Indiana Family and Social Services Administration

INCharge Self-Directed Services

Guide for Case Managers & Service Coordinators

November 2025

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Introduction

This manual provides guidance for self-directed services offered under Indiana's Home and Community-Based Services (HCBS) Waivers including:

- Community Integration and Habilitation (CIH)
- Family Support (FSW)
- Traumatic Brain Injury (TBI)
- Health & Wellness (H&W)
- PathWays for Aging (PathWays)

It includes the requirements and expectations for supporting individuals in their choice and control of service delivery of self-directed services. INCharge Self-Directed Services are a collaboration among FSSA, managed care entities (MCEs), the individual and individual's self-directed worker(s). The person-centered planning process will drive self-determination along with the development of a person-centered service plan, as well as exploration of self-directed services.

The INCharge Self-Directed Services Program includes both **employer authority** – the ability to hire self-directed workers – and **budget authority** – the ability to manage funds in the self-directed budget and set the wages for self-directed workers. The self-directed budget provides a set amount of funds necessary to implement the selected self-directed services in the individual's person-centered service plan. If individuals need support to manage their self-directed services, they will choose who will support them. Support is available from the case manager or MCE service coordinator in developing the individual's person-centered service plan and how self-directed services may be utilized. They can also choose a representative to assist them with managing their self-directed services.

Frequently Used Terms

Bureau of Disabilities Services (BDS): A division under the Indiana Division of Disability, Aging, and Rehabilitative Services that oversees home and community-based services waivers.

Financial Management Services (FMS): An organization that assists individuals in administering the allocated self-direction funds from their self-directed support service budget. The state-contracted FMS is available to help members implement the use of allocated funds, manage financial accountability, and fulfill some basic employer responsibilities (i.e., process payroll and taxes). Palco is the current state-contracted FMS vendor.

Individual or Member: The individual (term used for BDS waivers) or member (term used in PathWays waiver) is the person who receives self-directed services.

Representative: A voluntary, unpaid person who may be appointed to assist a Waiver program participant in performing the responsibilities of the employer when the individual chooses not to do so independently.

Employer, or Employer of Record: This term refers to the person directing the work of the employee. This may be the individual (member) or a representative.

Employee or Self-Directed Worker: The person who provides services to the individual is the employee or self-directed worker.

What is Self-Direction?

Individuals are best able to identify their own needs and how to address them. INCharge Self-Directed Services provide individuals with more choice and control over WHO supports them and HOW they are supported. By self-directing services, individuals have more flexibility in choosing supports that look and feel right to them, selecting workers they want to work with, and designing a schedule suitable to their preferences.

An individual using self-directed services hires and trains one or more persons to support them. Self-directed workers work for the individual, instead of an agency provider, and their employment is managed by the individual, including termination of employment.

Core Values of Self-Direction

Core Value: Choice & Control

Self-direction is having the power to make decisions and be in control of your life. This includes receiving all of the information necessary to make informed choices. It includes access to the information needed to make informed choices about how and with whom you want to share your life. The power to make your own choices includes the authority to manage your own budget and hire the people you want to provide your supports.

Core Value: Dignity, Respect & Rights

You have the right to be treated with dignity and respect. You have the right to share your skills, talents, and self with your community. You have the right to take risks, make mistakes and learn from them. You have the right to be part of your community. All supports will be delivered based upon your vision for your life.

Core Value: Interdependence & Autonomy

Self-direction provides flexibility and equitable access to supports that enable individuals' autonomy in their employment, housing, and social opportunities. As a person's interests or needs change so should the services that support them.

Individual/Member Employer Responsibilities

As an employer the individual/member performs tasks that an employer would do. These include things like:

- Find, interview, and hire self-directed workers
- Define self-directed worker's job duties
- Develop a job description for their self-directed workers
- Train self-directed workers to provide support based on their needs and preferences and schedule
- Provide a safe working environment
- Set and enforce the schedule at which their self-directed workers will provide support
- Monitor their self-directed workers to ensure they use the timesheet system
- Make sure their self-directed workers provide only as much support as they are approved to receive
- Verify driver's license and proof of insurance (if the self-directed worker will be providing transportation as part of the service)
- Supervise their self-directed workers
- Evaluate their self-directed worker's job performance and speak with them about job performance – what's working/not working
- Fire self-directed workers when needed
- Understand and explain to their self-directed workers the rate of payment and when they will be receiving payment
- Review the timesheet their self-directed worker completes to be sure it is correct
- Ensure there are good notes kept about the support provided
- Develop a back-up plan to address times that a scheduled self-directed worker does not show up
- Activate the back-up plan when needed

Case Manager and MCE Service Coordinator Responsibilities

All case managers through the BDS Waivers and service coordinators with Managed Care Entities (MCEs) for the PathWays for Aging Waiver are required to develop and maintain a system that supports individuals who choose to use self-directed options available to them.

The case manager or MCE service coordinator assists the individual, family member and other designated representatives in understanding the choice of self-directed supports and, if applicable, transitioning from provider agency driven services to self-directed services.

The case manager or MCE service coordinator will provide detailed information to individuals, caregivers, and families about the option to direct services. A case manager or MCE service coordinator may not limit access to any self-directed options available in accordance with service definition, policy, and guidance. Any denials of self-directed services may be reviewed by FSSA.

Self-Direction Selection Process

Case manager or MCE service coordinator will provide individuals with objective information regarding available self-directed services and options:

- Upon entry into waiver services
- During annual service plan review

- When an individual inquires about self-directed options

To help individuals decide if self-directed services are right for them, the case manager or MCE service coordinator will provide:

- Information and resources on self-direction, including personal choice of services and current options for self-directed services.
- Information on the delivery of self-directed services, including responsibilities of the individual (or representative if applicable) when self-directing.
- Facilitate the use of the self-direction exploration tool.

Self-Direction Exploration Tool

The "Self-Direction Exploration Tool" is required prior to the onset of an individual's initial consideration of self-directed services. It contains two sections – Section 1 is for the Individual/Member and Section 2 is for the Representative.

The "Self-Direction Exploration Tool" is to be included as part of the individual's person-centered plan.

If the member determines not to use self-directed services after using this tool, the case manager or MCE service coordinator will support the individual in determining which services and providers best meet the individual's needs. The individual should not experience a gap in support when choosing between self-direction and other home and community-based and State Plan services. The decision to self-direct may take longer for individuals to determine, and it is the responsibility of the case manager or MCE service coordinator to ensure the individual has support on a continued basis. In some cases, the individual may move forward with agency services until they feel comfortable making the decision to self-directed services.

The ***Self-Direction Exploration Tool – Individual/Representative, Section 1*** can be found in Appendix A.

Representative for Self-Direction

Individuals who are successful with self-direction often do not do it alone. They use formal and informal support from their case manager or MCE service coordinator as well as others to assist them to implement service arrangements that best meet their needs.

Individuals can choose a family member, friend, or someone they trust to assist them and still be able to self-direct. This is called a "Representative for Self-Direction." This is not a requirement but rather an option for individuals to obtain more support if they choose. It's important that individuals pick someone who knows them very well and who is dependable. Representatives for self-direction must:

- Be at least 18 years of age.
- Understand the care needed and how individuals want care to be provided.
- Understand the individual's schedule and routine.
- Understand the individual's health care needs and any medications taken.
- Be willing and able to complete the responsibilities of a representative.
- Be willing to sign a Representative Agreement to agree with the responsibilities of a representative.

The role of the representative for self-direction is not paid. Additionally, the representative shall not be paid to provide any of the individual's care through self-direction. The responsibilities of the representative can be defined and documented in the Representative Agreement.

In instances when an individual changes representative, this tool should be administered by the case manager or MCE service coordinator with any newly identified representatives to ensure the representative is knowledgeable about the expectations of this support role.

The Representative Agreement can be found as part of the ***Self-Direction Exploration Tool – Individual/Representative, Section 2*** in Appendix A.

Self-Directed Services

The services that are allowable to self-direct differ by waiver.

FSW	CIH	H&W	TBI	PathWays
Participant Assistance and Care	Residential Habilitation & Support (hourly)	Attendant Care	Attendant Care	Attendant Care
Respite	Respite	Skilled Respite	Skilled Respite	Skilled Respite
Workplace Assistance	Workplace Assistance	Home & Community Assistance	Home & Community Assistance	Home & Community Assistance

Service specifications

Services must be delivered according to the service definitions, including any particular requirements for self-direction. A brief description of the services that may be self-directed is provided below.

FSW: Participant Assistance and Care

Participant assistance and care (PAC) services are provided in order to allow participants with developmental disabilities to remain and live successfully in their own homes, function and participate in their communities, and avoid institutionalization. PAC services support and enable the participant in activities of daily living, self-care, and mobility with hands-on assistance, prompting, reminders, support, and monitoring needed to ensure the health and safety of the participant.

CIH: Residential Habilitation & Support (hourly)

Residential habilitation and support (RHS) services means individually tailored supports that are specified in the PCISP that assist with the acquisition, retention, or improvement in skills related to living in the community. These supports include adaptive skill development, assistance with activities of daily living, community inclusion, transportation, adult educational supports, and social

and leisure skill development that support the participant to live successfully in his or her own home.

Self-directed RHS may not be used in instances where shared staffing exists.

FSW/CIH: Respite

Respite Care services means services provided to participants unable to care for themselves that are furnished on a short-term basis because of the absence or need for relief of those persons who normally provide care for the participant.

Respite may include assistance with toileting and feeding, assistance with daily living skills, including assistance with accessing the community and community activities, assistance with grooming and personal hygiene, meal preparation, serving and cleanup, administration of medications, supervision/support.

FSW/CIH: Workplace Assistance

Workplace assistance services provide a range of personal care services and/or supports during paid competitive community employment hours and in a competitive community employment setting to enable waiver participants to accomplish tasks that they would normally do for themselves if they did not have a disability. Assistance may take the form of hands-on assistance (actually performing a personal care task for the participant) or cuing to prompt the participant to perform a personal care task. Workplace assistance services may be provided on an episodic or on a continuous basis.

H&W/TBI/PathWays: Attendant Care

Attendant Care services (ATTC) are provided to participants with nursing facility level of care needs. ATTC provides direct, hands-on care to participants for the functional needs with ADLs. Attendant care may include assistance with personal care, mobility, elimination, nutrition, and safety.

H&W/TBI/PathWays: Skilled Respite

Skilled Respite services are those services that are provided temporarily or periodically in the place of the usual caregiver. Skilled Respite can occur in home and community-based settings. Under this waiver service two forms of skilled respite are allowable:

- Home health aide services (RHHA)
- Skilled nursing services (RSKNU)

H&W/TBI/PathWays: Home and Community Assistance

Home and Community Assistance (HCA) services provide instrumental activities of daily living (IADL) for the participant in their home. The services are provided when the individual is unable to meet their needs or when the informal caregiver/helper is unable to perform these needs for the participant.

Planning for Self-Directed Services

The involvement of the case manager or MCE service coordinator is integral in the person-centered planning process. Through this process, the person-centered service plan, self-directed services budget, and the methods for self-direction implementation are developed.

The waiver case manager or MCE service coordinator will utilize the person-centered planning process in accordance with the appropriate guidance depending on the relevant waiver to develop a person-driven service plan to address the elected choice of services and supports.

When using self-directed services, the person-centered planning process must include documentation in the case notes of discussion with the individual on their need for information, guidance, and support regarding:

- Control of the budget.
- Directly employing staff.
- Requirements and responsibilities of the employer role.
- Opportunities to learn how to direct and supervise support workers.
- Integrated supports that can support the individual.

During the planning process, the number of hours per service will be determined based upon the individual's assessed needs and compliance with all state and federal regulatory requirements, including service specific definitions. The following requirements must be written in the individual's person-centered service plan:

- The services the individual will self-direct
- The representative (if any) chosen by the individual to assist them to self-direct their services.

Upon selection of allowable self-directed services, the case manager or MCE service coordinator will assist the individual to convert the appropriate number of hours per service to the self-directed budget allocation calculation.

A Self-Directed Services Worksheet is available to assist for planning purposes. The worksheet will include staff planning and wages for each self-directed worker within the budget. This worksheet is intended to be an aid in planning and should be a fluid document based upon the staffing needs of the individual. The worksheet should be included in the individual's documentation and case file.

The case manager or MCE service coordinator will account for risk management and mitigation and assist with the development of a written back-up plan for a situation in which a self-directed worker is unavailable. An example back-up plan is found in Appendix B.

The case manager or MCE service coordinator submits the completed person-centered service plan with the required self-direction information and documentation.

Prior to beginning a new self-directed service arrangement, the case manager or MCE service coordinator must ensure the individual receives training provided by the Centers for Medicare & Medicaid Services (CMS). Case managers and MCE service coordinators must document that the training has been provided and that the individual has attested to completing the training. The training series consists of six self-guided modules with each covering a different aspect of direct service worker recruitment, training and retention. The training is available in multiple accessible

formats. The entire series may take approximately 20 minutes to complete. The series can be found on:

https://www.medicaid.gov/medicaid/long-term-services-supports/direct-care-workforce/online-training-for-self-directed-hcbs/index.html

Combining State Plan, Other Waiver Services, and Self-Directed Services

An individual may choose to self-direct some services and receive other waiver services through an agency. However, the individual may not utilize the same service through self-direction and traditional. For instance, the individual may not choose Self-Directed Attendant Care AND traditional Attendant Care. They must choose to self-direct all or none of Attendant Care.

In coordination with self-direction, case managers and MCE service coordinators should consider whether the member would benefit from or be appropriate for State Plan services. If so, case managers or MCE service coordinators will investigate obtaining those hours with an agency.

Self-Directed Budget

The INCharge Self-Directed Service Program will allow budget authority for those services that can be self-directed. Budget authority means that the individual who is self-directing will have a self-directed budget and can determine the wages they will pay their self-directed workers. The wages paid must fall within a range that is established per service based on the traditional agency rate as shown in the table below.

Waiver	Service	Minimum Wage	Maximum Wage
H&W **TBI** **PathWays**	Attendant Care	$15.00	$30.00
	Skilled Respite	$15.00	$32.00
	Skilled Respite LPN	$20.00	$48.00
	Skilled Respite RN	$25.00	$61.00
	Home and Community Assistance	$15.00	$27.00
CIH	ResHab hourly	$15.00	$31.00
FSW	Participant Assistance and Care	$15.00	$30.00
CIH **FSW**	Respite Care	$15.00	$38.00
	Respite LPN	$20.00	$48.00
	Respite RN	$25.00	$61.00
	Workplace Assistance	$15.00	$34.00

The self-directed budget is created through the following steps:

1. The type and amount of services is determined by the person-centered planning process according to the HCBS waiver.
2. The number of hours for each service that is determined appropriate based upon the service definition and assessed need is multiplied by the current reimbursement rate.
3. Ten percent is deducted from this amount for administrative costs associated with self-direction.
4. The remaining amount is the self-directed budget specifically for the service that is being self-directed.

The self-directed budget amount is subject to the overall planning and budget methodologies used on each waiver included in the INCharge Self-Directed Services program.

- CIH – individual ALGO budget
- FSW – annual budget cap
- TBI – service planning protocols
- H&W – service planning protocols
- PathWays – MCE service planning protocols

The example below shows what the self-directed budget would be if an individual on the Family Support Waiver chose to self-direct the Participant Assistance and Care service and Respite service.

Service	**Hours**	**Rate**	**Annual total**	**Deduct 10% admin cost**	**Self-directed budget**
Participant Assistance and Care	10 hours per week	$34.39	$17,883	-$1,877	$16,095
Respite	75 hours per year	$43.38	$3,254	-$325	$2,928

Each self-directed service will have its own budget line. The budget amount for one service cannot be used for another service.

By law, employers need to pay a portion of an employee's Social Security and Medicare taxes, as well as Federal and State unemployment taxes and Workers' Compensation Insurance. These are also called employer-related costs. These costs must be accounted for within the self-directed budget. What this means is that for every $1.00 paid in wages, approximately 12 cents must be added to pay for taxes and Workers' Compensation (calculated by the employee's wage multiplied by 12%). The FMS vendor, Palco, calculates and pays these taxes and Workers' Compensation on behalf of the member.

The document from the FMS that explains employer-related costs can be found in Appendix C.

Planning teams can use the Self-Directed Services Worksheet to assist with calculating the self-directed budget and deciding the rate of pay for self-directed workers.

The number of self-directed service hours planned for within the self-directed budget must be adequate to meet the individual's support needs over the course of the plan year. The individual should plan for and take into consideration unexpected circumstances that may arise which may include the need to pay overtime. When setting a wage for a self-directed worker, the individual may want to consider how to offer pay increases over time.

The FMS is responsible for tracking expenditures and notifying the individual and others (e.g., case manager or MCE service coordinator) that utilization is occurring in line with expected spending. It is important to keep in mind that the self-directed budget amount will need to cover the entire plan year.

Overtime Compensation Restrictions

Service hours that exceed 40 per week for any single self-directed worker must be accommodated within the participant's existing approved self-directed budget. No supplemental funds will be authorized specifically to cover overtime hours. This provision is essential for maintaining budget predictability and ensuring equitable distribution of available funding across all program participants. Individuals and their representatives must plan staff schedules to maximize service coverage while remaining within budgetary constraints.

Self-Directed Workers

Individuals hire the self-directed workers they want to support them. The individual is responsible for providing training and guidance on specific job requirements and how support should be provided.

The individual cannot hire their legal guardian or Legally Responsible Individuals (LRIs) – defined as parents of minor children and spouses – as their self-directed workers.

Other family members who are not Legal Guardians or Legally Responsible Individuals can be hired as self-directed workers.

Requirements for self-directed workers vary by service and by waiver. However, in general, self-directed workers providing participant assistance and care or attendant care must:

- Be at least 18 years of age
- Pass a limited criminal history background check
- Be certified in CPR from the American Heart Association, American Red Cross, or another entity approved by DDARS.

The cost of CPR class or the time it takes to complete will is not accounted for in the self-directed budget. The employer and employee will need to determine how to cover the cost of receiving CPR certification.

Individuals providing Nursing Respite care must be:

- A Registered Nurse licensed in accordance with IC 25-23-1; or
- A Licensed Practical Nurse licensed in accordance with IC 25-23-1.

For those on the FSW or CIH waiver, additional training requirements apply and can be accessed when enrolled with the FMS. The required online training modules are available at no cost, however, employees will not be paid for the time it takes to complete the trainings out of the self-directed budget.

For more information on specific requirements for self-directed workers by waiver and by service see Appendix D.

Financial Management Services (FMS)

Indiana/FSSA currently uses one enrolled organization, Palco, for Financial Management Services. The FMS helps individuals with employer-related responsibilities and financial management service tasks specifically for self-directed services such as:

- Managing and directing the disbursement of funds contained in the self-directed services budget.
- Facilitating the employment of self-directed workers by the individual or representative, by performing as the individual's agent such employer responsibilities as verifying employee qualifications, processing payroll, withholding Federal, State, and local tax, making tax payments to appropriate tax authorities; and
- Performing fiscal accounting and providing expenditure reports to the individual or representative and State authorities.

A person cannot bill the state directly for approved services. An FMS provider is the only entity that can submit claims and receive payments from the state. These payments are used to pay self-directed workers.

Once an individual chooses to self-direct, the case manager or MCE service coordinator must assist the individual to connect with Palco to get started with the training and paperwork required to enroll.

For information from Palco as well as forms and documents please visit https://palcofirst.com/indiana/

Requirements of the FMS to act as agent of the person

FMS providers function as statewide vendor fiscal/employer agent (VF/EA) in accordance with Section 3504 of the Internal Revenue Service (IRS) Code and Revenue Procedure Code 2013-39, as applicable.

To provide fiscal agent services, an FMS provider must:

- Obtain an IRS authorization from the person to act as an agent for them.
- Be able to advise the person about their obligations for workers' compensation.
- Help the person obtain workers' compensation, if needed, and any other required insurance.

FMS Responsibilities

The FMS vendor is responsible for:

- Technical support, ongoing operational needs, and customer support to individuals, authorized representatives when applicable, and employees
- Updating enrollment packets
- Updating employment packets

The FMS must provide information within five (5) business days when requested by the individual or the representative, if applicable. This information may include, but is not limited to, the following:

- Expenditures made to date and remaining authorizations
- Tax withholdings
- Guidance in completing and submitting timesheets on schedule

The FMS is required to provide training sessions to individuals and their representatives. This may include virtual or in-person. The FMS vendor will:

- Provide written information and web access to manuals on the INCharge Self-Directed Services Program to each individual or their authorized representative.
- Inform the individual about the role of the FMS
- Complete essential paperwork to obtain an Employer Identification Number (EIN) for the employer of record.
- Provide names and telephone numbers of contact persons for the individual to call if questions arise.

The FMS also provides employee support. For employees, the FMS will:

- Provide instructions for completion of forms
- Verify employee relationship to the individual
- Verify employee background checks
- Verify employee qualifications for the services they will be providing
- Process employment agreement
- Make sure each employee packet is correct and complete
- Process employee enrollment

FMS Documentation and Reporting Requirements

The FMS vendor must maintain records to ensure a clear audit trail and track all Indiana Medicaid spending, including:

- Timesheets of people paid to provide supports
- Invoices
- Payroll summaries.

FMS providers also must:

- Submit claims that correspond with services, amounts, time frames, etc., approved and authorized by the lead agency in Indiana Medicaid
- Maintain records for a minimum of seven years from the claim date and have them available for audit or review upon request.

Timekeeping and Payment

FMS' web-based time sheet portal allows Employees to submit time electronically. This allows the individual to print a copy for the Employer to sign. Before signing, the individual must review the timesheet for accuracy. The signed timesheet must be returned to the FMS electronically.

Electronic Funds Transfer (EFT)

Employees have the payment option of hard copy checks or direct deposit payments. Employees may elect to receive payment through the Electronic Funds Transfer (EFT) option by completing the Fiscal Intermediary's Direct Deposit Application included in the Employee packet and sending a copy of a voided check or letter from your bank verifying account information. It is required for case managers and MCE service coordinators to assist members and their employees with this process.

The Fiscal Intermediary will review the EFT Application and verify the Employee's bank account information is accurate. Upon verification, the Fiscal Intermediary will process the request and direct deposit payments will commence after one pay cycle. Paychecks are issued every other week.

Service Plan Submission and Review

The case manager or MCE service coordinator will create a draft of a person-centered service plan according to the procedures established for the relevant waiver. The person-centered service plan will include individual goals, preferences, and support needs, and selected self-directed services. The case manager or MCE service coordinator will ensure that a self-directed budget is established through identification of assessed needs, with the identified person-centered goals, and falls within the scope of waiver service allowances.

Prior to submitting the plan for review, the case manager or MCE service coordinator will ensure that the plan includes a back-up plan.

The case manager or MCE service coordinator will ensure the Self-Directed Services Worksheet is completed, and all supporting documentation is in the record.

Self-Directed Service Plan Monitoring

Case managers or MCE service coordinators are responsible for conducting face-to-face monitoring activities every ninety (90) days. The case manager or MCE service coordinator shall evaluate for quality and ask the individual, and their representative, if applicable, to verify whether they are satisfied with the services they are receiving. During these visits, the individual will be asked to verify the following:

- Individual continues to be capable of performing the duties required of an employer.
- Number of hours of care the self-directed worker has delivered is in line with the individual's service plan.
- Timesheet process is running smoothly and all necessary paperwork as requested by the FMS has been completed.
- Individual has hired, trained and is actively supervising the self-directed worker.
- Individual is able to address quality of care and/or performance issues with the self-directed worker.
- Self-directed worker is delivering all services appropriately as stated in the individual's service plan and as described in the individual's job description.
- Note any updates to the written back-up plan for care when self-directed worker is unavailable.
- Back-up self-directed worker is still available to provide care.
- Emergency information is up to date and available to self-directed workers.
- There are no issues of abuse, exploitation or neglect.

Terminations of Self-Directed Service

In all instances of termination of self-directed services, the case manager or MCE service coordinator must ensure there is no gap in services during the transition from self-direction to traditional services. The case manager or MCE service coordinator will provide a copy of the updated person-centered support plan to the member's individualized support team.

The duties of the member's case manager or MCE service coordinator are to:

- Explore other service options and complete a new person-centered service plan.
- Arrange for services with agencies that best meet the members' needs.
- Work with the member to maintain continuous service coverage as outlined and authorized in the member's service plan.
- Work with the member's self-directed worker to assure member support during the transition period.
- Ensure open communication with both the member and the self-directed worker.

Involuntary Termination of Self-Direction

Prior to initiating involuntary termination, the case manager or MCE service coordinator shall engage in a process to identify the source of the issue and explore alternative remedies.

- Facilitate supportive discussions to explore concerns, clarify misunderstandings, and identify supports that may prevent potential termination.
- Explore the option of identifying a representative to assist (if not already identified).
- Document the issue in the case notes and include what steps were taken to remediate the issue.

For those enrolled in BDS Waivers: It is the responsibility of the case manager, if actions to remediate have been unsuccessful, to notify BDS of the request for termination, the reason for the request, and obtain approval for termination of self-directed services. BDS will issue the decision to the requestor who will then notify the individual of the decision, their rights for appeal and updated service plan.

For those enrolled in the PathWays Waiver: It is the responsibility of the MCE service coordinator, if actions to remediate have been unsuccessful, to notify the MCE of the request for termination, the reason for the request, and obtain approval for termination of self-directed services. OMPP reviews routine reporting on involuntary termination of self-direction.

While FSSA supports individuals who elect to direct their services, the following are reasons an individual or member may be involuntarily disenrolled from self-direction:

- Mismanagement of Budget Authority responsibilities (consistent pattern of overspending the monthly allocation leading to premature depletion of funds, misappropriation of funds);
- Mismanagement of Employer Authority responsibilities (as provided in the Employer Agreement from the FMS;
- Health and safety cannot be assured;
- Substantiated fraud;

In cases of involuntary disenrollment, the member is notified of the decision, provided a Notice of Action with the official disenrollment date, and provided information on how to access their appeal options if the member wishes to appeal the decision.

Should the individual or member choose to pursue an appeal and/or State Fair Hearing process to appeal the disenrollment decision, the case manager or MCE service coordinator must ensure the member continues to receive services and supports until there is a reaffirmed disenrollment date, if that is the result.

Individuals and members who are determined appropriate for involuntary termination from self-direction may choose to reengage in self-direction under the following conditions:

- Two years have elapsed since involuntary termination; and.
- Designation of a representative when no representative existed at time of involuntary termination; or
- Designation of a new representative when representative at time of involuntary termination was determined to not be fulfilling duties.

All members who wish to re-engage in self-direction after an involuntary termination must prior to re-engagement:

- Complete the Self-Direction Exploration Tool; and
- Complete the online training for Self-Directed HCBS

Voluntary Termination of Self-Direction

An individual may choose to terminate their participation in self-direction at any time. If the individual voluntarily dis-enrolls from self-direction, the individual has the option to explore alternative long-term services and supports options.

The individual's case manager or MCE service coordinator will initiate a change in the support plan and work with the individual to develop a new person-centered support plan that meets the individual's needs.

The case manager or MCE service coordinator must ensure there is no gap in services during the transition from self-direction to non-self-directed waiver services. The case manager or MCE service coordinator will provide a copy of the updated person-centered support plan to the individual's support team.

When a person chooses to voluntarily withdraw from self-directed services, the remaining dollars allocated in the self-directed budget will be available for the traditional delivery of the same service. An individual may not request additional hours for that specific service within the plan year.

Appeals, Grievances, and Complaints Procedure

All appeals, grievance, and complaint procedures apply according to the waiver program. Refer to current policies and procedures as available in manuals, modules, contracts or other relevant material specific to the HCBS waiver the person is receiving

Appendix A: Self-Direction Exploration Tool Individual/Representative

Self-Direction Exploration Tool – Individual/Representative

The purpose of the Self-Direction Exploration Tool is to provide you and the prospective self-direction representative, if applicable, with the basic requirements of self-direction to support you in making an informed decision on the use of self-directed services.

Section 1 of this tool should be completed by the individual when there is an expressed an interest in participating in self-direction.

Section 2 of this tool should be completed with the prospective representative when:

- The individual is interested in choosing a representative; or
- The individual would like to choose a different representative.

The case manager or MCE service coordinator will explain the purpose of the form to you and answer any questions you may have.

You must answer all the questions by checking the appropriate box or writing in the answers in the space provided.

The individual and prospective representative, if applicable, must complete the consent at the end of each section.

The completed form must be returned to your case manager or MCE service coordinator and will be shared as part of your person-centered plan.

Please complete the following:

Name:	
Medicaid ID #:	
HCBS Waiver Type:	
Service(s) Being Considered for Self-Direction:	
MCE Service Coordinator/Care Manager Name:	
MCE Plan Name (if applicable):	
Date:	

Self-Direction Exploration Tool

SECTION 1 – INDIVIDUAL/MEMBER:

Instructions

The purpose of this tool is to assess your understanding and willingness to direct your services and act as an employer. There are no wrong answers to any of the questions. The questions are designed to help you decide whether self-direction is right for you or if you may want to designate a representative to support you in self-directing your services.

Some questions will require one of the following responses: "yes", "no", or "yes, with assistance".

- "Yes" means you are able and willing to perform the tasks.
- "No" means you are unable or unwilling to perform the tasks.
- "Yes, with assistance" means you will need assistance from someone you trust to complete the task.

Questions

1. How would you describe the perfect self-directed worker for you? What services would they provide for you? When would they ideally provide services?

2. Are you willing to find and hire your own workers?

☐ Yes ☐ No ☐ Yes, with assistance

3. Describe the steps you would take to find and hire your own workers? (e.g., Where would you look? Would you place an ad?)

4. What qualities would you look for when hiring someone to provide a service for you? Why are the qualities you listed important?

5. Are you willing to interview (i.e., ask questions) someone?

☐ Yes ☐ No ☐ Yes, with assistance

6. When you interview someone, you will need to describe tasks that need to be provided by the worker that will support you in your day-to-day activities. What would those tasks be?

7. What questions might you ask in an interview?

8. Are you willing to train your workers?

☐ Yes ☐ No ☐ Yes, with assistance

9. Can you explain what support you need??

☐ Yes ☐ No ☐ Yes, with assistance

10. Can you tell your workers what you like and do not like about their work?

☐ Yes ☐ No ☐ Yes, with assistance

11. What would you do to plan for emergencies when a worker might not be available (e.g., your worker calls in sick)?

12. Can you manage your worker's schedule and make sure they do not work more hours than you can pay them for?

☐ Yes ☐ No ☐ Yes, with assistance

13. Are you willing to complete documentation (e.g., timesheets, federal and state tax forms, and emergency back-up plans) and keep the documents on file for monitoring purposes?

☐ Yes ☐ No ☐ Yes, with assistance

14. If you were not satisfied with the service provided by your worker, how would you resolve the problem?

15. Are you willing to fire a worker?

☐ Yes ☐ No ☐ Yes, with assistance

Individual Conclusion Question

Now that you have answered all the questions, do you want to participate in self-direction?

☐ Yes ☐ No ☐ Yes, with assistance

Consent:

To be completed by the ***individual/member:***

☐ As the member, I have completed Section 1 of this tool with the assistance of my MCE service coordinator/case manager and do not wish to participate in self-direction.

☐ As the member, I have completed Section 1 of this tool with the assistance of my MCE service coordinator/case manager and would like to participate in self-direction, without the assistance of a representative.

☐ As the member, I have completed Section 1 of this tool with the assistance of my MCE service coordinator/case manager and would like to participate in self-direction, with the assistance of a representative.

Individual/Member

Signature: _____ **Date:** ___/___/___

As the ***MCE service coordinator/case manager***, I have assisted the member with completing Section 1 of this tool.

MCE service coordinator/case manager

Signature: _____ **Date:** ___/___/___

SECTION 2 –PROSPECTIVE REPRESENTATIVE:

This section should be completed with the prospective representative when:

- An individual is interested in choosing a representative; or
- An individual would like to choose a different representative.

Prospective Representative Name: _____

Address: _____

Phone: _____

Email: _____

Prospective Self-Direction Representative Instructions
The purpose of this tool is to assess your understanding and willingness to act as a representative for someone self-directing their services. There are no wrong answers to any of the questions. The questions are designed to help you decide if you are able and willing to provide the support necessary as a representative. As a representative, you will be responsible for: • supporting the individual in directing their services; and • supporting the individual in acting as the employer for the individual's workers. Some questions will require one of the following responses: "yes" or "no" • "Yes" means you are able and willing to perform the tasks. • "No" means you are unable or unwilling to perform the tasks.

Prospective Self-Direction Representative Questions
1. Describe how you would include the individual in all aspects of the decision making and processes related to self-directing their services.
2. Are you willing to support the individual in locating and hiring the individual's staff? ☐ Yes ☐ No
3. Describe the steps you would take to support the individual in locating staff (e.g., Where would you help them look? Would you help them place an ad?)

4. How would you support the individual in identifying the qualities to look for when hiring someone to provide services? How would you work with the individual to determine which qualities are important?

5. What qualities would you (as the representative) look for when hiring someone to provide services to the member?

6. Are you willing to interview (i.e., ask questions) someone?

☐ Yes ☐ No

7. How do you engage the individual to determine the activities needed to be performed by staff?

8. How would you describe these tasks or support the individual in communicating these tasks to potential staff during an interview or hiring process?

9. What questions might you ask in an interview with someone?

10. If the individual chooses to conduct the interview but identifies that some support is needed from the self-directed representative, how will you support the individual in identifying questions that are important for the individual to understand about potential staff? How will you support them during the interview?

11. Are you willing to train the individual's workers?

☐ Yes ☐ No

12. If the individual chooses to take the responsibility of training staff with support needed by the self-directed representative in some areas, are you willing to identify with the individual where they need support and how will you support them to train workers?

☐ Yes ☐ No

13. How would you work with the individual to develop an emergency back-up plan for when a worker might not be available (calls in sick)?

14. Are you willing to complete documentation (e.g., timesheets, federal and state tax forms, and emergency back-up plans) and keep the documents on file for monitoring purposes?

☐ Yes ☐ No

15. If the individual chooses to take responsibility (with some support) for completing documentation (e.g., timesheets, federal and state tax forms and emergency back-up plans) and keep the documents on file for monitoring purposes, how will you support them with those needs?

16. If you were not satisfied with the service provided by the individual's worker, how would you resolve the problem?

17. If the individual is not satisfied with the service provided by the worker, how will you support them to resolve the problem?

18. Are you willing to fire a worker?

☐ Yes ☐ No

19. If the individual chooses to take responsibility for firing a worker (with support), how do you support the individual with this action?

Prospective Self-Direction Representative Conclusion Question
Now that you have answered all the questions, are you willing to serve as a representative for the identified individual participating in the self-direction program by FSSA? ☐ Yes ☐ No

Consent:

To be completed by the ***prospective self-direction representative***:

☐ As the prospective self-direction representative, I have completed Section 2 of this tool with the assistance of the member's MCE service coordinator/case manager and would like to participate in self-direction, as the member's representative.

☐ As the prospective self-direction representative, I have completed Section 2 of this tool with the assistance of the member's MCE service coordinator/case manager and do not wish to participate in self-direction, as the member's representative.

Prospective Self-Direction Representative

Signature: _____ **Date:** ___/___/___

As the ***MCE service coordinator/case manager***, I have assisted the prospective self-directed representative with completing Section 2 of this tool.

MCE service coordinator/case manager

Signature: _____ **Date:** ___/___/___

Appendix B: Example Back-up Plan

INCharge Self-Directed Services Back-up Plan

A Back up Plan helps you know what to do in an emergency. It has important information about you and your support needs. It includes what to do if one of your self-directed workers is unable to show up for their scheduled work hours. Keep a copy of this back-up plan in a place where you and those who support you can find it. Review the plan periodically and make sure it is up to date.

Personal Information

Name:_____

Phone number:_____

Address:_____

Legal Guardian/Power of Attorney/Parent of Minor Child (if applicable):_____

Phone number:_____

Address:_____

Self-Directed Representative (if applicable):_____

Phone number:_____

Address:_____

Emergency Contact Information

List two people you trust who can help you in an emergency.

Name:_____

Phone number:_____

Address:_____

Name:_____

Phone number:_____

Address:_____

Case Manager Name:_____

Phone number:_____

INCharge Self-Directed Services Back-up Plan

Emergency Plan

List what you will do in the following emergency situations:

Health emergency:_____

Household emergency:_____

Weather emergency:_____

Self-Directed Workers

List the steps you will take if one of your self-directed workers is unable show up for their scheduled work hours:

1. _____
2. _____
3. _____
4. _____

Support Needs

List any types of adaptive equipment you rely on such as a wheelchair, communication device, etc.

_____
_____
_____
_____

List any instructions for the care, maintenance, or handling of adaptive equipment.

_____
_____
_____
_____

Contact information for who can make repairs to your equipment

Name:_____

Phone number:_____

List any specific communication needs such as sign-language, communication preferences, etc.

_____
_____
_____
_____

INCharge Self-Directed Services Back-up Plan

List any specific instructions for you support needs

_____
_____
_____
_____

Insurance Information

List the name of your insurance companies and identification numbers.

Company:_____

Phone number:_____

ID number:_____

Company:_____

Phone number:_____

ID number:_____

Health Care Providers

List the name of your health care providers.

Primary Physican:_____

Phone number:_____

ID number:_____

Other Provider:_____

Phone number:_____

ID number:_____

Advance Directives

Note any Advance Directives you have for your care:

_____
_____
_____
_____

Appendix C: Employer-Related Costs

Rate Information for Employers

As an employer, the cost of hiring workers does not only include wages. By law, you are also required to pay payroll taxes. The amount you pay for each of these is a percentage of payroll and are as follows:

Social Security & Medicare	7.65%
Federal Unemployment Tax	0.60%
State Unemployment Tax	2.70%
Workers Compensation	1.05%
TOTAL Employer Cost Rate*	**12.00 %**

*Note—These are default rates only. Your rate may vary from the default rates listed above.

This means that for every $1.00 you pay your worker in wages, you must pay an additional 12.00%, or 12 cents, for payroll taxes.

To determine the total cost for your employees, multiple the employee's rate of pay by 1.1200.

	X	1.1200		
Employee Rate		Taxes & Workers' Comp		Cost to You (always round up to next penny)

Palco calculates and pays this amount on your behalf, but it is important for you to understand how this affects your authorized budget. The table below is provided to help you determine your cost to employ someone based on various hourly rate amounts. The "Cost to You" column represents the rate multiplied by the default employer tax rate shown above. You may pay your worker other amounts than those listed in the table.

Hourly Rate	Cost to You	Hourly Rate	Cost to You	Hourly Rate	Cost to You	Hourly Rate	Cost to You	Hourly Rate	Cost to You	Hourly Rate	Cost to You
$7.25	$8.12	$9.25	$10.36	$11.25	$12.60	$13.25	$14.84	$15.25	$17.08	$17.25	$19.32
$7.50	$8.40	$9.50	$10.64	$11.50	$12.88	$13.50	$15.12	$15.50	$17.36	$17.50	$19.60
$7.75	$8.68	$9.75	$10.92	$11.75	$13.16	$13.75	$15.40	$15.75	$17.64	$17.75	$19.88
$8.00	$8.96	$10.00	$11.20	$12.00	$13.44	$14.00	$15.68	$16.00	$17.92	$18.00	$20.16
$8.25	$9.24	$10.25	$11.48	$12.25	$13.72	$14.25	$15.96	$16.25	$18.20	$18.25	$20.44
$8.50	$9.52	$10.50	$11.76	$12.50	$14.00	$14.50	$16.24	$16.50	$18.48	$18.50	$20.72
$8.75	$9.80	$10.75	$12.04	$12.75	$14.28	$14.75	$16.52	$16.75	$18.76	$18.75	$21.00
$9.00	$10.08	$11.00	$12.32	$13.00	$14.56	$15.00	$16.80	$17.00	$19.04	$19.00	$21.28

Appendix D: Requirements for Self-Directed Workers by Waiver

Requirements for self-directed workers vary service and by waiver.

For the FSW and CIH, self-directed workers must:

Comply with Indiana Administrative Code 460 IAC 6, including but not limited to:

- **460 IAC 6-10-5 Documentation of Criminal Histories**
  - (a) A provider shall obtain a limited criminal history from the Indiana central repository for criminal history information from each employee, officer, or agent involved in the management, administration, or provision of services.
  - (b) The limited criminal history shall verify that the employee, officer, or agent has not been convicted of the following:
    (1) A sex crime (IC 35-42-4).
    (2) Exploitation of an endangered adult (IC 35-46-1-12).
    (3) Failure to report:
      (A) battery, neglect, or exploitation of an endangered adult (IC 35-46-1-13); or
      (B) abuse or neglect of a child (IC 31-33-22-1).
    (4) Theft (IC 35-43-4), if the person's conviction for theft occurred less than ten (10) years before the person's employment application date, except as provided in IC 16-27-2-5(a)(5).
    (5) Murder (IC 35-42-1-1).
    (6) Voluntary manslaughter (IC 35-42-1-3).
    (7) Involuntary manslaughter (IC 35-42-1-4).
    (8) Felony battery.
    (9) A felony offense relating to a controlled substance.
  - (c) A provider shall also obtain a criminal history check from each county in which an employee, officer, or agent involved in the management, administration, or provision of services has resided during the three (3) years before the criminal history check is requested from the county.
  - (d) A provider shall have a report from the state nurse aid registry of the Indiana state department of health verifying that each direct care staff has not had a finding entered into the state nurse aide registry.
- **460 IAC 6-14-4 Training**
  - (a) A provider shall train the provider's employees or agents in the protection of an individual's rights, including how to:
    (1) respect the dignity of an individual;
    (2) protect an individual from abuse, neglect, and exploitation;
    (3) implement person centered planning and an individual's ISP; and
    (4) communicate successfully with an individual.
  - (b) A provider that develops training outcomes and objectives for an individual shall train the provider's employees or agents in:
    (1) selecting specific objectives;
    (2) completing task analysis;

(3) appropriate locations for instruction; and
(4) appropriate documentation of an individual's progress on outcomes and objectives.

- (c) A provider shall train direct care staff in providing a healthy and safe environment for an individual, including how to:
  (1) administer medication, monitor side effects, and recognize and prevent dangerous medication interactions;
  (2) administer first aid;
  (3) administer cardiopulmonary resuscitation;
  (4) practice infection control;
  (5) practice universal precautions;
  (6) manage individual-specific treatments and interventions, including management of an individual's:
    (A) seizures;
    (B) behavior;
    (C) medication side effects;
    (D) diet and nutrition;
    (E) swallowing difficulties;
    (F) emotional and physical crises; and
    (G) significant health concerns; and
    (7) conduct and participate in emergency drills and evacuations.
- (d) Applicable training as required in this section shall be completed prior to any person working with an individual.

- **460 IAC 6-14-5 Requirements for Direct Care Staff**
  - All direct care staff working with individuals shall meet the following requirements:
    (1) Be at least eighteen (18) years of age.
    (2) Demonstrate the ability to communicate adequately in order to:
      (A) complete required forms and reports of visits; and
      (B) follow oral or written instructions.
    (3) Demonstrate the ability to provide services according to the individual's ISP.
    (4) Demonstrate willingness to accept supervision.
    (5) Demonstrate an interest in and empathy for individuals.

All participant-directed staff must be registered with DDRS and must complete required competency-based training in accordance with IC 12-11-16

Individuals providing Respite nursing care must be:

- A Registered Nurse licensed in accordance with IC 25-23-1; or
- A Licensed Practical Nurse licensed in accordance with IC 25-23-1.

For the H&W/TBI/Pathways, self-directed workers must:

Comply with Indiana Administrative Code 455 IAC 2, including but not limited to:

- **455 IAC 2-6-3 Provider Qualifications: General requirements for direct care staff**
  - Staff providing direct care for HCBS providers must:
    (1) Be at least eighteen (18) years of age.
    (2) Be competent to provide services according to the individual's plan of care.

(3) Demonstrate the ability to effectively communicate.
(4) Submit a copy of a current negative TB test or negative chest x-ray that is completed annually.
(5) Possess a current, valid state-issued driver's license if the employee will be transporting an individual.
(6) Provide proof of current insurance on the vehicle used to transport an individual that meets current Indiana requirements.

- **455 IAC 2-15-2 Adoption of personnel policies**

Sec. 2. (a) A provider or its agent shall do the following:
(1) Adopt, maintain, and follow a written personnel policy.
(2) Review the personnel policies at least annually and update as needed.
(3) Provide to each employee or agent access to the personnel policy.
(4) Adopt and maintain a job description for each position, including the following:
(A) Minimum qualifications for the position.
(B) Major duties required of the position.
(b) The written personnel policy required by subsection (a) shall include, but is not limited to, the following:
(1) A procedure for conducting reference, employment, and criminal background checks on each prospective employee or agent.
(2) A prohibition against employing or contracting with a person convicted of crimes including, but not limited to, the following:
(A) A sex crime (IC 35-42-4).
(B) Exploitation of an endangered adult (IC 35-46-1-12).
(C) Abuse or neglect of a child (IC 35-42-2-1).
(D) Failure to report battery, neglect, or exploitation of an endangered adult or dependent (IC 35-46-1-13).
(E) Theft (IC 35-43-4), except as provided in IC 16-27-2-5(a)(5).
(F) Murder (IC 35-42-1-1).
(G) Voluntary manslaughter (IC 35-42-1-3).
(H) Involuntary manslaughter (IC 35-42-1-4).
(I) Battery (IC 35-42-2).
(3) A process for evaluating the job performance of each employee or agent at the end of the training period and annually thereafter, including a process for feedback from individuals receiving services from the employee or agent.
(4) Disciplinary procedures.
(5) A description of grounds for disciplinary action against or dismissal of an employee or agent.
(6) A clear description of an employee's rights and responsibilities, including the responsibilities of administrators and supervisors.
(7) A procedure to ensure compliance with HIPAA regulations.

Attendant Care:

Individuals performing lifting services with mechanical assistance must be trained on the general standards for operating a lift and specific instructions on how to safely operate the individual's lift

(at the location where the individual will need those services) in accordance with the manufacturer's instructions and manual. Provider must maintain documentation that individuals performing lifting services have satisfied this training requirement.

Skilled Respite:

Individuals providing the RHHA component of Skilled Respite services must be:

- A Home Health Aide Registered in accordance with IC 16-27-1.5; or
- A Registered Nurse licensed in accordance with IC 25-23-1; or
- A Licensed Practical Nurse licensed in accordance with IC 25-23-1.

Individuals providing the RSKNU component of Skilled Respite services must be:

- A Registered Nurse licensed in accordance with IC 25-23-1; or
- A Licensed Practical Nurse licensed in accordance with IC 25-23-1.