

Appendix E: Participant Direction of Services

Applicability (from Application Section 3, Components of the Waiver Request):

- Yes. This waiver provides participant direction opportunities.** Complete the remainder of the Appendix.
- No. This waiver does not provide participant direction opportunities.** Do not complete the remainder of the Appendix.

CMS urges states to afford all waiver participants the opportunity to direct their services. Participant direction of services includes the participant exercising decision-making authority over workers who provide services, a participant-managed budget or both. CMS will confer the Independence Plus designation when the waiver evidences a strong commitment to participant direction.

Indicate whether Independence Plus designation is requested (select one):

- Yes. The State requests that this waiver be considered for Independence Plus designation.**
- No. Independence Plus designation is not requested.**

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E-1: Overview (1 of 13)

- a. **Description of Participant Direction.** In no more than two pages, provide an overview of the opportunities for participant direction in the waiver, including: (a) the nature of the opportunities afforded to participants; (b) how participants may take advantage of these opportunities; (c) the entities that support individuals who direct their services and the supports that they provide; and, (d) other relevant information about the waiver's approach to participant direction.

The Waiver affords Waiver participants the opportunity to direct their services through employer authority and budget authority. The participant exercises choice and control over the workers who provide services. Participants also exercise decision-making authority and management responsibility for their budgets. Within the overall cost limit, the participants determine the type and amount of services to be purchased and establish rates for Personal Support Workers.

Participants are supported to direct their own services by the following entities:

Independent Service Coordination Agencies conduct case management services as an administrative activity under the Waiver, including person centered plan development and monitoring;

A fiscal employer agency that provides Financial Management Services as an administrative activity under the Waiver, including making payments on behalf of the employer, completing required tax and other withholding and documentation; and

A Information and Assistance in Support of Participant Direction provider, if selected through an optional direct service under the Waiver, who assists the participant (or the participant's family or representative, as appropriate) in arranging for, directing and managing services.

The participant receives information about participant-directed services and supports during the person centered planning process. Information is presented in both written and verbal formats to ensure the family understand the participant-directed option and can make an informed choice. Information is provided about decision-making budget authority up to the approved level of support. Specific information is provided about the roles and responsibilities of the parent or legal representative and the financial management services.

The participant does have the option of receiving agency-based services if desired.

The participant's choice of the type of supports is documented as part of the person centered plan. Service Agreements are completed for each provider selected to work with the Waiver participant.

If at any time the participant voluntarily decides he or she no longer wants to receive participant-directed services, the person centered plan will be revised to document the choice of agency-based services.

A participant may be involuntarily restricted from participant-directed services due to any of the following circumstances:

- The MA or the OA determines that the participant and/or his or her representative have committed fraud regarding participant-directed program funds;
- The participant is living with a family member or other individual who has been determined by Adult Protective Services or other authorized entity (e.g., law enforcement) to have abused or neglected the participant or other individuals; or
- The ISC agency and FMS have determined and documented that the participant and/or his or her employer of record are not able to direct their own services, either with or without the assistance of a Information and Assistance in Support of Participant Direction provider.

This restriction of participant-directed services by the State is subject to appeal to the MA. The outcome of the appeal process is final. In this event, agency-directed services would be made available and documented in the person centered plan. The ISC works with the service providers, the Information and Assistance in Support of Participant Direction provider (if applicable) and the OA as necessary to ensure service continuity and health and welfare during the transition.

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- b. Participant Direction Opportunities.** Specify the participant direction opportunities that are available in the waiver. *Select one:*

- Participant: Employer Authority.** As specified in *Appendix E-2, Item a*, the participant (or the participant's representative) has decision-making authority over workers who provide waiver services. The participant may function as the common law employer or the co-employer of workers. Supports and protections are available for participants who exercise this authority.
- Participant: Budget Authority.** As specified in *Appendix E-2, Item b*, the participant (or the participant's representative) has decision-making authority over a budget for waiver services. Supports and protections are available for participants who have authority over a budget.
- Both Authorities.** The waiver provides for both participant direction opportunities as specified in *Appendix E-2*. Supports and protections are available for participants who exercise these authorities.

- c. Availability of Participant Direction by Type of Living Arrangement.** *Check each that applies:*

- Participant direction opportunities are available to participants who live in their own private residence or the home of a family member.
- Participant direction opportunities are available to individuals who reside in other living arrangements where services (regardless of funding source) are furnished to fewer than four persons unrelated to the proprietor.
- The participant direction opportunities are available to persons in the following other living arrangements

Specify these living arrangements:

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- d. Election of Participant Direction.** Election of participant direction is subject to the following policy (*select one*):

- Waiver is designed to support only individuals who want to direct their services.
- The waiver is designed to afford every participant (or the participant's representative) the opportunity to elect to direct waiver services. Alternate service delivery methods are available for participants who decide not to direct their services.
- The waiver is designed to offer participants (or their representatives) the opportunity to direct some or all of their services, subject to the following criteria specified by the State. Alternate service delivery methods are available for participants who decide not to direct their services or do not meet the criteria.

Specify the criteria

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- e. **Information Furnished to Participant.** Specify: (a) the information about participant direction opportunities (e.g., the benefits of participant direction, participant responsibilities, and potential liabilities) that is provided to the participant (or the participant's representative) to inform decision-making concerning the election of participant direction; (b) the entity or entities responsible for furnishing this information; and, (c) how and when this information is provided on a timely basis.

During the level of care evaluation process, the local Independent Service Coordination (ISC) entities under contract with the Operating Agency provide information about participant-directed opportunities and assist participants and their families in making informed choices from among Waiver services.

Information is available for families that include guidelines for selecting personal support workers, information on financial management services, rights and responsibilities, and other requirements of the Waiver. The ISC assist's the participant and family to understand the service options available under the Waiver. The information is reviewed with participants at least annually as part of the individual person centered planning process.

Participants are given a handbook developed with input from families and other stakeholders that describes the benefits and potential liabilities of self-directed services.

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- f. **Participant Direction by a Representative.** Specify the State's policy concerning the direction of waiver services by a representative (*select one*):

- The State does not provide for the direction of waiver services by a representative.
- The State provides for the direction of waiver services by representatives.

Specify the representatives who may direct waiver services: (*check each that applies*):

- Waiver services may be directed by a legal representative of the participant.
- Waiver services may be directed by a non-legal representative freely chosen by an adult participant.

Specify the policies that apply regarding the direction of waiver services by participant-appointed representatives, including safeguards to ensure that the representative functions in the best interest of the participant:

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- g. **Participant-Directed Services.** Specify the participant direction opportunity (or opportunities) available for each waiver service that is specified as participant-directed in Appendix C-1/C-3.

Waiver Service	Employer Authority	Budget Authority
Home Accessibility Modifications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Physical Therapy (Extended Medicaid State Plan)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Speech Therapy (Extended Medicaid State Plan)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Personal Support	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Emergency Home Response Services (EHRS)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Training and Counseling Services for Unpaid Caregivers	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Adaptive Equipment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Vehicle Modification	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Behavioral Services (Psychotherapy and Counseling)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Temporary Assistance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Behavior Intervention and Treatment	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Non-Medical Transportation	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Occupational Therapy (Extended Medicaid State Plan)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Skilled Nursing	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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- h. **Financial Management Services.** Except in certain circumstances, financial management services are mandatory and integral to participant direction. A governmental entity and/or another third-party entity must perform necessary financial transactions on behalf of the waiver participant. *Select one:*

- Yes. Financial Management Services are furnished through a third party entity.** (Complete item E-1-i).

Specify whether governmental and/or private entities furnish these services. *Check each that applies:*

- Governmental entities
 Private entities

- No. Financial Management Services are not furnished. Standard Medicaid payment mechanisms are used.**
 Do not complete Item E-1-i.

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- i. **Provision of Financial Management Services.** Financial management services (FMS) may be furnished as a waiver service or as an administrative activity. *Select one:*

- FMS are covered as the waiver service specified in Appendix C-1/C-3**

The waiver service entitled:

- FMS are provided as an administrative activity.

Provide the following information

- i. **Types of Entities:** Specify the types of entities that furnish FMS and the method of procuring these services:

The State conducted a Request for Proposal (RFP) process to select Financial Management Service (FMS) vendor(s). The OA developed the RFP for the FMS Vendor Fiscal option pursuant to Section 3504 of the IRS Code, IRS Revenue Procedure 70-6, and IRS Proposed Notice 2003-70m as well as OA rules and regulations.

The criteria used in selecting the vendor(s) included:

- Financial stability, with at least one year of experience in providing employer agent services to participants in similar participant-directed options.
- Ability to perform all functions in accordance with Federal, State and Department regulations and requirements.
- Ability to perform all functions directly without the use of a sub-agent.
- Ability to verify, process and pay invoices for goods and services approved in the participant's support plan in accordance with Operating Agency requirements.
- Ability to prepare and maintain a comprehensive FMS policy and procedure manual that reflects all tasks performed, Illinois-specific labor, tax and workers' compensation insurance requirements, as well as requirements of the Waiver.
- An internal quality management plan that demonstrates sufficient internal controls to monitor FMS performance.

- ii. **Payment for FMS.** Specify how FMS entities are compensated for the administrative activities that they perform:

The per member per month (PMPM) fee paid to the FMS private entities is established through the RFP competitive bid process. As of 7/1/17, the fee is 3.4% of the maximum service costs for one FMS and 4% for the other FMS. This is a reasonable percentage compared to the scope of the supports specified in E-1-i-iii.

The PMPM fee for waiver participants is negotiated between the State and the successful bidders. The fee is claimed as an administrative fee under the Waiver

- iii. **Scope of FMS.** Specify the scope of the supports that FMS entities provide (*check each that applies*):

Supports furnished when the participant is the employer of direct support workers:

- Assist participant in verifying support worker citizenship status
- Collect and process timesheets of support workers
- Process payroll, withholding, filing and payment of applicable federal, state and local employment-related taxes and insurance
- Other

Specify:

Assist with performing required background checks, abuse and neglect registry checks and any other required screenings. Verify independent Personal Support (domestic employee) provider qualifications. These functions are necessary for the proper and efficient administration of the waiver by reviewing and ensuring provider qualifications are met.

Supports furnished when the participant exercises budget authority:

- Maintain a separate account for each participant's participant-directed budget
- Track and report participant funds, disbursements and the balance of participant funds

- Process and pay invoices for goods and services approved in the service plan**
- Provide participant with periodic reports of expenditures and the status of the participant-directed budget**
- Other services and supports**

Specify:

Additional functions/activities:

- Execute and hold Medicaid provider agreements as authorized under a written agreement with the Medicaid agency**
- Receive and disburse funds for the payment of participant-directed services under an agreement with the Medicaid agency or operating agency**
- Provide other entities specified by the State with periodic reports of expenditures and the status of the participant-directed budget**
- Other**

Specify:

- iv. Oversight of FMS Entities.** Specify the methods that are employed to: (a) monitor and assess the performance of FMS entities, including ensuring the integrity of the financial transactions that they perform; (b) the entity (or entities) responsible for this monitoring; and, (c) how frequently performance is assessed.

The FMS private entity(ies) must have internal monitoring procedures and processes to ensure contract performance compliance. The State reserves the right to monitor and track vendor performance over the course of the contract. The State will monitor the vendor(s) based on the performance measures approved in the waiver and any other contractual requirements. The vendor(s) agrees to provide all of the data specified by the State for service payment and claiming purposes. The vendor(s) agrees to cooperate with the State on monitoring and tracking activities which may require the vendor to submit requested progress reports, allow unannounced inspections of its facilities, participate in scheduled meetings and provide management reports as requested by the State. The Operating Agency reviews performance on an annual basis. The Medicaid Agency participates in the review and the results of these reviews are shared with the Waiver Quality Management Committee.

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- j. Information and Assistance in Support of Participant Direction.** In addition to financial management services, participant direction is facilitated when information and assistance are available to support participants in managing their services. These supports may be furnished by one or more entities, provided that there is no duplication. Specify the payment authority (or authorities) under which these supports are furnished and, where required, provide the additional information requested (*check each that applies*):

- Case Management Activity.** Information and assistance in support of participant direction are furnished as an element of Medicaid case management services.

Specify in detail the information and assistance that are furnished through case management for each participant direction opportunity under the waiver:

- Waiver Service Coverage.** Information and assistance in support of participant direction are provided through the following waiver service coverage(s) specified in Appendix C-1/C-3 (check each that applies):

Participant-Directed Waiver Service	Information and Assistance Provided through this Waiver Service Coverage
Home Accessibility Modifications	<input type="checkbox"/>
Physical Therapy (Extended Medicaid State Plan)	<input type="checkbox"/>
Supported Employment - Individual Employment Support	<input type="checkbox"/>
24-Hour Stabilization Services	<input type="checkbox"/>
Community Day Services	<input type="checkbox"/>
Residential Habilitation	<input type="checkbox"/>
Speech Therapy (Extended Medicaid State Plan)	<input type="checkbox"/>
Personal Support	<input type="checkbox"/>
Emergency Home Response Services (EHRS)	<input type="checkbox"/>
Training and Counseling Services for Unpaid Caregivers	<input type="checkbox"/>
Supported Employment – Small Group Supports	<input type="checkbox"/>
Adaptive Equipment	<input type="checkbox"/>
Vehicle Modification	<input type="checkbox"/>
Behavioral Services (Psychotherapy and Counseling)	<input type="checkbox"/>
Temporary Assistance	<input type="checkbox"/>
Adult Day Care	<input type="checkbox"/>
Information and Assistance in Support of Participant Direction	<input checked="" type="checkbox"/>
Behavior Intervention and Treatment	<input type="checkbox"/>
Non-Medical Transportation	<input type="checkbox"/>
Occupational Therapy (Extended Medicaid State Plan)	<input type="checkbox"/>
Skilled Nursing	<input type="checkbox"/>

- Administrative Activity.** Information and assistance in support of participant direction are furnished as an administrative activity.

Specify (a) the types of entities that furnish these supports; (b) how the supports are procured and compensated; (c) describe in detail the supports that are furnished for each participant direction opportunity under the waiver; (d) the methods and frequency of assessing the performance of the entities that furnish these supports; and, (e) the entity or entities responsible for assessing performance:

ISC agencies, under contract with the Operating Agency, are compensated through a per participant allocation that is standard statewide. ISC's were selected through a request-for-proposal (RFP) process. ISC's conduct assessments, develop the person centered plans with the participants, assist with linkage and applications for any non-Waiver services, inform participants of all willing and qualified providers, complete any necessary prior approval applications, ensure service plans are implemented, provide necessary coordination of services, explain and provide information about reporting abuse/neglect/exploitation, and explain appeal rights and assist in filing appeals as needed. Annually the Operating Agency conducts site visits at all ISC entities and reviews their performance using a representative sample of all waiver participants.

One or more Financial Management Service (FMS) entity/entities, under contract with the Operating Agency and selected through a request for proposal process, provides fiscal agent and employer agency services. The

FMS entity is compensated on a per member per month basis. The Operating Agency reviews the performance of the FMS entity on an annual basis.

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k. Independent Advocacy *(select one)*.

- No. Arrangements have not been made for independent advocacy.
- Yes. Independent advocacy is available to participants who direct their services.

Describe the nature of this independent advocacy and how participants may access this advocacy:

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- l. Voluntary Termination of Participant Direction.** Describe how the State accommodates a participant who voluntarily terminates participant direction in order to receive services through an alternate service delivery method, including how the State assures continuity of services and participant health and welfare during the transition from participant direction:

A participant or their guardian, if one has been appointed, may choose to voluntarily terminate from participant-direction at any time. If the participant exercised employer authority, employees of the participant are typically provided with 30 days advance written notice of the termination, however, this notification is not mandatory. The participant selects a community agency to provide and direct needed Waiver services. These changes are discussed among those responsible for person centered planning. The plan is updated to reflect the change in service delivery method, the participant's or guardian's (when applicable) decision to terminate participant-direction, and the selected community agency(ies) that will now be delivering services. The ISC works with service providers and the Operating Agency as necessary to ensure service continuity and health and welfare during the transition.

If the health and welfare of the participant cannot be assured on a long-term basis within the cost limit of participant-directed supports in combination with other natural supports and community resources, the participant will be considered for other service options within the Waiver, including other residential habilitation options. These limits were established through a review of historical expenditures.

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- m. Involuntary Termination of Participant Direction.** Specify the circumstances when the State will involuntarily terminate the use of participant direction and require the participant to receive provider-managed services instead, including how continuity of services and participant health and welfare is assured during the transition.

A participant may be involuntarily restricted from participant-directed services due to any of the following circumstances:

- The MA or the OA determines that the participant and/or his or her representative have committed fraud regarding participant-directed program funds;
- The participant is living with a family member or other individual who has been determined by Adult Protective Services or other authorized entity (e.g., law enforcement) to have abused or neglected the participant or other individuals; or
- The ISC agency and FMS have determined and documented that the participant and/or his or her employer of record are not able to direct their own services, either with or without the assistance of a Information and Assistance

in Support of Participant Direction provider.

This restriction of participant-directed services by the State is subject to appeal to the MA. The outcome of the appeal process is final. In this event, agency-directed services would be made available and documented in the service plan. The ISC works with the service providers, the Information and Assistance in Support of Participant Direction provider (if applicable) and the OA as necessary to ensure service continuity and health and welfare during the transition.

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E-1: Overview (13 of 13)

- n. **Goals for Participant Direction.** In the following table, provide the State's goals for each year that the waiver is in effect for the unduplicated number of waiver participants who are expected to elect each applicable participant direction opportunity. Annually, the State will report to CMS the number of participants who elect to direct their waiver services.

Table E-1-n

	Employer Authority Only	Budget Authority Only or Budget Authority in Combination with Employer Authority
Waiver Year	Number of Participants	Number of Participants
Year 1	<input type="text"/>	6000
Year 2	<input type="text"/>	6000
Year 3	<input type="text"/>	6000
Year 4	<input type="text"/>	6000
Year 5	<input type="text"/>	6000

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E-2: Opportunities for Participant Direction (1 of 6)

- a. **Participant - Employer Authority Complete when the waiver offers the employer authority opportunity as indicated in Item E-1-b:**

- i. **Participant Employer Status.** Specify the participant's employer status under the waiver. *Select one or both:*

- Participant/Co-Employer.** The participant (or the participant's representative) functions as the co-employer (managing employer) of workers who provide waiver services. An agency is the common law employer of participant-selected/recruited staff and performs necessary payroll and human resources functions. Supports are available to assist the participant in conducting employer-related functions.

Specify the types of agencies (a.k.a., agencies with choice) that serve as co-employers of participant-selected staff:

- Participant/Common Law Employer.** The participant (or the participant's representative) is the common law employer of workers who provide waiver services. An IRS-approved Fiscal/Employer Agent functions as the participant's agent in performing payroll and other employer responsibilities that are required by federal and state law. Supports are available to assist the participant in conducting employer-related functions.

- ii. **Participant Decision Making Authority.** The participant (or the participant's representative) has decision making authority over workers who provide waiver services. *Select one or more decision making authorities that participants exercise:*

- Recruit staff
- Refer staff to agency for hiring (co-employer)
- Select staff from worker registry
- Hire staff common law employer
- Verify staff qualifications
- Obtain criminal history and/or background investigation of staff

Specify how the costs of such investigations are compensated:

The cost of required background checks is paid by the OA as part of the negotiated per member per month (PMPM) fee paid to Financial Management Service (FMS) private entities.

- Specify additional staff qualifications based on participant needs and preferences so long as such qualifications are consistent with the qualifications specified in Appendix C-1/C-3.
- Determine staff duties consistent with the service specifications in Appendix C-1/C-3.
- Determine staff wages and benefits subject to State limits
- Schedule staff
- Orient and instruct staff in duties
- Supervise staff
- Evaluate staff performance
- Verify time worked by staff and approve time sheets
- Discharge staff (common law employer)
- Discharge staff from providing services (co-employer)
- Other

Specify:

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E-2: Opportunities for Participant-Direction (2 of 6)

b. **Participant - Budget Authority** *Complete when the waiver offers the budget authority opportunity as indicated in Item E-1-b:*

i. **Participant Decision Making Authority.** When the participant has budget authority, indicate the decision-making authority that the participant may exercise over the budget. *Select one or more:*

- Reallocate funds among services included in the budget
- Determine the amount paid for services within the State's established limits
- Substitute service providers
- Schedule the provision of services
- Specify additional service provider qualifications consistent with the qualifications specified in Appendix C-1/C-3
- Specify how services are provided, consistent with the service specifications contained in Appendix C-1/C-3
- Identify service providers and refer for provider enrollment
- Authorize payment for waiver goods and services
- Review and approve provider invoices for services rendered
- Other

Specify:

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E-2: Opportunities for Participant-Direction (3 of 6)

b. Participant - Budget Authority

- ii. **Participant-Directed Budget** Describe in detail the method(s) that are used to establish the amount of the participant-directed budget for waiver goods and services over which the participant has authority, including how the method makes use of reliable cost estimating information and is applied consistently to each participant. Information about these method(s) must be made publicly available.

Within the overall home-based supports cost limit, the person centered plan specifies the types of and amounts of covered services needed by the participant. For home-based supports, the maximum annual allocation is set by State law. At the time the law was passed, public hearings were held regarding its implementation. The annual allocation is tied to Social Security benefit levels which are indexed to the cost of living (as required by law).

Participants and the general public are made aware of the program budget amount in a variety of ways. For example, the Waiver Manual is available at the OA's website and contains this information. A Rate Table is also posted on the OA's website which outlines statewide rates for certain services. In addition, ISC's and Information and Assistance in Support of Participant Direction providers (if applicable) assist individuals in understanding and working within the annual and monthly cost allocations.

Individuals may request a fair hearing of any denial or reduction in services. The Waiver Manual contains information on individual rights and fair hearings. ISC's inform participants of their rights to appeal initially upon enrollment, annually as part of the person centered planning process and more often as needed.

For some services, statewide rates apply, such as Behavior Intervention and Treatment. For other services, the participant is given the authority to negotiate individual rates. A written Service Agreement is executed between each service provider, the participant or his or her guardian and the Information and Assistance in Support of Participant Direction provider (if applicable) The Service Agreement defines the terms of the services to be provided including the effective date, the rate of payment, the maximum units of service to be provided each month and the maximum monthly charge. A copy of the Service Authorization for domestic employees is on file with the Financial Management Service (FMS) entity. Bills submitted in excess of the monthly and annual allocations are rejected for payment. This ensures that the combination of services received is consistent with the person centered plan and does not exceed the annual service cost limit.

The OA Rate Table is updated when rate adjustments are implemented, based on State appropriations.

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b. Participant - Budget Authority

- iii. **Informing Participant of Budget Amount.** Describe how the State informs each participant of the amount of the participant-directed budget and the procedures by which the participant may request an adjustment in the budget amount.

Upon being authorized for Waiver services, the participant or guardian (when applicable) is informed in writing by the Operating Agency and in person by the ISC about the overall cost limit, participant-directed opportunities, and budget authority. Once services have begun, the participant or guardian (when applicable) is notified and kept informed of any adjustments to the overall amount by the Operating Agency and ISC. The participant and guardian (when applicable) works with the ISC to establish a budget as a part of the individual's plan. Adjustments may be made throughout the year as needed.

A service agreement form is completed annually to detail the individual's budget. This form may be modified throughout the course of the year as needed. This form is available upon request from the OA. Should any services be reduced or denied, the participant is notified of their right to appeal.

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E-2: Opportunities for Participant-Direction (5 of 6)

b. Participant - Budget Authority

iv. Participant Exercise of Budget Flexibility. *Select one:*

- Modifications to the participant directed budget must be preceded by a change in the service plan.
- The participant has the authority to modify the services included in the participant directed budget without prior approval.

Specify how changes in the participant-directed budget are documented, including updating the service plan. When prior review of changes is required in certain circumstances, describe the circumstances and specify the entity that reviews the proposed change:

Participants and guardians, when applicable, may adjust person centered plans within the monthly allocation without prior review or approval by the State. Adjustments are made via the use of Service Agreements with providers and by updating the person centered plan. Changes in services are documented in the person centered plan and in revised Service Agreements. Changes in Service Agreements where the participant exercises budget authority are shared with the ISC for monitoring purposes. Changes in Service Agreements where the participant exercises employer authority are shared with the Financial Management Service (FMS) entity when services provided by domestic employees change.

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E-2: Opportunities for Participant-Direction (6 of 6)

b. Participant - Budget Authority

- v. **Expenditure Safeguards.** Describe the safeguards that have been established for the timely prevention of the premature depletion of the participant-directed budget or to address potential service delivery problems that may be associated with budget underutilization and the entity (or entities) responsible for implementing these safeguards:

Per statute, adult home-based supports spending is limited on a monthly basis. Participants are encouraged by members of the person centered planning team to allocate authorized services throughout the month to avoid premature depletion of program funds. Edits in the electronic billing system prevent over expenditures. The OA's electronic transfer alerts the FMS of any units of service above the authorized services.

The ISC is responsible for monitoring person centered plan implementation and participant health and welfare, identify and address issues of concern, including the timely prevention of the premature depletion of the participant-directed budget or potential service delivery problems. The minimum frequency of contact for monitoring the plan's implementation, including direct, in-person contact with the participant, is annually. This annual monitoring visit is in addition to the direct contact for plan development.

The ISC (on a mid-year basis) reviews that the PCP is being fully implemented. Also, the OA, on a statistically valid sample basis, reviews that the PCP is being fully implemented.