

Personal Emergency Response System (PERS)

The service definition and limits outlined below do not include all details and requirements. For the service standards, limitations, provider types and qualifications, and reimbursement information, refer to the appropriate Medicaid HCBS DD Waiver.

Waiver Availability

Comprehensive Developmental Disabilities (CDD) Waiver
Developmental Disabilities Adult Day (DDAD) Waiver
Family Support Waiver (FSW)

Service Definition

PERS is an electronic device used by a participant to call for help in an emergency. When a PERS button is pushed, the device contacts a designated person or call center.

Conditions of Provision

- A. A participant chooses each service based on their needs.
 - 1. Services should increase independence and community integration; and
 - 2. The chosen waiver services and who provides them are documented in the participant's Individual Support Plan (ISP).
- B. The Personal Emergency Response System includes:
 - 1. Providing instruction to the participant about how to use the device;
 - 2. Making sure the call center will respond 24 hours per day, 7 days per week;
 - 3. Replacing a PERS device when needed within 24 hours of notification;
 - 4. Updating a list of contacts at least twice a year;
 - 5. Monthly testing of the PERS device; and
 - 6. Providing ongoing assistance.
- C. PERS is not a habilitative service.
- D. PERS has the following limitations:
 - 1. PERS cannot be used by a participant who lives in a provider owned or leased, operated, or controlled setting unless a participant has a transition plan which outlines how PERS will assist them to move to an independent setting within 6 months. When there is no transition plan, PERS cannot be authorized for a participant receiving Residential Habilitation or Therapeutic Residential Habilitation.
 - 2. PERS cannot overlap with, replace, or duplicate other similar services provided through Medicaid.

Provider Requirements

The information outlined below does not include all provider requirements. It is intended to be general information about providers of this specific DD service.

- A. All providers of waiver services must:
 - 1. Be a Medicaid provider;
 - 2. Comply with all applicable Titles of the Nebraska Administrative Code and Nebraska State Statutes;
 - 3. Adhere to standards as described in the Division of Medicaid and Long-Term Care Service Provider Agreement;
 - 4. Complete DHHS trainings upon request; and
 - 5. Use universal precautions.
- B. PERS can be offered by a vendor.
 - 1. A vendor is a company or agency enrolled as a Medicaid provider, but not certified as a DD provider.
- C. PERS cannot be self-directed.
- D. A relative of the participant, but not a guardian or other legally responsible person of the participant may provide PERS when they meet other requirements. Since this service is only available from vendors, the relative would need to be an employee of a vendor.

Rates

- A. PERS must be purchased within a participant's annual individual budget amount.
- B. PERS is reimbursed at a one-time installation fee and a monthly rental fee.
- C. A vendor cannot charge more than they would to the general public. A vendor who offers a discount to a certain group of people, such as students or senior citizens, must offer the same discount to a participant in that group.
- D. The cost of transportation is not included in the rate for PERS.