STARK DD – FAMILY SUPPORT SERVICES (FSS) 2018-2019 APPLICATION

PLEASE COMPLETE THIS FORM AND RETURN TO 2950 Whipple Ave. NW, Canton Ohio 44708

FAMILY MEMBER **WITH** DISABILITY	FAMIL Y MEMBER **APPLYING** FOR FSS FUNDS
NAME (first, middle, last): _____	NAME: _____
ADDRESS: _____	RELATIONSHIP TO INDIVIDUAL: _____
CITY / STATE / ZIP: _____	ADDRESS: _____
BIRTH DATE: _____ SOCIAL SECURITY# _____	CITY/STATE/ZIP: _____
	PHONE #: _____ EMAIL: _____

IS THE INDIVIDUAL ENROLLED ON ANY OF THE FOLLOWING? **Please check Yes or No**

IO WAIVER:	☐ YES ☐ NO	TDD WAIVER:	☐ YES ☐ NO
LEVEL ONE WAIVER:	☐ YES ☐ NO	HOME CARE:	☐ YES ☐ NO
SELF WAIVER:	☐ YES ☐ NO	OTHER: _____	

Please check yes or No

IS THE INDIVIDUAL PLACED WITH YOU AS A FOSTER CHILD? ☐ YES ☐ NO

IS THE INDIVIDUAL ADOPTED? ☐ YES ☐ NO

DOES THE FAMILY RECEIVE AN ADOPTION SUBSIDY FOR THE APPLICABLE CHILD? ☐ YES ☐ NO

CO-PAYMENT SCHEDULE **– TAXABLE INCOME** not Gross Income **(**Indicate the reported **household** income for 2017. This is found on Tax Forms on Line 43 on Form 1040 or Line 27 on Form 1040A or Line 6 on Form 1040EZ).

TAXABLE INCOME		FAMILY % Copayment
$27,258 or less	☐	0%
$27,259 - $37,759	☐	10%
$37,760 - $48,260	☐	30%
$48,261 - $62,261	☐	50%
$62,262 - $79,762	☐	75%
$79,763 and over	☐	100%

PLEASE INDICATE WHICH OF THE FOLLOWING FSS FUNDED SERVICES YOU ARE INTERESTED IN RECEIVING (you may select more than one).
Based on your selection, Stark DD will send additional information/forms related to those specific service(s).

☐ Respite Care (in or out of home)	☐ Adaptive Equipment
☐ Home Modification(s)	☐ Special Diet
☐ Transportation (SARTA Passes)	☐ Incontinence Supplies
☐ Counseling, Education Training, Therapy	☐ Camps, horseback riding, dance, swim, ice skating, other recreation
☐ Other:	

I certify the above information is true:

_____ / _____ _____ / _____

APPLICANT SIGNATURE DATE INDIVIDUAL SIGNATURE (if over 18 years-old) DATE

DETERMINATION: FOR ADMINISTRATIVE USE ONLY.

☐APPLICATION APPROVED ☐APPLICATION DENIED	ALLOCATION AMOUNT APPROVED: _____ COUPON MAIL DATE: _____
	FSS COORDINATOR INITIALS: _____

Stark DD - Family Support Services (FSS) 2018-2019
GUIDELINES

ELIGIBILITY: Individuals applying for FSS funds **must** be previously determined eligible for services from the Stark County Board of Developmental Disabilities (Stark DD). This eligibility is determined at age 3, 6 and 16. If you are unsure you are eligible for services from Stark DD Intake, please call 330-479-3582.

FSS funds are designated for individuals (children and adults) living at home with their families. The use of FSS funds are to be directly related to improving the living environment and/or facilitating the care of the individual. **Individuals *residing in an ICF/DD home/ facility* *are not eligible* for these funds**. **Further, individuals placed through *foster care, adopted individuals (receiving an adoption subsidy) and those who are enrolled on a HCBS waiver* or other similar funding source *are not eligible*.**

ALLOCATION: Stark DD's FSS Program operates on a fiscal year beginning on July 1st of each year. The maximum annual allocation per eligible individual may vary each year based on the expected number of applicants. The maximum annual allocation per eligible individual is pro-rated throughout the year based on application received date. The specific allocation per family is based on the family's reported taxable income from the prior year. See below:

DATE APPLICATION RECEIVED:	MAXIMUM ALLOCATION PER FISCAL YEAR
7/1/2018 – 9/30/2018	$750
10/1/2018 – 12/31/2018	$570
1/1/2019 - 3/31/2019	$380
4/1/2019 - 6/30/2019	$190

AVAILABLE SERVICES:

1.) Special Equipment / Modifications – Sensory items, therapy balls, communication devices, adaptive car seats and strollers, etc.
2.) The purchase of typical toys/items is not supported under this program (e.g. non-adapted strollers, car seats, puzzles, games, etc.)
3.) Special Dietary Items - Specialized formula, shakes, thickeners, etc., can be secured with FSS funds.
4.) Incontinence Supplies – Disposable diapers, wipes, pads, plastic sheets, etc.
5.) Recreation (Dance, Horseback Riding, Camps, Swim Lessons, Ice Skating, etc.)
6.) Counseling, Training & Education, Therapy Services
7.) Transportation (SARTA passes)-SARTA passes can be purchased with FSS funds.
8.) Respite Care- Families can choose DODD certified providers or someone of their choosing. It is not required that the selected provider has provider certification. This service can occur within or outside the family home. Excluded is anyone who shares a residence with the individual or a parent of the child. **FSS Disclaimer Form is required to be completed, and submitted to FSS department prior to respite being provided. Private Respite Billing Form is then mailed to family after disclaimer form is reviewed/ approved.**

PAYMENT FOR SERVICES: Once approved for FSS funds, families will receive an allocation of coupons in increments of $10. In most cases, the family selects the service from a vendor who accepts the coupons as payment. Coupons are provided in exchange for service. The vendor then sends the coupons to the North East Ohio Network where payment then occurs. Additionally, families can incur the expense and submit coupons and valid receipt to North East Ohio Network.

Stark DD – Family Support Services (FSS) 2950 Whipple Ave. NW, Canton Ohio 44708
Phone: 330-479-3582 email: starkfss@starkdd.org