AFCSP vs. NFCSP

It is important to check with the AFCSP Coordinator before applying for NFCSP or other programs to avoid eligibility conflicts and to coordinate services.

| | AFCSP | NFCSP |
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| | Alzheimer's Family & Caregiver | National Family |
| | Support Program | Caregiver Support |
| 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 in order to serve more families. **Actual service payment* is based on care needs. 1. Diagnosis of probable irreversible dementia: | None in federal policy, but local agencies often set their own limits. Participants are limited to 112 hours of respite per calendar year. 1. Has significant cognitive or mental |
| Eligibility Require- ments | Alzheimer's, vascular dementia, Lewy body dementia, Parkinson's with dementia, Pick's disease, mixed or undetermined dementia, etc. (Mild cognitive impairment is insufficient) 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. (Not for room & board) 3. \$48,000 max gross income of person & spouse 4. Not simultaneously enrolled in NFCSP or receiving caregiver respite through COP /Waiver, or Family Care 5. No asset test | impairment or requires help with two or more activities of daily living 2. Resides in home setting (not facility) 3. Care recipient is age 60 or older – or has Alzheimer's or other dementia, any age 4. No income or asset test 5. Priority is given to low-income individuals and those with a diagnosis of dementia 6. Available to caregivers of all older adults aged 60+, even if the care recipient is enrolled in Family Care or another LTC program. Caregiver is the program recipient. |
| Use of Funds | Authorized by DHS Chapter 68 (For more detail http://docs.legis.wisconsin.gov/code/admin_code/d hs/68. Some things included are: | Authorized by Older Americans Act, Title IIIE http://www.aoa.gov/AoA_programs/HCLTC/Caregiver/index.aspx Information and assistance to caregivers about available services In-home respite/companionship (112/hrs/yr.) Adult day care Help with personal care, bathing, medication monitoring and chores Home safety improvements/equipment Caregiver training: incl. personal cares Overnight respite in a facility Transportation Costs to attend or provide support groups Other services as agreed by caregivers and the agency Community outreach and education Limits Supplemental services cannot exceed 20% of the grant expenditures. No more than 10% of the NFCSP allocation can be spent on Grandparents Raising Grandchildren – Check your policy manual. |

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| Fund Dispersal | The maximum allocation for each family is determined using DHS eligibility worksheets. Payments are made using invoices and receipts. May pay a service agency directly, or reimburse program participants or the primary caregiver/representative for approved expenses. | Services must be approved by the administrative agency in advance in order for goods and services to be purchased using NFCSP funds. Payments to service providers are usually made monthly, but other timeframes are allowed. |
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| How to Refer Details to note | Anyone may refer: ADRC staff, caseworker, medical staff, family member, friend The AFCSP Coordinator will assess eligibility, complete paperwork, and work cooperatively with case managers from other programs and dementia care specialists If all funding is allocated in a given year, a waiting list may be created to serve families if funding becomes available in the future. 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 COP, Family Care, NFCSP, ineligible income, etc.) 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) | Anyone may refer: ADRC staff, caseworker, medical staff, family member, friend 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. Respite care is limited to 112 hours per calendar year. (JanDec.) 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. 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. |
| Other Resources | Alzheimer's & Dementia Alliance of Wisconsin and Alzheimer's Association Free family consults/ planning, etc. Home visits Caregiver support groups Information & referral Caregiver training Workshops & support group for persons in early stage of AD or memory loss Professional training 24-hour toll-free helpline Resource library of books & videos Website/ newsletter | GWAAR, DHS, and other websites Information about: Caregiver support groups and trainings Caregiver resource libraries Caregiver newsletters Caregiver recognition & support events GWAAR Website http://www.gwaar.org/for- professionals/family-caregiver-support-for- professionals.html DHS Website http://www.dhs.wisconsin.gov/aging/index.htm Wisconsin Caregiver http://www.wisconsincaregiver.org/ |

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