

Fund Disbursement Guidelines for Catastrophic Injury and Illness Expenses

All requests must be submitted with a Fund Request Form and supporting documentation.

EXPENSE	EXPLANATION	PAYMENT METHOD
Fundraising expenses	Reasonably priced materials you need to carry out your community-based fundraising activities for Help Hope Live.	Discuss with your Client Services Coordinator before purchasing and submitting a request for reimbursement with a completed Fund Request Form and proof of payment.
Home accessibility and modification expenses	Reasonably priced and medically necessary; expenses over \$10,000 must be preapproved by the Help Hope Live Finance Department and paid direct to vendor. Help Hope Live will also pay for medically necessary home repairs.	Must be paid directly to vendor when an estimate or contract is submitted. Additional estimates may be requested. If no contractor is used, only receipts for materials can be submitted for reimbursement with a completed Fund Request Form and proof of payment.
Medically necessary vehicle with handicap modifications Reasonable maintenance costs for this vehicle	Submit estimate from the vehicle dealership and/or modification company; expenses over \$10,000 must be preapproved and paid directly to vendor. Help Hope Live does not pay for auto insurance, loan payments, registration, or inspection.	Must be paid directly to vendor. Ask your Client Services Coordinator about our mobility partners who are currently offering exclusive discounts for Help Hope Live clients.
Medically recommended rehabilitation therapy including physical, occupational, activity-based, speech, massage*	Fund Request Form must include information about the facility and/or credentialing of the practitioner.	Paid directly to the facility or practitioner (preferred), or reimbursed with a completed Fund Request Form and proof of payment.
Medically necessary exercise equipment	Requires a medical professional's recommendation.	Must be paid directly to vendor.

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Home health care for client; hiring and paying caregivers	<p>Clients are responsible for screening hired caregivers, setting the hourly fee, and determining whether caregivers should be treated as employees or independent contractors for tax purposes.</p> <p>Rules and regulations regarding home health care vary by state and local jurisdictions. Depending on the jurisdiction, <i>a caregiver may be classified either as the client's employee or independent contractor.</i> If the caregiver is an employee, the client is responsible for all required tax withholdings and reporting.</p> <p>Help Hope Live recommends that the client consult with a payroll processing company (e.g., Paychex or ADP) or their accountant or lawyer to determine the proper tax classification of each caregiver and assist with reporting. Help Hope Live will reimburse the client for the full cost of hiring a caregiver, inclusive of any third-party agency fees and withholding and tax compliance-related expenses.</p> <p>Help Hope Live does not pay childcare.</p>	<p>Caregiver expenses will either be reimbursed to the client or paid directly to a third-party provider. No direct payments to caregivers will be made by Help Hope Live. The client must submit either a Caregiver's Timesheet for each caregiver, documenting days and hours worked and the service fee, or a payroll report from a third-party provider. Caregiver's Timesheets must be signed by both the client (or an approved representative) and the caregiver prior to submission to Help Hope Live with a completed Fund Request Form.</p> <p>Help Hope Live can provide a Caregiver's Timesheet template for this purpose.</p>
Hospital and doctors' fees not covered by insurance, incl. deductibles and copays; phone and TV rentals during hospitalization	Submit statement or bill with Fund Request Form.	Prefer to pay directly to doctor or hospital but can be reimbursed; if bill has been referred to a collection agency, must be paid directly to agency.

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Health insurance premiums for client only	Submit statement showing client's share of the premium with Fund Request Form. Help Hope Live does not pay for life insurance.	Paid directly to vendor or reimbursed to client with a completed Fund Request Form and proof of payment. Help Hope Live will not reimburse for past payments.
COBRA premiums	For parents who must take a leave of absence or family medical leave to be a caregiver for a minor client. Leave documentation or FMLA required. Cannot also request payment of full-time caregiver services.	Paid directly to vendor or reimbursed to client with a completed Fund Request Form and proof of payment. Help Hope Live will not reimburse for past payments.
Treatments that are FDA approved or currently under FDA initial review and recommended by a medical professional*	Treatment plan and estimated cost must be submitted with Fund Request Form.	Medical facility must be paid directly.
Other uninsured health care needs impacting client's catastrophic injury or illness*	Dental and vision care that is required for treatment or the result of an accident or injury.	Paid directly to vendor, or reimbursed to client with a completed Fund Request Form and proof of payment.
Injury or illness-related medications and medication co-pays	Submit bill or proof of payment with Fund Request Form.	Paid directly to vendor or reimbursed to client with a completed Fund Request Form.
Assistive technologies, such as computers and voice enhancers	Equipment expenses over \$10,000 must be preapproved by Help Hope Live. Help Hope Live does not pay for home-use computers, cable TV, electronics, internet, or wireless installation unless medically needed by client.	Following pre-approval, client can be reimbursed by submitting proof of payment with a completed Fund Request Form and a medical professional's recommendation, or the vendor can be paid directly (preferred method).
Medically necessary trained service or emotionally supportive animal, including food and veterinary care; if necessary, boarding during owner's treatment	Must be discussed with your Client Service Coordinator or the Help Hope Live Finance Department for approval.	Service/support animals must be paid direct to vendor; client can be reimbursed for food and vet care with a completed Fund Request Form and proof of payment.

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Disposable medical equipment and supplies for client, including catheters, pads, briefs, and medically needed over the counter drug store items	Submit proof of payment with the Fund Request Form. Help Hope Live does not pay for personal care items not related to the injury or illness.	Client can be reimbursed with a completed Fund Request Form and proof of payment.
One telephone for a client	Submit proof of payment for one phone and monthly bill.	Client can be reimbursed with a completed Fund Request Form and proof of payment.
Transportation: local travel (one-day round trip) and long-distance travel (overnight or longer) for client and one caregiver to access treatment or for caregiver to visit hospitalized client.	Mileage at the IRS Medical Mileage Rate; tolls and parking; bus, train, or plane fare; car rental Help Hope Live does not pay for gas or non-medical travel.	Along with a completed Fund Request Form, requests for reimbursement must include documentation of mileage (such as trip itinerary from MapQuest), proof of payment, and verification of medical appointment.
Relocation expenses to access treatment	Housing and moving expenses for client and one caregiver to move to access treatment.	Client can be reimbursed with a completed Fund Request Form, proof of payment, such as a lease or statement from an extended stay facility, and verification of medical treatment.
Meals during medical travel or temporary relocation to access treatment	Client can receive up to \$40 per day for meals, or client and one caregiver together can receive up to \$65 per day for meals. Help Hope Live will not provide a food per diem for client during inpatient care.	Client can be reimbursed with a completed Fund Request Form and proof of payment, providing documentation of trip days or relocation for medical care.
Burial expenses	Submit itemized bill for eligible expenses including burial plot, crypt, or cremation niche for client only (if deed is nontransferable). Help Hope Live does not pay for preplanning, headstones, keepsakes, flowers, or funeral gatherings.	Paid directly to vendor when possible. Help Hope Live will disburse up to \$10,000 for burial costs or \$7,000 for cremation costs.

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Fund requests following a client's death	Must be submitted within 12 months of the date of death.	<p>Medical expenses will be paid direct to vendor at the request of a Power of Attorney or an authorized campaign representative.</p> <p>Reimbursements for eligible expenses may only be submitted by the executor of the client's estate.</p> <p>Proof of POA or executorship is required.</p>

Emergency Assistance for Living Expenses: 3-Months Maximum

<p>Necessary living expenses, such as mortgage payments, rent, and utilities up to \$2,000 per month.</p> <p>Help Hope Live cannot pay for lost wages, repayment of loans, or expenses not related to the injury or illness.</p>	<p>A doctor's letter must indicate that the primary wage earner is unable to work; letter must contain wage earner's name, type of disability, and length of anticipated disability.</p> <p>Help Hope Live does not pay for personal loans or homeowners or rental insurance.</p>	<p>Client can be reimbursed with proof of payment and required documentation: current mortgage statement with payment breakdown, or a signed lease for rental payments.</p> <p>Payment can also be made directly to vendor.</p>
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If a medical or related expense is not covered by these guidelines, please contact your Client Services Coordinator for pre-approval. Your request may require review by the Help Hope Live Executive Director or Board of Director's Client Services Committee, which could delay decision making and possible fund disbursement.

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