

# **Guidelines for Adaptive Aids in Family Care and Family Care Partnership — Service Dogs**



**STATE OF WISCONSIN  
DEPARTMENT OF HEALTH SERVICES  
Division of Medicaid Services**

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## Guidelines for Adaptive Aids in Family Care and Family Care Partnership – Service Dogs

### I. Definition of a Service Dog:

For the purpose of coverage as an adaptive aid benefit in Family Care and Family Care Partnership, a service dog is a dog that has been individually trained by a reputable provider experienced in providing structured training for service dogs to do work or perform tasks for an individual with a disability. The task(s) performed by the dog must be directly related to the person's disability. Emotional support dogs and therapy dogs are not service dogs.

When a member obtains a service dog as a covered benefit, the member recognizes that he or she owns the service dog and agrees to be responsible for and liable for the actions of the service dog.

Service Dog	Emotional Support Dog	Therapy Dog
<p><b>Definition:</b> A dog that has been individually trained by a reputable provider experienced in providing structured training for service dogs to do work or perform tasks for an individual with a disability. The task(s) performed by the dog must be directly related to the person's disability.</p> <p>Some (non-exhaustive) examples:</p> <p><b>Guide Dog:</b> Guides a person who is blind or visually impaired.</p> <p><b>Hearing Dog:</b> Alerts a person who is deaf or hearing impaired to sounds such as door bells, smoke alarms, and alarm clocks.</p> <p><b>Mobility Dog:</b> Assists a person in performing tasks, such as opening doors, picking up objects, and pulling wheelchairs; provides stability to a person with the aid of a special harness.</p> <p><b>Medical Alert Dog:</b> Notifies a person of a change in body chemistry that may indicate a health concern, such as low or high blood sugar for a person with diabetes, or that a seizure is imminent for a person with epilepsy.</p> <p><b>Psychiatric Service Dog:</b> Assists a person with a documented psychiatric disorder such as anxiety or post-traumatic stress disorder (PTSD).</p> <p>It is an important distinction of a psychiatric service dog that it performs a specific task to assist its person, as is the case with all service dogs. Some examples follow:</p> <ol style="list-style-type: none"> <li>1. Providing safety checks or room searches for a member with PTSD.</li> <li>2. Blocking a person in a dissociative episode from wandering into danger (for example, traffic).</li> </ol>	<p><b>Definition:</b> A dog that provides comfort or emotional support simply by being with a person. While an emotional support dog may be prescribed by a medical professional to help ease a person's anxiety, depression, or phobia, it is not a service dog because it is not trained to perform a specific job or task for an individual with a disability.</p>	<p><b>Definition:</b> A dog trained to interact with many people in a clinical setting (hospitals, nursing homes, schools, or other institutional settings), other than its handler, to make those people feel better. A therapy dog is not a service dog because it is not trained to perform a specific job or tasks for an individual with a disability.</p>

Service Dog	Emotional Support Dog	Therapy Dog
<p>3. Physically preventing or interrupting impulsive or destructive behaviors, such as self-harm.</p> <p>In each of these examples, the psychiatric service animal is trained to perform certain tasks directly related to an individual's psychiatric disability and to help the member accomplish vital tasks the member would otherwise not be able to perform.</p>		

## II. What is Covered

1. The purchase of a fully trained service dog as defined above. The fully trained service dog must be purchased from a reputable provider that has experience providing structured training for service dogs. Service dog providers do not have to be Medicaid certified. There are no state or national licensing or accreditation standards that apply to service dog providers. Whether a provider is reputable has to be determined by the MCO for each member and provider on a case-by-case basis. Providers that are members of Assistive Dogs International are considered reputable providers: <https://assistancedogsinternational.org>.

If the provider is not a member of Assistive Dogs International, it is expected that the provider would be able to demonstrate that its program meets or exceeds the following standards:

### a. Screening

Dogs selected by the provider for training:

- i. Are temperamentally screened for emotional soundness and working ability.
- ii. Are physically screened for the highest degree of good health and physical soundness.

### b. Training

Dogs are trained using humane training methods providing for the physical and emotional safety of the dog.

### c. Partnering

- i. Dogs are matched to best suit their human partner's needs, abilities, and lifestyle.
- ii. Dogs are placed with a person able to provide for the dog's emotional, physical, and financial needs.
- iii. Dogs are placed with a person able to provide a stable and secure living environment.
- iv. Human partner is provided with a thorough and individualized education process regarding all aspects of service dog partnership.

### d. Capabilities

Fully trained service dogs produced by the program are capable of:

- i. Responding to commands (basic obedience and skilled tasks) 90% of the time on the first ask in all public and home environments.
- ii. Demonstrating basic obedience skills by responding to voice and/or hand signals for sitting, staying in place, lying down, walking in a controlled position near its human partner, and coming to the human partner when called.

- iii. Performing their service dog function in public.
- iv. [Guide dog] Negotiating obstacles, overhangs, barriers, street crossings, construction work, and public transportation.
- v. [Hearing dog] Alerting its human partner through physical contact or by some other behavior, so the human partner is aware when a trained sound occurs.
- vi. Performing three<sup>1</sup> or more tasks to mitigate aspects of the human partner's disability.
  - a) The task must be visibly identifiable.
  - b) The task must directly mitigate the human partner's disability.

A task is trained behavior the dog does on cue (or command) to mitigate its partner's disability. The cue can be verbal, a hand signal, something in the environment, or some behavior exhibited by the partner or another person. Examples of a verbal cue could be "take it," and a hand signal could be pointing at an object to indicate to the dog to retrieve it. A cue in the environment might be a strap on a door, a car in the road, or an alarm clock ringing. The behavior of a person could be falling to the ground, hand shaking, or emitting odor of low blood sugar.

2. Post-purchase training with a reputable provider with experience providing structured training for service dogs. Post-purchase training is necessary to partner a fully trained service dog with its owner (for example, enable the fully trained service dog and the member to work together and for the member to make use of the adaptive aid. This is similar to the "fitted to the member" customization that is covered for other adaptive aids (for example, wheelchair modifications for fit).

Reasonable travel costs (excluding mileage reimbursement) related to this training can be covered under the community transportation benefit because the travel is necessary for the member to access a waiver service.

Food and lodging costs related to the training cannot be covered by the program because 42 CFR § 441.301(a)(2) does not provide federal financial participation for the costs of room and board for home and community-based waiver services. If the MCO determines that paying for the room and board is the best option, it may do so. However, the MCO cannot include those payments in the encounter data, and the payments cannot be considered in establishing capitation rates. This coverage also includes coverage of a replacement service dog in the event that a dog is determined to not be suitable for a member as a result of the owner/handler team training (in the same way that the replacement of any other adaptive aid is covered when that aid does not work for the member).

3. Ongoing maintenance costs of a fully trained service dog obtained from a reputable provider with experience providing structured training for service dogs. The coverage is similar to the upkeep, repairs, and adjustments covered for other adaptive aids and durable medical equipment. Note that for the ongoing maintenance costs to be covered, it is not necessary that the member have obtained the service dog through the MCO. However, it is necessary that the member have obtained the service dog from a reputable provider with experience providing structured training for service dogs. Additionally, if a member's member-centered plan included an authorized

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<sup>1</sup> Unless the mitigation of the human partner's disability requires less than three tasks, for example when a service dog is trained to mitigate a seizure by lying across the human partner's legs.

service dog prior to January 1, 2020, the MCO may cover ongoing maintenance costs for the life of that service dog, regardless of who provided the service dog's initial training.

4. Like any adaptive aid, the MCO must use its discretion in determining whether it is cost-effective to maintain the existing aid or replace it.

### III. What Are Ongoing Maintenance Costs

Ongoing maintenance costs consist of the following:

1. Preventive, acute, and primary veterinary care necessary to maintain or restore the health and functionality of the service dog. This coverage includes, but is not limited to:
  - a. Services that maintain or restore the dog's health to an acceptable working condition (for example, treatment for broken bones, poisoning, snake bites, car accidents, lacerations, foreign object ingestion, mass removals, treatable cancer, diabetes, arthritis, allergies, cruciate ligament injuries, skin and ear infections, urinary tract infections, deworming, and epilepsy). Treatable cancer means that there is a high probability of restoring the dog's health to an acceptable working condition.
  - b. Physical exams (annual or at the frequency recommended by a veterinarian).
  - c. Vaccinations (for example, vaccines for distemper, canine adenovirus-2 [hepatitis and respiratory disease], canine parvovirus-2, rabies, leptospirosis, coronavirus, canine parainfluenza and Bordetella bronchiseptica [both are causes of "kennel cough"], and Borrelia burgdorferi [causes Lyme Disease]).
  - d. Testing and diagnostics (for example, x-rays, MRIs, CT scans, ultrasounds, blood tests, urinalysis, fecal, and heartworm).
  - e. Prescription medications (including intravenous fluids and medications) prescribed by a veterinarian and approved by the Food and Drug Administration.
  - f. Prescription food that is prescribed by a veterinarian to treat a covered condition.
  - g. Dental care to treat a covered condition.
  - h. Vitamins and supplements that are prescribed by a veterinarian to treat a covered condition.
  - i. Medical supplies (for example, bandages, casts, and splints) that are prescribed or ordered by a veterinarian.
2. Equipment and items necessary for the dog to perform its adaptive aid function. This includes, but is not limited to:
  - a. Dog food (similar to batteries or energy for the adaptive aid).
  - b. Leashes.
  - c. Harnesses.
  - d. Leads.
  - e. Vests.
  - f. Identification patches.
  - g. Backpacks or saddlebags.

- h. City and county annual licenses.

#### **IV. What Is Not Covered**

1. The purchase, post-purchase training costs, or maintenance costs of any dog that does not meet the definition of a service dog for the purpose of coverage as an adaptive aid benefit.
2. The costs of training a dog to become a service dog. Many members wish to purchase an untrained dog or puppy and then work with a trainer to train the dog to become a service dog (or train the dog on their own). However, coverage is not provided for the training of a dog to become a service dog because there is no guarantee that the dog will become a service dog. A dog that is being trained to be a service dog may never actually become a service dog. The purchase price of a fully trained service dog, which is obtained from a reputable third party provider, presumably reflects the costs associated with the training of the dog (in the same manner in which the price of a wheelchair or any other type of manufactured good reflects the costs of its creation).
3. Veterinary care:
  - a. For conditions or diseases that cannot be cured or have a low probability of being cured. Treatment and care for progressive diseases or conditions that are irreversible and render the service dog unable to perform its adaptive aid function (for example, hip dysplasia, chronic renal failure, terminal cancer, and canine degenerative myelopathy)
  - b. Holistic treatments (for example, acupuncture, chiropractic, laser therapy, and herbal)
  - c. Experimental medical procedures and medications. For example, treatment or medication that is not generally accepted in the veterinary medical community as effective or proven, such as clinical trials
  - d. Cosmetic surgeries (for example, ear cropping and tail docking)
  - e. Treatment and care related to breeding, pregnancy, whelping, or nursing
  - f. Dental cleanings, unless used to treat a covered illness
  - g. Organ transplants
4. Equipment and items not necessary for the dog to perform its adaptive aid function. These are items that any dog might need and are not specific to service dogs:
  - a. Boarding
  - b. Grooming or grooming supplies (for example, non-prescription baths, ear cleanings, non-prescription shampoos, and nail trims)
  - c. Non-prescription vitamins and mineral supplements
  - d. Dog park permits
  - e. Water bowls
  - f. Food dishes
  - g. Blankets
  - h. Toys
  - i. Treats

If you have questions regarding this publication, please email [DHSDMSLTC@dhs.wisconsin.gov](mailto:DHSDMSLTC@dhs.wisconsin.gov).

**Contract reference:** [DHS-MCO contract](#) (Addendum VI.A)