



Exhibit 6

Subcontracting Information

Provider Name:

1. Does provider subcontract?

Yes No

If you choose "No", do not continue with this exhibit.

2. What services are/will be contracted?

- Personal Care Services
- Transportation
- ERS Services
- Chore Services
- Personal Attendant Services
- SMESAT Services
- Personal Budget Services
- Environmental Adaptation and Home Modification Services
- Adult Day Care Services
- Assisted Living Services
- Nursing Care Services
- Other (specify):

3. Are your subcontractors any of the following?

- 1099 Independent Contractor
- Freelance or Self-employed Worker
- Other (specify):

Note: Subcontractors must carry all required insurance policies at levels specified in Exhibit 3. Provider must document a copy of the subcontractor's current certificates of liability insurance for the period services are delivered.