

RESPITE VOUCHER APPROVED PROVIDER APPLICATION

Colorado Respite Care Program Family Respite Voucher Program

The Family Respite Voucher Program accepts applications from providers on a rolling basis. This program will continue in the future as funding permits.

Thank you for your interest in joining the Family Respite Voucher Program. This program acts as a Payer of Last resort for full-time family caregivers in the state of Colorado. Please read the application information and submit the documents accordingly. Contact the Colorado Respite Care Program (CRCP) directly for more information. Nonprofit, for profit, and government entities are encouraged to apply.

PROGRAM INFORMATION:

The CRCP is seeking applications from qualified agencies currently providing respite services in an effort to respond to the respite care needs of Colorado's family caregivers of individuals with special needs, chronic conditions, older adults, foster children and kinship relations (i.e. grandparent and grandchild).

The CRCP offers a voucher program for families in need of respite care. Vouchers will be available statewide and across the lifespan. Respite is planned or emergency care provided to a child or adult with special needs in order to provide temporary relief to their family caregiver(s). This program serves caregivers who are unserved or underserved by current respite systems.

Providers will demonstrate the capacity to achieve positive outcomes for families in communities through **planned and/or emergency care** provided to a child or adult with a special need in order to provide temporary relief to the family caregiver of that child, adult, older adult, foster child or kinship relation.

VOUCHER TERMS:

Funding for agencies is based on consumer choice. Providers will submit a proposal to become an approved respite care provider for the family voucher program. After a family receives a voucher award, they shall choose a provider from our Approved Provider list and will coordinate service with the agency directly. Reimbursement shall be submitted monthly using the CRC invoice template based on the approved cost per hour (\$20.00/hour maximum, family co-pay options available). **Vouchers will be awarded on a first-come, first-serve basis to families regardless of geographic location or needs. No agency is guaranteed funding as providers are selected by consumers.**

Upon contact from a voucher recipient and confirmation of award, providers must complete a Family Caregiver Agreement to schedule respite services. Recipients have until the expiration date on their award letter, or approximately 120 days, to use the voucher funds. Providers will submit monthly invoices for reimbursement. At the conclusion of a recipient's voucher, providers must complete a Data Collection Form to confirm receipt of services, along with ensuring that all consumers complete an online Exit Survey provided by Easter Seals Colorado. Surveys are used for evaluation of the voucher program.

ELIGIBILITY:

Organizations must meet all of the following qualifications, at minimum:

Must be based in and providing services in the state of Colorado (all funds must be used to provide services to Colorado families).

Must be a **nonprofit agency, for-profit or governmental entity.**

Must be overseen by a board of directors or governing committee (if nonprofit).

Must conduct fingerprint-based background checks on all providers (staff, volunteers and contracted individuals) supporting voucher program through CBI or equivalent. *Please note no services can be provided prior to completion and receipt of fingerprint-based background checks.* (See page 4 for additional information)*

Must carry privacy insurance policy, or be willing to add during voucher program period.

Must be currently providing respite services including but not limited to: adult day service, out- of-home, or in-home respite services to families of children or adults with special needs, foster families, and/or kinship caregivers.

Must be registered on the Colorado Respite Coalition website as a respite provider at the time of application. If organization is not currently registered, please do so at

www.coloradorespitecoalition.org.

APPLICATION CHECKLIST:

All of the following documents must be included on application, only complete applications will be considered:

Cover letter signed by Executive Director expressing interest in participating in voucher program

Proof of nonprofit status (if applicable)

Certificate of Good Standing from the Secretary of State (501(c)3 organizations only)

Certificate of Insurance including Privacy Insurance Policy or statement that agency will add policy during grant period

Policy/procedures that assure staff serving voucher recipients complete fingerprint-based background check and supporting documentation (i.e. criminal history report)(see page 4)

Most recent financial year audited statement, if available, or organization's 990

Completed application (see page 3, attached)

SUBMISSION INSTRUCTIONS:

- Submit application via email to Elle Billman at: ebillman@eastersealscolorado.org or postal mail to: 393 S. Harlan St. Suite 108, Lakewood, CO 80226.
- If you have questions about the submission process or the application, please contact Elle Billman at ebillman@eastersealscolorado.org or 303.233.1666 x 225.

COLORADO RESPITE COALITION CONTACT INFORMATION:

Elle Billman

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393 S. Harlan St. Suite 108
Lakewood, CO 80226

ebillman@eastersealscolorado.org

303-233-1666 x225

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Colorado Respite Care Program Voucher Approved Provider Application

Name of Organization

Executive Director

Program Address City State Zip Code

Primary Voucher Contact Name Title Phone Email

What is the population being served? Ages Special needs including any limitations

1. How many individuals/families does your respite program serve annually? _____
2. How much notice is required prior to providing services? _____
3. Are you able to provide planned respite care? **Yes / No** How much notice do you require? _____
4. Are you able to provide emergency notice (within 24 hour)? **Yes / No**
5. What type of respite care services does your agency provide? Please list all services available for these vouchers. Day Program Overnight Care In-home Care Camp
 Other (please list) _____
6. What geographic area does respite program serve? _____
7. What is the program cost of one hour of respite care? _____
8. What is the staff to participant ratio? _____
9. Approximately how many clients are currently on the program's waitlist? _____

Agencies must be registered on the Colorado Respite Coalition online Respite Locator. If not currently registered, please register online at www.coloradorespitecoalition.org.

Is your agency interested in receiving funding announcements from the Colorado Respite Coalition? **Yes / No**

If you have additional application information, please attach it to this page.

Colorado Respite Care Program Respite Voucher

Fingerprint-Based Background Check Documentation

As a representative of _____ (agency), I will conduct fingerprint-based background checks on all providers serving families with Colorado Respite Care Project voucher funds. I understand that this is a requirement for receiving any funding from the Colorado Respite Care Project.

Name: _____

Signature: _____

Date: _____

***Additional fingerprint-based background check information:**

Requirements: Fingerprint-based background checks must be completed, reviewed and approved prior to any services on the Family Respite Voucher. These can be completed by CBI (Colorado Bureau of Investigations), local sheriff departments or equivalent. Fingerprint-based background checks conducted within the last 18 months are acceptable. Any employee, staff or volunteer that may come in contact with a voucher client must complete the fingerprint-based background check process.

Process: Service providers must complete a blue FD-258 applicant fingerprint card. The "reason fingerprinted" should indicate public record request **24-72-304**. This will generate a criminal history report that is searched using fingerprints. Providers may choose to receive the reports or have them mailed directly to CRC. CRC must review the reports and can deny any individual for participation in voucher program services based on violent or other disqualifying crimes. Processing of fingerprint card and fingerprint-based background checks can take up to three weeks with CBI.

Confidentiality: CRC securely stores fingerprint-based background check information to assure the safety and confidentiality of any and all information received on criminal history reports.

If you have questions on the fingerprint-based background check requirements, contact CRC directly.