HOW TO BE A SUPPORT BROKER: AN INSTRUCTIONS and PROCEDURES MANUAL

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Introduction

This manual has several goals:

- Ensure that the potential or working support broker understands, agrees with, and can state the philosophy that is the foundation of the self-direction option.
- Provide complete step-by-step information describing the support broker qualifying process, the function of the Circle of Support and the Person Centered Planning process and the business model of the Self-Direction option.
- Ensure that the support broker knows the required and optional job duties.
- Give the support broker the tools, including templates and resources, necessary to do their job.
- Ensure that the support broker knows the limitations regarding who can employ them as a support broker.
- Give the support broker instructions on how to work with their employer and the Circle of Support to complete a Support and Spending Plan.
- Clarify the procedures, processes and rules that govern the role of the support broker in the self-direction Waiver option.

In order to make the manual less tedious and more relevant, we have included some poetry written by a self-advocate. The poetry does a better job than any of the authors at expressing the hopes and fears of a person with disabilities who is struggling for recognition and independence.

The poems used in this Manual are written by Gail Bottoms and are from her book "from the inside out". The poetry is used with her permission.

Gail was born and raised in Griffin, Georgia. She is a daughter, a wife, a mother and a grandmother who found her gift for poetry after becoming active in the disability rights movement.

Gail is involved with the self-advocacy group, "People First" and served as president of the People First Georgia group in 1997 through 2000. She has spoken before Georgia State Legislators as well as United States Congressional and Senate leaders on behalf of the rights of people with disabilities.

Publication of her book was made possible by the Institute on Human Development and Disability. More information can be found on their web site: www.ihdd.uga.edu .

This poem by Gail Bottoms does a good job of saying how people with disabilities want to be seen by others:

crippled

What does crippled mean, a definition pure and clean?
To say someone's crippled, a putdown keen,
it hurts to say a person is so,
to say they're less able than you, you know.
The only way to use the word,
to use it proper and not absurd,
is to make it loud and clear there's
No crippled people here.
Crippled in finances, yes
and maybe in lack of opportunities.
Or in the way other people see
the people with a disability.
Lack of money and opportunities
are the only disabilities I see.
Crippled, there is such a word,
but to give it to people is so absurd.

GLOSSARY OF ACRONYMS and DEFINITIONS

CSW: COMMUNITY SUPPORT WORKER: An individual, agency or vendor selected and paid by the participant to provide Community Support Worker Services.

CHC: CRIMINAL HISTORY CHECK: A Support Broker must comply with IDAPA 16.05.06: Rules Governing Mandatory Criminal History Checks.

DEPARTMENT: This term refers to the Department of Health and Welfare.

FEA: FISCAL EMPLOYER AGENT: An agency that provides Financial Management Services to participants who have chosen the SDCS option.

FMS: Fiscal Management Services: Services provided by a Fiscal Employer Agent.

IAP: INDEPENDENT ASSESSOR: An assessment for program eligibility may be performed by either the Department or its designee. The purpose of the assessment is to determine a participant's eligibility for developmental disabilities services in accordance with Section 66-402, Idaho Code, and for ICF/MR level of care for waiver services in accordance with IDAPA 16.03.09, "Rules Governing the Medical Assistance Program," Sections 610 through 615. (3-20-04). Only participants who are eligible for ICF/MR level of care for Waiver services meet criteria for the Self-Direction Community Services option.

ICDE: Idaho Center for Disabilities Evaluation: The designated contractor utilized by the Department of Health and Welfare to determine eligibility for adult developmental disabilities services.

ICF/MR: Intermediate Care Facility for the Mentally Retarded: This refers to both a specific type of institution and an amount of payment for a specific level of care.

ISP: Individual Supports Plan: This refers to the Plan that is developed by participants in the traditional DD Waiver program.

MVMC: My Voice, My Choice: The participant workbook for self-direction.

PES: Participant Experience Survey: The document used to monitor and discuss participant satisfaction with their ability to self-direct their services.

RMS: REGIONAL MEDICAID SERVICES: Medicaid services are available through the local offices in each Department region. There are seven regions in Idaho.

SB: SUPPORT BROKER: An individual who advocates on behalf of the participant and who is hired by the participant to provide Support Broker services

SD: SELF DIRECTION: The program option which offers consumer-directed services to participants who meet criteria for ICF/MR Waiver Level of Care for developmental disabilities services.

SDCS: Self- Direction Community Supports option

SIB-R: Scales of Independent Behavior – Revised: An assessment tool used to gauge the age-equivalency of a person's functional abilities.

SSP or S&SP: Support and Spending Plan: The tool used to calculate the individual's expenses per support and service.

CHAPTER ONE: GETTING STARTED

1. Support Broker Job Description

Support Brokers work directly for the individual with a disability, assisting the individual to develop and manage the supports they are self-directing. The support broker must provide supports in ways that are flexible, responsive to and controlled by the individual. The Support Broker helps their employer to develop their Support and Spending Plan, budget their money, and monitor their services.

Support Brokers are committed to a value system that believes each person has a fundamental right to live a life of dignity; be fully self-determined; be fully included in community life; access the supports needed to be fully included; and choose and be supported by a network of family members and friends. A support broker provides leadership, ideas, commitment, and coordination in the life of the person they support. Support Brokers have a clear focus on helping the individuals they support build lives, and do whatever it takes to ensure quality in the lives of those they support. Accountability of the Support Broker is defined in terms of meeting the needs of the individual they serve.

As Gail Bottoms puts it in her poem:

<u>my dream</u>

One day I dreamed I had two friends.
I was invited in and they asked me things.
And they listened to see what I would say,
as I happily did begin.
In my dream we walked away side by side.
I can't explain the joy inside.
I heard two people talking near and turning to me for a moment
and then turn to each other and say,
"She amazed me the other day".
I would like them hear them say,
"Gail, you amazed me the other day."
The other way makes me feel like I'm not a part,
I like what you say, but I really don't like to feel that way.
If I could make a difference,
If I could make it happen for me and you,
If I could change the way other people
think and do,
the way the see me and the
way they see you.

You can see it in their eyes you know,
The way that they toss their heads and show.
They don't think you will understand
What they are saying,
So they turn to the one who stands beside you and
Talking on they go.
Little do the make you feel, not equal they judge,
just interested in pizza, bowling and
chocolate fudge.

The IDAPA Rules are not as interesting to read. They are the legal foundation for the State to ensure that the Support Broker will listen and make their employer the person who directs their own care.

As per IDAPA 16.03.13 – Consumer Directed Services, Docket 16-0313-0602, the Support Broker must:

a. Participate in the person-centered planning process;
b. Develop a written support and spending plan with the participant that includes the supports that the participant needs and wants, related risks identified with the participant's wants and preferences, and a comprehensive risk plan for each potential risk that includes at least three (3) backup plans should a support fail. This plan must be authorized by the Department;
c. Assist the participant to monitor and review his budget;
d. Submit documentation regarding the participant's satisfaction with identified supports as requested by the Department;
e. Participate with Department quality assurance measures, as requested;
f. Assist the participant to complete the annual re-determination process as needed, including updating the support and spending plan and submitting it to the Department for authorization; and
g. Assist the participant, as needed, to meet his participant responsibilities outlined in Section 120 of these rules and to protect his own health and safety.

Depending on the requests and needs of each participant, the Support Broker may:

a. Assist the participant to develop and maintain a circle of support;
b. Help the participant learn and implement the skills needed to recruit, hire, and monitor community supports;
c. Assist the participant to negotiate rates for paid Community Support Workers;
d. Maintain documentation of supports provided by each Community Support Worker and participant's satisfaction with these supports;

e. Assist the participant to monitor community supports;
f. Assist the participant to resolve employment-related problems; and
g. Assist the participant to identify and develop community resources to meet specific needs

On the Web!

For information about the Idaho Administrative Rules, visit: http://adm.idaho.gov/adminrules/rules/idapa16.03.13

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2. The Application Process

a. Who Can Apply?

Q: WHO CAN APPLY TO BE A SUPPORT BROKER?

A: Anyone who believes they meet the minimum qualifications can apply to be a support broker.

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b. Minimum Requirements:

- Eighteen (18) years of age, **and**
- Skills and knowledge typically gained by completing college courses or community classes or workshops that count toward a degree in the human services field, **and**
- Has at least two (2) years verifiable experience with the target population and knowledge of the services and resources in the developmental disabilities field.

You are NOT eligible to become the support broker for an individual if:

- **You are the individual's guardian, payee or conservator; or**
- **You are the individual's parent; or**
- **You are the individual's spouse; or**
- **You are employed by an agency that provides paid community supports to the individual.**

c. Wages

Payment rate for Support Brokers is mandated as up to $18.72/hour, but participants are advised to offer less than this to start so they can offer raises after you get an idea of their needs and how you can assist them. Be sure to discuss your goals and your future with them in terms of this financial concept.

On the Web!

For more information about what Support Brokers do, visit:
http://www.mosaiclink.org/What_is_a_Service_Broker.htm

d. The Support Broker Application:

SUPPORT BROKER—APPLICATION

All application responses must be typed. Submit completed application to:

Mailing Address:
Idaho Department of Health and Welfare
Division of Medicaid
Bureau of Behavioral Health Care
Attn: Mellie Turrittin
P.O. Box 83720
Boise, ID 83720-0036

Street Address:
3232 Elder Street
Boise, Idaho

The Division of Medicaid will notify you after your Support Broker application is reviewed.

Support Broker Employment Application

PLEASE NOTE: Complete all parts of the application. An incomplete application or an application that does not clearly show the experience and/or training required will not be accepted. If you have no information to enter in a section, please write N/A.

Name and Address	
Name (First, MI, Last)	Social Security Number
Mailing Address	
City, State and Zip Code	
Home Phone	Message Phone
E-mail Address	May we use e-mail to contact you? Yes □ No □

Additional Information
I certify that I am 18 years of age or older. Please attach a copy of driver's license, birth certificate or other document to verify age. The minimum age to qualify to be a Support Broker is 18.
I have attached a provisional Criminal History Check Clearance.
I certify that I have completed a Criminal History check that is current within one year and have requested that it be sent to the Department of Health and Welfare at: **Medicaid Central Office, Bureau of Behavioral Health, P.O. Box 83720** **Boise, ID 83720-0036** **ATTN: Mellie Turrittin**

Education			
High School	From	To	Did you graduate?
Continuing Education Please list any coursework, college(s) attended, vocational training or certification training.			
Location		Type of degree or diploma	
School	From	To	Did you graduate?
Location		Type of degree or diploma	
School	From	To	Did you graduate?
Location		Type of degree or diploma	
School	From	To	Did you graduate?
Location		Type of degree or diploma	
School	From	To	Did you graduate?

Relevant Work History List any jobs held which will illustrate at least two years verifiable experience with the target population.				
Job Title	From	To	Hrs/Week	Employer
Address	Phone	Supervisor		May we contact this employer? Yes □ No □
Job Responsibilities				

Work History (Continued)				
Job Title	From	To	Hrs/Week	Employer
Address	Phone	Supervisor		May we contact this employer? Yes □ No □
Job Responsibilities				

Job Title	From	To	Hrs/Week	Employer
Address	Phone	Supervisor		May we contact this employer? Yes □ No □
Job Responsibilities				

Additional relevant training, coursework, skills or knowledge

I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that should an investigation disclose untruthful or misleading answers, my application may be rejected and, if my qualification to provide services as a Support Broker may be terminated by the Department of Health and Welfare, Medicaid Division.	
Signature	Date

Section 1 - Fill out the INFORMATION PORTION of Application above.

Section 2—KNOWLEDGE AND EXPERIENCE

Answer Questions A through J of this section. Be thorough in your responses. You must demonstrate practical knowledge and experience associated with the minimal qualifications. Your score will be based on the information you provide below.

Each question is worth a total of ten points. You must get a score of 70 points to demonstrate that you meet the minimal qualifications.

Your answers must be typed. Please sign each page of your responses.

A. The Department of Health and Welfare requires support brokerage as a service for individuals who wish to self-direct under the Developmental Disabilities (DD) Waiver. Please answer the following questions:
    - What are the three (3) most important responsibilities associated with being a Support Broker?

- What might be three (3) strategies for connecting people to their communities?
- What are three (3) key elements of person-centered planning?

B. The individual and their circle of support are the people in charge of developing the Support and Spending Plan. Name at least three things you could do as a Support Broker to make sure an individual and/or their circle of support remains in control of developing the Support and Spending Plan.

C. Describe a situation in which you negotiated on behalf of an individual. Include any challenges that you experienced and the final outcome.

D. Describe a situation that required you to use conflict resolution skills when advocating on behalf of an individual with a developmental disability. Describe what happened and the final outcome.

E. Describe your experience in developing or monitoring a budget. List at least three steps in the process. If you have helped another person do this, describe what you did to help.

F. Describe a situation in which you helped an individual with disabilities to act on their own behalf. List at least three steps in the process or three things that you did to help.

Review the following case scenarios and answer the corresponding questions. Your answers should demonstrate an understanding of the principles of self-direction. Evaluate each situation and state what you might do to keep the focus on the individual's goals and wants while continuing to meet their needs for safe and effective treatment.

G. Sara's Story.

Sara is a young woman living at home with her family. She is very close to her mother and has always enjoyed spending time with her. She now has her own budget to purchase her own services and supports. Sara wants to spend more time with friends away from her parents. She tells people, "I now have a budget and I want to go out! I want my own life, separate from Mom and Dad, and I want to do my own things."
Through the planning process Sara has identified one of her outcomes as "finding a boyfriend". List three ways you can support Sara to achieve her outcome. List at least three challenges that you might have to deal with.

H. Danny's Story.

Danny is a 27 year old man who lives with a roommate in an apartment in the community. Danny and his roommate receive 24 hour support to live in the community from the same agency provider. Although Danny is now interested in self-directing his supports and services, his roommate is not. Danny wants to continue to live in the same apartment with the same roommate. Name three issues that Danny might have to deal with in order to be able to self-direct. Name a solution for each barrier.

I. John's Story.

John lives at home with his mom and attends the local day program five days a week because his mother must work full-time. John has a lot of friends at his day program, but does not always like to go everyday. He wants to take swimming and cooking classes. His mother also has reported that she sometimes has difficulty finding things for John to do when the day program is off and she still has to work.
Identify at least three problems that John and his family are experiencing. List at least one action per problem you might take as a support broker to help them solve these problems.

J. Susan's Story.

Susan lives alone in her own apartment and has hired staff to assist her to meet her daily needs. During a visit with you, she confides in you that one of the workers has yelled at her several times. Susan says the worker gets mad at her because it takes her so long to get things done. Susan says she likes this worker and knows the worker is going through hard personal times. Susan doesn't want you to say anything to the worker. State your concerns about this situation, what you would do to resolve it and at least two possible outcomes.

Section 4—BACKGROUND CHECK CLEARANCE

Attach your provisional Criminal History Check clearance to your application. Request that the final background check clearance issued in writing from the Idaho Department of Health and Welfare (IDHW) Criminal History Unit be forwarded to:

Division of Medicaid
Bureau of Behavioral Health
P.O. Box 83720
Boise, Idaho 83720-0036
Attention Mellie Turrittin.

This clearance is typically received one to three weeks after you have signed the self-declaration statement and been fingerprinted.

If you receive a conditional denial because of disclosures you made in the self-declaration statement or information received by the Criminal History Unit during the background check process, an exemption must be granted before you will be able to receive a final background check clearance. The time required to complete the exemption process varies from individual to individual.

DENIAL OF APPLICATION

If your application does not demonstrate that you possess the minimum qualifications, knowledge, skill and/or experience required of a Support Broker, you will be sent a letter denying your application. The letter of denial will contain information regarding your right to appeal the Department's decision to deny the application.

Your application will be denied if you do not attach a provisional Criminal History Check clearance or an exemption from the Department of Health and Welfare.

APPROVAL OF APPLICATION

If your application is approved, you will be sent a letter with information regarding training and the qualifying Support Broker Exam. *Although training will be available, you are not required to take it. However, you will be tested and held responsible for knowing the information contained in the training.* This exam is designed to evaluate your comprehensive understanding of the principles and practices associated with Self-Direction. A minimum score of 70 is required to pass the exam.

e. Getting the Criminal History Check (CHC)

On the Web!

For information on where and how to get your fingerprints taken for a criminal history check, go to the web site:

WWW.CHU.DHW.IDAHO.GOV

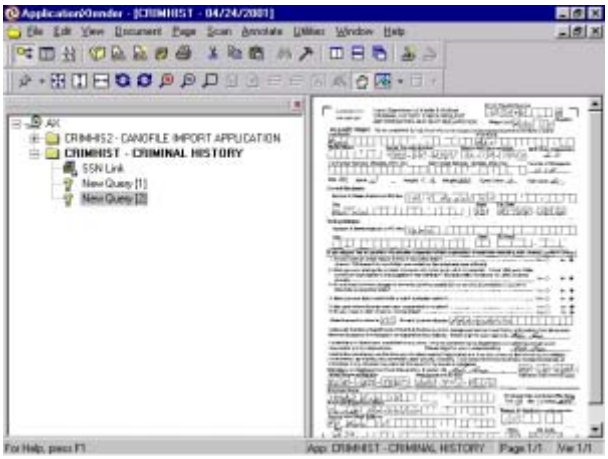
Or you can call 208-332-7990.

1. The Support Broker applicant initiates the background check on-line at the web site www.chu.dhw.idaho.gov.
2. The applicant creates their user name and password, completes their self-declaration form and schedules their fingerprint appointment at the web site.
3. The applicant states that they are performing a service of "Support Broker" for the Department.
4. The applicant lists Medicaid at the Boise Central Office address as the agency that is requiring the background check.
5. The fee is $45.00
6. The regional Department offices that can schedule fingerprint appointments are listed on the web site.

- **The Notice from the CHC needs to be sent to:**

  Division of Medicaid
  Bureau of Behavioral Health
  Attn: Mellie Turrittin
  P.O. Box 83720
  Boise, ID 83720-0036

A potential support broker has to complete a "self declaration" form that asks for any criminal charges or convictions. The self-declaration form can be completed on-line. When applying for the Criminal Background Check, mark the category for 'Support Broker.' If the category for Support Broker is not available check 'Other.' Your fingerprints are taken either at a local Department office or law enforcement office.



A self-declaration form scanned into the system.

The self-declaration form and fingerprint card are sent to the Criminal History Unit, which sends the fingerprints to the Bureau of Criminal Investigation (BCI). BCI forwards the fingerprints to the Federal Bureau of Investigation (FBI). Other agencies checked include the National Criminal History Background Check System, statewide child and adult abuse complaint registers, state(s) Division of Motor Vehicles records, the Idaho Sex Offenders Registration List, and the Medicaid Surveillance Utilization Review Service report. The length of time to check these sources can takes quite a few days. Applicants and employers are anxious to know the results and in the past our staff had to spend a great deal of time trying to answer the question of when the check will be done. Now certain staff in each unit can check the data base and see just what has been accomplished and any hits that have been discovered.

Q: I have a conviction on my record. Does this mean I can't be a Support Broker?

A: Not necessarily. What you were convicted of and how long ago it happened are factors that are taken into consideration when reviewing a CHC.

Anyone convicted of one of the following crimes are not allowed to work for any program funded by Health and Welfare. Persons convicted of other crimes will be evaluated on a case-by-case basis and may be granted an exemption.

Persons who have any felony convictions, are a party to a valid child protection complaint, or are a party to a valid adult protection complaint, cannot work, provide service to, or have any unsupervised contact with Health and Welfare clients unless an exemption is granted.

No exemption is granted for these crimes. Anyone convicted of any of these crimes cannot work with Department clients:

- *armed robbery;*
- *arson;*
- *crimes against nature;*
- *forcible sexual penetration by use of a foreign object;*
- *incest;*
- *injury to a child, felony or misdemeanor;*
- *kidnapping;*
- *lewd conduct with a minor;*
- *mayhem;*
- *murder in any degree;*
- *voluntary manslaughter;*
- *assault or battery with intent to commit a serious felony;*
- *poisoning;*
- *felony involving a controlled substance within seven (7) years of the date of conviction;*
- *possession of sexually exploitive material;*
- *rape;*
- *felony stalking;*
- *sale or barter of a child;*
- *sexual abuse or exploitation of a child;*
- *any felony punishable by death or life imprisonment;*
- *any felony involving any type or degree of embezzlement, fraud, theft or burglary within seven (7) years from the date of conviction;*
- *abuse, neglect or exploitation of a vulnerable adult; and*
- *attempt or conspiracy to commit any of the designated crimes.*

According to *Idaho Code* and IDAPA Rules, the Department of Health and Welfare (DHW) has the responsibility to ensure that criminal history checks (CHC) are conducted for Medicaid CSW or Vendors specified in IDAPA Rules.

The intent of these rules is to facilitate the protection of children and vulnerable adults by requiring Criminal History Checks of persons providing care, services, or assuming responsibility for these persons. This is part of the application process prior to service delivery. For more information, review IDAPA Rule 16.05.06.015-033.

The Medicaid Central Office Bureau of Behavioral Health will ensure that applicants meet Criminal History Check requirements prior to qualifying an applicant to become a Support Broker and approving service provision.

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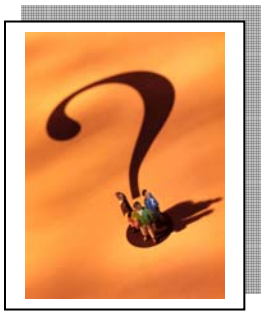
3. Training



Q: What kind of training do I need to be a Support Broker?

A: A Support Broker must complete the Department-approved application process prior to providing any paid services to the participant.

There are many training tools and courses available to people who want to be support brokers. The Department maintains an external web site regarding the self-direction program at: www. selfdirection.idaho.gov.

The **Support Broker Training Curriculum** is available online. In order to access the site completely, you need to have a computer and down-load several free programs. The instructions for this are included on the web site. You can access the curriculum through the self-direction site or use the site address: http://healthandwelfare.idaho.gov/portals/_rainbow/training/sbt2005/index.html

The training is self-paced and you can complete it at your own speed. Most people will need to spend approximately 40 hours reading, viewing and studying the material.

On the Web!

The Department has provided a web site specific to Support Broker Training. It is located at: www.selfdirection.idaho.gov .

The support broker qualification exam includes information from this training. In order to pass the exam, you will almost certainly need to review the material contained on this site.

Another tool which is available on-line is this manual: **How to Be a Support Broker: An Instructions and Procedures Manual.** This manual covers procedures, policies and specific information on doing your job. It has helpful information on subjects ranging from negotiating an employment agreement to assisting your employer to supervise community support workers. It contains important information regarding when and how to report suspected abuse, help in a crisis, and how to quit your job. Sections can be printed out as needed, but the entire manual should be closely read and reviewed. Other information which can

help you do a good job as a support broker can be located through these resources:

Medicaid sponsored training is available through each local Regional Medicaid Services center that is participating in the Self-Direction program. Contact your local Behavioral Health staff for specific information on dates, times and courses available.

---

a. Regional Offices

Region 1

Address	Behavioral Health Staff:l	Phone Number
1120 Ironwood Drive	Jim Dubuisson, Vicki Peoples or Sean Jonz	769-1567
Coeur d' Alene, Idaho 83814		

Region 2

Name & Address		Phone Number
1118 F Street	Jeanne Prine or Kim Cole	799-4430
P. O. Drawer B		
Lewiston, Idaho 83501		

Region 3

Name & Address		Phone Number
3402 Franklin Road	Angela Sterk, Jill Frederickson or Eric Brown	454-7625
Caldwell, Idaho 83605	*Fax*	*454-8351*

Region 4

Name & Address		Phone Number
1720 Westgate Drive, Suite A	Mitzi Gumm, Cindy McLouth, Rebecca Fadness or Rebecca Maher	334-0991
Boise, Idaho 83720		

Region 5

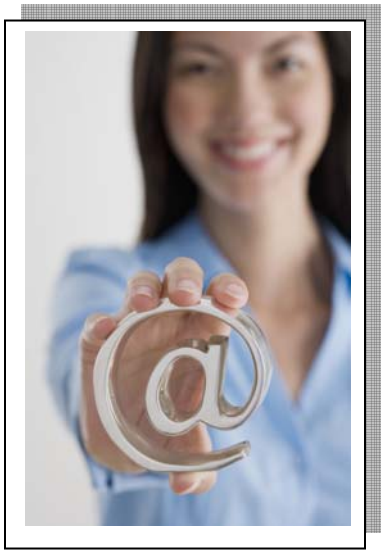
Name & Address		Phone Number
601 Poleline Road, Suite 5 Twin Falls, ID 83301	Glenda Miller or Lana Lowe	732-1474

Region 6

Name & Address		Phone Number
1070 Hiline Road	Pat Johansson or Pam Loveland-Schmidt	235-6260
Pocatello, Idaho 83201-2902		

Region 7

Name & Address		Phone Number
150 Shoup, Suite 19	Dan Weinrich or Mark Schwartzenberger	528-5703
Idaho Falls, Idaho 83402		



On the Web!

You can find many resources on Self-Determination and Support/Service Broker roles and responsibilities on the Internet. Here is a list of sites that are helpful:

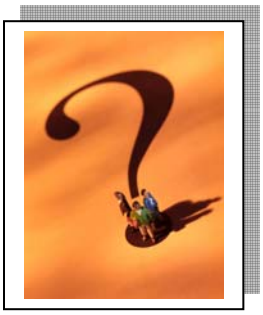
http://www.co.dane.wi.us/humanservices/acs/broker_manual_toc.htm

http://dsausa.net/ddd_self_determination.htm#Support%20Broker%20Information

http://wwww.cashandcounseling.org/downloads/connecticut.doc

4. The Support Broker Qualification Exam

The SB Qualification Examination will be given monthly at your regional Medicaid Services unit. Call at least one week ahead of each exam date to arrange for your exam.



Q: How much does it cost to take the Support Broker Exam?

A: **There is no fee for the exam.**

This is a pass/fail exam. You must receive a score of 70% or better to pass the qualifying exam. You may take the exam three times in a 12 month period. If you fail the exam three times, you must wait one year (12 months) from the last failed exam to re-take it.

a. The Exam Process

As part of the Support Broker application process the perspective Support Broker will take a written exam. The exam consists of multiple choice questions based on information contained in the online Support Broker curriculum.

Once the Support Broker applicant has satisfactorily met the initial requirements, the applicant is encouraged to access the online Support Broker curriculum and other training. When the applicant determines they are ready to take the exam they will contact their Regional QA/QI Trainer to set up the appointment. The following apply when scheduling and/or taking the exam.

- Walk-ins will not be accepted.
- The test will be offered at least once monthly during a regular business day, during regular business hours.
- The test date and time must be scheduled with the Regional QA/QI Trainer at least 7 days in advance.
- Please allow for 1 1/2 hours to take the exam.
- The exam will be administered at the Regional Medicaid Services (RMS) office.
- Upon arrival at the RMS office the Support Broker candidate will check in with the office receptionist.
- The receptionist will notify the QA/QI Trainer.
- The QA/QI Trainer will meet with the Support Broker candidate and brief them on the process.
- Once briefed, the Support Broker candidate will have at least 1.5 hours to complete the exam.

- Once completed, the exam will be placed in a manila envelope, sealed, and sent to Medicaid Central Office Behavioral Health Unit for scoring.

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b. The Exam Proctoring Process

Once a potential Support Broker meets all the initial qualifications, has criminal history clearance, and has completed an application that has been approved, they may schedule the Support Broker exam to be taken at their local Regional Medicaid Services office. The following apply when proctoring the Support Broker written exam:

- This is a closed-book exam.
- The applicant will present proof of photo identification.
- The applicant will not be allowed to bring books or other written material, cell phone, back-pack, purse or hand-held electronic device into the exam room.
- At the scheduled time, the QA/QI Trainer will have a copy of the Support Broker exam prepared for the Support Broker applicant and provide the applicant with writing instruments, if needed, to complete the exam. Note: The exam should be completed in ink.
- The QA/QI Trainer will reserve a quiet, secluded location for the exam to be taken.
- Each applicant will take the test in a private room.
- The applicant will have at least 1 ½ hours to take the exam.
- The QA/QI Trainer should remain available to the candidate in the event assistance is needed during the exam but does not need to remain in the same room.
- When the exam is completed the QA/QI Trainer will place the exam in a manila envelope, seal it, and mail it to the Division of Medicaid's Behavioral Health Unit Attn: Support Broker Exam Scoring at 3232 Elder Street, Boise, ID 83705.
- The sealed exam will be received by the Behavioral Health Unit and will be scored using the Support Broker exam master key.

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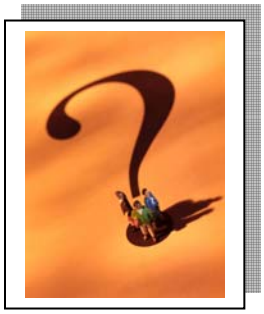
c. Passing the Exam

If you score 70 or higher on the Qualification Exam, you will be sent a qualification within 30 days from the date of the exam which verifies you have completed the application process to become a Support Broker.

Additionally, if requested by you, your name will be placed on a register of approved Support Brokers. This register is maintained by the Department of Health and Welfare and is distributed to parties interested in hiring a Support Broker.

NOTE: In order to remain on the Support Broker register, it will be necessary for you to re-certify as a Support Broker prior to the expiration date on your support broker qualification. The process for re-qualification is contained in this Support Broker Manual in Chapter One, Section (h).



Q: WHAT IF YOU DON'T PASS?

A: Don't worry! You can retake the exam up to three times in a twelve month period.

---

d. Failure to Pass the Exam:

If a score of less than 70% is received a denial letter will be sent to the Support Broker candidate. If you do not pass the Qualification Exam, you will be notified in writing.

An applicant who fails the exam three times within a one year period must wait one year (12 months) from the date of the last failed exam to re-take the exam.

---

e. Receiving Your Qualification:

Here's a checklist of things you need to do to become a Qualified Support Broker:

- ☐ Submit your complete application.
- ☐ Pass your Criminal History Check
- ☐ Pass the Application Examination
- ☐ Receive a letter notifying you that you are a Qualified Support Broker; this letter will serve as your qualification and must be presented to both your employer and the Fiscal Employee Agent when you complete your employment packet.

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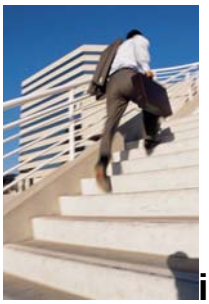
5. Finding An Employer:



Take the Next Step:

Now that you are a QUALIFIED SUPPORT BROKER, you need to find an employer. You may already have somebody who is interested in hiring you. In that case, you need to show them your qualification notice and develop your Employment Agreement. This is detailed in the next section. However, if you don't have an employer, you will want to find one.

a. Notifying a Potential Employer/Finding an Employer:

There are several ways to let individuals know that you are available to work as their Support Broker:

- Central Office Bureau of Behavioral Health will have a Master List of Qualified Support Brokers publicized on the Self-Direction Web Site. This list is available for anyone in the public sector to access. You will be asked on your Notice of Qualification whether you want your name, phone number and email publicized on the list.
- *Need to find out if this is going to be happening: Contact the Idaho State Council of Developmental Disabilities: They will keep a list of SBs who are immediately available in the local area. (Put in phone numbers)*
- **Contact your local regional care manager: Monthly informational meetings will be held for individuals interested in accessing the Self-Direction program. The regional care managers will provide a listing of available support brokers at this meeting.**

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b. Submitting the Employment Packet:

Once you have been hired and your Employment Agreement has been developed, (see next Chapter), you need to present your completed employment packet to the Fiscal Employer Agent. You cannot be paid for any services until your employment packet is complete and accepted. ***Insert instructions for submitting Employment information to FEA.***

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6. Annual Training:

Navigating the Future!

Now that you are a qualified Support Broker, you'll need to mark your annual re-qualifying date. Ongoing training and re-qualification occurs annually.

You need to complete 12 hours per year of relevant training to continue to be a qualified support broker. Some training will be provided through your local Medicaid office. Some training may be provided by private individuals or agencies contracted with the Department of Health and Welfare. You may also access training on related issues through local community education or college courses, workshops, seminars, conventions, on-line training and self-study. You can use six hours per year of self-study as a portion of the required 12 hours of training.

7. Annual Re-Qualification:

The anniversary date for the annual re-qualification is the month and day date on your original Notice of Support Broker Qualification.

In order to be re-qualified as a Support Broker, you must submit the following:

1.) An application for re-qualification *(Needs to authorized, etc.)*

2.) Documentation of completion of a minimum of 12 hours of training in subjects specific to Support Broker job duties and responsibilities.

- Documentation can be provided by:
  - Certificates of completion
  - Continuing Education Units
  - Community Education verification of course completion
  - Report cards from an educational institution
- Training subjects can include but are not limited to:
  - Person Centered Planning and related topics
  - Plan Development
  - Budget Development and Budget Monitoring
  - Staff Supervision
  - Employment Negotiation
  - Conflict Resolution
  - Maintaining a Circle of Support
  - Community Resource Identification/Integration
  - IDAPA Rules and/or Medicaid Policies

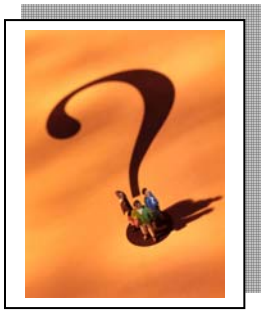
- A maximum of six hours per year of the required 12 hours of training can be completed through self-study. Self-study can take the form of reading and/or on-line study. It can be verified by:
  - A brief synopsis of the self-study course, including a written description of the material, where it can be located and specifics of how it applies to Support Broker job duties.

If at any time during your employment as a Support Broker, you are charged with any criminal activity which might impact your ability to work with vulnerable adults, as per the Idaho Codes, IDAPA Rules and Criminal History check policies of the Department of Health and Welfare (as per IDAPA 16.03.13) you are required to report this charge immediately to your employer.

A substantiated charge of abuse, neglect or exploitation or a criminal conviction of any crime which would disallow you to work with Department clients must be reported to your employer immediately.

The Department may not renew a Support Broker qualification as a result of such a criminal conviction of substantiated adult protection charge.

If you do not provide documentation of 12 hours of annual training, your Support Broker Qualification will expire on its anniversary date.



Q: How soon do I need to submit my application for re-qualification?

A: 45 days prior to the expiration date of your current Support Broker Qualification Notice.

Submit your application for re-qualification with the necessary documents 45 days prior to the expiration date of your current SB Qualification Notice. Mail or deliver your application to:

Mailing Address:

Division of Medicaid
Bureau of Behavioral Health Care
Attn: _____
P.O. Box 83720
Boise, ID 83720-0036

Street Address:
3232 Elder Street
Boise, Idaho

If you allow your Support Broker qualification to expire, you will not be able to bill for services. You will need to complete the annual re-qualification process to be able to bill for services.

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8. Quality Assurance:

Your work will be monitored by the Department. The format for this process is as follows:

SUPPORT BROKER QUALITY MANAGEMENT
BACKGROUND

The Support Broker functions are integral to the success of individuals in Self-Directed Community Services. Support Brokers must be experienced in working with individuals with Developmental Disabilities. They must be knowledgeable and qualified to fulfill their role with the individual. They must perform the functions required by rule and must be able to perform additional functions they may perform as addressed in the rules governing Self-Directed Community Services.

The standards set forth in rule and the business policies and processes assure the following Quality Framework Focus Areas: Participant Access, Provider Capacity and Capabilities, Participant Safeguards, Participant Satisfaction.

POLICIES

Support Broker applications are approved by Medicaid Central Office to assure initial qualifications set forth in rules are met.

Support Brokers must pass an exam that is administered and proctored in the Regional Medicaid Services (RMS) offices to assure capability.

To assist Support Brokers in preparing for the exam, they will be able to access training material through a public website.

An Operations and Procedures Manual will be available on a public website.

Support Brokers are required to attend 12 hours of continuing education training on an annual basis.

Support Brokers are required to have a Criminal History Check completed by the Department of Health and Welfare before they delivery services to clients.

Names of qualified Support Brokers are placed on a master list in Central Office Medicaid Behavioral Health Bureau. Support Brokers may also elect to have their name posted on a public website so that individuals are easily able to identify and contact Support Brokers in their area. Individuals may also call Medicaid Central Office for referrals to Support Brokers in their area.
Support and Spending Plans are reviewed by the Department of Health and Welfare to assure that participant needs are met and significant risks are addressed.

A monitoring review/survey of individual Support Brokers and their participant files are completed to assure compliance with rules.

Participant Experience Survey (PES) software will be utilized to collect information from participants and monitor participant satisfaction.

Support Brokers with variances identified in the PES, review of complaints and/or Support and Spending Plan reviews may be selected for review/survey.

The PES will be administered according to the PES Policy and Procedure guide.

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9. Terminating a Support Broker Agreement:

The Department of Health and Welfare, Division of Medicaid, may terminate a Support Broker Agreement. In most cases, remediation will be attempted by the regional Quality Assurance/Quality Improvement Specialist prior to revocation. Termination may occur in the event that a Support Broker fails to perform their job duties adequately despite a plan of correction.

A Support Broker **will immediately** lose their qualification for the following reasons:

- Criminal activity or substantiated abuse, neglect or exploitation of a vulnerable person as per: IDAPA 16.05.06.015-033

CHAPTER TWO: STARTING THE JOB

1.Your Employer:

From Gail Bottoms:

who am I?

Who am I?
Sometimes I don't really know.
I think I know and then something happens
to make me wonder if who I think I am is so.
Am I dumb or am I smart?
Am I kind or do I even have a heart?
Sometimes I feel so full of love I could burst.
Sometimes I feel bitter and angry
and couldn't feel worse.
Sometimes I am responsible and do my very best.
Sometimes I throw it to the wind
and act like Hyde I guess.
Sometimes I don't know if
I will make it to the end.
To still be called a Christian, good wife, mother,
grandmother and good friend,
but I know Jesus will help me if I don't give up.
But sometimes I feel that if He doesn't,
that will spill my cup.

Medicaid rules state that your employer is a person who is eligible for Home and Community Based developmental disabilities Waiver services. They can choose consumer-directed services as an option. This allows people to have greater freedom to manage their own care. They must hire a Support Broker to act as an ongoing link with personal network members, community support workers or vendors, professionals, the funding body and the wider community.

2. Your Employment Agreement:

Template: You must use the Employment Agreement template authorized by the Department.

PARTICIPANT-SUPPORT BROKER AGREEMENT

This agreement is hereby made between _____, a Participant of the Self-Directed Community Supports (SDCS) Option, a Medicaid Option administered by the Department of Health and Welfare (Department), and

_____, a Support Broker.

The Participant desires to engage the Support Broker for services under the SDCS Option. In exchange, the Support Broker desires to be paid for services provided to the Participant. Both parties understand and agree that payment is made through a fiscal employer agent (FEA), using Medicaid monies and based on time sheets submitted by the Support Broker and approved by the Participant.

To these mutual purposes, the parties promise and agree as follows:

1. Support Broker services are to be provided in accordance with Participant- Support Broker agreement, and the SDCS rules, IDAPA 16.03.13, "Consumer-Directed Services."

2. The Support Broker is hired to assist Participant, and assumes no responsibility for Participant's conduct.

3. **The parties mutually agree that Support Broker is an employee of the Participant and not an employee of the SDCS Option or the Fiscal Employer Agent, and agree that the Support Broker is not entitled to nor will make claim for any employee benefits from the SDCS Option or the Fiscal Employer Agent, including but not limited to, worker's compensation, disability, life or health insurance.**

4. The Support Broker agrees to take all actions necessary to become Participant's employee, and to maintain the employment relationship by submitting necessary documents to the FEA, including:

- Support Broker application approval by the Department;
- Completion of W-4, I-9 and other IRS required forms;
- A completed criminal history check, including clearance in accordance with IDAPA 16.05.06, "Rules Governing Mandatory Criminal History Checks";
- A copy of this agreement; and
- Time sheets approved by Participant recording hours worked.

5. The Support Broker agrees to provide all required Support Broker duties outlined in Subsection 136.02 of IDAPA 16.03.13, "Consumer-Directed Services" and, as mutually agreed upon with the participant, the optional Support Broker duties outlined in Subsection 136.03 of IDAPA 16.03.13, "Consumer-Directed Services."

6. Terms and conditions of work (Job Duties):

Type of service	Frequency Per day/wk/mon/yr	Duration

7. The Support Broker's rate of pay is $_____ per hour, not to exceed $18.75 per hour. It is mutually understood that any overtime hours or services not described in the Participant's SDCS Support and Spending Plan or described elsewhere in this Agreement are not covered by this Agreement or paid through this Agreement.

The provisions of this agreement represent the entirety of the agreement between the parties. It may be amended only in writing with both parties consenting by their signatures. It is mutually understood that this is employment at will. Either party may terminate the relationship without cause upon two weeks notice.

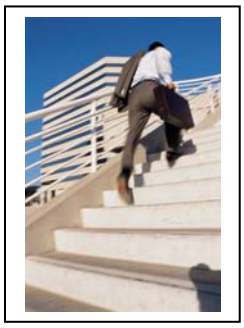
This Agreement may be terminated immediately at any time by the Participant due to unsatisfactory Support Broker performance.

PARTICIPANT Date

LEGAL GUARDIAN (IF APPLICABLE) Date

SUPPORT BROKER Date

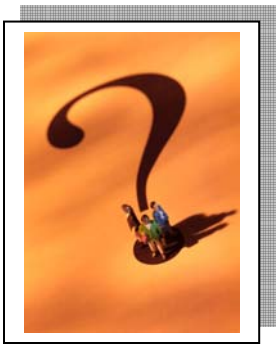
- This agreement states that the Support Broker agrees that he is not entitled to worker's compensation but I thought we were going to have that as an option if the participant chooses to provide.
- This agreement contains a list of necessary documents to submit to the FEA but there is not a comparative list for a CSW. We should be consistent on these agreements and either include this list on both or neither. I recommend that we delete from this agreement since these requirements are already outlined in rule.



Take the Next Step:

The Participant-Support Broker agreement is next. This is where you settle upon your services required, your service hours, and your rate of pay.

Remember: You cannot bill and will not be paid for support broker services until you have a valid, signed employment agreement and it has been filed with the FEA.



Q: What if more than one Participant wants to utilize my services?

A: It is within the scope of this position to have more than one employer. As long as you fulfill the requirements with each employer and maintain the privacy of each participant, feel free to take on other clients!

a. Items That Must Be In the Agreement:

Your employment agreement must include how often you will do each task and the approximate time each task will take.

You must include how often you will meet with your employer and their circle of support.

By IDAPA Rule, your job must include:

- Participate in the person-centered planning process;
- Develop a written support and spending plan with the participant that includes the supports that the participant needs and wants, related risks identified with the participant's wants and preferences, and a comprehensive risk plan for each potential risk that includes at least three (3) backup plans should a support fail. This plan must be authorized by the Department;
- Assist the participant to monitor and review his budget;
- Submit documentation regarding the participant's satisfaction with identified supports as requested by the Department;
- Participate with Department quality assurance measures, as requested;
- Assist the participant to complete the annual re-determination process as needed, including updating the support and spending plan and submitting it to the Department for authorization; and
- Assist the participant, as needed, to meet his participant responsibilities outlined in Section 120 of these rules and to protect his own health and safety.

- Depending on the requests and needs of each participant, the Support Broker may:
- Assist the participant to develop and maintain a circle of support;

- Help the participant learn and implement the skills needed to recruit, hire, and monitor community supports;
- Assist the participant to negotiate rates for paid Community Support Workers; (
- Maintain documentation of supports provided by each Community Support Worker and participant's satisfaction with these supports;
- Assist the participant to monitor community supports;
- Assist the participant to resolve employment-related problems; and
- Assist the participant to identify and develop community resources to meet specific needs.

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b. Suggestions For Drafting An Employment Agreement:

- Identify and list what services you will be accomplishing and coordinating for your employer;
- Specify how often you will meet with your employer, how often you will have phone contact with your employer and how many hours per month you expect to spend in direct contact;
- List the required job duties first and how much time these duties are expected to take;
- List the discretionary tasks that you and your employer agree upon separately from the required job duties;
- Prioritize the list of discretionary job duties;
- Approximate how many hours per week or month you will need to complete the discretionary tasks;
- Determine if the amount of time per week/month will fall within your employer's expectation of what support brokerage will cost. If it doesn't, make adjustments with your employer, using the wiggle room provided in the discretionary list.
- You can be paid up to (but no more than) $18.72 per hour;
- You can not provide any other paid services to your employer, outside of the Support Broker duties;
- THE BUDGET FOR SUPPORT BROKER DUTIES SHOULD NOT JEOPARDIZE THE BUDGET NEEDED FOR OTHER SUPPORT SERVICES.

Last but not Least: This agreement must be approved by your employer and guardian, if they have one.

The total individualized budget per participant in the Self-Direction Program is not normally negotiable. Therefore, in order for the Support and Spending Plan to be authorized, the cost of the Plan must be below or at budget level. Take this into consideration when drafting your Employment Agreement.

I. An Example:

Type of service	Frequency: Per day/wk/mon/yr	Duration
Meet with employer and assist to complete "My Choice, My Voice Workbook"	2 mtgs. @ 3 hours each mtg. during first month	First month of employment
Meet with employer and circle of support to complete person-centered-planning and write the Support and Spending Plan	2 mtgs. @ 3 hours each mtg. during second month	Second month of employment
Meet with employer and regional care manager to review Plan	1 mtg. @ 2 hours during second month	Second month of employment
Plan changes/ revisions as needed	2 times per year @ 2 hours each change	One year
Face-to- Face mtgs. To monitor services and assist with budget review.	2 mtgs. Per month @ 2 hours each mtg.	Monthly: 10 months total
Telephone contact to assist with problem solving, service coordination and related issues	1 phone calls @ 30 minutes per call per week	52 weeks total
Assist with recruiting, training and monitoring of community support workers for employer	Six hours per month	12 months
Continuing contact with circle of support by phone, email or in person	Two hours per month	12 months
Assist with annual re-determination process	Eight hours	Once per year
Maintain documents, assist with quality assurance, interface with Department	Two hours per month	12 months

c. Financial Management Services/The Fiscal Employer Agent:

Your employer must purchase Financial Management Services to participate in the Self-Directed Community Supports (SDCS) Option. The Department will contract with a Fiscal Employer Agent to provide Financial Management Services to individuals who choose the self-directed option. The Fiscal Employer Agent (FEA) provides financial guidance and support to the individual by tracking individual expenditures and monitoring overall budgets, performing payroll services, and handling billing and employment related documentation responsibilities. As per IDAPA Administrative Code, the Fiscal Employer Agent will meet the following requirements and provide the following services:

The Fiscal Employer Agent performs Financial Management Services for each participant. Prior to providing Financial Management Services the participant and the Fiscal Employer Agent must enter into a written agreement.

Financial Management Services include:
01. Payroll and Accounting. Providing payroll and accounting supports to participants that have chosen the Self-Directed Community Supports option;
02. Financial Reporting. Performing financial reporting for employees of each participant;
03. Information Packet. Preparing and distributing a packet of information, including Department approved forms for agreements, for the participant hiring his own staff;
04. Time Sheets and Invoices. Processing and paying time sheets for Community Support Workers and Support Brokers, as authorized by the participant, according to the participant's Department-authorized support and spending plan;
05. Taxes. Managing and processing payment of required state and federal employment taxes for the participant's Community Support Workers and Support Brokers;
06. Payments for Goods and Services. Processing and paying invoices for goods and services, as authorized by the participant, according to the participant's support and spending plan;
07. Spending Information. Providing each participant with reporting information that will assist the participant with managing the individualized budget; and
08. Quality Assurance and Improvement: Participating in Department quality assurance activities.

d. Your Time Sheet and the FEA

The FEA will process and pay timesheets for Support Brokers, as authorized by the individual, according to the individual's support and spending plan. Time sheets that are submitted to the FEA for payment that exceed the authorized support and spending plan amount will not be paid.

CHAPTER THREE: THE SUPPORT AND SPENDING PLAN

Steps to Develop a Support and Spending Plan:

The Support and Spending Plan is the key to your employer's ability to manage their services and realize their dreams. The intent of the total Plan is to ensure that your employer gets the supports they need to become as independent as possible.

As Gail Bottoms says:

listen

I'm a human being too!
I have feelings just like you!
I have needs and hopes and dreams!
Though not as high as yours, it seems!
But no less important to me you see!
So to you I make my plea,
don't skip my dreams, listen to me.
I have talents that are God-given!
To be able to use them to me is livin'.
Give me a chance, see what
I can do!
I am full of dreams just like you!

This poem is directed to you! As the Support Broker, you are in the ideal position to make sure that your employer's needs and hopes and dreams are taken into account during the process of writing a Plan!

On the Web!

Your employer will be given a workbook to help them identify their needs. The workbook, Guide to a Self-Directed Life; "My Voice, My Choice" and the Support and Spending Plan can be found on the Self Direction Web Site. Please review them while reading this chapter.

1. Identify the Circle of Support:

The circle of support is defined as the people who encourage and care about the person with disabilities and who also provide unpaid supports. The circle of support is the team that supports the participant to find ways to do the things they want to do in their life. The first step in building a Support and Spending Plan is to identify the circle of support. These will be the people with whom you meet to develop the Support and Spending Plan.

The members of the circle, who may include family, friends and other community members, are not paid to be there. They are involved because they care enough about the focus person to give their time and energy to helping that person to overcome obstacles and increase the options which are open to them. Although the focus person's goals are the primary drive in everything the circle does, the relationship is not just one way. The members will all have diverse gifts and interests, and there can appear many new opportunities and possibilities which had not even been considered before the forming of the circle. Because of this, an important function of the circle is to regularly re-visit the plans which they are working with, to keep the direction current in terms of what the person really wishes to achieve.

"The circle is not a service or tool to be applied to a certain group of people. Circles are about seeing people as individuals who feel they need support in order to take more control over their own lives. A circle properly facilitated is empowering to all of the individuals involved and, unlike many service systems, does not reinforce dependence." Copyright Circles Network © 2005

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2. Work With the Circle of Support: Available Training:

The Circle is composed of natural supports: the people who are not paid providers but who are there because they have a personal commitment to the individual. Natural supports are intrinsic to your employer's success! Include natural supports in meetings whenever possible.

Natural supports are everywhere. Natural supports include your employer's friends, family members, and the community that surrounds them. People who can support your employer can be found in churches, grocery stores, thrift shops, community centers, gardening clubs, community education classes and just about anywhere else you can imagine!

Make sure to connect with every person. Get their phone numbers. Give them yours.

Check out the training on these sites:

- Review Module 'C' of Support Broker Training Curriculum at: www.selfdirection.idaho.gov
- **Online Information: http://www.circlesnetwork.org.uk/online_information.htm**
- Regional Training: *Place- Holder for contractor and regional training.*

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3. Use the Guide to a Self-Directed Life:

The Guide to a Self-Directed Life is the consumer handbook that has been developed for participants in the Self-Directed Option Waiver. It can be found on the Self Direction web site. The Guide gives specific directions and instructions for consumers. The Guide suggests that consumers use their support brokers to help identify members of their Circle of Support.

The support broker needs to estimate how much time they will need to spend on this task and include these hours in the employment agreement.

It is important that participants utilize natural (unpaid) supports AS MUCH AS POSSIBLE. Each participant has a limited budget. The support broker fee must comprise only one small part of that budget.

The circle of supports is essential in developing and maintaining the independence of the consumer.

Please review the section of this chapter that addresses: Free Resources.

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4. Use The Person Centered Planning Process and the "My Choice, My Voice" Workbook:

The "My Choice, My Voice" Workbook helps the participant to identify how they want to spend their supports and services budget. The workbook is their starting point. The participant may ask the support broker to help them use it. Each participant will be given this workbook when they choose the self-direction option.

- THE "MY CHOICE, MY VOICE" WORKBOOK MUST BE TURNED IN TO THE REGIONAL CARE MANAGER WITH THE COMPLETED SUPPORT AND SPENDING PLAN.

- Make sure your employer has completed the workbook before moving on to the Support and Spending Plan.

- Make sure you or your employer make a COPY of the workbook and the Support and Spending Plan before turning them into the regional care manager!

The term "Person Centered Planning" is used to describe the concept of consumer-driven support planning. Person Centered Planning (PCP) helps the circle of support identify how to meet the needs and goals of the participant. The Workbook and Person Centered Planning (PCP) form the foundation for the Support and Spending Plan.

You need to be mindful of how much time you can spend with your employer in helping with the workbook. You should try to identify how many hours it will take to complete PCP meetings and assist with the Support and Spending Plan. These duties and hours must be included in the employment agreement.

Your employer may need the help of other professionals to complete portions of the workbook. The workbook includes information on health and safety risks and needs. Health professionals may need to be consulted. As you review the workbook, please note how much time may need to be used in gathering health and safety information from others. Make sure you include this time in your employment agreement.

On the Web!

For more information and training on Person Centered Planning, review the following on the web site: Support Broker Training Curriculum, Module C: Person Centered Planning.

You can also access and download the My Voice My Choice Workbook from: http://www.healthandwelfare.idaho.gov/DesktopModules/DocumentsSortable/DocumentsSrtView.aspx?tabID=0&ItemID=5548&MId=11466&wversion=Staging

Additional training in Person Centered Planning is offered through the regional Medicaid Behavioral Health offices. Please contact your local office for more information.

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5. Use The Individualized Budget:

The individualized budget is the amount of money that each participant can spend annually to purchase their Medicaid allowable supports and services. The individualized budget is set through a specific process, based on each person's assessed and identified needs. Each participant is advised of their budget at the time of their assessment and their acceptance of self-directed Waiver services.

The support broker will know the annual budget amount for each of their employers prior to submitting a Support and Spending Plan. The Plan must fit within the parameters of the individualized budget or it will be rejected.

Your employer must purchase Financial Management Services and Support Broker Services to participate in the SDCS option. They will use their budget to purchase goods and community supports. In addition, they will need to pay employer taxes and may pay Worker's Compensation Insurance.

In general, participants cannot exceed their annual budget. If your employer cannot budget their expenses to fit within their individualized budget, you need to help them review their options.

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6. Calculate Allowable Expenses:

The Individualized Budget is used to purchase your employer's needed supports and services. The budget will pay for the Fiscal Employer Agent, Support Broker services, community support worker services and necessary equipment and supplies.

Help your employer figure out the costs of each service they want to use. Make sure each service is allowable, as per the Consumer-Directed IDAPA Rules. The Support and Spending Plan provides worksheets to help you.

A portion of the budget will be needed to pay for the Community Support Worker(s). (CSW)The CSW provides identified supports to the participant. If the identified support requires specific licensing or certification within the state of Idaho, the CSW must meet the applicable licensing or certification requirements.

The individual may purchase the following:

- **Job support** to help the participant secure and maintain employment or attain job advancement;
- **Personal support** to help the participant maintain health, safety, and basic quality of life;
- **Relationship support** to help the participant establish and maintain positive relationships with immediate family members, friends, spouse, or others in order to build a natural support network and community;
- **Emotional support** to help the participant learn and practice behaviors consistent with his goals and wishes while minimizing interfering behaviors;
- **Learning support** to help the participant learn new skills or improve existing skills that relate to his identified goals;
- **Transportation support** to help the participant accomplish his identified goals; and
- **Adaptive equipment** identified in the participant's plan that meets a medical or accessibility need and promotes his increased independence.

As a Support Broker, you are responsible for knowing which expenses are, and which are *not* allowed by IDHW Medicaid and the SDCS Program. Appendix A lists both categories.

7. Review Rates and Budgeting:

Medicaid has negotiated specific rates for specific supports and services for participants using traditional Medicaid providers. A current rate chart is attached in Appendix E for reference. The support broker can use these figures to help estimate costs of services for the participant when planning a budget.

In addition, the support broker can assist their employer to negotiate wages and rates. The self-directed participant is not bound by previously negotiated Medicaid rates. The participant can offer what they consider to be fair-market payment for the supports and services they require. As long as those services are allowable under the Medicaid rules and guidelines, the cost is negotiable.

The Support and Spending Plan includes specific worksheets for budgeting. These worksheets should be used to help the participant calculate the cost of each paid service/support.

Instructions for use of the budgeting sheets are included in the Plan. The support broker can help their employer by encouraging community resource exploration.

8. Use Available Resources:

As a support broker, you might need to assist your employer to locate supports and services that are free, accessible to the disabled and/or low cost. Or, your employer may want to become more involved in the community and offer others their help. Many State agencies can offer suggestions and advice. Try the following state agencies: They are located in the blue pages of your phone book.

IDAHO DEPARTMENT OF LABOR

IDAHO DIVISION OF VOCATIONAL REHABILITATION

If your job duties include identifying natural resources, here are some places to start:

IDAHO COUNCIL FOR THE DEAF AND HARD OF HEARING: www.cdhh.idaho.gov

IDAHO ORGANIZATIONS NON-PROFIT DIRECTORY: http://idaho.uscity.net/Organizations/Non-Profit/index.html

NATURAL SUPPORTS: THEY'RE ALL AROUND YOU!: http://www.dds.ca.gov/publications/PDF/Natural_Supports.pdf

HOW TO DEVELOP NATURAL SUPPORTS: http://www.dds.cahwnet.gov/publications/PDF/Natural_Supports.pdf

On the Web!

You can find many low cost/ no cost resources on the Internet. Here is a list of sites that are helpful:
IDAHO COUNCIL ON DISABILITIES: http://www2.state.id.us/icdd/

NATIONAL ORGANIZATION ON DISABILITY: www.nod.org

A. Idaho Centers for Independent Living:

Roger Howard, SILC Chair
350 North Ninth Street; P.O. Box 83720
Boise, ID 83720
(208) 334-3800
TTY: (208) 334-3800
FAX: (208) 334-3803
EMAIL: silc@silc.state.id.us

Kelly Buckland, SILC Executive Director
350 North Ninth Street; P.O. Box 83720
Boise, ID 83720
(208) 334-3800
TTY: (208) 334-3800
FAX: (208) 334-3803
EMAIL: kelly.buckland@silc.idaho.gov

LIFE (Satellite)
Lucy Navo
67 North Maple
Blackfoot, ID 83221
(208) 785-9648
TTY: (208) 785-9648
FAX: (208) 785-2398
EMAIL: blkfoot@ida.net

Living Independence Network Corp. (LINC)
Roger Howard
2500 Kootenai
Boise, ID 83705
(208) 336-3335
TTY: (208) 336-3335
FAX: (208) 384-5037
EMAIL: info@lincidaho.org

LIFE (Satellite)
Sandra Dressel
2311 Park Avenue, Suite 7
Burley, ID 83318
(208) 678-7705
TTY: (208) 678-7705
FAX: (208) 678-7771

EMAIL: hotwheels@pmt.org

LINC (Satellite)
Lenora Barney
2922 East Cleveland Blvd., Suite 800
Caldwell, ID 83605
(208) 454-5511
TTY: (208) 454-5511
FAX: (208) 454-5515
EMAIL: lbarney@lincidaho.org

Disability Action Center NW (Satellite)
Amy Dreps
1323 Sherman Avenue, Suite 7
Coeur D'Alene, ID 83814
(208) 664-9896 or (800) 854-9500
TTY: none
FAX: (208) 666-1362
EMAIL: dac@icehouse.net

LIFE (Satellite)
Wendy Parker
P.O. Box 4185
Fort Hall, ID 83203
(208) 478-3952
TTY: none
FAX: none
EMAIL: wparker@if.rmci.net

LIFE (Satellite)
Diane Nielsen
2110 Rollandet Avenue
Idaho Falls, ID 83402
(208) 529-8610
TTY: (208) 529-8610
FAX: (208) 529-6804
EMAIL: eici@ida.net

Disability Action Center NW, Inc.
Mark Leeper
307 19th Street, Suite A-1
Lewiston, ID 83501
(208) 746-9033
TTY: (208) 746-9033
FAX: (208) 746-1004

EMAIL: dac@icehouse.net

Disability Action Center NW, Inc.
Mark Leeper
124 East Third Street
Moscow, ID 83843
(208) 883-0523
TTY: (208) 883-0523
FAX: (208) 883-0524
EMAIL: dac@moscow.com

Living Independently for Everyone (LIFE), Inc.
Dean Nielson
640 Pershing Avenue, Suite 7
Pocatello, ID 83205
(208) 232-2747
TTY: (208) 232-2747
FAX: (208) 232-2753
EMAIL: dean@if.rmci.net

LINC (Satellite)
Melva Heinrich
132 Main Avenue South
Twin Falls, ID 83301
(208) 733-1712
TTY: (208) 733-1712
FAX: (208) 733-7711
EMAIL: mheinrich@lincidaho.org

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9. Developing the Support and Spending Plan: What Must Be Included

The IDAPA Rules state:
The participant, with the help of their support broker, must develop a comprehensive support and spending plan based on the information gathered during the person-centered planning. The support and spending plan is not valid until authorized by the Department and must include the following:

- The participant's preferences and interests by identifying all the supports and services, both paid and non-paid, the participant wants and needs to live successfully in his community;

- **A comprehensive risk plan for each potential risk that includes at least three (3) backup plans should a support fail. ***
- Paid or non-paid self-directed community supports that focus on the participant's wants, needs and goals in the following areas:
    - Personal health and safety including quality of life preferences
    - Securing and maintaining employment
    - Establishing and maintaining relationships with family, friends and others to build the participant's circle of supports
    - Learning and practicing ways to recognize and minimize interfering behaviors, and
    - Learning new skills or improving existing ones to accomplish set goals.
- Support needs such as:
    - Medical care and medicine;
    - Skilled care including therapies or nursing needs,
    - Community involvement'
    - Preferred living arrangements including possible roommate(s), and
    - Responses to emergencies including access to emergency assistance and care. This plan should reflect the wants, preferences and needs of the whole person, regardless of payment source, if any.
- Sources of payment for the listed supports and services, including the frequency, duration and main task of the listed supports and services; and
- The budgeted amounts planned in relation to the participant's needed supports.

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a. Identifying Related Risks

As you help your employer fill out the "My Voice, My Choice" workbook, you will notice that there are many prompts to help identify risks. The prompts include questions about health and safety. These questions help you to identify possible risks. Some of the prompts having to do with health and safety include:

"Who knows about your health and safety needs?"

"Are there any relationships I am uncomfortable with?"

" What help do you need at home to make sure things get done that are important to you and your well being?"

If your employer must have a specific support or service in order to maintain their health, safety or quality of life, then the LACK of that support or service constitutes a risk.

For example, if your employer needs a CSW to supervise them take their medication and prepare a meal every morning, they may be at risk if the CSW unexpectedly does not come to work.

You need to identify this risk on the "My Health and Safety Plan" Worksheet. You need to identify three backup plans for this risk. The backup plans can be simple or complicated, but they must be realistic. Some examples of realistic backup plans for the example given ("CSW unexpectedly does not show up to work") might be as follows:

- Participant has ability to phone his guardian and the guardian agrees to handle the problem.
- Participant has a back-up CSW who is available for emergency service. Participant has ability to phone this CSW.
- Participant has ability to get his next-door neighbor who has agreed to act as back-up in an emergency.

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b. The Risk Identification Tool:

There is also a checklist available to help you and your employer identify risks. It is an attachment to the Workbook and is titled: RISK IDENTIFICATION TOOL. Any risk identified on this checklist must have three associated backup safety plans. The Risk Identification Tool is included in Appendix E.

Many people with developmental disabilities are at high risk for the following health-threatening conditions:

- Seizures
- Dehydration
- Constipation
- Choking

If your employer has a history of these conditions, be sure to consult with their physician and include safety plans in their SSP.

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c. Support and Spending Plan Limitations:

The individual may *not* purchase the following:

- Traditional Medicaid waiver and traditional rehabilitative or habilitative services must not be purchased under the SDCS option;
- Paid community supports must not be provided in a congregate setting with recipients of traditional Medicaid waiver, rehabilitative or habilitative services;
- All paid community supports must fit into one (1) or more types of community supports described in Subsection 142.02 of these rules. Community supports that are not medically necessary or that do not minimize the participant's need for institutionalization must only be listed as non-paid supports. Additionally, the support and spending plan must not include supports or services that are illegal, that adversely affect the health and safety of the participant or do harm, or that violate or infringe on the rights of others;

- Support and spending plans that exceed the approved budget amount will not be authorized; and
- Time sheets or invoices that are submitted to the Fiscal Employer Agent for payment that exceed the authorized support and spending plan amount will not be paid by the Fiscal Employer Agent.

FOR FURTHER, MORE DETAILED INFORMATION, REGARDING ALLOWED AND UNALLOWED EXPENSES, CONSULT APPENDIX A: GUIDELINES FOR ALLOWABLE EXPENSES.

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10. Writing the Support and Spending Plan: Using the Person Centered Planning Process:

You have completed steps # 1 - #9. Review the following:

☐ You know who is in the circle of support.
☐ The circle of support has been involved with planning.
☐ You reviewed the Guide to a Self-Directed Life and understand it.
☐ You reviewed the "My Choice, My Voice" Workbook with your employer.
☐ The Workbook is filled out.
☐ You know the amount of the annual individualized budget.
☐ You know what services and supports can be purchased with Medicaid dollars – the "allowable expenses."
☐ You have reviewed the usual rates and know what amounts are within the usual parameters.
☐ You have explored natural supports, community resources and low-cost alternatives.
☐ You know what must be included in the Support and Spending Plan.
☐ You have identified the risks and backup plans.

You have already begun the Person Centered Planning process. You are close to completing the Support and Spending Plan with your employer. Here are some helpful hints and questions to ask:

- Make a list of your employer's specific goals and needs, as identified in their Workbook. Check the list with your employer and their circle of support. Did you miss anything?
- Has your employer and their circle of support identified how to access community resources?
- Review any risks to health and safety that have been identified. Have three safety plans for each risk been identified?
- Look at the calendar pages in the Workbook: what days and hours will your employer want/need supports and services?
- Take a global look at your employer's health and stamina. Ask questions about how often they might need extra help?

- Does your employer take vacations with family members or friends? Will they need any paid support during this time?
- Identify natural supports and no-cost services.
- Identify what your employer can do for themselves.
- Ask your employer if they are in agreement with the information in the Workbook. If they don't agree, keep working with them and their circle.

Once you have completed all the steps and answered the above questions, use the Workbook to transfer information to the Support and Spending Plan. The Plan has instructions for completing each step. Once the Budget pages are complete, submit the Workbook and Plan to the regional care manager.

11. In The Mean Time: Your Employer's Service Needs:

Your employer will submit their Support and Spending Plan to the regional care manager for authorization. But, while they are going through this process, they still need to have the usual services. To make sure this happens, you should be in contact with the regional Medicaid Service to make sure the old plan continues to be in effect. If you aren't sure that the services will continue, call the local Medicaid office and speak to the care manager.

CHAPTER FOUR: GETTING THE PLAN AUTHORIZED

Everyone needs a plan. And most of us have one. We don't always write it down but we know what it is.

People who have disabilities also have plans. In the Self-Directed option, their plans have to be written down, carefully budgeted and approved by a regional Medicaid care manager.

Make sure the Support and Spending Plan reflects what your employer wants and that it will help them become who and what they want to be.

you're different

They say you're different
you don't belong.
And you feel it very strong,
Not to hurt you, it's not
Meant.
But still these careless words are sent.
In your heart you feel wrong,
oh, only if you could belong,
If the rest could
Be a part.
You think it would heal your
Heart.
But you're different it's no
Lie.
So you sit aside and
Sigh.
Don't let this feeling get
you down,
Don't live your life with a frown,
you're different, but so what.
Get out there show them what
you've got.
You can do great things in life.
Even though different you may be,
even if it causes you strife,
you can be a part of life.
Because it's you that has the key,
it's said in song, it's said
to be free, I've got to be me!

1. Presenting the Plan to the Regional Care Manager:

Individual and SB submits Support and Spending plan to the RMS care manager for review. The care manager has ten (10) business days to review the plan.

Make SURE you or your employer keep a copy of all documents that are submitted to the regional care manager.

RMS reviews the plan using the following criteria, so make sure these things are covered in the Support and Spending Plan:

☐ Services and supports must meet the guidelines for allowable expenses

☐ Services and supports must not exceed the approved budget amount.

☐ The "My Choice, My Voice" Workbook must be included with the Support and Spending plan.

☐ The completed "My Health and Safety Plan" form must be included in the Workbook. Any risks identified on the form or on the Risk Identification Tool must have three backup plans.

☐ Each service or support shall include the source of payment, frequency, duration, desired goal associated with the listed support or service and annual cost associated with each support or service.

☐ A SB must be listed on each Budget Summary Sheet.

☐ The Fiscal Employer Agency (FEA) must be listed on the Budget Summary Sheet.

☐ An Agreement to Self-Direct form must be attached to the Support and Spending plan.

☐ Support and Spending plan and Budget Summary Sheet must be typed.

☐ Each field on the Support and Spending plan must be completed, if only with the designation "N/A".

☐ "Informed consent" statement on demographic page must be signed and dated.

Take the Next Step:
After reviewing the Support and Spending plan, RMS can either approve the plan, recommend changes needed to approve the plan, or deny the plan. Make sure you and your employer are ready for any outcome.

2. Approval of the Plan:

If the Support and Spending Plan is approved, RMS does the following:

- Sends the individual and SB a copy of the Support and Spending plan approval letter and a copy of the Support and Spending plan.
- Sends the FEA a copy of the Support and Spending Plan Authorization.
- RMS prior authorizes the budget associated with the approved Support and Spending plan.
- If the individual was currently on the Developmental Disabilities (DD) Waiver, deactivate any outstanding prior authorizations for traditional services.

3. Recommended Changes:

If it is not possible to approve a Support and Spending Plan as submitted, RMS will send a letter to the individual and their SB with the following information:

- Reasons why the Support and Spending Plan cannot be approved, and
- Instructions for re-submitting the Plan to RMS if modifications are made to the Plan, and
- Instructions to request a Reconsideration of Decision should the individual decide they do not want to modify and re-submit the plan.

If the re-submitted Plan is approved the RMS follows the approval process.

4. When the Plan is Denied:

If a Plan is denied, the RMS Care Manager sends a letter of denial to the individual and their SB which includes the individual's right to file a Notice of Reconsideration.

a. Notice of Denial:

The individual has twenty-eight (28) days to file a Request for Reconsideration of a Denial with the Regional Medicaid Services Care Manager.

b. The Reconsideration Request:

If an individual files a Request for Reconsideration of Denial with the RMS, this request is forwarded to Central Office Medicaid, Bureau of Behavioral Health. The Bureau has fifteen (15) days from the date of receipt and any requested documentation necessary to the request to come to a decision. The Bureau can either approve or deny the Plan.

If the Bureau overturns a regional decision to deny a plan, RMS completes the following within three (3) business days of receiving the decision:

- Sends the individual and SB a copy of the Support and Spending plan approval letter and a copy of the Support and Spending plan.
- Sends the FEA a copy of the Budget Summary Sheet.
- RMS prior authorizes the budget associated with the approved Support and Spending plan.
- Deactivate any outstanding prior authorization for traditional services.

If the Division of Medicaid upholds a regional decision to deny a plan, the Division of Medicaid sends a Notice of Denial to the individual and their SB. A copy of the Notice is also sent to RMS. At this point an individual can elect to receive DD Waiver services through the traditional pathway. Contact information regarding the traditional pathway will be included in the denial letter.

c. The Fair Hearing Appeal:

If the individual does not appeal the denial within twenty-eight (28) days, their Self-Directed Community Supports file will be closed. The individual can elect to remain with their traditional Individual Service Plan.

If the individual does appeal within twenty-eight (28) days, the Rules Governing Case Proceedings and Declaratory Rulings (IDAPA 16.05.03) will be followed.

CHAPTER FIVE: THE COMMUNITY SUPPORT WORKERS

1. What is a Community Support Worker?

The IDAPA Rule defines a Community Support Worker (CSW) as: An individual, agency or vendor selected and paid by the participant to provide Community Support Worker Services. These services are defined in the IDAPA Rule as:

- Job support to help the participant secure and maintain employment or attain job advancement;
- Personal support to help the participant maintain health, safety, and basic quality of life;
- Relationship support to help the participant establish and maintain positive relationships with immediate family members, friends, spouse, or others in order to build a natural support network and community;
- Emotional support to help the participant learn and practice behaviors consistent with his goals and wishes while minimizing interfering behaviors;
- Learning support to help the participant learn new skills or improve existing skills that relate to his identified goals;
- Transportation support to help the participant accomplish his identified goals;
- Adaptive equipment identified in the participant's plan that meets a medical or accessibility need and promotes his increased independence; and

Skilled nursing support identified in the participant's plan that is within the scope of the Nurse Practice Act and is provided by a licensed professional (RN) nurse or licensed practical nurse (LPN) under the supervision of an RN, licensed to practice in Idaho.

The IDAPA Rule states the following **REQUIREMENTS** for a CSW:

- If an identified support requires specific licensing or certification within the State of Idaho, the identified CSW must meet the applicable licensing or certification requirements.

The IDAPA Rule states the following **LIMITATIONS** for a CSW:

- A paid CSW must not have direct control over the participant's choices, must avoid any conflict of interest, and cannot benefit financially from the participant's choices.