

CHAPTER 17

PERSONAL SUPPORT TECHNOLOGY

I. Personal Support Technology

Personal Support Technology Service is an electronic monitoring device or system that supports individuals with developmental disabilities to be independent in the community or in their place of residence with limited assistance or supervision by paid staff. Examples of electronic monitoring devices include but are not limited to electronic medication boxes, electrical vital signs monitors, and remote video cameras.

1. SCOPE OF SERVICE

A. Personal Support Technology shall include, but is not limited to:

1. Installation of electronic devices;
2. Rental of electronic device;
3. Maintenance fee for the electronic device;
4. Daily/monthly monitoring charges;
5. Educating the individual and their family or direct support personnel in the use of the device; and
6. Staff paid to provide assistance in response to events identified through monitoring, unless a natural support has been pre-arranged to provide such response.

2. SERVICE REQUIREMENTS

- A. **Response to the need for assistance:** When the monitoring service/device indicates that the individual with developmental disabilities needs assistance, on-call supports shall be promptly available to provide assistance. Such response may consist of an on-site visit, phone guidance to the individual, or calling 911 on behalf of the individual, depending upon the nature of the situation. On-call supports shall be delivered by paid staff of the Personal Support Technology Provider unless a natural support has committed to provide such response when needed.
- B. **Exclusions and Restrictions:** Non-Waiver funds shall not be permitted to upgrade or augment the monitoring system.
- C. **General Events Reporting:** The Personal Support Technology Provider shall enter General Events Reporting into Therap if response to need for assistance from paid staff

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includes calling 911 or relates to one of the other significant events requiring GER submittal.

3. AGENCY REQUIREMENTS

- A. Personal Support Technology Service providers must make available consumer friendly informational materials that outline their products, product reliability and costs.
- B. The Personal Support Technology Provider Agency shall comply with all applicable federal, and state rules as well as DOH / DDS policies and procedures.
- C. **Provider/Agency Records:** The Personal Support Technology provider will maintain documentation in the form of a log to include:
 - 1. Proper identification included on all pages of documents;
 - 2. Description of expenditures including signature of authors on all documents;
 - 3. Expenditure amounts for the following categories:
 - a. Installation cost;
 - b. Rental costs;
 - c. Maintenance expenditures;
 - d. Monitoring charges; and
 - e. Response (fifteen (15) minute increments) for staff that support the individual when the device is activated.
 - 4. Receipts for all above must be maintained including any estimates that have been received;
 - 5. Upon request the Personal Support Technology Provider will submit a copy of the Personal Support Technology response log to the Case Manager; and
 - 6. The Personal Support Technology Provider shall develop and implement policies and procedures that comply with these standards.

4. REIMBURSEMENT

- A. All Personal Support Technology/Onsite Response Provider Agencies shall maintain all records necessary to fully disclose the type, quality, quantity, and clinical necessity of services furnished to individuals who are currently receiving services. The provider agency

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records shall be sufficiently detailed to substantiate the date, time, individual name, servicing provider agency, nature of services, and length of a session of service billed. Providers are required to comply with the New Mexico Human Services Department Billing Regulations.

B. Billable Unit:

1. The reimbursement unit for installation, rental, and/or maintenance of electronic devices is one (1) dollar.
2. Reimbursement for staff to respond when individual needs assistance is a fifteen (15) minute unit equal to the rate established for Customized In-Home Supports Aide.

C. Billable Activity:

1. Purchase of monitoring device(s);
2. Installation of monitoring device(s);
3. Educating individual and their family and/or direct support personnel on use of monitoring device(s);
4. Monitoring of the individual's status via installed devices; and
5. On call response when the device is activated indicating a need for assistance.

D. Service Limitations: This service is limited to a one time installation fee and ongoing monitoring up to \$2,500 per ISP year.

E. Non Billable Services, Activities or Situations:

1. Services provided to an individual who is:
 - a. Not residing in New Mexico;
 - b. Not eligible for DDW services; or
 - c. Hospitalized or in an institutional care setting.
2. Services not included in the:
 - a. Scope of Services; and
 - b. Individual's approved ISP.

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