

Self-Directed Supports: Frequently Asked Questions



Self-directing your own services is an option for people enrolled in Wisconsin's long-term care programs. It offers you a way to have more control over the services and supports you get.

How you use self-directed supports depends on whether you're enrolled in either:

- A managed long-term care program:
 - Family Care
 - Partnership
 - PACE (Program of All-Inclusive Care for the Elderly)
- IRIS (Include, Respect, I Self-Direct)

How many services do I self-direct?

Family Care, Partnership, or PACE

You can self-direct **part of your services**. For example, you might self-direct your personal care services but have your care team manage providers that help you get medical supplies.

IRIS

You self-direct **all your long-term care services**. You will have an IRIS consultant agency, a fiscal employer agent, and others to help you along the way.

How do I decide which services I will self-direct?

Family Care, Partnership, or PACE

When you enroll, a managed care organization (MCO) will assign a care team for you. Your MCO helps you find and get the services you need. During the assessment process, you work with your MCO to decide which services you want to self-direct, if any.

If you choose to self-direct one or more service:

1. The MCO provides a budget for you to pay for these services.
2. You create a self-directed supports plan that outlines how you will direct the services.
3. Your MCO manages any other services you do not self-direct.

IRIS

When you enroll, you choose an IRIS consultant through an IRIS consultant agency. They support you as you choose services.

1. Your IRIS consultant agency shares your estimated budget with you. Your budget includes the funds you will use to create your IRIS plan.
2. You create your IRIS plan. It outlines your goals and what you need to meet them. It also includes the home and community-based services you'll get as part of IRIS to meet those goals.
3. If you need help with personal care tasks, you may qualify for IRIS self-directed personal care. It is separate from the other services you get through IRIS.
4. You may adjust your IRIS budget if it does not cover the costs of all services you need. If you need a budget increase, your IRIS consultant will help you complete the required paperwork to request more funds.



Who can I hire to provide services?

For all programs, you can choose your own workers. They may be a family member, friend, or another qualified person. All workers need to complete a background check and be approved before they can be paid to provide services to you.

How can I hire workers to provide services?

For all programs, there are options for how you get workers to provide self-directed supports:

- **You can be the employer**—This means you recruit, hire, train, and manage your workers. As an employer, you will be responsible for approving timesheets and setting hourly rates, as well as other tasks.
- **You can work with an agency**—This means another group manages the workers who provide services to you.

If you struggle to find workers or agencies, your MCO or IRIS consultant can suggest resources and providers that may be helpful.

How are services paid?

Family Care, Partnership, or PACE

You will have a fiscal employer agent. They use the budget from your MCO to pay for services in your self-directed supports plan. You must approve the payment.

IRIS

Your IRIS fiscal employer agent pays the timesheets and claims for services listed in your IRIS plan. You must approve the timesheets for workers you hire.

You can pay for some other services that IRIS does not cover with your Medicaid ForwardHealth card.

Notes:

