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Assistive Technology used to Support People in their Homes

Overview

Assistive technology is "any item, piece of equipment, product, or system, whether acquired commercially, modified, or customized, that is used to increase, maintain, or improve functional capabilities of individuals with disabilities." In recent years, there has been increasing focus on the use of assistive technology (AT) to increase the cost effectiveness of home and community based services for seniors and people with disabilities. States use various funding mechanisms to the cover the costs of AT, as most private insurance plans and Medicare limit the types and costs they will cover.

NASUAD surveyed its members to learn more about the types of AT states are paying for to support people living at home. Twenty states responded to this request: Arizona, Arkansas, Colorado, Delaware, Illinois, Indiana, Iowa, Kansas, Maryland, Massachusetts, Minnesota, Missouri, Montana, Nevada, New Mexico, North Carolina, Ohio, Oklahoma, Oregon, and Texas.

Response Summary

Types of assistive technology funded by state agencies on aging and disabilities:

- Seventeen states fund some type of personal emergency response system (PERS).
- Six states fund technology to support home and/or vehicle modifications.
- Three states (Colorado, Iowa, and Minnesota) use telehealth/telemedicine.
- Three states (Colorado, Maine, and Minnesota) use telemonitoring or wander locating.
- Two states (Minnesota and Texas) use remote medication management / automated medication dispensing.

Rate of reimbursement for technology:

- PERS reimbursement ranged from \$25-\$60 for installation and \$25-\$60 for a month rate.
- For other Emergency Response Systems, Ohio offers \$92.70 and Oregon offers between \$20-\$50/month.



- Vehicle and environmental modification reimbursement varied. Indiana offers a lifetime cap of \$15,000 for vehicle/environmental modifications, while Minnesota and Nevada offer \$10,000/year and \$3,230/year, respectively, for home/environmental modifications.
- Kansas offers a lifetime limit of \$7,500 for other Assistive Technology, while Minnesota has no limit unless the technology is covered by the state plan.
- Kansas offers \$70 for telehealth installation and \$6 a day for rental.
- Texas offers \$40-\$50/month for automated medication dispensing.

State funding sources for the costs of assistive technology					
State	Medicaid 1915(c) home and community based services waivers	Other Medicaid funding (e.g. State Plan, Section 1115, Money Follows the Person)	State- funded home and community -based services	Older Americans Act funding	Other
Arizona			х	х	
Arkansas	х				
Colorado	х	x	х	х	
Delaware		x	х	х	
Illinois	х	х	х		
Indiana	х	х	х	х	Social Services Block Grant(SSBG)
lowa	х			х	
Kansas	х				
Maryland	х	х			
Massachusetts	х	х	х	х	
Minnesota	х	х	х	х	
Missouri					
Montana	х				
Nevada	х	х			
New Mexico					Insurance and private funds.
North Carolina			х	х	Social Services Block Grant (SSBG)
Ohio	х		х	х	County Senior Service Levy dollars
Oklahoma	х				·
Oregon	х				
Texas	Х		х	х	



Who monitors the devices and their use to assure that they are working well and meeting the needs of consumers?

- Most states explained that either the provider of the service, the state/local case managers, or both were monitoring these devices.
- North Carolina said the consumer and/or their family members monitor their own devices.

When a consumer's needs change and/or a device needs to be changed or repaired, to whom is this reported?

- Most states explained that either the provider of the service, the state/local case managers, or both could report this need/change.
- A few states suggested that the consumer would be the first line of reporting.

Participant-directed budget to purchase technology:

Seven states (Illinois, Maryland, Minnesota, Montana, New Mexico, North Carolina, and Oregon) allow consumers to purchase their own technology using a participant-directed budget. Oregon and Illinois explained that very few consumers were currently using these funds to purchase technology.

For more information contact Kelsey Walter: kwalter@nasuad.org