

When completing this form, please make sure that both the member and ISB review and sign before submitting to the FMS.

Independent Support Broker (ISB) Agreement

This ISB agreement is between the Consumer Choices Option (CCO) member and the ISB he/she chooses to work with.

Member information

Name: _____

Medicaid Number: _____

ISB information

Name: _____

Email Address: _____

Phone: _____

Address: _____

City: _____ State: _____ Zip code: _____

After both parties complete and sign this form, a copy must be submitted to Veridian Fiscal Solutions along with the other documents in the ISB Packet. A copy should also be saved by the CCO member and his/her ISB.

The ISB acknowledges that he or she is not the CCO member's guardian, conservator, attorney in fact under durable power of attorney for health care, power of attorney for financial matters, trustee or representative payee. The ISB further acknowledges that that he or she shall not be paid for any other service to the CCO member, and that he or she shall not work for an individual or entity that is providing services to the member.

The ISB must be eighteen years of age or older in order to provide ISB services.

If a CCO member transfers Managed Care Organizations (MCOs), all documents Veridian Fiscal Solutions has received will be available to the new MCO. This includes, but is not limited to, enrollment packets and time sheets.

The ISB agrees to perform the following services:

- Assist the CCO member with:
 - Developing the member's initial budget and make changes to any subsequent budgets at the request of the CCO member.
 - Interviewing potential employees and entities providing services and supports if requested by the CCO member.

- Working with the member to determine whether a potential employee meets the qualifications necessary to perform the job.
- Working with the member to obtain signed consent from a potential employee to conduct background checks.
- Negotiating with entities providing services and supports if requested by the member.
- Reviewing contracts and payment methods for services and supports if requested by the member.
- Working with the member to establish an emergency back-up plan. The emergency back-up plan shall also address any health and safety concerns.
- Work with the member to establish monthly contact for the first four months during implementation of the individual budget and then to meet quarterly thereafter.
- Review monthly statements from Veridian Fiscal Solutions to ensure that services and supports in the individual budget are being provided.
- Document in writing on the ISB time sheet every contact the ISB has with the CCO member.

The CCO member authorizes payments to the ISB. Iowa Medicaid Enterprise (IME), Veridian Fiscal Solutions, or the Managed Care Organization (MCO) are not the employers of the ISB.

The ISB or CCO member may terminate this agreement at any time with or without cause. If either party terminates the agreement, Veridian Fiscal Solutions and the member's community based case manager shall be immediately notified.

The ISB will be paid an hourly rate of \$_____ (not to exceed \$16.07 per hour). Per Iowa Code, the maximum number of hours an ISB can work in a 12-month period is 30 hours.

By signing this agreement, the CCO member and ISB have read and understand the above terms.

CCO member's signature

Date

ISB's signature

Date

