1. Fill out an application and a Modified Caregiver Strain Index online at [www.respite.mt.gov](http://www.respite.mt.gov) or call to have an application and CSI mailed to you. Vicki Clear at 406-234-6034 or 800-224-6034. A Cost-Sharing Sliding Fee Scale will be sent also.

2. Caregiver will return to DEAP:
   a. application
   b. Modified Caregiver Strain Index
   c. proof of caregiver’s address
   d. proof of care recipient’s age
   e. income verification
   f. medical expense verification, if any

3. The cost-share is calculated.

4. Data is entered into a database.

5. Phone call is made to the applicant. Things covered:
   a. If qualify, the amount of respite that would be appropriate
   b. What the cost-share will be
   c. Three months to use
   d. Information on choosing a respite provider
   e. Explanation on how to fill out paperwork and what needs to be returned in order to get reimbursed
   f. Respite packet – what will be sent to them
   g. Information on Powerful Tools for Caregivers
   h. Information about the respite website

6. Respite packet sent

7. Follow up in three months if respite has not been used

8. Caregiver will be reimbursed after return of:
   a. Reimbursement form – properly filled out
   b. Satisfaction survey
   c. MCSI – after respite use