



Family Selected Provider Process

- Family identifies a provider for respite care services. All paperwork listed below should be held and turned in AFTER services have been provided along with the invoice/timesheet. DO NOT turn in provider information without invoice.
- All providers must be at least 18 years old, cannot live in the same house as the person receiving respite services, and cannot be the biological parent of the person receiving services. If the provider meets these requirements, the provider is considered approved and can begin providing services immediately.
- The following paperwork must be completed and submitted with the first invoice after services have been provided. This paperwork only needs submitted once unless there are changes to the provider's banking information. IF CHANGES OCCUR, the provider must submit an updated direct deposit form with the invoice. (You may make copies for future services.)
 - This form (Family Selected Provider Process) – Signed by both the family and provider
 - The Waiver of Provider Training for Family Selected Providers Form – Completed by the family and signed by both the family and provider.
 - The W-9 Form – Completed by the provider. Please note, providers operate as independent contractors. No taxes are withheld from earnings. Earnings are reported to the IRS through a 1099 form if a provider has made \$600 or more. A copy of that form is sent to the provider yearly for use in filing an income tax return.
 - The Direct Deposit Form – Completed by the provider. This is required as the Family Supports Program does not produce paper checks. If provider is using a checking account, they MUST also submit a voided check OR Direct Deposit Enrollment Form from their bank
 - Copy of the Provider's Driver's License or State ID
 - Copy of the Provider's Social Security Card
- The family and provider will negotiate all unit rates. An hourly rate is used for services provided up to 10 hours a day and is not to exceed \$20.50 per hour. If services are provided for more than 11 hours consecutively, the daily rate is used. It is not to exceed \$205 a day. The negotiated rates are to be identified on the respite invoice.
- The family and family-selected provider must complete the Family Supports Program Invoice upon completion of services. Both the identified family member and the provider must verify the information contained in the invoice and sign the invoice to confirm all information contained in the invoice is accurate. Invoices can be submitted weekly or monthly and will be processed within 15 business days of receipt (this does not include weekends or holidays).
- NEON will not be responsible for payment of invoices that would exceed the family's program allowance. Explanation of Benefits (EOB) will be sent to the family each month identifying available funds. It is the family's responsibility to be aware of remaining available funds.

By signing below, we confirm that we have reviewed and understand the Family Selected Provider Process.

Household Contact Signature: _____

Print Name: _____

Provider Signature: _____

Print Name: _____

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