

## **EXAMPLE 1 – Initial Implementation of Local Caregiver Program Policy:**

### **Introduction to National Family Caregiver Support Program**

The National Family Caregiver Support Program (NFCSP) provides a multifaceted system of support services for caregivers. Families are the major provider of long-term care, but research has shown that caregiving enacts a heavy emotional, physical, and financial toll. Many caregivers who are employed and provide care experience even greater strain in managing caregiving responsibilities. NFCSP offers a range of services to support caregivers. Under this program, Caregiver Coordinator shall provide Information and Assistance. Coordinators can offer Counseling/Support Group/Education, Respite and/or Supplemental Services in accordance with local policy limitations.

- Information to potential caregivers about available services.
- Assistance to caregivers in gaining access to supportive services.
- Individual counseling, organization of support groups, and training caregivers to assist them in making decisions and solving problems related to their caregiving roles.
- Respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities via In-Home Respite, Out-of-Home Respite (day), Out-of-Home Respite (overnight) and Other Respite.
- Supplemental services, on a limited basis, to complement the care provided by caregiver.

These services work in conjunction with other state and community-based services to provide a coordinated set of supports\*. Studies have shown that these services can reduce caregiver depression, anxiety, stress, and enable them to provide care longer, thereby avoiding or delaying the need for costly institutional care for their loved one.

\*If a care recipient is enrolled in Wisconsin's Long Term Care Program, IRIS or Family Care at a nursing-home level of care the caregiver may receive services limited to Information, Assistance and Counseling/Support Groups/Training.

### **General Program Requirements**

- 1) All referrals will be contacted within (3) business days.
- 2) Individuals seeking services will be provided with service options. The individual has the right to make an independent choice of service providers.
- 3) All contacts with NFCSP eligible participants, including telephone calls, shall be documented. The documentation shall include a brief descriptive statement of the interaction; including any service needs identified, alternatives explored, and service delivery options offered.
- 4) Make use of trained volunteers to expand the provision of the five service components.

### **Limitations**

- 1) Individual service provider rates for services shall not exceed usual, reasonable, and customary rates for service in the service area and cannot exceed private pay rates for the same service.
- 2) Respite care is authorized for up to 50 hours per month per Caregiver. If there is a need to exceed 50 hours per month, a written request to exceed the 50-hour respite service cap shall be sent to

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the NFCSP Manager for prior approval. Approval will be determined on a case-by-case basis and may be limited to a one-time allocation.

- 3) Out-of-Home Respite (overnight), i.e. an assisted living facility and/or nursing home, on an occasional or emergency basis maybe be offered. NFCSP funds can be used, up to \$600 for an occasional or emergency placement per grant year per Caregiver per Care Recipient based upon grantee's budget. Prior approval for additional respite hours for the month must be submitted in writing to the NFCSP Manager.
- 4) Primary Caregivers who are being paid by private arrangement to provide care are not eligible to receive NFCSP services.
- 5) Supplemental Services, on a limited basis, are intended to complement the care provided by Caregivers. Costs exceeding \$400.00 per year per eligible participant for Assistive Safety Devices and Minor Home Modifications shall be pre-approved in writing by the NFCSP Manager.
- 6) If a NFCSP eligible participant discontinues NFCSP services before the end of the twelve-month period, their case shall be closed:
  - a. If funds are available and the Aging Unit has no waiting list, the eligible participant may be readmitted to the program subsequent to the case closing.
  - b. If there is a waiting list the eligible participant should be added to the Aging Unit's waiting list.
- 7) The Older Americans Act states information and services shall be provided to family Caregivers in a direct and helpful manner. In cases where Caregiver support programs already exist within the community, coordination of these programs and the NFCSP is essential to maximize the funding available to family Caregivers and to avoid duplication of services.
- 8) If a Care Recipient passes away or moves into an Assisted Living Facility and/or Nursing Home the Caregiver can receive Information, Assistance and Counseling/Support Groups/Training services for 12 months.

### **Prohibited Activities**

- 1) Duplication of services.
- 2) Using NFCSP funds to pay for services that are already paid for by another funding source.
- 3) Breach of confidentiality.
- 4) Signing NFCSP documents for the Caregiver and/or Care Recipient. The only people who can sign the documents are the Caregiver or the Power of Attorney.
- 5) Use of OAA funds to provide Caregiver services to a Caregiver who does not meet the eligibility criteria.
- 6) Altering or back dating documentation relating to the NFCSP.

### **Program Income**

All recipients of the Title III-E caregiver services are provided the opportunity to voluntarily contribute towards the cost of service. Any voluntary contribution will be referred to as program income and will be used for the sole purpose of expanding caregiver services.

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## **EXAMPLE 1 - Wait List:**

### **POLICY: Alzheimer's Family Caregiver Support Program Wait List**

#### **I. Purpose**

The purpose of this document is to define the policies and procedures of the Aging and Disability Resource Center (ADRC) related to the management of a waiting list of qualified applicants for the Alzheimer's Family Caregiver Support Program.

#### **II. Establishing a Wait List for the AFCSP**

The waiting list is composed of those eligible for the Alzheimer's Family Caregiver Support Program as determined by the ADRC. A waiting list will be established once the ADRC has authorized the use of 80% of its AFCSP funding for a given year. Example: The ADRC will receive \$31,001 for 2013. A waiting list will be established once \$24,800 of AFCSP funding has been authorized for use in 2013.

#### **III. Serving Persons from the AFCSP Wait List**

All new applicants will be served on a first-come, first serve basis. All applicants waiting to receive funding through AFCSP will be contacted monthly while waiting for funding to ensure their health and safety needs are being met.

Whenever possible, applicants who are waiting for funds through AFCSP may be eligible to receive services through another funding stream as part of the ADRC's Short-Term Services Program. ADRC staff will determine eligibility and authorize services as appropriate. In addition, individuals will also be screened for functional and financial eligibility for publicly funded long-term care programs that could potentially meet their needs as well.

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## EXAMPLE 2 - Wait List:

### Policies and Procedures

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Policy Title	Alzheimer's Family Caregiver Support (AFCSP) & National Family Caregiver Support Program (NFCSP) Wait List Policy		
Policy #		Effective:	08/16/2017
Training Required:	Yes	Revised:	06/14/2019
Date of Review:	06/14/2019	Next Review Date:	06/14/2020

#### PURPOSE:

The purpose of this document is to define the policies and procedures of the ADRC related to the management of a waiting list of qualified applicants for NFCSP funding. The establishment of guidelines to manage the wait list policy will assure consistency and fairness for customers.

#### POLICY:

When financial records indicate that the NFCSP budget is totally committed for the budget year, a waiting list will be initiated. Eligible caregivers will be advised of the lack of immediate funding. They will be placed on the waiting list and notified if funds become available.

#### DEFINITIONS:

**AFCSP** – The Wisconsin Alzheimer's Family and Caregiver Support Program (AFCSP) offers eligible persons with Alzheimer's disease or other dementia and their family caregivers, goods and services needed to maintain the person with dementia as a member of the household.

**NFCSP** - The National Family Caregiver Support Program (NFCSP) offers respite, information and support, and other resources for eligible family caregivers.

**Alzheimer's disease** – A degenerative disease of the central nervous system characterized by premature and irreversible deterioration of the brain.

**Caregiver** - Any person, other than a paid provider, who provides care for a person.

**Activities of Daily Living (ADLs)** – Areas of daily self-care activities that a customer needs assistance to complete to remain living as independently as possible.

**Wait List**- Caregivers screened and determined eligible for the program and funds are not immediately available.

#### PROCEDURE:

If the caregiver is determined eligible for either program or there are no funds remaining for the budget year, the caregiver's name will be placed on the appropriate program waitlist based on the referral date.

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Individuals placed on the waiting list will be provided with other caregiver and respite care options by the Caregiver Specialist. All customers on the waiting list will be contacted monthly while waiting for funding.

At the time of waiting list placement and during monthly follow-up contacts, caregivers will be offered the support of additional ADRC programs.

Caregivers will be removed from the waitlist based upon a first come first serve basis and level of risk. The following criteria will be used to determine risk:

- 1) funding is available,
- 2) greatest risk of institutional placement **and**
- 3) has the least functional support system **and**
- 4) has the least financial resources.

In priority situations, caregivers who are contacted must respond within two business days, or the next person on the list will be offered funds.

As funds become available, the Caregiver Specialist will work with the caregiver to establish a service plan for funding.

Customers/Caregivers may file a complaint and the ADRC complaint and appeal policy will be followed.

**REFERENCES:**

AFCSP Policy

<https://gwaar.org/alzheimers-family-caregiver-support-program>

[https://docs.legis.wisconsin.gov/code/admin\\_code/dhs/030/68/01](https://docs.legis.wisconsin.gov/code/admin_code/dhs/030/68/01)

NFCSP Policy

<http://www.gwaar.org/images/stories/FamilyCaregiving/NFCSP-Policy-Chapter11.pdf>

Greater Wisconsin Agency on Aging Resources, Inc.

<http://www.gwaar.org/for-professionals/family-caregiver-support-for-professionals.html#NFCSP>

ADRC Complaint and Appeals Policy

**FORMS/ATTACHMENTS:**

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### EXAMPLE 3 - Wait List:

#### **AFCSP and NFCSP Waitlist Policy**

When financial records indicate that the AFCSP and NFCSP budget is totally committed for the budget year, a waiting list is initiated. An AFCSP and NFCSP waiting list will be generated and maintained by Caregiver Specialists and reviewed by the Manager. Funds awarded to recipients are only for the current budget year. Eligible customers (representatives) are advised of the above and asked if they want to be placed on the AFCSP or NFCSP waiting list. If they agree, they are placed on the waiting list and advised that as AFCSP and NFCSP funds become available they will be removed from the waiting list for service funding based on the following criteria:

1. The client who has the least functional support system **and**
2. The client who has the least financial resources to meet their assessed need.

The customer or representative will be contacted by a Caregiver Specialist to notify them when and if funding becomes available.

Last Updated: 4/4/19

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## EXAMPLE 4 - Wait List:

### ALZHEIMER'S FAMILY AND CAREGIVER SUPPORT PROGRAM (AFCSP)

#### WAITING LIST POLICY

The Alzheimer's Family and Caregiver Support Program (AFCSP) was created in response to the stress and needs of families caring for someone with Alzheimer's Disease or other irreversible dementia. The purpose of AFCSP is to make an array of community services available to these families in hopes of enhancing lives and keeping people in their homes as long as possible.

The AFCSP program is regulated by Chapter 68 of the WI Administrative Code. Under DHS 68.03 counties are allowed to set a maximum allowed payment, not to exceed \$4,000 per calendar year. \_\_\_\_\_ County has set the maximum payment at \$4,000.

When AFCSP funds are fully committed for the budget year, a waiting list is initiated. AFCSP Waiting List Referrals are submitted to the Division Manager via SAMS case notes that indicate a referral has been made.

Eligible individuals and/or their representatives are advised that there is a waiting list, and a letter is sent to them indicating their number on the waiting list upon placement and every 6 months thereafter. Individuals on the waiting list are served on a first-come, first-served basis unless they are at imminent risk of harm as evidenced by Adult Protective Service interventions.

This AFCSP Policy shall be reviewed and revised annually at the Aging & Disability Resource Center Advisory Committee meeting.

1/2016

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## EXAMPLE 5 - Wait List:

### National Family Caregiver Support Program Waitlist Policy

Older American Act program participation is based on a person's age, not income. For this reason, an Aging Unit (AU) cannot establish any income requirements in any state or local policy. However, priority can be given to caregivers who are facing the greatest economic hardship or social hardships, such as older adults living in an isolated area with few resources/providers or caregivers who are trying to manage their health issues while also caring for another person.

The standards outlined in this policy for determining a person who has the greatest social or economic need must be applied uniformly and equally to all.

The "greatest economic need" is defined as the need resulting from an income level below the poverty threshold established by the Bureau of the Census. The term "greatest social need" is defined as the need caused by non-economic factors which include physical and mental disabilities, language barriers, and cultural or social isolation including that caused by racial or ethnic status which restrict an individual's ability to perform normal daily tasks, or which threatens his or her capacity to live independently."<sup>1</sup>

If a customer or representative is eligible for other services such as Hospice Care (or other Medicare services), Long Term Care (or other Medicaid services), Kinship Programming, Veteran's Assistance, etc. the Caregiver Coordinator will refer the customer or representative to the applicable program. While the customer or representative is receiving services to address: risk, caregiver burnout, offer caregiver training, and/or other meet other caregiver needs, the customer or representative will have the option to be placed on the NFCSP waitlist by \_\_\_\_\_ County.

Eligible customers (representatives) are advised of the above and asked if they want to be placed on the NFCSP waiting list. If they agree, they are placed on the waiting list and advised that as NFCSP funds become available they will be removed from the waiting list for service funding based on the following criteria:

1. The customer or representative who has the least functional support system (e.g. extraordinary/unexpected situation such as a change in condition, safety/physical danger, and/or risk of becoming homeless or placed in an institutional setting.) **and**
2. The client who has the least financial resources to meet their assessed need.

While on the waitlist the customer or representative will be provided access to free (or low cost) caregiver resources such as caregiver support groups, local caregiver events, and other resources available through

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<sup>1</sup> <https://www.govinfo.gov/content/pkg/USCODE-2022-title42/pdf/USCODE-2022-title42-chap35-subchapIII-partA-sec3026.pdf>  
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the [WisconsinCaregiver.Org](http://WisconsinCaregiver.Org). The customer or representative will be contacted by a Caregiver Coordinator to notify them when and if funding becomes available.

Last Updated: 4/4/19

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## EXAMPLE 6 - Wait List:

### ALZHEIMER'S FAMILY AND CAREGIVER SUPPORT PROGRAM (AFCSP)

#### WAITING LIST POLICY

When financial records indicate that the AFCSP budget is totally committed for the budget year, a waiting list is initiated. AFCSP Waiting List Referrals are submitted to the ADRC Supervisor via the AFCSP Waiting List Request Form found in Shared.

Eligible clients (representatives) are advised of the above and asked if they want to be placed on the AFCSP waiting list. If they agree, they are placed on the waiting list and advised that as AFCSP funds become available, those on the waiting list are removed from the waiting list for service funding based on the following criteria:

1. The client who is most at risk of institutional placement **and**
2. The client who has the least functional support system **and**
3. The client who has the least financial resources to meet their assessed need.

As funds become available the client (representative) is notified by their Social Worker/Service Coordinator and service funding is initiated.

AFCSP Policy established 1/1/93 reviewed/revised annually thereafter.

11/2015

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## EXAMPLE 7 - Wait List:

### Recommendation for National Family Caregiver Support Program (NFCSP) Funds Prioritization & Policy Change

#### **Summary**

**Issue:** Demand for NFCSP funds exceeds availability. There is currently no policy to cap funds per household or provide objective criteria for fund distribution. This makes it challenging to explain why clients cannot receive more funds than initially authorized, or why some clients receive more funds than others.

**Consideration:** Prioritizing low-income, low-asset clients ensures funds go to those most in need of financial support but may overlook nuanced caregiving situations such as:

- High medical debt
- Caregivers with multiple dependents
- Working caregivers
- High-cost, ongoing care needs due to complexity

**Recommended Action:** Approve and implement a prioritization method that integrates social and economic factors, ensuring funds are allocated equitably based on need, income, and assets, and adopt a policy limiting consecutive years of funding.

**Expected outcome:** Enhanced equity and transparency in service delivery, prioritizing those with greatest socio-economic needs. Expanded access to funds will enable more caregivers to receive timely assistance and reduce program dependency.

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#### **Integrated Prioritization Method:**

##### **1. Scoring Rubric Integration**

- Utilize the Wisconsin Family Caregiver Needs Assessment tool to score needs in such areas as caregiving, care recipient needs, respite, physical and emotional health, and education/resources.
- Assign points based on the severity and type of need, with core caregiving and respite needs weighted more heavily. (Appendix A, B).

##### **2. Income Tier Scoring**

- Base tiers on household income relative to the Federal Poverty Level (FPL), updated annually. See Appendix C.
- Assign more points to lower-income households (Appendix C).

##### **3. Asset Tier Scoring**

- Establish tiers based on countable assets. Determine asset tiers based on caregiver's total countable assets.
- Assign more points to households with fewer assets (Appendix D).

##### **4. Priority Scoring and Levels**

- Calculate a total score: **Needs Assessment Score + Income Tier Score + Asset Tier Score.**
- Define four priority levels ranging from lowest to highest priority (Appendix E).

##### **5. Allocation Amounts by Priority Level**

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- Link fund allocations to each priority level (Appendix F).

**Alternative Considerations:**

**1. Financial-Only Prioritization**

- Bases prioritization on income and/or assets.
- Considers economic factors but overlooks social factors impacting caregiver burden.

**2. Needs-Only Prioritization**

- Uses the needs assessment score alone.
- Addresses non-financial factors but neglects economic challenges affecting caregiving.

**Policy Change: Limit on Consecutive Years of Funding**

To ensure equitable access and sustainability, caregivers will be limited to two consecutive years of NFCSP funding, followed by a one-year break before reapplying. Exceptions may be granted in extraordinary circumstances, such as severe caregiving burdens or terminal illnesses. Exceptions could be approved by ADRC leadership or the Advisory Board.

**Conclusion & Recommendation:**

Adopting an integrated prioritization method that accounts for income, assets, and caregiver needs, along with a policy limiting funding to two consecutive years per caregiver household, ensures a transparent and equitable approach to allocating NFCSP funds. These changes will enhance the program's ability to serve caregivers with the greatest socio-economic needs and reflect a commitment to fairness and responsible stewardship of NFCSP funds.

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## Appendix A:

### **Caregiver Needs Assessment Scoring**

Caregivers complete the needs assessment, which is scored as outlined below. This score provides a baseline for caregiving needs.

- **Core Care Needs** (e.g., bathing, toileting): 3 points each.
  - Reflects essential caregiving activities that directly impact the caregiver's burden.
- **Respite and Time Needs** (e.g., free time, overnight respite): 2 points each.
  - Important for maintaining caregiver well-being and preventing burnout.
- **Health & Emotional Needs** (e.g., mental health counseling): 1.5 points each.
  - Supports the caregiver's ability to sustain caregiving over time.
- **Education & Resource Needs** (e.g., advanced directives): 1 point each.
  - Provides information that aids caregiving but does not directly alleviate burden.

### **Scoring Tiers:**

- **High Needs:** 100 points or more
- **Moderate Needs:** 50-99 points
- **Low Needs:** 25-49 points
- **Minimal Needs:** Less than 25 points

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**Appendix B:**

**Appendix B:**

DEPARTMENT OF HEALTH SERVICES Division of Public Health F-02519 (11/2022)	STATE OF WISCONSIN Page 1 of 2
<b>WISCONSIN FAMILY CAREGIVER PROGRAM NEEDS ASSESSMENT</b>	

Caregiver Name [Redacted]	Caregiver ID Number [Redacted]	Date Enter Date
Care Recipient Name [Redacted]		

**SECTION I: Unmet Care Recipient Needs (Check all of the items needs help with)**

Adaptive Equipment	<input type="checkbox"/> Yes <input type="checkbox"/> No	Managing Health Care	<input type="checkbox"/> Yes <input type="checkbox"/> No
Bathing	<input type="checkbox"/> Yes <input type="checkbox"/> No	Mentally Stimulating Activities	<input type="checkbox"/> Yes <input type="checkbox"/> No
Dressing	<input type="checkbox"/> Yes <input type="checkbox"/> No	Money Management	<input type="checkbox"/> Yes <input type="checkbox"/> No
Companionship	<input type="checkbox"/> Yes <input type="checkbox"/> No	Nutritional Counseling	<input type="checkbox"/> Yes <input type="checkbox"/> No
Cooking	<input type="checkbox"/> Yes <input type="checkbox"/> No	Overnight Care	<input type="checkbox"/> Yes <input type="checkbox"/> No
Dementia Care Specialist Referral	<input type="checkbox"/> Yes <input type="checkbox"/> No	Personal Emergency Response System	<input type="checkbox"/> Yes <input type="checkbox"/> No
Eating	<input type="checkbox"/> Yes <input type="checkbox"/> No	Shopping	<input type="checkbox"/> Yes <input type="checkbox"/> No
Elder Benefits Counseling	<input type="checkbox"/> Yes <input type="checkbox"/> No	Supplemental Nutrition Assistance Program (FoodShare)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Grooming	<input type="checkbox"/> Yes <input type="checkbox"/> No	Toileting	<input type="checkbox"/> Yes <input type="checkbox"/> No
Home Delivered/Congregate Meals	<input type="checkbox"/> Yes <input type="checkbox"/> No	Transferring	<input type="checkbox"/> Yes <input type="checkbox"/> No
Home Modifications	<input type="checkbox"/> Yes <input type="checkbox"/> No	Transportation	<input type="checkbox"/> Yes <input type="checkbox"/> No
In Home Safety/Security	<input type="checkbox"/> Yes <input type="checkbox"/> No	Other: [Redacted]	<input type="checkbox"/> Yes <input type="checkbox"/> No
Incontinence Strategies	<input type="checkbox"/> Yes <input type="checkbox"/> No	Does not apply	<input type="checkbox"/> Yes <input type="checkbox"/> No
Interaction with Others	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No

Top needs identified by caregiver:  
[Redacted]

**Core Needs (3 pts)**

**Note:** Sections II through V Refer to the Caregiver's Needs, not the care recipient

**SECTION II: Unmet Caregiver Respite Needs (Check all that you need more time for or help with)**

Free Time to Oneself	<input type="checkbox"/> Yes <input type="checkbox"/> No	Outside Chores	<input type="checkbox"/> Yes <input type="checkbox"/> No
Housecleaning	<input type="checkbox"/> Yes <input type="checkbox"/> No	Overnight Respite	<input type="checkbox"/> Yes <input type="checkbox"/> No
Laundry	<input type="checkbox"/> Yes <input type="checkbox"/> No	Preparing Meals	<input type="checkbox"/> Yes <input type="checkbox"/> No
Making/Keeping Appointments	<input type="checkbox"/> Yes <input type="checkbox"/> No	Shopping	<input type="checkbox"/> Yes <input type="checkbox"/> No
Managing Your Own Medications	<input type="checkbox"/> Yes <input type="checkbox"/> No	Transportation	<input type="checkbox"/> Yes <input type="checkbox"/> No
Meeting Employment Obligations	<input type="checkbox"/> Yes <input type="checkbox"/> No	Other: [Redacted]	<input type="checkbox"/> Yes <input type="checkbox"/> No
Money Management	<input type="checkbox"/> Yes <input type="checkbox"/> No	Does not apply	<input type="checkbox"/> Yes <input type="checkbox"/> No

Top needs identified by caregiver:  
[Redacted]

**Respite & Time Needs (2 pts)**

**SECTION III: Unmet Caregiver Physical Health Needs (Check all that you need or would you benefit from)**

Access to Affordable Health/Dental	<input type="checkbox"/> Yes <input type="checkbox"/> No	Nutritional Counseling	<input type="checkbox"/> Yes <input type="checkbox"/> No
Exercise	<input type="checkbox"/> Yes <input type="checkbox"/> No	Powerful Tools for Caregivers	<input type="checkbox"/> Yes <input type="checkbox"/> No
Food Pantries	<input type="checkbox"/> Yes <input type="checkbox"/> No	Shopping Access/Transportation	<input type="checkbox"/> Yes <input type="checkbox"/> No
Free Time to Oneself	<input type="checkbox"/> Yes <input type="checkbox"/> No	Supplemental Nutrition Assistance Program (FoodShare)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Help Preparing Balanced Meals	<input type="checkbox"/> Yes <input type="checkbox"/> No	Other: [Redacted]	<input type="checkbox"/> Yes <input type="checkbox"/> No
Home Delivered Meals	<input type="checkbox"/> Yes <input type="checkbox"/> No	Does not apply	<input type="checkbox"/> Yes <input type="checkbox"/> No
More Sleep	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No

Top needs identified by caregiver:  
[Redacted]

**Health Needs (1.5 pts)**

Caregiver Name	Caregiver ID Number	Date
		Enter Date

**SECTION IV: Unmet Caregiver Emotional Health Needs (Check all that apply)**

How have you been handling the emotional stress of caring for \_\_\_\_\_? Has it been difficult emotionally?  
 Are you able to handle the added stress from caring for \_\_\_\_\_?  
 Are you aware of support groups/memory cafés and that counseling and support groups are available?

Family Meeting	<input type="checkbox"/> Yes <input type="checkbox"/> No	People Willing to Help	<input type="checkbox"/> Yes <input type="checkbox"/> No
Free Time to Oneself	<input type="checkbox"/> Yes <input type="checkbox"/> No	Social Time with Family/Friends	<input type="checkbox"/> Yes <input type="checkbox"/> No
Memory Café	<input type="checkbox"/> Yes <input type="checkbox"/> No	Stress Relief/Relaxation Techniques	<input type="checkbox"/> Yes <input type="checkbox"/> No
Mental Health Counseling	<input type="checkbox"/> Yes <input type="checkbox"/> No	Support Group	<input type="checkbox"/> Yes <input type="checkbox"/> No
Options Counseling/Resources	<input type="checkbox"/> Yes <input type="checkbox"/> No	Other: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Paid Respite	<input type="checkbox"/> Yes <input type="checkbox"/> No	Does not apply	<input type="checkbox"/> Yes <input type="checkbox"/> No
Participate Activities Outside Caregiving	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No

Top needs identified by caregiver:  
 \_\_\_\_\_

**Emotional Needs (1.5 pts)**

**SECTION V: Education and Resource Needs (Check all that apply)**

Are advance directives in place for your loved one? For yourself? Would more information or education about behavior challenges or the person's condition, caregiving stress or community resources be helpful?

Advanced Directive/Power of Attorney	<input type="checkbox"/> Yes <input type="checkbox"/> No	Options Counseling/Resources	<input type="checkbox"/> Yes <input type="checkbox"/> No
Alzheimer's 24/7 Helpline	<input type="checkbox"/> Yes <input type="checkbox"/> No	Powerful Tools Workshop	<input type="checkbox"/> Yes <input type="checkbox"/> No
Clarify End-of-Life Wishes	<input type="checkbox"/> Yes <input type="checkbox"/> No	Share the Care Program	<input type="checkbox"/> Yes <input type="checkbox"/> No
De-escalation Techniques	<input type="checkbox"/> Yes <input type="checkbox"/> No	Support Group	<input type="checkbox"/> Yes <input type="checkbox"/> No
Health Care Literacy	<input type="checkbox"/> Yes <input type="checkbox"/> No	Trualta Online Caregiver Training	<input type="checkbox"/> Yes <input type="checkbox"/> No
Information about Disease Progression	<input type="checkbox"/> Yes <input type="checkbox"/> No	Other: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Long-Term Planning	<input type="checkbox"/> Yes <input type="checkbox"/> No	Does not apply	<input type="checkbox"/> Yes <input type="checkbox"/> No

Top needs identified by caregiver:  
 \_\_\_\_\_

**Education & Resource Needs (1 pt)**

**Conversation Starters**  
 Questions to help caregivers identify their most important needs. (Responses from this section are not reported to DHS)

What two situations/responsibilities are the most stressful for you?  
 \_\_\_\_\_

How could these situations be eliminated/reduced or made less stressful?  
 \_\_\_\_\_

If you could remove one responsibility from your daily or weekly routine to make life easier, what would that be?  
 \_\_\_\_\_

What techniques do you currently use to relieve stress?  
 \_\_\_\_\_

Who can you rely on to give you a break from your responsibilities?  
 \_\_\_\_\_

## Appendix C:

### Income Scoring

Assign a tier based on the caregiver's household income relative to the Federal Poverty Level (FPL).

#### 2025 FPL Chart:

Household Size	100% Poverty	110% Poverty	125% Poverty	150% Poverty	175% Poverty	185% Poverty	200% Poverty
1	\$ 15,060	\$ 16,566	\$ 18,825	\$ 22,590	\$ 26,355	\$ 27,861	\$ 30,120
2	\$ 20,440	\$ 22,484	\$ 25,550	\$ 30,660	\$ 35,770	\$ 37,814	\$ 40,880
3	\$ 25,820	\$ 28,402	\$ 32,275	\$ 38,730	\$ 45,185	\$ 47,767	\$ 51,640
4	\$ 31,200	\$ 34,320	\$ 39,000	\$ 46,800	\$ 54,600	\$ 57,720	\$ 62,400
5	\$ 36,580	\$ 40,238	\$ 45,725	\$ 54,870	\$ 64,015	\$ 67,673	\$ 73,160
6	\$ 41,960	\$ 46,156	\$ 52,450	\$ 62,940	\$ 73,430	\$ 77,626	\$ 83,920
7	\$ 47,340	\$ 52,074	\$ 59,175	\$ 71,010	\$ 82,845	\$ 87,579	\$ 94,680
8	\$ 52,720	\$ 57,992	\$ 65,900	\$ 79,080	\$ 92,260	\$ 97,532	\$ 105,440
9	\$ 58,100	\$ 63,910	\$ 72,625	\$ 87,150	\$ 101,675	\$ 107,485	\$ 116,200
10	\$ 63,480	\$ 69,828	\$ 79,350	\$ 95,220	\$ 111,090	\$ 117,438	\$ 126,960
11	\$ 68,860	\$ 75,746	\$ 86,075	\$ 103,290	\$ 120,505	\$ 127,391	\$ 137,720
12	\$ 74,240	\$ 81,664	\$ 92,800	\$ 111,360	\$ 129,920	\$ 137,344	\$ 148,480

#### Income Tiers:

- **Tier 1 (High Priority):** ≤ 150% of FPL
- **Tier 2 (Moderate Priority):** 151% - 250% of FPL
- **Tier 3 (Lower Priority):** 251% - 400% of FPL
- **Tier 4 (Lowest Priority):** > 400% of FPL

#### Income Tier Score:

- **Tier 1:** +10 points
- **Tier 2:** +7 points
- **Tier 3:** +4 points
- **Tier 4:** +1 point

### **Income Scoring**

Assign a tier based on the caregiver's household income relative to the Federal Poverty Level (FPL).

#### **2025 FPL Chart:**

#### **Income Tiers:**

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If you are new to the caregiver grant programs you may also find [\\*Examples - Caregiver Coordinator Checklists and Letters](#) and [\\*FAQs for NFCSP and AFCSP - categorized - UPDATED](#) helpful!

- **Tier 1 (High Priority):** ≤ 150% of FPL
- **Tier 2 (Moderate Priority):** 151% - 250% of FPL
- **Tier 3 (Lower Priority):** 251% - 400% of FPL
- **Tier 4 (Lowest Priority):** > 400% of FPL

Income Tier Score:

- **Tier 1:** +10 points
- **Tier 2:** +7 points
- **Tier 3:** +4 points

Household Size	100% Poverty	110% Poverty	125% Poverty	150% Poverty	175% Poverty	185% Poverty	200% Poverty
1	\$ 15,060	\$ 16,566	\$ 18,825	\$ 22,590	\$ 26,355	\$ 27,861	\$ 30,120
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10	\$ 63,480	\$ 69,828	\$ 79,350	\$ 95,220	\$ 111,090	\$ 117,438	\$ 126,960
11	\$ 68,860	\$ 75,746	\$ 86,075	\$ 103,290	\$ 120,505	\$ 127,391	\$ 137,720
12	\$ 74,240	\$ 81,664	\$ 92,800	\$ 111,360	\$ 129,920	\$ 137,344	\$ 148,480

- **Tier 4:** +1 point

## Appendix D:

### Asset Scoring

Assign a tier based on the caregiver household's total countable assets. Countable assets are defined based on their availability, following the guidelines outlined in the Elderly, Blind, and Disabled (EBD) Medicaid handbook: [http://www.emhandbooks.wisconsin.gov/meh-ebd/policy\\_files/16/16.2.htm](http://www.emhandbooks.wisconsin.gov/meh-ebd/policy_files/16/16.2.htm)

### Asset Tiers:

- **Tier 1 (High Priority):** ≤ \$50,000
- **Tier 2 (Moderate Priority):** \$50,001 - \$100,000
- **Tier 3 (Lower Priority):** \$100,001 - \$200,000

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- **Tier 4 (Lowest Priority):** > \$200,000

#### **Asset Tier Score:**

- **Tier 1:** +10 points
- **Tier 2:** +7 points
- **Tier 3:** +4 points
- **Tier 4:** +1 point

#### **Appendix E:**

##### **Priority Scoring & Levels**

Total priority score is calculated as follows:

**Total Score** = Needs Assessment Score + Income Tier Score + Asset Tier Score

##### **Priority Levels:**

- **Highest Priority:** Total score  $\geq$  120 (high needs, low income, low assets)
- **High Priority:** 80-119 points
- **Medium Priority:** 50-79 points
- **Low Priority:** < 50 points

#### **Appendix F:**

##### **Annual Allocation Amounts by Priority Level:**

**Tier 1 (Highest need):** Up to \$4,000 per household.

- This aligns with AFCSP maximum allotment.

**Tier 2 (Moderate need):** Up to \$2,500 per household.

**Tier 3 (Lower need):** Up to \$1,500 per household.

- This aligns with Title IIIB maximum allotment.

**Tier 4 (Lowest need):** No funding; only I&A or case management services.

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## EXAMPLE 8 - Wait List:

Policy Title Alzheimer's Family Caregiver Support (AFCSP) & National Family Caregiver Support Program (NFCSP) Waitlist Policy Policy # Effective: 1/1/2025 Training Required: Yes Revised: 9/9/2024 Date of Review: 10/31/2024 Next Review Date: 9/1/2025

**PURPOSE:** The purpose of this document is to define the policies and procedures of the ADRC related to the management of a waitlist of qualified applicants for the NFCSP or AFCSP funding. The establishment of guidelines to manage the waitlist policy will ensure consistency and fairness for customers.

**POLICY:** When financial records indicate that the AFCSP or NFCSP budget is totally committed for the budget year, a waitlist will be initiated. Eligible caregivers will be advised of the lack of immediate funding. They will be placed on the waitlist and notified if funds become available. Caregivers will be eligible for one of the two programs, either AFCSP with a dementia diagnosis or NFCSP without a dementia diagnosis.

### Principles of Waitlist Policy

1. Customers will be assessed for eligibility annually.
2. NFCSP customers are eligible every other year, with the possibility of receiving partial funds in off-years based on availability and customer needs.
3. Funding will be reassessed mid-year to determine if funds can be offered to returning customers.
4. Awarding funds to customers on a waitlist is based on the level of needs.

### DEFINITIONS:

**AFCSP** – The Wisconsin Alzheimer's Family and Caregiver Support Program (AFCSP) offers eligible persons with Alzheimer's disease or other dementia and their family caregivers, goods and services needed to maintain the person with dementia as a member of the household.

**NFCSP** - The National Family Caregiver Support Program (NFCSP) offers respite, information and support, and other resources for eligible family caregivers.

**Alzheimer's disease** – A degenerative disease of the central nervous system characterized by premature and irreversible deterioration of the brain.

**Caregiver** - Any person, other than a paid provider, who provides care for a person. **Activities of Daily Living (ADL's)** – Areas of daily self-care activities that a customer needs assistance to complete to remain living as independent as possible. **Instrumental Activities of Daily Living (IADL's)** - are activities that allow a person to live independently in a community. These activities are not considered to be essential for basic functioning but are important for day-to-day quality of life and relative independence.

**Waitlist**- A list of caregivers who have been screened and determined eligible for the program, but funds are not immediately available.

### PROCEDURE: NFCSP and AFCSP Summary of Criteria

- The ADRC will prioritize
- Caregivers who were on the existing waitlist at the end of the previous year o For the NFCSP program only - caregivers who have not participated in the program in the past 12 months.

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If you are new to the caregiver grant programs you may also find [\\*Examples - Caregiver Coordinator Checklists and Letters](#) and [\\*FAQs for NFCSP and AFCSP - categorized - UPDATED](#) helpful!

- If a family is placed on the waitlist or does not qualify for either program, they will be referred to other available caregiver supports; RCAW, support groups, Powerful Tools for Caregivers, and potentially back to ADRC Specialists to explore more options.
- Customers on the waitlist will be contacted every 60 days while they are waiting for funding.
- The availability of funds will be reassessed mid-year to determine if families who received funds the prior year can reapply. These families will be assessed based on waitlist removal criteria to determine their eligibility for funds.

Removal from Waitlist Caregivers will be removed from the waitlist based upon the highest needs as outlined in the criteria below. Should there be more than one family with the same level of needs, the date they were added to the waitlist will be the determining factor: 1) funding is available, 2) greatest risk of institutional placement and 3) has the least functional support system and 4) has minimal caregiver support and 5) # of ADL's (Activities of Daily Living) and 6) # of IADL's (Instrumental Activities of Daily Living) and 7) Other resources that can be used for care and 8) has the least financial resources.

Caregivers who are contacted must respond within three business days or the next person on the list will be offered funds. If the caregiver does not respond within three business days, they will remain on the waitlist and may be contacted if more funds become available. Caregiver Specialist will place a phone call initially, then follow up with an email if applicable.

Awarding funds: The Caregiver Specialist will work with families who are eligible for waitlist removal to determine their care plan. The initial funds awarded will cover the cost of the care plan up to, but not exceeding \$1,000 for NFCSP participants and \$2,000 for AFCSP participants. A limit of \$4,000 annually per family applies to both programs. Customers/Caregivers may file a complaint and the ADRC complaint and appeal policy will be followed.

	A	B	C	D	E	F	G	H
1								
2	<b>NFCSP</b>							
3	Date Submitted	Date Waitlisted	Family Name	Caregiver	Excel Data Base Number	Email	Street Address	City, State ZIP
4	3/25/20254	3/28/2024						
5	1/3/2024	2/16/2024						
6	1/16/2024	2/16/2024						
7	5/28/2024	5/28/2024						
8	1/26/2024	2/16/2024						
9	1/9/2024	2/16/2024						
10	1/22/2024	2/16/2024						
11	1/16/2024	2/16/2024						
12	12/1/2023	2/19/2024						
13								
14	Risk of institutional placement - NH or AL if supports weren't in place							
15	Functional Support system = People power, no one in their life to help, how many hours a week are they getting help							
16								
17	17 is max number of points							
18	10 to 17	High						
19	5 to 9	Med						
20	1 to 4	Low						
21								
22								

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Waitlist Risk Assessment Checklist							
Yes = 1, No = 0							
Risk of institutional placement 0=No 1 = Yes	Minimal Caregiver supports 0=No 1 = Yes	At or Below Poverty Level 0=No 1 = Yes	# of ADL's 6 max	# of IADL's 8 max	Other \$ Resources 0 = Yes 1 = No	Risk Number	
0	0	0	0	7	0	7	
1	0	0	4	1		6	
0	0	0	0	2		2	
0	0	0	2	1	1	4	
0	0	0	2	6	0	8	
0	0	0	0	5	0	5	
						0	
0		1	0	2	0	3	
0		0	3	5	1	9	

P	Q	R	S	T
---	---	---	---	---

Referring I&A	Last staffed	Staffed by	Last contact	Comments
Returning NFCSP	3/28/2024	TMB	8/6/2024	
TMB	2/27/2024	tmb	8/6/2024	
tmb	2/29/2024	tmb	8/6/2024	
Lori	5/30/2024	tmb	8/6/2024	
TMB	8/7/2024	tmb	8/7/2024	
TMB	5/23/2024	tmb	8/6/2024	
tmb	5/23/2024	tmb	8/6/2024	
TMB	5/23/2024	tmb	8/6/2024	
Lori	7/3/2024	tmb	8/6/2024	

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		National Family Caregivers Support Program (NFCSP)	Alzheimer's Family Caregivers Support Program (AFCSP)
<b>Fund Type</b>		Reimbursement program	Reimbursement program
<b>Eligibility</b>	<b>Age requirements</b>	- Care Recipient is 60+ and Caregiver is 18+ - Care Recipient is 19-59 AND has EOD, Caregiver is 18+ - Care Recipient is 19-59 AND disabled, Caregiver is 55+ - Care Recipient is under 19, Caregiver is 55+	- Caregiver is age 18+ and Care Recipient is either: age 19-59 AND has either: Early Onset Dementia OR age 60+
	<b>Residency Requirement</b>	Care Recipient must live in Brown County	Care Recipient must live in Brown County
	<b>Income</b>	None	Customer (& spouse, if married) must have a combined income of \$48,000/year or less. Disease-related expenses may be deducted from the gross annual income.
	<b>ADL/IADL</b>	Minimum of 2	Minimum of 2
	<b>Other Eligibility</b>	- Customer must have an identified caregiver - Not be currently enrolled in LTC or living in a licensed or certified residential facility	- Customer must have an identified caregiver - Not be currently enrolled in LTC or living in a licensed or certified residential facility
<b>Covered Expenses</b>	<b>Services</b>	- Shopping, meal prep, money management - Chores (shoveling, mowing, cleaning) - Companionship and socialization - Adult day-care or overnight care - Medication Management - Childcare (for relatives raising children) - Home Health Services (nursing, physical therapy, etc. not covered by insurance)	- Shopping, meal prep, money management - Chores (shoveling, mowing, cleaning) - Companionship and socialization - Adult day-care or overnight care - Medication Management - Home Health Services (nursing, physical therapy, etc. not covered by insurance)
	<b>Personal cares</b>	Bathing, grooming, dressing, eating	Bathing, grooming, dressing, eating
	<b>Respite services</b>	Yes, in-home or facility	Yes, in-home or facility
	<b>Equipment</b>	- Assistive Technology/Devices - Home security and safety - Home repair and modifications for health or safety	- Assistive Technology/Devices - Home security and safety - Home repair and modifications for health or safety
	<b>Consumable Supplies</b>	Incontinence supplies, Ready-Made Meals, puzzles/games, gym memberships, monthly PERS costs	Incontinence supplies, Ready-Made Meals, puzzles/games, gym memberships, monthly PERS costs
	<b>Transportation</b>	For medical appointments, recreational or social activities	For medical appointments, recreational or social activities
	<b>Other</b>		

2.1.25 BEC

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