SELF-DIRECTED SUPPORTS
Support Coordinator Training
Training Objectives

• Understanding self-directed supports and its relationship to self-determination
• Designing self-directed supports through the person-centered planning process
• Creating the individual budget and establishing pay rates
• Working with the Fiscal Management Service (FMS)
• Creating quality and monitoring self-directed supports
• Self-directed supports (SDS) is an option for service delivery for individuals, who live in their own private residence or that of their family member & who wish to exercise more choice, control and authority over their waiver supports. SDS is firmly grounded in the principles of self-determination.
Self-Directing Support

• SDS is based on the premise that the individual and their representative knows best about their needs and how to address those needs. The individual should be empowered to make decisions about the services they receive, including having choice and control over the type of supports they receive, who provides the supports and when and where the supports are delivered.
Although the terms self-determination and self-directed supports are often used interchangeably, they are two distinct concepts.
The Division of Developmental Disabilities defines Self-Determination:

*Individuals are the primary decision maker of their lives, pursue what is important to them and have a meaningful role in the community.*
For More information on Self-Determination visit these websites:

• Missouri Self-Determination Association
  www.mo-sda.org

• National Gateway to Self-Determination
  www.ngsd.org

• Missouri Division of Developmental Disabilities
  http://dmh.mo.gov/dd/selfdetermination.htm
Self-Directed Supports

Individual/Designated Representative has both budget and employment authority and must follow both Medicaid and Department of Labor regulations.
The **Employer of Record** is the individual receiving services through a Medicaid program and a service plan. For individuals under the age of 18 the parent/guardian is the Employer.
Employer/Designated Representative

• The individuals receiving services (Employer of Record), guardian and/or appointed designated representative must be able and willing to direct & manage the workers’ day-to-day activities, making sure the services and goals are provided as written in the individual’s ISP.
Appointment of a Designated Representative (DR)

The individual or guardian may select a designated representative (DR) in the event the individual is unable to direct and manage the day to day activities of their employees.

• The Designated Representative (DR) will be the responsible party
• Designated Representative is unpaid
• Acts on the individuals behalf and in their best interest
• Cannot be an employee for any services
Who Can Be a Designated Representative

- **A spouse** (unless a formal legal action for divorce is pending)
- **An adult child of the individual**
- **A parent**
- **An adult brother or sister**
- **Another relative of the Individual**
- **Other Representative**- If the Individual wants a representative but is unable to identify one of the above, the individual, along with the service coordinator and planning team, may identify an appropriate representative. The Other Representative must be an adult who can demonstrate a history of knowledge of the individual’s preferences, values, needs, etc. The individual and his or her planning team is responsible to ensure that the selected representative is able to perform all the employer-related responsibilities and complies with requirements associated with representing one individual in directing services and supports.
Individual/Designated Representative

• Direct and manage the worker’s day to day activities, making sure the services and goals are provided as written in the ISP and provide other duties of an employer, such as hiring and firing employees.

• Must schedule/approve all hours worked prior to submitting the time to the Fiscal Management Service (FMS).

• Complete monthly reviews, and maintain required documentation in the individual’s home.
Direct & Manage the Workers’ Day to Day activities

• Recruit, interview, hire, manage and decide whether Employees are doing a good job
• Make sure the Employee completes mandatory trainings.
• Train the Employee on the Individual’s needs and preferences
• Schedule and supervise the Employee
• Review and approve weekly time sheets that are accurate and submit to the FMS
• Report any situations of potential Medicaid fraud including, but not limited to: Falsified or made-up hours, Task(s) completed that are not authorized, Forgery
• Dismiss Employees that are not doing a good job
Direct & Manage the Workers’ Day to Day Activities

Got Choice Handbook

When self-directing your supports you and/or your designated representative are required to:

- Complete and submit for processing all required employer paperwork to establish the person served as an ‘employer or record’ and send to the FMS (Missouri Consumer Direct);
- Recruit your employees; Interview your employees and review their references. Using the Job Description & Pre-Employment Training Requirement form (See Enrollment Packets on www.moconsumerdirect.com/forms or http://dhm.mo.gov/dd/programs/selfdirect.htm);
- Once selected, have each potential employee fill out an Employment packet found on www.moconsumerdirect.com. The packet is sent to FMS organization (Missouri Consumer Direct) for processing;
- Receive notice from the FMS organization (Missouri Consumer Direct) that your employee candidate has passed the criminal background check before hiring him or her and allowing them to do any work for you;
- Hire your employees;
- Train your employees based on the Post Employment Training Checklist (See Employee Enrollment Packet on http://moconsumerdirect.com/forms) then send to Missouri Consumer Direct within 30 days of hire;
- Establish a work schedule for your employees and ensuring no employee works more than 40 per week;
- Establish a list of tasks to be performed by your employees that is based on your ISP and the Job Description (See http://moconsumerdirect.com/forms);
- Manage your employees;
- Review your employees’ performance and provide feedback either to acknowledge good performance and/or point out areas that may need improvement;
- Fire your employees when necessary and report to the FMS (Missouri Consumer Direct);
- Review, approve and submit your employees’ time sheets to the FMS (Missouri Consumer Direct) organization, if you feel a time submitted does not correctly reflect the authorized hours worked, you must report any differences to the FMS organization (Missouri Consumer Direct), and work with your employees to correct any errors;
- Ensure that your employees complete all Mandatory Documentation Forms (See http://dhm.mo.gov/dd/programs/selfdirect.htm);
- Complete the Mandatory Monthly Summary form that describes the progress you have made towards achieving your ISP goals and objectives and provide an overall picture of how things are going for you (See http://dhm.mo.gov/dd/programs/selfdirect.htm);
- Make sure your employees have received and keep up with all required training and send to the FMS (Missouri Consumer Direct), the Missouri Consumer Direct will help you track this. If trainings and certifications are not maintained, the employee will not be allowed to work;
- The FMS (Missouri Consumer Direct) will maintain for you a personnel file for each of your employees that contains their training records, contractual agreements and a copy of their high school diploma or GED certificate;
- Create and maintain an emergency back-up plan must be available to your employees in the event that an employee does not show up for work for any reason (See http://dhm.mo.gov/dd/programs/selfdirect.htm);
- Inform the FMS (Missouri Consumer Direct) immediately when you have terminated an employee, make sure the employee has been fired in accordance with state department of labor fair firing practices and that you inform the FMS organization (Missouri Consumer Direct) of the reason for firing so it can be documented in the employee’s file.

Got Choice? ........................................ 20
Support Broker

What is Independent Support Brokerage?

- Provides the individual/designated representative with information & assistance (I&A) to secure the supports and services identified in the ISP
- May not be a parent, guardian or other family
- Cannot serve as a personal assistant or perform any other waivered service for that individual
- Can be authorized up to 8 hours per day and no more than 40 hours per week.
Support Broker Requirements

- A Support Broker may **not** be a parent, guardian or other family member.*
- They cannot serve as a personal assistant or perform any other waivered service for the individual. (This service can be authorized for up to 8 hours per day (32 quarter-hour units).

*Family member is defined as a parent, step-parent, sibling, child by blood, adoption or marriage, spouse, grandparent or grandchild.
Support Broker Provides Information and Assistance I&A

- I&A to recruit, interview, hire and train employees
- I&A explore and access community resources
- I&A to establish work schedules
- I&A to help manage the individual’s budget
- I&A to seek other supports or resources outlined by the individual’s ISP
- I&A communicate to problem-solve conflict resolution between employer/employee’s.
SB Information and Assistance continued:

• I&A to ensure that the emergency back-up plan is established and working
• I&A to promote independent advocacy, to assist in filing grievances and complaints as necessary.
• I&A to define goals, needs, and preferences, identify and access services, supports and resources as part of the persons centered planning process that is gathered by the support coordinator for the ISP
Support Broker Assessment

**Self-Directed Supports Assessment for Support Broker Assistance**

<table>
<thead>
<tr>
<th>Individual Receiving Services:</th>
<th>Designated Representative (if necessary):</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Support Broker (SB) provides the individual or their designated representative (DR) with information &amp; assistance to acquire the supports and services identified in the Individual Service Plan (ISP). The Support Broker does not do these tasks for the individual/designated representative, but provides information and assistance in order for the individual/DR to fulfill their employer-related responsibilities. The goal for everyone in SSB is to move towards 'independence' and for individuals and families to have the support they need in order to self-direct services. This assessment will assist in determining what supports are needed in order for the individual/designated representative to be successful in self-directing supports.</td>
<td></td>
</tr>
</tbody>
</table>

**Provide Practical Skills Training to Assist the Individual/Designated Representative in Manage Support Broker Assistance:**

<table>
<thead>
<tr>
<th>Skill</th>
<th>No Support needed</th>
<th>Details regarding the type of support needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recruiting workers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hiring workers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Managing workers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Terminating workers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Managing and approving timesheets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organization/maintaining documents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Problem solving</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conflict resolution</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Filing grievances and complaints</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Establishing work schedules</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understanding documentation requirements</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assisting with monthly reviews</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Managing budget</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seeking supports or resources</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Defining goals, needs and preferences</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Development of Emergency Back-up Plan</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee training</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understanding the Role of Employees/DR, SC, PMS and SO</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Goals/Outcomes and Objectives for Support Broker:**

**Provide Practical Skills Training to Assist the Employer in Managing Services and Supports:**

- No Support Needed
- Time limited support: hours per year
- Ongoing support: hours per month

**Provide Assistance with Establishing Work Schedules:**

- No Support Needed
- Time limited support: hours per year
- Ongoing support: hour per month

**Provide Assistance in Managing Budget Authorization:**

- No Support Needed
- Time limited support: hours per year
- Ongoing support: hour per month

**Provide Assistance in Seeking Supports or Resources:**

- No Support Needed
- Time limited support: hours per year
- Ongoing support: hour per month

**Provide Assistance to define goals, needs and preferences:**

- No Support Needed
- Time limited support: hours per year
- Ongoing support: hour per month

**Provide Assistance in the development of Emergency Back-up Plan:**

- No Support Needed
- Time limited support: hours per year
- Ongoing support: hour per month

**Provide Assistance with Employee Training:**

- No Support Needed
- Time limited support: hours per year
- Ongoing support: hour per month

**Total Ongoing Support:** hours per month
**Total Time Limited Support:** hours per year

**Frequency of Need:** Typical work schedule, not exceeding authorized hours

**Support Coordinator:**

**Date:**
Person-Centered Planning Process

- Provides the framework
- Determine goals and outcomes
- Identifies supports to meet needs
Individual Service Plan (ISP)

The ISP is used as the training document for employees and must provide enough detail in order for all employees to understand what is needed to provide supports.

SELF-DIRECTED SUPPORT SDSC Pre-UR Review Tool – help ensure that all required SDS elements are in ISP
Individual Service Plan (ISP)

- Works to enhance and build natural supports; defines both **paid and non-paid** services

- List any support the individual/DR needs in order to self-direct services (Support Broker Assessment can be used as a tool)

- Details supports and services provided (SDS Job Descriptions can be used as a tool)

- Identifies if a Designated Representative is being used

- Justifies any training exemptions on the "Training Checklist"

- Identifies the back-up plan which includes provisions for support in the case of scheduled employees not being able to provide the service
State Plan Personal Care Services

If individual is receiving Medicaid State Plan Personal Care Services through Health and Senior Services. DSDS service authorization system must be checked to ensure that these services are not being self-directed. *(The IRS will only allow one Fiscal Agent to report earnings and file employer and employee taxes. The reason is that if there are multiple Agents the IRS cannot track total earnings by employees, accurately track Social Security credits for the employees, do an accurate year end W2 for employees, or reconcile the employers State Unemployment with the Federal Unemployment.)*
An Employee Job Description Can be Used as a Tool for Planning

• to help the Individual/Designated Representative determine what task they would like to have their employees provide and what tasks are allowable

• to help the SC ensure that the ISP provides enough detail in order for all employees to understand what is needed to provide supports.

• to help determine the number of hours of services are needed and the number of employees needed
A Job Description is available for each Self-Direct Service
Identify the back-up plan when scheduled employees are not available to provide supports or other emergencies.
The SDSC will review all ISP’s, budget calculators and authorizations to ensure waiver requirements are met.
Which Services can be Self-Directed?

- Personal Assistant
- Personal Assistant – Medical
- Personal Assistant - Behavior
- Community Specialist
- Personal Assistance : Team Collaboration
Personal Assistant (PA)

- Assists the individual with daily activities at home or in their community
- May directly perform these activities or support the individual in learning how to perform them
- Assists the individual in achieving the goals outlined in their ISP
- Can be provided up to 24 hours per day, as identified in the individual’s ISP
Personal Assistance
Team Collaboration

• For self-directed supports Team Collaboration allows the individual’s employees to participate in the service plan and to meet as a team to ensure consistency in its implementation. A team meeting also can be convened by the individual or their designated representative for the purposes of discussing specific needs of the individual, the individualized progress towards outcomes, and other related concerns.

• Team collaboration can be included in the individual budget up to 120 hours per plan year.
PA Medical/Behavioral

• Under special circumstances the individual may need enhanced medical/behavioral PA services
• Have training requirements which cannot be waived
• This level of support must be thoroughly outlined and justified in the individual’s ISP, as per the Waiver Manual
• Under these conditions the individual will typically need a SDS Community Specialist or other agency based waiver service to provide training and oversight for this service
Evaluating the need for Specialized Behavioral Personal Assistance:

- The interdisciplinary team has documented efforts to maximize the individual’s ability to communicate with others;
  - *to try to prevent any problems that might be happening because people do not understand each other or ignore attempts to communicate*

- The interdisciplinary team has documented implementation of preventive strategies and outcomes of those strategies;

- The interdisciplinary team has identified and outlined the need to pursue more intensive behavior support strategies in the plan;
  - *can’t just be need extra supervision, need to have specific strategies and teaching that the PA will be doing to eventually reduce the problem and the need for PA*
Evaluating the need for Specialized Behavioral Personal Assistance:

- An initial screening for medical, psychiatric or pharmacological causes has been completed, and;
- Prior to approval of funding for specialized behavioral personal assistance the individual plan has gone through the local Person Centered Plan review process and has been reviewed by the Regional Behavior Support Review Committee to determine the above have been completed.
  
  - this process insures that all less intrusive and intensive means to address the behavior have been tried and that the strategies in the ISP are being used consistently and that the need for more intensive services is documented
Evaluating the need for Specialized Behavioral Personal Assistance:

- The Behavioral Personal Assistance employee must be trained on the specific individual’s behavior support strategies. This refers to the Behavior Support Plan that is a specialized plan that can only be developed by licensed providers of behavior analysis services.

  – The ISP must include the service to create this plan and ongoing supports must be in place.
Evaluating the need for Specialized Medical Personal Assistance

• The interdisciplinary team has identified that the individual’s level of care requires either the:
  – Direct delivery of care by a licensed medical professional* or,
  – Training, delegation and periodic supervision of care by a licensed medical professional*. 
### Training Checklist Pre-Employment Training Requirements

The individual/Designated Representative may exempt the following requirements if the exemption is due to:

[A] Duties of the PA named above will not require skills to be attained from this training requirement.

[B] The PA named above has adequate knowledge or experience.

To grant an exemption, the appropriate reason code must be marked in the exemption column and justification for the exemption and safeguards in place must be documented in the ISP.

*Certificate of Training must be attached.*

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Provided by</th>
<th>Date</th>
<th>CHECK APPLICABLE EXEMPTION CODE(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPR Training provided by__ (Cannot be exempt for Enhanced Medical PA)</td>
<td></td>
<td></td>
<td>JA [ ] BA</td>
</tr>
<tr>
<td>First Aid training provided by__ (Cannot be exempt for Enhanced Medical PA)</td>
<td></td>
<td></td>
<td>JA [ ] BA</td>
</tr>
<tr>
<td>Medication Administration training provided by__ (Cannot be exempt for</td>
<td></td>
<td></td>
<td>JA [ ] BA</td>
</tr>
<tr>
<td>Enhanced Medical PA if providing medication administration)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Behavior Intervention Crisis Management training □ Mandt; □ NCI/CPI; □ PCMA</td>
<td></td>
<td></td>
<td>JA [ ] BA</td>
</tr>
<tr>
<td>or SCM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provided by__ Date__ (Cannot be exempt for Enhanced Behavioral PA if</td>
<td></td>
<td></td>
<td>JA [ ] BA</td>
</tr>
<tr>
<td>physical intervention is needed)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Behavior Intervention- Positive Behavior Supports training □ “Tools of</td>
<td></td>
<td></td>
<td>JA [ ] BA</td>
</tr>
<tr>
<td>Choice”; □ Columbus PBS;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other training approved by RO QE department or Division Chief Behavior</td>
<td></td>
<td></td>
<td>JA [ ] BA</td>
</tr>
<tr>
<td>Analyst * (*Supporting documentation must be attached).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provided by__ Date__ (Cannot be exempt for Enhanced Behavioral PA)</td>
<td></td>
<td></td>
<td>JA [ ] BA</td>
</tr>
</tbody>
</table>

**Educational Requirements:** □ High School Diploma; □ GED; □ Regional Office Exemption

(Supporting documentation must be attached)

*All training certifications must be kept current during the duration that the employee is employed.*

Signature of the individual, designated representative or guardian signifies approval of the training plan and approval of any exemptions granted.
Community Specialist

• Available through the Comprehensive, Community Support, Lopez & Partnership for Hope Waivers (not Autism Waiver - will be added with waiver renewal).

• Used when a specialized support are needed to assist the individual in achieving outcomes as specified in the Individual Service Plan. Such as nurse delegation or contributing to the development of a positive behavior support plan.

• May not duplicate Support Broker or other waiver service.

• Can be authorized up to 24 a day in special circumstances
**Pre-Employment Training Requirements**

The Community Specialist must meet one of the following education and experience requirements:

- Bachelor’s degree from an accredited university plus one year experience
- Registered Nurse (with an active license in good standing, issued by the Missouri State Board of Nursing)
- Associate’s degree from an accredited university or college plus three years of experience. Proof of degree/experience must be maintained by the employer in the employee’s personnel file.
Community Specialist Assessment

A tool for ensuring that the ISP is meeting waiver requirements and helps to determine goals and outcomes.
Who Can be an SDS Employee?

Anyone over age 18 with a High School diploma or GED (4 year degree or 2 year + experience required for Community Specialist) who the individual or their designated representative chooses to hire, with the following exceptions:

SDS Employees Cannot Be:

- An individual’s spouse
- An individual’s parents if they are a minor
- An individual’s legal guardian
- The individual’s Designated Representative
- Anyone with a felony or charge which is disqualifying
Family as Caregiver

Personal assistant services may be provided to a person by a member(s) of his or her family when the ISP reflects:

• The individual is not opposed to the family member providing services;
• The services to be provided are solely for the individual and not household tasks expected to be shared with people who live in the family unit;
• The planning team determines the paid family member providing the service best meets the individual’s needs
• A family member will only be paid for the hours authorized in the service plan and these cannot exceed 40 hours a week. Anything over this would be considered a natural support or the unpaid care that a family member would typically provide.

No Family Member can be hired as a SB or CS
Individualized Budgets

Using your Support Team to Create an Individualized Budget

• The support coordinator works with the individual or their designated representative to create budget scenarios using the different funding sources that are available, including the person’s own resources as well as formal and informal supports.
Individualized Budgets

Individualized Budget Development

• Determine which supports are critical in achieving goals, maintaining health and safety, and which supports are merely preferred
• Explore all possible resources for supports
• Orient the individual and support team members to the various potential funding sources
• Determine whether any critical needs are not covered within the scenarios and brainstorm for possible resources if needed
• The Job Descriptions can be used as tool to determine the number of hours need to achieve outcomes.
### How Do We Calculate Employee Hourly Pay Rates?

- All employees must be paid at or above minimum wage and within the maximum rate Medicaid allows.
- The hourly rate that comes out of the individual's budget includes the employer's portion for taxes, unemployment, and worker's comp; this is roughly 15% above the employee's hourly rate (rates subject to change April 1 of each year).
- Utilize the self-directed pay rate calculator located on the Consumer Direct web site.

### SDS Pay Rate Calculator

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
<th>F</th>
<th>G</th>
<th>H</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>SDS Pay Rate Calculator</td>
<td>1. Enter Consumer Name:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Reset Macro: Ctrl+Shift+r</td>
<td>2. Enter DMH ID</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>3. Enter SUTA Rate (3.51% default)</td>
<td>3.51%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Instructions:** Complete the cells in rows 7 - 9 by choosing from the drop-down menu or providing appropriate numbers for each service or individual employee. Each column will warn you if the hourly cost exceeds the allowable maximum. The final cost will show you the total year cost of each service/employee and the total cost of all services/employees combined.

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
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<th>E</th>
<th>F</th>
<th>G</th>
<th>H</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>4. Select Service From Drop Down</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>5. Enter Projected Hours per Year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>6. Enter Hourly Pay Rate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Under / (Over) Medicaid Maximum</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
<td>-</td>
</tr>
<tr>
<td>13</td>
<td>Number of Annual Units (15 min - for reference only)</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>15</td>
<td>Hourly Pay Rate (from above)</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
<td>-</td>
</tr>
</tbody>
</table>

**Required Taxes and Benefit Costs**

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
<th>F</th>
<th>G</th>
<th>H</th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>Social Security</td>
<td>6.20%</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
</tr>
<tr>
<td>19</td>
<td>Medicare</td>
<td>1.45%</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
</tr>
<tr>
<td>20</td>
<td>State Unemployment</td>
<td>3.51%</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
</tr>
<tr>
<td>21</td>
<td>Federal Unemployment</td>
<td>0.60%</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
</tr>
<tr>
<td>22</td>
<td>Worker's Compensation</td>
<td>2.74%</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th>A</th>
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<tbody>
<tr>
<td>24</td>
<td>Total Hourly Tax and Benefit Cost</td>
<td>14.50%</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
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<tr>
<td>25</td>
<td>Total Hourly Loaded Wage</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
<td>-</td>
</tr>
<tr>
<td>27</td>
<td>Total Annual Billable Service Cost</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
<td>-</td>
<td>$-</td>
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</tr>
</tbody>
</table>

**Total Budget for Employee Services:** $0.00
Pay Rate Calculator Breakdown

- SUTA Rate
- Select service from drop down box
- Projected hours per year
- Hourly Pay rate
- Loaded rate
- Employment taxes
- Workers compensation
- Total billable service cost
- Under/ (Over) Medicaid maximum
Unemployment Employment Taxes and Workers’ Compensation

- Social Security
- Medicare
- The SUTA – State Unemployment Tax begins at 3.51% and changes after the first three years, based on the number of people that are hired and fired, and claims against unemployment. Consumer Direct will provide the SDSC a list of these rates for each individual
- Federal Unemployment
- Workers compensation is currently 2.74% of gross salary

**NOTE**: This is the “Employer” cost portion of the employment tax and workers’ comp. The employee will have their portion of person tax deducted from their paycheck.
Total Billable Service Cost
Loaded Rate vs. Employee Pay Rate

- **Loaded Rate** is the TOTAL cost for the service. The employees rate plus the employer related tax and workers compensation cost. This is the rate that comes out of the individual’s budget and the amount authorized in CIMOR.

- Administrative fees for the FMS are **not** part of this cost! These fees are billed under Waiver Administration and do not come from the individual’s budget.
Under / (Over) Medicaid Maximum

- There is a Medicaid maximum rate of pay. For example, if you enter an amount and see ($0.01) on the Medicaid max line, the rate exceeds the maximum allowed.
Vendor Fiscal/Employer Agent FMS

- Setting up payroll records for workers hired ensuring federal, state and local tax withholding and payments are made; file required federal and state employer reports on time
- Worker's Compensation
- Human Resources Functions
  - Background checks
  - Tracking employee qualification/trainings
- Provide individual with monthly budget information regarding payments that have been issued from the approved budget along with a current balance
The Centers for Medicare and Medicaid Services (CMS) defines Financial Management Services (FMS) as: A service/function that assists the family or participant to: (a) manage and direct the distribution of funds contained in the participant-directed budget; (b) facilitate the employment of staff by the family or participant by performing as the participant’s agent such employer responsibilities as processing payroll, withholding and filing federal, state, and local taxes, and making tax payments to appropriate tax authorities; and (c) performing fiscal accounting and making expenditure reports to the participant and/or family and state authorities.
Missouri’s FMS

• Our FMS Missouri Consumer Direct; their web address is http://moconsumerdirect.com/

• Consumer Direct phone number is 1-877-532-8565.
Increasing Independence
And Control Through
Self-Directed Services

Consumer Direct Missouri
Consumer Direct will begin providing self-directed services in Missouri in 2012. Our goal is to provide quality support so you and your team are successful in managing your service and supports.

Self-directed services give you:
- More choice
- More flexibility
- More control
- More independence

This results in a higher level of satisfaction and quality of life in your home and community.
Getting Started...

• The individual may utilize the SDS option if they receive funding through Medicaid Waiver (Comprehensive, Community Support, Lopez, Partnership for Hope or Autism) or POS, pending Utilization Review and Administrative approval.
Enrollment Process

1. The SC can notify the SDSC that they are working with a family on the SDS option. The SDSC is available to support and assist the SC in speaking with the Individual/family about the option.

2. Consumer Direct will offer ongoing information trainings throughout the state. Individuals/families are welcome to attend if they are interested in learning more about SDS.

3. If the SC makes the SDSC aware when the authorization is being submitted to the Regional Office they can help expedite the process. The SDSC reviews the packet prior to it going to UR.

4. SDSC will complete the referral to Consumer Direct once they have reviewed the UR packet. Referral will be held pending UR approval.

5. After UR has approved authorization. The SC will send the approved Budget Calculator to Individual/Designated Representative to inform them of their approved budget allocation.

6. Once the approved authorization is in CIMOR, SDSC will send the referral to MOCD.
Enrollment Process

7. Consumer Direct will contact the individual/designated representative to assist with the enrollment process. They will individualize the enrollment process based on the need.

8. Consumer Direct will process paperwork and initiate a background check. **No person/applicant/prospective employee is to begin working until the Consumer Direct notifies the individual that their prospective employee has passed their background screening.**

9. If the prospective employee has any ‘hits’ or flags on their background check the SDSC will be notified and will contact the SC and the employer and will help determine if the potential employee can be cleared to work or not.

10. The SC follows up with individual/designated representative within 30 days of authorization to ensure that all services are being delivered as authorized in ISP. The SDSC is available to assist.
Individual is interested in SDS

Talks with SC

SC may contact SDSC for assistance

SDSC reviews UR packet & ensures MOCD New Referral Form is complete

UR approval

Budget is approved: SDSC sends Referral Form which includes max rate information to MOCD receipt means it's approved and in CIMOR

MOCD contacts Employer/DR to complete enrollment process

MOCD processes paperwork; completes FCSR background check on employees & E-Verify, issues "Ok to Work Form" to Employer/DR
Service Documentation Maintained by the Employer

- Service Documentation sheets are signed by the employee. These describe various covered activities or services in which the individual participated, progress towards goals, and unusual events
  - Must be sufficient so that it is understandable, explains what was provided, and can be verified with reasonable certainty that the services were provided
  - Service documentation must be maintained by the employer for a period of 6 years
  - The employee is responsible for writing the documentation on the date they provide the service

- **MANDATORY SELF-DIRECTED SUPPORTS DOCUMENTATION FORM** - alternate format must be approved by Regional Office, Self-directed Supports coordinator -
**MANDATORY SDS Service DOCUMENTATION FORM**

*This is a mandatory documentation sheet, alternate format must be approved by Regional Office, Self-directed Supports coordinator*
INDIVIDUAL RECEIVING SERVICES (include middle initial): ________________________________________

DATE of Time Period: ____/____/____ to ____/____/____

Documentation must be completed at the time of service and must be sufficient so as to justify the length of service provided.

Record activities and be specific. Where did service take place?* What activity was done? What support was needed? What was the response? Answer the questions of who, what, when, where, why, how and record progress towards goals. Record changes in mood, habits or health, and new skills or discoveries. Be objective; just the facts, not opinions. Avoid using any derogatory, disrespectful or unprofessional statements.

Always use ink and remember to write legibly. Never use whiteout or scratch out errors, simply draw a line through the error and initial it.

<table>
<thead>
<tr>
<th>Date</th>
<th>Time In</th>
<th>Time Out</th>
<th>Documentation Notes</th>
<th>Employee Signature</th>
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<tbody>
<tr>
<td></td>
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<td>(*Service took place in individuals home unless otherwise noted)</td>
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**This is a mandatory Documentation sheet, alternate format must be approved by Regional Office, Self-directed Supports Coordinator 2/07/14**
All Individuals/Designated Representatives must do monthly summaries

- Monthly summary and budget tracker which describes progress on the individual’s ISP goals and objectives, overall status of the individual, and tracks service usage/dollars spent.

Now maintained by the FMS: The training checklist which documents each employee’s qualifications to provide the service; this must be updated annually, along with the ISP. (Consumer Direct will now collect the training checklist along with verification of trainings, please forward copies of these to Consumer Direct.)
When you are self-directing your supports it is recommended that you keep a copy of all paperwork that you sign. However some of these documents are also maintained by your support coordinator (SC), regional office (RO) and/or your Fiscal Management Service (FMS). The documents listed below must be maintained by you, and be available for your SC to review. Additionally, these records must be produced for auditing purposes through the Missouri Department of Mental Health, Department of Social Services, and the Center for Medicare and Medicaid Services. Your SC, RO or FMS does not keep a copy of these documents for you. Not having these documents on file could result in terminating the option of self-directing your supports.

**Individual/Designated Representative File**

- Individual Service Plan including budget information

**Information available for Employees**

- Individual Service Plan
- The Emergency Back-up Plan (to ensure adequate coverage in case of emergency)

**Service Documentation:**

**MANDATORY SELF-DIRECTED SUPPORTS DOCUMENTATION FORM** (archives must go back 6 years) Time recorded on this document must be consistent with what is submitted on the FMS (Missouri Consumer Direct) timesheets.

Not having these documents on file and any discrepancies in records and claims for reimbursement from MO HealthNet are subject to recoupment from the Individual/Designated Representative and may result in terminating the option of self-directing your supports.

- Monthly summary – report documenting progress for all SDS services and budget tracking.

02/07/14
Event Management Tracking

• Any employee paid to provide Medicaid Waiver services is required to report any events that could jeopardize an individual’s health or safety. If any of the following occur, they must notify the SC or the office on-call staff as soon as possible:
EMT/CERs

- Upon receiving information regarding an incident listed previously, the service coordinator will ensure the individual’s immediate health and safety needs are met. The SC will then fill out a Community Event Report form detailing the event. In most cases the team will meet to talk about what occurred prior to the event and what can be done to prevent a reoccurrence in the future.
Service Monitoring

Case notes should reflect observations related to the following key areas:

• **Environment** – Are there health & safety concerns; is the individual’s home adapted to meet their needs, etc?

• **Individual rights** – Are the individual’s rights respected and protected? If there is a designated representative are they serving the best interest of the individual?

• **Staff and services** – Is the employer maintaining all paperwork & documentation? Is it accurate & up to date? If family members are providing services, is it provided in the best interest of the individual? Are the employees qualified? Is the employee training checklist completed prior to providing services and annually thereafter? Have you signed each training checklist?

• **Money** – Are the individual’s services being provided within the parameters of their budget?

• **Health & safety** – Have there been reports of unusual events; has the team followed up? Has the individual experienced major changes that may influence support needs?
# Service Monitoring

## Self-Directed Supports Service Monitoring Guide

Self-Directed Supports are required to be monitored face-to-face quarterly at a MINIMUM. The descriptors for the 5 areas (domains) and interpretive guidelines are not an all-inclusive list, as other issues or areas of concern should be documented if they are present. This is ONLY a monitoring guide and does not take the place of the service monitoring case note or form needed for entry into APTS.

<table>
<thead>
<tr>
<th>Outcome/Demand:</th>
<th>General Notes: Follow Up/Correction Needed?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ENVIRONMENT &amp; SAFETY</strong></td>
<td>Does the environment create any health/safety concerns? Is the individual’s home modified to meet their support needs?</td>
</tr>
<tr>
<td><strong>INDIVIDUAL RIGHTS</strong></td>
<td>Are the individual’s rights respected and protected? Are the employees supporting the individual in exercising their self-advocacy skills? Is the designated representative serving in the best interest of the individual? How does the individual’s life reflect the principles of self-determination?</td>
</tr>
<tr>
<td><strong>STAFF &amp; SERVICES</strong></td>
<td>Is the current ISP present and implemented as written? Is documentation of progress present and meaningful? Are monthly summaries completed? Are the ISP outcomes addressed in the monthly summaries? If family members are providing services, are they doing so in the best interest of the individual? Is there a current back-up plan in place? &gt; Are all forms present and complete as specified on the SDS EMPLOYER DOCUMENT CHECKLIST?</td>
</tr>
<tr>
<td><strong>MONEY</strong></td>
<td>Having checked utilization on the Fiscal Management Service (FMS) website, is over- or under-utilization a concern? Does the individual have unmet service needs which could be provided via other SDS services (i.e. support broker/community specialist)? Are all funding options being explored to help address the individual’s support needs?</td>
</tr>
<tr>
<td><strong>HEALTH</strong></td>
<td>Have there been reports of unusual events as documented on an EMT? Has the team followed up? Has the individual experienced any major changes that may impact his/her support needs?</td>
</tr>
</tbody>
</table>

**Instructions:** The form on page two is to be used to notify the individual/designated representative, and the assigned the Regional Office Quality Assurance Specialist of any concerns found during service monitoring and how the issue is being resolved. Please use the information from the checklist to complete this form. Be brief, as this information must also go into a database.
Service Monitoring

• Don’t forget to include positive outcomes!!
• Service Monitoring should be documented in the SC’s case note
• If there is an issue of concern follow your local procedures for reporting of issues (each RO should have designated staff)
• Issues of concern will be entered into APTS and the SC will be responsible for remediation & follow-up
# Outcomes from Monitoring/Quality Management Referral Form

<table>
<thead>
<tr>
<th>Date:</th>
<th>Service Coordinator:</th>
<th>Team:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual Name:</td>
<td>ID #:</td>
<td>Team:</td>
</tr>
<tr>
<td>Provider Issue – Number of Consumers Affected:</td>
<td>Provider Name:</td>
<td>Team:</td>
</tr>
<tr>
<td>Address of Location visited:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Service Monitoring Complete and No Issues Found to Report (Circle if using paper form):** Yes [ ] No [ ]

## Description of Issue:

### Action Taken:

#### Domain/Category/Type (include all three):

<table>
<thead>
<tr>
<th>Discovery Date:</th>
<th>Timeline Given:</th>
<th>Resolution Verified Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Entry</td>
<td>Follow-up on Unresolved Entry</td>
<td>Comment/Remediation:</td>
</tr>
</tbody>
</table>

- **QE Follow-up Needed (Circle if using paper form):** Yes [ ] No [ ]

## Description of Issue:

### Action Taken:

#### Domain/Category/Type (include all three):

<table>
<thead>
<tr>
<th>Discovery Date:</th>
<th>Timeline Given:</th>
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</thead>
<tbody>
<tr>
<td>New Entry</td>
<td>Follow-up on Unresolved Entry</td>
<td>Comment/Remediation:</td>
</tr>
</tbody>
</table>

- **QE Follow-up Needed (Circle if using paper form):** Yes [ ] No [ ]

## Positive Quality Outcomes Identified (check all that apply but also provide explanation for each box checked)

- Community Membership
- Personal Relationships
- Personal Image
- Personal Identity
- Valued Roles
- Connected with past
- Communication
- Opportunity to Advocate
- Positive Behavioral Supports
- Positive Image
- Control of daily lives
- Physical Wellness
- Plan reflects lives and supports
- Live and die with dignity
- Feel safe, emotional well being
- Support through lifestyle changes
- Managing their home
- Shared mission in agency
- Agency relationships with other agencies
- Staff Empowerment
- Agency Self Evaluation

**Comments / Explanation of Positive Quality Outcomes:** (Can also be used for positive comments not meeting Positive Quality Outcomes).
APTS: Action Plan Tracking System

• Division of DD data base used to collect information on issues/positive outcomes that affect consumers.
• Collecting the information is for prevention purposes
• Address any patterns or trends in issues that are occurring before they develop into a critical situation.
Self-Directed Support Improvement Plan

• When multiple issues have been identified, a patterns of issues repeatedly occurring, or serious situation that must be corrected a Self-Directed Supports Improvement Plan will be jointly developed.

• Issues may identify on monitoring visits, event reports, reviews or issues reported by the FMS (Missouri Consumer Direct).
## Self-Directed Support Improvement Plan

### Issue 1

<table>
<thead>
<tr>
<th>ACTION STEPS</th>
<th>RESPONSIBLE PARTY</th>
<th>DATE TO COMPLETE</th>
<th>PROGRESS/DATE COMPLETED</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
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<td>2.</td>
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**Due Date:**

- Corrective Due Date was Met: ☐ Yes; ☐ No
- Corrective Actions Completed: ☐ Yes; ☐ No

**Final Recommendation:**

CC: Improvement Plan and letter: DMH-OD Regional Director, Provider Relations Lead, Quality Assurance Lead, SDSC file, SC, SC Supervisor, Designated Representative/Individual, Individual record
Termination of Self-Directed Supports

Voluntary Termination
If an individual decides they do not want to continue self-directing their supports, they may stop at any time. The service coordinator should help them begin that process and assist them in transitioning to agency-based services.

Involuntary Termination of Self-Directed Services
In the event the planning team determines the individual’s health and safety is at risk, there are concerns regarding their willingness to ensure proper records are accurately kept, or that they are unwilling to supervise employees to receive services according to the plan, the choice of self-directing their supports may be terminated. Before terminating self-directed options, the service coordinator and other appropriate staff will first counsel the individual or their designated representative to assist them in understanding the issues, let them know what corrective action is needed, and offer them assistance in making changes. If the SDS option is terminated, the same level of services will be offered through a traditional agency-based model.
Support Coordinator Responsibilities

- Responsible for all elements of the person-centered planning process being in place
- Monitor Health & Safety
- Complete service monitoring (quarterly – minimum) and SC documentation requirements for each service
- **Ensure the option of self-directing supports is given to all individuals/designated rep. who receive a funded service & assist in the enrollment process if chosen**
- Complete all required Medicaid Waiver and Utilization Review paperwork for budget approvals
- **Ensure individual/employer receive information regarding budget allocation (approved budget calculator)**
- Complete monitoring within one month of starting a new service and set up monitoring schedules with individual/designated representative no less then quarterly
- Complete CERs for unusual events
QUESTIONS??