

Special Needs Equipment Fund Guidelines

What is the purpose of the Special Needs Equipment Fund?

- The Special Needs Equipment Fund (the “Fund”) is intended to purchase durable medical equipment for Palm Beach County children with special needs ages 0 through 17.
- The Fund is designed to purchase medically necessary equipment that will provide or enhance safety, mobility, communication (speech or hearing), vision, and/or health benefits.
- These are not emergency funds. These funds cannot be used to replace funds that already exist; they are designed to purchase equipment that cannot be obtained from any other source.
- This is a fund of last resort intended to fill gaps in the current service system for equipment purchases.

What are the eligibility requirements?

- Applicants must be children with special needs ages 0 through 17 residing in Palm Beach County.
- Before applying to the Fund, applicants are required to contact Clinics Can Help to learn whether appropriate equipment can be acquired through that agency.
Website: www.clinicscanhelp.org
Telephone: 561-640-2995
Physical Address: 2560 Westgate Ave West Palm Beach, FL 33409
- Applications should only be submitted for children in need whose families have no other means to obtain the equipment (i.e., their health insurance provider denied coverage of the equipment, or purchasing the equipment would create financial hardship for the family).
- The applicant must have successfully practiced with the equipment requested to ensure compatibility.
- Each applicant cannot exceed \$7,000 in equipment purchased by the Fund per fiscal year (October 1 – September 30). Applicants who reach the \$7,000 limit may reapply in the following fiscal year. In extreme cases, or during the last quarter of the fiscal year (if funds are available), applicants who require additional funding will be reviewed by the Special Needs Equipment Fund Committee on a case by case basis.
- Each applicant can request more than one piece of equipment during the fiscal year as long as the total of all requests does not exceed \$7,000.
- Each household can have more than one applicant, but individual applicants cannot exceed \$7,000 in equipment purchased by the fund each fiscal year.
- Families receiving equipment are encouraged to donate used equipment when the child no longer needs it, if the equipment is in good shape and can be re-used. Used equipment should be donated to Clinics Can Help’s Lending Closet in West Palm Beach.

What type of equipment is covered by the fund?

- Approved equipment includes (but is not limited to): Adaptive Tricycles, Aids and Devices for Visual Impairment/Low Vision Equipment, Bath/Shower Chairs, Customized Car Seats, Cranial Safety Helmets, Cranial Re-Molding Helmets, Communication Devices, iPads and communication applications, Electronic Feeding Devices, Hearing Aids, Hospital Beds, Mechanical Lifts (including barrier free lifts), Positioning Chairs, Strollers, Toilet Support Systems, Walkers/Gait Trainers, and Wheelchairs.
- Funds are not designed to provide ongoing or indefinite services and cannot be used to pay for subscriptions or memberships.
- Funds cannot be used to pay for services provided by a medical doctor, hospital charges, purchase of medication or oxygen, or for any other similar medical expenses.
- Unless otherwise specified by the Special Needs Equipment Fund Committee, funds cannot be used to pay for household renovations, accessibility upgrades to homes or vehicles, or other repairs that are permanent and non-mobile.

Application Requirements

- Applications can be submitted on behalf of children in need by local nonprofit partners or government agencies, physical therapists, occupational therapists, speech therapists, other medical providers, the School District of Palm Beach County, or families.
- Applications must be complete to be considered by the Special Needs Equipment Fund Committee. Incomplete applications will be tabled until all necessary documentation is received.
- Completed applications and all supporting documentation must be received prior to the 15th of each month to be reviewed by the Special Needs Equipment Fund Committee. Applications received after the 15th will be tabled until the next month.
- All applications must include the following attachments:

1. *Letter of Medical Necessity*

A letter of medical necessity written by a licensed/certified provider who is knowledgeable of the child's condition must be included with each application. The letter should detail the child's condition, explain why this equipment is being requested, and describe how the child will benefit from having access to the equipment at home. The letter should be current and should indicate if ongoing training and support will be provided to the child/family after the equipment is received.

2. *Vendor Quotes*

Each application must include two vendor/manufacturer estimates for the equipment being requested. All quotes must be dated. Quotes should be comprehensive and include all details about the equipment (i.e., model, size accessories, etc.), as well as any additional fees for delivery, shipping, set-up, and/or warranty. Ensure that the quotes are for the exact same equipment and accessories. If the equipment model, size, etc., is not detailed in a consistent manner across both quotes, the application cannot be reviewed or approved by the committee.

The application should clearly identify the preferred vendor/manufacturer. If the quoted price from the preferred vendor is higher than the other quote(s) provided, the requester must include an explanation of why the less expensive model will not meet the child's needs.

Please note: Only one vendor/manufacturer quote is needed for equipment that requires customized measurements. In these cases, the licensed/certified practitioner who is knowledgeable of the child's condition must provide rationale for why this vendor/manufacturer is best for the child.

The letter of medical necessity *cannot* be provided by the vendor or manufacturer of the equipment.

3. *Denial Letter from insurance company*

A letter of denial for the requested equipment from the child's health insurance provider must accompany the application. In lieu of a denial letter, a copy of the exclusion page from the benefit book that shows the item is not covered by the company can be included with the application. Due to concerns about immediate safety, bath/shower chairs, toilet supports, and car seats do not need to include a denial letter from the insurance company. The Special Needs Equipment Fund Committee will have the final decision regarding the need for a denial letter.

4. *Picture of the equipment being requested*

A clear picture of the requested equipment should be included with the application.

- Special Needs Equipment Fund Committee members may have additional questions, or may request that additional documentation be provided in order to approve applications. The therapist or licensed/certified professional who is recommending the equipment must respond to inquiries about the application or the equipment request will be denied.
- By signing the application, the submitting therapist or licensed/certified professional and the applicant's family validate that the child is in need of the equipment, has no other means to obtain the equipment, and will release information to substantiate the request if necessary.
- An applicant's family can make a contribution towards the cost of the equipment if they have the ability to do so. Families who can contribute towards the cost of equipment should make a donation to United Way of Palm Beach County on behalf of the Special Needs Equipment Fund. Donations can be submitted on United Way of Palm Beach County's website: <https://unitedwaypbc.org/donate/>.

Equipment-Specific Requirements

- In addition to the general application guidelines outlined in the previous section, applications for certain types of equipment have additional requirements:
 1. Adaptive Tricycles - It is expected that recipients of tricycles will comply with regulations regarding use of safety helmets.
 2. Bath/Shower Chairs - Professional requesting the equipment should verify in the letter of medical necessity that there is sufficient space for the equipment to be used safely.
 3. Car Seats - Car seat applicants may contact Palm Beach County Fire Rescue to ensure proper installation of the equipment (561) 616-7000.
 4. Cranial Safety Helmets and Cranial Re-Molding Helmets – Letter of medical necessity and prescription must be provided by a medical doctor (MD). Due to safety concerns, a denial letter from insurance is not needed for this type of equipment.
 5. Communication Devices, iPads, and Communication Apps - Applications for communication devices, iPads, and apps must contain a letter of medical necessity from a non-biased Speech-Language Pathologist. If using a therapist that is a representative of the company supplying the equipment, it is in the best interest of the family and the Fund to seek a second professional opinion. In such cases, the committee will require a second opinion from an independent, licensed Speech-Language Pathologist.

Requests for communication devices, iPads, and apps will not be reviewed if the AAC Device Addendum is incomplete.

6. Hearing Aids – A letter or evaluation from an auditory expert is required. It is important to seek out the evaluation of a non-biased specialist. If using an audiologist that is a representative of the company supplying the equipment,

it is in the best interest of the family and the Fund to seek a second professional opinion. In such cases, the committee will require a second opinion from an independent, licensed audiologist.

7. Hospital Bed - Letter of medical necessity and prescription must be provided by a medical doctor (MD). Professional requesting the equipment should verify in the letter of medical necessity that there is sufficient space for the equipment to be used safely.
 8. Mechanical Lifts (including barrier free lifts) – Letter of medical necessity should include details about where the equipment will be installed and whether the equipment is movable. If the equipment is being installed in a rental property, a letter from the landlord granting permission for installation is required. Equipment must be installed by a licensed, insured contractor.
- Please note: This list is not exhaustive. The Special Needs Equipment Fund Committee may have additional questions or require additional documentation. If you are applying for a piece of equipment not listed, please contact United Way of Palm Beach County to ensure appropriate documentation is submitted.

Special Needs Equipment Fund Committee

- A dedicated committee of volunteers from the local community review applications once a month.
- The volunteer committee is comprised of representatives from a variety of disciplines such as nursing, physical therapy, occupational therapy, social work, audiology, and speech therapy. The committee may also seek advice from area experts who can lend additional insight on unique circumstances.
- It is recommended that the committee have no fewer than 6 members. Quorum (at least four members) is required to approve applications.
- Committee members are expected to attend all scheduled meetings/participate in electronic voting, with two exceptions: Consultants and Absentee Voting Members. Consultants will only vote on applications specific to their area of expertise such as speech and audiology. An Absentee Voting Member will vote on all applications but is excused from attending meetings. A quorum is determined based on the number of voting members and absentee voting members.
- If a voting member of the committee misses three meetings/fails to submit three electronic votes in a quarter, the committee chair will contact the member to discuss absenteeism and bring a recommendation to the full committee to vote on that member's continued participation.

Application Approval Process

- Applications submitted to United Way of Palm Beach County are initially reviewed by the Director of Community Impact to ensure all relevant questions have been answered and that all required documents have been included.
- Complete applications received prior the 15th of the month will be forwarded to the Special Needs Equipment Fund committee for review. Applications received after the 15th of the month will be reviewed during the following month. If there are any questions or issues regarding the application or equipment requested, a committee member will reach out to the individual submitting the application for more information.
- The committee will submit all votes and recommendations prior to the end of the month.
- After the Special Needs Equipment Fund Committee makes their recommendations, the Community Impact Committee (comprised of volunteers from United Way of Palm Beach County's board of directors) will vote to approve or reject the Special Needs Equipment Fund Committee's recommendations. The Community Impact Committee meets on the first Friday of every month. (e.g., Applications submitted prior to October 15th will be reviewed by the Community Impact Committee in the month of November).

- If the Community Impact Committee votes to approve the recommendations, the Director of Community Impact will send an email to the referral source, therapist or qualified professional working with the child, and the vendor/manufacture, documenting that the equipment request has been approved and funds will be disbursed from the Special Needs Equipment Fund.
- **Note: Application approval is subject to the availability of funds.**

Fund Distribution and Proof of Purchase

- Once the application is approved by the Community Impact Committee, the Director of Community Impact will submit a payment request to United Way of Palm Beach County's finance department.
- All checks are made out to the vendor or equipment manufacturer.
- The vendor has 60 days from the date funds are received from United Way of Palm Beach County to submit proof of purchase for each piece of equipment.
- Proof of purchase must include the child's name and a description of the equipment purchased. Proof of purchase must be marked as paid and show a zero balance.
- United Way may discontinue transactions with any vendor that fails to provide proof of purchase receipts.

Questions?

Please direct all questions and inquiries regarding the Special Needs Equipment Fund to:

Shayene Weatherspoon, Director of Community Impact
United Way of Palm Beach County
shayeneweatherspoon@unitedwaypbc.org
(561) 375-6639

Mailing Address: United Way of Palm Beach County
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