

The IHSS Program Covers Paramedical Services

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What are Paramedical Services?

Paramedical services include such things as:

- administration of medications that go beyond what is covered under nonmedical personal care services (see below)
- injections
- breathing treatments, nebulizer
- pulmonary toileting (pounding lung areas of back and chest to loosen secretions)
- catheter changes or helping void urine with a catheter
- ostomy or bricker bag irrigation or changes and cleaning and maintaining the stoma site
- range of motion exercises and other home therapy programs prescribed by a physician
- nasal-gastric tube or G-Tube feedings & care of stoma site
- skin and wound care if there is a decubitus ulcer (bed or pressure sore) or a diabetes related wound or, if the person has a history of ecubiti, checking the body for "hot spots" that could turn into a decubitus ulcer
- suctioning through a tracheotomy or through the nose and mouth including tracheal (deep) suctioning
- bowel program for those with spinal cord injuries or neurological impairment impacting the gastro-intestinal system
- digital stool removal
- insertion of suppositories or administration of an enema
- adjustment, monitoring and connecting tubing and ventilator; C-PAP or BiPAP machine adjustment, putting on mask

- monitoring to determine need for an intervention including medications that are given on an as-needed basis rather than on a schedule.
- Cutting toenails when necessary to prevent injury to skin from the nails

Where can I find the law on Paramedical Services?

Welfare & Institutions Code 12300.1 says that:

"[In-home] supportive services" include those necessary paramedical services that are ordered by a licensed health care professional who is lawfully authorized to do so, which persons could provide for themselves but for their functional limitations. Paramedical services include the administration of medications, puncturing the skin or inserting a medical device into a body orifice, activities requiring sterile procedures, or other activities requiring judgment based on training given by a licensed health care professional.

The regulations implementing this statute are at MPP 30-757.19. http://www.dss.cahwnet.gov/ord/entres/getinfo/pdf/ssman2.pdf.

How do I know whether what I need is a "Paramedical Service"?

If you have a question about whether a particular task is a paramedical service, ask the questions from the statute:

- (a) Does the task involve puncturing the skin or sticking a medical device into a body opening?
 - (b) Does the task require sterile procedures?
- (c) Does the task require the exercise of judgment make a decision based on training or direction from the recipient's treatment team.

For instance, if a child because of his or her disability is prone to infections and high fevers, the doctor may direct you to take the child's temperature three times a day and may tell you what to do if the temperature is at or above a particular level. That would be covered as paramedical services even though in most instances taking a child's temperature would not be a paramedical task.

Do any personal care services overlap with Paramedical Services?

There are three areas where there is overlap between personal care services and paramedical services:

- (1) Administration of medications: Covered under personal care services is "assistance with self-administration of medications *** [which] consists of reminding the recipient to take prescribed and/or over-the-counter medications when they are to be taken and setting up Medi-Sets" or cutting pills in half. MPP 30-757.14(i). Assistance beyond that putting medications in the recipient's mouth or crushing them and putting in food; for medications to be given on an as-needed basis, determining when needed; administering medication through suppository, nebulizer, salve as on a wound or through G-tube or N-G tube all would be covered under paramedical services.
- (2) Range-of-motion exercises (i.e., to minimize contractures, to keep limbs flexible): Nonmedical personal care services cover range of motion including supervision of exercises including exercises to maintain function, strength, gait, improve gait, endurance, etc. MPP 30-757(g). However when the range of motion or other home therapy program is prescribed by a healthcare professional and implemented with the help of a provider who has received direction on doing so, that therapy can be covered as paramedical services
- (3) Repositioning and rubbing skin to promote circulation and to prevent skin breaking are coverable under personal care services. However, care of pressure sores or decubitus ulcers (skin and wound

care) plus assessment of skin to identify "hot spots" that may be precursors to skin breakdown would be covered under paramedical services.

Filling out and Turning in the Paramedical Form

Attached are paramedical forms that must be filled out, signed and submitted before an IHSS recipient will be authorized time for paramedical services. This form is also available on line. You or the doctor's office can go to this website:

http://www.cdss.ca.gov/cdssweb/entres/forms/English/SOC321.pdf. The information may be typed in and the form printed out.

You should work with your doctor's office so that the form is correctly filled out and includes all the time involved in performing the paramedical service. Depending on the paramedical task, the time could include taking out equipment or materials, washing hands, putting on gloves, sterilizing or cleaning the body site for the procedure (such as where the injection will be given). At the end of the task additional time may be needed for removing gloves, following universal precautions in disposing of any bodily fluids or materials soiled with bodily fluids, cleaning the area, washing hands, putting things away including sometimes locking up medications. Sometimes tasks also involving keeping records – for instance, writing down when as-needed medications are given and why, glucose testing results, when injections are given, etc.

The recipient, or the person acting on the recipient's behalf will also sign the form giving consent for the task to be performed by the IHSS provider.

Sometimes a county IHSS worker says only the worker can send the form to the doctor. **That is wrong!** You have the right to get the form filled out. You can get the form filled out ahead of time so that you can give it to the county worker when he or she comes to your house for an assessment. You or the doctor's office can send in the form to the county IHSS worker.

The county IHSS worker cannot overrule what the doctor orders. However, sometimes the county worker may call the doctor and talk to him or her to get the listed time reduced. Warn your doctor's office. The doctor's office, for instance, may ask the county IHSS worker to put questions in writing or the doctor may elect not to talk to the county IHSS worker at all. We have had reports of some county IHSS workers making such harassing calls that the doctor elected not to deal with the IHSS recipient anymore because too much trouble for the low Medi-Cal payment rate.

Disability Rights California is funded by a variety of sources, for a complete list of funders, go to http://www.disabilityrightsca.org/
Documents/ListofGrantsAndContracts.html.