

Worker Name	Employer of Record Name	Member Name

Background: Federal and State tax laws provide tax exemptions for some domestic service employees. Exemptions are based on the worker’s age and relationship to their employer. Consumer Direct Care Network Tennessee (CDTN) will apply exemptions based on the relationships identified below.

Note: If you qualify for an exemption, it must be taken. Exemptions cannot be waived. You may not qualify for related benefits when your earnings are tax exempt. An example is unemployment insurance.

Worker-Employer Relationship Determination <i>(select one relationship below)</i>
<input type="checkbox"/> I am the spouse of the Employer. <i>Exempt from FICA¹, FUTA², and SUTA³.</i>
<input type="checkbox"/> I am the parent of the Employer. If parent checked, check <u>any</u> of the following that apply: <ul style="list-style-type: none"> <input type="checkbox"/> I provide care for the EOR’s child or stepchild that lives in the home. <input type="checkbox"/> The EOR’s child or stepchild is less than 18 years old or requires personal care of an adult for at least 4 straight weeks in 3 months. <input type="checkbox"/> The EOR is a widow, widower, divorced or married and lives with a spouse, but the spouse has a physical or medical condition that prevents them from caring for the child at least 4 straight weeks in 3 months. <i>Exempt from FUTA and SUTA. Subject to FICA if all three boxes checked above; else FICA exempt.</i>
<input type="checkbox"/> I am the child of the Employer. If child checked, check one option below: <ul style="list-style-type: none"> <input type="checkbox"/> I am 21 years of age or older. <i>Subject to FICA, FUTA, and SUTA.</i> <input type="checkbox"/> I am less than 21 years old. <i>Exempt from FICA and FUTA. Subject to SUTA.</i>
<input type="checkbox"/> I am not the Employer’s spouse, parent, or child. <i>Subject to FICA, FUTA, and SUTA.</i>

Acknowledgement: The Worker and Employer attest their selections above are accurate. If this information changes, the Worker must notify CDTN. If CDTN is not notified of changes, the Worker may have to pay back money that should have been withheld from pay.

 Worker Signature Date Employer of Record Signature Date

¹FICA – Federal Insurance Contributions Act (Social Security and Medicare)
²FUTA – Federal Unemployment Tax Act
³SUTA – State Unemployment Tax Act



Do you need free help with this letter?

If you speak a language other than English, help in your language is available for free. This page tells you how to get help in a language other than English. It also tells you about other help that's available.

Spanish: Español

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.

- CDTN Amerigroup: 888-398-0664 (TRS:711)
- CDTN BlueCare Tennessee: 888-450-3240 (TRS:711)
- CDTN UnitedHealthcare: 888-444-3109 (TRS:711)
- CDTN TennCare DIDD: 888-450-3242 (TRS:711)

Kurdish: کوردی

ئاگاداری: ئهگهر به زمانی کوردی قهسه دهکهیت، خزمهتگوزاریهکانی یارمهتی زمان، بهخوڕایی، بو تو بهردهسته.

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Arabic: ربيّةعلا

وظةعلم: اذا ملكتتةغلا ربيّةعلا اتمدخدةعاسملا ويةغلا رةفوتمكلا انجام.

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Chinese: 繁體中文

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。

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Vietnamese: Tiếng Việt

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn.

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Korean: 한국어

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.

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French: Français

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement.

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Amharic: አማርኛ

ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጅተዋል።

- CDTN Amerigroup: 888-398-0664 (መስመር ለተሰናዥው:TRS:711)
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Gujarati: ગુજરાતી

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે.

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Laotian: ພາສາລາວ

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຍຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ.

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German: Deutsch

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung.

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Tagalog: Tagalog

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.

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Hindi: हिंदी

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं।

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Serbo-Croatian: Srpsko-hrvatski

OBAVJEŠTENJE: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su vam besplatno.

- CDTN Amerigroup: 888-398-0664 (TRS- Telefon za osobe sa oštećenim govorom ili sluhom: 711)
- CDTN BlueCare Tennessee: 888-450-3240 (TRS- Telefon za osobe sa oštećenim govorom ili sluhom: 711)
- CDTN UnitedHealthcare: 888-444-3109 (TRS- Telefon za osobe sa oštećenim govorom ili sluhom: 711)
- CDTN TennCare DIDD: 888-450-3242 (TRS- Telefon za osobe sa oštećenim govorom ili sluhom: 711)

Russian: Русский

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода.

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Nepali:

नेपाली

ध्यान दिनुहोस्: तपाईंले नेपाली बोल्नुहुन्छ भने तपाईंको निम्ति भाषा सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ ।

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Persian:

فارسی

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد.

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- Do you need help talking with us or reading what we send you?
- Do you have a disability and need help getting care or taking part in one of our programs or services?
- Or do you have more questions about your health care?

Call us for free. We can connect you with the free help or service you need. (For TRS call: 711)

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We obey federal and state civil rights laws. We do not treat people in a different way because of their race, color, birth place, language, age, disability, religion, or sex. Do you think we did not help you or you were treated differently because of your race, color, birth place, language, age, disability, religion, or sex? You can file a complaint by mail, by email, or by phone. Here are three places where you can file a complaint:

<p>TennCare Office of Civil Rights Compliance 310 Great Circle Road, 3W Nashville, Tennessee 37243</p> <p>Email: HCFA.Fairtreatment@tn.gov Phone: 855-857-1673 (TRS 711)</p> <p>You can get a complaint form online at: https://www.tn.gov/tenncare/members-applicants/civil-rights-compliance.html</p>	<p>MCO/Contractor Information</p> <p>Amerigroup Phone: 800-600-4441 (TRS 711)</p> <p>BlueCare Tennessee Phone: 800-468-9698 (TRS 711: 888-418-0008)</p> <p>UnitedHealthcare Phone: 888-383-9253 (TRS 711)</p>	<p>U.S. Department of Health & Human Services Office for Civil Rights 200 Independence Ave SW, Rm 509F, HHH Bldg Washington, DC 20201</p> <p>Phone: 800-368-1019 (TDD): 800-537-7697</p> <p>You can get a complaint form online at: www.hhs.gov/ocr/office/file/index.html Or you can file a complaint online at: ocrportal.hhs.gov/ocr/portal/lobby.jsf</p>
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