

ADMINISTRATIVE OVERVIEW

SERVICE SPECIFIC ATTACHMENT

Personal Emergency Response Systems (PERS) Enhanced PERS (E-PERS)

- A. Describe how your PERS and E-PERS work.
- B. After receiving a call from the ASAP to initiate service, describe your agency's procedures. Include expected time frames and average time between ASAP referral and the start of service to the consumer.
- C. Describe your process for responding to consumers who speak a language not spoken by your monitoring staff, are hearing impaired, or are confused.
- D. Describe your process for testing in-home equipment. How frequently is testing done? What is the procedure for replacing or repairing malfunctioning equipment?
- E. What documentation is kept on file? Who is responsible for the testing? Is the consumer able to replace the pendant battery?
- F. Where is your monitoring station located?
- G. How do you notify the ASAP regarding consumer PERS usage?

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H. Is there a charge for a second pendant in a 2-person household?

YES NO

I. What is your proposed rate(s) for services? * Include all proposed rate components.
*Rates for certain PERS services and PERS installation are standard MassHealth rates established by the Executive Office of Health and Human Services (EOHHS).

J. In the event of a power failure (e.g. electric, telephone), will the PERS/E-PERS continue to operate?

K. What is your agency's policy in the event that equipment is damaged or lost?

L. Describe the process for retrieval of equipment once a consumer no longer requires this service from the ASAP.

II. Staff Qualifications

A. Describe the experience and qualifications of the person responsible for service provision (the manager of the program), if different from the information provided in the Administrative Overview.

B. Describe the experience and qualifications you require for staff providing this service, including coordinators, installers, and, as applicable, monitoring station personnel.

III. Supervision

A. Describe the procedures for supervision, including frequency, documentation, and credentials/qualifications of supervisors for each position.

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B. Describe the systems and procedures employed to ensure that services are delivered to consumers as authorized.

Provider employee who completed this form:

Name

Date