

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

**GUIDELINES FOR PURCHASES
(PERSONAL VS. DDSN FUNDS)**

For people requesting residential services from an ICF/IID, this document declares what costs are chargeable to their personal funds and what costs are to be paid by DDSN funds. Personal funds shall be used to purchase non-medical needs and specific comfort items. DDSN funds shall provide for:

- (1) Medically related needs;
- (2) Services to provide at least a minimum level of personal hygiene, decency, and presentability, essential to a person's healthy well-being; and
- (3) Active treatment needs as defined in applicable Medicaid regulations.

The following list of charges to DDSN funds is not all-inclusive. The list of items/services that may be purchased with personal funds shows acceptable or allowable purchases. All prospective personal fund purchases shall be dependent upon each person's financial condition (reference DDSN directive 200-09-DD: Fees for Residential Services Provided by DDSN). People receiving residential services from DDSN shall not be denied necessary special medical needs due to a shortage of personal funds. This directive does not prevent the use of donated funds to purchase items listed under Item B.

A. CHARGES TO DDSN FUNDS

1. Professional, Special Programs and Services

Provision of these services is contingent upon a thorough evaluation of each person's needs and pending DDSN approval.

- a. Dietary/Nutritional Services.
- b. Dental Services.
- c. Education Services.
- d. Health Services.
- e. Medical Services.
- f. Nursing Services.
- g. Pharmacy Services.
- h. Physical and Occupational Therapy.
- i. Psychological Services.
- j. Religious Services.
- k. Social Services.
- l. Speech Pathology and Audiology.
- m. Training and Habilitation Services.

2. Items/Services Necessary for the Physical Well-Being of Recipients and Routinely/Uniformly Provided to All People Receiving Services from DDSN
 - a. Necessary medications, medical and surgical supplies.
 - b. Use of equipment and facilities.
 - c. Special dietary supplements used for tube feeding or oral feeding.
 - d. Routine laundry (including personal clothing), toiletries and housekeeping services (including sheets, towels, wash cloths, incontinence supplies, soaps, bathroom tissue).
 - e. Activity programs.
 - f. Routine personal hygiene items and services as required to meet needs including but not limited to: hair hygiene products, comb, brush, bath soap, disinfecting soaps or specialized cleansing agents when indicated to treat special skin problems or to fight infection, razor, shaving cream, toothbrush, toothpaste, denture adhesive, denture cleaner, dental floss, moisturizing lotion, tissues, cotton balls, cotton swabs, deodorant, incontinence care and supplies, sanitary napkins and related supplies, towels, wash cloths, hospital gowns, over the counter drugs, hair and nail hygiene services, haircuts, bathing and basic personal laundry.
 - g. Items required for behavior management.

3. Medical Equipment and Supplies

- a. Wheelchairs.
- b. Mats.
- c. Walkers.
- d. Special Geriatric Chairs.
- e. Dentures.
- f. Eyeglasses.
- h. Hearing Aids/Supplies.
- i. Similar Items.

See B (4) for items required beyond these basic medical needs.

Note: DDSN shall not be responsible for the purchase of any of the above items or services when a parent or guardian initiated the purchase without the prior approval of authorized DDSN staff.

4. Purchases from Related Organizations (Services, Facilities, Supplies)
5. Administrative Costs Incurred by DDSN in order to meet Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID) Standards and Applicable State Health and Licensure Requirements
6. Personnel Costs (Wages, Fringe Benefits)

7. Physical Plant Maintenance, Development and Expansion
8. Food and Housing costs except where covered through Care and Maintenance Charges as provided for in DDSN Directive 200-09-DD: Fees for Residential Services Provided by DDSN.

B. ITEMS/SERVICES THAT MAY BE CHARGED TO A PERSON'S PERSONAL FUNDS¹

1. Personal Grooming and Care Articles

Cosmetic and grooming items or services in excess of those for which payment is made under Medicaid or Medicare: painted or acrylic nails, hair weaves, and similar items.

2. Personal Recreational Items and Equipment not Covered under a Required Activities Program

Bicycles, magazine or newspaper subscriptions, aquariums, plants/flowers, radios, televisions, records and books.

3. Personal Clothing

Gloves, hats, scarves, hosiery, slippers, shoes and similar items.

4. Special Medical Equipment, Supplies and Services for the Convenience of People and their Families

Certain purchases of medical equipment, supplies and services that are for the convenience of the person and/or family and not determined by DDSN to be medically necessary may be purchased with personal funds. This would include items mentioned in A.(3) such as an extra wheelchair for home visits or certain nonessential chiropractic, podiatry visits or dental services. These items and services are considered to be for personal convenience and therefore would not be allowable charges to the Medicaid program.

5. Damaged Property

Personal funds may be used to replace damaged property owned by staff, the provider, DDSN or another person when it is consistent with the responsible person's Plan and when funds are available.

¹ The Residential Director and/or Program Team members should ensure appropriate uses of personal funds. In cases where a question may arise as to whether DDSN or personal funds should be used, the expenditure of personal funds must be justified in the remarks section of a Personal Funds Draft (PFD)/Group Withdrawal Draft (GWD). Appropriate documentation must be attached, such as minutes from Program Team meetings, physician statements of medical necessity or requests from parents for equipment, supplies and/or services to be purchased for the convenience of the person or family.

6. Miscellaneous Items
- a. Special food/drinks that are not essential dietary needs (e.g., candy, cookies, soft drinks).
 - b. Tobacco products and accessories.
 - c. Costs of trial visits.
 - d. Expenses involved in relatives visiting the residence or a person's visit/extended stay in the home setting.
 - e. Postage
 - f. Stationery.
 - g. Insurance premiums
 - h. Taxes
 - i. Movies passes
 - j. Special entertainment/recreational activities
 - k. Special bedspreads or other similar purchases.

These purchases are subject to the availability of personal funds.

7. Personal Comfort Items

Items and services that do not constitute a meaningful contribution for treatment of an illness or injury or to achieve/enhance independence (except for hospice care). Items also considered to be personal comfort items include radios, televisions, telephones, computers, laptops, tablets, musical instruments, hobby items, lessons in leisure interests or memberships in clubs or fitness centers.

Person's Name: _____ **File #:** _____

These rights/services have been explained to me and I understand how they will affect me.

Signature (Person) _____ Date _____

Signature (QIDP) _____ Date _____

Signature (Witness) _____ Date _____

As parent, guardian or conservator, these rights/services have been explained to me and I understand how they will affect my relative/person for whom I am responsible. I understand that I am signing on his/her behalf.

Signature (Parent/Guardian) _____ Date _____

Relationship to Person _____