



DEPARTMENT OF
HUMAN SERVICES

Coordinated Services and Supports Plan (CSSP)

ABOUT ME

MARK P SNEEP

Preferred Name: Mark or Markie

Assessment Date: 03/03/2021

Plan Dates: 05/01/2021 to 04/30/2022

Developed by: Chantelle Heifort Adams (651) 214-8696

Address: 7500 217th St N

Forest Lake, MN 55025

County: Washington

Home: (651) 464-6003

Work:

Other:

General Plan Notes:

CASE MANAGER NAME AND PHONE NUMBER: Chantelle Heifort-Adams (651-214-8696)

PROGRAM(S): Developmental Disabilities (DD) Waiver

PERSONAL CARE ASSISTANCE (PCA) HOURS/HOME CARE RATING: 12.5 Hours per Day/Z (Enhanced Rate Eligible)

DATE THIS DOCUMENT WAS MAILED: CSSP, signature page, ROI, and return envelope sent out postal mail to Markie, Maureen, and Mark. CSP, CSSP, and signature page emailed securely with request to return signature page to PAI and Companion Linc.

**Annual meeting completed remotely on 4/13/2021 due to COVID restrictions.

STRENGTHS, ROUTINES, & DREAMS:

Mark, or Markie as his family and loved ones call him, is a lovable and happy person. Mark has a contagious laugh and a handsome smile. He is fun to be around. Mark is smart and remembers things. He knows the things he wants and doesn't, the things he likes and doesn't like, and will communicate with the people around him. Mark is a good listener and enjoys being part of the party.

Mark has certain routines that are very important to him. Mark wakes up about 750am and goes to bed about 920pm. Food and drinks are offered throughout the day per special diet. Mark does gets some anxiety eating outside of home. He gets ensure about 6 times a day mixed with water

and ice cubes. He likes fruit cocktail mixed with baby rice GF formula. He likes yogurt and smoothies. Lunch he likes spaghetti and macncheese - canned kind - blended. He also likes flavored syrup added to his ensure. He also likes the bananas baby food and rice with water. PB&J with no crust softened and mixed up in milk he likes also. No applesauce. Mark's day can really depend on how his GI and motility is for that day. He does need cares throughout his day. His DSS is M-F from 9 to 230. When he gets home at the end of the day he likes to have his snack in his favorite spot in the living room, watch Family Feud at 6, Wheel of Fortune at 6:30, take a bath, and then go to bed. He always watches Barney as he falls asleep, even when staying at respite (his mom sends a portable DVD player). Mark goes to respite in Apple Valley 1 weekend a month and 2 weeks a year.

Mark enjoys listening to KQRS with his Dad. He enjoys swinging in the pod swings. He enjoys being in water. He likes to move and go on walks. He has a handful of favorite movies such as Trolls, Glee, and High School Musical.

Besides just being happy and being around people, Mark's dream is to have a pool in his backyard. The family has a hot tub which he takes an elevator to the lower level to use with support and this suffices for now. The family also lives on a lake and owns a boat, so Mark gets access to the water and really enjoys it. Mark hopes to continue living his best life at home and have access to technology and equipment to support this. Mark hopes to also continuing to make choices throughout his day regarding preferred activities.

SUPPORTS DISCUSSED:

Mark receives a lot of support from his family, all of whom he is close with. He lives with his mom and dad, Mark and Maureen, and his brother, Anthony. Maureen is Mark's PCA. Because of COVID, he has not had any PCAs coming in the home but typically they are his mom's niece, her nephew, and her sister-in-law. His mom has had interest in finding another PCA that is a non-family member. When there are family gatherings and they need someone to help with Mark, family is not able to help as his PCA. This has been on hold during COVID but something Maureen hopes to look into this summer. Mark started the DD Waiver in December of 2019 in order to access respite. Respite was closed during COVID for a period of time, but has since opened and Mark has been going. He has been very happy going to PAI! Mark's preference per parents is to continue living at home, attending respite with Companion Linc, and attending PAI.

PERSON INFORMATION

Date of Birth: 04/21/1991 **Age:** 29 yrs

Emergency Contacts

Name	Relationship	Phone
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Name	Relationship	Phone
Mark & Maureen Sneep	Parent	(651) 464-6003

Notes/Comments

Maureen's cell is 651-470-5862.

Decision Making Representatives

Name	Type of Authority	Address	Phone
Mark and Maureen Sneep	Private Guardian	7500 217th Street North, Forest Lake, MN 55025	(651) 464-6003
Maureen Sneep	Representative Payee	7500 217th Street North, Forest Lake, MN 55025	(651) 464-6003

Notes/Comments

Mark has historically been the responsible party for PCA services. Shannon, Mark's sister is currently responsible party.

Health Insurance & Payers

Is the person certified disabled by Social Security or through the State Medical Review Team (SMRT) process? Yes

Is the person on medical assistance? Yes

Type	Describe	Policy Number	Effective Date
Other	Express Scripts	801070510	09/01/2011
Private Insurance			
Managed Care	MEDICA SNBC	Unknown	05/01/2012
Medical Assistance	Dx Disabled/No Sub-Type	01160413	07/01/2012

Notes/Comments

Mark's financial worker with Washington County is Renee Kenowski (651-275-7297). Mark's mom is not sure who his current MEDICA Care Manager is as this person changes frequently.

Providers

Health Care Providers	Phone	Comments
Primary Physician	(651) 464-7100	Dr. Brent Salek/Allina Forest Lake
Specialty Clinic	(651) 221-9051	Dr. Hoj/Neurological Associates/Sees Annually
Pharmacy	(651) 464-1994	CVS in both Forest Lake (number listed) and White Bear Lake
Other	(651) 690-5353	St. Paul/PCA Agency
Abbeycare Choice, Inc.		
Other	(612) 718-9864	Stillwater/Bluestone Physician Services
MEDICA SNBC Care Coordinator		
Other	(651) 241-8000	333 Smith Ave N, St. Paul, MN 55102
United Hospital		

Notes/Comments

Day Support Services: PAI: Bri Hlnzman: 612-446-3681

Respite Provider: Companion Linc: Stephanie Mox: 952-666-2255

WHAT'S IMPORTANT TO THE INDIVIDUAL

Short and Long-Term Goals

Goal Statement	Target Date	Provider & NPI (if applicable)	Frequency of Reporting
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Short and Long-Term Goals

Goal Statement	Target Date	Provider & NPI (if applicable)	Frequency of Reporting
Mark wants to do fun things, go fun places, see things, be around people, and receive attention from people because these things make him happy and he wants to be as happy as he can be.	04/30/2022		Annually
Mark wants to lay in bed and watch Barney every night when he falls asleep, even when he's at respite, because this is an important part of his routine and is calming to him.	04/30/2022		Annually
Mark wants to make choices about his preferred activities throughout his day at PAI.	04/30/2022	PHOENIX ALTERNATIVES INC -- A308360800	Annually
Mark wants assistive technology and adaptive equipment support to live his best life in his family home.	04/30/2022		Annually

Action Steps for Goals:

What will the person do?

Mark will continue to do his best to communicate his wants, needs and preferences to others and have the opportunity make choices in his daily life and participate in activities that interest him. Mark will continue to participate in support services and work towards identified goals. He will continue building home and community living skills with the help of his team working with him. Mark will participate in his program planning as he is able and will also be encouraged to make choices/decisions as he is able.

Mark will partner with his PCA for all of his personal assistance and some home management needs. Mark's parents and natural support will partner with him to offer quality of life and comfort preferences. Mark will partner with PAI to make choices about his preferences to the best of his ability to enhance enrichment and meaning through his day. Mark will partner with his case manager and Tech for Home on adaptive equipment and assistive technology needs.

Mark will partner with Companion Linc for out of the home respite.

What will the case manager do?

Assigned case manager will meet with Mark and his parents/legal guardians to help identify services and supports that will benefit him. Case manager will provide general case management services and coordination of services and supports under the IDD waiver. Case manager will meet with Mark and his parents to evaluate services and assess progress towards identified goals. Case manager will provide resource information to family as needed and/or requested. Case manager will provide oversight to the DD waiver program participation and ensure plan and expenditures adhere to program guidelines.

The case manager will assure that Mark is supported in a person centered manner, and that he/guardians are informed of his choices in a way they can understand. The case manager will continue to coordinate and monitor services and providers to help Mark achieve his goals. Case Manager will also review progress towards Mark's goals regarding health and safety, housing, vocational services and meet with Mark face to face/remotely at least twice a year. Case manager will be available to schedule meetings with Mark as needed, to review progress and goals, and will make adjustments to the plan or services, or resolve any conflicts and disagreements that may arise.

Case manager will support Technology for Home referral for assistive technology and adaptive equipment needs.

What will others do?

Parents, Mark and Maureen, will continue to provide assistance with service coordination, decision making support, and financial oversight as outlined in Guardianship statute. Parents will remain representative payee for Mark's Social Security benefits. Family members will continue to be Mark's primary caregivers and will continue to provide the care and supervision needed to meet his needs and keep him safe. Mark's family will work with Mark and the case manager to identify and coordinate services and supports to meet Mark's needs and help him achieve identified goals. Parents will keep up with required documentation to maintain Mark's eligibility for Medical Assistance and notify case manager of any change in eligibility status.

Mark lives with his Mom, Dad, and his brother in the family home. He receives natural support from his parents and siblings. Mark enjoys being home and spending time with his family.

FAMILY:

Mark's family will provide informal supports to assure all of his health and safety needs are met as well as help him build and maintain all skills to meet his goals.

GUARDIAN:

Mark's legal guardian will continue to exercise their powers and responsibilities, unless stated differently in the guardianship order, of: establishing place of abode (residential), care, comfort and maintenance needs; personal property, medical care, contracts, exercise supervisory authority, and assure eligibility for all government benefits. They will complete their annual filing responsibilities as mandated by the court. They will work with Mark to build and maintain all skills to meet his goals and ensure his health and safety needs are met.

REPRESENTATIVE PAYEE:

The representative payee will continue to assist with money management and assist with completion of all documents to maintain eligibility for all state and federal benefit programs.

What will the provider do?

Mark utilizes the traditional option of the DD waiver, where he accesses traditional services such as PCA, respite, day support services, and transportation. All service providers will provide services according to Mark/guardian wishes, as authorized by his case manager, and according to his assessed needs; all while ensuring his personal health and safety. Services will be provided as agreed upon by Mark's support team, as related to the goals outlined in his PCA Assessment, MnChoices CSP and CSSP.

Providers will support Mark in a person centered manner. They will follow Mark's assessed needs and goals, they will provide feedback to support team as applicable and coordinate meetings with the case manager to review progress. Providers will ensure that staff are familiar with Mark's needs before working with him, and that all supports are person centered.

Mark's Mom and Dad are both PCA's for him. His responsible party is his sister. Support staff and natural supports will continue to set up opportunities and provide supports for Mark to achieve the goals as clearly outlined in his CSSP.

Providers such as AbbeyCare, Companion Linc, and PAI will implement services and supports via appropriate plans. They will work to meet wants and needs, ensuring health and safety at home and in the community. They will complete Individual Abuse Prevention Plans, Self-Management Plans, and CSSP Addendums as needed, requested, and/or required and as applicable. They will meet with team at least annually and as needed or requested. Providers will report incidents/accidents accordingly.

PCA will partner with Mark for all of his personal assistance and some home management needs. Mark's parents and natural support will partner with him to offer quality of life and comfort preferences. PAI will partner with Mark to make choices about his preferences to the best of his ability to enhance enrichment and meaning through his day including encouraging use of a big mac button/switch as well as choosing video to watch. Case manager will partner with Mark and Tech for Home on adaptive equipment and assistive technology needs. Companion Linc will partner with Mark for out of the home respite.

SUMMARY OF PROGRAMS AND SERVICES

Program Type	Start Date	End Date	Annual Amount	Total Plan Cost	Avg Monthly
Developmental Disability Waiver	05/01/2021	04/30/2022	\$0.00	\$144,841.32	\$12,070.11
Case Manager/Care Coordinator Chantelle Heifort Adams		Case Manager/Care Coordinator Provider ID A996938400		Responsible Party Name Shannon Sneep	
Program Notes DD waiver: Traditional with PCA, Respite, Day Support Services, Transportation, Case Management and Case Aide					

Service Case Management - 15 Minutes							
Start Date 05/01/2021	End Date 04/30/2022	Procedure Code T1016 UC	Frequency	Units 120	Rate \$23.19	Avg Monthly \$231.90	Total Service \$2,782.80
NPI/UMPI 1700969334	Status Approved	Provider Name WASHINGTON COUNTY COMMUNITY SERVICE		Funding Source DD Waiver		County of Service Washington	
Areas of Need Supportive Services							
Support Instructions Mark receives ongoing Case Management through the Washington County Intellectual and Developmental Disabilities Unit, and his case manager is Chantelle Heifort Adams. The case manager will inform and educate Mark and his caregivers on available services and also offer multiple providers for each service so he can determine what is best for him. Case manager will continue to assist Mark to access services as needed, including medical, social, educational, and other services. Case manager will review current services and monitor that providers are providing services according to Mark's goals and assessed needs in his MnChoices Community Support Plan (CSP) and his Coordinated Service and Support Plan (CSSP). Case manager will request any additional services that Mark may need, and ensure Mark/guardians are aware of his rights to appeal by providing him with information regarding the appeals process. The case manager will meet with Mark face to face at least twice every year, and will assist with addressing any concerns, disagreements or conflicts with services and providers that are brought to their attention. Case manager will send out copies of the plan and request additional signatures as appropriate. Chantelle can be reached by phone at (651) 430 8339 or Fax: 651-430-6536. Emails should be directed to chantelle.heifortadams@co.washington.mn.us or contact by mail at the following address: 14949 62nd Street North, P.O Box 30, Stillwater, MN 55082-0030							

<p>Service Notes</p> <p>2.25 hours per month</p>

<p>Service Case Management Aide (Paraprofessional) - 15 Minutes</p>							
<p>Start Date 05/01/2021</p>	<p>End Date 04/30/2022</p>	<p>Procedure Code T1016 TF UC</p>	<p>Frequency</p>	<p>Units 60</p>	<p>Rate \$9.39</p>	<p>Avg Monthly \$46.95</p>	<p>Total Service \$563.40</p>
<p>NPI/UMPI 1700969334</p>	<p>Status Approved</p>	<p>Provider Name WASHINGTON COUNTY COMMUNITY SERVICE</p>		<p>Funding Source DD Waiver</p>	<p>County of Service Washington</p>		
<p>Areas of Need Supportive Services</p>							
<p>Support Instructions Support with service agreement entry or administrative as needed.</p>							
<p>Service Notes</p> <p>1.25 hours of support a month</p>							

Service Day Support Services - 15 Minutes							
Start Date 05/01/2021	End Date 04/30/2022	Procedure Code T2021 UC	Frequency	Units 5544	Rate \$5.68	Avg Monthly \$2,624.16	Total Service \$31,489.92
NPI/UMPI A308360800	Status Approved	Provider Name PHOENIX ALTERNATIVES INC		Funding Source DD Waiver		County of Service Washington	
Areas of Need Home Management, Personal Security, Health Related/Medical, Employment/Training/Skill Building, Supportive Services, Personal Assistance, Cognitive and Behavior Supports, Quality of Life, Communications							
Support Instructions Mark will receive 1:2 day support services at PAI. He will work on developing and maintaining skills that help him achieve greater independence, productivity and community inclusion. Mark specifically wants to work range of motion with what he is able to through movement and physical exercises, as well as improve his ability to recognize activities that are important to him. Staff will work with him in a person centered manner, based on his assessed needs and the specific goals that he has set for himself. PAI will also coordinate review and planning meetings with Mark's Case Manager, and send reports about his progress and changing needs at agreed intervals. *Increase and maintain a person's physical, intellectual, emotional and social functioning *can be coordinated with physical, occupational and speech-language-communication therapies if indicated in the person's coordinated service and support plan (CSSP) *can supplement and support skill development occurring in therapy, residential or other community settings. PAI will provide or contract non-medical transportation to help Mark travel to and from locations where services are provided. All staff who work directly with Mark must pass a background check, and become familiar of his assessed needs and person centered support plan before working with him. They are also mandated reporters. Consequently, staff will report suspected maltreatment by calling the Minnesota Adult Abuse Reporting Center (MAARC) at (844) 880-1574.							

Mark attends Monday through Friday, 3 hour program days during COVID not including transportation. Mark needs supports with personal cares including eating, bathing, dressing, grooming, toileting, mobility, positioning, and transfers. Mark needs support with daily living and home management tasks including medication management, meal preparation, transportation, telephone use, shopping, and finances. Mark relies on his caregivers and supports to coordinate and accompany to all routine medical and emergency medical attention. Mark relies on his caregivers/supports to identify and recognizes his abilities in communicating or indicating by expressing through behavior. Mark requires on-going supervision and assessment to assure his health and safety from self/others. Mark requires on-going monitoring for changes in memory and cognition - these should be reported to his family/caregiver. Mark requires a 24 hour plan of care for health and safety. He relies on others to assure his safety and to assist him to safety in dangerous situations. Mark relies on others to monitor and report abusive or vulnerable situations accordingly. Mark requires supports in sensory and communication areas including vision, communication, and sensory. Caregivers/supports should recognize modifications or accommodations that are needed in Mark's environments. Mark relies on his parents/caregivers to direct his cares and services. Mark and Maureen Sneep are his legal guardians and should be involved in any decision making for Mark.

Service Notes

252 program days

5.5 hours per program day

Service Personal Care Assistance (PCA) - QP supervision - 15 Minutes							
Start Date 05/01/2021	End Date 04/30/2022	Procedure Code T1019 UA	Frequency	Units 96	Rate \$7.82	Avg Monthly \$62.56	Total Service \$750.72
NPI/UMPI A632633100	Status Approved	Provider Name ABBEYCARE CHOICE INC		Funding Source DD Waiver		County of Service Washington	
Areas of Need Self-Direction, Supportive Services							
Support Instructions PCA supervision will provide support, training, monitoring, and supervision of PCA staff as needed. PCA supervision is authorized for 24 hours per year. PCA supervision will update and reassess the plan as needed with the family.							
Service Notes 2 hours of support per month							

Service Personal Care Services (PCA) - Complex							
Start Date 05/01/2021	End Date 11/30/2021	Procedure Code T1019 TG	Frequency	Units 5058	Rate \$4.78	Avg Monthly \$3,453.89	Total Service \$24,177.24
NPI/UMPI A632633100	Status Approved	Provider Name ABBEYCARE CHOICE INC		Funding Source DD Waiver		County of Service Washington	
Areas of Need Communications, Self-Direction, Quality of Life, Cognitive and Behavior Supports, Home Management, Health Related/Medical, Personal Security, Supportive Services, Personal Assistance							

Support Instructions

Mark lives in the family home. His primary supports and caregivers are his parents and close family. Both of Mark's parents, are paid PCAs for Mark. Mark's responsible party is his sister, Shannon. While Mark is eligible for 12.5 hours a day, Mark's staff submit about 9 hours a day which is what is authorized. Days he is at respite will also be deducted from his PCA hours. Mark needs complete supports with all of his personal cares as well as all daily living and home management tasks. Mark needs supports with personal cares including eating, bathing, dressing, grooming, toileting, mobility, positioning, and transfers. Mark needs support with daily living and home management tasks including medication management, meal preparation, transportation, housework, telephone use, shopping, and finances. Mark relies on his caregivers and supports to coordinate and accompany to all routine medical and emergency medical attention. Mark relies on his caregivers/supports to identify and recognizes his abilities in communicating or indicating by expressing through behavior. Mark requires on-going supervision and assessment to assure his health and safety from self/others. Mark requires on-going monitoring for changes in memory and cognition - these should be reported to his family/caregiver. Mark requires a 24 hour plan of care for health and safety. He relies on others to assure his safety and to assist him to safety in dangerous situations. Mark relies on others to monitor and report abusive or vulnerable situations accordingly. Mark requires supports in sensory and communication areas including vision, communication, and sensory. Caregivers/supports should recognize modifications or accommodations that are needed in Mark's environments. Mark relies on his parents/caregivers to direct his cares and services. Mark and Maureen Sneeep are his legal guardians and should be involved in any decision making for Mark. Mark is eligible for the enhanced rate due to his assessed hours with PCA.

Service Notes

Daily support needed - 12.5 hours a day eligible; authorized 9 hours a day due to under usage ($9 \times 4 = 36 \times 365 = 13140$ units).

84 days of respite request for renewal - about 7 days a month on average.

84 days of respite = 3024 units of PCA (9 hours or 36 units/day \times 84 days = 3024 units)

$13140 - 3024 = 10116$ units authorized or 5058 units per 6 months

Service Personal Care Services (PCA) - Complex							
Start Date 12/01/2021	End Date 04/30/2022	Procedure Code T1019 TG	Frequency 5-Flexible Use	Units 5058	Rate \$4.78	Avg Monthly \$4,835.45	Total Service \$24,177.24
NPI/UMPI A632633100	Status Approved	Provider Name ABBEYCARE CHOICE INC		Funding Source DD Waiver		County of Service Washington	
Areas of Need Home Management, Personal Security, Health Related/Medical, Self-Direction, Personal Assistance, Cognitive and Behavior Supports, Quality of Life, Supportive Services							

Support Instructions

Mark lives in the family home. His primary supports and caregivers are his parents and close family. Both of Mark's parents, are paid PCAs for Mark. Mark's responsible party is his sister, Shannon. While Mark is eligible for 12.5 hours a day, Mark's staff submit about 9 hours a day which is what is authorized. Days he is at respite will also be deducted from his PCA hours. Mark needs complete supports with all of his personal cares as well as all daily living and home management tasks. Mark needs supports with personal cares including eating, bathing, dressing, grooming, toileting, mobility, positioning, and transfers. Mark needs support with daily living and home management tasks including medication management, meal preparation, transportation, housework, telephone use, shopping, and finances. Mark relies on his caregivers and supports to coordinate and accompany to all routine medical and emergency medical attention. Mark relies on his caregivers/supports to identify and recognizes his abilities in communicating or indicating by expressing through behavior. Mark requires on-going supervision and assessment to assure his health and safety from self/others. Mark requires on-going monitoring for changes in memory and cognition - these should be reported to his family/caregiver. Mark requires a 24 hour plan of care for health and safety. He relies on others to assure his safety and to assist him to safety in dangerous situations. Mark relies on others to monitor and report abusive or vulnerable situations accordingly. Mark requires supports in sensory and communication areas including vision, communication, and sensory. Caregivers/supports should recognize modifications or accommodations that are needed in Mark's environments. Mark relies on his parents/caregivers to direct his cares and services. Mark and Maureen Sneeep are his legal guardians and should be involved in any decision making for Mark. Mark is eligible for the enhanced rate due to his assessed hours with PCA.

Service Notes

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84 days of respite request for renewal - about 7 days a month on average.

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$13140 - 3024 = 10116$ units authorized or 5058 units per 6 months

Service Respite Care Services, Out of Home, With Room and Board - Daily							
Start Date 05/01/2021	End Date 04/30/2022	Procedure Code H0045	Frequency	Units 84	Rate \$365.00	Avg Monthly \$2,555.00	Total Service \$30,660.00
NPI/UMPI A708460200	Status Approved	Provider Name COMPANION LINC LLC		Funding Source DD Waiver		County of Service Washington	
Areas of Need Personal Security, Supportive Services, Home Management, Health Related/Medical, Personal Assistance, Quality of Life, Cognitive and Behavior Supports, Communications, Caregiver/Parent Support							

Support Instructions

Mark attends respite at Companion Linc once a month or as there is availability that meets the needs of Mark and the family. This service is paid through Mark's waiver. This is to give the family a break or respite. Mark needs supports with personal cares including eating, bathing, dressing, grooming, toileting, mobility, positioning, and transfers. Mark needs support with daily living and home management tasks including medication management, meal preparation, transportation, housework, telephone use, shopping, and finances. Mark relies on his caregivers and supports to coordinate and accompany to all routine medical and emergency medical attention. Mark relies on his caregivers/supports to identify and recognize his abilities in communicating or indicating by expressing through behavior. Mark requires on-going supervision and assessment to assure his health and safety from self/others. Mark requires on-going monitoring for changes in memory and cognition - these should be reported to his family/caregiver. Mark requires a 24 hour plan of care for health and safety. He relies on others to assure his safety and to assist him to safety in dangerous situations. Mark relies on others to monitor and report abusive or vulnerable situations accordingly. Mark requires supports in sensory and communication areas including vision, communication, and sensory. Caregivers/supports should recognize modifications or accommodations that are needed in Mark's environments. Mark relies on his parents/caregivers to direct his cares and services. Mark and Maureen Sneep are his legal guardians and should be involved in any decision making for Mark.

Service Notes

84 units/days authorized (7 days a month on average with vacations requested)

Service Transportation - Per One Way Trip							
Start Date 05/01/2021	End Date 04/30/2022	Procedure Code T2003 UC	Frequency	Units 504	Rate \$60.00	Avg Monthly \$2,520.00	Total Service \$30,240.00
NPI/UMPI A308360800	Status Approved	Provider Name PHOENIX ALTERNATIVES INC		Funding Source DD Waiver		County of Service Washington	
Areas of Need Supportive Services, Employment/Training/Skill Building							
Support Instructions Mark relies on PAI who contracts with New Trax to coordinate and provide non-medical transportation to and from the day program during his scheduled days. Drivers will be familiar with Mark's needs to assure health and safety. New Trax round trips are currently a "private" ride which needed special waiver request approval for \$60/one way funding.							
Service Notes 504 one way trips 252 program days; 2 rides a day							

RISKS

How will Health and Safety Issues be Addressed?

Mark will continue to receive 24 hour support and supervision both formally and naturally through his parents, PCAs, other

family, supports at PAI, and supports at respite. His team will ensure Mark is safe, healthy, and happy. Mark's parents will continue to provide supported decision-making as his guardians.

Mark has seizures and a seizure protocol. Providers request this plan of care be updated by MD at least yearly.

Mark needs intensive mobility supports with transfers, propelling wheelchair, and bearing weight. He needs extensive caregiver supports for all areas of ADLs and IADLs. Mark does have a need for assistive technology and adaptive equipment.

Mark requires a 1:2 ratio at his day support service provider to meet his needs and sometimes needing adaptations to be successful with programming.

Mark needs someone with him on site at all times.

Mark benefits from people who know him and his plan well. He does reach and grab at people or things, sometimes unintentionally putting other people or things at risk. Caregivers should be aware of Mark's busy arms and assess and mitigate potential risks in his environment.

Mark communicates in his own ways since he does not use words. He uses vocalizations and gestures. Support staff should be trained on what his forms of communication may indicate.

Mark is sensitive to sounds in his environment. He needs support staff to be in tune to this and make adaptations or accommodations when necessary.

Mark needs caregiver to understand his GI issues can dictate how his day goes. Mark has a special diet and a bowel program.

Mark has a special diet. Caregivers need to be trained in feeding Mark.

Mark may have anxiety related motion sickness after travelling longer distances. Caregivers should know that Mark does better with non-standard vans.

Mark does have a prescription for eyeglasses, but does not wear them. Caregivers should be aware that Mark may not see clearly for support needs.

Mark can be out of visual line of sight if secure in chair or bed and NOT eating. An auditory monitor may be used.

The following table documents and acknowledges any risks that exist based on identified remaining needs above.

Identified risk and choice regarding services	Negative outcome that may result	Alternative measure that may be implemented
Mark may reach or grab at people or items, causing unintentional harm to them or self.	injury to self or others	increase personal space from people or range of reach

Summary plan/agreement reached to address the identified risks:

Refer to CSP and provider CSSP-A, SMA, and IAPP for provider specific services.

Mark's support plan and service/support plan reflect his risks accordingly. The plan is assessed as needed or at least yearly.

Emergency & Back Up Plans

Plan for unforeseen events (e.g, weather, storms, power outages)

Mark is not able to independently get himself to safety in unforeseen events. He relies on his caregivers and supports for physical assistance to get to safety in unforeseen events.

Key Contact Name	Relationship	Phone Number
Mark and Maureen Sneep	Parents/Guardians	(651) 464-6003

Plan for emergency health events

Mark relies on his caregivers and supports to access medical attention in emergency health events. Mark's caregivers and supports will respond accordingly in these types of events.

Key Contact Name	Relationship	Phone Number
Mark and Maureen Sneeep	Parents/Guardians	(651) 464-6003

Plan for unavailable staffing that puts the person at risk

Mark lives in the family home. Mark's caregivers/parents will respond accordingly to assure Mark is cared for and supervised at all times. Mark's parents are his 24 hour plan of care.

Key Contact Name	Relationship	Phone Number
Mark and Maureen Sneeep	Parents/Guardians	(651) 464-6003