In the

Driver's Seat

A family's map to self-directed services.

This planner belongs to

Your home base for self-direction — one place for all of it.

PARTICIPANT NAME

GOES BY

PLAN YEAR

IF FOUND, PLEASE RETURN TO

CONTACT PHONE / EMAIL

A NOTE ON PRIVACY

This book holds personal information. Keep it where your team can find it, but where it stays safe — a shelf, a bag, a locked drawer.

How to use this planner

Part reference manual, part workbook. You do not have to fill in every page.

Self-direction means you decide who supports you, how, and when — with a team beside you. That's a lot of good power, and a lot to keep track of. This book holds two things at once: the **reference** you'll reach for when you need to understand a term, a service, or a rule — and the **workbook** where you keep your own plan, budget, staff, and week organized.

It's organized in three parts: **Get Oriented** (what self-direction is and who does what), **The 30–90 Day Journey** (seven phases from enrollment to a steady monthly rhythm), and **Keep On Hand** (renewal, documents, emergencies).

THREE HABITS THAT MAKE IT WORK

1 **Keep it where your team can find it.**
Bring it to every meeting and appointment.

2 **Update it when something changes.**
A new staff person, a new goal, a new date. Five minutes keeps you out of a scramble later.

3 **Start with two tabs.**
Fill in *My Person* (04) and *My Circle & Team* (05) first. Read the reference tabs as questions come up.

HOW TO READ A PAGE

Every page carries a **page ID** in the top right — like 04.5. Use it to find a page someone mentions.

The **colored tabs** on the right edge of each section opener — and the rail across the top of every page — show where you are in the seven-phase journey.

A coral BRING TO BROKER MEETING mark means this page earns its keep at your monthly meeting.

Print more of any page anytime. This is a disc-bound, refillable book. When you need more room, print another copy and pop it back in.

What's inside

Three parts: get oriented, work the journey in phases, then keep the reference close.

PART I · GET ORIENTED		
01	**Start Here & Welcome**	Welcome · first five steps
02	**Understand Self-Direction**	What it is · your team · agreement · FAQ
03	**Words & Services**	Glossary · services · benefits · requirements
04	**My Person**	Information · all about me · routines
05	**My Circle & Team**	Contacts · staff · credentials · who to call
PART II · THE 30-90 DAY JOURNEY		
06	**P1 · Enrollment**	Choose FMCS · sign agreements · become employer
07	**P2 · PCP Planning**	Build the plan and the goals that drive it
08	**P3 · Budget Planning**	Read, watch, and stretch the budget
09	**P4 · Hiring Staff**	Recruit · screen · onboard · end employment
10	**P5 · Timesheets & Clocking**	EVV · approving time · payroll
11	**P6 · Mileage & Compliance**	Mileage test · staying clean · incidents
12	**P7 · The Monthly Cadence**	The week · the month on a page · meetings
PART III · KEEP ON HAND		
13	**The Year & Renewal**	Annual Plan Date · review · modifications
14	**My Documents**	What to keep & where
15	**Emergency & Safety**	Information · plan · go-bag · backup plan
16	**Notes & Where to Get Help**	Notes · resources · encouragement

The year at a glance

Mark your Annual Plan Date, your three reminders, plan reviews, and the dates that matter.

JAN	FEB	MAR	APR
MAY	**JUN**	**JUL**	**AUG**
SEP	**OCT**	**NOV**	**DEC**

THE ONE DATE TO CIRCLE

Your Annual Plan Date. Then mark a reminder 90 days before it — a late plan can freeze changes to your budget and services.

PART I · GET ORIENTED

Start Here

You belong in the driver's seat. This first tab is your soft landing — what this book is, the journey ahead, and the two pages to fill in before anything else.

Welcome 01.1

Your first five steps 01.2

01

BEFORE YOU START THIS TAB

If self-direction feels like a lot right now, that's normal. You don't have to hold it all in your head anymore — that's what this book is for.

Welcome

Take it one page at a time.

If self-direction feels like a lot right now, that's normal. You've been handed real responsibility and a system with a lot of moving parts. Here's the good news: you don't have to hold it all in your head anymore. That's what this book is for.

Everything you need to run your services well — who's on your team, what each term and service means, what your plan says, where your budget stands, how to hire and keep staff compliant, what to ask at your next meeting — lives here, in one place you can carry with you.

You are the center

In self-direction, you (or someone you trust to speak for you) take the lead on your waiver services. Your goals and choices drive the plan. Everyone else — your CCS, your Support Broker, your FMCS provider — is here to help you carry it, not to make your decisions for you.

START HERE, LITERALLY

- *Fill in Tab 04 · My Person*
- *Fill in Tab 05 · My Circle & Team*
- *Keep Tab 03 · Words & Services close in year one*

MY MARGIN

What brought us to self-direction — and what I hope changes because of it.

Come back and read this in six months. Most families are surprised how much they've learned.

Your first five steps

Check these off in your first week or two. Nothing else has to happen yet.

- [ ] Write your name and contact info on the *This planner belongs to* page 00.1
- [ ] Fill in My Information and the All About Me passport 04.1 · 04.2
- [ ] Add your team's names and numbers to Important Contacts 05.1
- [ ] Write your Annual Plan Date on My Plan at a Glance — and set a 90-day reminder 07.2
- [ ] List your current staff and their credential renewal dates 05.3

THEN, GOING FORWARD

- [ ] Bring this book to every meeting and appointment.
- [ ] Do a five-minute weekly check-in each Sunday 12.5
- [ ] Prep for your monthly broker meeting the day before 12.6

DON'T DO THIS YET

You don't need to read the reference tabs cover to cover. They're there for the day a word or a rule stops you.

PART I · GET ORIENTED

Understand Self-Direction

What self-direction actually is, who does what on your team, the 30–90 day journey ahead, and an honest look at whether it fits your family.

What self-direction means	02.1	Is self-direction right for us?	02.5
Your team & who does what	02.2	The Participant Agreement	02.6
The 30–90 day journey	02.3	Questions families ask most	02.7
Five things to know upfront	02.4	What your broker does — and doesn't	02.8

02

BEFORE YOU START THIS TAB

It's not a forever decision. Families move between provider-managed and self-directed services as capacity changes. Both are normal.

What self-direction means

In plain terms.

In Maryland's DDA system, families choose between two ways of receiving services. In **provider-managed services**, an agency hires and manages the staff, handles scheduling, payroll, and compliance, and you work within its structure. In **self-directed services**, you direct the services — you choose the staff (often family members or trusted people), an FMCS provider handles payroll, and a Support Broker helps you coordinate.

SELF-DIRECTION GIVES YOU TWO POWERS

1 **Employer Authority**

Your right to hire, train, schedule, and manage your own staff — and to let someone go if it isn't working.

2 **Budget Authority**

Your right to decide how your approved budget is spent, within the set rates.

THE TRADE-OFF, HONESTLY

Self-direction gives you more control and more flexibility — and asks more of you. Most families plan for **4–8 hours a month** of their own involvement, especially in the first six months. A Support Broker carries much of the coordination, but the family stays in the driver's seat.

MY MARGIN

Which of the two powers matters most to us right now — and why?

Ask next meeting: realistically, how many hours a month will this take us in the first six months?

Your team & who does what

Six roles. You're at the center of all of them.

1 **You — the participant**
The center of everything. Your goals and choices drive the plan.

2 **Designated Representative** optional
A family member or trusted person who can help make decisions and act as the employer with you.

3 **Coordinator of Community Services (CCS)**
DDA-funded. Builds your Person-Centered Plan, submits it, and monitors it. Your main link to DDA.

4 **Support Broker** paid from your budget
Coaches you on the employer side — hiring, schedules, timesheets, budget questions. Does not make your decisions for you.

5 **Financial Management & Counseling Services (FMCS)**
Your back-office. Runs background checks, pays your staff, manages HR paperwork, keeps things compliant.

6 **Direct Support Professional (DSP)**
The staff person who provides day-to-day support. Often a family member.

THE ONE DISTINCTION

Your CCS is funded by DDA to develop and monitor your plan. Your broker is paid from your budget to help day to day. They work together; they don't replace each other.

MY MARGIN

Write the name and number for each role — this page becomes yours.

CCS

BROKER

FMCS

DSP

DSP

Ask next meeting: which of these six do I call first when a shift falls through?

The 30–90 day journey

Self-direction unfolds in phases. Most families move from enrollment to a steady rhythm over 30 to 90 days — this book follows that path.

I	**Enrollment** Choose your FMCS, sign your agreements, and become the legal employer.	DAYS 1-15 TAB 06
2	**PCP Planning** Build the Person-Centered Plan and the goals that drive everything.	WEEKS 2-6 TAB 07
3	**Budget Planning** Read your budget and set it up to fund the plan.	WEEKS 2-6 TAB 08
4	**Hiring Staff** Recruit, screen, and onboard your DSPs.	WEEKS 4-8 TAB 09
5	**Timesheets & Clocking In/Out** EVV, approving time, and payroll.	WEEKS 6-12 TAB 10
6	**Mileage & Compliance** The mileage test, staying clean, and incident reporting.	ONGOING TAB 11
7	**The Monthly Cadence** The steady rhythm of weeks, meetings, and reviews.	DAY 90 ON TAB 12

WHERE WE ARE TODAY

Circle the phase you're in, and write the date you got there. Timelines vary — some families move faster, some slower, and phases overlap.

Five things to know upfront

The realities families tell us they wish they'd understood on day one.

1 **Self-direction takes work.** Even with a Support Broker, you (or a Designated Representative) manage staff, sign timesheets, and make service decisions. Plan for 4–8 hours a month, especially early on.

2 **Your CCS and Support Broker are different people with different jobs.** They work together; they don't replace each other.

3 **Your authorized budget has rules.** Hours are authorized by service type. You can use them flexibly within the rules — but not interchangeably. Your CCS and broker can explain what flexibility exists.

4 **Family-as-staff is allowed, and common.** You can hire family members as DSPs, with some limitations 09.6. The FMCS handles payroll the same way for any DSP.

5 **Reportable Incidents are real.** Certain events must be reported quickly (often within 24 hours). Know the protocol before you need it 11.3.

WHICH OF THESE FIVE IS OUR BIGGEST QUESTION MARK?

Is self-direction right for us?

Five honest questions. It's not a yes/no test — it's the conversation to have with your family and your CCS.

Who will direct services?

Is there an identified person with the time, capacity, and comfort to manage staff and decisions?

Are we comfortable with administrative complexity?

Timesheets, onboarding, credential tracking, compliance windows — handled by us, or coordinated with a broker?

Do we want to choose our own staff?

Specific people in mind, or the flexibility to recruit rather than receive an agency assignment?

Are we ready for budget responsibility?

Can we monitor monthly spending and make budget decisions, with help?

Is our situation stable enough?

Self-direction works best when family life is relatively steady.

WORTH REMEMBERING

Many families start provider-managed and move to self-direction once they know the system — or the reverse, if capacity changes. Both are normal. Bring this page to your CCS.

The Participant Agreement & your three options

Where you formally choose how you'll exercise authority over your services.

The DDA Participant Agreement spells out who does what. It establishes your **Employer Authority** (who hires, trains, schedules, supervises, and terminates staff), your **Budget Authority** (who decides how the approved budget is spent), whether a Designated Representative helps — and it's revisited at your regular plan reviews.

1 **You direct**

The participant exercises employer and budget authority directly. Best when the participant can and wants to direct services themselves.

2 **A representative directs**

A Designated Representative exercises authority with or for the participant. Best when the participant wants trusted support to manage staff and budget.

3 **Shared**

Responsibilities are split between participant and representative, as defined in the agreement.

THE OPTION WE CHOSE

DATE SIGNED

BEFORE YOU SIGN

Review the exact wording with your CCS and Support Broker. And remember: a relative or guardian serving as representative or paid staff triggers the Support Broker requirement.

BRING TO BROKER MEETING

Questions families ask most

You don't have to memorize the manual. Here are the ones we hear most, in plain language.

What is self-direction, really?

You choose, hire, and manage your own staff, and you decide how your approved budget is spent — instead of an agency making those calls. More freedom, more responsibility.

Am I really the employer?

Yes. You receive a Federal Employer Identification Number (FEIN) and are the legal employer. Your FMCS provider handles the processing.

Who handles payroll and taxes?

Your FMCS provider pays staff, files taxes, processes claims, and verifies qualifications. You set the wages and approve the hours.

Can I hire family members?

Yes, with rules. A relative, LRP, or guardian can be paid staff — but a Support Broker is then required, they can't work more than 40 hours/week per participant across all services, and they can't provide Nursing Support.

What is "auto-extend," and why the warnings?

If your PCP isn't renewed before its annual date, it auto-extends — freezing raises, new services, new goods, and cost-savings hours. Start renewal with your CCS at least 90 days early.

What happens if I overspend?

Going over budget can trigger corrective action from DDA, and in serious cases removal from the model. Pull your spending reports monthly and stay ahead of it.

Do my staff need certifications?

Yes — every staff member must be 18+, pass a background check, and hold in-person or hybrid CPR/First Aid before their first shift. Online-only doesn't count.

Is there a fee for FMCS?

Each FMCS provider charges a monthly fee. Effective January 2027, that fee is no longer paid from your budget.

What your Support Broker does — and doesn't

Two short lists that draw the line clearly. The limits aren't red tape — they protect your authority.

WHAT WE DO FOR YOU

- ✓ Meet monthly to review services, budget, and staff
- ✓ Help you understand your PCP and Budget Sheet
- ✓ Coach you on hiring, managing, and scheduling
- ✓ Help build job descriptions and evaluation tools
- ✓ Help you recruit — ads, reviewing applicants
- ✓ Review your FMCS monthly report
- ✓ Plan for PCP renewal so it never expires
- ✓ Help you recognize and report incidents

WHAT WE DO NOT DO

- ✗ Make decisions for you — budget, staff, anything
- ✗ Approve your employees' timesheets or invoices
- ✗ Submit budget modifications to your FMCS
- ✗ Interview candidates without you present
- ✗ Offer jobs to candidates on your behalf
- ✗ Access your FMCS account without you present
- ✗ Replace your CCS — different roles

THE BOUNDARY THAT MATTERS

Only you approve your staff's time and authorize overtime. Your broker and CCS coach and coordinate — but the decisions, and the timesheet approvals, are always yours.

PART I · REFERENCE

Words & Services

The reference half of this book. Every acronym you'll hear, decoded — and every service you might self-direct, explained in plain language. Keep this tab close.

Words to know · A–L 03.1

Words to know · M–Z 03.2

The service menu 03.3

Benefits, goods & reimbursements 03.4

Requirements at a glance 03.5

03

HOW TO USE THIS TAB

Don't read it through. Come here when a word on a form stops you — then write the word in your Notes so you never look it up twice.

Words to know

The terms your CCS, Support Broker, and FMCS use — so you never have to ask them to translate.

APD	Annual Plan Date — the anniversary of your plan-year start.
BAA	Business Associate Agreement — a required HIPAA contract.
BIP / BSP	Behavior Intervention Plan / Behavior Support Plan.
CCS	Coordinator of Community Services — your DDA-funded planner.
CDS	Community Development Services — support for community inclusion (caps apply).
CPR	Cardiopulmonary Resuscitation — required certification for staff.
CSA	Cost Savings Allowance — using unused budget for higher-rate services.
D2D	Day-to-Day Administrative Supports — admin help, capped at 10 hrs/month.
DDA	Developmental Disabilities Administration.
DR	Designated Representative — a legally authorized decision-maker.
DSP	Direct Support Professional — your direct-care staff person.
FEIN	Federal Employer Identification Number — your ID as the legal employer.
FMCS	Financial Management & Counseling Services — your payroll provider (also FMS).
HCBS	Home and Community-Based Services.
HRST	Health Risk Screening Tool — helps determine acuity and eligibility for Enhanced supports.
IFDGS	Individual/Family-Directed Goods & Services — participant-directed purchases.
IFSP	Individualized Family Service Plan — for younger children.
LRP	Legally Responsible Person — e.g. a parent of a minor or a spouse; special staffing rules apply.
LTSS	Long-Term Services and Supports — the state system tracking PCP status.
Auto-extend	What happens if the PCP isn't renewed on time — freezes raises, new services, and cost savings.
Budget Sheet	Your planned spending — services, wages, rates. Must match your PCP exactly.

Words to know *continued*

The terms you'll meet as you get deeper into directing — rates, providers, and appeals.

MA	Medical Assistance — Maryland's term for Medicaid.
MDH	Maryland Department of Health — DDA's parent agency.
NPP	Notice of Privacy Practices — a HIPAA disclosure.
OAH	Office of Administrative Hearings — where formal appeals are heard.
OHCQ	Office of Health Care Quality — a Maryland regulator.
PCP	Person-Centered Plan — your master plan document.
PHI	Protected Health Information.
PORII	Policy on Reportable Incidents and Investigations — the rules for reporting.
PS	Personal Supports — direct, hands-on support services.
R&C	Reasonable & Customary — the DDA's published wage and rate maximums.
RIN	Reportable Incident — an event that triggers DDA reporting.
RT	Respite — short-term relief for the primary caregiver.
SDS	Self-Directed Services.
SE	Supported Employment — help getting and keeping a job.
SIS	Supports Intensity Scale — an assessment used for your budget tier.
SLA	Service Level Agreement — a written agreement on service expectations.
Waiver	A Medicaid program (Family Supports, Community Supports, Community Pathways) funding your services.
Individual Provider	Formerly "vendor." Now limited to Support Broker and Nursing Support Services.
Licensed Provider	A DDA-licensed agency delivering services other than Support Broker and Nursing Support.
Reporting Form	The form for relatives, LRPs, and guardians providing waiver services (replaced the Family-as-Staff Form).
Grievance	A formal complaint you can file with the FMCS provider, DDA, or OAH.

Terminology varies between teams and changes over time. When a new term shows up on paperwork, add it to your Notes 16.1 and ask your CCS or broker to define it.

The service menu

Self-direction isn't one service — it's a menu you direct, with the limits that shape each one. Your plan determines which apply.

SERVICE	WHAT IT'S FOR — AND THE LIMITS THAT MATTER	BILLING
Personal Supports	Hands-on help with daily life — the backbone service for many plans, delivered by the DSPs you hire and supervise.	Hours / mo
Respite (RT)	Planned relief for the family — staffing that gives primary caregivers a genuine break while your person is well supported.	Hours / event
Community Development Services (CDS)	Building skills, connections, and presence in the community. Daily and weekly caps apply — check current Manual limits.	Hours (caps)
Day-to-Day Administrative Supports (D2D)	Help with the administrative side of self-directing. Capped at 10 hours per month per participant. A D2D employee may not provide any other service or role for the participant.	≤ 10 hrs / mo
Transportation / Mileage	Travel support within specific conditions — read the three-condition test 11.1 before assuming a trip qualifies.	Per mile / trip
Support Broker	Professional navigation — guidance, meeting facilitation, and coordination, engaged under a one-year contract.	Hours / mo

THE RULE FOR EVERY SERVICE

It exists to serve a goal written in your PCP. If you can't point to the goal a service serves, that's your signal for a PCP conversation with your CCS.

Always check current limits. Caps and provisions change with Manual revisions — schedule from the current tables, not remembered ones. Other DDA services (Supported Employment, Nursing, Assistive Technology) may also be in your plan; ask your CCS.

Benefits, goods & reimbursements

Beyond hourly wages, you can offer employees benefits and direct budget dollars to approved goods — all from your approved allocation.

Paid Time Off (PTO)

Vacation, sick & safe leave, personal/bereavement, holidays. Worked hours + PTO can't exceed 40 in a week; accrued PTO can't be cashed out.

Health insurance premiums

Reimburse an employee for part or all of an employee-purchased policy.

Mileage reimbursement

Up to the IRS standard rate, for employees only — not travel to or from medical appointments.

Training & training time

Pay or reimburse required training and the hours worked during it — the one exception that may exceed 40 hours.

Holiday pay differential

A higher rate for holiday work, set by you — not above the R&C wage.

IFDGS goods & services

Participant-directed purchases that build independence — including up to $500/year for staff recruitment and advertising.

THE TIE THAT BINDS

Every benefit and purchase must tie to a PCP goal and stay within your approved allocation. Your Support Broker and FMCS help you set these up correctly.

BENEFITS WE OFFER OUR STAFF — AND WHAT WE WANT TO ADD

Requirements at a glance

A quick compliance reference across the services you self-direct.

EVERY STAFF MEMBER

- ✓ At least 18 years old with valid ID
- ✓ Criminal background check completed before hire (run by your FMCS)
- ✓ CPR / First Aid — in-person or hybrid only (online-only does **not** qualify)
- ✓ Child Protective Services check if the participant is under 18
- ✓ Service-specific qualifications verified by the FMCS provider
- ✓ Documentation shared with both the participant and the FMCS provider

KEY RULES TO REMEMBER

EVV is required for Personal Supports, Enhanced, and Respite.

Relatives, LRPs, and guardians can't work more than **40 hours/week** per participant across all waiver services.

All billing flows through your FMCS — **never pay a provider directly.**

The **Budget Sheet must match the PCP exactly** and stay within the allocation.

Only **Support Broker and Nursing Support** are individual providers — all other services use DDA Licensed Providers.

Effective **January 2027**, the FMCS fee is no longer paid from your budget.

PART I · GET ORIENTED

My Person

The heart of the book — the person all of this is about. Fill it in first, and share it with anyone new who joins the team.

My information 04.1

All about me — a communication passport 04.2

Routines & what I love 04.3

04

WHY THIS TAB COMES FIRST

Every new staff person should read 04.2 before their first shift. It's the fastest way for someone to know your person well.

My information

The essentials, in one place.

FULL NAME

GOES BY / NICKNAME

DATE OF BIRTH

DDA / DEPARTMENT ID

WAIVER PROGRAM

MEDICAL ASSISTANCE (MA) NUMBER

HOME ADDRESS

PHONE

EMAIL

ABOUT ME — HOW I COMMUNICATE BEST, WHAT HELPS ME, WHAT TO KNOW

All about me

A communication passport — share this with anyone new who supports me, so they can know me quickly and support me well.

THE BASICS

MY NAME / CALL ME

HOW I COMMUNICATE

LANGUAGES I USE

WHAT HELPS ME FEEL SAFE

PLEASE KNOW

WHAT'S HARD FOR ME

THINGS TO AVOID

HOW I SHOW I'M UPSET

HOW TO HELP ME SETTLE

THE BEST WAY TO SUPPORT ME

Routines & what I love

The things that make a day a good one.

MY ROUTINES & WHAT A GOOD DAY LOOKS LIKE

PEOPLE & THINGS I LOVE

MY HOPES & DREAMS

PART I · GET ORIENTED

My Circle & Team

Everyone in the picture — your coordinators, your broker, your FMCS, and the staff who show up for you. Keep names, numbers, and credential dates current here.

Important contacts 05.1

My team / staff directory 05.2

DSP credential tracker 05.3

Who to call — quick reference 05.4

05

KEEP THIS TAB CURRENT

A lapsed credential means a staff person legally can't work. Tracking renewals 60–90 days out is the cheapest insurance in this book.

Important contacts

Your circle, one page, always current.

Coordinator of Community Services (CCS)

NAME	AGENCY	PHONE / EMAIL

Support Broker

NAME	PHONE / EMAIL

FMCS Provider

PROVIDER	PHONE	PORTAL / LOGIN HELP

Designated Representative

NAME	RELATIONSHIP	PHONE

Doctors & other supports

My team / staff directory

Everyone who provides my support.

NAME	ROLE / SERVICE	PHONE	CERT. EXPIRES

TIP

Write down when each person's CPR / First Aid expires, so a lapse never catches you off guard. The credential tracker 05.3 handles the rest.

DSP credential tracker

Track your direct support professionals — and when their credentials need renewal.

DSP NAME	START DATE	DRIVER LIC.	INSURANCE	CPR / FIRST AID

Why this matters. If a DSP's credentials lapse, they cannot legally provide services until renewed. Tracking renewal windows 60–90 days in advance prevents service interruptions — and a scramble for backup coverage.

Who to call — quick reference

Your team at a glance. Fill in names and numbers so help is always one call away.

I NEED HELP WITH…	WHO TO CALL	NAME / PHONE
Services, budget, or staff questions	**My Support Broker**	
My Person-Centered Plan	**My CCS**	
Payroll, timesheets, paperwork	**My FMCS provider**	
Something bad happened (incident)	**My CCS first; then DDA**	
Changing my FMCS provider	**My CCS (30 days' notice)**	
A different Support Broker	**Good Order & Co. or my CCS**	
Thinking about leaving self-direction	**My CCS**	
Questions about DDA rules	**DDA Regional Office**	
Emergency — staff didn't show	**My backup staff** 15.4	

You can switch FMCS providers (e.g. Fello, GT Independence, PPL) any time with 30 days' notice — your CCS makes the change in LTSSMaryland. Keep this page somewhere easy to find.

Enrollment

Where the journey begins: choosing your FMCS, signing your agreements, and becoming the legal employer. Most families move through enrollment in the first week or two.

Getting enrolled — the six steps 06.1

BEFORE YOU START THIS TAB

Choosing an FMCS and signing your agreements are the gate to everything else — don't rush them, but don't let them stall either.

Getting enrolled

Mostly paperwork and choices — lean on your CCS and Support Broker. Once it's done, the real work of building your plan begins.

MY FMCS PROVIDER

ENROLLMENT START DATE

1. Meet your CCS to understand your approved budget and next steps. ☐
2. Choose your FMCS provider — Fello, GT Independence, or PPL. You can switch later with 30 days' notice. ☐
3. Complete FMCS onboarding. You receive a Federal Employer Identification Number (FEIN) and become the legal employer; the FMCS handles the processing. ☐
4. Sign your Participant Agreement and choose your authority option 02.6. ☐
5. Sign your Support Broker agreement (a one-year contract). ☐
6. Complete the Family-as-Staff Reporting Form with your CCS if you'll hire a relative, LRP, or guardian. ☐

QUESTIONS THAT CAME UP DURING ENROLLMENT

● BRING TO BROKER MEETING

PCP Planning

Your Person-Centered Plan writes down the goals that drive everything else. This phase is about building a plan that reflects the real life you want.

Your plan & budget, in plain terms 07.1

My plan at a glance 07.2

P2

THE ONE HABIT FROM THIS TAB

Mark a reminder 90 days before your Annual Plan Date. Then again at 60. Then 30. Early is calm; late is a scramble.

Your plan & budget, in plain terms

Two ideas that unlock everything else.

Your Person-Centered Plan

Your yearly map. It lists your goals, your services, and your approved budget — and a new one is made every year. The date it renews is your **Annual Plan Date (APD)**, and it matters more than almost anything in this book. Miss it, and changes to your services can freeze.

Your authorized budget

The total dollar value DDA has approved for the plan year, set by an assessment and reflected in your PCP. Within the total are sub-allocations by service type — so much for Personal Supports, so much for Respite, so much for Support Broker. They aren't always interchangeable, but there's often more flexibility than families realize.

THE HABIT THAT PROTECTS YOU

Mark a reminder 90 days before your Annual Plan Date. Then again at 60. Then 30. Early is calm; late is a scramble.

MY MARGIN

The goals in our plan, in my own words — and the service each one needs.

Ask next meeting: which of my sub-allocations has flexibility, and which doesn't?

My plan at a glance

The essentials, where you can find them fast.

ANNUAL PLAN DATE

WAIVER PROGRAM

MY SERVICES THIS YEAR

and the goal each one serves

MY GOALS THIS YEAR

in my person's own words

MY MARGIN

Early is calm. Late is a scramble.

A late plan auto-extends and freezes raises, new services, and cost-savings hours. Set all three reminders the day you write your APD.

COUNTDOWN

- [ ] 90 days — flag it
- [ ] 60 days — draft goals
- [ ] 30 days — confirm date
- [ ] Renewed — update pages

BRING TO BROKER MEETING

Budget Planning

Your budget is the fuel that funds the plan. Learn to read it, watch it monthly, and make unused dollars work harder for the life you're building.

How to read your PCP budget 08.1
The Cost Savings Allowance 08.2
How the plan drives the budget 08.3
My budget at a glance 08.4
Service hours log 08.5
Money & spending — the year 08.6

P3

BEFORE YOU START THIS TAB

Families who look monthly steer. Families who look yearly react.

How to read your PCP budget

Most families find this section confusing on first read. That's normal. Here's what to look for.

Total annual authorization	The total dollar value for the plan year.
Service-level authorizations	How much is set aside for each service type.
Authorized hours per service	Often shown both monthly and annually.
Hourly rates	What each service is billed at (DDA-published rates).
Plan year start & end dates	Anchored to your Annual Plan Date.

THE ARITHMETIC, ONCE

Most services are authorized in **hours per month × an hourly rate**. Example: 40 hrs/month of Personal Supports × $20/hr = $800/month, or $9,600 for the plan year. Some services (like assistive technology) are authorized as flat amounts.

THE NUMBERS I WANT EXPLAINED

WHOSE JOB THIS IS

If your PCP budget is unclear, ask your CCS to walk through it — then ask your Support Broker to translate it into a working budget you can monitor monthly. That's their job.

BRING TO BROKER MEETING

The Cost Savings Allowance

How unused budget can work harder for you.

When authorized hours go unused, those funds may be redirected to higher-rate services or additional hours of existing services through a **Cost Savings Allowance (CSA)**. Example: if 20 hours of authorized Personal Supports go unused, the dollar equivalent might cover additional Support Broker hours, assistive technology, or other approved supports — approved through your CCS and processed by the FMCS.

USING COST SAVINGS STRATEGICALLY

1. Spot under-utilization 90 days before plan-year end, so there's time to plan.
2. Discuss with your Support Broker what the unused budget could be redirected to.
3. Bring the proposal to your CCS for a plan modification.
4. Once approved, the FMCS implements the redirected billing.

Cost Savings is not "extra" money. It redirects unused authorized budget — the total value stays the same; the distribution across services becomes more flexible.

WHAT WE'D REDIRECT UNUSED HOURS TO, IF WE COULD

BRING TO BROKER MEETING

How the plan drives the budget

Everything in self-direction flows from one document.

Your PCP writes down the goals — what a good life looks like for your person, in their terms. Services are chosen because they serve those goals, and the budget is the fixed amount that funds them. **Fixed means fixed:** it isn't a credit line. Managing across the plan year — heavier months and lighter ones — is part of directing it.

THE MONTHLY READ — THREE QUESTIONS

01

What did we plan to use by now?

02

What have we actually used?

03

What explains the difference?

If those answers make sense, you're managing well. If one doesn't, that's your question — **plan questions to your CCS, money questions to your FMCS, options questions to your Support Broker.**

THE HABIT, IN ONE LINE

Twenty minutes each month reading the latest FMCS statement next to your plan. Families who look monthly steer. Families who look yearly react.

THIS MONTH'S READ — WHAT THE NUMBERS TOLD ME

My budget at a glance

What's approved, who provides it, and what it costs.

SERVICE	WHO PROVIDES IT	HOURS / AMOUNT	RATE
Personal Supports			
Community Development Services			
Respite			
Support Broker			

TOTAL APPROVED BUDGET

COST SAVINGS TO WATCH

Update this page the day your plan is renewed — and again after any budget modification. Every other budget page in this tab reads from these numbers.

BRING TO BROKER MEETING

Service hours log

On track, under, or over — know before your broker tells you.

PLAN YEAR START

PLAN YEAR END

SERVICE	AUTH/MO	M1	M2	M3	Δ
Personal Supports					
Community Dev. Services					
Respite					
Support Broker					

Under-using hours can shrink next year's authorization. Over-using creates budget problems. This log keeps you in the safe middle — and gives you the receipts at renewal.

MY MARGIN

The monthly read. What did we plan to use by now? What have we actually used? What explains the difference?

WHAT EXPLAINS THE GAP

BRING TO BROKER MEETING

Money & spending

A simple place to keep an eye on your budget through the year.

MONTH	BUDGETED	SPENT	REMAINING	NOTES
Jan				
Feb				
Mar				
Apr				
May				
Jun				
Jul				
Aug				
Sep				
Oct				
Nov				
Dec				

WHERE THESE NUMBERS COME FROM

Your FMCS monthly statement. Pull it the same week every month — the first week is easiest to remember — and copy two numbers across.

BRING TO BROKER MEETING

Hiring Staff

You (or your representative) are the employer of record. From the job description through screening, family-hire rules, onboarding, and — when needed — ending employment.

What being the employer means	09.1	New DSP — document checklist	09.5
Finding & choosing a DSP	09.2	Hiring a family member	09.6
The hiring workflow & interview	09.3	Onboarding a new DSP	09.7
Hiring requirements & documentation	09.4	Ending employment	09.8

P4

BEFORE YOU START THIS TAB

Hiring a family member is allowed, it's common, and it's exactly when the paperwork has to be right.

What being the employer means

Real responsibility, in plain terms — with help at every step.

When you self-direct, you (or your designated representative) are the **employer of record** for your staff. That includes:

1 **Deciding who to hire**

And letting someone go if it isn't working.

2 **Setting schedules & approving hours**

You approve the timesheets that get your staff paid.

3 **Making sure staff are trained & certified**

The right credentials, kept current.

4 **Treating staff fairly & keeping good records**

Following the rules, keeping simple paperwork.

YOU DO NOT DO THIS ALONE

Your Support Broker coaches you through every one of these. Your FMCS provider runs background checks, handles payroll, and manages the legal paperwork. Ask for help — that's what they're there for.

THE PART OF BEING THE EMPLOYER I'M LEAST SURE ABOUT

BRING TO BROKER MEETING

Finding & choosing a DSP

Most families start with someone they already trust.

Many self-directing families use family members or trusted community members as their first DSP. As needs grow, families recruit outside staff through word-of-mouth, community boards, faith communities, or staffing services. Your Support Broker can help you think the decision through.

BEFORE YOU DECIDE, GET CLEAR ON

- ✓ The hours, days, and specific tasks you need covered.
- ✓ Must-haves — driving, lifting, languages, experience, comfort with specific needs.
- ✓ Backup coverage — who steps in when your main DSP is out.

WHAT I NEED IN A DSP

HONESTLY, BOTH WAYS

The upside of choosing your own staff is real. So is the flip side: you also handle it if a hire doesn't work out. Going in clear-eyed makes both easier.

The hiring workflow & interview

Hiring well is a process, not luck. Build a simple system you run every time.

1 **Define the role.** Write a one-page job description — duties, hours, rate, qualifications. ☐

2 **Post & recruit.** Advertise the role; use IFDGS recruitment funds (up to $500/yr) if needed. ☐

3 **Interview.** You lead, with the participant present. Use a consistent question set. ☐

4 **Screen & verify.** Confirm every qualification before an offer 09.4 · 09.5. ☐

5 **Offer & onboard.** Extend the offer; complete paperwork with your FMCS provider. ☐

INTERVIEW QUESTION STARTERS

What drew you to this kind of work?

Tell me about someone you've supported or cared for.

If you arrived and the participant seemed unwell, what would you do?

What does your weekly availability look like?

CANDIDATE NOTES

THE RULE THAT PROTECTS YOU

No one is interviewed, offered a role, or starts work without you. Your Support Broker coaches you but never hires on your behalf.

Hiring requirements & documentation

What Maryland requires before a new DSP can work. Your FMCS provider guides and processes most of this.

Age & ID

Every staff member must be at least 18 years old with valid ID.

Criminal background check

Required for every employee — run and paid for by your FMCS provider as part of onboarding. You (as employer) choose either a Maryland state check via fingerprinting (CJIS) or a national check covering everywhere the person lived or worked in the past 7 years.

CPR & First Aid

Required before the first shift — completed in-person or hybrid. Online-only does not qualify.

Child Protective Services screening

Required for any employee under 18. The FMCS reimburses related costs, including notarization.

EVV & service training

Electronic Visit Verification is required for Personal Supports, Enhanced, and Respite; some services need additional training under the waiver.

Requirements change. This reflects the DDA Self-Directed Services Manual (revised May 11, 2026). The next page 09.5 lists exactly what to gather. Always confirm current requirements with your FMCS provider and Support Broker before hiring.

BACKGROUND CHECK TYPE WE USE

CONFIRMED WITH FMCS ON

New DSP — document checklist

The items to gather for every new staff person. Check them off as you go.

DSP NAME

TARGET START DATE

- [ ] Driver's license (copy)
- [ ] CPR / First Aid certification — in-person or hybrid
- [ ] Car insurance (if the DSP will provide transportation)
- [ ] Direct deposit form or a voided check
- [ ] Copy of Social Security card / SSN
- [ ] Completed New Hire Packet(s)
- [ ] FMCS onboarding completed
- [ ] References checked
- [ ] Signed job description / staff agreement on file
- [ ] Added to Staff Directory & Credential Tracker 05.2 · 05.3

Your FMCS provider runs the required criminal background check as part of onboarding, so it's covered when FMCS onboarding is complete.

Hiring a family member

Allowed and common — with a few specific rules.

Hour limits

A relative, LRP, or guardian cannot work more than 40 hours per week per participant — counted across all waiver services (as employee, individual provider, or through any provider). Hours beyond 40 aren't paid with waiver funds.

Support Broker required

When a relative, legally responsible person, representative payee, or legal guardian serves as paid staff or representative, Support Broker Services are required.

Service limits

Relatives, LRPs, and guardians may not provide Nursing Support Services. Your CCS and broker confirm which services apply to your plan.

Same paperwork

Family DSPs complete the same documents, certifications, and FMCS onboarding as any other DSP.

The Reporting Form

When a relative, LRP, or guardian provides waiver services, the arrangement is documented on the DDA Family-as-Staff Reporting Form (a Smartsheet form; it replaced the old paper form). It applies to any PCP submitted on or after April 28, 2026. Complete it with your CCS during plan development or amendment — not after — and keep a copy with your records.

One nuance worth knowing. A cousin is not a "relative" under the Manual, so a cousin hire doesn't trigger the relative-specific reporting. When unsure whether the form applies, ask your CCS before submitting the plan — ten minutes of asking beats a returned PCP.

FAMILY DSP NAME & RELATIONSHIP

REPORTING FORM COMPLETED ON

BRING TO BROKER MEETING

Onboarding a new DSP

Set a new staff person up to succeed in their first weeks.

DSP NAME

START DATE

- [ ] Shared my All About Me passport 04.2 so they know me quickly.
- [ ] Walked through routines, preferences, and goals.
- [ ] Reviewed the schedule, timekeeping, and how to report concerns.
- [ ] Shared the Emergency Backup Plan 15.4 and incident-reporting steps.
- [ ] Confirmed certification expiration dates and added them to my calendar.
- [ ] Confirmed how timesheets work with FMCS and the payroll deadline.
- [ ] Assigned a pay tier from my pay scale.

FIRST-WEEK NOTES & HOW IT'S GOING

Ending employment

Employer Authority includes ending employment when needed. Do it respectfully and by the book.

1. **Document.** Write the specific reasons and dates. Keep it factual. ☐
2. **Notify FMCS.** They handle final payroll, taxes, and records. ☐
3. **Communicate.** Tell the employee clearly; the participant leads or is present. ☐
4. **Final pay.** Submit the final timesheet to the FMCS provider. ☐
5. **Collect & revoke.** Collect keys, documents, and property; revoke access. ☐
6. **Cover the gap.** Activate your Emergency Backup Plan 15.4. ☐
7. **Replace & file.** Recruit a replacement; file the documentation. ☐

Per the DDA Manual, your Support Broker coaches and supports you but does not make hiring or termination decisions and does not act on your behalf. Follow all employment laws — you are the legal employer.

DOCUMENTATION — REASONS, DATES, WHAT WAS SAID

Timesheets & Clocking In

1 ENROLL
2 PCP
3 BUDGET
4 HIRING
5 TIME
6 MILEAGE
7 CADENCE

Once staff start, this is the rhythm that keeps them paid — and keeps you compliant. Electronic check-in, approving time, and payroll.

Timesheets, EVV & getting paid 10.1

Hours & timesheet log 10.2

P5

BEFORE YOU START THIS TAB

Only you approve time and authorize overtime. Your approval is what authorizes payment — which is why it's yours alone to give.

Timesheets, EVV & getting paid

How your staff clock in, how they get paid, and the one rule that protects you.

Electronic Visit Verification (EVV)

EVV is required for Personal Supports, Personal Supports-Enhanced, and Respite. Staff clock in and out electronically at the start and end of each shift, verifying the visit happened.

HOW PAY WORKS

1. Staff log their hours (by EVV or timesheet).
2. You approve the time — your approval is what authorizes payment.
3. Your FMCS runs payroll on a set schedule and pays your staff.

MY FMCS PAYROLL CUTOFF

PAY DATES

THE RULE THAT PROTECTS YOU

Only you approve time and authorize overtime. Fix any error through your FMCS's correction process on the day it happened — never move hours between days.

HOW CORRECTIONS WORK WITH MY FMCS — THE STEPS, IN MY WORDS

Hours & timesheet log

Track hours worked and what you've approved for payroll.

DATE	STAFF	START	END	HOURS	APPROVED

APPROVE ONLY WHAT HAPPENED

This log is your own record next to the EVV system's — useful when a correction is needed, and at renewal when you need to show how hours were actually used.

PHASE SIX · ONGOING

Mileage & Staying Compliant

Travel, honest records, and incidents — the corners families most often trip on, made simple. These habits run in the background from day one, forever.

Mileage rules & log 11.1
Approving time & staying clean 11.2
Incident reporting 11.3
Incident report form 11.4

P6

BEFORE YOU START THIS TAB

Know the incident protocol before you need it. When in doubt whether something is reportable, the answer is almost always yes.

Mileage rules & log

One of the most misunderstood corners of self-direction — and one of the simplest once you know the test.

THE THREE-CONDITION TEST — ALL THREE AT ONCE

In the car

The participant is in the vehicle. Errands run for them without them aboard don't qualify.

On the clock

Services are actively being rendered during the trip — the drive is part of delivering support.

In the community

The destination is within the participant's community, consistent with the plan.

> **The exclusion families miss:** medical-appointment travel is excluded — it has its own transportation pathways. Don't log medical runs here, however support-like the trip feels. And the PCP should document the goal the travel serves.

DATE	DESTINATION	PURPOSE (GOAL)	MILES	WHO WAS IN VEHICLE

Approving time & staying clean

Most program fraud starts small, in arrangements that felt harmless. Your approval is testimony — so it's worth knowing the line.

WHAT CROSSES THE LINE — EVEN ONCE, EVEN AS A FAVOR

- ✗ Approving time for a shift that didn't happen — or moving hours to a different day.
- ✗ Clocking a staff member in while they're actually somewhere else, or one person working under another's name.
- ✗ Logging mileage that fails the three-condition test, or logging medical runs as community mileage.
- ✗ A paycheck kickback — staff returning part of their wage to the household in any form.
- ✗ Signing documentation for services no one rendered.

HOW TO STAY CLEAN, HONESTLY

Approve only what happened. Fix mistakes in the open through your FMCS's correction process — errors are human, concealment is the problem.

When something feels clever, that's the tell. Ask your CCS or FMCS first.

Keep money and care separate. No side payments, no arrangements outside the FMCS's payroll.

If you see something, report it — to your FMCS, CCS, or DDA.

THE LINE, IN ONE SENTENCE

Every dollar of the budget pays for real support, really delivered, honestly recorded. Hold that line, and fraud stays a word other households worry about.

Incident reporting

The Policy on Reportable Incidents and Investigations (PORII) applies to every participant who self-directs. The participant, CCS, Support Broker, and all team members must report incidents.

TYPE I — REVIEWED BY OHCQ

- Abuse · Neglect
- Death
- Hospital admissions
- Injuries
- Medication errors
- Choking

TYPE II — REVIEWED BY DDA

- Law enforcement / fire / EMS
- Theft
- Unexpected or risky absence
- Restraints

HOW TO REPORT

The CCS always reports incidents in **PCIS2**. The participant, Support Broker, or team member reports by calling the participant's CCS. If the CCS is involved or unavailable, report directly to the **DDA Regional Office**.

Call 911 first in a medical or safety emergency. Then report through PORII as soon as the person is safe. When in doubt whether something is reportable, the answer is almost always yes.

MY CCS — DIRECT NUMBER

DDA REGIONAL OFFICE

SHARE WITH EVERY DSP

Incident report

A ready-to-use record. Complete one for any reportable incident and keep a copy with your records.

PARTICIPANT

DATE & TIME

LOCATION

TYPE (I OR II)

WHAT HAPPENED

WHO WAS INVOLVED

ACTION TAKEN

REPORTED TO & BY (DATE)

The Monthly Cadence

Once staff are working and the plan is running, self-direction settles into a rhythm — the weekly engine, the monthly broker meeting, and the questions that keep everything on track.

The month on a page 12.1
Weekly staff schedule 12.2
Appointments 12.3
Medications 12.4
Weekly check-in 12.5
Monthly meeting prep 12.6
Your monthly meeting 12.7
Question bank 12.8 · 12.9
Family communication log 12.10

P7

START WITH ONE PAGE

If you only keep one page in this whole book current, make it 12.1 — the month on a page. It carries the week, the budget read, and the credentials that are about to lapse.

The month on a page

The one page worth keeping on the fridge. Three reads, twenty minutes, once a month.

MONTH

1 · THE BUDGET READ

Planned to use by now

Actually used

What explains the difference

2 · CREDENTIALS EXPIRING IN 90 DAYS

WHO	WHAT	EXPIRES

3 · THE FOUR WEEKS — COVERAGE, GAPS, AND WHAT HAPPENED

WEEK	COVERAGE GAPS / CHANGES	WENT WELL / NEEDS ATTENTION
01		
02		
03		
04		

TO RAISE AT THE BROKER MEETING

DATES AHEAD THIS MONTH

BRING TO BROKER MEETING

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TO RAISE AT THE BROKER MEETING

DATES AHEAD THIS MONTH

BRING TO BROKER MEETING

Weekly staff schedule

Who's on, when — plus your backups.

DAY	WHO / HOURS	NOTES
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

COVERAGE NOTES & BACKUPS

Weekly staff schedule

Who's on, when — plus your backups.

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Saturday		
Sunday		

COVERAGE NOTES & BACKUPS

Appointments

Everywhere you need to be, and what to remember.

DATE / TIME	WHO / WHERE	REASON	NOTES / FOLLOW-UP

Remember: travel to and from medical appointments is **not** billable community mileage 11.1.

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Everywhere you need to be, and what to remember.

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DATE / TIME	WHO / WHERE	REASON	NOTES / FOLLOW-UP

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Medications

Keep this current and bring it to every medical visit.

MEDICATION	DOSE	WHEN	PRESCRIBER	NOTES

A medication error is a reportable incident 11.3. Keeping this page current is how staff avoid one.

BRING TO EVERY MEDICAL VISIT

Weekly check-in

Five minutes on Sunday. Note how the week went and what to bring up with your team.

WEEK OF

HOURS USED THIS WEEK

WHAT WENT WELL

WHAT WAS HARD / NEEDS ATTENTION

TO BRING UP WITH MY TEAM

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MEETING DATE

TIME

SINCE LAST MEETING, WHAT WENT WELL?

SINCE LAST MEETING, WHAT DIDN'T GO WELL?

QUESTIONS & DECISIONS I NEED HELP THINKING THROUGH

COMPLIANCE / PAPERWORK ITEMS I'M UNSURE ABOUT

BRING TO BROKER MEETING

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BRING TO BROKER MEETING

Your monthly meeting

Every month your Support Broker meets with you for about 1–2 hours. Here's the rhythm — you get about 4 hours of broker time a month, with more available through cost savings if needed.

1	**Check-in**	How are you? Happy with your services? Any concerns?
2	**PCP review**	When does your plan expire? Time to plan renewal?
3	**Budget review**	How much spent, how much left, on track?
4	**Staff check**	Meeting expectations? Scheduling issues? Certs current?
5	**Incident review**	Anything to report? Do staff know how to report?
6	**Action items**	What happens before next meeting, and who's responsible?

ACTION ITEMS & WHO OWNS THEM

Write your questions down before the meeting so nothing slips your mind (use the prep page, 12.6). This is your time with your broker.

Question bank

Questions families wish they'd asked earlier. Bring these to meetings or save them for emails.

To ask your CCS

- Are we on track for plan-year goals?
- Are there services we're authorized for that we're not using?
- What triggers a plan modification?
- Approaching APD: how should I prepare, and what documentation should I bring?
- Have any service definitions changed since last APD?

To ask your FMCS provider

- How do I onboard a new DSP?
- When are payroll deadlines each month?
- How do I correct a timesheet error?
- Which of my DSPs are approaching credential expirations?
- What documents do I need for tax season?

To ask your Support Broker

- How is our authorized budget tracking — over, under, on track?
- What compliance items are coming in the next 90 days?
- What's the most important thing to focus on this month?
- Is there anything I should be doing that I'm not?

Question bank *continued*

For specific moments — keep these for when they apply.

If you're considering a service change

- What's the process for modifying our plan?
- How long does a modification typically take?
- Are there interim arrangements while it's processed?

In your first month with a broker

- How will you communicate between meetings?
- What documentation will you provide me?
- What signals would tell me something's drifting?

If something feels off

- I want to raise [specific concern] — how would you approach it?
- Is what I'm experiencing typical?
- If we wanted to make a change, what's the next step?

THE BIGGER PATTERN

Families that ask thoughtful questions get better service — not because providers prefer them, but because good questions surface issues earlier, when they're easier to fix.

Family communication log

Track substantive communication with your care team — useful for noticing patterns and remembering decisions.

DATE	WITH WHOM	TOPIC	DECISION / OUTCOME

PART III · KEEP ON HAND

The Year & Renewal

The Annual Plan Date is the moment every family learns to respect. This section turns it from a source of stress into a countdown you control — plus how modifications and revisions work.

Annual plan review worksheet 13.1

Annual Plan Date countdown 13.2

Changes between plan years 13.3

13

BEFORE YOU START THIS TAB

A family that starts at 90 days almost never gets caught out.

Annual plan review worksheet

Use this 60–90 days before your Annual Plan Date to prepare for the review with your CCS and broker.

CURRENT PLAN YEAR ENDS

APD REVIEW MEETING DATE

LOOKING BACK — WHAT WORKED WELL? WHAT DIDN'T?

WHAT'S CHANGED IN OUR FAMILY'S SITUATION?

GOALS FOR NEXT PLAN YEAR

SERVICE CHANGES TO DISCUSS

BRING TO BROKER MEETING

Annual Plan Date countdown

Three checkpoints. Set each reminder the day you fill in your APD.

MY ANNUAL PLAN DATE (APD)

- [ ] **90 days out — flag it**

  Start the Annual Plan Review worksheet 13.1. Tell your broker you want to prep. Review budget utilization for Cost Savings.

- [ ] **60 days out — draft**

  Draft goals and service changes. Gather documents 14.1.

- [ ] **30 days out — confirm**

  Confirm the review meeting date. Bring this book. Nothing should be a surprise now.

- [ ] **Plan renewed — update**

  Update My Plan at a Glance 07.2, My Budget at a Glance 08.4, and the Service Hours Log 08.5 with the new numbers.

Why the drumbeat? If your plan isn't renewed on time it goes into auto-extend — services continue, but raises, new services, new goods, and cost-savings hours all freeze until the new plan is approved.

REMINDER SET — 90

REMINDER SET — 60

REMINDER SET — 30

BRING TO BROKER MEETING

Changes between plan years

Life changes. Your plan can too — but you have to raise it with your CCS.

A budget modification moves money

Ask for one when needs change, a category is over- or under-spent, unused funds could serve you better elsewhere, a new service is needed, or a rate changes. It reallocates dollars within your authorization.

A PCP revision changes the plan itself

Needed when a significant change makes the current plan inadequate — a health or living-situation change, a new goal or service, loss of a provider, or a safety concern. It changes the goals and/or services, not just the money.

CHANGES I NEED TO RAISE WITH MY CCS

BRING TO BROKER MEETING

My Documents

Keep copies of what matters where you can find them quickly. Good records protect you at renewal, at tax time, and if anyone ever asks.

Important documents checklist 14.1

14

WHAT GOOD RECORDS LOOK LIKE

Written soon after the event, specific, dated, and filed where you can find them again in under a minute.

Important documents

Keep copies where you can find them quickly. Check them off as you gather them.

- [ ] Current Person-Centered Plan (PCP)
- [ ] Approved budget sheet
- [ ] Participant / Support Broker agreement
- [ ] Notice of Privacy Practices (NPP) acknowledgment
- [ ] Staff job descriptions & signed staff agreements
- [ ] Background check & fingerprint confirmations
- [ ] Staff certifications (CPR / First Aid)
- [ ] Driver's license & car insurance (if providing transportation)
- [ ] FMCS onboarding, New Hire Packet, direct deposit, SSN copy
- [ ] Timesheets / invoices
- [ ] Reportable incident documentation (if any)
- [ ] Important IDs and Medical Assistance card
- [ ] Emergency information sheet 15.1

WHERE EACH OF THESE LIVES

Use the disc-bound pocket in this tab for the originals you grab most.

PART III · KEEP ON HAND

Emergency & Safety

The pages you hope never to need — and will be grateful to have. Fill them in once, keep them visible, and make sure every staff person knows the plan and where it lives.

Emergency information 15.1

My emergency plan 15.2

Go-bag & emergency contacts 15.3

Emergency backup plan 15.4

15

SHARE THESE FOUR PAGES

Walk every DSP through this tab during onboarding, and tell them exactly where this book lives.

Emergency information

Fill this in and keep it visible. In an emergency, call 911 first.

FULL NAME

DATE OF BIRTH

BLOOD TYPE / ALLERGIES

CONDITIONS TO KNOW

EMERGENCY CONTACT

RELATIONSHIP

PHONE

DOCTOR / PHONE

MEDICATIONS & IMPORTANT NOTES

KEEP VISIBLE · SHARE WITH EVERY DSP

My emergency plan

What to do, who to call, and what to grab — decided calmly now, so no one has to figure it out in the moment.

IN A MEDICAL EMERGENCY

CALL 911 FIRST. THEN NOTIFY — IN THIS ORDER (NAME & NUMBER)

PREFERRED HOSPITAL

PHARMACY

SIGNS SPECIFIC TO ME & HOW TO RESPOND

WARNING SIGNS TO WATCH FOR, AND WHAT HELPS IN A CRISIS

IF WE HAVE TO LEAVE THE HOME (FIRE, EVACUATION)

MEETING PLACE OUTSIDE

BACKUP CAREGIVER & PHONE

POWER OUTAGE / MEDICAL EQUIPMENT

EQUIPMENT THAT NEEDS POWER, BACKUP PLAN, UTILITY NUMBER

SHARE WITH EVERY DSP

Go-bag & emergency contacts

Keep a ready bag by the door. Check items as you pack them.

GRAB-AND-GO CHECKLIST

- [ ] Medications (list on 12.4) + a few days' supply
- [ ] Copy of Emergency Information 15.1 & insurance / MA card
- [ ] Any medical equipment, chargers, and backup batteries
- [ ] Comfort items that help me settle
- [ ] Water, snacks, and a change of clothes
- [ ] Contact list (below) and a little cash

EMERGENCY CONTACTS

NAME	RELATIONSHIP / ROLE	PHONE

SHARE WITH EVERY DSP

Emergency backup plan

Every participant needs a plan for when a shift falls through. Complete it together and review it at least once a year.

PARTICIPANT

PRIMARY STAFF

BACKUP STAFF (NAME & CONTACT)

IF THIS HAPPENS → DO THIS

SCENARIO	WHO TO CALL	ACTION
Staff no-show / call-out		
Illness / extended leave		
Severe weather / disaster		
Medical emergency		

Remember: backup staff must meet the same qualifications as primary staff — 18+, background check, and in-person/hybrid CPR/First Aid — before they ever cover a shift.

SHARE WITH EVERY DSP

PART III · KEEP ON HAND

Notes & Where to Get Help

Room to think, the numbers worth keeping, and a reminder of the most important thing: you belong in the driver's seat.

Notes 16.1

Where to get help 16.2

16

USE 16.1 FOR THIS

Every new term that shows up on paperwork. Write it down, then ask your CCS or broker to define it — so you never look it up twice.

Notes

Room for anything — new terms, questions, reminders.

Where to get help

Start with your team. They're here for exactly this.

Maryland DDA

General questions: **844-253-8694** · health.maryland.gov/dda

Self-Directed Services guidance, the Guide to Services, and forms are posted on the DDA website.

Your team, first

For plan questions, start with your **CCS**. For employer and staffing questions, your **Support Broker**. For payments, background checks, and paperwork, your **FMCS provider**. Names and numbers live on 05.1 and 05.4.

You belong in the driver's seat.

Self-direction can feel like a lot at first. Take it one page at a time. Ask questions. This is your life, your services, your choices — and you are allowed to ask for help carrying it.

OTHER NUMBERS WORTH KEEPING

This planner is an independent organizing tool from Good Order & Co.. It is not affiliated with, endorsed by, or sponsored by the Maryland Department of Health or the Developmental Disabilities Administration, and it is not legal, medical, or compliance advice. Program rules, service definitions, and requirements change — always follow the guidance of your team and the current DDA Self-Directed Services Manual (revised May 11, 2026) and Guide to Services at health.maryland.gov/dda.

SELF-DIRECTION, SUPPORTED.

You belong in the driver's seat.

An independent family companion for Maryland self-directed services — built by a certified DDA Support Broker.