

The Arc of Illinois Grants Database

(Updated as of July 2023)

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[Alyssa V Phillips Foundation](#)

Website URL

- <https://www.alyssavphillipsfoundation.com/application-for-funds>

Coverage: *What is covered?*

- Therapy-related to Cerebral Palsy
- Medical equipment related to Cerebral Palsy

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- Have a diagnosed disability of Cerebral Palsy
- Be a US citizen
- Have a letter of recommendation from a healthcare professional (therapist, doctor, case manager, etc.)
- Have pursued other funding options before applying with the Alyssa V Phillips Foundation (i.e., insurance)
- Be able to provide a denial letter or explanation of non-coverage if an applicant has medical insurance or government funding (DARS/Texas Workforce solutions, MDCO, CLASS, etc.)

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- For requests over \$1,000, a portion of the total cost must be self-funded by the applicants. Applicants are required to detail such matters for request greater than \$1,000.00.
- For requests over \$3,000, a portion of the cost must be funded through sources other than the Alyssa V Phillips Foundations. Applicants should apply to at least one other charity to enable the Alyssa V. Phillips Foundation to partner funds to help meet the applicant's need. Applicants are required to detail such matters for requests greater than \$3,000.00.
- Currently, the Alyssa V Phillips Foundation is limiting direct and indirect financial assistance to any one beneficiary (or the family of a beneficiary) to \$5,000.00 per year, with a lifetime maximum of \$10,000.00.
- For any requests involving vehicle modifications, the vehicle must not be greater than 7 years old and must have fewer than 100,000 miles.

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- For applications under \$500: Applications are reviewed once all requested materials are submitted.
- For applications over \$500: Applications are reviewed in the order they are received after all materials are submitted. The Foundation will do its best to respond within 60 days. During heavy application requests, response time may take up to 90 days.
- The Alyssa V Phillips Foundation reserves the right to refuse and/or limit any request for funding.
- Applications that remain incomplete after 60 days will be closed.
- If a request is approved, the Alyssa V Phillips Foundation will purchase the requested item directly from the vendor or fund the requested service directly from the provider on

behalf of the beneficiary. If applicable, such funding will only be provided after the applicant's self-funded portion is received by the vendor/provider and only after the Alyssa V Phillips Foundation approval paperwork is signed/submitted.

Application Methods: *Online? Paper?*

- Online

Available in Spanish?

- No 2

Documents Required

- Letter of recommendation from a healthcare professional (therapist, doctor, case manager, etc.)
- A denial letter or explanation of non-coverage if an applicant has health insurance or government funding.
- Invoice Application Deadline
- Rolling applications (year-round)
- Applicants will receive a response within 90 days of submission.
- If an application is denied, applicants can re-apply after 150 days from the original application.

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- Services that are covered by insurance are NOT eligible for funding.

[Aubrey Rose Foundation](https://aubreyrose.org/)

Website URL

- <https://aubreyrose.org/>

Coverage: *What is covered?*

- Medical expenses
- Outstanding medical bills that insurance will not cover

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- Families with children (18 years and younger) who are currently living with a life-threatening medical condition.

Service & Treatment Exclusions: *Which services are NOT eligible for funding?*

- Ineligible requests such as medical bills already paid, submitting for food, clothing, laundry fees, mortgage payments and associated homeowner bills and anything deemed non-medical for your child will not be acceptable criteria to submit a grant request.

Funding: *Amount of funding available per fiscal year? Lifetime Cap?*

- One grant per family

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- Paid directly to the provider

Application Methods: *Online? Paper?*

- Online preferably OR
- Print and mail to: Aubrey Rose Foundation
Grant Request
3862 Race Road
Cincinnati, Ohio 45211

Available in Spanish?

- No?

Documents Required

- Copy of bill(s) for which you are applying for funding
- Explanation of Benefits statement and Coordination of Benefits statement (if applicable) from insurance company(s)

Application Deadline

- Grants are awarded on a quarterly basis. The Foundation's Board of Trustees meets in March, June, September and December. Applicants will be notified no later than 60 days after the Board of Trustees' meeting.

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- None

Additional Information

- None

[Autism Care Today](https://www.act-today.org)

Website URL

- <https://www.act-today.org/apply-for-grant/>

Coverage: *What is covered?*

- Applied Behavioral Analysis Therapy
- Speech and Occupational Therapy
- Bio-Medical Testing
- Supplements
- Assistive Technologies (i.e., iPad, communication apps)

- Safety Equipment (such as safety fencing, GPS tracking devices, and autism service dogs)
- Social Skills Groups
- Special Needs Summer Camps

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- Individuals and families affected by Autism Spectrum Disorders (ASD).
- Families that make less than \$100,000 annually will be considered first, but applicants are not automatically disqualified because of their family income.

Service & Treatment Exclusions: *Which services are NOT eligible for funding?*

- Transportation requests (cars, car repairs, transportation passes, air travel)
- Hyperbaric Oxygen Therapy
- Personal Needs (rent, utilities, family vacations)

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- Grants range from \$100-\$5,000.
- One grant per child

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- Grant payments will be made directly to the pre-approved treatment providers, assessors, or materials vendors.

Application Methods: *Online? Paper?*

- Online

Available in Spanish?

- No

Documents Required

- Proof of autism diagnosis and recommended treatment from your doctor or school Individualized Education Program (IEP).
- Proof of cost for medical treatment, programs, or materials
- Proof of family income with a copy of your tax return or proof of any other income (such as SSI, SDI, child support, etc.)

Application Deadline

- Grants are awarded quarterly

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- None

Additional Information

- None

Central Illinois Autism Association Mini Grants

Website URL

- [Grant Application - Central Illinois Autism Association \(autismpeoria.com\)](http://autismpeoria.com)

Coverage: *What is coverage?*

- Community grants have been used to create sensory rooms and autism-friendly events.
- Home grants have been used for communication devices, safety support, sensory needs, etc.
- Can be used for equipment, technology, supports, and more.
- Cannot be used for childcare/babysitting, respite care, therapy that would cease after grant runs out, or insurance premiums.

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- Resident of Peoria or the surrounding counties: Knox, Stark, Peoria, Marshall, Woodford, Tazewell, Mason, Fulton, Warren, LaSalle
- Other central Illinois counties not serviced by a local autism group may be considered Families, teachers, and therapists.
- Any person diagnosed with Autism regardless of their socioeconomic status.

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- \$500.00 per year. Applications are reviewed four times a year.
- Grants for Boardmaker Software will only be funded up to \$200.00.

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- Funds disbursed directly to successful applicants.
- Grantee may be asked to provide receipts and/or documentation at the request of the board.

Application Methods: *Online? Paper?*

- Online
- [Microsoft Word - Grant Application.doc.docx \(autismpeoria.com\)](http://autismpeoria.com)

Available in Spanish?

- No

Documents Required

- No documents required but supporting documentations can be attached and sent to autismpeoria@gmail.com

Application Deadline

- Quarterly applications (year March, May, August & November)

- Applicants will be contacted with an update on the status of their application in accordance with the quarterly schedule listed on the grant application.
- Can apply once a calendar year.

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- No

[Giving Angels Foundation](#)

[\(Formerly known as Gia Nicole Angel Foundation\)](#)

Website URL

- <https://givingangelsfoundation.org/apply-for-help/>

Coverage: *What is covered?*

- Medical equipment
- Medical supplies
- Essential family bills
- Specialized camps
- Therapeutic toys

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- Children under the age of 21 with physical disabilities or illnesses
- Child must be from a lower-income family (\$50,000 maximum annual income)
- Examples of eligible disabilities include, but are not limited to, spina bifida, paralysis, missing limbs, cerebral palsy, multiple sclerosis, and cancer

Service & Treatment Exclusions: *Which services are NOT eligible for funding?*

- No exclusions listed

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- \$500 maximum one-time grant allowance per recipient family (with rare exceptions made at the Board's discretion).
- Families who wish to receive assistance must complete an application and submit required supporting documents.
- Funds are awarded on a case-by-case basis

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- Unknown

Application Methods: *Online? Paper?*

- The application is only offered online

Available in Spanish?

- No

Documents Required

- Proof of diagnosis/disability (letter from the child's physician, therapist, or social worker on official letterhead)
- Proof of insurance denial for items requested
- Proof of income (most recent tax return)

Application Deadline

- Applications are accepted at any time
- Applications are voted on during monthly meetings
- If your completed application (including ALL required support) is received up to a week before a voting meeting, it will be reviewed at that month's meeting. If received within a week of a voting meeting, it will be reviewed at the following month's meeting.
- Please note, applications will not be reviewed until ALL required support is received.

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- No insurance requirements

Additional Information

- The foundation reserves the right to decline any application and/or ask for any additional information regarding the application.

[Healthwell Foundation-Pediatric Assistance Fund](https://www.healthwellfoundation.org/fund/pediatric-assistance/)

Website URL

- <https://www.healthwellfoundation.org/fund/pediatric-assistance/>

Coverage: *What is covered?*

- Prescription drugs
- Biologic therapies
- Devices or other treatments related to various diseases.

Disease Funds include:

- Alagille Syndrome Vitamins & Supplements
- Amyloidosis
- Amyotrophic Lateral Sclerosis
- Cancer-Related Behavioral Health
- Cardiomyopathy – Medicare Access
- Congenital Sucrase-Isomaltase Deficiency
- Cystic Fibrosis Treatments
- Cystic Fibrosis Vitamins and Supplements
- Dupuytren's Disease

- Emergency/Medical Workers Behavioral Health Funds
- Gout – Medicare Access
- Gout Travel Fund
- Hepatitis C
- Hyperoxaluria
- IgA Nephropathy
- Multiple Myeloma – Medicare Access
- Myelodysplastic Syndromes – Medicare Access
- Neurocognitive Disease with Psychosis – Medicare Access
- Nontuberculous Mycobacterium – Medicare Access
- Ovarian Cancer – Medicare Access
- Pancreatic Cancer – Medicare Access
- Pediatric Assistance (accepting phone call applications only)
- Peyronie’s Disease
- Porphyrias
- Pulmonary Fibrosis
- Renal Cell Carcinoma – Medicare Access
- Sickle Cell Disease
- Systemic Sclerosis with Interstitial Lung Disease
- Tardive Dyskinesia – Medicare Access
- Urea Cycle Disorders
- Wilms’ Tumor

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- Children being treated for chronic or life-altering diseases.
- Must have some form of health insurance that covers part of the treatment cost.
- Household income limit of 500% of the Federal Poverty Level (income falls within the guidelines)
- Must be receiving treatment in the U.S.

Service & Treatment Exclusions: *Which Services are NOT eligible for funding?*

- None listed

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- \$3,000 maximum

Disbursement of Funds: *How is the grant dispersed? Directly to the family or provider?*

- Payments are sent directly to the providers or facilities.

Application Methods: *Online? Paper?*

- Contact a Healthwell representative via phone at 1-800-675-8416 anytime Monday through Friday, 9:00am-5:00pm (ET).

Available in Spanish?

- Yes, there are Healthwell representatives that speak Spanish.

Documents Required?

- Documents showing the patient's diagnosis with a physician, physician assistant, or nurse practitioner's signature.
- Signed parent letter

Application Deadline

- Applications are accepted at any time

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- Must have some form of insurance (private insurance, Medicare, Medicaid, TriCare, etc.) that covers part of the cost of your treatment.

Additional Information

- None

[Joshua Harr Shane Foundation](#)

Website URL

<https://joshuaharrshane.org/criteria-for-assistance/>

Criteria for Assistance

- The request must be considered a catastrophic illness or for special needs assistance.
- We do not pay bills that are due immediately or relatively soon.
- We must contact your physician directly to verify each request.
- Applicants must file necessary paperwork with the physician's office for us to speak with them due to HIPPA Laws.
- The applicant is required to furnish a contact person and phone number along with contact name and extension at your doctor's office.
- We must receive a quote or other documentation validating your request.
- We do not accept cell phone numbers for verification.
- We do not pay phone, credit card statements, or cable bills.
- We do not provide cash under any circumstance.
- We do not fund requests due to injuries as a result of car accidents or psychological disorders.
- You will be notified when your application is approved for assistance.
- Donations for help are governed by the donations we receive.

[Miracle Travel Works](#)

Website URL

- <https://miracletravelworks.org/for-families/family-application/>

Coverage: *What is covered?*

- Financial assistance for travel expenses (plane tickets, gas, lodging, food, etc.) associated with urgent medical treatment for serious ailments or injuries.

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- To receive financial assistance from Miracle Travel Works, Inc. (MTW), families MUST be traveling for the purpose of seeking urgent medical treatment for their children's serious ailments or injuries, age birth through 18 years old, and must have their main residence within the Midwest states, including North Dakota, South Dakota, Nebraska, Kansas, Minnesota, Iowa, Missouri, Arkansas, Wisconsin, Illinois, Michigan, Indiana, and Ohio.

Service & Treatment Exclusions: *Which services are NOT eligible for funding?*

- Reimbursement will only be provided up to 3 months after the initial travel date, but applicants are encouraged to apply prior to travel.

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- No funding limits listed

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- Funds provided directly to the family

Application Methods: *Online? Paper?*

- Online
- No phone calls are accepted for requests for assistance

Available in Spanish?

- No

Documents Required

- Itemized receipts (if seeking reimbursement)

Application Deadline

- Rolling Application

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- None

Additional Information

- None

[MyGOAL Inc.](#)

Website URL

- <https://mygoalinc.org/mygoal-autism-grant-program/>

Coverage: *What is covered?*

- Medical: non-reimbursable medical expenses, including first-time visit to an Autism-related specialist
- Nutrition: vitamins or other nutritional supplements that are specifically designed for children with ASD
- Personal Needs: to provide for the personal needs of the individual with ASD
- Enrichment, Educational, and Socialization Needs: interactive activities that are beneficial for the development of individual(s) including camps and other services

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- MyGOAL offers a yearly grant to families such across the United States, to support and care for individuals under 18 years old with autism
- Preference given to families with an annual income of less than \$100,000

Service & Treatment Exclusions: *Which services are NOT eligible for funding?*

- None listed

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- Grants ranging from \$500-\$1,000 are awarded to 20 families
- Preference is given to first time applicants
- Grants are based on family economic need

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- Not listed

Application Methods: *Online? Paper?*

- Online

Available in Spanish?

- No

Documents Required

- A completed Medical Health Assessment Questionnaire showing verification of diagnosis, including age at diagnosis and current age, autism severity, level of functioning, social engagement, and coping skills.
- A detailed description of your current family's situation including members within the household, social/economic support system; employment status, and what the grant will be used for. The following information should be included.
- Number of dependents
- Number of dependents with Autism Spectrum Disorder (ASD)
- Information about what current funding the grantee is receiving (i.e., medical, nutrition, personal, enrichment, education, and socialization needs)

- Proof of household income: Most current tax return or SSI notification. (Paystubs and W-2 will not be accepted)

Application Deadline

- Beginning of year
- Decisions are made in mid-July

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- None listed

Additional Information

- None

[My Gym Foundation](https://www.mygymfoundation.org)

Website URL

- <https://www.mygymfoundation.org/apply-for-a-gift/>

Coverage: *What is covered?*

- Rehabilitative therapy
- Assistive devices
- Medical equipment
- Sensory items

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- Children with physical, cognitive, or developmental disabilities and those coping with chronic illness or financial struggles.
- Applicants must be under the age of 18

Service & Treatment Exclusions: *Which services are NOT eligible for funding?*

- None listed

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- Requests limited to \$500 or less

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- My Gym directly purchases all the items—it does not offer monetary gifts

Application Methods: *Online? Paper?*

- Online

Available in Spanish?

- No

Documents Required

- Specific brand/manufacturer of equipment requested
- Picture of your child

Application Deadline

- Rolling applications
- Committee reviews applications on a monthly basis

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- None listed

Additional Information

- None

ORACLE Health Foundation

(Formerly known as First Hand Foundation)

Website URL

- <https://www.oraclehealthfoundation.org/>

Coverage: *What is covered?*

- Lodging (only if related to child's care)
- Gas, parking and transportation-related to child's care.
- Clinical procedures, medicine, therapy, evaluations, service dogs, etc.
- Wheelchairs, assistive technology equipment, prostheses, care devices, hearing aids, etc.
- Lifts
- Ramps
- Transfer boards

Not covered

- Vehicle repairs
- Travel outside of North America
- Alternative or experimental treatments and therapies where there is controversy in the medical community
- Requests for debt reduction or past medical bills, copays or deductibles
- Requests for research funding
- Therapy dogs
- Home modification projects
- Wheelchair-accessible van purchases

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- The child must be 18 years of age or younger (a person 19–21 may be considered if they are in a child-like mental state)
- The child must be under the care of a pediatrician
- The case must involve a child with a specific health care need
- The request must be clinically relevant to the health of the child
- There must be no existing insurance coverage for the requested expenses
- One request per year, per child for a maximum of three times in a child's lifetime
- For pediatric grants, application location is based on where the child will receive care. For care outside of the U.S. and Canada, contact case managers at casegrantsww@oracle.com

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- One request per child, per year and a maximum of three requests during the child's lifetime
- Take your adjusted gross income (found on the first page of your federal income tax return) and subtract out-of-pocket medical expenses for the child in the past year. Compare the outcome to the table found here: <https://www.oraclehealthfoundation.org/request-a-grant>

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- Funds will be sent to the provider within three weeks of their approval

Application Methods: *Online? Paper?*

- Upload completed application and supporting documents online through this link <https://apply.yourcausegrants.com/apply/auth/signin>

Available in Spanish?

- No

Documents Required

- Every application must have the following documents:
 - Letter from doctor (on letterhead) that includes the child's diagnosis, history of illness, specific request for funding and other relevant information
 - First page of your most recent federal income tax return or W-2 (If you have not filed taxes, please submit three months of bank statements and/or a letter from your employer)
 - Letter from parent detailing any other awards granted/fundraising received
- If applying for treatment/services, equipment/supplies or vehicle modifications, the following documentation must be submitted
 - Evaluation from specialist (therapist, audiologist, etc. for the requested item)
 - Letter from the provider on letterhead showing the original cost and price after discount (discount must be given in order to receive assistance)
 - Letter of denial from the insurance company or policy showing exclusion
- If applying for travel or lodging, the following documentation must be submitted

- Letter of medical necessity from a social worker on letterhead stating the frequency and duration of travel for the next 12 months

Application Deadline

- Applications are accepted at any time
- A case manager will review the submitted application and supporting documents and reach out if there is additional information needed
- Oracle Health Foundation's Clinical Decision Committee meets every month to review submitted applications
- If approved, Oracle Health Foundation will send funding to the provider (not the family) within one week of approval
- All completed materials are due by the final Wednesday of the month to be considered for review the following month.

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- There must be no existing insurance coverage for the requested expenses

Additional Information

- Funds must be used within 12 months of the date granted
- Oracle Health Foundation reserves the right to distribute funding at its sole discretion

Small Steps in Speech

Website URL

- <https://www.smallstepsinspeech.org/individuals>

Coverage: *What is covered?*

- Specific need regarding a communication delay/disorder within the speech and language realm.
- Future therapies, materials and/or workshops

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- Children must be between the ages of 3 and 22
- Families must have a combined household income below \$100,000
- Must be a legal citizen of the United States
- Speech language pathologists must be licensed by the American Speech and Hearing Association (ASHA)

Service & Treatment Exclusions: *Which services are NOT eligible for funding?*

- ABA therapy and iPads will not be funded
- Grants are not awarded for reimbursement of services that were received in the past

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- May only receive a grant once in a child's lifetime
- The average grant awarded is \$1,000

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- Grant funds are sent to the service providers or vendors on behalf of the awarded individual

Application Methods: *Online? Paper?*

- Submit as an email attachment to apply@smallstepsinspeech.org OR
- Mail to: SMALL STEPS IN SPEECH
SERVICE COMMITTEE
PO BOX 65
EAGLEVILLE, PA 19408

Available in Spanish?

- No

Documents Required

- Application link: [Grant Application \(squarespace.com\)](http://www.smallstepsinspeech.org/individuals)
- Speech and Language Evaluation completed by an ASHA-certified SLP within 2 years of date of application
- AAC Evaluation if requesting an alternative communication device or software
- Quote of Service for requested services, including speech therapy, AAC device, software app, camp, workshop
- Document showing insurance coverage or non-coverage to include: deductible, copay, number of speech therapy sessions allowed annually, and allowance for device or software application
- IRS 1040 Federal Tax Return or verification of income if not required to file

Application Deadline

- Deadlines on this link <http://www.smallstepsinspeech.org/individuals>

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- None

Additional Information

- If applying for private speech therapy, the therapy provider and/or the therapist must be notified that the application has been made including their name(s) as providers
- If the person nominating the applicant is not the parent or legal guardian, the parent or legal guardian must be notified by the person nominating the applicant

[The HIKE Fund, Inc.](#)

Website URL

- <https://thehikefund.org/application-information/>

Coverage: *What is covered?*

- Hearing aids
- Assistive listening devices

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- Children under the age of 20
- Have not received a HIKE award in the last 4 years
- Be a US citizen
- The family's income cannot exceed \$125,000

Service & Treatment Exclusions: *Which services are NOT eligible for funding?*

- None listed

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- Not listed

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- Within two weeks, the parent/guardian will receive a letter saying: the application is complete, or the application is incomplete and what is missing, or the application is rejected and the reason for rejection
- If the application is complete, it will be sent to the HIKE Board Audiologist, and, if approved, it will be forwarded to the HIKE Board Treasurer.
- The Board Treasurer will send a letter to parent/guardian giving the amount of the grant and approximately length of time before funds will be available.
- When the funds are available, the awards check (made payable to the supplier) will be sent to a Job's Daughter representative in your area.
- The Job's Daughter representative will contact you to arrange a ceremonial check presentation. It is important that you and the HIKE Recipient attend if possible as this helps to show our members that their hard work has served to help others. It also helps to motivate them to continue to raise funds for HIKE so other families may benefit from their efforts.

Application Methods: *Online? Paper?*

- Application is available online
- Must send completed application:
The HIKE Fund, Inc.
c/o Claudia Hauser
530 Elliott St.
Council Bluffs, IA 51503
Phone: (712) 325-0812
E-mail: cbclaud@aol.com

Available in Spanish?

- No

Documents Required

- Completed pages 4 and 5
- Letter from parents and/or guardians explaining the financial need
- Statement of income and expenses
- Last Federal Income Tax Return 1040 pages 1 and 2 (black out Social Security Numbers, Bank Account Numbers and Pin Numbers)
- Copy of recent pay stub for each wage earner (black out Social Security Numbers)
- Recent audiogram (not more than 12 months old) AND a quote from a licensed and/or certified audiologist and/or physician.
- An itemized cost quotation from the supplier (include cost of hearing aid(s) and/or assistive listening device(s), cost of ear molds, cost of batteries, cost of professional fees, cost of repair warranty per year, and cost of insurance for loss and/or damage. The quotation must be submitted on official letterhead from the supplier. Please give your supplier the portion of this application entitled, "Information for Supplier".
- Completed page 7 by audiologist or supplier

Application Deadline

- Rolling applications
- Applicants will be notified when the application has been approved, and funds are available.

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- No

Additional Information

- The award check is only valid for 180 days from the date written

[The Kids Equipment Network](https://tken.org/how-we-help-kids/)

Website URL

- <https://tken.org/how-we-help-kids/>

Coverage: *What is covered?*

- Adaptive equipment including manual wheelchairs, power wheelchairs, adaptive strollers, walkers, gait trainers, crutches, standers, adaptive toilet seats, adaptive car seats and more

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- Children residing in the Chicagoland area in need of adaptive equipment

Service & Treatment Exclusions: *Which services are NOT eligible for funding?*

- Cannot reside outside of Chicagoland
- The Kids Equipment Network may NOT have a device in stock that meets your child's need. If that is the case, then you will be referred to another organization. These include:
 - MDA- <https://www.mda.org/office/chicago>
 - UCP- https://ucpseguin.org/about_us/
 - D4D- <https://supportd4d.org/>
 - Littlewins- <https://www.littlewins.com/>

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- Recipients are provided with free adaptive equipment (no financial award)

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- The adaptive equipment is given directly to the child

Application Methods: *Online? Paper?*

- Online (<https://tken.org/access-equipment/>)

Available in Spanish?

- Yes

Documents Required

- Measurements of the child
- Picture of the child to help match equipment
- Primary care physician details

Application Deadline

- Rolling applications
- After the application is submitted, you will be contacted within 7 business days

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- None

Additional Information

- None

[The Orange Effect Foundation](http://theorangeeffect.org/)

Website URL

- <http://theorangeeffect.org/>

Coverage: *What is covered?*

- Speech therapy
- Assistive technology

- Speech camp

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- Children and young adults up to 21 years old who live in the United States
- Due to high demand for grants, income levels over \$100,000 will not be considered unless a strong financial need is documented

Service & Treatment Exclusions: *Which services are NOT eligible for funding?*

- Cannot use grant for previous therapy sessions and technology purchases
- Does not pay for insurance deductibles

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- Can only apply once per year per child
- Lifetime cap of two grants
- Grants must be used within 12 months from the date of award notification

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- Funds are paid directly to the therapy provider or the device manufacturer upon receipt of invoice

Application Methods: *Online? Paper?*

- Applications must be mailed to: The Orange Effect Foundation, 17040 Amber Drive, Cleveland, Ohio 44111

Available in Spanish?

- No

Documents Required

- Current Speech and Language Evaluation and/or Reports completed by an ASHA licensed speech and language pathologist
- Documentation of Insurance Coverage including name of insurance carrier, deductible, number of speech therapy sessions covered per year, and amount that insurance covers per therapy session. If this is not a covered service, you must provide a denial letter from the insurance company or a copy of your Explanation of Benefits page
- Copy of Federal IRS 1040 Form(s)
- Service Provider Contact Info
- Formal Quote of Service (if applying for a therapy grant)
- Augmentative and Alternative Communication (AAC) Evaluation conducted by an ASHA certified Speech-Language Pathologist (if applying for an assistive technology grant)

Application Deadline

- Deadline dates are February 1, May 1, August 1, and November 1.
- They only accept applications filed using our online portal.

- Applicants will receive notification of the Board’s decision within 40 days of the application deadline. The notification will be sent via email to the person nominating the applicant.

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- None

Additional Information

- None

The Sunshine Foundation

Website URL

- [Sunshine Foundation – See What A Dream Can Do...](#)

Coverage: *What is covered?*

- The Sunshine Foundation’s sole purpose is to answer the dreams of chronically ill, seriously ill, physically challenged, and abused children ages three to eighteen whose families cannot fulfill their requests due to financial strain that the child’s illness may cause.
- Special Dreams: can be anything from a celebrity meet and greet, a family trip, a shopping spree, or adaptive medical or therapeutic equipment.
- Magical Dreams: may include visits to Central Florida theme parks, such as Legoland, Disney, SeaWorld, Universal Studios, and more.
- Dream Village: Sunshine Foundation has its own Dream Village in Davenport FL where families may stay while on a dream trip to Central Florida
- Cannot be used for doctor’s/medical bills or living expenses.

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- Child must be between the ages of 3-18
- Child must be diagnosed with severe or profound physical, developmental, or intellectual challenges, or trauma from physical/sexual abuse.
- A family’s household annual income may not exceed \$75,000.
- Child or any child in the household must not have had a previous dream/wish granted through The Sunshine Foundation or any other wish granting organization.
- One dream per family
- Child must be a citizen of and reside within the United States
- Child’s medical and/or travel restrictions or other related or unrelated circumstances may also affect the dream provided.

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- One dream per family

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- Combination of payment directly to providers and funds provided to family to assist with trip and travel expenses.

Application Methods: *Online? Paper?*

- Online referral Refer a Child Form – [Refer a Child Form – Sunshine Foundation](#)
- Once referral is received and request approved, the child’s family will be contacted to complete the application online within a few weeks.

Available in Spanish?

- No

Documents Required

- No documents required for online referral

Application Deadline

- Applications ongoing
- Estimated waiting list for trips are 5-7 years as of 2018 (depends on funding)
- Families notified at least 3 months before the trip to allow ample time to make arrangements.

[United Healthcare Children’s Foundation \(UNCCF\)](#)

Website URL

- <https://www.uhccf.org/>

Coverage: *What is covered?*

- Medical expenses that are not covered, or are not fully covered, by commercial health insurance.

Eligibility Requirements: *Precisely who is eligible? Who is not eligible?*

- Child must be 16 years of age or younger at the time of application.
- Child must have a Social Security Number. Taxpayer Identification Numbers (TIN) are not accepted.
- The family’s income must not be higher than the maximum eligible family income that is shown below:
\$55,000 or less for a family of 2
\$85,000 or less for a family of 3
\$115,000 or less for a family of 4
\$145,000 or less for a family of 5 or more
- The child’s health insurance must be through a commercial health plan, either through an employer or individually purchased. Secondary insurance through Medicaid or CHIP is permissible.
- Child is under the care of a licensed healthcare provider, and the family is applying for treatments, equipment, or services that were prescribed by a Medical Doctor (M.D.),

Doctor of Osteopathic Medicine (D.O.) or Doctor of Audiology (Au.D.) for hearing conditions.

- The child must receive the services or treatments within the 60-day period before the date you submit the application.

Service & Treatment Exclusions: *Which services are NOT eligible for funding?*

- **Dental Exclusions**
 - Dental Care
 - Annual Cleaning
 - Fillings, X-rays, etc.
 - Orthodontic Treatment– Braces, Invisalign, Check Ups, etc.
- **Education Exclusions**
 - School tutoring
 - Testing for a learning disability
 - Tuition for School or Camp (including day camps for therapies)
 - Electronic Devices- Computers, Laptops, iPad/Tablets, or Smart Phones not specifically designed for medical or clinical treatment purposes.
- **Home and Vehicle Exclusions**
 - Home improvements/modifications
 - Service dogs or other animals/pets
 - Purchase of vehicles (cars, vans, trucks, etc.)
 - Vehicle modifications, for example lift kits, would be considered for a grant service.
- **Prescription Drug Exclusions**
 - Drugs not approved by the United States Food & Drug Administration (FDA)
 - Drugs not purchased within the United States
 - Homeopathic supplements not prescribed by a licensed professional.
- **Procedure and Treatment Exclusions**
 - Biofeedback/Biomedical consultations
 - Clinical Trials
 - Heavy metal toxicity testing/Chelation therapy, unless for proven medical indication of lead or copper or iron
 - Hyperbaric oxygen treatment
 - Herbal testing
 - Relationship Development Intervention (RDI)
- **Reproduction Exclusions**
 - Egg Retrieval/Infertility
 - Pregnancy/Birthing
 - Sperm Banking
- **Therapy Exclusions**
 - Listening Therapy
 - Vision Therapy
 - Hippotherapy/Equine Therapy
 - Music Therapy
 - Play Therapy
 - Massage Therapy

- MeRT (Magnetic Resonance Therapy)
- Social Skills Therapy
- **Travel and Lodge Exclusions**
 - Gas
 - Flight
 - Food
 - Mileage
 - Hotel/Motel
- **Miscellaneous Exclusions**
 - Autopsy, Burial Costs
 - Camera/Video Surveillance Equipment
 - Alert Bracelet/GPS Tracker
 - Food- unless related to a medical condition.
 - Funeral Costs
 - Pools/Whirlpools
 - Memberships/Subscriptions
 - Well-Child
 - Routine Care
 - Vaccinations
 - Concierge Services of any kind

Funding: *Amount of funding available per fiscal year? Lifetime cap?*

- Up to \$5,000 each year per child
- \$10,000 lifetime maximum per child
- Recipients awarded less than \$5,000 may re-apply for another grant once the current grant funds have been completely exhausted.
- Reimbursement is available with adequate documentation showing the healthcare professional has been paid, or direct payment to medical professional.

Disbursement of Funds: *How is the grant disbursed? Directly to the family or provider?*

- Recipients will be given access to a UHCCF online portal where they can attach and submit their medical bills.
- Grant funds are NOT paid directly to the family or child.

Application Methods: *Online? Paper?*

- The application is only offered online

Available in Spanish?

- No

Documents Required

- Most recent submitted IRS 1040 Tax Form (may need additional documentation if child is not listed as dependent on most recent IRS 1040 Tax Form)
- Electronic copy of the front and back of current Commercial/Private insurance card
- Completed and signed Physician Certification of Medical Condition Form

Application Deadline

- Applications are accepted at any time
- Applications are reviewed each month
- Applications not approved by the regional board must wait 12 months before reapplying unless the medical condition and requested items have significantly changed from the original request.

Insurance Considerations: *Does having private or public insurance disqualify? Is there coordination with insurance?*

- Primary coverage for the child must be by a commercial health plan, either through an employer or individually purchased. Secondary insurance through Medicaid or CHIP is permissible.
- Loss of commercial health insurance coverage will result in closure of grant and any remaining grant funds will revert to UHCCF.

Additional Information

- None

[Variety of Illinois](#)

The Kids on the Go/Adapt My World program is not accepting formal applications at this time, however, sometimes they can help off-cycle or make a referral. Please fill out this form [Kids on the Go/Adapt My World Application Pre-Screening \(google.com\)](#) and they will be in touch soon.

Variety@Play events are being planned for 2023 throughout the Chicagoland area; send an email titled “Variety Family Newsletter” to info@varietyofillinois.org to be made aware of upcoming inclusive, accessible events for the whole family!

Website URL

- [Get Help - Variety the Children's Charity of Illinois \(varietyofillinois.org\)](http://varietyofillinois.org)