

TA Questions for NFCSP and AFCSP

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Eligibility Questions

Q. Do you have to check immigration status for both AFCSP and NFCSP

A. No for all OAA programs. AFCSP Administrative Code is silent on the issue so there is no requirement.

Q. Please clarify the eligibility requirements for NFCSP and AFCSP as they relate to Family Care.

A. As of August 2018, older adults and individuals with a dementia diagnosis or other condition whose long-term care functional screen results indicate *non-nursing home level of care* are eligible to enroll in both AFCSP or NFCSP. If the person is enrolled in Family Care at a *nursing home level of care*, they are not eligible for AFCSP but could use NFCSP to access some services that are not covered by the LTC program they are enrolled in.

In addition, previously a person who was *eligible for* Family Care was not able to enroll in AFCSP.

However, as of January 2019, Medicaid-eligible individuals may choose to enroll in AFCSP instead of Family Care or other Medicaid program.

Q. We have a couple, age 85 and 100, who both are in need of home care and I am having a hard time identifying who is the caregiver/care recipient. Can I enroll them in NFCSP and list one as the caregiver?

A. As long as they both need assistance with 2 ADLs/IADLs, they could both be enrolled as the Caregiver and both receive NFCSP benefits.

Q. Caregiver and care recipient are moving from one county to another and are enrolled in AFCSP. Can they continue benefits after they move and how is that transfer handled?

A. Yes, benefits can continue after the move. The two counties should work out how to continue coverage. The family cannot receive over \$4000 from AFCSP in one year between the two counties.

Q. The care recipient who is on AFCSP is moving to an Assisted Living Facility in a different county. Should their AFCSP be transferred to the new county?

A. Either the person with dementia *or that person's caregiver* must live in the county where they are enrolled in AFCSP.

Q. Can a caregiver who is caring for her spouse AND mother receive funding for both care recipients? Or is it one chunk of money per caregiver?

A. For NFCSP, the caregiver can get 112 hours of respite for her spouse and 112 for her mother. I look at it per caregiver situation/relationship. For AFCSP each family can only receive the maximum of \$4,000.

Q. If an AFCSP applicant is "married" but they don't live together, maintain separate household and finances and are looking at getting a divorce do you still need to look at combined income or can we just look at the income of the applicant?

A. Until the divorce is finalized, they are still married and both incomes must be counted.

Q. Can a person still receive support with the AFCSP funds if they're also getting help from the VA?

A. Yes.

Q. We have a couple where the wife is enrolled in AFCSP and now the husband was recently diagnosed with dementia and is in need of more support. Can the husband also enroll in AFCSP or are we not able to use the same funds in one household at a time.

A. There is a \$4,000 max per family per year, so you just need to stay within that guideline.

Q. If a family leaves WI for the winter months can they still submit expenses? We have two families that leave, and it doesn't seem fair that they can use the funds while away especially when we have a waiting list.

A. You can provide AFCSP services to county residents while they are out of state, but you don't have to ... especially if you have a waiting list or are turning people away who walk in your door. In order to be fair to everyone, the county should adopt a policy for serving "snowbirds." As long as it is applied equally to everyone, you are within the parameters of the program. You could also address this as part of your waiting list policy, which we ask each agency to explain when submitting annual budgets.

Q. I am working with two sisters who are living in a house together. They are both in and out of the hospital, so the family is looking at getting supportive home care to help relieve the family from having to be there all the time. Would they each be eligible for the NFCSP grant since they have different caregivers even though they are living in the same home?

A. Yes, a caregiver for each older adult could be enrolled in NFCSP as long as they both meet the qualifications of being "frail."

Q. Can I use NFCSP or AFCSP funds for a caregiver who is living in our county and she is caring for her father in her home, but he is technically still an Illinois resident?

A. As long as either the care recipient or the caregiver is a resident of your county, you can use NFCSP or AFCSP funds to assist them.

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Questions Related to Diagnoses

Q. Would a diagnosis of a Traumatic brain injury make someone eligible for the AFCSP grant?

A. Not necessarily. There are other programs meant for TBI patients. If for some reason those cannot be used or are exhausted, a waiver could be submitted to request a TBI family be enrolled. But our program is really meant for people with dementia.

Q. Would a dx of MCI (mild cognitive impairment) meet the diagnosis requirement to be enrolled in AFCSP or NFCSP for a person under age 60???

A. It depends on the type of MCI. If it is an irreversible condition, such as MCI or dementia that accompanies incurable diseases, such as Parkinson's, then the diagnosis would qualify. If it is the result of a condition that is covered by the developmentally disabled side of our system, then no ... it would not qualify. For NFCSP, the person would also need to be "frail" - need assistance with 2 ADL's/IADL's.

Q. Does the diagnosis "amnesic mild cognitive impairment" qualify for enrollment into AFCSP?

A. If the condition is the result of an incurable disease that will continue to worsen, then yes. If it is the result of an accident that caused traumatic brain injury, then no. The key words for a qualifiable diagnosis for AFCSP are "irreversible, cognitive impairment."

Q. I met with the family last week, and the consumer has dementia as a result of triple bypass surgery. The official diagnosis from the consumer's physician stated the consumer is diagnosed with 'Cognitive and Neurobehavioral dysfunction status post brain injury' and 'Anoxic brain injury.' Would this diagnosis qualify this consumer for AFCSP?

A. The key thing we are looking for is an "irreversible cognitive impairment." Brain injuries are usually covered with other programs – this sounds more like a brain injury. It also sounds like it might be temporary since it is right after a surgery, so this would not be a qualifying diagnosis. If the dementia doesn't improve or the physician can make the diagnosis as an irreversible dementia, then the person would qualify.

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Grandparents/Relative Caregivers (Relatives As Parents)

Q. I am working with a 58-year-old grandparent who is raising six grandchildren. She has guardianship of one but has adopted the other five. Can NFCSP funds be used for the adopted children or just the one she has guardianship of?

A. NFCSP can be used for all the children. In section 11.2 the policy says the child can be related by "blood, marriage or adoption."

Q. Can I use NFCSP for a 58-year-old woman who is helping care for her son who is recovering from a car accident?

A. No, the adult child does not meet the definition of "disabled" for purposes of this grant.

Q. Can a Grandparent/Relative Caregiver receive NFCSP funds if they are receiving Kinship Care?

A. Yes, but prioritize those who are not on Kinship Care.

Q. Can NFCSP be used to pay for Pampers for a grandparent raising a grandchild?

A. If there is not a more appropriate place for the caregiver to receive diapers or discounted diapers, then yes, NFCSP could cover the cost of pampers. Code as #67 – Supplemental Services – Consumable Supplies

Q. If we are working on giving NFCSP funds to those grandparents caring for a grandchild and the need is clothes and backpack for example, and these would be one-time things, would we still have to have them complete the program evaluation and the whole program caregiver needs assessment form?

A. The purpose of the Needs Assessment is to help assess all areas of a caregiver's life to ensure their needs are met. So, yes, it is good to go touch on the different sections because you and the caregiver may determine there are services/items that are more important/useful than what they came in asking for. Sometimes going through these forms helps the caregiver self-identify other areas in their life that are affected by their caregiving that they didn't even realize. Remember, you do not have to ask every question on the form. The intent is to touch on all the areas. You might simply ask, "Are you sleeping okay? Eating okay?" etc. (See Needs Assessment Supplement and Best Practices documents.) And yes, everyone who enrolls in the program, even for a one-time thing, needs to do the program evaluation at this time.

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What items/services can be paid for with NFCSP or AFCSP?

Q. I have a caregiver who's care recipient is on Medicaid now and they are not covering her Abreva (for cold sore treatment). Is that something we can cover?

A. You could cover that, but I would check with the EBS and see if there is a different way to get it covered – probably not, but good to make sure. It seems Medicaid should pay for that, especially if she/he can get a doctor's order. If not, yes, you can use NFCSP for it.

Q. A specific question related to the NFCSP program, a caregiver (husband) is wanted to see if he can get reimbursed for gas for taking his wife (care recipient) to medical appts. I know transportation falls under this program as a reimbursable item, but just wanted to double check with it being specific to the husband/wife.

A. Yes, that should be fine. Transportation can be for the caregiver to go wherever they need or for the care recipient if it is helping the caregiver. It is coded as a supplemental service as number of one-way trips.

Q. Would stretch bands and other exercise tools to assist with therapy of a care recipient rehabbing from a stroke qualify as a Supplemental Service for NFCSP?

A. Yes

Q. Can someone use the NFCSP funds to pay for home delivered meals?

A. You cannot use NFCSP to pay for OAA home delivered meals for people age 60+ since they qualify for a meal on a donation basis. You can pay for other home delivered meals such as Mom's Meals with NFCSP. And you could pay someone to go to the home and cook for them. If the person is under age 60 and does not qualify for an OAA meal on a donation basis, NFCSP can be used to pay the full cost of the meal for the caregiver.

Q. Can AFCSP funds be used to pay for dentures? I am working with a family and the father has advanced dementia. He lost/threw away his bottom dentures and it has been affecting his ability to eat/maintain proper nutrition and swallow medication. A speech therapist has been working with him in the meantime. Because of escalating medical bills, their credit has suffered and they don't qualify for alternative financing.

A. Yes, this would be appropriate use of the funding if all other options are exhausted.

Q. The care recipient who is on AFCSP is moving to an Assisted Living Facility in a different county. Can AFCSP continue to cover expenses that are not room/board?

A. AFCSP can continue to cover expenses that are not room/board as long as they are not things the facility should be providing. Things like transportation to appointments and incontinence supplies are examples.

Q. I had an Options Counselor ask if AFCSP funds are able to pay for medications? We've paid for medication management before but not the actual meds. We've never used NFCSP funds for medications either so thought I'd ask if it's allowable under that program?

A. We don't like to use AFCSP for medications, but have done so on an emergency basis – like a one-time thing until they figure out how they are going to pay for them. I would refer to the EBS as they often have ideas for getting medications covered – pharmaceutical rebates, samples, a different Part D plan and possibly even ordering from Canada. AFCSP cannot be used as a regular funding source for medications.

Q. I have someone who wants to utilize AFCSP to trim her neighbors tree branches because they are hanging in her yard and the neighbor won't do it. Can we use AFCSP?

A. No, that is not an appropriate use of AFCSP funds.

Q. A man caring for his wife needs time away. Can he place his wife in a Nursing Home for one week and have NFCSP pay for at least a portion of that?

A. Yes, NFCSP can pay for 112 hours of respite per year which is 4.667 – 24-hour days, so NFCSP can pay the daily rate x 4.667.

Q. A caregiver I am working with moved into her parents' home to care for them. She is storing her things in a friend's garage and she is worried that things will be ruined and wants to move them

into a climate-controlled storage unit until she can get her own home built on her parent's property. Can we reimburse this cost with NFCSP?

A. Yes, this would be allowable.

Q. I am working with a couple who are very careful to eat only organic foods. The caregiver purchases a nutritional supplement called "Superfood Organic." Can AFCSP be used to pay for that?

A. Yes, this is allowed. But be sure to use the needs assessment to determine if this is what they need the most.

Q. Can we use NFCSP to help pay expenses for the caregiver and her family to getaway for the weekend for some respite? Since our county won't pay for a non-professional respite provider and we can't find an agency to provide coverage, could we use NFCSP to pay for the hotel and then they could pay a friend to watch the care recipient while they are gone?

A. Yes, you can use NFSP to cover the cost of the hotel stay. Since this is considered respite, you would report this in SAMS under #66a - Respite Care – In Home, subservice would be General and the number of hours would be the number of hours someone is staying with the care recipient.

Q. Can we purchase taxi vouchers in bulk to have on hand when a caregiver needs transportation immediately?

A. Yes, as long as they are used by someone who qualifies for the funding and they are used by the end of the year.

Q. Can we use AFCSP to pay for a homeopathic treatment for the care recipient as it reduces his anxiety making it easier to care for him. Insurance won't pay for it.

A. Yes, this is an acceptable use of funds.

Q. We will be doing Powerful Tools for Caregiver workshops this year. To encourage (enrolled) AFCSP caregivers to participate, is it permissible to give them a \$50 gift card to compensate for travel expenses after the caregiver completes the course?

A. You can reimburse actual travel expenses incurred by people enrolled in one of the programs, or provide/reimburse respite costs ... but providing a gift card without any documentation about how it will be used is not allowed.

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SAMS Reporting and Fiscal Questions

Q. Where to record YMCA respite for Grandparent/Relative Caregiver?

A. #66b – Respite Care – Facility Based Day, subservice: Grandparent Respite – Child Care – Special Activity

Q. I purchased 10 books for grandparents raising grandchildren – to give to the grandparents I am working with. Where do I report that in SAMS?

A. Report under #69- Information Services with no subcategory. If you purchased 10 of the same book to give to families, it would be 1 activity with 10 consumers reached.

Q. I am working with a grandparent who is 56 years old and caring for a 10-year-old child. Who needs to meet the functional impairment of ADL's or IADL's? The grandparent or the child?

A. In section 11.6 of the NFCSP Policy, it states the functional screen doesn't apply to grandparents/ relatives caring for children under 19.

Q. Part of our NFCSP goes towards my salary as the coordinator. Fiscal includes this on the Information Services line as I do presentations, etc. I have been reporting the number of presentations I do but do not account for the time I spend preparing, etc. Should I be reporting that time somewhere in SAMS?

A. No. Only need to report the actual presentations you do.

Q. Where are books purchased for PTC reported in SAMS?

A. Nowhere – they will be accounted for when entering attendees for the PTC class.

Q. Where are books/CD's/DVD's purchased for a resource or local library reported in SAMS?

A. Information services – no subcategory

Q. Where do I report the following NFCSP expenditures on the fiscal claim form and in SAMS? Staff training, supplies for memory café's, equipment for dementia live.

A. Training for staff – for fiscal report as Training, do not report in SAMS

Memory café supplies – for fiscal and SAMS report under Information Services (subcategory, Public Presentation)

Equipment for dementia live – for fiscal and SAMS report under Information Services (subcategory, Public Presentation)

Q. We have purchased adaptive aids and books for caregivers with some of the funds. How do I enter that into SAMS if the equipment isn't tied to an individual yet? How do I enter the caregiver gift bags we purchased for the support group?

A. The gift bags purchased for the support group will not be entered directly. That purchase is reflected when you report the attendees of the support group. Books can be reported under Information Services, no subcategory. Adaptive Equipment is often purchased for a county loan closet. In this case, you would report the data in Supplemental Services when the caregiver "checks out" the equipment. Or if you are going to give it to them, report it at that time.

Q. We have a caregiver that attended an overnight retreat thing that cost \$35.00. I'm not sure where to report this.

A. Put it under 6502s - Caregiver Training, subcategory – Conferences. You would need to get full information on the caregiver and enter it as 1 session.

Q. Where would you report a massage for a caregiver?

A. Record it as 66a - Respite Care, subcategory - General, then report the number of hours the caregiver was gone for the massage.

Q. Where would you report a class or activity for a child who is being raised by grandparents?

A. Record it as 66a - Respite Care, subcategory - General, then report the number of hours the child was at the class.

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General Program Questions

Q. Should we be distributing 1099's to private individuals paid for respite and home care services? I have had a couple providers ask if they have to report the payments and one has actually said they would not provide respite if they had to claim it on their taxes.

A. Money paid to individuals for respite and home care services is considered taxable income. I would not provide any further tax information as they should be talking about this with their accountant.

Q. As the new year approaches, do individuals who were approved for grant allocations in 2017 need to reapply for funds in 2018 if they have a continued need and still meet the criteria?

A. For AFCSP, everyone needs to be reassessed annually – you can do that every 12 months rather than by calendar year. There isn't the same "rule" for NFCSP because the program was really meant provide short term/intermittent help. It is a good practice to reassess NFCSP recipients annually if they have a continued need – basic follow-up is valuable. There aren't any special forms – just do an update in their folder or whatever web-based notes you use.

Q. When a caregiver has a family member or friend provide short term respite, should we complete a background check prior to services beginning?

A. Background checks are not required by policy, but it is a good idea to do them. You can access a very basic background check for free via Wisconsin Circuit Court Access <https://wcca.wicourts.gov/> as well as the federal sex offender list <https://www.nsopw.gov/?AspxAutoDetectCookieSupport=1> These certainly don't cover everything, but it is something.

Q. If a caregiver has received AFCSP, spent those funds, then applies for NFCSP, is there a limit on how much total funding they can receive?

A. The max amount of AFCSP per year is \$4000 (unless the county has lowered that amount which most do) and NFCSP doesn't have a maximum dollar amount. NFCSP limits funds by only allowing 112 hours of respite per caregiver per year and the 20% max on supplemental services – for the whole county allocation. Most counties also have a maximum dollar amount for NFCSP, but that is not part of

the grant rules. So other than those things, there is not a maximum amount a caregiver can collect from the two programs.

Q. I was working with a very knowledgeable caregiver and doing the needs assessment with him was difficult and frustrating, so I ended up completing them in the office. Is that okay?

A. The most important thing to remember when using the form is that it was not designed to be a checklist of every question you must ask. It was designed to be a discussion guide to help coordinators uncover potentially hidden needs.

***The Needs Assessment has been updated to include the following instructions.*

INSTRUCTIONS: Agencies are required to use this tool to guide discussions with potential AFCSP and NFCSP participants. This form is not intended to be a checklist. Some questions may not be applicable to every caregiver or situation, which means coordinators are responsible for determining which sections to focus on most during discussions.

Q. I understand respite services maximize at 112 hours for the year. Is there a limit in the number of adaptive aides that can be purchased in the year, and can a family receive both respite and adaptive aids in the same year?

A. The only limitation on adaptive aids is that your county's NFCSP expenditures for supplemental services (which is what adaptive aids are considered) can't exceed 20% of total spending. And yes, a family can receive items/services from more than one category. Some counties have placed a cap on the amount of NFCSP funds one family can receive, but that is entirely up to each county.

Q. If we use NFCSP funds for a caregiver event and charge people to go to the event would the money we collect have to go back into the NFCSP funds or can we put that money in a general account for other programs.

A. If the amount you are charging attendees covers the cost of speakers, food and room rental, NFCSP should not be used. You could use NFCSP for "scholarships" for caregivers who can't afford to pay the registration fee, or to pay for respite or transportation to help a caregiver attend.

Q. Can a person utilize funding from III-E and II-B at the same time? For example, could they get respite from III-E and Lifeline from III-B?

A. Yes, they can.

Q. I know 40% of AFCSP must be spent on respite. If someone needs transportation to get to the Adult Day Services program, can that be considered respite?

A. Yes, any goods and services that provide respite to the caregiver can be counted as "respite" for the 40% minimum.

Q. Can any caregiver – caring for any type of disability/condition – attend a caregiver support group?

A. Caregiver support groups can be open to any caregivers. When using AFCSP or NFCSP funds, the group should be focused on caregivers of people who are over 60 or people who have dementia, but

anyone can attend. (The group could also be for adults over 55 who are caring for relative's children if NFCSP is used.) The only time it really matters is when you document in SAMS – the person would need to meet the qualifications of either NFCSP or AFCSP in order to report in SAMS. For example, if someone comes to the group who is caring for a 50-year-old with cancer, you couldn't enter them into SAMS, but they could still attend.

Q. For NFCSP, is the 20% max on Supplemental Services for each person enrolled or is it 20% of your total allocation?

A. It is 20% of your total allocation.

Q. What can be considered "Respite" for the 40% minimum requirement with AFCSP?

A. For AFCSP purposes, the definition of Respite is: Any service that provides caregivers with temporary relief from caregiving responsibilities. The goal of respite is to enhance the health and well-being of the caregiver. Respite is usually provided to caregivers at home in the form of visiting services, household chores or assistance with providing personal care, medication management or wound care. Respite may also be provided by an adult day center or short-term in an institutional setting. AFCSP respite may also include transportation costs, adaptive equipment and technology, and expenses related to keeping caregivers socially engaged with others during periods of temporary respite.

Q. Am I required to complete a needs assessment every year when I do the re-enrollment paperwork for AFCSP?

A. Yes, but data from the second Caregiver Needs Assessment does not need to be submitted to the State Office on Aging. Each caregiver should only be entered into the REDCap system once, after initial enrollment.

Q. Is the assistance provided by AFCSP and NFCSP considered taxable income?

A. Please refer program enrollees to a tax professional for advice. Although these programs are not cash public assistance programs, it is best to refer people to their tax preparer or a free legal advice service for a definitive answer.

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