

## Start-Up

<b>Residential Living Assistance Fund</b>	
Purpose	Services support individuals receiving DMH funded residential services provided by a qualified agency, and individual accessing DMH funded self-directed personal assistance services to assist with costs associated with living independently.
Agency Eligibility Requirements	Agency has determined the individual's financial need and has supported the individual to make a reasonable and good faith effort to access community resources for items that will meet their household needs.
Individual Eligibility Requirements	<p>Individuals receiving DMH funded residential services provided by a qualified agency, and individual accessing DMH funded self-directed personal assistance services, <b>new</b> to residential services are eligible for <b>Start-Up Furnishings</b>. Individuals are eligible to access Start-Up Furnishings funding if they have received residential supports for six-months or less.</p> <p>Individuals who are <b>new</b> to receiving residential services must have a signed lease and plan to move into their residence within 30 days.</p> <p>Funds may only be utilized for individuals whose income is limited and who are unable to purchase new items on their own. Residential providers will support individuals with seeking all available community resources prior to accessing these funds.</p>
Caps and/or Limits	<p><b>ISL/Companion</b> participants are eligible for Start-Up Furnishings in an amount not to exceed \$2,500 (this amount includes delivery fees) and to the extent funds are available.</p> <p><b>Group Home/Host Home</b> participants are eligible for Start-Up Furnishings in an amount not to exceed \$1,250 (this amount includes delivery fees) and to the extent funds are available.</p> <p>These funds are available up to six-months after the individual's move-in date.</p> <p>Residential providers should consult with the respective County Board regarding existing individuals who are experiencing extenuating circumstances (for example, but not limited to: fire, bed bugs, etc.) and whose needs exceed the identified caps and/or limits.</p>
Billable Activities	The purchasing of eligible items as identified on the approved Alliance Checklists. Staff will educate and support individuals with comparison shopping to include prices and longevity/quality of the items.
Eligible Expenses	Refer to the DDRB Residential START-UP Furnishings Reimbursement Checklist
Funding Worksheets	Agencies will utilize the Start-Up Furnishings Reimbursement Checklist to track all expenses. These forms can be downloaded from the Agency Portal or are available at <a href="http://www.ddrb.org">www.ddrb.org</a> .
Invoicing Procedures	<p>Agencies will invoice the funding County for reimbursement of purchases. Invoices must be submitted within six (6) months of the date the individual moved into their new residence for Start-Up Furnishings.</p> <ul style="list-style-type: none"> <li>• Agencies that have access to the Alliance Portal will upload the required documentation through the portal. Agencies that do not have access to the Alliance Portal will submit the required documentation to the DDRB. The following are required with each reimbursement: <ul style="list-style-type: none"> <li>○ Completed Start-Up Furnishings Reimbursement Checklist.</li> <li>○ Copies of receipts or paid invoices to include date and amount paid.</li> </ul> </li> </ul> <p>If items are purchased from a community resource such as a garage sale, Facebook Market Place, etc. a written receipt (with date and cost of items) must be obtained.</p>

# DDR B Residential START-UP Furnishings Reimbursement Checklist

✓ Indicate type of residential service:        ISL/Companion Home        Group Home/Host Home

Individual's Name: \_\_\_\_\_  
 DMH# (REQUIRED): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Date of Initial Purchase: \_\_\_\_\_  
 Date of Reimbursement Request: \_\_\_\_\_

Agency Name: \_\_\_\_\_  
 Agency Contact Name: \_\_\_\_\_  
 Agency Contact Ph. Number: \_\_\_\_\_  
 Agency Contact Email Address: \_\_\_\_\_  
 Service Coordinator/Case Manager: \_\_\_\_\_

Items eligible for reimbursement must be on this list. List amount spent (per receipts) next to the item. Attach copies of receipts to this form and submit to DDRB within one year of date on receipt. One person per request form. Indicate the total Payment Requested in the box below.

ISL/Companion eligible for all Items in both columns			
	Eligible Items	Indicate Amount on Receipts	✓
<b>RENT</b>	1 <sup>st</sup> month's rent-Limit \$700		
	<b>Rent Subtotal</b>	\$	
Moving Expenses (Limit \$700)	Moving truck		
	Moving boxes/packing tape/bubble wrap		
	<b>Moving Expenses Subtotal</b>	\$	
Appliances (Limit \$1,000)	Dryer (1)		
	Washer (1)		
	Microwave and Stand (1)		
	Refrigerator (1)		
	Delivery Fee (up to \$100)		
<b>Appliances Subtotal</b>		\$	
Furniture (Limit \$1,500)	Couch or Loveseat (1)		
	Kitchen table (1)		
	Kitchen table chairs (4)		
	Recliner/Chair (1)		
	End tables (2)/Coffee table (1)		
	Lamp (1)		
	Delivery Fee (up to \$100)		
	<b>Furniture Subtotal</b>		\$
Kitchen Items (Limit \$400)	All utensils/cutlery		
	Bakeware/cookware		
	Can opener		
	Dish towels/cloths		
	Dinnerware/bowls		
	Glasses/cups		
	Pots/pans/skillets		
	Food storage containers		
	Mop/bucket/broom/dust pan		
	Coffee maker (1)		
	Crock-Pot/Instant Pot/Air fryer (1)		
	Mixer/blender (1)		
	Toaster (1)		
	Trashcan		
	<b>Kitchen Items Subtotal</b>		\$
General Items (Limit \$200)	Telephone (land line)		
	CO2 Detector (1)		
	Fire extinguisher (1)		
	First Aid Kit		
	Vacuum		
<b>General Items Subtotal</b>		\$	

Group/Host Home eligible for items in this column only			
	Eligible Items	Indicate Amount on Receipts	✓
General Items (Limit \$100)	Window treatments/blinds		
	Step stool (1)		
	Lockbox /Safe (1)		
	Emergency Radio (1)		
	<b>General Items Subtotal</b>		\$
Bathroom Items (Limit \$100)	Shower rod/Curtain/Hooks		
	Towels (body/face/hand)		
	Rugs (2)/Bathmat (1)		
	<b>Bathroom Items Subtotal</b>		\$
Bedroom Items (Limit \$1,500)	Dresser (1)		
	Mattress set (1)		
	Recliner/Chair (1)		
	Head/Foot Boards/Frame		
	Lamp		
	Bookcase (1)		
	Bed Linens/Bed Pillows		
	Clothes Hamper/Hangers		
	Delivery Fee (up to \$100)		
	<b>Bedroom Items Subtotal</b>		\$
TV (Limit \$400)	T.V. (Limit \$400)		
	TV stand or wall mount		
	Antenna		
<b>TV Subtotal</b>		\$	

<b>Line 1</b>	<b>Total all Subtotals (Do not include Rent)</b>	
<b>Line 2</b>	Tax (Line 1 x .0795) <small>DOES NOT APPLY TO RENT</small>	=
<b>Line 3</b>	<b>Rent Subtotal</b>	+
<b>Total Payment Requested (Line 1 + Line 2 + Line 3)</b>		=

DDR B Review:
Entered on Tracking Sheet Approved by: _____ Date approved: _____ Cc: Agency and SC/CM _____ Entered in Portal