IDAHO DEPARTMENT OF HEALTH & WELFARE

MEDICAID-SUPPORT BROKER AGREEMENT

This agreement is hereby made between the Self-Directed Community Supports (SDCS) option, a Medicaid option administered by the Department of Health and Welfare (Department), and _____, a Support Broker.

The support broker acknowledges that, although employed by an SDCS participant, the Department, via the Fiscal Employer Agent (FEA), is responsible for paying their wages for services under the SDCS option. Because of the unique relationships of the participant, the Department, and the FEA, the support broker acknowledges and agrees to the following:

1. That the support broker is an employee of the participant under the Idaho Medicaid Self-Directed Community Supports (SDCS) option.

2. To promptly notify the FEA of any change of address or other support broker contact information.

3. To accept, as payment in full for all SDCS services, payments made by the FEA, and will make no additional charge except as allowed by the Medicaid option.

4. To provide all support broker services according to the "Participant-Support Broker Employment Agreement" and all duties and responsibilities in accordance with the rules pertaining to the support broker contained in the Idaho Administrative Procedures Act (IDAPA) 16.03.26 (Sections 800-846), “Consumer-Directed Community Supports (CDCS) Option.”

5. To protect the confidentiality of personal and health information relating to the participant and their participation in the Medicaid SDCS option and to release that information only on request of the participant or as otherwise allowed by law.

6. The support broker acknowledges that they are not an employee of the Department or the FEA and agrees that the support broker is not entitled to, nor will they make a claim for, any employee benefits from the Department or the FEA, including workers' compensation, disability, life and/or health insurance.

The provisions of this agreement represent the entirety of the agreement between the parties. It may be amended only in writing, with all parties consenting by their signatures.

_____

Support Broker Signature Date