

# AFCSP vs. NFCSP

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	<b>AFCSP</b> <b>Alzheimer's Family &amp; Caregiver</b> <b>Support Program</b>	<b>NFCSP</b> <b>National Family</b> <b>Caregiver Support</b>
Funding Source	State of Wisconsin GPR State and GWAAR distribute funds to counties	Federal AOA Program- State distributes funds to each Area Agency on Aging (AAA). GWAAR distributes funds to counties in its service area
Maximum Annual Allocation Per Applicant	\$4,000, but agencies may set a lower maximum service level to serve more families. <i>Actual service payment</i> is based on care needs.	None in federal policy, but local agencies often set their own limits.
Eligibility Requirements	<ol style="list-style-type: none"> <li>1. Diagnosis of probable irreversible dementia: Alzheimer's, vascular dementia, Lewy body dementia, Parkinson's and other diseases that include dementia, irreversible MCI, etc.</li> <li>2. In-home, or can be used to provide caregiver respite and supplemental services for people living in a CBRF, RCAC or Independent Living arrangement. (Cannot pay for room &amp; board)</li> <li>3. No asset test</li> <li>4. Typically, it is not available to caregivers if the care recipient is enrolled in Family Care or another LTC program</li> </ol>	<ol style="list-style-type: none"> <li>1. The care recipient resides in a home or community setting (not nursing home)</li> <li>2. Care recipients aged 60 or older need assistance in 2 I/ADLs, or have dementia, <i>any age</i>.</li> <li>3. Grandparents or other relatives (non-parents) aged 55 and older who are the primary caregivers for a child under age 18.</li> <li>4. Caregivers aged 55 and older care for a person aged 18 to 59 with <b>severe</b> disability; long-term or chronic physical or cognitive limitations that require assistance for at least two activities of daily living.</li> <li>5. No income or asset test</li> <li>6. Priority is given to low-income individuals and those with a diagnosis of dementia.</li> <li>7. Typically, it is not available to caregivers if the care recipient is enrolled in Family Care or another LTC program</li> </ol>
Use of Funds	Authorized by <a href="#">DHS Chapter 68</a> Examples of program use: <ul style="list-style-type: none"> <li>• Case management/service coordination</li> <li>• In-home respite/companionship</li> <li>• Adult day care</li> <li>• Advocacy and legal assistance</li> <li>• Supportive home care - Help with personal care, bathing, medication monitoring/chores</li> <li>• Safety improvements/equipment</li> <li>• Caregiver training, including personal care</li> <li>• Overnight respite in a facility</li> <li>• Specialized transportation and escort</li> <li>• Caregiver counseling &amp; therapeutic resources</li> <li>• Community outreach and education</li> <li>• Crisis intervention</li> <li>• Protective placement or guardianship</li> <li>• Any other goods and services necessary to maintain the person with Alzheimer's at home</li> </ul>	Authorized by <a href="#">Older Americans Act, Title III</a> Information and assistance to caregivers about available services <ul style="list-style-type: none"> <li>• In-home respite/companionship</li> <li>• Adult day care</li> <li>• Help with personal care, bathing, medication monitoring and chores</li> <li>• Home safety improvements/equipment</li> <li>• Caregiver training: incl. personal cares</li> <li>• Overnight respite in a facility</li> <li>• Transportation</li> <li>• Costs to attend or provide support groups</li> <li>• Other services as agreed by caregivers and the agency</li> <li>• Community outreach and education</li> </ul>

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Fund Dispersal	The maximum allocation for each family is determined by using DHS enrollment form. Payments require receipts. Agencies may pay a service agency directly or reimburse program participants or the primary caregiver/ representative for pre-approved expenses.	Services must be pre-approved by the administrative agency in advance for goods and services to be purchased using NFCSP funds. Payments to service providers are usually made monthly, but other timeframes are allowed.
How to Refer	<ul style="list-style-type: none"> <li>• Anyone may refer: ADRC staff, DCS, caseworker, medical staff, family member, friend....</li> <li>• The AFCSP Coordinator will assess eligibility, complete enrollment paperwork, and work cooperatively with case managers from other programs and dementia care specialists</li> </ul>	<ul style="list-style-type: none"> <li>• Anyone may refer: ADRC staff, DCS, caseworker, medical staff, family member, friend....</li> <li>• The AFCSP and NFCSP coordinators should meet regularly to determine the appropriate program for enrollment and maximize the number of families served by each program.</li> </ul>
Details to note	<ul style="list-style-type: none"> <li>• If all funding is allocated each year, a waiting list may be created to serve families if funding becomes available in the future.</li> <li>• Once enrolled in AFCSP, a person remains in the program until officially disenrolled by the AFCSP Coordinator (for reasons such as death, facility placement, switch to Long-Term Care, NFCSP, etc.)</li> <li>• The AFCSP Coordinator may apply for NFCSP on behalf of clients who have needs that surpass their maximum program allowance under AFCSP. (Assuming there are sufficient NFCSP funds remaining)</li> </ul>	<ul style="list-style-type: none"> <li>• Before requesting NFCSP funds for a person with dementia, case managers should check with the AFCSP Coordinator to see if there are funds available through AFCSP, and if so, whether the person is eligible for AFCSP.</li> <li>• Best practice is to enroll a person with dementia in AFCSP first rather than NFCSP. If a family is eligible for AFCSP but funds are unavailable, they may enroll in NFCSP but should also be added to the AFCSP waiting list.</li> </ul>
Other Resources	<ul style="list-style-type: none"> <li>• <a href="#">Home   Wisconsin Family Caregiver Support Program</a></li> </ul>	<ul style="list-style-type: none"> <li>• <a href="#">Home   Wisconsin Family Caregiver Support Program</a></li> </ul>