



The Caring Program for Children Guidelines

The Caring Program for Children's Mission:

To enhance the quality of life for children in our community by providing durable medical equipment and related items that otherwise could not be afforded by the child's family and are not covered by state or federal programs or by private insurance.

Who does The Caring Program serve?

Children 18 or under who reside in [counties](#) served by Blue KC, when state or federal programs or private insurance does not cover.

Who should request assistance?

Only third party professionals in conjunction with a public charity such as, social workers, counselors, teachers, etc. may request assistance on behalf of a child. We ask the professional to qualify the child regarding their need and verify that other resources have been eliminated. Subsequently, a request form should be completed and returned to the Greater Kansas City Community Foundation for review.

Should a parent contact The Caring Program for Children directly, we will put them in contact with an appropriate third party professional.

What assistance should be requested?

Durable medical equipment and other health-related items that The Caring Program for Children may provide are not narrowly defined. We strive to meet the needs of children on a case-by-case basis. Examples of health care needs that will be considered for funding include wheelchairs, braces, feeding devices, insulin pumps and prescription drugs exceeding benefit limits.

How is assistance allocated?

Requests are reviewed by the Greater Kansas City Community Foundation on a daily basis. Grant assistance will generally range up to \$2,500 per grant. Requests for assistance greater than \$2,500 will be considered on a case-by-case basis and the Community Foundation may contact you to request additional information.

In most cases, checks will be made payable to the public charity and mailed to the third party professional. In rare cases, checks will be made payable to a previously approved vendor and mailed to the third party professional. No check will be made payable to the third party professional, parent or child.

Can multiple requests be made for the same child?

Yes, if continued or new circumstances warrant additional assistance.

How to Apply

If you are interested in applying for funds, please fill out the below application and email to (akram@growyourgiving.org). If you have any questions, please contact **Raisa Akram** at 816-627-3443.

Part I: Information About the Child

Name: _____

Address: _____

City, State and Zip: _____

County: _____ Date of Birth: _____

Has the child received assistance from The Caring Program for Children before? *(Mark one)*

Yes No

If yes, please describe the assistance received:

Does the child have private insurance? *(Mark one)* Yes No

If yes, please list the insurance company and policy number:

Reason given for denial of coverage:

Part II: Information About the Public Charity

Requesting Charity: _____

Federal Tax ID Number: _____

Contact Name and Title: _____

Address: _____

City, State and Zip: _____

Phone Number: _____ Email: _____

Part III: Information About the Equipment/Item(s)

Date of Request: _____ Vendor Name: _____

Equipment Requested: _____

Cost of Equipment: _____

Reason requested:
