

# **GUIDE TO SELF/FAMILY MANAGEMENT**

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State of Vermont  
Agency of Human Services  
**DEPARTMENT OF DISABILITIES, AGING, AND INDEPENDENT LIVING**  
**Developmental Disabilities Services Division**

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## Guide to Self/Family Management

The most current version of this *Guide to Self/Family Management*<sup>1</sup> (*Guide*) can be found on the Developmental Disabilities Services Division (DDSD) website along with other information and resources for self/family management:

[Self and Family Management | Developmental Disabilities Services Division \(vermont.gov\)](https://www.vermont.gov/developmental-disabilities-services-division)

Paper copies of this *Guide* may be obtained by contacting the Developmental Disabilities Services Division at 1-802-241-0304. There are many links to other online documents in this *Guide*. For individuals or families with no or limited access to online resources, the Supportive ISO (currently Transition II) can provide information in other formats. They can be reached at 1-866-572-7127 or 1-802-846-7156.

### I. Introduction

#### **Purpose and Structure of *Guide***

This *Guide to Self/Family Management* has been developed to help those individuals or family members who are considering self or family managing their services to understand how this service management option works, what their responsibilities would be and what support is available to assist them. This will help people make an informed decision regarding whether this option is a good choice for them. The *Guide* will also help those who are already self/family-managing to understand and follow all the requirements for self/family management.

The *Guide* follows the [Developmental Disabilities Services Regulations](#) section 7.100.6 of Vermont's Health Care Administrative Rules which outlines all the rules related to self/family management in Developmental Disabilities Services. The *Guide* is structured as follows for each rule:

- The exact language for each rule related to self/family management is shown in a blue box.
- Next is an explanation of what that rule means.

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<sup>1</sup> Italics are used when referring to the title of a specific document. Most of these documents are listed in the appendices at the end of this *Guide*.

- A green box includes where to get more information or assistance regarding the rule. This includes links to relevant online resources.

The *Guide* also includes:

- An outline of the role of the Fiscal/Employer Agent (F/EA), currently ARIS Solutions) in supporting self/family management,
- A glossary of terms used in the *Guide*,
- A list of required regulations, policies and guidelines that must be followed, and
- Other helpful resources to support self/family management.

### **About the Self/Family-Management Option**

Once an individual is authorized to receive Developmental Disabilities Home and Community-Based Services (HCBS), the individual (or guardian, if they have one) has a choice of who will provide and manage those services. The Designated Agency who completed the initial intake must fully inform the individual/guardian/family of their options. The options are outlined in the Developmental Disabilities Services (DDS) System of Care Plan and include:

- **Agency-Managed Services** which is when a Designated Agency or Specialized Service Agency (DA/SSA) manages all HCBS services and supports provided to the individual.
- **Shared-Managed Services** which is when a DA/SSA manages some, but not all, of the services and is responsible for the quality oversight of those services, and the individual or family member manages some of the services.
- **Self- or Family-Managed Services** is when an individual or a family member manages all of the individual's HCBS services. The individual or family member is responsible for hiring staff, administrative responsibilities and quality oversight of services associated with receiving HCBS funding.

The self or family-management option offers individuals increased choice, flexibility and responsibility with regard to how their allocated Medicaid funded HCBS are arranged and managed. Individuals and family-members utilizing this option may have increased flexibility in the hiring of workers and in deciding when and how

services and supports occur. There is also increased responsibility related to serving as an employer, the management of employees, managing authorized funding and the individual's service budget, as well as ensuring that service planning and implementation is completed by required timelines and in compliance with state and federal rules, regulations, and guidelines.

People who choose the Self or Family-Management option are supported by an independent statewide Supportive Intermediary Service Organization (Supportive ISO) and a Fiscal/Employer Agent (F/EA). The Supportive ISO offers orientation, support and guidance to the employer within the parameters of the Self or Family-Management option, bills Medicaid, and collaborates with the F/EA. The Supportive ISO also has the responsibility for determining that the individual or family member is capable of fulfilling the responsibilities of self/family management that are outlined in this *Guide*. Those using the Self or Family-Management option are required to use the F/EA to process payroll for workers they hire to provide services and for payment for other non-payroll services purchased.

This *Guide* offers an outline of the responsibilities and expectations of individuals and families choosing and utilizing this option, as well as the roles of others in supporting self/family management. There are a variety of state and federal rules, regulations, policies and guidelines referenced in this *Guide* that must be followed. The Supportive ISO is available to provide training, information, and support regarding the requirements for self/family management.

## II. Self/Family Management Agreement between Individual/Family and Supportive ISO

### 7.100.6 Self/Family Managed Services

#### (a) Self/Family Management Agreement

**Rule 7.100.6(a)** An individual or family member who is allowed to manage services must sign an agreement with a Supportive ISO. The Department will provide an approval form for the agreements. The agreement must set out the responsibilities of the individual or family member and the responsibilities of the Supportive ISO.

#### What does this mean?

Prior to starting self/family management there must be a signed agreement. The agreements must be renewed annually as specified on the Department of Disabilities, Aging and Independent Living's (Department) approval form. The renewal serves as an annual reminder of all the responsibilities for self/family management and provides for an update of any changes. The Supportive ISO reviews the roles and responsibilities with the individual and/or family prior to initiating or renewing the agreement. By signing the form, the individual or family member and the Supportive ISO agree to fulfill the roles and responsibilities that are outlined in the agreement.

#### **Where to get more information or assistance:**

##### [Self or Family Management Agreement](#)

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

### III. Responsibilities of an Individual or Family Member Who Manages Services

#### (b) Responsibilities of an individual or family member who manages services

**Rule 7.100.6(b)** An individual or family member who manages services must be capable of and carry out the following functions:

**Rule 7.100.6(b)(1)** Maintain Medicaid eligibility for the individual receiving services. Immediately notify the Supportive ISO of any circumstances that affect Medicaid eligibility.

#### What does this mean?

It is the responsibility of the individual (or guardian, if there is one appointed) or family member to make sure they apply for and maintain eligibility for Medicaid for the individual. Medicaid is how services are paid for, so it is critical that individuals and families complete all required paperwork to maintain eligibility. Individuals, guardians, and families should be sure to pay attention to letters sent to them from the Department of Vermont Health Access (DVHA) and follow up when requested to ensure that their Medicaid eligibility is maintained.

It is not the Supportive ISO's responsibility to maintain Medicaid eligibility for the individual, however, they will notify the individual, guardian, or family if they are notified by DVHA that the individual has lost their eligibility. The Supportive ISO can provide contact information for DVHA who can provide information regarding the process for Medicaid renewal.

Individuals and families who are self/family managing should be aware that if the individual's Medicaid eligibility ends, they may be responsible for paying for services or workers who provided services when the individual was not Medicaid eligible.

**Where to get more information or assistance:**

Applying for and maintaining Medicaid eligibility: See Long Term Care Medicaid at [Vermont Medicaid Programs | Department of Vermont Health Access](#) 1-800-250-8427

[Accessing Maintaining Medicaid for DD Services.pdf \(vermont.gov\)](#)

Case managers can assist if needed. Contact Supportive ISO for questions about the process:

[Transition II](#) Transition II Toll Free: 1-866-572-7127

S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(2)** Develop an ISA that reflects what services the individual needs and how much money the individual has been provided in their budget to spend for those services. Follow the Department's *ISA Guidelines* to ensure that all required information is included and completed according to specified timelines. The plan must specify what each service is supposed to be and how much each service will cost on an annual basis. The ISA must also identify the individual's service provider(s) and explain how the services received must be documented.

**What does this mean?**

The Individual Support Agreement (ISA), which is the plan for the individual's services, must include all the required information and follow the timelines specified in the *Individual Support Agreement Guidelines*. Some of the requirements include:

- It must be written by, and/or from the perspective of, the individual.
- Others, as chosen by the individual, may be involved in the development of the ISA.
- The individual (and guardian if there is one) must approve the ISA. (See ISA guidelines for alternative methods of approval for individuals who are unable to sign the ISA.)



- A Qualified Developmental Disabilities Professional (QDDP) must also approve, sign and monitor the ISA to ensure its implementation and documentation.
- An ISA must be developed and signed within 30 days of the first day of billable services or authorized start date for Home and Community-Based Services (HCBS).
- A new ISA is required at least every two years but must be reviewed at least annually.
- The ISA must include the type and amount of services that will be provided and the costs for each service.
- The ISA must indicate how progress on each goal will be measured and documented.

In order for services to be paid for, a current, signed ISA must be in place. The Supportive ISO has the authority to suspend payment for services if a current signed ISA is not in place.

The ISA should specify how frequently each goal will be reviewed to determine if progress is being made. These reviews must be documented for each goal. In addition, the entire ISA must be reviewed at least once a year, and prior to the start of a new ISA. Reviewing the ISA more frequently is a good practice, depending on the complexity of the individual's needs. The date that the entire document is reviewed is flexible and should reflect goals of the ISA. For example, if an individual's ISA revolves around obtaining work and the individual expects to be employed at the end of six months, it would be best practice to review the ISA at the end of three or four months to see whether there is progress towards these expectations. When ISAs are only reviewed shortly before the next ISA meeting, you risk losing a whole year on a plan that may not have worked well.

**Where to get more information or assistance:**

[Individual Support Agreement \(ISA\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)

The selected QDDP can assist with ensuring that the ISA content and format follow the *ISA Guidelines*.

The Supportive ISO will work with the individual/family in developing the Authorized Funding Limit (budget) and will confirm that the ISA addresses the areas of funded support in the budget, and any known health and safety concerns. The Supportive ISO provides oversight, assistance and training as needed.

[Transition II](#) Transition II Toll Free: 1-866-572-7127

S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(3)** Ensure that services and supports are provided to the individual in accordance with the ISA and the budget.

**What does this mean?**

- The individual or family member must ensure that the services listed in the Authorized Funding Limit (AFL) (budget) are being provided in the frequency and quantity in the AFL and as specified in the ISA. This includes hiring employees or arranging for other services listed in the ISA and ensuring that they are providing services as described in the ISA.
- The individual or family member must review the spending reports from the Fiscal/Employer Agent (F/EA) to monitor their use of the budget. This review helps the individual and family know if services are being provided as planned and whether the budget is being under or overused.
- If services and supports are not being used according to the ISA and budget, it may mean that ISA and/or budget need to be changed or updated.
- If the needs remain the same, but there are challenges in arranging the services, efforts need to be directed at addressing the challenges so that the individual gets the services that they have been assessed to need.

- If the individual’s needs have changed, you should contact the Supportive ISO for an updated needs assessment to determine any potential changes to the ISA and AFL.

**Where to get more information or assistance:**

ARIS Solutions, the F/EA, provides information regarding what has been used in the budget and what is still available: See “Employer Spending Reports”, in the ARIS Employer Handbook [Getting Started \(arissolutions.org\)](http://arissolutions.org)

[A History of Supporting Others - ARIS Solutions](#) or ARIS 802-280-1911

[Individual Support Agreement \(ISA\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)

Contact your QDDP regarding your ISA. Please see Rule: 7.100.6 (d)

Contact the Supportive ISO regarding allowable uses of the budget. Please see Rule: 7.100.6(e). [Transition II](#) Transition II Toll Free: 1-866-572-7127

S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(4)** Maintain a complete and up-to-date case record that reflects details regarding the delivery of services. Follow the *Guide to Self/Family Management* regarding what needs to be included in the case record. Retain case records in accordance with the record retention schedule adopted by the Department.

**What does this mean?**

You must establish and maintain a complete and up-to-date individual case record and keep documents for a minimum of 10 years. The Supportive ISO can provide technical assistance regarding what is required. The following documents (1-10) must be in the case record. You must provide the following documents to the Supportive ISO unless originated by the Supportive ISO (except #7):

1. Emergency Fact Sheet [EMERGENCY FACT SHEET \(vermont.gov\)](#)
2. Guardianship documentation

3. Initial Assessments/evaluations supporting eligibility
4. Additional evaluations and assessments related to an individual's needs or eligibility
5. Annual needs assessment (original and current)/periodic review
6. ISA and all component parts, including attachments, reviews, and changes [Individual Support Agreement \(ISA\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)
7. Progress notes and measurable data tracking related to ISA goals/outcomes
8. A Person's Story and annual updates [Individual Support Agreement \(ISA\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)
9. Critical Incident Reports [Critical Incident Reporting \(CIR\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)
10. Employee training checklists
11. Periodically provide additional documentation to the Supportive ISO regarding the services an individual is receiving as requested

In addition:

\* The individual/family must provide the necessary information to the Supportive ISO as requested to confirm annual HCBS eligibility.

\* The individual/family must report initial and any change in demographic (e.g., name, address, marital status, etc.) data to the Supportive ISO.

**Where to get more information or assistance:**

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(5)** Follow the rules regarding all services and supports. Those rules are called the Department's *Quality Standards for Services*. They are set forth in 7.100.11(e).

### What does this mean?

The Department's *Quality Standards for Services* are part of the DDS Rules (7.100.11(e)). They are also listed in the Glossary of this *Guide*. The Division's Quality Review Team conducts reviews of the quality of services according to procedures in the *Guidelines for Quality Review Process of Developmental Disabilities Services*. Those *Guidelines* includes the *Quality Service Review Outcomes* used to determine whether services are meeting the quality standards.

The individual or family member who is managing services is also responsible for following all required policies and guidelines, which are located in Appendix A. These policies support meeting the *Quality Standards for Services*.

The Supportive ISO can provide assistance to individuals and families in understanding what is required.

### **Where to get more information or assistance:**

DDS Rule 7.100.11(e) is found in [Developmental Disabilities Services Regulations Guidelines for Quality Review Process of Developmental Disabilities Services: Developmental Services \(vermont.gov\)](#)

[Quality Services Reviews Outcomes.pdf \(vermont.gov\)](#)

See Appendix A for a list of relevant policies and guidelines.

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(6)** Understand the individual's ISA and their budget. Make necessary changes based on the individual's needs. Follow these regulations and the Department's *ISA Guidelines* regarding what to do when there is a change.

## **What does this mean?**

The individual or family who is managing the services must understand what the ISA says and how to carry out the plan using the funds authorized in their budget. The Designated Agency (DA), where the individual (or guardian, if there is one) first applies for services, is responsible for assigning the initial Authorized Funding Limit (AFL) for people who are new to services after receiving approval of the budget from the Division. The AFL identifies the type, amount and cost of each area of support approved to meet the individual's needs.

Once an individual/guardian/family chooses self or family management, the AFL is transferred to the Supportive ISO. If changes are needed within the approved budget, the Supportive ISO will assist the individual/guardian/family in developing a new AFL consistent with the guidance in the SOCP regarding moving funds in individual budgets (See Appendix B in *Vermont State System of Care Plan*). The Supportive ISO provides the AFL to the Fiscal/Employer Agent (F/EA).

The individual/family cannot change the amount of the AFL or the identified funded areas of support. Only the Supportive ISO can. An individual/family can change the distribution of funding across the funded areas of support as identified in the needs assessment and ISA. The individual/family must notify the Supportive ISO of any changes made within the funded areas and the Supportive ISO will make the changes to the AFL and notify the F/EA. These changes must be based on changes in need.

- The individual/guardian/family should notify the Supportive ISO if they have new needs that cannot be met within the current AFL or the funded areas of support. The individual/guardian/family must provide information to the Supportive ISO, who will complete a new needs assessment and submit a request for funding if appropriate. The individual must be involved with the updated needs assessment process, along with other people agreed to by the individual/guardian.
- The Supportive ISO notifies the F/EA of any changes to the AFL.
- The individual/family notifies the QDDP and Supportive ISO of new changes in need and completes an ISA change form with the QDDP and, if necessary, a periodic review of needs with the Supportive ISO.

Changes in services that are no longer needed or cost less must be reported to the Supportive ISO and changed in the individual's budget. The unneeded funds are returned to the appropriate funding committee as specified in Section 5 (page 50) of the *Vermont State System of Care Plan*.

It is the responsibility of the individual (or guardian) to review and change the ISA as required by the *Individual Support Agreement Guidelines*. (See pages 19-22 of ISA Guidelines regarding reviewing and changing the ISA.) Others, as chosen by the individual, may be involved in the review and change of the ISA. The individual (and guardian if there is one) must approve any changes. A QDDP must also review the ISA and approve any changes.

The results of the updated needs assessment may result in a change to the individual's funding (Authorized Funding Limit). The ISA must also be updated if AFL is changed due to this review. The individual (or their authorized representative) has a right to appeal any reduction in services. (See section 7.100.5 (l)(1)(2) & (4) and (n) of the DDS Regulations regarding period reviews.)

**Where to get additional information and assistance:**

[Individual Support Agreement \(ISA\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)

[Vermont State System of Care Plan \(SOCP\) DS Services | Developmental Disabilities Services Division](#)

Contact your QDDP regarding your ISA. Please see Rule: 7.100.6 (d)

[Developmental Disabilities Services Regulations](#)

Contact the Supportive ISO regarding changes to the budget. Please see Rule: 7.100.6 (e). [Transition II](#) Transition II Toll Free: 1-866-572-7127S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(7)** Follow the Department’s *Health and Wellness Guidelines* to take care of the individual’s health and safety.

**What does this mean?**

The ISA must address any known health and safety concerns, as identified in the needs assessment. The individual/family must be responsible for monitoring the individual’s overall health and safety. This includes taking or authorizing action to help keep the individual healthy and safe. The individual/family needs to address health and safety issues in the ISA, as required by the *ISA Guidelines* and the *Health and Wellness Guidelines*, including health documentation.

- The ISA must include the individual’s needs for supervision and any specific restrictions for health and safety.
- There may be a need for a Behavior Support Plan, Special Care Procedures or other support plans as attachments to the ISA.
- The individual/family will need a nurse for any Special Care Procedures and may need a behavior consultant for development and oversight of a behavior support plan.
- The individual/family must review the *Health and Wellness Guidelines* and follow all the requirements specified as applying to those who self/family managing their services.

**Where to get additional information and assistance:**

[Health and Wellness Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)

Contact your QDDP to help ensure ISA addresses health and safety needs.

[Individual Support Agreement \(ISA\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)

**Rule 7.100.6(b)(8)** Follow the rules about reporting critical incidents to the Supportive ISO. Make sure the Critical Incident Reports (CIR) are filed in accordance with the specific timeline required by the Department’s *Critical Incident Reporting Guidelines*



## What does this mean?

A critical incident report (CIR) must be filed when there is:

- Potential Media Involvement
- Missing Person
- Death of the individual
- Suspected abuse, neglect, exploitation or prohibited practices
- Restraint
- Criminal Act/Incarceration
- Medical emergency, including hospitalization
- Suicide attempt
- Actions by paid staff/providers or workers (potential media involvement, criminal acts, Medicaid fraud)
- Other Critical Incidents (fire, theft, or destruction of property; criminal acts; other unusual or significant incidents)

Definitions of these incidents can be found in the *Critical Incident Reporting Guidelines*.

The individual/family who self/family manages must report all critical incidents to the Supportive ISO within the timeframe required by DDSD policy. The individual/family must follow-up on CIRs as required. The QDDP must review the critical incident, make comments and recommendations to identify and deal with possible preventable aspects of the incident with the goal of preventing the incident from reoccurring and sign off on all CIRs.

### **Where to get additional information and assistance:**

[Critical Incident Reporting \(CIR\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)

Contact your QDDP regarding reviewing CIRs. Please see Rule: 7.100.6(b)(8).

Contact the Supportive ISO regarding CIRs. Please see Rule: 7.100.6(b)(8).

[Transition II](#) Transition II Toll Free: 1-866-572-7127

S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(9)** Make a report to DCF any time abuse or neglect of a child is suspected to have occurred or is occurring. Make a report to APS any time abuse, neglect, or exploitation of a vulnerable adult is suspected to have occurred or is occurring. File the reports in accordance with the specific timeframes required by law.

### **What does this mean?**

If the family suspects abuse of the individual has or is occurring, a report to the Department for Children and Families (DCF) or Adult Protective Services (APS) must be filed. Reports of abuse or neglect of children under the age of 18 go to DCF. Reports of abuse, neglect, or exploitation of adults who are 18 years and older go to APS. Families should familiarize themselves with the laws regarding reporting abuse, neglect or exploitation and how to file a report.

Family members of adults over the age of 18 should note that they are required by law to report to APS suspected abuse, neglect, or exploitation of their family member with a disability. Family members have a responsibility to ensure the health and safety of family members and may need to act to protect family members pending an investigation by APS or DCF.

Additional information about definitions of abuse, neglect or exploitation, who is required to report and how to make a report to APS or DCF is available in the green box below.

Those who are self/family managing are required to report suspected abuse, neglect, or exploitation by employees that they have hired. Reporting allows the responsible state authorities to investigate to prevent possible future incidents not only with the family member with a disability, but also other children and vulnerable adults.

In addition, employers must provide or arrange for training of all workers they hire in the abuse reporting requirements as noted in **Rule 7.100.6(b)(13)(D)** below.

**Where to get additional information or assistance:**

[Report Child Abuse in Vermont | Department for Children and Families](#)

1-800-649-5285

[Adult Protective Services | Division of Licensing and Protection \(vermont.gov\)](#)

1-800-564-1612

[Mandatory Reporting | Division of Licensing and Protection \(vermont.gov\)](#)

**Rule 7.100.6(b)(10)** Provide behavior supports to the individual in accordance with the Department's *Behavior Support Guidelines*. Ensure that all strategies used by workers paid to provide supports are consistent with these guidelines.

**What does this mean?**

Sometimes people behave in ways that pose a risk to health and safety, or interfere with growth, development, or achievement of goals. A team may determine that support is needed to assist the individual to change or manage their behavior. When providing support to an individual, all strategies used by workers paid with DDSD funds must be consistent with Division's *Behavior Support Guidelines*. There are certain practices or strategies that are not allowed to be used by workers or written into a plan. Individuals/families should familiarize themselves with the *Behavior Support Guidelines* for guidance on developing behavior support plans and for a list of the practices that are not allowed.

If it is deemed necessary in the ISA, the individual/family must arrange to have a Behavior Support Plan developed and implemented. The QDDP can assist in determining whether a Behavior Support Plan is needed as an attachment to the ISA. If the plan involves the use of restraint as defined in the *Behavior Support Guidelines*, the plan must be developed and monitored by someone with the necessary skills and training. The individual/family may contract with a service provider or behavioral consultant to arrange for the development of these plans.

- Plans with restrictions and/or restraints must be reviewed by the State's Human Rights Committee. Individuals/families must send in the behavior

support plan to the DDSD Human Rights Committee chairperson. The process is described in the *Human Rights Committee Guidelines*.

- Individuals/families must provide training to workers on implementing Behavior Support Plans and on the practices that are not allowable that are described in the *Behavior Support Guidelines*.

**Where to get additional information or assistance:**

[Behavior Support Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)

The QDDP has a role in ensuring that services are delivered in a manner consistent with the *Behavior Support Guidelines*.

Vermont Crisis Intervention Network (VCIN) is a resource for consultation. Contact Supportive ISO for referral.

[Vermont Crisis Intervention Network \(VCIN\) | Developmental Disabilities Services Division](#)

[Human Rights Committee Guidelines - DS Services | Developmental Disabilities Services Division \(vermont.gov\)](#)

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(11)** Prepare written back-up plans for when the plan cannot be followed (e.g., a worker gets sick and/or does not show up for work). Include in the plan who will come and work and what will happen if there is an emergency. It is the individual's or family member's responsibility to find workers or back-up if the plan cannot be followed. It is not the responsibility of a Supportive ISO or an agency to ensure staffing.

**What does this mean?**

There needs to be a written plan regarding what to do when an employee is unable to work. The written plan needs to describe who, where and when needs will be met when an employee is unable to work. The back-up plan needs to include what to do if there is an emergency during the time when the staff is unavailable. Follow-up to any personnel crisis situation is the responsibility of the

individual and/or family. The responsibility for arranging relief workers and emergency back-up coverage is that of the employer and is not the responsibility of the Supportive ISO or DA/ Specialized Service Agencies (SSA)'s Crisis Supports.

**Where to get additional information and assistance:**

The Supportive ISO can provide information regarding how to develop written back up plans.

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(12)** Take part in the Department's quality review process and fiscal audits according to the procedures for these reviews. Make any changes that the Department indicates need to be made after it does a quality review or audit. Participate in Department-sponsored surveys regarding services.

**What does this mean?**

The individual and others providing support must take part in the DDSD's quality review process and make any changes required by that process. During the review, DDSD will meet with the individual, the employer, and possibly other people on the individual's team. They will also talk with anyone involved in overseeing your services, including a guardian if there is one. Individuals or families are required to share any records related to the provision of services requested by the State.

If the Department finds that services are not being provided according to the quality standards and required rules, policies and guidelines, they will require a plan of correction to address the identified issues. The Supportive ISO can provide guidance to individuals/families regarding what needs to be included in a plan of correction. Failure to make the necessary changes may result in a decision to terminate self/family management of services.

The individual/family may also be asked to provide information for fiscal audits. All requested information must be provided.

DDSD may also arrange for surveys, which may include in-person interviews, regarding satisfaction with services. Individuals selected are expected to participate in the surveys.

**Where to get additional information and assistance:**

[Quality Oversight | Developmental Disabilities Services Division \(vermont.gov\)](#)

Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127 S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(13)** Take the following steps when hiring workers:

**Rule 7.100.6(b)(13)(A)** Write a job description. Complete reference checks before allowing the worker to start work;

**What does this mean?**

The employer is responsible for writing the job description for the support workers they hire. Others may assist the employer to write a job description and/or recruit potential support workers. The job description will tell people who are interested in the job what they will be expected to do, the hours they will be expected to work and what experience, skills, or education they need to have to be an employee. The job description should include the duties that will be needed to implement the individual's ISA goals. The Supportive ISO has samples job descriptions available.

During the interview, you should ask for the written names of references from the person and ask for permission to call references. References should be checked before offering a worker a job. When calling references, you should be prepared with questions that will help you determine whether the potential worker will be a good fit for the job.

**Where to get additional information and assistance:**

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127 S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(13)(B)** Interview and hire workers that meet the requirements of the Department's *Background Check Policy* or who receive a variance when there is an issue with the background check;

### **What does this mean?**

The employer's goal in the interview is to learn about the person being interviewed. Show the person the job description. Discuss the rate of pay and work schedule. Be prepared to answer questions they may have about the job description. When the interview is over, tell the person that someone will get back to them. It is best not to hire on the spot, so there is time to really think about the person and check references. Let the applicant know that if they are going to be hired, a background check will need to be completed before they can be paid with DDSD funds to work with the individual.

The employer must request that the Fiscal/Employer Agent (F/EA) conduct background checks for anyone who will be paid with DDSD funds to provide direct supports. The forms necessary to do background checks are available through the F/EA. Workers may not be hired until background checks are completed. If there is an issue identified on the background check, but the employer wishes to hire the applicant, a variance may be requested to the Department to allow that applicant to be hired. The procedures for requesting variances are in the *DAIL Background Check Policy*. For those applicants, they may not be paid with DDSD funds until the variance is granted by DDSD.

When you or your family hire support workers and become the "employer of record" (EOR) the following people may not be hired to support an individual:

- Legal Guardian or spouse/domestic partner/civil union partner of legal guardian
- Individual's parent, stepparent, or adoptive parent
- Domestic partner or civil union partner of the parent
- Spouse, domestic partner, or civil union partner of the individual

Additionally, the worker must be age 18 and have a high school diploma or equivalent. EOR's may request a variance of the age (for those 16 and 17) and

education requirements. The process for requesting these variances is in the *Vermont Variance Procedures for Direct Support Workers Paid with Medicaid Funds through ARIS Solutions*.

**Where to get additional information and assistance:**

[Background Check Policy | Disabilities Aging and Independent Living \(vermont.gov\)](#),

[Getting Started \(arissolutions.org\)](#) ARIS Solutions Employer Handbook

[A History of Supporting Others - ARIS Solutions](#) or ARIS 802-280-1911

[Vermont Variance Procedures](#)

**Rule 7.100.6(b)(13)(C)** Sign up with the state contracted Fiscal/Employer Agent (F/EA). Give the F/EA all requested information to complete the background checks, carry out payroll and tax responsibilities, and report financial and service data to the Supportive ISO;

**What does this mean?**

The Fiscal/Employer Agent (F/EA) is there to help you with the financial part of being an employer. They will provide payroll services for your employees, conduct background checks for your employees, and manage your tax liability as an employer. (See section VII: Role of the F/EA below.) The individual's authorized budget includes funds for paying the employer share of state and federal taxes for employees you hire whose timesheets are paid through the F/EA. The F/EA pays those taxes due at each payroll period. Before you hire anyone, you must have signed up as an Employer of Record with the F/EA. You must send all the required information to the F/EA.

Financial and service data is reported to the F/EA through the submission of accurate timesheets and non-payroll reimbursement requests. You must use service codes provided by the F/EA for the services delivered.



**Where to get additional information and assistance:**

[Getting Started \(arissolutions.org\)](http://arissolutions.org) ARIS Solutions Employer Handbook

[A History of Supporting Others - ARIS Solutions](#) ARIS website or ARIS 802-280-1911

Contact the Supportive ISO for help with signing up with Fiscal/Employer Agent and understanding which codes to use on timesheets and non-payroll reimbursement requests.

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(13)(D)** Train or have someone else train all workers in accordance with these regulations. The rules are in the Department's pre-service and in-service standards in 7.100.10;

**What does this mean?**

The employer must provide or arrange for training for all support workers, including job and individual-specific information. This includes DDS training requirements for pre-service and in-service, such as mandatory abuse reporting and universal precautions. The employer must also train employees on the individual's specific needs. The employer must keep an employee training checklist for each employee on file and provide a copy to the Supportive ISO. This will demonstrate that training has been provided.

According to the DDS regulations, before working alone with an individual who receives support funded by the Division, each worker must demonstrate knowledge or complete pre-service training including all the following:

- ▶ Abuse reporting requirements
- ▶ Health and safety
- ▶ Individual specific information
- ▶ Values

The DDS regulations also require in-service training of a worker after being hired. The employer is responsible for providing or arranging for this training. See 7.100.10(e) of the regulations for the required training. The major topics to be covered include:

- ▶ Worker’s role in developing and implementing the ISA
- ▶ Skills to implement the individual’s ISA
- ▶ The Vermont Developmental Disabilities System and relevant policies and procedures to carry out their duties
- ▶ Basic first aid
- ▶ Blood borne pathogens and universal precautions.

The Supportive ISO must offer the pre-service (except individual specific information which must be done by the employer) and in-service training free of charge to individuals and families. The Fiscal/Employer Agent also has pre-service training available on their website. Individuals/families may provide the training themselves or arrange for it to be provided by others.

**Where to get additional information and assistance:**

[Developmental Disabilities Services Regulations](#)

[Getting Started \(arissolutions.org\)](#) ARIS Solutions Employer Handbook

[A History of Supporting Others - ARIS Solutions](#) ARIS website or ARIS 802-280-1911

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(13)(E)** Supervise and monitor workers to make sure they provide the services and supports they are hired to provide. Confirm the accuracy of workers’ timesheets to verify they reflect the actual hours worked. Sign and send accurate timesheets to the F/EA;

The employer must provide ongoing supervision and monitoring of the workers they hire to ensure that they are providing the services and supports that they were hired to provide. The employer should ensure that the worker is providing

the hours of service they were hired for. They should also check to see that the worker is providing the services as outlined in the ISA and that the worker is following the rules related to how services are supposed to be provided. Workers should be provided with regular feedback about how they are doing and support when they run into challenges in providing services.

The employer has the responsibility to ensure that worker's timesheets are accurate. Employers should keep track of the hours worked by employees so they can verify the accuracy of the timesheets. The employer's signature on the timesheet means that they are verifying that the employee worked those hours, providing the services listed using the correct service codes and that the timesheet is filled out correctly. Workers and employers need to be aware that timesheets are reviewed, and purposeful submission of inaccurate timesheets may be considered Medicaid Fraud by the State.

**Where to get additional information and assistance:**

Information regarding submission of accurate timesheets can be found in the Employer Handbook or by contacting ARIS:

[Getting Started \(arissolutions.org\)](http://arissolutions.org)

[A History of Supporting Others - ARIS Solutions](#) ARIS website or ARIS 802-280-1911

Information about Medicaid Fraud: [Fraud and Abuse | Department of Vermont Health Access](#)

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(13)(F) Suspend or fire workers as necessary; and**

**What does this mean?**

Most performance issues with employees can be avoided by providing training, ongoing monitoring, and supervision. If you are dissatisfied with your employee's job performance, you should explain your concerns and see if there is improvement within a certain time frame. With the employee, develop a plan to address the problem.

However, there are times when, even after efforts to correct issues, the employer may decide that the employee needs to be fired. The employer is responsible to suspend or terminate (fire) support workers. There are situations in which you should consider terminating an employee immediately. For example, if the employer has been informed that their employee has been substantiated for abuse or neglect then they would have to terminate that employee immediately.

If the employee is not going to work for you anymore, you also need to indicate if they quit, were fired, or laid off on the employee timesheet. This is important because it could affect Unemployment Insurance benefits. Be sure you include your employee's last day of work if they are not going to be working for you anymore.

**Where to get additional information and assistance:**

Contact the Fiscal/Employer Agent:

[A History of Supporting Others - ARIS Solutions](#) ARIS website or ARIS 802-280-1911

[Getting Started \(arissolutions.org\)](#) ARIS Solutions Employer Handbook

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(13)(G)** Follow all Department of Labor rules required of employers, including paying overtime as required.

**What does this mean?**

It is considered good practice to have a written agreement between you as the employer and your employee. An agreement outlines the roles that you and your employee will each take. Having things in writing can help if there is a disagreement later. An agreement could include things such as:

- Days and hours to be worked
- Pay rate and schedule (Workers must be paid overtime over 40 hours a week unless they are Exempt – see Home Care Rule in box below. Workers must also be paid at least the minimum wage required by the Collective

Bargaining Agreement for Independent Support Workers. These are included in the *DDSD Medicaid Claim Codes & Reimbursement Rates*)

- Job description and duties
- Time off – how much and how to ask for it
- Behavior that you will or won't accept such as smoking

The Department of Labor website has lots of good information about the requirements of being an employer. The Fiscal/Employer Agent Employer Handbook is also a good resource. The Supportive ISO may also be able to direct employers to resources to support them in following the rules of being an employer.

**Where to get additional information and assistance:**

[Home Page | Department of Labor \(vermont.gov\)](#) (802) 828-4000

[Employer Responsibilities | Workplaces For All \(vermont.gov\)](#)

[Minimum Wage and Overtime Pay for Direct Care Workers | U.S. Department of Labor \(dol.gov\)](#)

[DDSD Medicaid Claim Codes & Reimbursement Rates | Developmental Disabilities Services Division \(vermont.gov\)](#)

[DOL Home Care Rule FLSA DS.pdf \(vermont.gov\)](#)

[Getting Started \(arissolutions.org\)](#) ARIS Solutions Employer Handbook

Contact the Fiscal/Employer Agent:

[A History of Supporting Others – ARIS Solutions](#) ARIS website or ARIS 802-280-1911

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(14)** Manage services in accordance with the Department’s *Guide to Self/Family Management*.

**What does this mean?**

This means that in order to self/family manage services, in addition to following the requirements outlined in the *Rules* for Developmental Services, you must also follow all the guidance outlined in this *Guide*.

**Where to get additional information and assistance:**

[Developmental Disabilities Services Regulations](#)

[Self and Family Management | Developmental Disabilities Services Division \(vermont.gov\)](#)

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(b)(15)** Only submit requests for payment of non-payroll goods and services that are allowed by these regulations, the *System of Care Plan* or current *Medicaid Manual for Developmental Disabilities Services*. Seek guidance from the Supportive ISO for assistance in determining what expenses are reimbursable. Ensure that requests for payment of non-payroll goods and services are accurate and consistent with goods and services received.

**What does this mean?**

Funds cannot be sent directly from Medicaid to the individual, or the individual’s spouse, domestic partner, parent, adoptive parent, stepparent, or legal guardian. Authorized funding for the individual goes from the Supportive ISO to a Fiscal/Employer Agent to reimburse for allowable goods and services received by the individual. The employer of record can request payment for some goods and services through a non-payroll reimbursement request form. It is the responsibility of the employer of record to ensure that the requests for reimbursement forms are accurate and only for allowable expenses. Contact the Supportive ISO for information regarding what are allowable expenses.

**Where to get additional information and assistance:**

[Developmental Disabilities Services Regulations](#)

[Vermont State System of Care Plan \(SOCP\) DS Services | Developmental Disabilities Services Division](#)

[Medicaid Manual For Developmental Disabilities Services | Developmental Disabilities Services Division \(vermont.gov\)](#)

[A History of Supporting Others – ARIS Solutions](#) ARIS website or ARIS 802-280-1911

[Getting Started \(arissolutions.org\)](#) ARIS Solutions Employer Handbook

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

## IV. Role of the Designated Agency

### 7.100.6(c) Role of the Designated Agency

**Rule 7.100.6(c)** For existing recipients who are self/family managing who have a new need as determined by a new needs assessment and need an increase in services and funding, the Supportive ISO develops and submits proposals to the Supportive ISO funding committee and then to the appropriate statewide funding committee. For complex situations, the Supportive ISO may consult with an independent evaluator, the Division, or the local DA to determine strategies regarding how an individual's needs may best be met. This may include a collaborative effort between the Supportive ISO and DA regarding assessments and funding proposals as needed.

#### What does this mean?

Initial intake and assessment are done at the Designated Agency (DA) when an individual (or their guardian) first applies for services. The DA is responsible for doing the initial needs assessment at intake to determine if the individual is eligible for funding. When DDS authorizes funding for new applicants for Home and Community-Based Services, the DA is responsible for assigning the initial Authorized Funding Limit.

Once an individual is enrolled in self or family management, if there are new needs, the Supportive ISO is responsible for conducting a new needs assessment and submitting proposals to the Supportive ISO funding committee and then to the State for funding.

In some complex situations, where there are challenges with determining how to best meet an individual's needs, the Supportive ISO may arrange for an independent consultation, or consult with the Division or local DA for assistance.

#### Where to get additional information and assistance:

The Supportive ISO can provide information related to the assessment and funding process:

[Transition II](#) Transition II Toll Free: 1-866-572-7127

S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)



## V. Role of the Qualified Developmental Disability Professional (QDDP)

### 7.100.6(d) Role of Qualified Developmental Disability Professional (QDDP)

**Rule 7.100.6(d)(1)** An individual or family member who manages services must choose someone to be his or her independent QDDP or must ask the Supportive ISO to find a QDDP for him or her.

#### What does this mean?

The individual/family must arrange for a QDDP to be part of the team when self/family-managing. They may hire someone privately or buy this service from the Supportive ISO. The Supportive ISO has a list of endorsed, independent QDDPs in Vermont.

#### Where to get additional information and assistance:

[Qualified Developmental Disabilities Professional Protocol](#)

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127

S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(d)(2)** All QDDP's must meet the criteria specified in the *Vermont Qualified Developmental Disabilities Professional Protocol*. For QDDPs employed by an agency, the agency is responsible for ensuring that the QDDP meets those criteria. QDDPs not employed by an agency, including those working for the Supportive ISO, must be endorsed by the Department as an independent QDDP, before being paid as a QDDP.

#### What does this mean?

The individual/family must hire a person who meets the State's qualifications to be a QDDP. The Supportive ISO can direct people to the list of independent QDDPs or offer to provide QDDP services to the individual/family. The Supportive ISO QDDPs and other independent QDDPs must be endorsed by the Department before they can be paid to provide QDDP services.

**Where to get additional information and assistance:**

[Qualified Developmental Disability Professional \(QDDP\) | Developmental Disabilities Services Division \(vermont.gov\)](#)

[Qualified Developmental Disabilities Professional Protocol](#)

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(d)(3)** The QDDP must:

**Rule 7.100.6(d)(3)(A)** Approve the individual's ISA and ensure that it is signed by the individual and guardian, if there is one;

**What does this mean?**

A QDDP must approve the ISA. Their approval indicates that the plan follows the ISA guidelines and is consistent with the individual's needs. They must also ensure that the ISA is physically signed, or documented that it is electronically signed, by the individual and guardian, if there is one. The *ISA Guidelines* provide guidance regarding how to document an individual's approval when the individual is unable to physically sign the ISA.

**Where to get additional information and assistance:** [Individual Support Agreement \(ISA\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)

**Rule 7.100.6(d)(3)(B)** Confirm that the ISA is being carried out the way it is supposed to be and that it meets the needs of the individual;

**What does this mean?**

The QDDP must provide ongoing monitoring of the implementation of the ISA to ensure that it is being carried out as described in the ISA and that it is meeting the needs of the individual. This would include reviewing whether the individual was receiving the services specified in the ISA and at the frequency specified. It would

also include a review of whether the specified strategies are being followed and are effective in achieving the individual's goals. If the ISA is not being carried out as it is supposed to be or it is not meeting the individual's needs, the QDDP should work with the team to determine if changes to the ISA are needed.

Documentation of the monitoring must be at least as the frequency specified in the ISA.

**Where to get additional information and assistance:**

[Individual Support Agreement \(ISA\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)

**Rule 7.100.6(d)(3)(C)** Confirm that services and supports are delivered the way the Department and Medicaid regulations and guidelines require;

**What does this mean?**

The QDDP must ensure that the way services are delivered is consistent with all Department and Medicaid regulations and guidelines. The QDDP must be familiar with the guidelines listed in Appendix A. The QDDP has a responsibility to provide guidance to the team as the ISA is being developed and while monitoring the delivery of services to ensure consistency with the rules.

**Where to get additional information and assistance:**

See Appendix A for list of regulations and guidelines.

The Supportive ISO can provide assistance in understanding regulations and guidelines.

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(d)(3)(D)** Contribute to the periodic review of the individual's needs conducted by the Supportive ISO;

## What does this mean?

The needs of each individual currently receiving services must be re-assessed annually by the Supportive ISO. This is known as the annual periodic review. This assessment is done to ensure that the individual is receiving the right amount of service based on their needs. The QDDP on the team, the individual receiving services and the employer of record must participate in the re-assessment. When the individual has a QDDP from the Supportive ISO, generally the Supportive ISO QDDP will conduct and participate in the periodic review. When there is a separate QDDP hired by the individual or family, the Supportive ISO QDDP will conduct the review and the QDDP hired by the individual or family will participate in the review. As a member of the individual's team who is monitoring service delivery, the individual's QDDP will share information regarding the individual's needs.

### Where to get additional information and assistance:

[Developmental Disabilities Services Regulations](#) – Section 7.100.5(l) for periodic review requirements.

**Rule 7.100.6(d)(3)(E)** Confirm the ISA is updated to show the changes in the individual's needs and goals;

## What does this mean?

The ISA may need to be updated if changes are identified during ongoing monitoring or as a result of a periodic review. The QDDP must confirm that the ISA is updated when there are changes in assessed needs or goals. If there are changes to the Authorized Funding Limit, which are authorized by the Supportive ISO, the QDDP must confirm that the ISA reflects the updated AFL.

### Where to get additional information and assistance:

[Individual Support Agreement \(ISA\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)

**Rule 7.100.6(d)(3)(F) Approve any changes to the ISA; and**

**What does this mean?**

The QDDP must review all proposed changes to the ISA and approve the changes via their signature (physically or documented that it is electronically signed).

**Where to get additional information and assistance:**

[Individual Support Agreement \(ISA\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)

**Rule 7.100.6(d)(3)(G) Inform the individual about his or her rights as outlined in the Developmental Disabilities Act of 1996 and the rights outlined in the federal CMS HCBS rules; and**

**What does this mean?**

The QDDP must annually inform the individual (and their guardian, if they have one) receiving services of their rights that are guaranteed by the Developmental Disabilities Act and the rights outlined in the federal CMS HCBS rules.

**Where to get additional information and assistance:**

[Rights of Recipients in DD Act](#)

Information about the CMS HCBS rules can be found at: [Home and Community Based Services \(HCBS\) Final/Settings Rule | Developmental Disabilities Services Division \(vermont.gov\)](#)

(Coming soon – a document outlining the individual’s rights under the HCBS rules and a Plain Language Guide to Grievances and Appeals.)

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(d)(3)(H)** Review and sign off on all critical incident reports according to the *Critical Incident Reporting Guidelines*.

**What does this mean?**

A QDDP must review and sign all Critical Incident Reports (CIR)s. The QDDP must review the critical incident, make comments and recommendations to identify and deal with possible preventable aspects of the incident with the goal of preventing the incident from reoccurring. All CIRS must be submitted according to the timelines in the CIR guidelines for those self/family managing.

**Where to get additional information and assistance:** [Critical Incident Reporting \(CIR\) Guidelines](#) | [Developmental Disabilities Services Division \(vermont.gov\)](#)

## VI. Role of the Supportive ISO

### 7.100.6(e) Responsibilities of a Supportive ISO when an individual or family member manages services

When an individual or family member manages services, the Supportive ISO must:

**Rule 7.100.6(e)(1)** Provide support and assistance to the individual or family member to ensure he or she understands the responsibilities of managed services including following all policies and guidelines for the Division. Explain managed services and the individual's or family member's employer role and responsibilities;

#### What does this mean?

When an individual or family is interested in self or family managing their services, the Supportive ISO must explain how self/family management of services works, the responsibilities of the individual or family for self/family management, including all the policies and guidelines that must be followed. They must explain the individual or family roles and responsibilities as an employer of record. If after receiving this information, the individual or family decides to enroll in self/family management, the Supportive ISO will provide ongoing support and education to help the individual or family to understand their responsibilities.

#### Where to get additional information and assistance:

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

See Appendix A for Policies and Guidelines

**Rule 7.100.6(e)(2)** Conduct periodic reviews with contributions from the QDDP, make adjustments to budgets as needed and notify the individual of his or her rights under these regulations;

## What does this mean?

The needs of each individual currently receiving services must be re-assessed annually by the Supportive ISO. This is known as the annual periodic review. This assessment is done to ensure that the individual is receiving the right amount of service based on their needs. The QDDP on the team, the individual and the person managing services must participate in this assessment. The budget assigned to the individual could be increased or decreased based upon the results of the assessment. The Supportive ISO is responsible for making any adjustments to the budget and notifying the individual and guardian of any changes. They must also notify the individual and guardian of their individual rights. These rights include the Rights of Recipients in the DD Act, the right to file grievances and appeal funding decisions according to regulations and the rights outlined in the federal CMS HCBS rules.

The Supportive ISO will also facilitate assessments of need arranged by the State.

### Where to get additional information and assistance:

[Developmental Disabilities Services Regulations](#) – Section 7.100.5(l) for periodic review requirements.

### [Rights of Recipients in DD Act](#)

Information about the CMS HCBS rules can be found at: [Home and Community Based Services \(HCBS\) Final/Settings Rule | Developmental Disabilities Services Division \(vermont.gov\)](#)

(Coming soon – a document outlining the individual’s rights under the HCBS rules and a Plain Language Guide to Grievances and Appeals.)

**Rule: 7.100.6(e)(3)** Confirm the individual’s Medicaid eligibility on an annual basis;

## What does this mean?

The Supportive ISO confirms continued Medicaid eligibility at least annually. The individual or family is responsible for maintaining Medicaid eligibility. However, if the Supportive ISO discovers that an individual’s Medicaid eligibility has lapsed,



they will notify the individual or family of the individual or family's responsibility to follow up and correct the issue. They will inform them that billing for services cannot continue until Medicaid eligibility is re-established.

In addition, a full reassessment of clinical eligibility for Medicaid Home and Community-Based Services (HCBS) is arranged by the Supportive ISO when an individual enters first grade, transitions from high school, or if the individual is no longer believed to have a developmental disability. The individual must participate in the reassessment process.

The Supportive ISO must do the annual verification of continued HCBS eligibility. The Supportive ISO employee who does this must be a QDDP. DDS/DAIL must confirm the annual HCBS eligibility.

**Where to get additional information and assistance:**

Applying for and maintaining Medicaid eligibility: [Vermont Medicaid Programs | Department of Vermont Health Access](#) 1-800-250-8427

[Accessing Maintaining Medicaid for DD Services.pdf \(vermont.gov\)](#)

See [Developmental Disabilities Services Regulations](#) Section 7.100.5(m-o) regarding full reassessment of clinical eligibility.

**Rule 7.100.6(e)(4)** Help the individual or family member to develop an Authorized Funding Limit (AFL), provide guidance in self-managing the AFL, ensure the AFL is not managed by a third party, as well as provide assistance in determining whether a service is reimbursable under Department rules. Provide the F/EA with the individual's AFL;

**What does this mean?**

When an individual is first approved for Home and Community-Based Services through the Designated Agency, an Authorized Funding Limit (AFL) is assigned. The AFL describes the type, amount and cost of the services that have been approved for the individual. When an individual (or their guardian, if they have one) chooses to transfer from the DA to self/family management, the AFL is transferred to the Supportive ISO. At that point, the Supportive ISO works with

the individual to make any adjustments to the AFL. They must follow the rules outlined in the Vermont System of Care Plan for Developmental Disabilities Services (see Section Five and Appendix B) for moving funds around within the approved budget. The AFL may not exceed the approved budget. Once the AFL is determined, the Supportive ISO provides the AFL to the Fiscal/Employer Agent (F/EA).

Only the Supportive ISO can change the amount of the AFL or the identified funded areas of support. The individual/family must notify the Supportive ISO of any desired changes within the funded areas of support. The Supportive ISO will work with the individual/family to identify the changes in need, adjust the AFL accordingly and determine if changes need to be made in the ISA. The Supportive ISO will modify the AFL and notify the F/EA. The Supportive ISO provides guidance to the individual or family in managing the AFL, including monitoring under and over utilization of funds. The Supportive ISO will also ensure that the funding is managed by the individual or family and not by a third party. This means the individual or family must be the employer of record, not another person or organization.

The Supportive ISO will provide guidance to the individual or family regarding what goods or services can be paid for with HCBS funding. It is not the responsibility of the Supportive ISO approve every request for payment for goods or services, however, they have the right to deny payment for goods or services that are not consistent with State or Federal rules or guidelines. Allowable goods and services are described in the *DDSD Service Definitions*. The management of funds is described in the *State System of Care Plan. The Medicaid Manual for Developmental Disabilities Services* and the *DDSD Encounter Data Submission Guidance* provide additional guidance regarding allowable uses of funds.

**Where to get additional information and assistance:**

[Funding For Home and Community-Based Services | Developmental Disabilities Services Division \(vermont.gov\)](#)

[Vermont State System of Care Plan](#)

[DDSD Service Definitions.pdf \(vermont.gov\)](#)

See Rules for definition of AFL: [Developmental Disabilities Services Regulations dds-medicaid-procedures.pdf \(vermont.gov\)](#)

[DDSD Encounter Data submission guidance \(vermont.gov\)](#)

**Rule 7.100.6(e)(5)** Bill Medicaid according to the procedures outlined in the provider agreement between the Supportive ISO and the Department;

**What does this mean?**

Medicaid claims should be submitted according to the standard procedures for claims submissions. The claims must be consistent with the rules noted in the Supportive ISO Provider Standards.

**Where to get additional information and assistance:**

See *Provider Standards for Supportive Intermediary Services Organization for Self/Family-Management of Developmental Disabilities Services* [Supportive ISO Provider Standards](#)

**Rule 7.100.6(e)(6)** Review requests for more money and seek funding according to the process outlined in 7.100.5 of these regulations and the System of Care Plan. Requests for short term increases in funding will be addressed internally by the Supportive ISO. Requests for long term increases will be sent to the appropriate statewide funding committee;

## What does this mean?

An individual or family may request additional services when they believe that the current approved budget does not meet the individual's needs. The Supportive ISO would then complete a new needs assessment to determine if there is a new need. If a new need is identified through a needs assessment, either upon request of the individual or family or through periodic review by the Supportive ISO, the Supportive ISO may seek additional funding. The Supportive ISO will work with the individual or family to explore or determine if the need can be met within the current funded allocation. If additional funds are needed for a short-term or long-term need then the request will be submitted to the Supportive ISO's local funding committee. If the request is to address a long-term need, the request may be submitted to the appropriate state funding committee. The process for submitting requests is outlined in the *Regulations and System of Care Plan*.

### Where to get additional information and assistance:

[Developmental Disabilities Services Regulations](#)

[Vermont State System of Care Plan](#)

**Rule 7.100.6(e)(7)** Confirm that the individual has a current Individual Support Agreement (ISA) that reflects the areas of support funded in the budget and identifies and addresses any known health and safety concerns; Notify the individual/family that funding may need to be suspended if there is not a current signed ISA, according to the timelines outlined in the ISA guidelines;

## What does this mean?

The Supportive ISO must verify that the individual has a current ISA and that it matches up with the funded areas of support. The Supportive ISO will provide guidance in following the ISA guidelines and required timelines. The Supportive ISO may suspend services if there is no signed ISA. The Supportive ISO must send notification and appeal rights to the individual or family that services will be suspended.

The Supportive ISO confirms that ISA identifies and addresses any known health and safety concerns.

**Where to get additional information and assistance:**

[Individual Support Agreement \(ISA\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)W](#)

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(e)(8)** Provide QDDP services when requested. QDDP services are a separately purchased service;

**What does this mean?**

The individual or family must arrange for QDDP services when self- or family-managing services. This may be done by contracting with the Supportive ISO for QDDP services or by hiring a DDS endorser independent QDDP separate from the Supportive ISO. The individual or family must pay an annual fee to the Supportive ISO when they request QDDP services from the Supportive ISO. The Supportive ISO provides a list of endorsed independent QDDPs working outside the Supportive ISO to the individual/family and verifies that QDDP chosen is on the endorsement list.

The QDDP must complete all the tasks identified above in **Rule: 7.100.6(d)(3)**.

**Where to get additional information and assistance:**

[Qualified Developmental Disability Professional \(QDDP\) | Developmental Disabilities Services Division \(vermont.gov\)](#)

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(e)(9)** Maintain a minimum case record in accordance with the requirements outlined in the *Guide to Self/Family Management*. Make sure that the individual or family member responsible for managing services understands that the individual must have a complete case record in accordance with the requirements outlined in the *Guide to Self/Family Management*. Retain case records in accordance with the record retention schedule adopted by the Department;

### **What does this mean?**

The Supportive ISO will keep a minimum case record that includes the documents listed in **Rule: 7.100.6(b)(4)** above (#1-10, except 7). They will assist individuals and families by providing technical assistance and reminders regarding the requirements for establishing and maintaining a case record. The Supportive ISO will request copies of documents from individuals and families to maintain an up-to-date case record.

The Supportive ISO must collect initial and any change in demographic data for individuals who are self or family-managing and report it to DDS via the monthly HCBS spreadsheets. The Supportive ISO must also report this information to the F/EA as required.

The Supportive ISO must retain individual case records according to the records retention schedule adopted by the Department, currently ten years.

### **Where to get additional information and assistance:**

Federal rules related to ten-year record retention:

42 CFR 438.3(h): Inspection and audit of records and access to facilities.

42 CFR 438.3(u): Recordkeeping requirements.

**Rule 7.100.6(e)(10)** Review and appropriately manage all reported critical incidents. If applicable, report the critical incidents to the Department in accordance with requirements in the *Critical Incident Reporting Guidelines*;

## What does this mean?

The individual/family must submit all completed Critical Incident Reports (CIRs) to the Supportive ISO within the timeframe required by DDS *Critical Incident Reporting Guidelines* and the Supportive ISO will review and send all CIRs to DDS, according to the required timeframes once they have notified.

### Where to get additional information and assistance:

[Critical Incident Reporting \(CIR\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(e)(11)** Provide information about the Division's crisis network to the individual or family member responsible for managing services;

## What does this mean?

The Supportive ISO is responsible for informing the individual/family about the availability of the Statewide crisis network services. The Supportive ISO is responsible for working with DDS staff regarding requests to access all services of the Vermont Crisis Intervention Network, including training, consultation and crisis beds.

The Supportive ISO should also inform individuals/families of other crisis services available in the individual's local community as listed on the Division website.

### Where to get additional information and assistance:

[Vermont Crisis Intervention Network \(VCIN\) | Developmental Disabilities Services Division](#)

[Crisis Supports | Developmental Disabilities Services Division \(vermont.gov\)](#)

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6 (e)(12)** Determine that the individual or family member who is managing the services is capable of carrying out the duties by conducting an initial assessment and providing ongoing monitoring;

**What does this mean?**

The Supportive ISO will conduct an initial assessment to determine if the individual or family member is capable of carrying out the duties of self/family management. Once an individual is enrolled in self/family management, the Supportive ISO will provide ongoing monitoring of the individual or family member to determine if the individual or family member is meeting the responsibilities for self/family management. They will offer training and support to carry out the required duties.

The Supportive ISO will follow the guidance outlined in 7.100.6(f) if they determine that the individual or family is not capable of self/family managing.

**Where to get additional information and assistance:**

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127  
S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

**Rule 7.100.6(e)(13)** Provide required pre-service and in-service training to the individual’s support workers if the individual or family member does not provide that training. The training requirements are located in 7.100.10 of these regulations; and

**What does this mean?**

The Supportive ISO must follow the training requirements specified in Rule 7.100.10(c-f). The Supportive ISO explains training requirements for workers to the employer of record. The employer of record may provide or arrange for provision of the training themselves or request that the Supportive ISO provide the training. The Supportive ISO must make DDSD-required training (i.e., pre-service & in-service) available to support workers at no fee. It is the responsibility of the individual and/or family to provide training specific to the needs of the individual.



The Supportive ISO educates the individual/family member regarding worker/provider qualifications as outlined in the *Medicaid Manual for Developmental Disabilities Services*.

The Supportive ISO maintains a system for verifying and documenting that training has been provided as required.

**Where to get additional information and assistance:**

[\*Developmental Disabilities Services Regulations\*](#)

[dds-medicaid-procedures.pdf \(vermont.gov\)](#)

**Rule 7.100.6(e)(14)** Form and consult with an advisory committee.

**What does this mean?**

The Supportive ISO will have an advisory committee to guide them in their practices and implementation of their role as a Supportive ISO. The Advisory Committee make up shall be consistent with the Supportive ISO provider standards. The Advisory Committee must include individuals/family members who are self/family managing their services. The Supportive ISO will notify people when there are openings on the advisory committee.

**Where to get additional information and assistance:**

See *Provider Standards for Supportive Intermediary Services Organization for Self/Family-Management of Developmental Disabilities Services* [Supportive ISO Provider Standards](#)

Contact the Supportive ISO: [Transition II](#) Transition II Toll Free: 1-866-572-7127S&F Mgmt. Coordinator: 1-802-846-7156 [info@transitionii.com](mailto:info@transitionii.com)

### **7.100.6 (f) Determination that the individual or family member is unable to manage services**

**Rule 7.100.6(f)(1)** The Supportive ISO may deny a request to self- or family-manage, or may terminate the management agreement, if it decides that the individual or family member is not capable of carrying out the functions listed in 7.100.6(b). If the individual's or family member's request is denied, or a management agreement is terminated, then the individual's services must be provided by the individual's DA or from a SSA willing to provide services. Unless it is an emergency, the Supportive ISO has to inform the individual or family member at least thirty (30) days before terminating the agreement.

#### **What does this mean?**

Prior to starting self or family management of services, the Supportive ISO will assess whether the individual or family member is capable of carrying out the responsibilities of self/family management. They will also monitor those who are self/family managing to ensure that individuals/family members are continuing to meet those responsibilities. If the Supportive ISO determines that the individual or family member is not capable of meeting their responsibilities, they may deny enrollment in self/family management or terminate a self/family management agreement with 30 days' notice. Additional details regarding the process are listed below in 7.100.6(f)(2-3).

**Rule 7.100.6(f)(2)** The Supportive ISO may decide that the individual or family member is not capable of carrying out the functions listed in 7.100.6 (b) for reasons which include the following:

(A) The managed services put the individual's health or safety at risk (the agreement can be terminated immediately if the individual is in imminent danger);

(B) The individual or family member is not able to consistently arrange or provide the necessary services;

(C) The individual or family member refuses to participate in the Division's quality assurance reviews; or

(D) Even after receiving training and support, the individual or family member is not substantially or consistently performing his or her responsibilities for self/family-management as outlined in Section 7.100.6 (b). This includes not following policies, regulations, guidelines, or funding requirements or not maintaining and/or ensuring proper documentation for developmental disabilities services. The Supportive ISO must document substantial non-performance as follows:

- (i) When the Supportive ISO discovers an issue, they must notify the individual or family member in writing of the issue and what is needed to correct the issue along with a timeline to do so; and offer support and training to the individual or family member as needed;
- (ii) If the individual or family member has not corrected the issue according to the required timeframe, the Supportive ISO must send written notice to the individual or family member indicating that if the issues are not corrected in 30 days, the agreement for self/family-management may be terminated.
- (iii) Repeated documented failures to follow requirements will be evidence to justify termination of the self/family-management agreement.

### **What does this mean?**

For those self/family managing, the Supportive ISO will monitor the individual or family member's ongoing performance of their responsibilities. When issues arise, the Supportive ISO will notify the individual or family member of the issue that must be corrected and the timeline to correct it. They will offer additional support or training to assist the individual/family member to correct the issues. Failure of the individual/family member to correct the issues may result in a termination of self/family management.

For those initially requesting to self/family manage, the Supportive ISO will assess the individual/family member's ability to carry out the responsibilities. Part of that assessment can include historical information regarding their capabilities in similar tasks and that the plan for support addresses the individual's needs.

**Rule 7.100.6 (f)(3)** If the Supportive ISO decides an individual or family member is not able to manage services, the individual or family member may file a request for a fair hearing with the Human Services Board, as provided in 3 V.S.A. § 3091. The Supportive ISO must provide written notice to the individual or family member at least 30 days prior to terminating the self/family-management agreement and include the individual's or family member's right to request a fair hearing within 30 days of the date of the notice.

### **What does this mean?**

The decision that an individual or family member is not capable of self/family managing their services is not an Adverse Benefit Determination for which they can request an internal appeal. However, it is a decision by a Medicaid provider of the State and if the individual or their authorized representative disagrees with that decision, they may request a fair hearing with the Human Services Board.

The Supportive ISO must provide a written decision with the information regarding the right to request a fair hearing 30 days prior to the date of termination or denial of a self/family management agreement.

### **Where to get additional information and assistance:**

3 V.S.A. § 3091 - [Vermont Laws](#)

[Developmental Disabilities Services Regulations](#)

## VII. Role of the Fiscal/Employer Agent

The State contracts with a Fiscal/Employer Agent (F/EA) to provide payroll and other administrative functions for individuals/families who are managing their services. The Employer of Record (EOR) for those who choose self/family management is required to work with the F/EA. The State currently contracts with ARIS Solutions as the F/EA.

The F/EA provides the following supports to the Employer of Record:

1. Provides an Employer Handbook which provides information regarding all required paperwork and tasks of being an EOR.
2. Enrolls new Employers of Record after receiving the requested paperwork from those wishing to self/family manage.
3. Processes initial paperwork for new employees after receiving the requested paperwork from EOR.
4. Completes required Background Checks on proposed employees as required by the State policy.
5. Processes timesheets for employees hired by EOR.
  - a. Pays for services within the Authorized Funding Limit and other program requirements.
  - b. Pays overtime when required.
  - c. Ensures timesheets are filled out correctly and notifies EORs if corrections to timesheets are needed.
  - d. Pays at least VT minimum wage or minimum required of the Collective Bargaining Agreement for employees.
  - e. Tracks and pays sick leave if earned.
6. Pays required State and Federal Taxes, unemployment and Worker's Compensation insurances. Reports taxes paid to government agencies as required.
7. Processes requests from EORs for reimbursement for non-payroll goods and services, including checking with the Supportive ISO regarding whether the good/service is an allowable expense, when needed.
8. Provides reports to EOR and Supportive ISO regarding what has been spent and what remains in an individual's budget for services.

9. Enforces state/federal rules as instructed by their contract with State.
10. Reports to the State the Medicaid services provided to individuals.
11. Provides updates to EORs of any changes in policies or procedures impacting their role in self/family management.
12. Reports suspected Medicaid Fraud to the State authorities.
13. Complies with Worker's Compensation Audits.
14. Provides needed information to the State's Workers Compensation broker around claims, Department of Labor for Unemployment claims, Economic Services around benefit inquiries on behalf of the employer.
15. Processes quarterly/yearly state and federal filing requirements.

**Where to get additional information and assistance:**

[Getting Started \(arissolutions.org\)](http://arissolutions.org) ARIS Solutions Employer Handbook

[A History of Supporting Others - ARIS Solutions](#) or ARIS 802-280-1911

## VIII. Glossary:

**Adult Protective Services (APS):** A unit in State Government that investigates allegations of abuse, neglect and exploitation of adults who are considered vulnerable, including people with developmental disabilities.

### **Appeals:**

A request to review a decision of the State or an agency regarding an individual's services. If an individual or their authorized representative disagrees with a decision regarding their services, they have a right to request that the Department or the agency that made the decision review that decision. *Some, but not all,* of the decisions that can be appealed are listed below:

- Denial of a service that was asked for
- Denial of the amount of service that was asked for
- Denial of the type of service that was asked for
- Denial of who can provide the services
- Decisions to reduce, put on hold or end services
- Not getting approved services in a timely manner

**Authorized Funding Limit (AFL):** The amount of money in an individual's service budget that they can use to pay for their supports. An AFL is based on the individual's needs assessment and is reviewed each year. The AFL says how much money is available in each category of service such as Community Supports, Respite, Home Supports, etc. It includes a share of administration for services. It is not the full approved Home and Community-Based Services budget, which may include other items that benefit everyone receiving services.

**Behavior Support Plan/Guidelines:** A plan designed to support an individual to change his or her behavior when the behavior poses a risk to health and safety, or interferes with an individual's growth, development, or achievement of goals. The plan is developed in the context of a person-centered planning process that focuses on helping the individual live the life they desire. The plan must follow the Division's *Behavior Support Guidelines*.

**Case Record**: Individuals/Families must maintain and keep the following documents in a record for 10 years. They must provide copies to the Supportive ISO (except #7).

1. Emergency Fact Sheet
2. Guardianship documentation
3. Initial Assessments/evaluations supporting eligibility
4. Additional evaluations and assessments related to an individual's needs or eligibility
5. Annual needs assessment (original and current)/periodic review
6. ISA and all component parts, including attachments, reviews, and changes
7. Progress notes and measurable data tracking related to ISA goals/outcomes
8. A Person's Story and annual updates
9. Critical Incident Reports
10. Employee training checklists

**Critical Incident Reports (CIR)**: A report submitted to the Supportive ISO when there is a potential media involvement, missing person, death of the individual, suspected abuse, neglect, exploitation or prohibited practices, restraint, criminal act/incarceration, medical emergency, including hospitalization, suicide attempt, actions by paid staff/providers or workers, other Critical Incidents (fire, theft, or destruction of property; criminal acts; other unusual or significant incidents)

**Eligibility**: The determination of whether an individual qualifies for a particular service. For developmental for developmental disabilities services, eligibility must be determined for Medicaid insurance, whether an individual has a developmental disability as defined in the *DDS Regulations*, and if they meet the criteria for receiving a service as outlined in the *State System of Care Plan*.

**Employee**: A person that the individual or family hires to provide support.

**Employer of Record (EOR)/employer**: An individual or family member who employs a support worker. An employer is responsible for selecting, scheduling, training, supervising, and terminating a worker. An employer determines the wages to be paid and the hours of employment of the support worker. The employer approves and signs the worker's timesheets.



**Family:** A group of individuals that includes a person with a developmental disability and that is related by blood, marriage, or adoption or that considers itself a family based upon bonds of affection, which means enduring ties that do not depend upon the existence of an economic relationship.

**Fiscal/Employer Agent (F/EA):** An organization that is under contract with DDSD to take care of employee payroll and taxes for the Employers of Record's who are self or family managing services.

**Grievances:** A grievance is when an individual, guardian or family receiving services formally lets their agency know that they are not satisfied with the quality or accessibility of their services. A grievance regarding the Supportive ISO follows the DDSD grievance procedures. A grievance regarding the quality of a individual's services that are self or family managed is the responsibility of the individual and their team.

**Guardian:** A person who has been appointed by a court to supervise and protect the interests of another person who is found to not be able to make certain decisions on their own.

**Health and Wellness Guidelines:** The Division guidelines that must be followed for people receiving developmental disabilities services to support their health. The guidelines specify which rules must be followed for people living on their own or with family.

**Individual:** As used in this *Guide*, the term "individual" is a person who has applied for or is receiving Developmental Disabilities Home and Community-Based Services.

**Individual Support Agreement (ISA):** An individualized plan that outlines what and how services and supports will be provided to the individual. The individual and guardian, if there is one, must agree to the plan. The plan must follow the requirements in the Division's *ISA Guidelines*.

**Medicaid:** A federal program that pays for health care and long-term support expenses for people who meet eligibility requirements. Benefits are paid with federal and matching state dollars.

**Needs Assessment:** An assessment that is done when an individual first applies for developmental services to see what kinds of support they need. The assessment is done each year to check and see if there are new or changed needs.

**Qualified Developmental Disabilities Professional (QDDP):** A person who has been determined to have certain training and experience in overseeing developmental disabilities services. It is required that each individual have a QDDP on their team to develop, review and monitor their plan for services (ISA).

### **Quality standards for services**

Services must follow outcomes as specified in *Guidelines for the Quality Review Process of Developmental Disabilities Services*:

- (1) Respect: Individuals feel that they are treated with dignity and respect.
- (2) Self Determination: Individuals direct their own lives.
- (3) Person Centered: Individuals' needs are met, and their strengths and preferences are honored.
- (4) Independent Living: Individuals live and work as independently and interdependently as they choose.
- (5) Relationships: Individuals experience positive relationships, including connections with family and their natural supports.
- (6) Participation: Individuals participate in their local communities.
- (7) Well-being: Individuals experience optimal health and well-being.
- (8) Communication: Individuals communicate effectively with others.
- (9) System Outcomes.

**Supportive Intermediary Service Organization (Supportive ISO):** An independent and statewide organization that provides guidance and support to individuals and families to learn and understand the responsibilities of self/family-managed services.

APPENDIX A: Required Regulations, Policies and Guidelines for people Self/Family Managing - click on the links below for more information.

[Developmental Disabilities Services Rules](#)

[Critical Incident Reporting \(CIR\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)

[Behavior Support Guidelines for Support Workers Paid with Developmental Services Funds](#)

[DAIL Background Check Policy](#)

[DOL Home Care Rule FLSA DS.pdf \(vermont.gov\)](#)

[DDSD Medicaid Claim Codes & Reimbursement Rates](#)

[DDSD Services Codes and Definitions for Home and Community-Based Services](#)

[Health and Wellness Guidelines](#)

[Qualified Developmental Disabilities Professionals \(QDDP\) Protocol](#)

[Self and Family Management | Developmental Disabilities Services Division \(vermont.gov\)](#)

[Individual Support Agreement \(ISA\) Guidelines | Developmental Disabilities Services Division \(vermont.gov\)](#)

[ARIS Solutions Employer Handbook](#)

[Quality Review Process of Developmental Disabilities Services, Guidelines](#)

[Variance Procedures for Direct Support Workers](#)

[Medicaid Manual for Developmental Disabilities Services](#)

[Rights of Recipients in DD Act](#)

[Vermont State System of Care Plan](#)

[Federal CMS Home and Community-Based Services Rules](#)

[Report Child Abuse in Vermont | Department for Children and Families](#)

[Adult Protective Services | Division of Licensing and Protection \(vermont.gov\)](#)

[Mandatory Reporting | Division of Licensing and Protection \(vermont.gov\)](#)

## APPENDIX B: Additional Required Regulations, Policies and Guidelines for Supportive ISO

[DDSD Encounter Data Submission Guidance for Home and Community-Based Services:](#)

[DDS HCBS Spreadsheet and Encounter Codes Crosswalk](#)

[DDS HCBS Spreadsheet Manual for TII](#)

## APPENDIX C: Additional Resources

[Vermont Medicaid Programs | Department of Vermont Health Access](#)

[Accessing and Maintaining Medicaid for DD Services](#)

[A History of Supporting Others - ARIS Solutions](#) or ARIS 802-280-1911

[Emergency Fact Sheet](#)

[Vermont Crisis Intervention Network \(VCIN\) | Developmental Disabilities Services Division](#)

[Home Page | Department of Labor \(vermont.gov\)](#) (802) 828-4000

[Employer Responsibilities | Workplaces For All \(vermont.gov\)](#)

[Minimum Wage and Overtime Pay for Direct Care Workers | U.S. Department of Labor \(dol.gov\)](#)

[Funding For Home and Community-Based Services | Developmental Disabilities Services Division \(vermont.gov\)](#)

[Crisis Supports | Developmental Disabilities Services Division \(vermont.gov\)](#)