



FACT SHEET

Caregiver Services for Veterans of all Eras

FACTS:

Current VA programs for Veterans and their Family Caregivers include:

- **In-Home and Community Based Care:** This includes skilled home health care, homemaker home health aide services, community adult day health care and Home Based Primary Care.
- **Respite Care:** Designed to relieve the Family Caregiver from the constant challenge of caring for a chronically ill or disabled Veteran at home, respite services can include in-home care, a short stay in one of VA's community living centers or an environment designed for adult day health care.
- **Caregiver education and training programs:** VA currently provides multiple training opportunities which include pre-discharge care instruction and specialized caregiver programs in multiple severe traumas such as Traumatic Brain Injury (TBI), Spinal Cord Injury/Disorders, and Blind Rehabilitation. VA has a Family Caregiver assistance healthy living center on My HealtheVet, www.myhealth.va.gov, as well as caregiver information on the VA's main Web page health site; both Websites include information on VA and community resources and Caregiver health and wellness.
- **Caregiver support groups and other services:** Family Caregiver support groups, offered in a face to face setting or on the telephone, provide emotional and peer support, and information. Family Caregiver services include family counseling, spiritual and pastoral care, family leisure and recreational activities and temporary lodging in Fisher Houses.
- **Other services:** VA provides durable medical equipment and prosthetic and sensory aides to improve function, financial assistance with home modification to improve access and mobility, and transportation assistance for some Veterans to and from medical appointments.

Non-Institutional Home and Community Based Care (H&CBC) -Standard Benefits Package**Who is Eligible for Non-Institutional Long-Term Care?**

All Veterans enrolled in VA's health care system are eligible; H&CBC services are part of the VHA Medical Benefits Package. **Referral:** Care must be ordered by a VA physician for Veterans who meet the clinical need for the service. **Payment:** Co-pay for some programs (Adult Day Health Care, Home Care, Community Respite and GEM may be charged to some Veterans based on Eligibility status and Means Test criteria. Contact your Team Social Worker/Case Manager to complete the *Application for Extended Care Benefits (VA Form 10-10EC)*. **Target Population:** Veterans who need skilled services, case management, and assistance with Activities of Daily Living (ADL) or Instrumental Activities of Daily Living (IADL); are isolated or experiencing caregiver burden **NOTE:** H&CBC services may be used in combination with each other.

Adult Day Health Care - ADHC (Purchased or On-site) provides health maintenance and rehabilitative services to Veterans in a congregate group setting during daytime hours. Social or medical/rehabilitative services are provided depending on the individual program. **Indicators:** socially isolated, ADL/IADL dependencies; needs close follow-up/care coordination; caregiver stress; at risk for nursing home care.

Home-Based Primary Care (HBPC) is a unique home care program that provides comprehensive longitudinal primary care by an interdisciplinary team of VA staff in the homes of veterans with complex chronic disabling disease for whom routine clinic-based care is not effective. **Indicators:** can benefit from interdisciplinary team, close monitoring, care coordination and caregiver support; frequent Urgent Care visits; hospitalizations or at-risk for nursing home care.

Purchased Skilled Home Care is care provided in the home through contract agencies to Veterans that are homebound and in need of skilled services such as Nursing, Physical, Occupational and Speech therapy, or Social Services. **Indicators:** In need of short or long-term in-home skilled care services; difficulty traveling/excessive distance to VAMC for OP care.

Homemaker and Home Health Aide (HM/HHA) services provide personal care services in the home using public and private agencies for certain patients who meet the criteria for nursing home placement. **Indicators:** needs assistance with ADL or IADL.

Respite Care temporarily relieves the spouse or other caregiver from the burden of caring for a chronically ill or disabled Veteran at home. In-home or institutional Respite Care can be arranged. **Indicators:** Caregiver stress

Home Hospice Care is provided by Community Hospice agencies. Care includes comfort-oriented and supportive services in the home for Veterans in the advanced stages of incurable disease. Services are provided by an interdisciplinary team of providers and volunteers. Bereavement care is available to the family following the death of the patient. Community Home Hospice services are available 24 hours a day, seven days a week. **Indicators:** chronic progressive disease with life expectancy of 6 months or less.

Home Telehealth: communication technology can play a major role in coordinating Veterans' total care with the goal of maintaining independence. Telehealth offers the possibility of treating chronic illnesses cost-effectively while contributing to the patient satisfaction generally found with care available at home. **Indicators:** need for close monitoring of vital signs and/or frequent communication with veteran/caregivers.

NON-VA Paid Community Services: GEC assists with referral to other Federal/State/County or neighborhood programs often covered by other entitlement programs (Medicare, Medicaid, Elderly Waiver, and Private Insurance).

Emerging Programs

Medical Foster Home (MFH): is a type of Community Residential Care home chosen by the Veteran who is unable to live independently, as a preferred means to receive family-style living with room, board, and personal care. Veterans in the Medical Foster Home program must be enrolled in Home Base Primary Care. **Indicators:** medical supervision needs; socially isolation; multiple medical issues or complex care needs.

Veterans Directed Home & Community Services: provides Veterans of all ages the opportunity to receive home and community based services in a consumer-directed fashion that enables them to avoid nursing home placement and continue to live in their homes and communities. The Program is offered in collaboration with the Administration on Aging. **Indicators:** Motivated for self-directed care; needs assistance with personal care services, chore services; ADL or IADL dependencies; at risk of nursing home care.

Program for All Inclusive Care of the Elderly (PACE) PACE is a successful model of care for nursing home certifiable individuals that are offered in urban and rural communities. PACE can be offered by using VA funds to purchase some of or the full suite of PACE services. **Indicators:** at-risk of nursing home care, frequent Urgent Care visits/hospitalizations; needs skilled care services, or assistance with ADLs/IADLs; socially isolated/caregiver stress.

Caregiver Support Programs: VA Resources and Community Partnerships (Alzheimer's Association) varies by facility. Caregivers play a key role in helping high-risk veterans remain safely at home. GEC promotes expansion of Caregiver efforts through various venues. **Indicators:** Caregiver burden and stress; can benefit from period of relief

Patient-Centric Innovative Programs under development at some sites:

- Rural Home Care Pilots...Streamlined VA Home Care
- Gero-Psychiatric Mental Health Collaboratives
- Chronic Disease Management Projects (Dementia Care)

Geriatric Clinics, Consultation Services, and other Resources

Geriatric Evaluation and Management (GEM) for older Veterans with multiple medical, functional, and psychosocial problems and/or geriatric syndromes (e.g., falls). GEM is provided by an interdisciplinary team in either inpatient or outpatient settings. "Geriatric Evaluation" (GE)—the assessment and care plan development—is required to be available to all veterans who may benefit from it. GE is offered in GEM, HBPC and Geriatric Primary Care.

Geriatric Primary Care for frail elderly Veterans who would otherwise receive their primary care in VA Primary Care Clinics; targets more complex patients with involved medical histories who need in-depth attention.

Hospice and Palliative Care Consultation Team: All facilities are required to have interdisciplinary Hospice and Palliative Care (HPC) Consultation Teams that are available to assist staff, Veterans and their families with chronic disease care and end-of-life planning issues.

Specialty Clinics and Other Resources that may be available

- **Dementia Clinics:** provide consultation related to diagnosis and treatment; family interventions
- **Geriatric Problem-Focused Clinics:** may focus on particular clinical challenges associated with aging such as falls, incontinence, memory loss, or medication reconciliation. These clinics are generally limited to sites of **Geriatric Research, Education and Clinical Centers (GRECCs)** a system of 20 Centers of Excellence responsible for increasing basic knowledge of aging, development of improved models of clinical services and a wide variety of educational activities targeting VA staff and trainees from the full range of health disciplines.

Institutional Nursing Home Care (Eligibility defined by the program)

Who is Eligible for Institutional Nursing Home Care?

Eligibility and admission criteria are unique to each venue of nursing home care. Detailed information on eligibility for can be found at www.va.gov/elig **Referral:** Contact your team Social Worker or your local GEC department.

Payment: Under the Millennium Health Care Act, 1999, VA must pay full cost of care for Veterans who require nursing home care and meet the following criteria:

- Service-Connected (SC) disability rating of 70 percent or more,
- Needs nursing home care for a SC disability;
- Rated 60 percent SC and is either unemployable or has an official rating of "permanent and total disabled;"

Nursing Home Care can be provided to other Veterans if space and resources are available thru the following settings:

VA Community Living Centers: located on or near VA Medical Center campuses. Provide a dynamic array of short stay (< 90 days) and long stay (> 91days) services. Short stay services include; skilled nursing, rehabilitation, respite and hospice care. Long stay services include dementia care, spinal cord injury care, and long term maintenance care. Admission priority is given to those with SC conditions. Non-Service Connected (NSC) veterans may be provided short term nursing home care if space and resources are available. NSC Veterans may be responsible for the LTC "Institutional Co-pay" for nursing home care including Respite and GEM based on Eligibility status and Means Test criteria. Contact your Team Social Worker to complete *Application for Extended Care Benefits (VA Form 10-10EC)*.

Community Nursing Home (CNH) Program: VA contracts for the care of Veterans in community nursing homes approved by VA. The Community Nursing Home program has the advantage of being offered in many local communities where Veterans can receive care near their homes and families. GEC provides quality oversight.

State Veterans Home (SVH) Program: is a grant program where a state petitions VA for a portion of the construction costs of a state veterans home and a per diem for each Veteran served. SVH may admit non-veteran spouses and gold star parents. VA surveys state homes for compliance with VA standards.



PEER SUPPORT MENTORING PROGRAM FACT SHEET for Caregiver Support Coordinators

Application Process

Caregivers interested in the Peer Support Mentoring Program will contact the Caregiver Support Coordinator at the local VA Medical Center to apply for the program. The Caregiver Support Coordinator will complete a brief referral form on the Caregiver Support Program SharePoint at:

<http://vaww.infoshare.va.gov/sites/cmsws/CGPOC/PSM>.

The VA National Caregiver Peer Support Mentoring Program Manager and Caregiver Support Coordinator will review the information and the Program Manager will contact the Caregiver to further discuss the program.

Caregiver (Mentee)

- The Caregiver completes the referral form with the Caregiver Support Coordinator (CSC) and is assigned a Caregiver Mentor by the National Peer Support Program Manager in consultation with the local Caregiver Support Coordinator to ensure a good match.

Caregiver Peer Mentor

- To serve as a Peer Mentor, the Caregiver must first register as a VA volunteer. The Caregiver Support Coordinator will coordinate the referral of the Caregiver to the VA Medical Center's Voluntary Service where the Caregiver will complete the process to become a registered VA volunteer.
- The Caregiver Mentor will then receive training from the National Peer Support Mentoring Program Manager on topics including the role of the Peer Mentor, Building a Successful Relationship, Confidentiality, Communication Skills, and when to contact a professional for assistance.
- After completion of the Peer Mentoring Support Orientation Course, the Caregiver Mentor will be matched with a Caregiver.

Both the Caregiver Mentor and Caregiver (Mentee) will agree to the relationship and sign the commitment statement, which includes information about the expected duration of the relationship and how the relationship will be reviewed to ensure success.



Key Components of Program

Expectations will be clearly outlined and accepted by both the Caregiver Mentor and the Caregiver (Mentee).

- The VA National Caregiver Peer Support Mentoring Program Manager will maintain communication with both Caregivers on a monthly basis. Progress will be monitored and evaluated by the Program Manager with input from the local Caregiver Support Coordinator.
- On-going support for Caregiver Mentors will be provided through the Peer Support Mentoring Program Manager.
- Each Caregiver Mentor and Caregiver relationship will have a three-month trial period. After this time, the Program Manager will contact the Caregiver Peer Mentor and the Caregiver either together or separately to review the relationship and its impact. At this time, adjustments in expectations can be made, issues can be addressed, or the relationship can be terminated at the request of the Caregiver Mentor, the Caregiver, or the Caregiver Support Program staff.

For additional information, please contact Michelle Stefanelli at (908)247-2113.



WHO IS A CAREGIVER

A Caregiver is someone who provides personal care services for a Veteran. These services could include assistance with activities of daily living like personal hygiene, or providing supervision to ensure the safety of the Veteran.

A Caregiver could be a spouse, significant other, adult child, parent, family member, or a friend.

PROGRAM OVERVIEW

VA offers a wide range of services for Caregivers of eligible Veterans of all eras.

Additional services, including a monthly stipend, are available for eligible Veterans who were seriously injured in the line of duty on or after September 11, 2001.

Your local Caregiver Support Coordinator can help you apply for services, guide you through the process, and answer any questions you may have (see contact information on the back of this guide or online).

www.caregiver.va.gov

Department of Veterans Affairs Caregiver Support Program

*For more information contact your
local Caregiver Support Coordinator:*

National Caregiver Support Line:

1-855-260-3274



www.caregiver.va.gov

VA Caregiver Support Line

1-855-260-3274 toll-free

Monday through Friday, 8:00 am – 11:00 pm ET

Saturday, 10:30 am – 6:00 pm ET



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Department of Veterans Affairs
Veterans Health Administration
Washington, DC 20420

VA Caregiver Support
Tri-fold Brochure
October 1, 2011
IB 10-424, P96514

Caregiver Support Program Overview



*You're there to
support the Veteran.*

**We're here to
support you.**



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ABOUT THE PROGRAM

VA's Caregiver Support Program was developed to support Caregivers of Veterans, our partners in ensuring the best care of Veterans. The Program provides a wide range of services to Caregivers of eligible Veterans of all eras.

The Program provides additional services, including a monthly stipend, to Caregivers of Veterans (or Servicemembers undergoing medical discharge) who incurred or aggravated a serious injury (including Traumatic Brain Injury, psychological trauma or other mental disorders) in the line of duty on or after September 11, 2001. Caregivers of eligible Veterans are urged to apply for the Program through our website (www.caregiver.va.gov) or directly through the local Caregiver Support Coordinator (see contact information on the back of this guide).

Your local Caregiver Support Coordinator serves as a source of information about the program. They can coordinate training, connect you to resources within the VA and within your local community, and provide you with support.

WHO IS ELIGIBLE FOR THE PROGRAM?

Caregivers for Veterans of all eras may be eligible for services if the Veteran:

1. Is unable to perform an activity of daily living (i.e. dress or undress, bathe, groom, difficulty with mobility, etc.); or
2. Needs supervision or protection based on other impairment or injury (including symptoms or residuals of neurological care).

Caregivers of post 9/11 Veterans may be eligible for supplemental services, if:

1. The Veteran suffered or aggravated a serious injury (including traumatic brain injury, psychological trauma, or other mental disorder) in the line of duty, on or after September 11, 2001;
2. The serious injury requires the need for personal care services for a minimum of 6 months based on a clinical determination that takes into account various factors;
3. It is in the best interest of the Veteran to participate in the Caregiver Support Program;
4. Personal care services that would be provided by the Caregiver will not be provided through another individual or entity;
5. The Veteran agrees to receive ongoing care, at home.

NOTE: *There are additional criteria beyond what is listed here.*

OVERVIEW OF SERVICES

Caregivers of eligible Veterans of all eras may qualify for:

- Skilled nursing
- Home health aide
- Home Based Primary Care
- Veteran Directed Home & Community Based Care
- Medical equipment
- Home modification
- Vehicle modification
- Aid & Attendance
- Support groups
- Up to 30 days of respite care per year
- Education and training on Caregiving

Caregivers of eligible Veterans Seriously Injured on or after September 11, 2001, may qualify for:

- All of the services available to Caregivers listed above
- Monthly Caregiver stipend
- CHAMPVA healthcare coverage
- Mental health services
- At least 30 days of respite care per year, including during required training
- Travel, lodging and per diem as required during training
- Travel, lodging, and per diem during Veteran medical appointments