

This Wasn't Part of the Certification Training: **K:DS** Helping Families and Children with Special Healthcare Needs



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Helping Georgia's Families and Children with Special Healthcare Needs

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Objectives

- Create a better network of knowledge and resources for families of and children with special healthcare needs (CSHCN)
- Review conventional seats that may be used for CSHCN
- Determine when a special needs seat/adaptive device is necessary
- Learn the processes for ordering a special needs seat
- Learn about the Early and Periodic Screening, Diagnostic and Treatment provision





What Qualifies as "Special Needs?"

"Children with special health care needs are those who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who require health care and services of a type or amount beyond that required by children generally."

Merle McPherson, MD *Pediatrics*, July 1998





Working with CSHCN as a Tech

- Remember your training
 - Age
 - Weight
 - Height
 - Developmental level
 - This can also include sensory, behavioral, or positioning needs.







Working with CSHCN as a Tech

- Remember Best Practices
 - Use a conventional seat when possible
 - Rear-facing for as long as possible
 - Use a 5-point harness for as long as possible
 - "Whenever possible, it is best practice for all children to use a conventional car seat if it meets the child's needs." — TG 7-14



Conventional Seat Considerations

- Is the conventional seat a short-term or long-term solution?
- Does it meet the child's positioning needs?
 - A forward-facing child with poor head control needs a seat that permits a forward-facing recline.
- Does the child have any implanted medical devices that could prevent proper harnessing?
 - G-tube, tracheostomy, pacemaker, leads to monitors, etc.





Conventional Seat Considerations

- Potential Barriers
 - Cost Typically must be purchased out-of-pocket; conventional seats do not qualify as special needs seats/adaptive devices.
 - Availability Disruptions in the supply chain have affected the availability of certain products.
 - Size Seats with high sides can be a barrier to the caregiver hoisting a child out of or lowering them into their seat, especially larger vehicles.



- AAP Website HealthyChildren.org
 - Safety & Prevention > On The Go > Car Seats: Product Listing for 2022
 - Fast, easy way to compare conventional car seat specs
 - Broken down by type, e.g. rear-facing only, convertible, etc.
 - Now includes a column, "Can Recline Forward-Facing?"





Chicco NextFit Zip - \$305

- RF: 5-40 pounds, 43 inches
- FF: 22-65 pounds, 49 inches
- Installation: LATCH or Lock-off
- 9 recline positions <u>not</u> specific to weight
- Convenience features: no-rethread harness and zip-off pad for easy washing



NextFit Max Zip Air Convertible Car Seat - \$350

- RF: 4-50 pounds, 43 inches
- FF: 22-65 pounds, 49 inches
- Installation: LATCH or Lock-off
- 9 recline positions **not** specific to weight
- Convenience features: no-rethread harness and zip-off pad for easy washing









OneFit ClearTex All-in-One Car Seat - \$300

- RF: 5-40 pounds, 43 inches
- FF: 25-65 pounds, 54 inches
- Installation: LATCH or Lock-off
- No-rethread harness
- 9 recline positions **not** specific to weight
- Converts into high back and backless BPB



Fit4 Adapt 4-in-1 Convertible Car Seat - \$390

- RF: 4-40 pounds, 43 inches
- FF: 25-65 pounds, 54 inches
- Installation: LATCH or Lock-off
- No-rethread harness
- 9 recline positions **not** specific to weight
- Converts into high back and backless BPB









MyFit Harness + Booster Car Seat - \$210

- FF: 25-65 pounds, 54 inches
- Installation: LATCH or Lock-off
- No-rethread harness
- 4 recline positions <u>not</u> specific to weight



Obtaining Special Needs/Adaptive Seats

- Gather all your information from the family:
 - Vehicle make/model/year; does the child ride in any other vehicles?
 - Who else is transported in the vehicle, where do they sit, do they use a car seat?
 - What seat is the child currently using; what is the history?
 - What is the child's diagnosis? How is their head and torso/trunk control?
 - Do they have any implanted medical devices?



- Ask permission to speak with the child's medical team pediatrician, rehabilitation (rehab) therapist, specialists. Caregiver(s) should sign any HIPAA-related releases.
 - Pediatrician/Specialists Provide medical information, e.g. prognosis, upcoming procedures, and timeframes for recovery. May write a prescription for the device to accompany the application to insurance.
 - Rehab Therapists Provide input related to positioning needs and assist in taking measurements. Can write a letter of medical necessity (LMN) to submit along with prescription.





A Note on Rehab Therapists

- Rehab Therapists can include:
 - Occupational Therapist Focuses on improving the patient's ability to perform activities of daily living.
 - Physical Therapist Focuses on improving the patient's ability to move their body.
- Crucial to involve them as they have access to durable medical equipment (DME) providers who can obtain demos of seats to trial in their clinic.



- Identify yourself as a CPST.
- "I'm assisting a family with determining what types of special needs/adaptive seats are best suited for their child based on the feedback received from you, the family, and their vehicle details."
- Be prepared to provide a brief summary of your information.
- Ask the provider if they have any considerations/concerns to add.



- Pool your information:
 - Vehicle specs
 - Family's/caregiver's needs
 - Child's height, weight, age, any measurements taken
 - Recommendations from the child's medical team
- Compare this to the seats available and begin including/excluding seats.
 - Use the brochure from the National Center to compare seats.





- Trial the seats in the vehicle(s) and with the child.
 - Rehab therapist may have access to seats through DME providers.
 - The Child Occupant Safety Project (COSP) may have demos available.
- After determining which seat is appropriate, ask a medical provider to write a prescription and/or request the rehab therapist write an LMN.
- Documentation should be submitted to insurance via their designated process.
- Approval time depends on the individual insurance company.





Repeat the same process as described with Medicaid.

KEY DIFFERENCES

- An LMN should be submitted, not just a prescription.
- Documentation is typically submitted via the rehab therapist to a DME provider.
- Request that the LMN incorporates language specific to the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Provision to the Medicaid Act.





What is EPSDT?

- "The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, and developmental, and specialty services." – Medicaid.gov
 - TL;DR It covers medically necessary services and equipment.
 - Structured at the federal level; Georgia has additional legislation, SB 507, that intends to add clarity and directives to streamline services.
- Word and PDF template LMN with wording for EPSDT available for use.



- It is extremely important that a clear, well-worded LMN is written.
 - Justifies why the seat chosen is appropriate.
 - Identify all necessary accessories, e.g. pommel, incontinence cover, seat extender, etc. and ensure they're included in the LMN.
- Once the documentation is submitted it can take up to six months to receive the seat.





- The seat is typically shipped to the family.
 - If working with a provider, you may be able to request the seat is shipped to the provider or to you.
- If the provider wants to ship the seat to the family, ensure they have your contact information and clear instructions for follow-up.





Sample Letter of Medical Necessity to access Medicaid services via EPSDT

RE: [Name of child]
DOB:

Dear ______,

I have assessed the above-named child. I am a [physician, nurse, psychologist, clinical social worker, occupational therapist, etc.] licensed to practice in the State of Georgia. I have determined based upon my training and experience that this child requires [list the treatments, procedures, therapies or tests you believe the child needs based upon your assessment]. I am making this request pursuant to the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) provisions of the Medicaid Act, 42 U.S.C.A. § 1396d(r).

Include the following information:

1. All diagnoses

- 2. All prognoses
- 3. Service being prescribed as medically necessary
- 4. Amount, scope and duration of service being prescribed. For example: I am prescribing 4 hours of PT each week for the next 90 days at which time I will reevaluate the child's condition to determine if the services are still necessary.

[Describe the child's medical history, and current diagnoses and treatments. Describe the treatment that you are requesting/prescribing and a description of how this treatment will "correct or ameliorate" any physical or mental illness or condition of the child.]

If you deny this request, please provide prompt written notice to this office [and the child's parent or legal guardian] of the reason for the denial and the process by which your decision may be appealed.

Sincerely,

[Physician's name]







Angel Ride

Weight: 9 pounds or less Height: 21.5 inches or less

For infants who must travel lying down in a car bed. (Merritt Car Seat, 317-409-0148, merrittcarseat.com)



Dream Ride SE

Weight: 5-20 pounds

Height: 26 inches or less

For infants who must travel lying down in a car bed. (Dorel Juvenile Group, 800-544-1108, na.doreljuvenile.com)





Wallenberg

Weight: 5-40 pounds rear-facing, 25-80 pounds forward-

facing

Height: Top of child's head must be at least 1 inch below the top of restraint rear-facing, Up to 60 inches forward-facing

For children in leg, hip, or arm casts. Hammock and wedge for positioning.

(Merritt Car Seat, 317-409-0148, merrittcarseat.com)





Quokka

Weight: 5-39.6 pounds rear-facing, 22-39.6 pounds

forward-facing

Height: Up to 41 inches rear-facing and forward-facing

For children in casts with spica positioning wedge. Additional Accessories include: incontinence pad. (Etac/R82, 844-876-6245, etac.com)



Lay Down EZ-ON Vest

Ages: 1 year and older Weight: 22-106 pounds

Height: Child must fit lengthwise on vehicle bench seat.

For children who must travel lying down. No mount neede

(EZ-ON Products, 800-323-6598, ezonpro.com)





Roosevelt

Weight: 35-115 pounds & Height: 33.5-62 inches

For children needing a 5-point harness. Additional Accessories include: EZ-Up headrest and cap, foam abductor, incontinent cover, scoliosis harness, extra long harness, heavy duty tether anchor, seat depth extenders, anti-escape options. Tether/EZ-Tether required. FAA approved.

(Merritt Car Seat, 317-409-0148, merrittcarseat.com)





Spirit/Spirit Plus

Weight: 25-130 pounds & Height: Up to 66 inches

For children needing a 5-point harness. Additional Accessories including: incontinence cover, anti-escape options, extensor thrust wedge, seat extender, bolt-in tether hardware. Spirit Plus includes swing away hip and trunk supports, abductor. Spirit Spica also available. Tether required.

(Inspired by Drive, 800-454-6612, inspiredbydrive.com)





Convaid Carrot 3 Child Restraint

Weight: 30-108 pounds & Height: 37-60 inches

For children needing a booster seat with postural support or up to 30-degree recline from vertical. Additional Accessories include: support tray, wedge, tether strap, foot rest, seat extensions, backrest extensions, lateral supports, incontinence cover, antiescape vest, FAA fixing strap. More accessories on order form. Lap-and-shoulder belt for occupant protection. Lower anchors required. Tether highly recommended. FAA approved with fixing strap. (Etac/Convaid, 844-876-6245, etac.com)



Churchill

Weight: 44-175 pounds & Height: 44-72 inches



For older children needing a booster seat with more hip/pelvis support and trunk support. Velcro vest or Positioning Harness options (harness with or without anti-escape options) 15-inch or 18-inch booster seat depth. Additional Accessories include: EZ-Up headrest and cap, hip inflection wedge, hip inflection comfort pommel, foam abductor, incontinent cover, adductor strap, Lap-and-shoulder belt for occupant protection. LATCH required (or use of attachment bracket kit).

(Merritt Car Seat, 317-409-0148, merrittcarseat.com)





EZ-ON Vest

Ages: 2 years and older & Weight: 31-168 pounds

For children needing more postural support. Push button or Zipper options (anti-escape back zipper). Additional Accessories on order form. Lap-and-shoulder belt for occupant protection. Tether mount, Floor mount, or wheelchair mount required.

(EZ-ON Products, 800-323-6598, ezonpro.com)





Moore Support Vest

Weight: 65 pounds and up & Waist size: 30-36, 38-44 inches

For older children needing more postural support. Lap-and-shoulder belt for occupant protection. LATCH required. (Besi Inc, 800-543-8222, besi-inc.com)



Chamberlain

Weight: 81-225 pounds & Height: 48 inches minimum - until top of ears exceed top of vehicle seat back or headrest

For older children needing more postural support. Velcro vest and leg straps for positioning. Additional Accessories include: EZ-Up headrest and cap, attachment bracket kit. Lap-and-shoulder belt for occupant protection. LATCH required (or use of attachment bracket kit). (Merritt Car Seat, 317-409-0148, merrittcarseat.com)



Resources

- List of available conventional seats by type and specs:
 - HealthyChildren.org > Safety & Prevention > On The Go > Car Seats: Product Listing for 2022
- COSP Resource and Referral Packet for Children with Special Healthcare Needs
 - Flowchart with basic steps to determine if a conventional seat can be used.
 - Contact list of current grantees for direct referrals.
 - Vehicle modification contact list with pricing information



Resources

- Preventlnjury.org
 - Brochures > National Center for the Safe Transportation of Children with Special Health Care Needs
 - Details list with pictures of types of seats, reasons for use, and specs.
 - Additional brochures available for specific needs, e.g. Down's Syndrome, autism, cerebral palsy. Some information available in Spanish.
 - Adaptive Needs > Medical Conditions
 - List of medical conditions and recommendations for transportation.



Resources

- Preventlnjury.org (cont)
 - Adaptive Needs > Child Restraint Options
 - Summary of using conventional seats and brief introduction to type/function of special needs/adaptive seats.
- Safe Transportation for All Children (STAC) Training
 - Also referred to as the Special Needs Training
 - Two-day enrichment course that counts for 11.5 CEUs
 - Provides in-depth review and hands-on skills assessments





- Can also take a picture
- Folder contains printout of presentation and notes for slides, COSP Resource and Referral Packet, EPSDT template letter of medical necessity, and more



Contact Information

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