**SELF-DIRECTED SUPPORTS** 

**INDIVIDUAL ALLOCATION**

**TOOL**

**SUPPORT COORDINATOR:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **INDIVIDUAL RECEIVING SERVICES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DMH ID #:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **\*TYPICAL EMPLOYEE WORK SCHEDULE:**

Time Sunday

Time In

Time Out

Time In

Time Out

Time In

Time Out

| Monday  | Tuesday  | Wednesday  | Thursday  | Friday  | Saturday |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Total per day Hrs Hrs Hrs Hrs Hrs Hrs Hrs

*\*Typical employee work schedule is for purposes of assessing needs only. Individuals and Designated Representatives have the freedom to change the schedule.*

| Total Hours per week (\_\_\_\_\_\_\_) x (\_\_\_\_\_\_\_) weeks =  | Hrs |
| --- | --- |
| Are there additional hours that are needed per month? If so that number (\_\_\_\_\_\_\_) x (\_\_\_\_\_\_\_) months =  | Hrs |

Are there additional hours that are needed per year: If so what is

Hrs

that number?

**# of Hours of support needed per year** Hrs

**INDIVIDUAL BUDGET ALLOCATION**

The total number of hours needed are multiplied by the statewide individual hourly allocation rate in order to determine the total **Self-Directed Individual Budget Allocation.**

**# of Hours of support needed per year**

**Individual Budget Allocation Rate**

**Budget Allocation**

**Personal Assistance** (\_\_\_\_\_\_\_\_\_\_\_) **X = Medical Personal Assistance** (\_\_\_\_\_\_\_\_\_\_\_) **X = Community Specialist** (\_\_\_\_\_\_\_\_\_\_\_) **X = Total Budget Allocation**

Employee rate setting using the budget calculator will not be determined until after the Budget Allocation has been approved by UR. Individuals/DRs will be trained on using the budget calculator by the FMS. The Support Broker will assist individuals on employee rate setting. 7/1/19