



## **APPLYING FOR PERSONAL CARE SERVICES FOR CHILDREN WITH DISABILITIES**

Through this fact sheet, DRN seeks to provide you with some background about personal care services and some practical information on how you can apply for such services.

### **I. ELIGIBILITY FOR PERSONAL CARE SERVICES**

In Pennsylvania, all children under age 21 who have serious disabilities are entitled to Medical Assistance benefits regardless of their parents' income. Under the Early Periodic Screening Diagnostic and Treatment program (EPSDT), Medical Assistance-eligible children have an entitlement to all services covered by federal law that are medically necessary, including for example, physicians' services, dental services, in-home nursing services, augmentative communication devices, and hearing aids.

Personal care services are a Medical Assistance benefit that children under age 21 can receive if medically necessary. Personal care services are services prescribed by a physician that are designed to provide assistance to individuals with their activities of daily living (e.g., getting up, dressing, bathing, grooming, toileting, eating, and meal preparation). Personal care services are NOT behavioral health services. They are meant solely to

assist the child with activities of daily living and are not therapeutic in nature.

The federal government has provided guidance explaining that personal care services are not only available to individuals with physical disabilities but are also available to individuals whose inability to meet their daily care needs are due to cognitive impairments. While personal care services most commonly take the form of hands-on assistance, assistance can also be in the form of cuing to perform tasks if that is what is needed. As a result, families of youngsters with a wide range of disabilities that result in a need for assistance to perform their daily living activities are entitled to receive personal care services from the Medical Assistance program.

Personal care services are only provided to children when the parents are not able or available to provide the care themselves (e.g., the child is at school;

the parents need to work, sleep, or attend to other responsibilities; or the parents are unable to lift the child).

## **II. HOW TO APPLY FOR PERSONAL CARE SERVICES**

The application process for personal care services is substantially the same regardless of whether the child is enrolled in a Medical Assistance HMO (health maintenance organization), also known as the HealthChoices program, or receives Medical Assistance through the “fee-for-service” (FFS) system. Please note, however, that the request for personal care services

for those in the HealthChoices program should be submitted to the child's physical health HMO – not to the child's behavioral health MCO (managed care organization). The family should request that the child's doctor (preferably his or her primary care pediatrician) write a letter of medical necessity. The letter should include ALL the following information:

- An explanation of the child's disability; a detailed description of the activities of daily living that the child cannot undertake on his or her own or without assistance (e.g., getting up, bathing, dressing, grooming, eating, meal preparation, toileting).
- An explanation as to why the parents are "unable" or "unavailable" to take care of the child's activities of daily living (e.g., parent works; parent must attend to needs of other children; parent needs time to perform necessary household activities such as shopping or laundry; parent has a disability; services are needed at school).
- An exact request for the number of hours per week of personal care services needed (and, if appropriate, the days of the week on which services are needed), which should relate to the purpose of the personal care.

The family should submit the letter of medical necessity to the home health agency that it will want to perform the personal care services. The home health agency will then have the application processed through the proper channels, either at the child's physical health HMO (for those in HealthChoices) or the Department of Public Welfare (DPW) (for those in the fee-for-service program). Although the letter can be submitted directly to

the child's HMO or DPW, it is preferable for the family to select a home health agency and have the home health agency communicate with the HMO or DPW.

For persons in the HealthChoices system, the family can contact the HMO's Special Needs Unit for help in identifying home health agencies. Home health agencies are also listed in the Yellow Pages. A family can contact an agency to inquire whether it accepts clients on Medical Assistance; whether it provides personal care services to children; and, for a family whose child is in an HMO, whether the agency is in the HMO's network. Families also may want to contact other families of children with disabilities who have personal care services for recommendations of home health agencies.

Personal care services can also be provided by an individual enrolled with the Medical Assistance HMO or FFS system, rather than a home health agency. The individual must be at least 18 years of age, pass appropriate background checks, and not be a legally responsible relative. An HMO need not contract with an individual if it has adequate coverage for the service within its existing network. However, this is a useful option in some cases where a home health agency is not able to consistently meet the need.

After the home health agency forwards the request for personal care services to the child's HMO, the HMO either must make a decision within two (2) business days or must request additional information within 48

hours. If the HMO requests additional information, it must make a decision on the request within two (2) business days of receipt of the additional information. For children in the fee-for-service system, DPW must make a decision on the request for personal care services within 21 days.

## **Contact Information**

If you need more information or need help, please contact Disability Rights Network of Pennsylvania (DRN) at 800-692-7443 (voice) or 877-375-7139 (TDD). The email address is: [intake@disabilityrightspa.org](mailto:intake@disabilityrightspa.org).

The mission of the Disability Rights Network is to advance, protect, and advocate for the human, civil, and legal rights of Pennsylvanians with disabilities. Due to our limited resources, the Disability Rights Network cannot provide individual services to every person with advocacy and legal issues. The Disability Rights Network prioritizes cases that have the potential to result in widespread, systemic changes to benefit persons with disabilities. While we cannot provide assistance to everyone, we do seek to provide every individual with information and referral options.

**IMPORTANT: This publication is for general informational purposes only. This publication is not intended, nor should be construed, to create an attorney-client relationship between the Disability Rights Network and any person. Nothing in this publication should be considered to be legal advice.**

**PLEASE NOTE: For information in alternative formats or a language other than English, contact the Disability Rights Network at 800-692-7443 Ext. 400, TDD: 877-375-7139 or [intake@disabilityrightspa.org](mailto:intake@disabilityrightspa.org).**