

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES
Behavioral Health and Developmental Disabilities Administration

SELF DETERMINATION PRACTICE & FISCAL INTERMEDIARY GUIDELINE

INTRODUCTION

Self-determination is the value that individuals served by the community mental health system must be supported to have a meaningful life in the community. The components of a meaningful life include: work or volunteer activities that are chosen by and meaningful to the individual, reciprocal relationships with other individuals in the community, and daily activities that are chosen by the individual and support the individual to connect with others and contribute to his/her community. With arrangements that support self-determination, individuals have control over an individual budget for their mental health services and supports to live the lives they want in the community. The community mental health system must offer arrangements that support self-determination, assuring methods for the individual to exert direct control over how, by whom, and to what ends they are served and supported.

Person-centered planning (PCP) is a central element of self-determination. PCP is the crucial medium for expressing and transmitting personal needs, wishes, goals, and aspirations. As the PCP process unfolds, the appropriate mix of paid/non-paid services and supports to assist the individual in realizing/achieving these personally defined goals and aspirations are identified.

The principles of self-determination recognize the rights of individuals supported by the community mental health system to have a life with freedom, and to access and direct needed supports that assist in the pursuit of their life with responsible citizenship. These supports function best when they build upon natural community experiences and opportunities. The individual determines and manages needed supports in close association with chosen friends, family, neighbors, and co-workers as a part of an ordinary community life.

PCP and self-determination underscore a commitment in Michigan to move away from traditional service approaches for individuals receiving services from the community mental health system. In Michigan, the flexibility provided through the Medicaid Managed Specialty Supports and Services Plan (MSSSP), together with the Michigan Mental Health Code (MMHC) requirements of PCP, have reoriented organizations to respond in new and more meaningful ways. Recognition has increased among providers and professionals that many individuals may not need, want, or benefit from a clinical regimen, especially when imposed without clear choice. Many provider agencies are learning ways to better support the individual to choose, participate in, and accomplish a life with personal meaning. This has meant, for example, reconstitution of segregated programs into non-segregated options that connect better with community life.

Self-determination builds upon the choice already available within the community mental health system. In Michigan, all Medicaid beneficiaries who services through the community mental health system have a right under the federal Balanced Budget Act (BBA) to choose the providers of the services and supports that are identified in their Individual Plan of Services (IPOS) “to the extent possible and appropriate.” Qualified providers chosen by the beneficiary, but who are not currently in the network or on the provider panel, should be placed on the provider panel. Within the Prepaid Inpatient Health Plan (PIHP), choice of providers must be maintained at the provider level. The individual must be able to choose from at least two providers of each covered support and service and must be able to choose an out-of-network provider under certain circumstances. Provider choice, while critically important, must be distinguished from arrangements that support self-determination. The latter arrangements extend individual choice to his/her control and management over providers (i.e., directly employs or contracts with providers), service delivery, and budget development and implementation.

In addition to choice of provider, individuals using mental health services and supports have access to a full-range of approaches for receiving those services and supports. Agencies and providers have obligations and underlying values that affirm the principles of choice and control. Yet, they also have long-standing investments in existing programs and services, including their investments in capital and personnel resources. Some program approaches are not amenable to the use of arrangements that support self-determination because the funding and hiring of staff are controlled by the provider (for example, day programs and group homes) and thus, preclude individual employer or budget authority.

It is not anticipated that every individual will choose arrangements that support self-determination. Traditional approaches are offered by the system and used very successfully by many individuals. An arrangement that supports self-determination is one method for moving away from predefined programmatic approaches and professionally managed models. The goals of arrangements that support self-determination, on an individual basis, are to dissolve the isolation of individuals with disabilities, reduce segregation, promote participation in community life, and realize full citizenship rights.

The Michigan Department of Health and Human Services (MDHHS) supports the desire of individuals to control and direct their specialty mental health services and supports to have a full and meaningful life. At the same time, the MDHHS knows that the system change requirements, as outlined in this guideline, are not simple in their application. The MDHHS is committed to continuing dialogue with stakeholders; to the provision of support, direction, and technical assistance so the system may make successful progress to resolve technical difficulties and apparent barriers; and to achieve real, measurable progress in the implementation of this guideline. This guideline is intended to clarify the essential aspects of arrangements that promote opportunity for self-determination and define required elements of these arrangements.

PURPOSE

- I. To provide policy direction that defines and guides the practice of self-determination within the community mental health system (as implemented by the PIHPs and the Community Mental Health Services Programs (CMHSPs))¹ in order to assure arrangements that support self-determination are made available as a means for achieving personally-designed plans of specialty mental health services and supports.

CORE ELEMENTS

- I. Individuals are provided with information about the principles of self-determination and the possibilities, models, and arrangements involved. Individuals have access to the tools and mechanisms supportive of self-determination, upon request. Self-determination arrangements commence when the PIHP and/or the CMHSP and the individual reach an agreement on an IPOS, the amount of mental health and other community resources to be authorized to accomplish the IPOS, and the arrangements through which authorized community mental health resources will be controlled, managed, and accounted for.
- II. Within the obligations that accompany the use of funds provided to them, the PIHPs and/or the CMHSPs shall ensure that their services' planning and delivery processes are designed to encourage and support individuals to decide and control their own lives. The PIHP and/or the CMHSP shall offer and support easily accessed methods for individuals to control and direct an individual budget. This includes providing them with methods to authorize and direct the delivery of specialty mental health services and supports from qualified providers selected by the individual.
- III. Individuals receiving services and supports through the community mental health system shall direct the use of resources to choose meaningful specialty mental health services and supports in accordance with their IPOS as developed through the PCP process.
- IV. Fiscal responsibility and the wise use of public funds shall guide the individual and the PIHP and/or the CMHSP in reaching an agreement on the allocation and use of funds comprising an individual budget. Accountability for the use of public funds must be a shared responsibility of the PIHP and/or the CMHSP and the individual, consistent with the fiduciary obligations of the PIHP and/or the CMHSP.
- V. Realization of the principles of self-determination requires arrangements that are partnerships between the PIHP and/or the CMHSP and the individual. They require the active commitment of the PIHP and/or the CMHSP to provide a range of options for individual choice and control of personalized provider relationships within an overall environment of person-centered supports.

¹ Both PIHPs and CMHSPs are referenced throughout the document because they both have contractual obligations to offer and support implementation of arrangements that support self-determination. However, it is understood that, on an individual basis, self-determination agreements are executed at the CMHSP level.

- VI. In the context of this partnership, the PIHPs and/or the CMHSPs must actively assist individuals with prudently selecting qualified providers and otherwise support them with successfully using resources allocated in an individual budget.
- VII. Issues of wellness and well-being are central to assuring successful accomplishment of an individual's IPOS. These issues must be addressed and resolved using the PCP process, balancing individual preferences, and opportunities for self-determination with the PIHP and/or the CMHSP obligations under federal and state law and applicable Medicaid Waiver regulations. Resolutions should be guided by the individual's preferences and needs and implemented in ways that maintain the greatest opportunity for personal control and direction.
- VIII. Self-determination requires recognition that there may be strong inherent conflicts of interest between an individual's choices and current methods of planning, managing, and delivering specialty mental health services and supports. The PIHP and/or the CMHSP must watch for and seek to minimize or eliminate either potential or actual conflicts of interest between itself and its provider systems, and the processes and outcomes sought by the individual.
- IX. Arrangements that support self-determination are administrative mechanisms, allowing an individual to choose, control, and direct providers of specialty mental health services and supports. Except for fiscal intermediary services, these mechanisms are not themselves covered services within the array of the State Plan and the MMSSSP. Self-determination arrangements must be developed and operated within the requirements of the respective contracts between the PIHPs and the CMHSPs and the MDHHS and in accordance with federal and state law. Using arrangements that support self-determination does not change an individual's eligibility for a particular specialty mental health services and supports.
- X. The requirements for documentation of Medicaid-funded supports and services, financial accountability for Medicaid funds, and the PIHP and/or the CMHSP monitoring requirements apply to services and supports acquired using arrangements that support self-determination.
- XI. Arrangements that support self-determination involve the MMSSSP, and therefore, the investigative authority of the Office Recipient Rights (ORR) applies.

POLICY

- I. Opportunity to pursue and obtain an IPOS incorporating arrangements that support self-determination shall be established in the PIHP and/or the CMHSP for adults with developmental disabilities (DD) and mental illness. The PIHP and/or the CMHSP shall develop and make available a set of methods that provide opportunities for the individual to control and direct their specialty mental health services and supports arrangements.

- A. Participation in self-determination shall be a voluntary option on the part of every individual.
 - B. Individuals involved in self-determination shall have the authority to select, control, and direct their own specialty mental health services and supports arrangements by responsibly controlling the resources allotted in an individual budget towards accomplishing the goals and objectives in their IPOS.
 - C. The PIHP and/or the CMHSP shall assure that full and complete information about self-determination and the manner which it may be accessed and applied is provided to everyone receiving mental health services from its agency. This shall include specific examples of alternative ways that an individual may use to control and direct an individual budget, and the obligations associated with doing this properly and successfully.
 - D. Self-determination shall not serve as a method for the PIHP and/or the CMHSP to reduce its obligations to an individual or avoid the provision of needed specialty mental health services and supports.
 - E. The PIHP and/or the CMHSP shall actively support and facilitate an individual's application of the principles of self-determination in the accomplishment of his/her IPOS.
- II. Arrangements that support self-determination shall be made available to every individual for whom an agreement on an IPOS along with an acceptable individual budget has been reached. An individual initiates this process by requesting the opportunity to participate in self-determination. For the purposes of self-determination, reaching agreement on the IPOS must include delineation of the arrangements that will, or may, be applied by the individual to select, control, and direct the provision of those services and supports.
- A. Development of an individual budget shall be done in conjunction with development of an IPOS using a PCP process.
 - B. As part of the planning process leading to an agreement about self-determination, the arrangements that will, or may, be applied by the individual to pursue self-determination shall be delineated and agreed to by the individual and the PIHP and/or the CMHSP.
 - C. The individual budget represents the expected or estimated costs of a concrete approach to accomplishing the individual's IPOS.
 - D. The amount of the individual budget shall be formally agreed to by both the individual and the PIHP and/or the CMHSP before it may be authorized for use by the individual. A copy of the individual budget must be provided to the individual prior to the onset of a self-determination arrangement.

- E. Proper use of an individual budget is of mutual concern to the PIHP and/or the CMHSP and the individual.
1. Mental health funds included in an individual budget are the assets and responsibility of the PIHP and/or the CMHSP and must be used consistent with statutory and regulatory requirements. Authority over their direction is delegated to the individual for the purpose of achieving the goals and outcomes contained in the individual's IPOS. The limitations associated with this delegation shall be delineated to the individual as part of the process of developing the IPOS and authorizing the individual budget.
 2. An agreement shall be made in writing between the PIHP and/or the CMHSP and the individual delineating the responsibility and the authority of both parties in the application of the individual budget, including how communication will occur about its use. The agreement shall reference the IPOS and individual budget, which shall all be provided to the individual. The directions and assistance necessary for the individual to properly apply the individual budget shall be provided to the individual in writing when the agreement is finalized.
 3. An individual budget, once authorized, shall be provided to the individual. An individual budget shall be in effect for a specified period of time. Since the budget is based upon the individual's IPOS, when the IPOS needs to change, the budget may need to be reconsidered as well. In accordance with the Person-Centered Planning Policy and Practice Guideline, the IPOS may be reopened and reconsidered whenever the individual, or the PIHP and/or the CMHSP, feels it needs to be reconsidered.
 4. The individual budget is authorized by the PIHP and/or the CMHSP for the purpose of providing a defined amount of resources that may be directed by an individual to pursue accomplishing his/her IPOS. An individual budget shall be flexible in its use.
 - a. When an individual makes adjustments in the application of funds in an individual budget, these shall occur within a framework that has been agreed to by the individual and the PIHP and/or the CMHSP, and described in an attachment to the individual's self-determination agreement.
 - b. An individual's IPOS may set forth the flexibility that an individual can exercise to accomplish his/her goals and objectives. When a possible use of services and supports is identified in the IPOS, the individual does not need to seek prior approval to use the services in this manner.
 - c. If an individual desires to exercise flexibility in a manner that is not identified in the IPOS, then the IPOS must be modified before the adjustment may be made. The PIHP and/or the CMHSP shall attempt to address each situation in an expedient manner appropriate for the complexity and scope of the change.

- d. Funds allotted for specialty mental health services may not be used to purchase services that are not specialty mental health services. The contracts with providers of specialty mental health services should be fiscally prudent.
 5. Either party – the PIHP and/or the CMHSP or the individual – may terminate a self-determination agreement, and therefore, the self-determination arrangement. Common reasons that the PIHP and/or the CMHSP may terminate an agreement after providing support and other interventions described in this guideline, include, but are not limited to: failure to comply with Medicaid documentation requirements, failure to stay within the authorized funding in the individual budget, inability to hire and retain qualified providers, and conflict between the individual and providers that results in an inability to implement the IPOS. Prior to the PIHP and/or the CMHSP terminating an agreement, and unless it is not feasible, the PIHP and/or the CMHSP shall inform the individual of the issues that have led to consideration of a discontinuation or alteration decision, in writing, and provide an opportunity for problem resolution. Typically, resolution will be conducted using the PCP process with termination being the option of choice if other mutually agreeable solutions cannot be found. In any instance of PIHP and/or the CMHSP discontinuation or alteration of a self-determination arrangement, the local processes for dispute resolution may be used to address and resolve the issues.
 6. Termination of a Self-Determination Agreement by the PIHP and/or the CMHSP is not a Medicaid Fair Hearings issue. Only a change, reduction, or termination of Medicaid services can be appealed through the Medicaid Fair Hearings process, not the use of arrangements that support self-determination to obtain those services.
 7. Discontinuation of a self-determination agreement, by itself, shall neither change the individual's IPOS, nor eliminate the obligation of the PIHP and/or the CMHSP to assure specialty mental health services and supports required in the IPOS are provided.
 8. In any instance of the PIHP and/or the CMHSP discontinuation or alteration, the individual must be provided an explanation of applicable appeal, grievance, and dispute resolution processes and (when required) appropriate notice.
- III. Assuring authority over an individual budget is a core element of self-determination. This means that the individual may use, responsibly, an individual budget as the means to authorize and direct their providers of services and supports. The PIHP and/or the CMHSP shall design and implement alternative approaches that individuals electing to use an individual budget may use to obtain individual-selected and -directed provider arrangements.

- A. Within prudent purchaser constraints, an individual shall be able to access any willing and qualified provider entity that is available to provide needed specialty mental health services and supports.
- B. Approaches shall provide for a range of control options up to and including the direct retention of individual-preferred providers through purchase of services agreements between the individual and the provider. Options shall include upon the individual's request and in line with their preferences:
 - 1. Services/supports to be provided by an entity or individual currently operated by or under contract with the PIHP and/or the CMHSP.
 - 2. Services/supports to be provided by a qualified provider chosen by the individual with the PIHP and/or the CMHSP agreeing, to enter into a contract with that provider.
 - 3. Services/supports to be provided by an individual-selected provider with whom the individual executes a direct purchase-of-services agreement. The PIHP and/or the CMHSP shall provide guidance and assistance to assure that agreements to be executed with individual-selected providers are consistent with applicable federal regulations governing provider contracting and payment arrangements.
 - a. Individuals shall be responsible for assuring those individuals and entities selected and retained meet applicable provider qualifications. Methods that lead to consistency and success must be developed and supported by the PIHP and/or the CMHSP.
 - b. Individuals shall assure that written agreements are developed with each provider entity or individual that specify the type of service or support, the rate to be paid, and the requirements incumbent upon the provider.
 - c. Copies of all agreements shall be kept current, and shall be made available by the individual, for review by authorized representatives of the PIHP and/or the CMHSP.
 - d. Individuals shall act as careful purchasers of specialty mental health services and supports necessary to accomplish their IPOS. Arrangements for services shall not be excessive in cost. Individuals should aim for securing a better value in terms of outcomes for the costs involved. Existing personal and community resources shall be pursued and used before public mental health system resources.

- e. Fees and rates paid to providers with a direct purchase-of-services agreement with the individual shall be negotiated by the individual, within the boundaries of the authorized individual budget. The PIHP and/or the CMHSP shall provide guidance as to the range of applicable rates and may set maximum amounts that an individual may spend to pay providers of specific services and supports.
 - f. Conflicts of interest that providers may have must be considered. For example, a potential provider may have a competing financial interest such as serving as the individual's landlord. If a provider with a conflict of interest is used, the conflict must be addressed in the relevant agreements. The Medicaid Provider Manual has directly addressed one conflict stating that, individuals cannot hire or contract with legally responsible relatives (for an adult, the individual's spouse) or with his/her legal guardian.
4. An individual shall be able to access one or more alternative methods to choose, control, and direct personnel necessary to provide direct support, including:
- a. Acting as the employer of record of personnel.
 - b. Access to a provider entity that can serve as employer of record for personnel selected by the individual (Agency with Choice).
 - c. The PIHP and/or the CMHSP contractual language with provider entities that assures individual selection of personnel and removal of personnel who fail to meet individual preferences.
 - d. Use of the PIHP- and/or the CMHSP-employed direct support personnel selected and retained by the individual.
5. An individual using self-determination shall not be obligated to utilize the PIHP and/or the CMHSP-employed direct support personnel or the PIHP- and/or the CMHSP-operated or -contracted program/service.
6. All direct support personnel selected by the individual, whether he/she is acting as employer of record or not, shall meet applicable provider requirements for direct support personnel, or the requirements pertinent to the particular professional services offered by the provider.
7. An individual shall not be required to select and direct needed provider entities or his/her direct support personnel if he/she does not desire to do so.

- IV. The PIHP and/or the CMHSP shall assist an individual using arrangements that support self-determination to select, employ, and direct his/her support personnel, to select and retain chosen qualified provider entities, and shall make reasonably available, consistent with the MDHHS Technical Advisory instructions, their access to alternative methods for directing and managing support personnel.
- A. The PIHP and/or the CMHSP shall select and make available qualified third-party entities that may function as fiscal intermediaries to perform employer agent functions and/or provide other support management functions as described in the Fiscal Intermediary Technical Requirement, in order to assist the individual in selecting, directing, and controlling providers of specialty services and supports.
- B. Fiscal intermediaries shall be under contract to the PIHP and/or the CMHSP or a designated sub-contracting entity. Contracted functions may include:
1. Payroll agent for direct support personnel employed by the individual (or chosen representative), including acting as an employer agent for IRS and other public authorities requiring payroll withholding and employee insurances payments.
 2. Payment agent for individual-held purchase-of-services and consultant agreements with providers of services and supports.
 3. Provision of periodic (not less than monthly) financial status reports concerning the individual budget, to both the PIHP/CMHSP and the individual. Reports made to the individual shall be in a format that is useful to the individual in tracking and managing the funds making up the individual budget.
 4. Provision of an accounting to the PIHP and/or the CMHSP for the funds transferred to it and used to finance the costs of authorized individual budgets under its management.
 5. Assuring timely invoicing, service activity, and cost reporting to the PIHP and/or the CMHSP for specialty mental health services and supports provided by individuals and entities that have a direct agreement with the individual.
 6. Other supportive services, as denoted in the contract with the PIHP and/or the CMHSP, that strengthen the role of the individual as an employer, or assist with the use of other agreements directly involving the individual in the process of securing needed services.

For a complete list of functions, refer to the Fiscal Intermediary Technical Requirement.

- C. The PIHP and/or the CMHSP shall assure that fiscal intermediary entities are oriented to and supportive of the principles of self-determination and able to work with a range of personal styles and characteristics. The PIHP and/or the CMHSP shall exercise due diligence in establishing the qualifications, characteristics, and capabilities of the entity to be selected as a fiscal intermediary, and shall manage the use of fiscal intermediaries consistent with the Fiscal Intermediary Technical Requirement and the MDHHS Technical Assistance Advisories addressing fiscal intermediary arrangements.
- D. An entity acting as a fiscal intermediary shall be free from other relationships involving the PIHP and/or the CMHSP or the individual that would have the effect of creating a conflict of interest for the fiscal intermediary in relationship to its role of supporting individual-determined services/supports transactions. These other relationships typically would include the provision of direct services to the individual. The PIHP and/or the CMHSP shall identify and require remedy to any conflicts of interest of the entity that, in the judgment of the PIHP and/or the CMHSP, interfere with the performance of a fiscal intermediary.
- E. The PIHP and/or the CMHSP shall collaborate with and guide the fiscal intermediary and each individual involved in self-determination to assure compliance with various state and federal requirements and to assist the individual in meeting his/her obligations to follow applicable requirements. It is the obligation of the PIHP and/or the CMHSP to assure that fiscal intermediaries are capable of meeting and maintaining compliance with the requirements associated with their stated functions, including those contained in the Fiscal Intermediary Technical Requirement.
- F. Typically, funds comprising an individual budget would be lodged with the fiscal intermediary, pending appropriate direction by the individual to pay individual-selected and -contracted providers. Where an individual selected and directed provider of services has a direct contract with the PIHP and/or the CMHSP, the provider may be paid by the PIHP and/or the CMHSP, not the fiscal intermediary. In that case, the portion of funds in the individual budget would not be lodged with the fiscal intermediary, but instead would remain with the PIHP and/or the CMHSP, as a matter of fiscal efficiency.

DEFINITIONS

Agency with Choice

A provider agency that serves as employer of record for direct support personnel, yet enables the individual using the supports to hire, manage, and terminate workers.

CMHSP

For the purposes of this policy, a Community Mental Health Services Program (CMHSP) is an entity operated under Chapter Two of the Michigan Mental Health Code, or an entity under contract with the CMHSP and authorized to act on its behalf in providing access to, planning for, and authorization of specialty mental health services and supports for individuals eligible for mental health services.

Fiscal Intermediary

A fiscal intermediary is an independent legal entity (organization or individual) that acts as a fiscal agent of the PIHP and/or the CMHSP for the purpose of assuring fiduciary accountability for the funds comprising an individual budget. A fiscal intermediary shall perform its duties as specified in a contract with the PIHP and/or the CMHSP or its designated sub-contractor. The purpose of the fiscal intermediary is to receive funds making up an individual budget and make payments as authorized by the individual to providers and other parties to whom an individual using the individual budget may be obligated. A fiscal intermediary may also provide a variety of supportive services that assist the individual in selecting, employing, and directing individual and agency providers. Examples of entities that might serve in the role of a fiscal intermediary include bookkeeping or accounting firms and local Arc or other advocacy organizations.

Individual

For the purposes of this policy, “individual” means a person receiving direct specialty mental health services and supports. The individual may select a representative to enter into the self-determination agreement and for other agreements that may be necessary for the individual to participate in arrangements that support self-determination. The individual may have a legal guardian. The role of the guardian in self-determination shall be consistent with the guardianship arrangement established by the court. Where an individual has been deemed to require a legal guardian, there is an extra obligation on the part of the CMHSP and those close to the individual to assure that the individual’s preferences and dreams drive the use of self-determination arrangements, and that the best interests of the individual are primary.

Individual Budget

An individual budget is a fixed allocation of public mental health resources denoted in dollar terms. These resources are agreed upon as the necessary cost of specialty mental health services and supports needed to accomplish an individual’s IPOS. The individual served uses the funding authorized to acquire, purchase, and pay for specialty mental health services and supports in his/her IPOS.

IPOS

An IPOS is the individual's Individual Plan of Services and/or Supports, as developed using a PCP process.

PIHP

For the purposes of this policy, a Prepaid Inpatient Health Plan (PIHP) is a managed care entity that provides Medicaid-funded mental health specialty services and supports in an area of the state.

Qualified Provider

A qualified provider is an individual worker, a specialty practitioner, professional, agency, or vendor that is a provider of specialty mental health services or supports that can demonstrate compliance with the requirements contained in the contract between the MDHHS and the PIHP and/or the CMHSP, including applicable requirements that accompany specific funding sources, such as Medicaid. Where additional requirements are to apply, they should be derived directly from the PCP process, and should be specified in the IPOS, or result from a process developed locally to assure the health and well-being of individuals, conducted with the full input and involvement of local individuals and advocates.

Self-Determination

Self-determination incorporates a set of concepts and values that underscore a core belief that individuals who require support from the public mental health system as a result of a disability should be able to define what they need in terms of the life they seek, have access to meaningful choices, and have control over their lives in order to build lives in their community (meaningful activities, relationships, and employment). Within Michigan's community mental health system, self-determination involves accomplishing system change to assure that services and supports for individuals are not only person-centered, but person-defined and person-controlled. Self-determination is based on four principles. These principles are:

FREEDOM: The ability for individuals, with assistance from significant others (e.g., chosen family and/or friends), to plan a life based on acquiring necessary supports in desirable ways, rather than purchasing a program. This includes the **freedom** to choose where and with whom one lives, who and how to connect to in one's community, the opportunity to contribute in one's own ways, and the development of a personal lifestyle.

AUTHORITY: The assurance for an individual with a disability to control a certain sum of dollars to purchase these supports, with the backing of their significant others, as needed. It is the **authority** to control resources.

SUPPORT: The arranging of resources and personnel, both formal and informal, to assist the individual in living his/her desired life in the community, rich in community associations and contributions. It is the **support** to develop a life dream and reach toward that dream.

RESPONSIBILITY: The acceptance of a valued role by the individual in the community through employment, affiliations, spiritual development, and caring for others, as well as accountability for spending public dollars in ways that are life-enhancing. This includes the **responsibility** to use public funds efficiently and to contribute to the community through the expression of responsible citizenship.

A hallmark of self-determination is assuring an individual the opportunity to direct a fixed amount of resources, which is derived from the PCP process and called an individual budget. The individual controls the use of the resources in his/her individual budget, determining, with the assistance of chosen allies, which services and supports he/she will purchase, from whom, and under what circumstances. Through this process, individuals possess power to make meaningful choices in how they live their life.

Specialty Mental Health Services

This term includes any service/support that can legitimately be provided using funds authorized by the PIHP and/or the CMHSP in the individual budget. It includes alternative services and supports as well as Medicaid-covered services and supports.