



**WALLA WALLA COUNTY DEPARTMENT OF COMMUNITY HEALTH**  
314 West Main Street • P.O. Box 1753 • Walla Walla, WA 99362  
Telephone: (509) 524-2650 • Confidential Fax: (509) 524-2642 • Main Fax: (509) 524-2678

### **Children & Youth with Special Health Care Needs Family Assistance Program Overview**

Walla Walla County Department of Community Health (DCH) seeks to support families with children with special health care needs. In addition to nurse care coordination, DCH has made available funding of up to \$9000 per calendar year to offer financial assistance to families for services related to their child's health care needs. This funding was allocated by the County Commissioners from the local Ad Valorem property tax funds, which are to be used for mental health and developmental disabilities ([RCW 71.20.110](#)).

Who is eligible: Children and youth up to age 18 years who have developmental conditions and require health and related services of a type, or amount, beyond what is generally needed.

Eligible Supports include, but are not limited to:

- Adaptive equipment such as standing frames, gait trainers, augmentative communication devices, bath chairs, bath grab bars, hand held shower sprayer, etc.
- Assistive technology, such as wheelchair or wheelchair ramp; voice-activated computer; telecommunication device, etc.
- Sensory tools, such as washable weighted blanket, sensory therapy brushes, deep pressure sensory rolling pin, spinning boards, etc.
- Assistance with lodging for approved out of area medical procedures.

Timing: Requests should be submitted at least 1.5 months before the date of the service to allow time for the approval process.

Amount: There is no minimum cost for an eligible 'support'. Each family can apply, through the Community Health Nurse for financial assistance. There will be an annual cap of \$500 per family, which will go from January to December. Assistance over \$500 will be reviewed on a case-by-case basis as funding is available. DCH reserves the right to decline requests.

Payment: DCH will pay directly for approved services. This will be completed through the Purchase Order process. Reimbursement for lodging expenses will be per the [Federal Government's per diem rates for lodging](#). Lodging will only be reimbursed if the service takes place 50 miles or more from the families place of residence. In regard to the distance traveled, DCH will follow [Washington State's lodging reimbursement policy](#).

Application Process: A Family Financial Assistance Request form must be completed (see attached form) by the Community Health Nurse. Once the form is completed, the Community Health Nurse will begin the evaluation process, for approval.

**For referrals or questions please call Amanda Hinrichs RN CYSHCN Coordinator at 509-524-2658, text 509-520-2445 or complete as much as you can of the top portion on the back page and fax to 509-524-2678.**

**Always working for a safer, healthier and thriving Walla Walla County**