



## DISCUSSION:

TeleCare is a model of service that employs technology with services to empower people with chronic conditions to remain independent. TeleCare integrates social and healthcare services with technology to sustain and promote quality of life and reduce unnecessary institutionalization. By utilizing in-home technology, Pennsylvania will have more options to assist and support individuals so that they can remain in their own homes. TeleCare complements home and community based services by facilitating timely and equitable resource allocation based on participant needs and improvement to quality of life.

TeleCare services are to be utilized for participants where there is a demonstrated need for the services and it has been determined that the services are not covered under Medicare or other third party resources. In instances where Medicare or other third party payer services are in place, TeleCare services will not be approved by the case manager and AAA nursing staff. TeleCare services are to be provided in an efficient manner, preventing duplication of services, unnecessary costs and unnecessary administrative tasks.

The participant's home must be evaluated by the service provider to ensure that there is an adequate living environment with sufficient utilities to meet the manufacturer's specifications for TeleCare equipment. TeleCare Services that are web-based must be HIPAA compliant. The documentation collected from the use of TeleCare services must be available to the AAA and Office of Long-Term Living (OLTL) upon request from the provider. All reports and data must be maintained by the provider and made available for at least 3 years past removal of the equipment. Providers shall assure that individuals providing services meet Medicare qualifications and standards; and that equipment meets all manufacturers' qualifications and standards for the appropriate type of TeleCare services.

Participant service plans including TeleCare services must adhere to Pennsylvania Department of Aging, Office of Long-Term Living policies for Service plan review as outlined in APD # 06-01-03. TeleCare services are not to be used as a one time emergency service. The Older Adults Protective Services Act, the Department of Aging's APD# 09-01-01, Incident Reporting Policy and Neglect of a Care Dependent Person are all applicable to recipients of this service.

The following types of services are included under the umbrella of TeleCare services.

***Health Status Measuring and Monitoring:*** Using wireless technology or a phone line, this service includes electronic communication between the participant and healthcare provider that focuses on collecting health related data, i.e., vital signs information such as pulse and blood pressure that assists the healthcare provider in assessing the participant's condition, and providing education and consultation.

***Activity and Sensor Monitoring:*** This service employs sensor-based technology on a 24 hour/7 day basis by remotely monitoring and passively

tracking participants' daily routines and may report on the following: wake up times, overnight bathroom usage, bathroom falls, medication usage, meal preparation and room temperature.

**Medication Dispensing and Monitoring:** This service assists participants by dispensing and monitoring medication compliance. A remote monitoring system is personally pre-programmed for each participant to dispense and monitor compliance and notifies the provider or family caregiver of missed doses or non-compliance with medication therapy.

## ELIGIBILITY

To qualify for TeleCare services, the participant must be clinically eligible for nursing facility care (NFCE). In addition, the Department will consider the following factors when authorizing TeleCare services:

The participant presents with two or more of the following conditions/situations for **Health Status Measuring and Monitoring Service, Activity and Sensor Monitoring Service and Medication Dispensing and Monitoring Services:**

- Hospitalization in the past year;
- Medical Diagnosis of depression or other mental health issues;
- Use of the emergency room in the last year;
- Poor adherence with physician's orders or medications;
- Formal or informal support systems are limited or absent;
- History of falls within the last six months that resulted in an injury;
- Lives alone or is at home alone for extended periods of time;
- Service access challenges.

The participant is sufficiently cognitively intact and able to physically operate the equipment (i.e., able to see the monitor or put on the blood pressure cuff) **OR** has a caregiver willing and able to assist with the equipment, unless the service does not require active participation of the participant.

The participant's home will be evaluated by the service provider to ensure that the TeleCare equipment works properly. Adequate utilities to meet the manufacturer's specifications for equipment and the living situation/environment must allow for adequate adaptation of the equipment. Home adaptations are not included as part of this service.

A determination is made that there is a demonstrated need for the services and it has been determined that the requested services are not duplicate covered benefit services under Medicare or other third party resources.

If additional services are recommended due to changes identified by this monitoring in the participant's condition, the case manager must be informed and services approved in consultation with the AAA nurse. When the change in condition requires a skilled level of care, the home health agency (HHA) provider should access Medicare and other third party payers for the services and notify the AAA of the participant's Medicare eligibility.

If the participant's condition changes and requires skilled services covered by Medicare, the Waiver/OPTIONS program will no longer authorize the use of TeleCare. However under the Waiver/OPTIONS program, if reimbursement is on a monthly basis, the equipment should remain for that 30-day period. It is at the discretion of the provider to leave the equipment in place for the Medicare benefit period, however it cannot be charged to the Waiver/Options program during this period. It is at the discretion of the provider to remove or keep the equipment in the participant's home after the month's reimbursement is over.

**NOTE:** *TeleCare service is dependent on the home environment having such basic equipment such as electric and telephone service. It is not meant to provide home modifications or to provide payment for technology such as Internet access, upgrade telephone access, etc. to adapt the home environment. Home modifications can be requested as a separate service under the Options and Aging Waiver programs as needed.*

**SERVICE  
DESCRIPTIONS**

**HEALTH STATUS MEASURING AND MONITORING SERVICE**

Health Status Measuring and Monitoring Service may be beneficial to participants with chronic medical conditions such as congestive heart failure, diabetes or pulmonary disease. Examples of Health Status Measuring and Monitoring Service may include, but are not limited to, weight, oxygen saturation measurements (pulse oximetry), and vital sign monitoring. Providers of Aging Waiver and Options program funded Health Status Measuring and Monitoring Services must be Medicare Certified HHAs enrolled in the Medical Assistance program. Any peripheral equipment must be capable of interfacing with Health Status Measuring and Monitoring Service equipment. Health Status Measuring and Monitoring equipment must be UL listed/certified or have 501 (k) clearance and/or must verify compliance for UL listing standards. A primary physician, physician assistant or nurse practitioner must order Health Status Measuring and Monitoring Service.

**The reimbursement fee for this service will include:**

- ◆ A one time fee at installation that covers both the cost of installation and removal of equipment;
- ◆ Daily rental of the equipment that will include repair and replacement of malfunctioning equipment;
- ◆ Training of the participant and/or their representative in the use of the equipment;
- ◆ Monitoring service activities by trained and qualified home health agency staff;
- ◆ Documentation of appropriate intervention based on information/data collected;
- ◆ Remote teaching and coaching provided as necessary to the participant and/or their representative;

- ◆ Ongoing provision of web-based data collection for each individual, as appropriate. This includes response to participant self-testing, as well as manufacturer's specified testing, self-auditing and quality control;
- ◆ Health Status Measuring and Monitoring activity by the provider's registered nurse;
- ◆ One monthly face-to-face visit by a registered nurse is included in the fee should the data collected from the health status monitoring warrant a visit. Should additional visits by a registered nurse need to occur during the month, those visits will be paid at the current Options/Waiver rates with AAA nurse approval. If data shows a potential emergency, the provider may dispatch a nurse without consultation with the AAA. However, by the next business day, the AAA nurse must be contacted for retroactive approval.

### **Roles and Responsibilities of the Area Agency on Aging (AAA)**

- ◆ The AAA will determine the need for service based on the completion of the Care Management Instrument (CMI) and applying the eligibility guidelines for TeleCare services;
- ◆ The AAA nurse will review the CMI and all other pertinent information, including but not limited to, information obtained by contacting the participant's health care providers to assure the appropriateness of the service;
- ◆ The AAA will ensure that the HHA has secured a primary physician, physician assistant or nurse practitioner order for the service;
- ◆ The AAA nurse and the case manager supervisor will review and approve the recommendation for the service;
- ◆ If there is a question regarding the need for the service, the AAA nurse should perform a face-to-face review to assess any concerns, e.g., to determine if the participant would benefit from Telecare service and/or is capable of properly using the system;
- ◆ The AAA nurse assists in the development of the service plan that includes this service;
- ◆ The AAA will follow OLTL guidelines for Service Plan Review Process;
- ◆ The AAA will coordinate the service plan with the HHA;
- ◆ The case manager will investigate the damage or misuse of the equipment with the participant/representative and provider to determine the continued use of the service;
- ◆ The AAA decision to discontinue the service shall be based on review of the participant's need(s) and information from the HHA. The AAA will provide the HHA written documentation with justification for removal of the equipment and notice to participants regarding their appeal rights.

## Roles and Responsibilities of the Provider

- ◆ Be a Medicare Certified HHA enrolled in the Medical Assistance Program that is an enrolled waiver provider or contracted Options provider;
- ◆ Develop and implement a service plan including the type, mode, and frequency of the service;
- ◆ Provide teaching and training to the participant and/or representative on the use, maintenance and safety of the equipment and how the service operates within the confines of the service plan;
- ◆ Ensure that all equipment is UL listed/certified or have 501(k) clearance and must document this compliance with the AAA;
- ◆ If additional services are recommended due to changes in the participant's condition, the case manager must be informed and services approved in consultation with the AAA nurse;
- ◆ Maintain clinical documentation of all service activities, data and all participant contacts;
- ◆ Remotely monitor, track and review the data collected and respond with interventions applicable to the type of technology in the home;
- ◆ Coordinate participant's current service plan with the AAA service plan;
- ◆ Coordinate/communicate with the AAA regarding the service plan and recommendation for service when the service plan is updated/modified, or at a minimum of at least every 60 days;
- ◆ Maintain an up to date event notification system, i.e., a system that provides information on changes in participant care;
- ◆ Update equipment when necessary, at no cost, as technology improves performance in the delivery of the service;
- ◆ Provide data and documentation to a designated individual upon request, i.e., individual/representative, case manager, OLTL staff or State Medicaid staff;
- ◆ Disconnect/remove the equipment from the participant's residence within the same month of notification of discontinuance by the Case manager;
- ◆ Repair or replace malfunctioning equipment within 24 hours of notification or identification. Events beyond the control of the provider, i.e., natural disaster or unforeseen circumstances, may delay or impact the repair or replacement of equipment in this timeframe. The AAA must receive a report detailing the issue and the disposition of the repair or replacement. Payment for repairs and replacement of equipment is the responsibility of the provider.
- ◆ Provide an ***Informed Consent Form*** to the participant that at a minimum states:
  - Right to accept, deny, or terminate the use of the TeleCare services;
  - Benefits and purpose of the services;
  - Risks associated with the use of the equipment;
  - Extent to which data will be collected, reviewed, shared and stored;
  - Assurance of confidentiality;

- No charge will be assigned by the provider to waiver participants and options participants will be responsible for only the AAA cost share;
- Subject to review and approval by the AAAs;
- Information associated with the maintenance and repair procedures for the equipment and call-in number for questions regarding operation of the equipment;
  - ♦ Review all data collection of peripheral devices (blood pressure, weight, glucometer readings, etc.) and follow-up with appropriate interventions;
  - ♦ Ensure that the Health Status Measuring and Monitoring Service is ordered by a primary physician, physician assistant or nurse practitioner and the order must:
    - Be obtained by the HHA prior to service authorization;
    - Include the specific nursing and/or therapeutic service required;
    - Reflect the client's medical condition as it relates to the special medical eligibility requirements;
    - Be obtained every 60 days for continuation of service.

**Provider Standards for Health Status Measuring and Monitoring Service:**

The provider in the delivery of services must:

- ♦ Install, maintain services, and ensure that the equipment is in proper working order;
- ♦ Deliver and install equipment and start service within 3 working days of receipt of the service order and notify the case manager of the equipment installation;
- ♦ Provide oversight of the system/equipment;
- ♦ Have a system in place for notification of emergency events to designated individuals;
- ♦ Ensure that individuals providing service meet provider qualifications under Medicare and Medicaid;
- ♦ Service data collected must be available at least 90% of the time to AAAs and participants/representatives when web-based systems are used;
- ♦ Provide direct participant contact employees training;
- ♦ Verify that all employees completing installation are adequately trained;
- ♦ Use and have on file, written staff training materials and procedures for services;
- ♦ Have a licensed registered nurse or licensed practical nurse evaluating participant data collected from the equipment and monitoring the service.

**Health Status Measuring and Monitoring Service Reporting:**

- ♦ Reporting includes documentation and service plan requirements, data analysis with tracking and trending and any other state and federal

requirements (e.g. communicable diseases, abuse and neglect, incident reporting, etc.). The AAA and OLTL will monitor the provider of services regarding compliance with reporting standards.

- ◆ Provider must document delivered services tracking and trending reports specified by OLTL.

### **ACTIVITY AND SENSOR MONITORING SERVICE**

A service that employs sensor based technology on a 24/7 day basis by remotely tracking the participant's activities of daily living. These activities may include, but are not limited to, various activities in the house and environmental temperature monitoring. Data is then transmitted to the caregiver and/or healthcare provider depending on the activity and sensor monitoring system employed. Activity and Sensor Monitoring Service equipment must be UL listed/certified. Providers of Aging Waiver and Options funded Activity and Sensor Monitoring Services can be provided by an enrolled Home Health Agency, Durable Medical Equipment (DME), Personal Care/Homemaker, Pharmacy or Hospital provider.

The AAA will authorize the use of Activity and Sensor Monitoring Services when other methods such as informal caregivers and other technology have been considered with documentation about how ineffective other methods or interventions would be for individual safety and monitoring.

### **The reimbursement fee for this service will include:**

- ◆ A one time fee at installation that covers both the cost of installation and removal of equipment;
- ◆ Monthly rental of the equipment that will include repair and replacement of malfunctioning equipment;
- ◆ Training of the participant and/or their representative in the use of the equipment;
- ◆ Monitoring service activities by trained and qualified agency staff;
- ◆ Documentation of appropriate intervention based on information/data collected;
- ◆ Remote teaching and coaching provided as necessary to the participant and/or their representative;
- ◆ Ongoing provision of web-based data collection for each individual, as appropriate. This shall include response to participant self-testing, as well as manufacturer's specified testing, self-auditing and quality control;
- ◆ Included in the monthly fee is the provision of a personal emergency response system (PERS) that is required in conjunction with this service. PERS is subject to all of the current requirements under the Options and Aging Waiver services definitions.

### **Roles and Responsibilities of the Area Agency on Aging (AAA):**

A physician's order is not necessary for this service. The remaining roles and responsibilities are the same as those stated for Health Status Monitoring and Measuring Service.

### **Roles and Responsibilities for Activity and Sensor Monitoring Providers:**

The provider must:

- ◆ Be a Medicare Certified Home Health Agency (HHA), Durable Medical Equipment (DME), Personal Care/Homemaker, Pharmacy or Hospital that is an enrolled waiver provider or contracted Options provider;
- ◆ Develop and implement a service plan including the type, mode, and frequency of the service;
- ◆ Provide teaching and training to the participant and/or representative on the use, maintenance and safety of the equipment and how the service operates within the confines of the service plan;
- ◆ Ensure that all equipment is UL listed/certified or have 501K clearance and must document this compliance with the AAA;
- ◆ Notify the case manager if data collected indicates a change in the participant's condition and additional home health services are being recommended;
- ◆ Maintain clinical documentation of all service activities, data and all participant contacts;
- ◆ Remotely monitor, track and review the data collected and respond with interventions applicable to the type of technology in the home;
- ◆ Coordinate participant's current service plan with the AAA service plan;
- ◆ Coordinate/communicate with the AAA regarding the service plan and recommendation for service when the service plan is updated/modified or at a minimum of at least every 60 days;
- ◆ Maintain an up to date event notification system, i.e., a system that provides information on changes in participant care;
- ◆ Update equipment when necessary, at no cost, as technology improves performance in the delivery of the service;
- ◆ Provide data and documentation to designated individual upon request, i.e., individual/representative, case manager, OLTL staff or State Medicaid staff;
- ◆ Disconnect/remove the equipment from the participant's residence within the same month of notification of discontinuance by the Case manager;
- ◆ Repair or replace malfunctioning equipment within 48 hours of notification or identification. Events beyond the control, i.e., natural disaster or unforeseen circumstances, of the provider may delay or impact the repair or replacement of equipment in this timeframe. The AAA must receive a report detailing the issue and the disposition of the repair or replacement. Payment for repairs and replacement of equipment is the responsibility of the provider;
- ◆ Provide an ***Informed Consent Form*** to the participant that at a minimum states:

- Right to accept, deny, or terminate the use of the TeleCare services;
- Benefits and purpose of the services;
- Risks associated with the use of the equipment;
- Extent to which data will be collected, reviewed, shared and stored;
- Assurance of confidentiality;
- No charge will be assigned by the provider to waiver participants and Options participants will be responsible for AAA cost share;
- Subject to review and approval by the AAAs;
- Information associated with the maintenance and repair procedures for the equipment and call-in number for questions regarding operation of the equipment.

**Provider Standards for Activity and Sensor Monitoring Service:**

- ♦ Same as Health Status Measuring and Monitoring service with exception that an RN does not have to monitor this service.

**Activity and Sensor Monitoring Service Reporting:**

- ♦ Same as Health Status Measuring and Monitoring service.

**MEDICATION DISPENSING AND MONITORING SERVICES**

Remote Medication Dispensing and Monitoring is pre-programmed based on the needs of the participant to dispense and monitor medication compliance. A system will be in place to notify the provider or caregiver of missed doses or non-compliance with medication administration. This service may be used with individuals that demonstrate a cognitive deficit, need assistance with medication, and have demonstrated and documented past non-compliance with medication administration.

Medication Dispensing and Monitoring Service equipment must be UL listed/certified. The provider agency shall assure that all equipment meets service standards. Providers of Aging Waiver and Options funded Medication Dispensing and Monitoring Services can be provided by an enrolled Home Health Agency, Durable Medical Equipment (DME), Personal Care/Homemaker, Pharmacy or Hospital provider.

The use of Medication Dispensing and Monitoring Services will be authorized by the AAA when all other methods, such as: pharmacy filled blister packs/pillboxes and informal caregivers have been considered with documentation about how ineffective other methods would be for individual safety and monitoring.

***NOTE:*** *If the Aging Waiver/Options participant only requires a medication dispenser unit and no monitoring services; the*

*dispensing unit should be purchased and/or rented under special equipment and supplies. In this instance, the medication dispensing and monitoring service should not be authorized.*

**The reimbursement fee will include:**

- ◆ Same as Activity and Sensor Monitoring service.

**Roles and Responsibilities of the Area Agency on Aging (AAA):**

- ◆ A physician's order is not necessary for this service. The remaining roles and responsibilities are the same as those stated for Health Status Monitoring and Measuring Service.

**Roles and Responsibilities for Medication Dispensing and Monitoring Service Providers:**

- ◆ Same as Activity and Sensor Monitoring service.

**Provider Standards for Medication Dispensing and Monitoring Service:**

- ◆ Same as Activity and Sensor Monitoring service.

**Medication Dispensing and Monitoring Reporting:**

- ◆ Same as Health Status Measuring and Monitoring service.

***NOTE:*** *All other medical equipment and supplies that will be of value to the individual to maintain them safely in the home can be purchased using medical equipment and supplies in the Aging Waiver and Options services.*

## Waiver TeleCare Services

PROCEDURE CODE	PROV TYPE	SPEC CODE	POS	DEFINITION	FEE	EFFECT DATE
<b>HEALTH STATUS MEASURING AND MONITORING</b>						
<b>W2024</b>	01, 24, 25, 55  05	050  025	12	<i>TeleCare</i> Equipment installation and removal of equipment  One-time fee charged at installation	\$90.00	4/1/09
<b>T2025-GT</b>	05	050	12	<b>Remote Monitoring</b> participant's Health Status by a Home Health Agency for individuals with <b>chronic conditions</b> .  Daily rental includes use, repair, replacement, and training of equipment, documentation, remote teaching and coaching, and one monthly RN Visit if warranted.  Service must be ordered by a physician, physician assistant, or nurse practitioner  Daily Fee	\$10.00	7/1/07
<b>T2028-GT</b>	05, 24, 25, 31, 55	240 250	11 12 99	Specialized <b>Supplies specifically for Remote Monitoring</b> of participant's Health Status  One Purchase		7/1/07
<b>T2029-GT</b>	05, 24, 25, 31, 55	240 250	11 12 99	Specialized <b>Supplies DME specifically for Remote Monitoring</b> of participant's Health Status  One Purchase		7/1/07
<b>ACTIVITY AND SENSOR MONITORING</b>						
<b>W2025</b>	01, 05, 24, 25, 55	025	12	<i>TeleCare</i> Equipment installation, removal, and training of equipment use. Fee includes realignment of sensors if required  One-time fee charged at installation	\$200.00	7/1/07
<b>W9006</b>	01, 05, 24, 25, 55	025	12	Fee includes use of equipment to <b>Remotely Monitor</b> participant's activities, repair, replacement, or realignment of sensors if required, training of equipment, documentation, remote teaching and coaching, and provision of a PERS  Monthly Fee	\$80.00	7/1/07
<b>MEDICATION DISPENSING AND MONITORING</b>						
<b>S5185-32</b>	01, 05, 24, 25, 55	025	12	Equipment personally pre-programmed to dispense medication and enable <b>Remote Monitoring</b> of participant's compliance and appropriate notification of non-compliance  Monthly Fee	\$50.00	7/1/07

## OPTIONS TeleCare Services

SERVICE NAME	PROV TYPE	SPEC CODE	P O S	DEFINITION	FEE	EFFECT DATE
<b>HEALTH STATUS MEASURING AND MONITORING</b>						
TC /Health Status Monitoring Equipment Install/Remove	01, 24, 25, 55 05	050 025	12	<i>TeleCare</i> Equipment installation and removal of equipment One-time fee charged at installation	\$90.00	4/1/09
TC /Health Status Monitoring	05	050	12	<i>Remote Monitoring</i> participant's Health Status by a Home Health Agency for individuals with <i>chronic conditions</i> . Daily rental includes use, repair, replacement, and training of equipment, documentation, remote teaching and coaching, and one monthly RN Visit if warranted. Service must be ordered by a physician, physician assistant, or nurse practitioner Daily Fee	\$10.00	4/1/09
TC /Specialized Supplies for Health Status Monitoring	05, 24, 25, 31, 55	240 250	11 12 99	Specialized <i>Supplies specifically for Remote Monitoring</i> of participant's Health Status One Purchase		4/1/09
TC /Specialized DME for Health Status Monitoring	05, 24, 25, 31, 55	240 250	11 12 99	Specialized <i>Supplies DME specifically for Remote Monitoring</i> of participant's Health Status One Purchase		4/1/09
<b>ACTIVITY AND SENSOR MONITORING</b>						
TC /Activity and Sensor Monitoring Installation/Removal	01, 05, 24, 25, 55	025	12	<i>TeleCare</i> Equipment installation, removal, and training of equipment use. Fee includes realignment of sensors if required One-time fee charged at installation	\$200.00	4/1/09
TC /Activity and Sensor Monitoring Monthly Fee	01, 05, 24, 25, 55	025	12	Fee includes use of equipment to <i>Remotely Monitor</i> participant's activities, repair, replacement, or realignment of sensors if required, training of equipment, documentation, remote teaching and coaching, and provision of a PERS Monthly Fee	\$80.00	4/1/09
<b>MEDICATION DISPENSING AND MONITORING</b>						
TC /Medication Dispenser w/Remote Monitoring	01, 05, 24, 25, 55	025	12	Equipment personally pre-programmed to dispense medication and enable <i>Remote Monitoring</i> of participant's compliance and appropriate notification of non-compliance Monthly Fee	\$50.00	4/1/09