

ISB Welcome Packet

Welcome to the Consumer Choices Option (CCO) program. Veridian Fiscal Solutions (VFS) is a Financial Management Organization that coordinates some of the payment and tax responsibilities for the CCO member and the ISBs they choose to hire. The documents included in this packet contain information about the program and the enrollment forms. These enrollment forms must be completed and approved for you to be paid through the CCO program.

Our Communication Promise

We are committed to responding to your questions within 48 hours. Our business hours are Monday through Friday, 8am-5pm with the exception of holidays.

- ✓ **Phone:** (866) 226-4692
- ✓ **Email:** ccoiaowa@veridiancu.org.

Our Contact Information

All forms can be sent by email to Veridian Fiscal Solutions at ccoiaowa@veridiancu.org.

If email is not an option for you, please submit your documents in one of the following ways:

- ✓ **Fax** – (319) 236-6785
- ✓ **Mailing address** – Veridian Fiscal Solutions
P.O. Box 4502
Waterloo, IA 50704

Required Forms

Please make sure you submit the following completed form.

When completing the form please remember the following to avoid processing delays.

- | | |
|--|--|
| ✓ We cannot accept an electronic signature | ✓ Make sure all highlighted areas are complete |
| ✓ Do not start providing services without approval | ✓ Only use black ink or type on the form |
| | ✓ Do not use pencil or gel pen |



Independent Support Broker Agreement

ISB Payments

Make sure all payment requests are signed (with a wet signature) and dated prior to submission. Please list the month the funds should be used to pay for your hours worked. For Example: if you help a member create his or her February budget in January, please indicate in the “Pay Period From” field or the “Service Provided and Narrative” field on your time sheet, if we should pay these hours out of the “January” or “February” budget.

ISBs have the choice to be paid through electronic funds transfer (EFT) or by a paper check. We highly encourage EFT so funds are available to you on the payment date. If you prefer a paper check it will be mailed on the payment date. VFS will not be liable for delays caused by the US Postal Service.

2024 Payment schedule

All time worked and vendor invoices must be submitted no later than the 5th and the 20th of each month. This is to be processed with the 15th and end of the month payroll, respectively. Paper checks will be mailed on the pay date. Direct deposits will be posted to the recipient's account on the pay date. If the 15th or last date of the month falls on a weekend or a federal holiday, payroll will be issued on the prior business day. Veridian is not responsible for U.S. Postal Service delays.

Be sure to submit all payment requests within 30 days from the last day of service. After 30 days, Veridian may no longer have access to the funding for payment.

Overtime:

Under the Fair Labor Standards Act, if an employee works more than 40 hours in the work week (Sunday through Saturday), hours in excess of 40 are considered overtime. Overtime hours are required to be paid at the rate of time and a half the employee's normal rate of pay.

For more information on overtime, please visit the Forms and Resources page on our website.

<https://www.veridianfiscalsolutions.org/cco/forms.aspx>

Time Period	Due to Veridian	Payment Date
January 1-15	01/20/2024	01/31/2024
January 16-31	02/05/2024	02/15/2024
February 1-15	02/20/2024	02/29/2024
February 16-28	03/05/2024	03/15/2024
March 1-15	03/20/2024	03/29/2024
March 16-31	04/05/2024	04/15/2024
April 1-15	04/20/2024	04/30/2024
April 16-30	05/05/2024	05/15/2024
May 1-15	05/20/2024	05/31/2024
May 16-31	06/05/2024	06/14/2024
June 1-15	06/20/2024	06/28/2024
June 16-30	07/05/2024	07/15/2024
July 1-15	07/20/2024	07/31/2024
July 16-31	08/05/2024	08/15/2024
August 1-15	08/20/2024	08/30/2024
August 16-31	09/05/2024	09/13/2024
September 1-15	09/20/2024	09/30/2024
September 16-30	10/05/2024	10/15/2024
October 1-15	10/20/2024	10/31/2024
October 16-31	11/05/2024	11/15/2024
November 1-15	11/20/2024	11/29/2024
November 16-30	12/05/2024	12/13/2024
December 1-15	12/20/2024	12/31/2024
December 16-31	01/05/2025	01/15/2025



When completing this form, please make sure that both the member and ISB review and sign before submitting to the FMS.

Independent Support Broker (ISB) Agreement

This ISB agreement is between the Consumer Choices Option (CCO) member and the ISB he/she chooses to work with.

Member information

Name: _____

Medicaid Number: _____

ISB information

Name: _____

Email Address: _____

Phone: _____

Address: _____

City: _____ State: _____ Zip code: _____

After both parties complete and sign this form, a copy must be submitted to Veridian Fiscal Solutions along with the other documents in the ISB Packet. A copy should also be saved by the CCO member and his/her ISB.

The ISB acknowledges that he or she is not the CCO member's guardian, conservator, attorney in fact under durable power of attorney for health care, power of attorney for financial matters, trustee or representative payee. The ISB further acknowledges that that he or she shall not be paid for any other service to the CCO member, and that he or she shall not work for an individual or entity that is providing services to the member.

The ISB must be eighteen years of age or older in order to provide ISB services.

If a CCO member transfers Managed Care Organizations (MCOs), all documents Veridian Fiscal Solutions has received will be available to the new MCO. This includes, but is not limited to, enrollment packets and time sheets.

The ISB agrees to perform the following services:

- Assist the CCO member with:
 - Developing the member's initial budget and make changes to any subsequent budgets at the request of the CCO member.
 - Interviewing potential employees and entities providing services and supports if requested by the CCO member.

- Working with the member to determine whether a potential employee meets the qualifications necessary to perform the job.
- Working with the member to obtain signed consent from a potential employee to conduct background checks.
- Negotiating with entities providing services and supports if requested by the member.
- Reviewing contracts and payment methods for services and supports if requested by the member.
- Working with the member to establish an emergency back-up plan. The emergency back-up plan shall also address any health and safety concerns.
- Work with the member to establish monthly contact for the first four months during implementation of the individual budget and then to meet quarterly thereafter.
- Review monthly statements from Veridian Fiscal Solutions to ensure that services and supports in the individual budget are being provided.
- Document in writing on the ISB time sheet every contact the ISB has with the CCO member.

The CCO member authorizes payments to the ISB. Iowa Medicaid Enterprise (IME), Veridian Fiscal Solutions, or the Managed Care Organization (MCO) are not the employers of the ISB.

The ISB or CCO member may terminate this agreement at any time with or without cause. If either party terminates the agreement, Veridian Fiscal Solutions and the member's community based case manager shall be immediately notified.

The ISB will be paid an hourly rate of \$_____ (not to exceed \$16.07 per hour). Per Iowa Code, the maximum number of hours an ISB can work in a 12-month period is 30 hours.

By signing this agreement, the CCO member and ISB have read and understand the above terms.

CCO member's signature

Date

ISB's signature

Date



Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number											
				-				-			
or											
Employer identification number											
					-						

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ►	Date ►
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

ISB Electronic Funds Transfer Authorization

ISB information

ISB name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone number: _____ Email: _____

CCO member information

CCO member name: _____

Medicaid number: _____

Financial institution information

Financial institution name: _____

Account type: ☐ Checking ☐ Savings

Please print account and routing numbers clearly and legibly

Account number: _____

Routing number: _____

I hereby authorize Veridian Fiscal Solutions to initiate electronic funds transfers and, if necessary, to direct the financial institution above to initiate debit entries or adjustments to correct any deposit errors to my checking or savings account at the financial institution. I understand this authorization will override any previous authorization and will remain in effect until the date Veridian Fiscal Solutions has received written or electronic notification from me of its termination in such time and in such manner as to afford Veridian Fiscal Solutions and the financial institution named above a reasonable opportunity to act on it. I understand that I must immediately notify Veridian Fiscal Solutions before I close the account listed above while this authorization is in effect.

Signature: _____ Date: _____

Please attach a voided check or deposit slip. With this, we have all the information we need to make a direct deposit into your account.

A pay stub for each payment will be available online. Simply log into your account and click on "Pay Stubs" under the "My Account" tab. If you need a paper copy of a pay stub, please contact us.

Please return this completed form and attachment to Veridian Fiscal Solutions by:

- 1) Email: ccoowa@veridiancu.org
- 2) Fax: 319-236-6785
- 3) Mail: P.O. Box 4502 Waterloo, IA 50704



FACTS

WHAT DOES VERIDIAN FISCAL SOLUTIONS DO WITH YOUR PERSONAL INFORMATION?

Why?

Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.

What?

The types of personal information we collect and share depend on the product or service you have with us. This information can include:

- Social Security number and employment information
- Checking and savings account information and transaction history
- Account balances and income

How?

All financial companies need to share members' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their members' personal information; the reason Veridian Fiscal Solutions chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does Veridian Fiscal Solutions share?	Can you limit this sharing?
For our everyday business purposes— such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	YES	NO
For our marketing purposes— to offer our products and services to you	YES	NO
For joint marketing with other financial companies	NO	We don't share
For our affiliates' everyday business purposes— information about your transactions and experiences	YES	NO
For our affiliates' everyday business purposes— information about your creditworthiness	NO	We don't share
For our affiliates to market to you	NO	We don't share
For nonaffiliates to market to you	NO	We don't share

Questions?

Call 1-855-828-0755 or go to veridianfiscalsolutions.org

Who we are	
Who is providing this notice?	Veridian Fiscal Solutions
What we do	
How does Veridian Fiscal Solutions protect my personal information?	To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.
How does Veridian Fiscal Solutions collect my personal information?	<p>We collect your personal information, for example, when you</p> <ul style="list-style-type: none"> ▪ open an account or give us your contact information ▪ show your government-issued ID or tell us where to send the money ▪ provide account information <p>We also collect your personal information from other companies.</p>
Why can't I limit all sharing?	<p>Federal law gives you the right to limit only</p> <ul style="list-style-type: none"> ▪ sharing for affiliates' everyday business purposes—information about your creditworthiness ▪ affiliates from using your information to market to you ▪ sharing for nonaffiliates to market to you <p>State laws and individual companies may give you additional rights to limit sharing.</p>
Definitions	
Affiliates	<p>Companies related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> ▪ <i>Our affiliates include financial companies with a common corporate identity, such as Veridian Credit Union and Veridian Insurance.</i>
Nonaffiliates	<p>Companies not related by common ownership or control. They can be financial and nonfinancial companies.</p> <ul style="list-style-type: none"> ▪ <i>Veridian Fiscal Solutions does not share with nonaffiliates so they can market to you.</i>
Joint marketing	<p>A formal agreement between nonaffiliated financial companies that together market financial products or services to you.</p> <ul style="list-style-type: none"> ▪ <i>Veridian Fiscal Solutions doesn't jointly market.</i>