



## Representative Payee Fee Schedule

### **Organizational Representative Payee Fee:**

The approved monthly fee per the Social Security Administration (SSA)\* \*\*

*\*This fee does not apply to those whose fee is being paid by an outside entity through a contract or other arrangement*

*\*\*For individuals residing in an Assisted Living Facility: Fee may be reduced in certain circumstances; For individuals residing in a Skilled Nursing Facility: Fee is waived. For individuals meeting the SSA POMS criteria for Drug Addiction or Alcoholism, CFPD will collect the SSA's allowable monthly fee for an "Established DAA Condition"*

### **Any other funds (wages, annuities, special deposits, etc.) received by CFPD to manage:**

4% of the total monthly deposit

Unless otherwise arranged for payment from another source, fees will be collected automatically from the client's Representative Payee account on a monthly basis. The fee includes bookkeeping, postage, budgeting, SSA reporting and correspondence, check writing, fiduciary management, and benefit maintenance.

CFPD's Representative Payee Program does not provide Case Management services.

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**Acceptance of Fee Schedule**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Relationship to Beneficiary**