



## Live-in Caregiver and Individual Agreement

Individual: \_\_\_\_\_

Medicaid ( CIN#): \_\_\_\_\_

Live-in Caregiver: \_\_\_\_\_

Waiver Service: \_\_\_\_\_

Agreement Effective Date: \_\_\_\_\_

**Definition:**

A Live-In Caregiver (LIC) is a provider who resides in the same household as the individual and provides as needed supports to address the individual's physical, social and emotional needs in order for the individual to live safely in his or her home.

The following agreement is between the Live-in Caregiver and Individual solely.

This home is not owned or rented by the LIC:

\_\_\_\_\_  
LIC's Initials                      Individual's Initials

LIC is not related to the individual by blood or marriage:

\_\_\_\_\_  
LIC's Initials                      Individual's Initials

Room and Board is being provided free of charge to the LIC: \_\_\_\_\_

\_\_\_\_\_  
LIC's Initials                      Individual's Initials

The following schedule outlines the times the LIC will be available to support the Individual:

Daily	
Weekly	
Monthly	





**Individual and Fiscal Intermediary (AIM Services) Agreement**

Individual: \_\_\_\_\_

Medicaid ( CIN#): \_\_\_\_\_

Fiscal Intermediary: \_\_\_\_\_

Waiver Service: \_\_\_\_\_

Agreement Effective Date: \_\_\_\_\_

This Live-in Caregiver (LIC) agreement is between the Fiscal Intermediary (FI) and Individual. The FI is not a party to the LIC agreement between the Individual and Live-in Caregiver.

In the event that the Agreement between the LIC and Individual ends early, it is the responsibility of the individual to notify the FI of the termination of the agreement. Notification must be made immediately (by end of next business day) to the FI by phone with follow up in writing (i.e., email, fax, letter, etc.).

If the Agreement between the LIC and Individual is terminated, it is the Individual’s responsibility to pay for expenses previously reimbursed by the LIC Stipend.

In the event that room and board cannot be reimbursed by the Fiscal Intermediary (FI) (i.e., individual is hospitalized for a month or longer), the Individual or a 3rd party payer will be responsible for payments of rent and utilities.

Reimbursements:

- Room and board is paid for as part of the LIC Stipend. Room and board is limited to: rent, utilities, and food.
- The FI will pay the rent by the first of the month to the Landlord. This payment will include the LIC portion of the rent as well as the Individual’s stipend from the housing subsidy. The remainder of the payment will be made by the Individual.
- Utilities will be paid by the Individual and reimbursed by the FI after receipt of the bill and expenditure form.
- Food is reimbursable to the Individual after the FI receives the receipts and expenditure form. The FI will inform the individual of any situations (i.e., hospitalization) which may cause the Individual to lose eligibility for LIC reimbursement.

This agreement will be reviewed at least annually by the Individual and Fiscal Intermediary.

By signing below, I agree to the terms outlined above as of the agreement effective date.

\_\_\_\_\_  
Individual’s Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Fiscal Intermediary’s Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date