



Medical Necessity Guideline

Medical Necessity Guideline (MNG) Title: Personal Emergency Response System		
MNG #: 064	<input checked="" type="checkbox"/> SCO <input checked="" type="checkbox"/> One Care	Prior Authorization Needed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Clinical: <input checked="" type="checkbox"/>	Operational: <input type="checkbox"/>	Informational: <input type="checkbox"/>
Medicare Benefit: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approval Date: 4/1/2021;	Effective Date: 06/19/2021
Last Revised Date:	Next Annual Review Date: 4/1/2022;	Retire Date:

OVERVIEW:

Personal Emergency Response System (PERS) is an electronic device connected to a person's land-line or cellular telephone. Cellular PERS may be authorized only if the member does not have a land-line. In an emergency, PERS can be activated either by pushing a small button on a pendant or bracelet, pressing the help button on the console unit, or by an adaptive switch set-up. When the device is activated, a person from the 24-hours-a-day, seven-days-a week central monitoring station answers the call, speaks to the member via the console unit, assesses the need for help, and takes appropriate action.

DECISION GUIDELINES:

Clinical Eligibility:

PERS is indicated for the personal use of a member with medical conditions that cause significant functional limitations or incapacitation and prevents the member from using other methods of summoning assistance in an emergency. The member must be at risk of moving to a more structured residential setting or be at significant risk for falls or other medical complications that may result in an emergency situation. The care team must identify the condition or diagnosis that indicates the need for PERS, as well as the nature of the impairment.

For auto-detect fall PERS, the member must have a condition or diagnosis that would likely impair her or his ability to activate the PERS unit in the event of a fall; e.g., seizure disorder, and Syncope and Orthostatic Hypotension.

Determination of need:

- Relevant diagnosis (such as history of falls, unsteady gait and balance disorder etc.) must be used.
- To receive a PERS, the member must live alone or routinely be alone for extended periods of time during the day or night time such that the member's safety would be compromised without the availability of a PERS unit in the home.
- Member must have a functioning land-line phone that can accommodate a PERS.



Medical Necessity Guideline

- To receive cellular PERS, the member must not have a landline.

LIMITATIONS/EXCLUSIONS:

- PERS cannot duplicate existing 24-hour access to assistance; for example, call systems in Assisted Living Residences or Supportive Housing sites.
- Installation of PERS is covered once every five years and only when the member cannot install the unit and there is no other person, such as a relative or building manager, who can install the equipment.
- CCA does not cover mobile PERS; that is, a PERS with cellular technology that can be used outside the home environment.
- CCA does not pay for telephones or telephone service in order for a member to receive PERS

KEY CARE PLANNING CONSIDERATIONS:

- The member must be able to independently use the PERS to summon help. (PERS providers must offer units for persons with physical disabilities, such as “Sip-n-Puff” systems.)
- The member must understand when and how to appropriately use the PERS. (Persons with cognitive impairments, e.g. Alzheimer’s disease and related disorders, are not appropriate for PERS.)
- Cable based (Xfinity) or Voice Over internet (Vonage or Magic Jack) cannot be used as a landline PERS. A cellular PERS must be used in these situations.

AUTHORIZATION:

PERS requires prior authorization. Authorization decisions must be made on the basis of an in-person, in-home assessment of the member and his/her environment, as well as any other relevant information, e.g., medical diagnoses. (Assessments conducted by contract RNs may contribute information to the decision process, but do not meet the requirement for an in-home assessment.) Unlicensed care team members, such as GSSCs, Health Outreach Workers and Long Term Supports Coordinators, may evaluate clinical eligibility and need for PERS, and may propose a service plan to the authorizing clinician. Current MDS or GSSC evaluation should reflect the initial or continued need of this service. Assigned PERS written order form, submitted with initial or renewal authorization requests can be utilized as validating documentation but must reflect the current need for this service.

Codes:

Service	POS	Procedure Code	Unit of Measurement
Personal Emergency Response System (PERS) Installation & Testing	04, 12, 13, 14, 16	S5160	1 month



Medical Necessity Guideline

Personal Emergency Response System (PERS) Standard	04, 12, 13, 14, 16	S5161	12 months
Personal Emergency Response System (PERS) Cellular	04, 12, 13, 14, 16	S5161	12 months
Personal Emergency Response System (PERS – Auto Detect Fall	04, 12, 13, 14, 16	S5161	12 months

REGULATORY NOTES:


MassHealth coverage guidelines for PERS are found at 130 CMR 409.429.

RELATED REFERENCES:

ATTACHMENTS:

EXHIBIT A: CCA PERS Written Order Form or MassHealth Form	Personal Emergency Response System (PERS) General Prescription Form
---	---

APPROVALS:

Douglas Hsu, MD
CCA Senior Clinical Lead [Print]


Signature

Vice President, Medical Policy and Utilization Review
Title [Print]

4/1/2021

Date

CCA Senior Operational Lead [Print]

Signature

Title [Print]

Date



Medical Necessity Guideline

Lori Tishler, MD

CCA CMO or Designee [Print]

Lori Tishler

Signature

Senior Vice President, Medical Services

Title [Print]

4/1/2021

Date