

## 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](http://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 have an obligation 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?

- The fund is designed to purchase durable, medically necessary equipment that will provide or enhance safety, mobility, communication (speech or hearing), vision, and/or health benefits.
- 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.
- 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 costs.
- 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, speech therapists, or 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 15<sup>th</sup> of each month to be reviewed by the Special Needs Equipment Fund Committee. Applications received after the 15<sup>th</sup> will be tabled until the next month.
- All applications must include the following attachments:

1. *Letter of Medical Necessity*

A letter of medical necessity describing the child's needs and purpose for which the equipment will be used is required for every piece of equipment requested. The letter must be provided by a licensed/certified provider who is knowledgeable of the child's condition and can justify why the equipment is needed.

2. *Vendor Quotes*

Each application must have dated vendor/manufacture estimates for the equipment being requested. With the exception of custom wheelchairs and wheelchair parts, requests should include quotes from two vendors. All quotes must be comprehensive and include the cost of delivery, set-up, warranty, etc., in addition to the cost of the equipment.

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, the application cannot be reviewed or approved by the committee.

If only one vendor/manufacture quote is provided, the licensed/certified practitioner who is knowledgeable of the child's condition must provide rationale for why this vendor/manufacture is best for the child. Please note: In these cases, the letter of medical necessity cannot be provided by the vendor or manufacturer of the equipment.

3. *Picture of the equipment being requested*

#### 4. Denial Letter from insurance company

A letter of denial for the requested equipment from the private insurer/Medicaid must accompany the application. In lieu of a denial letter, a copy of the exclusion page from 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.**

- 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 and treating the child must respond to inquiries about the application or the equipment request will be denied.
- By signing the application, the submitting agency/therapist and the applicant's family validate that the family is in need, has no other means to obtain the equipment, and will release information to substantiate the request if necessary.
- An applicant's family may be asked to contribute to the cost of the equipment if they have the ability to do so. Families who can contribute to the cost of equipment should make a donation to United Way of Palm Beach County on behalf of the Special Needs Equipment Fund.

### 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. Aids and Devices for Visual Impairment/Low Vision Equipment - Application must include a letter from a teacher for the visually impaired or a representative from the Division of Blind Services.
  3. 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.
  4. Car Seats - Car seat applicants may contact Palm Beach County Fire Rescue to ensure proper installation of the equipment (561) 616-7000.
  5. 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.
  6. Communication Devices - Applications for communication devices will be reviewed by a school district speech and language pathologist.
  7. iPads and applications - It is important to seek out the evaluation of a non-biased therapist. 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 therapist.
  8. Hearing Aids - Letter from hearing evaluation 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.

9. 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.
  10. 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 previously listed, please contact United Way of Palm Beach County to ensure appropriate documentation is submitted.

### Special Needs Equipment Fund Committee

- A committee of volunteers from the community review applications once a month.
- The committee consists of representatives from a variety of disciplines, such as nursing, occupational therapy, social work, audiology, and speech. A minimum of two physical therapists sit on the committee.
- It is recommended that the committee have no fewer than 6 members. A quorum (majority of 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 received are reviewed by United Way of Palm Beach County's Director of Community Impact to ensure they are complete and that all required documents have been included.
- Complete applications received prior the 15<sup>th</sup> of the month will be forwarded to the Special Needs Equipment Fund committee for review. Applications received after the 15<sup>th</sup> 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 committee's recommendations. The Community Impact Committee meets on the first Friday of every month. (i.e., Applications submitted prior to October 15<sup>th</sup> will be notified of approval in the month of November, etc.).
- If the Community Impact Committee votes to approve the recommendations, the Director of Community Impact sends an email to the referral source, therapist or qualified professional working with the child, and the vendor/manufacturer documenting that the 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](mailto:shayeneweatherspoon@unitedwaypbc.org)  
(561) 375-6639

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