
COMMUNITY SERVICE BROKERING

Directive 1.32

Authorizing Code: [26B-6-403](#)

Rule: n/a

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Forms: PCAP, SWI Packet

Purpose

The community service broker model is only available to people with disabilities who have qualified for DSPD services and are on DSPD's waiting list, which includes: Physical Disabilities; Intellectual Disability and Related Conditions; and Acquired Brain Injuries.

Community service brokering is a community support that facilitates client and family education and direction to community resources that are outside the scope of services paid for by DHHS/DSPD. The Community Service Broker (CSB) is a skilled advisor who has knowledge in connecting people with disabilities to resources in the community that enhance the person's quality of life. The broker will guide or demonstrate how a person with a disability can access needed community supports and services. Brokers provide a technical role in the development of needs assessments and person-centered planning. This model promotes family preservation by assisting the person with developing natural supports; and navigating and connecting the person and the person's representatives to resources in the community that enhance the person's quality of life.

Division referral process

1. The intake and referral team identifies a person on the waiting list in need of community service brokering based upon the health and welfare needs of the person, and the services requested.
 - a. Examples of referable assistance needs include Medicaid application, Social Security application, Vocational Rehabilitation referral, home health care coordination, EPAS, housing/utility assistance, criminal justice system, Disability Law Center, access to other community/social services not funded by DSPD, etc.
 - b. Connecting the person to public and private community activities does not qualify for CSB referral.
2. The intake and referral team documents information in USTEPS regarding the person's need for CSB services and the person's current situation.
3. The intake and referral team submits a referral to the CSB program coordinator on the waitlist support team by email. The referral should include the person's full name and PID number.

4. The CSB program coordinator will review each referral and assign a CSB to approved cases.
 - a. There is a maximum caseload of 35 people per CSB
5. The CSB program coordinator completes the initial plan budget.
 - a. There is a maximum individual budget of 85 plan units per fiscal year.
 - b. Transportation to and from appointments is included in the service under billing code CSM.
6. The CSB program coordinator sends the assignment email to the chosen CSB and the waitlist support program coordinator requesting a caseload transfer in USTEPS. The assignment email should include the person's full name and PID number.

CSB Case Management

1. CSB must accept the referral by reviewing the budget, contacting the person within 48 business hours of the referral, and completing a face-to-face visit within 30 days.
 - a. After three unsuccessful attempts to contact the person within 30 days, a case closure letter will be sent to the person. All attempts must be documented in USTEPS.
 - b. To bill a case closure, the electronic payment invoice must include the closure letter.
2. Within 30 days of the email referral, the CSB must complete a Person-Centered Action Plan (PCAP) that identifies needed supports and services, and a Supported Work Independence packet.
3. CSB monitors progress toward goals included in the PCAP.
4. CSB notifies the division of any significant changes on the person's health and safety within 5 business days.
5. CSB does not provide any direct care services to the person.
6. CSB must document a monthly summary in USTEPS.
7. To bill service codes CSB, CSE, and CSM, the CSB submits a monthly electronic payment invoice to the CSB Program Coordinator for approval by the 15th of the month following when services were provided. A monthly summary of services provided and trip log must be documented in USTEPS before payment will be made.
8. At the end of the PCAP timeline, the CSB must submit a service termination summary that addresses the success or failure of CSB support for that person. Documentation must be put in USTEPS within 15 days of plan closure and before final billing is made.
9. All service and general information regarding community service brokering must be documented in USTEPS.

10. If needed, review the current DHHS contract for more detail on service requirements and to resolve any conflict between the directive and contract terms.

Division Monitoring

1. The division shall monitor the use of the CSB budget allocation in USTEPS.
2. The CSB program coordinator will monitor the progress of the person and the CSB toward the PCAP goals.
3. All service and general information regarding community service brokering must be documented in USTEPS.