

WASHOE COUNTY HUMAN SERVICES AGENCY

350 S. CENTER STREET RENO, NEVADA 89501-2103 PHONE: (775) 337-4470 FAX: (775) 337-4495

ALTERNATE CARE PROVIDER ACKNOWLEDGEMENT

WCHSA's Alternative Care Policy outlines the option for foster families to use other approved caregivers to provide respite, including cleared direct care staff, babysitters, and licensed childcare staff. These provider types are *eligible* for alternative care reimbursement.

To receive reimbursement, an approved alternate care providers must submit the following items to HSA-RespiteRequests@washoecounty.us:

- 1. A copy of their photo identification,
- 2. A completed W-9, and
- 3. A completed Alternative Care Acknowledgement.

Upon WCHSA confirming that alternative care was provided and after the aforementioned documents have been submitted, all alternative care providers will be paid at the rate established for the current fiscal year. The rate through June 30, 2022, is \$40 per day per child.

This payment is considered a **taxable event** by the IRS and providers will be issued a 1099 form if paid \$600 or more in a calendar year. If the total respite earnings are less than \$600, a 1099 will not be issued.

Acknowledgement: By signing and submitting this form, I acknowledg for children in the custody of Washoe County Hur	e that receiving payment for providing alternative care man Services Agency is a taxable event.
Name of Alternate Care Provider:	Date of Birth:
Phone Number:	
Address:	City: Zip Code:
Alternate Care Provider Signature	

