You have **60 days** from the date on the letter to file a grievance.

### » Can I get a decision in less than thirty days?

Yes. If your health could be harmed by waiting 30 days for a decision, ask your CHC plan for a faster review. This is called an “expedited” grievance. Give the plan a letter from your doctor that says you need a faster review. For an “expedited”

## Pre-Hearing Conference

You have a right to a pre-hearing conference with the agency who made the decision that you are appealing. This is a way for you and the County Assistance Office (CAO) or local agency to try to resolve the issue being appealed before going to the Fair Hearing. **You can ask for a pre-hearing conference when you file your appeal.** If the issue is not resolved at the pre-hearing conference, then you go forward with Fair Hearing process. You do not have to request a pre-hearing conference before having the Fair Hearing, but sometimes it's a good idea to see if the situation can be resolved more quickly and a Fair Hearing can be avoided.

grievance, the panel must give you a decision within 72 hours of your request.

» **Can I continue getting benefits?**

Yes. Ask for your grievance within 10 days of the date on the denial letter. Services you are already getting will continue during the process. This rule only applies if your plan has denied a request for services to continue, not a request for new services.

**Step 2a: Ask for a Fair Hearing**

If you do not agree with the grievance decision, you have the right to a fair hearing.

A Fair Hearing is a meeting where the CHC plan has to explain its decision to an ALJ. You have the right to take part in person or by phone. Your doctor or others can also take part. Either you or someone on your behalf must take part in the hearing. The ALJ will issue a decision within 90 days of your request for hearing.

To ask for a Fair Hearing, complete and mail the form that came with your grievance decision. Include the grievance decision with your form. Use certified mail. You have **120 days** from the date on the grievance decision to ask for a Fair Hearing.

» **Can I get a decision in less than ninety days?**

Yes. If your health could be harmed by waiting up to 90 days for a hearing decision, give the judge a letter from your doctor that says you need a faster review. In an “expedited” Fair Hearing, the judge will hold the hearing and give you a decision within three business days of your request.

» **Can I continue getting benefits?**

Yes. Ask for a Fair Hearing within 10 days of the date on the grievance decision. Services you are already getting will continue until you get a hearing decision.

**Step 2b: Also Ask for an External Review**

If the grievance panel upholds the denial, you **also** have the right to ask for an external medical review. An external review is a review of the record

by a doctor chosen by the PA Department of Health. The external reviewer must give you a decision within 60 days of your request.

Call your plan to ask for an external review. You have **15 days** from the date on the grievance decision to ask for an external review. Ask within **10 days** if you want benefits to continue during the external review process.

You can ask for an external review and a Fair Hearing at the same time. If either appeal is decided in your favor, the CHC plan must approve the service.



## Get Legal Help

Requesting an appeal and going to a Fair Hearing can seem like an intimidating process to many people, but it may be worth it to get a good result and have the initial decision changed. For free legal help, call the Pennsylvania Health Law Project at **800-274-3258**. The Department of Human Services (DHS) also recommends calling your local legal services office at **877-429-5994**.

## CHAPTER 5

# Funding Resource List

The following is a list of private funding resources for assistive technology. It is meant to be a starting point, not an exhaustive list, and due to the ever-changing nature of the internet, it may not be up-to-date. Please contact each organization or visit their website to learn more about their particular program and criteria to apply for funding.

### ACHIEVA Family Trust (national)

Provides supplemental supports and services to children and adults with intellectual, physical and behavioral disabilities who have no other resources to obtain the needed product or service. Categories of funding include assistive technology, camp/recreation, medical, products or supplies, disability-related modifications, and caregiving. Applications are reviewed quarterly.

- **Covers:** Children and adults with intellectual, physical, and behavioral disabilities.
- **Financial eligibility:** Applicants must have no other resources to obtain the needed product or service.
- **Contact:**
  - » 888-272-7229
  - » <http://achievafamilytrust.org/charitable-residual-account>

### Alyssa V. Phillips Foundation (national)

The Foundation may provide financial support to people with cerebral palsy so that they can receive ongoing and necessary therapy treatments or medical equipment to increase independence where such benefits are not covered by medical insurance.

- **Covers:** Individuals with cerebral palsy.
- **Financial Eligibility:** Applicants must provide documentation of insurance denial.
- **Contact:**
  - » [info@alyssavphillipsfoundation.com](mailto:info@alyssavphillipsfoundation.com)
  - » [www.alyssavphillipsfoundation.com](http://www.alyssavphillipsfoundation.com)

## To Learn More About Public Funding Resources for Assistive Technology

**Disability Rights Pennsylvania**, a nonprofit organization that protects and advocates for rights of people with disabilities, has developed a resource list for Pennsylvanians who want to acquire assistive technology. This resource list covers some programs that are funded with a mixture of state and federal dollars. This listing will be updated from time to time. If you have any questions, please contact Disability Rights Pennsylvania at **800-692-7443**.

Visit this resource list here: [www.disabilityrightspa.org/resources/#assistive-technology](http://www.disabilityrightspa.org/resources/#assistive-technology)





**Important:** If you are aware of a resource that should be included on this list, please contact us at [patf@patf.us](mailto:patf@patf.us) or **888-744-1938**.

### **AMBUCS Amtryke Therapeutic Tricycle Program (national)**

Amtryke makes foot trykes, hand trykes, and hand & foot trykes in a wide range of sizes. Nearly every rider can be successful, no matter their diagnosis, through Amtryke's full line of highly adjustable trykes and myriad of adaptive accessories. They offer scholarships to cover the cost of the bikes.

- **Covers:** Children, adults, and veterans with a range of disabilities, including physical and developmental disabilities.
- **Financial eligibility:** Income limit applies.
- **Contact:**
  - » **800-838-1845**
  - » [ambucs@ambucs.org](mailto:ambucs@ambucs.org)
  - » <https://ambucs.org>

### **The Assistive Technology Fund (ATF) operated by The Association of Blind Citizens (national)**

Provides funds to cover 50% of the retail price of adaptive devices and software for people who are blind or low vision. Products must retail for a minimum of \$200 and a maximum of \$6,000.

- **Covers:** Applicant must be legally blind and a resident of the United States.
- **Financial Eligibility:** Income and asset limits apply.
- **Contact:**
  - » **781-654-2000**
  - » [atf@blindcitizens.org](mailto:atf@blindcitizens.org)
  - » [www.blindcitizens.org/assistive\\_tech.htm](http://www.blindcitizens.org/assistive_tech.htm)

### **Autism Care and Treatment (ACT) Today! (national)**

Provides grants to individuals and families affected by Autism Spectrum Disorder for areas of support such as ABA therapy, assistive technology, medical testing and treatments, speech and occupational therapy, safety equipment, summer and social programs, and quality of life supports.

- **Covers:** 3 grant programs: ACT Today! General Grants for individuals and families affected by Autism Spectrum Disorders; ACT Today! For Military Families affected by Autism Spectrum Disorders; and ACT Today! SOS for individuals with autism who are in immediate personal danger/harm. ACT Today! and ACT Today! for Military Families requests are reviewed quarterly. ACT Today! SOS requests are reviewed immediately.
- **Financial Eligibility:** Income limit only applies to ACT Today! General Grants and SOS grants.
- **Contact:**
  - » **877-9-ACT-TODAY (877-922-8863)**
  - » [info@act-today.org](mailto:info@act-today.org)
  - » [www.act-today.org](http://www.act-today.org)

### **Ben's Blankets (national)**

Custom-makes weighted blankets for children with disabilities. Annual household income determines eligibility for a retail, at-cost, or scholarship (free) weighted blanket.

- **Covers:** Children who have disabilities.
- **Financial Eligibility:** Income limit may apply.
- **Contact:**
  - » **719-502-9391**
  - » [bensblankets@outlook.com](mailto:bensblankets@outlook.com)
  - » [www.bensblankets.org](http://www.bensblankets.org)

### **Bryon Riesch Paralysis Foundation (national, preference given to Wisconsin residents)**

Provides grants (generally up to \$10,000) for individuals with a spinal cord injury to pay for items such as van modifications, wheelchairs and ramps. Requests are reviewed quarterly.

- **Covers:** Individuals diagnosed with a neurological disorder with preference going to spinal cord injury.
- **Financial Eligibility:** Applicants must demonstrate financial need.
- **Contact:**
  - » **262-547-2083**
  - » [info@brpf.org](mailto:info@brpf.org)
  - » <http://brpf.org>

### Chelsea Hutchison Foundation (national)

Provides individuals and families desiring to purchase a trained, seizure-response dog with partial grants to cover a portion of their investment. The Foundation can also provide the latest technology for monitoring people who experience nocturnal seizures. Emfit, SAMi™ and SmartWatch monitors all provide alerts when abnormal nighttime and/or daytime movement is detected so that parents, spouses, or caregivers can respond immediately.

- **Covers:** Individuals who have epilepsy.
- **Financial Eligibility:** Unknown.
- **Contact:**
  - » 303-250-7739
  - » [info@chelseahutchisonfoundation.org](mailto:info@chelseahutchisonfoundation.org)
  - » <https://chelseahutchisonfoundation.org>

### Cherished Creations (national)

Individuals and families may make “Wish Requests” (for diversionary activities such as celebrity “meet and greets”); “Special Requests” (which address essential, practical needs, such as wheelchair ramps, electrical upgrades to accommodate portable ventilators, air conditioners, and medical equipment not covered by insurance); “Recycled Furniture/Clothing” requests; and “Other” requests (such as summer camp enrollment or educational devices for children who have a developmental disability).

- **Covers:** Children 21 and younger with a serious illness, referred by hospital staff, physician, social worker, clergy, or immediate family member of prior wish recipient.
- **Financial Eligibility:** Unknown.
- **Contact:**
  - » 908-790-0616
  - » [dpwhitney@cherishedcreations.com](mailto:dpwhitney@cherishedcreations.com)
  - » [www.cherishedcreations.com](http://www.cherishedcreations.com)

### The Childhood Apraxia of Speech Association of North America (CASANA) (national)

Provides an iPad with a case or a Tobii-Dynavox Indi with case and the Snap + Core First app installed to children with a diagnosis of apraxia of speech in order to assist with speech practice and to use as a communication tool and educational support.

- **Covers:** Children between ages 3 and 18 with a diagnosis of apraxia of speech from a speech-language pathologist and currently enrolled in speech therapy.
- **Financial Eligibility:** Income limit applies.
- **Contact:**
  - » 412-785-7072 (questions about the application must be sent in via email)
  - » [spechtablets@apraxia-kids.org](mailto:spechtablets@apraxia-kids.org)
  - » [www.apraxia-kids.org/spech-tablets-for-apraxia](http://www.apraxia-kids.org/spech-tablets-for-apraxia)

### Danny Did Foundation (national)

Provides grants for seizure detection and seizure prediction devices, as well as other technologies, that are designed to enable intervention by a caregiver. Intervention is believed to reduce the risks that accompany epilepsy.

- **Covers:** Individuals with epilepsy.
- **Financial Eligibility:** Income limit may apply.
- **Contact:**
  - » 800-278-6101
  - » [info@dannydid.org](mailto:info@dannydid.org)
  - » [www.dannydid.org/epilepsy-sudep/devices-technology](http://www.dannydid.org/epilepsy-sudep/devices-technology)



### Different Needz Foundation (national)

Provides grants for individuals with developmental disabilities and their families to get services and equipment such as physical therapy, occupational therapy, speech therapy, medical equipment, wheelchairs and lifts, adaptive bicycles/strollers/car seats, specialized summer camp, and other necessary items. Requests for tablet technology or similar devices are not accepted. Requests are reviewed once a year.

- **Covers:** Individuals with a developmental disability.
- **Financial Eligibility:** Unknown.
- **Contact:**
  - » 216-904-5151
  - » [info@differentneedzfoundation.org](mailto:info@differentneedzfoundation.org)
  - » [www.differentneedzfoundation.org](http://www.differentneedzfoundation.org)

### Eyes of Hope (national)

Eyes of Hope has three “gift certificate” programs that help individual access no-cost eye care and eye wear. “Sight for Students” provides children in need with no-cost eye care and glasses from a local doctor; “Disaster Relief” gift certificates provide no-cost eye care and replacement glasses for adults and children affected by a disaster; and “Non-Disaster” gift certificates provide adults and children in need access to a local doctor for a no-cost eye exam and glasses.

- **Covers:** Children under 19, anyone affected by a disaster, and adults with a family income limit at or under 200% of the Federal Poverty Level.
- **Financial Eligibility:** Income limit may apply; some programs are available only to those with a family income at or under 200% of the Federal Poverty Level.
- **Contact:**
  - » 888-867-8867
  - » [questions@vspglobal.com](mailto:questions@vspglobal.com)
  - » <https://vspglobal.com/cms/vspglobal-outreach/gift-certificates.html>

### Fred’s Footsteps (local, covers 9 counties in PA)

Provides interim funds for otherwise financially stable families to help them handle a financial need related to their child’s illness, disability, or traumatic injury. Financial assistance carries a maximum value of \$10,000 over the course of one year, with an average dollar amount varying depending on the request. Assistance can cover such expenses as home modifications, medical equipment, lost wages due to a parent leaving work to provide care for a child, transportation costs incurred traveling to medical facilities, and household bills put on hold due to medical expenses. All applications must be submitted by a hospital social worker.

- **Covers:** Children under the age of 18 with a serious illness, injury, or disability.
- **Financial Eligibility:** Must be a demonstrated relationship between child’s illness and family’s financial need.
- **Contact:**
  - » 484-368-3602
  - » [info@fredsfootsteps.org](mailto:info@fredsfootsteps.org)
  - » <https://fredsfootsteps.org>

### Friends of Man (national, preference given to Colorado residents)

Primarily provides financial grants to residents of Colorado, but occasionally provides financial grants to out-of-state residents. Out-of-state residents must meet the following criteria: the need is a “medical necessity”; the equipment costs \$500 or more; and the applicant has secured at least 50% of the cost. Outside Colorado, grants are limited to wheelchairs, prostheses, medical equipment, mobility equipment, and ramps. Please have your caseworker or other professional contact Friends of Man for more information.

- **Cover:** Children, families, older adults, and people with disabilities. Application MUST be completed by a referring professional on behalf of the individual.
- **Financial Eligibility:** Unknown, however Friends of Man refers to the Federal Poverty Guidelines as a screening process.
- **Contact:**
  - » [www.friendsofman.org](http://www.friendsofman.org)

### **Giving Angels Foundation (national)**

Provides financial assistance for essential therapies, life-changing equipment, essential family bills, and specialized camps. There is a maximum \$500 maximum one-time grant allowance per family. Requests are reviewed monthly.

- **Covers:** Children 21 years or younger with a physical disability or illness.
- **Financial Eligibility:** Income limits apply.
- **Contact:**
  - » 267-332-1320
  - » [grants@givingangelsfoundation.org](mailto:grants@givingangelsfoundation.org)
  - » <https://givingangelsfoundation.org>

### **Gwendolyn Strong Foundation (international)**

Makes financial grant contributions toward uncovered, tangible expenses associated with the challenges of spinal muscular atrophy (SMA). The grant will only cover a portion of the total cost and applicants must be actively fundraising to cover the rest. These SMA Community Grants range from \$250 to \$2,500 and can help with such purposes as wheelchair repairs or modifications, home modifications, accessible vehicles, standers/ specialized wheelchairs, and other assistive technology.

- **Covers:** Individuals who have been diagnosed with SMA.
- **Financial Eligibility:** No income limit.
- **Contact:**
  - » [info@thegsf.org](mailto:info@thegsf.org)
  - » [www.thegsf.org/campaigns/detail/sma\\_community\\_grants](http://www.thegsf.org/campaigns/detail/sma_community_grants)

### **The HIKE Fund (national)**

Awards grants for many types of hearing devices including, but not limited to, hearing aids, FM systems, closed caption converters, tactile units, alerting systems, and specialized sports equipment to aid children with hearing loss. Applications are reviewed quarterly.

- **Covers:** Children up to 20 years old with hearing loss and who have a prescription from an audiologist or physician.
- **Financial Eligibility:** Income limit may apply.
- **Contact:**
  - » [cbclaud@aol.com](mailto:cbclaud@aol.com)
  - » <https://thehikefund.org>

### **Holton's Heroes (national)**

Connects families with children who have post-birth brain injury with therapeutic tools and devices, enriching activities, educational information, and other resources. The focus is on providing in-home therapy items like standers, gait trainers, travel items, wheelchairs, ramps, mats, and sensory items. The organization does not offer financial assistance or grants for private therapy or medical treatments or procedures.

- **Covers:** Children who have a post-birth brain injury and are 17 years old or younger, up to 19 if they're still in school.
- **Financial Eligibility:** None.
- **Contact:**
  - » [support@holtonsheroes.org](mailto:support@holtonsheroes.org)
  - » [www.holtonsheroes.org](http://www.holtonsheroes.org)

### **I AM's Wellness Grant, through the R.E.A.C.H Program (national)**

Provides grant funding for costs associated with activities that promote physical movement. The funding period begins in April and lasts until the end of the year or until grant funds are exhausted. Funding is distributed monthly. Grants cover up to 75% of the activity cost in a given month and an overall \$500 maximum benefit. Eligible expenses include equipment rental, lessons, personal training, costs associated with participating



in sports events, and memberships/user fees. Equipment purchases are not covered. The goal of this grant is to promote health and wellness.

- **Covers:** Individuals with a spinal cord injury who are currently, or about to become members of Individual Abilities in Motion (I AM). See organizational guidelines.
- **Financial Eligibility:** None.
- **Contact:**
  - » 570-561-6139
  - » [info@individualabilities.org](mailto:info@individualabilities.org)
  - » <http://individualabilities.org/reach/i-ams-wellness-grant>

### **Kelly Anne Dolan Memorial Fund (Pennsylvania, New Jersey, Delaware)**

Provides financial assistance with expenses not covered by insurance, such as utility and phone bills; mortgage/rent; car payments; transportation cost; assistive technology; air conditioners for children with severe pulmonary, cardiac, skin, liver and kidney diseases; medically necessary dietary supplements; special foods and formulas; co-pays; child care; and funeral expenses. Assistance is paid directly to vendors or creditors. The Nancy and David Ward Adaptive Assistance Program focuses specifically on assistive technology like hearing aids, wheelchair adaptations, computers, toys, and home modifications.

- **Covers:** Families caring for children with serious, chronic, or critical illnesses, disabilities, or conditions currently requiring medical attention. Child must be a resident of, or receiving treatment in, PA, NJ, or DE.
- **Financial Eligibility:** Provides financial assistance with expenses not covered by insurance. Family must be experiencing financial challenges as a direct result of expenses related to the child's illness, injury, or disability.
- **Contact:**
  - » 215-643-0763
  - » <http://dolanfund.org>

### **Kelly Brush Foundation (national)**

Provides grants for individuals who have spinal cord injury to purchase adaptive sports equipment. Examples include handcycles, mono-skis, sport chairs, racing chairs, hockey sleds, and more. There are two grant cycles—one in the spring and one in the fall.

- **Covers:** Individuals who have paralysis caused by a spinal cord injury.
- **Financial Eligibility:** None.
- **Contact:**
  - » 802-846-5298
  - » [info@kellybrushfoundation.org](mailto:info@kellybrushfoundation.org)
  - » <https://kellybrushfoundation.org>

### **Lions Club (international)**

Lions Clubs work to improve their communities through projects and programs. Each club is unique in how it serves. Your local Lions Club may sponsor a program that provides assistance for the purchase of eyeglasses, hearing aids, health-related services, or educational needs.

- **Covers:** Varies by Lions Club.
- **Financial Eligibility:** Check with your local Lions Club.
- **Contact:**
  - » [www.lionsclubs.org](http://www.lionsclubs.org)

### **Maggie Welby Foundation (national)**

Offers grants for children and families that have a financial need for a particular purpose. Grants may extend to children and families in need of help with bills, athletic opportunities, medical needs, or an opportunity that a child would not otherwise have. All grants are awarded to the family but are paid directly to the specific purpose for which the grant was applied. Organizations that directly benefit children can also receive grants on an annual need. Grants are awarded two times a year.

- **Covers:** Foundation seeks to aid students (grades K-12) and families.
- **Financial Eligibility:** Must demonstrate financial need.
- **Contact:**
  - » 314-330-6947
  - » [info@maggiewelby.org](mailto:info@maggiewelby.org)
  - » [www.maggiewelby.org](http://www.maggiewelby.org)

### McLindon Family Foundation (national)

Provides adaptive bikes for children with a disability. In order to obtain a bike, the individual must have a physical therapist or occupational therapist who is willing to provide proper measurements, assist in completing the bike order form and send in information that an adaptive bike would benefit the individual.

- **Covers:** All ages, an array of disabilities/conditions.
- **Financial Eligibility:** All income levels.
- **Contact:**
  - » 225-456-3505
  - » [mclindonfamilyfoundation@gmail.com](mailto:mclindonfamilyfoundation@gmail.com)
  - » [www.mclindonfamilyfoundation.org](http://www.mclindonfamilyfoundation.org)

### Muscular Dystrophy Association (MDA) National Equipment Program (national)

Provides good-condition, gently used wheelchairs and other medical equipment, such as shower chairs, hospital beds, walkers, canes, communication devices, and similar items, when available and as feasible. In addition, MDA provides referrals to federal, state, and local funding resources. Because many helpful resources are community-based, you're encouraged to contact your local MDA office to learn more about those other options in your community.

- **Covers:** All ages, diagnosed with muscular dystrophy.
- **Financial Eligibility:** Income limit may apply.
- **Contact:**
  - » 800-572-1717
  - » [ResourceCenter@mdausa.org](mailto:ResourceCenter@mdausa.org)
  - » [www.mda.org/care/resource-list/equipment-assistance](http://www.mda.org/care/resource-list/equipment-assistance)

### Miracle Ear Foundation (national)

Provides financial assistance for the purchase of hearing aids. The application fee for adults, ages 19 years and older, requesting services from the Foundation is \$150. This is a non-refundable fee; please make sure you fit the eligibility criteria before applying.

- **Covers:** All ages.
- **Financial Eligibility:** Income limit applies;

applicant must have no other resource for hearing aids, such as insurance, Medicaid, Veterans Affairs, or other state or federal programs.

- **Contact:**
  - » 800-241-1372
  - » [feedback@miracle-ear.com](mailto:feedback@miracle-ear.com)
  - » [www.miracle-ear.com/foundation](http://www.miracle-ear.com/foundation)

### Mobility for Vets (national)

Matches those who need an adapted vehicle with used adapted vehicles from across the U.S. Your submission of a request will put your name in process for evaluation. The organization will contact you if a van becomes available in your area.

- **Covers:** Veterans and related adults or children.
- **Financial Eligibility:** Family must demonstrate that they do not have the resources to afford to purchase a vehicle, and is required to carry car insurance, register the vehicle, and pick it up from the donor.
- **Contact:**
  - » [info@specialkidsfund.org](mailto:info@specialkidsfund.org)
  - » [www.mobilityforvets.org](http://www.mobilityforvets.org)

### Multiple Sclerosis (MS) Foundation Grants & Programs (national)

The MS Foundation provides a number of programs and grants, including funding for emergency assistance, health and wellness, homecare, and others. The following programs address assistive technology directly:

**The Assistive Technology Program** may help locate, partially fund, or provide full funding for one of a wide range of devices that allow those with MS to function more independently in their daily lives, as well as more easily participate in recreational, educational, and vocational activities. These include aids for daily living, communication devices, computer aids, environmental control systems, home and vehicle modifications, orthotics, seating, positioning and mobility devices, aids for vision and hearing, and cooling aids.

**The Computer Program** provides laptop or desktop computers for individuals with MS on limited or fixed incomes.

**The Cooling Program** offers a variety of items,



## AT at School

Even though Maci may have been able to get her iPad through her school, Maci's mother was anxious about the time that process would take. In the end, she chose to get a PATF loan to purchase the device herself. The Mini-Loan has no fees, a 0% interest rate and was obtained quickly. While Maci and her mother have their own ways of communicating without the iPad, her new device makes communication easier with teachers, therapists and her friends—and Maci loves it!

free of charge, that will help you stay cool in the heat. Available items include cooling vests, neck wraps, wristbands, and hats.

- **Covers:** All ages, diagnosed with MS.
- **Financial Eligibility:** Income limit may apply to certain programs.
- **Contact:**
  - » 888-673-6287
  - » [support@msfocus.org](mailto:support@msfocus.org)
  - » <https://msfocus.org/Get-Help/MSF-Programs-Grants/Assistive-Technology-Program>

### My Gym Challenged America Foundation (national)

Provides funding for equipment and services up to \$500 for children with a physical, cognitive, or developmental disability, or a chronic illness. Equipment and services include but are not limited to rehabilitative therapy, assistive devices, medical equipment, and sensory items. Requests are reviewed monthly.

- **Covers:** Children 18 years old or younger with a physical, cognitive, or developmental disability, or a chronic illness.
- **Financial Eligibility:** Applicants are asked to describe financial need.
- **Contact:**
  - » 818-907-6966
  - » [info@mygymchallengedamerica.com](mailto:info@mygymchallengedamerica.com)
  - » [www.challengedamerica.com](http://www.challengedamerica.com)

### NAPA Center Kids Foundation (national)

Funds one-time grants of up to \$2,500 to individuals and families who have a catastrophic injury or illness and need financial help. Examples of items/programs that grants may be requested for include equipment such as bikes, communication devices, medical equipment, wheelchairs, intensive therapy programs, alternative therapies, summer camp, community programs, and assistance with housing costs.

- **Covers:** Children with disabilities.
- **Financial Eligibility:** Applicants must demonstrate need and lack of alternative funding sources; income limit may apply.
- **Contact:**
  - » 424-269-3400
  - » [info@napakids.org](mailto:info@napakids.org)
  - » [www.napacenterkidsfoundation.org](http://www.napacenterkidsfoundation.org)

### **National Autism Association (NAA) Give a Voice Program (national)**

Provides communication devices to individuals with autism who are non-verbal or minimally verbal, and whose communication challenges put them at increased risk of injury or harm. Technology provided includes: iPads, AppleCare+ Protection Plans, Avatalker AAC apps, and protective cases. You must include a current evaluation/recommendation from a speech/language professional.

- **Covers:** Individuals 4 years of age or older and formally diagnosed with an Autism Spectrum Disorder.
- **Financial Eligibility:** Income limit may apply, or proof of financial need.
- **Contact:**
  - » 877-622-2884
  - » [naa@nationalautism.org](mailto:naa@nationalautism.org)
  - » <http://nationalautismassociation.org/family-support/programs/naas-give-a-voice-program>

### **National Organization for Vehicle Accessibility (NOVA) (U.S. and Canada)**

This program is directed to individuals with disabilities who have secured the majority of the money needed to fund vehicle modification products and just need some additional help to reach their goal. The grant program is designed to bridge the funding gap that prevents people in need of mobility products from achieving their mobility goals. Provides vehicle modification grants to individuals with disabilities in need of financial assistance. Grants cover up to 25% of the cost of the mobility transportation equipment with a maximum award of \$5,000. Grants do not cover cost of the chassis (body of the vehicle).

- **Covers:** Individuals with disabilities of all ages.
- **Financial Eligibility:** Applicant must provide proof that all other government funding sources have been exhausted.
- **Contact:**
  - » 574-607-5995
  - » [info@novafunding.org](mailto:info@novafunding.org)
  - » <https://novafunding.org>

### **New Eyes (national)**

Provides a basic pair of prescription single or lined bifocal lenses. Application must be submitted by social service agency on behalf of the applicant.

- **Covers:** All ages.
- **Financial Eligibility:** Income limit applies (household income at or below 200% of the Federal Poverty Guidelines). Applicants must have no other resources with which to obtain a basic pair of eyeglasses.
- **Contact:**
  - » 973-376-4903
  - » [info@new-eyes.org](mailto:info@new-eyes.org)
  - » <https://new-eyes.org>

### **Pennsylvania Assistive Technology Foundation (PATF) (Pennsylvania)**

Provides zero and low-interest financial loans (there are no fees) for the purchase of assistive technology; information and assistance about assistive technology, funding resources and vendors; and financial education for people with disabilities. PATF helps Pennsylvanians of all ages, all disabilities and health conditions, and all income levels.

- **Covers:** All ages and all disabilities and health conditions.
- **Financial Eligibility:** No income limit.
- **Contact:**
  - » 888-744-1938
  - » [patf@patf.us](mailto:patf@patf.us)
  - » [www.patf.us](http://www.patf.us)

### Philadelphia Housing Development Corporation (Philadelphia, PA)

The Adaptive Modifications Program (AMP) is designed to help individuals with permanent physical disabilities live more independently in their homes. It provides free adaptations to a house or an apartment, allowing easier access to and mobility within the home.

- **Covers:** Renters or homeowners who have a disability.
- **Financial Eligibility:** Income limits apply.
- **Contact:**
  - » 215-448-2160
  - » <https://phdchousing.org/home-repair/adaptive-modifications-program/>

### [www.ramps.org](http://www.ramps.org) (national; in PA: Monroe County)

Resource list of organizations by state who fund and/or build accessibility ramps for free.

- **Covers:** All ages.
- **Financial Eligibility:** Check with each individual organization for eligibility guidelines.
- **Contact:**
  - » 847-680-7700
  - » [www.ramps.org/projects-pennsylvania.htm](http://www.ramps.org/projects-pennsylvania.htm)

### Rise Again (national)

Provides grants to assist with the costs to purchase specialized therapy devices and mobility equipment to individuals and organizations that treat those with spinal cord illness or injury.

- **Covers:** Individuals with a spinal cord injury or illness.
- **Financial Eligibility:** Applicants must provide documentation of insurance denial (if applicable).
- **Contact:**
  - » 724-790-4818
  - » [riseagainsci@gmail.com](mailto:riseagainsci@gmail.com)
  - » [www.riseagainsci.org/grant-applications](http://www.riseagainsci.org/grant-applications)

### Schrenk Foundation (C.W. and Marjorie J. Schrenk Family Foundation) (Bucks County, PA)

Specializes in fulfilling unmet needs for persons living in Bucks County, PA. Gift recipients are usually ineligible for help from government agencies and other private sources, or available funds simply do not stretch far enough to cover all the needs. Gifts are not large enough to pay for adapted vans or extensive home modifications, but this foundation may give part of the money if the individuals or family can raise the balance needed. To apply, contact the foundation by telephone and ask for application guidelines.

- **Covers:** All ages.
- **Financial Eligibility:** Contact for more information.
- **Contact:**
  - » 215-355-3333

### Self-Determination Housing Project of Pennsylvania (Pennsylvania)

Provides financial grants to make homes more accessible. The homeowner must be current with real estate taxes and cannot be in the process of foreclosure. Every homeowner must have current homeowner's insurance. Applicants who rent a home or apartment must have written approval from the landlord to modify the unit, and a commitment to correct any code violations.

- **Covers:** Individuals with disabilities of all ages.
- **Financial Eligibility:** Annual gross household income must fall at or below 80% of the median income or 235% of Federal Poverty Level, whichever is higher, as set by HUD.
- **Contact:**
  - » 877-550-7347
  - » [www.sdhp.org](http://www.sdhp.org)

### Sharing the Weight (national)

Provides free, weighted blankets to children who could benefit from one.

- **Covers:** Children.
- **Financial Eligibility:** No income limit.
- **Contact:**
  - » [www.sharingtheweight.org](http://www.sharingtheweight.org)





# Creative Funding

Alejandra, whose health insurance does not cover hearing aids, was able to purchase hers using funding from Starkey Hearing Foundation. Starkey charges a \$125 application processing fee per hearing aid and Alejandra used a PATF zero-percent interest Mini-Loan to cover that fee.

## Small Steps in Speech (national)

Provides financial grants for supplemental therapies/treatments to assist children with speech and language. Grants are not available for Applied Behavior Analysis therapy or tablet technology. Grants are available for relevant apps. Applications for grants for assistive technology require a formal Augmentative and Alternative Communication Evaluation from a qualified service provider. Requests are reviewed quarterly.

- **Covers:** Children between ages 3 and 22 years of age.
- **Financial Eligibility:** Grants are not based solely on financial need. Applications will not be accepted for a joint family income more than \$125,000.
- **Contact:**
  - » 888-577-3256
  - » [info@smallstepsinspeech.org](mailto:info@smallstepsinspeech.org)
  - » [www.smallstepsinspeech.org](http://www.smallstepsinspeech.org)

## Special Kids Fund—Wheelchair Van Assistance Fund (national)

Match those who need adapted vans with used adapted vans across the U.S. Through Crowdfunding Campaigns, they also raise funds to refurbish vehicles and help individuals fund vans for their personal family needs with their own appeals. If requesting a van, please do not call, instead use the form on the website.

- **Covers:** All ages.
- **Financial Eligibility:** Applicants must demonstrate that they do not have the resources to afford a vehicle on their own. They will also be required to carry car insurance, register the vehicle, and pick it up from the donor.

- **Contact:**
  - » 732-397-5056
  - » [Info@SpecialKidsFund.org](mailto:Info@SpecialKidsFund.org)
  - » [www.specialkidsfund.org](http://www.specialkidsfund.org)

## Stepping Stones for Stella (national)

Provides sturdy, light-weight, all-terrain Buggies to children with physical disabilities to increase outdoor mobility, including moving across sand, gravel, dirt, grass, and even snow. The buggy program is currently for children ages 2-11 years old with a weight limit of 60lbs. The buggies require a child to have independent head and trunk control.

- **Covers:** Children between the ages of 2-11 who have a physical disability.
- **Financial Eligibility:** No income limit.
- **Contact:**
  - » 617-785-0076
  - » [steppingstonesforstella@gmail.com](mailto:steppingstonesforstella@gmail.com)
  - » [www.steppingstonesforstella.org](http://www.steppingstonesforstella.org)

## Starkey Hearing Foundation (International)

Provides new, top-of-the-line, customized digital hearing aids to individuals who have hearing loss and are unable to afford hearing aids.

- **Covers:** Individuals with hearing loss in need of hearing aids.
- **Financial Eligibility:** Income limit applies.
- **Contact:**
  - » 800-328-8602
  - » [hearnow@starkeyfoundation.org](mailto:hearnow@starkeyfoundation.org)
  - » [www.starkeyhearingfoundation.org/hear-now](http://www.starkeyhearingfoundation.org/hear-now)



### Sunshine Foundation (national)

Answers the dreams of chronically ill, seriously ill, physically challenged, and abused children ages three to eighteen, whose families cannot fulfill their requests due to financial strain that the child's illness may cause. Requests vary and have included assistive technology, but the most common request is a trip to Disney World or other Orlando parks. It can take up to three months to process an application and provide a decision to the family.

- **Covers:** Children 3–18 with a lifelong, severe, or chronic condition.
- **Financial Eligibility:** Income limit applies.
- **Contact:**
  - » 215-396-4770
  - » [info@sunshinefoundation.org](mailto:info@sunshinefoundation.org)
  - » [www.sunshinefoundation.org](http://www.sunshinefoundation.org)

### TechOWL (Pennsylvania)

TechOWL (formerly known as Pennsylvania's Initiative on Assistive Technology) is a program of the Institute on Disabilities at Temple University. TechOWL's mission is to increase awareness, access, and acquisition of assistive technology (AT) for all people with disabilities. Services include information and referral, device demonstrations, and training and technical assistance. TechOWL administers the following programs:

**Reused and Exchanged Equipment Partnership (REEP)** provides free online classifieds to find, buy, sell, or donate previously owned assistive technology.

**Pennsylvania's AT Equipment Lending Library** enables individuals to borrow a wide range of assistive technology devices.

**Telecommunication Device Distribution Program (TDDP)** provides free, specialized equipment such as amplified phones, talking phones with large displays, voice-activated dialers, flashing light signalers, and captioned phones.

**iCanConnect**, the National Deaf-Blind Equipment Distribution Program (NDBEDP) in Pennsylvania, provides low-income individuals who have combined hearing and vision loss access to telephone, advanced communications, and information services.

- **Covers:** All ages and individuals with disabilities.
- **Financial Eligibility:** Income limits apply for the TDDP.
- **Contact:**
  - » 800-204-7428
  - » [atinfo@temple.edu](mailto:atinfo@temple.edu)
  - » <https://techowlpa.org>

### Travis Roy Foundation (national)

Offers grants to individuals with a spinal cord injury for adaptive equipment which enable independence. Examples include wheelchairs, vehicle modifications (i.e., hand controls or lifts), small home modifications including ramp and lift installation, computers, bed/mattress, shower chairs, and lifts. Exercise and recreational equipment are not covered. Average grants are \$2,000, with a maximum of \$5,000; there is no minimum award. Requests are reviewed monthly.

- **Covers:** Individuals with a spinal cord injury caused by an accident, not from complications caused at birth. No age requirement.
- **Financial Eligibility:** Applicants must demonstrate financial need.
- **Contact:**
  - » [info@travisroyfoundation.org](mailto:info@travisroyfoundation.org)
  - » [www.travisroyfoundation.org](http://www.travisroyfoundation.org)

### Twilight Wish (national)

Provide grants to adults older than 65 years who do not have the ability to fulfill their own wishes for themselves. There are four programs; The Simple Needs Twilight Wish program covers anything from assistive technology to food and clothing; the Celebrating a Life Twilight Wish program covers meaningful and nostalgic wishes for hospice patients, persons 90 years and older, or recipients with limited life experience; the Living Life to the Fullest Wish program includes things like riding a motorcycle, having a book published, and more; and the Veterans' Wishes program grants any of the above wishes to veterans.

- **Covers:** Adults older than 65 years, or a permanent resident of an eldercare facility.
- **Financial Eligibility:** Income limit may apply.
- **Contact:**
  - » 877-893-9474
  - » <https://twilightwish.org>

### UCP Elsie S. Bellows Fund (national)

Provides grants through United Cerebral Palsy's local affiliates for the purchase of assistive technology equipment or repairing assistive technology for individuals with disabilities and their families. Examples include wheelchairs, computer equipment, hearing aids, vehicle modifications, and home modifications.

- **Covers:** Individuals with disabilities and their families.
- **Financial Eligibility:** Applicant must be in financial need without other funding resources.
- **Contact:**
  - » 800-872-5827
  - » [info@ucp.org](mailto:info@ucp.org)
  - » <http://ucp.org>

### Variety—the Children's Charity (of Pittsburgh) (local, 42 counties in PA and 12 counties in WV)

Through the "My Bike," "My Stroller," and "My Voice" programs, Variety provides Rifton adaptive bikes, Kid Kart Mighty Lite adaptive strollers, and communication devices to children with disabilities.

- **Covers:** Children ages 4 through 21 years old with a physical, mental, and/or sensory disability for bikes and strollers; children ages 4 through 21 years old who have a need for a communication device.
- **Financial Eligibility:** Income limit applies.
- **Contact:**
  - » 724-933-0460
  - » [info@varietypittsburgh.org](mailto:info@varietypittsburgh.org)
  - » [www.varietypittsburgh.org](http://www.varietypittsburgh.org)

### Wheelchairs 4 Kids (national)

Provides assistive technology for children that have limited mobility due to illness, accident, or abuse with the following four areas of focus:

**Wheelchairs:** New or nearly new wheelchairs are provided for children who have outgrown their current equipment or need a chair with more features and support.

**Vehicle Modifications:** Wheelchair ramps for vans and SUV's that meet certain criteria. The parent or guardian must own the vehicle or provide a notarized letter from the owner permitting the modification.

**Home Modifications:** Can include ramps, door widening, grab bars, etc. The parent or guardian must own the home or provide a notarized letter from the owner permitting the modification.

**Assistive Devices:** Provides a myriad of assistive devices such as Hoyer lifts, standers, gait trainers, bathing solutions, etc.

- **Covers:** Children under 21 who have limited mobility due to illness, accident, or abuse.
- **Financial Eligibility:** Proof of insurance denial is requested.
- **Contact:**
  - » 727-946-0963
  - » [info@wheelchairs4kids.org](mailto:info@wheelchairs4kids.org)
  - » <https://wheelchairs4kids.org>

## CHAPTER 6

# Saving for Assistive Technology: ABLE Accounts and Special Needs Trusts

ABLE accounts and Special Needs Trusts can help you and your family have greater control of your finances and plan for a more financially secure future. These types of accounts protect your eligibility for public benefits while allowing you to safely save money. Because the monies in these accounts do not count as an asset, they will not put your government benefits in jeopardy.

Setting up the right account for you can seem complicated and it may be difficult to know which options fit you best. The most significant difference between an ABLE account and a Special Needs Trust is that an individual with a disability (i.e., the beneficiary) may have the ability to control the funds that are in an ABLE account; whereas, the beneficiary cannot control the funds that are available in a Special Needs Trust. Depending on your situation, you may prefer one

account over the other, or you may choose to have both types of savings accounts. There is no one right answer, and the more you know the easier it will be to determine the best place(s) for you to save your money.

The chart on the following pages will help you understand and compare ABLE accounts and Special Needs Trusts, as you determine how each option might work for you.



Joy and Jill used a combination of monies saved in their ABLE accounts and their Special Needs Trusts to purchase their adapted van.

## Comparing ABLE Accounts and Special Needs Trusts

Account Type	ABLE Accounts	Special Needs Trusts			
		First Party		Third Party	
		Pooled	Individual	Pooled	Individual
<b>Set Up By</b>	Person with a disability, parent, guardian, or someone who has power of attorney. Enrollment available at PAABLE.gov	Person with a disability, parent, guardian, or a court.	Person with a disability, parent, guardian, or a court.	Anyone except the individual with the disability.	
<b>Funded By</b>	Anyone (including self). Contributions by other people should be made directly to account.	Individual with the disability (e.g., inheritance, law suit).		Anyone except the individual with the disability.	
<b>Who is Eligible?</b>	Anyone who has a qualifying disability with an onset prior to age 26. A qualifying disability is one that entitles you to Social Security disability benefits (SSI or SSDI). If not eligible for SSI or SSDI, a person may also self-certify.	Beneficiary meets Social Security Administration's definition of "disabled," generally. There are no age restrictions for a First Party Pooled Trust or a Third Party Pooled or Individual Trust. The First Party Individual Trust must be set up for an individual with a disability prior to the age of 65.			
<b>Who Makes Spending Decisions?</b>	The beneficiary (individual with a disability), guardian and/or "authorized representative".	Trustee (not the beneficiary)			
<b>Number of Accounts</b>	One (1) per individual.	An individual may have more than one type of Special Needs Trust.			
<b>Costs</b>	No set-up fee. The annual fee is \$60 (\$15 per quarter); however, if electronic delivery is selected, the annual fee is reduced to \$45. Additionally, there are investment fees ranging from 0.34% to 0.38%, depending on the options selected. For the checking account option (provided through Fifth Third Bank), there is a monthly service fee of \$2.00, which is waived if there is e-delivery of account statements or the average monthly balance is at least \$250.	The costs vary depending on who sets up and administers the Trust(s). Some companies do not charge a fee to set up a Pooled Trust and the annual administration fee can be as low as \$500 a year (for amounts under \$5,000). The set-up costs for First Party (Individual) and Third Party can be as low as \$2,000 for attorney fees plus a minimum of 1% on assets (\$500 minimum) for annual Trustee fees. Family members or close family friends may be willing to serve as a Trustee without charging any fees. A professional will charge an annual fee based on the account balance. (The percentage of the fee is usually higher on a smaller Trust.)			
<b>Is the Interest on the Account Taxed?</b>	Not when in the account. Distributions for qualified expenses are tax free.	Yes			
<b>Deposit Restrictions</b>	IRS Yearly Gift Limit (\$15,000 in 2018). Additional contributions may be allowed for employed account owners in certain circumstances.	None			

Account Type	ABLE Accounts	Special Needs Trusts			
		First Party		Third Party	
		Pooled	Individual	Pooled	Individual
<b>Balance Restrictions</b>	It's possible to save up to \$100,000 without adversely affecting eligibility for Supplemental Security Income (SSI). Above that, SSI will be suspended but not terminated. Medical Assistance ("Medicaid") will continue.	None			
<b>What Can the Funds Be Used For?</b>	Funds can be used on qualified expenses, including assistive technology, housing, basic living expenses, education, transportation, and more. There are penalties if used on unqualified expenses. Funds used for housing or non-qualified expenses may impact taxes and benefits if not used within the same month. (See PAABLE.gov.)	Funds may be used for any expenses the Trustee deems appropriate. However, if Trust funds are spent on food and housing (shelter), this may jeopardize the beneficiary's ability to collect Supplemental Security Income (SSI) or other government benefits and may result in the payment of penalties.			
<b>What Happens After Death?</b>	Funds from the ABLE account may be used to pay for outstanding qualified expenses, including funeral and burial expenses. Any remaining funds are distributed according to the individual's estate plan or according to Pennsylvania's intestacy law. An individual or family can also choose to roll-over the remaining money to an eligible sibling's ABLE account. Estate Recovery rules may apply if the beneficiary dies after turning age 55 and if remaining ABLE account funds are transferred to the estate.	Medicaid payback may be avoided by permitting the trust (non-profit) to keep the assets upon the death of the beneficiary in order to help other individuals with disabilities.	The trust agreement must grant Medicaid the first right of recovery against the trust assets upon the beneficiary's death.	The grantor can determine how the remaining trust assets are to be disbursed at the death of the beneficiary.	
<b>Pennsylvania-Only Benefits</b>	Contributions to a PA ABLE account are PA state income tax deductible up to \$15,000 per person. Monies remaining in an ABLE account after the beneficiary dies are not subject to PA inheritance tax. The account is protected in state legal proceedings from the beneficiary's creditors and the creditors of others who contributed to the account.	None			



The Pennsylvania ABLE Savings Program is administered by the Pennsylvania Treasury Department. Before investing, please carefully read the Disclosure Statement (available at **PAABLE.gov** or by calling **855-529-2253**) to learn more about the program, including its effect on federal and state benefits, investment objectives, risks, fees, and tax implications.



# Acknowledgments

There are many people and organizations whose contributions were critical to the success of this project.

I first want to recognize the significant funding support we received from the Donald B. and Dorothy L. Stabler Foundation. Early on, the Directors of the Stabler Foundation recognized the importance of giving people with disabilities and their families the power of information and the ability to access all of the various resources here in Pennsylvania.

The original concept for this Guide came from Kentucky Assistive Technology Service Network (KATS Network) and their publication *The Buck Starts Here*. Many other state assistive technology programs and Alternative Financing Programs have created a similar guide for residents of their own states. We are happy to join this distinguished company.

I also want to recognize the many individuals who have made important contributions to the production of this Guide. These include Jeffry Parker, former PATF Board member, who wrote the Foreword and helped ensure that the project kept moving ahead; Marjorie Wood, another former PATF Board member who, along with her team of Elks Home Service staff, identified many important local resources; Joan Martin, Vini Portzline, and Tina Fenstermaker who helped us in our early versions of the Guide; and, Andy Zahn, the graphic designer who created this Guide's unique look. Finally, I recognize the hardworking members of PATF's staff who joined me in writing and editing this Guide—Tracy Beck, Susie Daily, Sue Davis, Katherine Singh, and Josephine Tramontano.



**Susan Tachau**

Chief Executive Officer

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