

Arizona Family Caregiver Reimbursement Program

Frequently Asked Questions (FAQ's)

General Information

Does this program provide financial assistance to care for my family member?

No, the program reimburses family caregivers who pay upfront for the cost of home modifications or purchasing/leasing assistive care technology for their qualified family member to be safe and independent.

Who is considered a family caregiver?

Any immediate family member who is caring for a loved one ***in your home*** who is either aging or an adult dealing with a chronic condition or living with a disability. This may include a wife, husband, daughter, son, in-law or grandchild.

How do I know if I qualify for the program?

The family caregiver must provide a copy of:

- **Receipt(s):**
The family caregiver pays upfront (*on or after January 1, 2020*) for the cost of home modifications or purchasing/leasing assistive care technology.
- **Income:** (Income taxes or Social Security Income (SSI) award or pay stub or Veteran Award Letter or any public benefit award letter (TANF, SNAP, etc.)
Total income for family caregiver and qualified family member's income **combined**
Earn \$75,000/year or less in total income (Caregiver + Qualified Family Member = total income)
or
As a couple, earn less than \$150,000/year in total income (caregiver + spouse + qualified family member = total income).
- **Age:** family caregiver and qualified family member
Be 18 years or older.
(Arizona driver's license or ID card (with date of birth) or birth certificate)
- **Arizona Residency:**
Arizona driver's license or Arizona Voter Registration Card or utility bill.
- **Completed W-9:**
Included with the application and required for a check to be issued to the family caregiver.
- **Signed Medical Need Verification Form**
The form must be signed by a Physician, Nurse Practitioner (NP) or Physician's Assistant (PA) to validate requires assistance with one (1) or more activities of daily living.

The qualified family member must:

- **Require assistance with one (1) or more activities of daily living** (toileting, bathing, dressing, grooming, eating, mobility, or transferring).
- **Be 18 years or older.**

Is this program for older adults only?

No, family caregivers who care for an adult 18 years or older can apply for the program.

When does the program start?

January 1, 2020.

Program Qualifications

Does the qualified family member have to live in the caregivers' home to qualify?

No. However, if the reimbursement request is intended for a home modification, the alterations must be made to the caregivers' home, not the qualified family members' home.

There is a gross income requirement for the family caregiver and qualified family member combined. The qualified family member and I together make more than \$75,000 per year in gross income, do I qualify?

Unfortunately, no.

There is a gross income requirement for the family caregiver and qualified family member combined. My spouse and I file our taxes together and combined with the qualified family member, we make more than \$150,000 per year in gross income, do we qualify?

Unfortunately, no.

If I modified my home or purchased/leased assistive care technology for my family member in 2019 or earlier, do I qualify?

No, the modifications and purchases must be in the same year as the application for reimbursement and the program starts on January 1, 2020.

I'm caring for my child who requires my home to be modified and/or needs assistive care technology, do I qualify?

Yes, if the following criteria are met:

- 1) Your child is 18 years or older.
- 2) Your adult child requires assistance with one (1) or more activities of daily living (toileting, bathing, dressing, grooming, eating, mobility, or transferring). With the application, you will submit the Medical Need Verification Form (provided) that needs to be signed by a Physician, Nurse Practitioner (NP) or Physician's Assistant (PA).
- 3) You earn \$75,000/year or less or as a couple, earn less than \$150,000/year and provide proof of income with a copy of one of the following: income taxes, Social Security Income (SSI) award, pay stub, Veteran Award Letter or any public benefit award letter (TANF, SNAP, etc.)
- 4) You provide receipts for home modifications and/or assistive care technology.
- 5) You provide proof of your age and your qualified family members age with copies of your Arizona driver's license or ID card (with birthdate) or birth certificate.
- 6) You provide proof of Arizona residency with a copy of your Arizona driver's license, Arizona Voter Registration Card or utility bill.

If there are more than one person receiving care in my home, do they need to apply separately?

No, the option to include more than one qualified family member on the application is provided on the application.

What is considered a home modification?

Improving or altering the family caregiver’s primary residence involves making changes to the livable spaces accessible to your family member to be safe and independent.

Examples include, but **not limited** to:

- Widening of doorways
- Ramps/low inclined walkways
- Adaptive switches
- One-bathroom environment
 - (roll-in/curb-less) accessible shower
 - roll-under sink
 - high rise toilet with handrails
 - handrails and grab bars in accessible shower

What is considered assistive care technology?

Examples include, but **not limited** to:

- Hearing aids
- Eating: adaptive utensils, dentures
- Transferring: Hoyer lift, gait belt
- Toileting; bedside commode
- Bathing: shower chair/bench, handheld shower head
- Vehicle wheelchair lift
- Dressing assistance; buttoning aid hook, long reach comfort wipe
- Mobility: Bed handles, wheelchairs, scooters, walkers, canes
- Communication devices; voice recognition programs, screen readers, screen enlargement applications
- Monitoring systems: medical alert devices
- Computer software and hardware: voice recognition programs, screen readers, and screen enlargement applications

When I apply for the program, can I submit receipts for home modifications AND assistive care technology for reimbursement?

Yes. If approved, family caregivers will receive a 50% reimbursement for qualifying expenses up to \$1,000.

[Application Process](#)

If a family caregiver is receiving services, can they still apply for the program?

Yes, the program is to provide reimbursement for home modifications and purchasing/leasing assistive care technology.

How do I get an application to apply?

Call the Arizona Caregiver Coalition's Caregiver Resource Line at (888) 737-7494. You will need to pass pre-screening questions and then a Caregiver Resource Specialist will email or mail you the application package.

When is the deadline to apply?

December 31, 2020

How do I submit my documents to the Arizona Caregiver Coalition?

There are three options to submit your application information;

- 1) Scan the requested documents and email to CRL@AZcaregiver.org
- 2) Fax to 888-288-6293
- 3) Mail to Arizona Caregiver Coalition P. O. Box 21623 Phoenix, AZ 85036

When will I hear back about my application?

Once your application has been received, you will receive a response within 90 days.

After I receive my reimbursement, is there anything else I should do?

You will be contacted within six (6) weeks of submitting your application as a follow up about the ability to keep the qualified family member at home.

Can I apply again if I've been denied?

Yes, although family caregivers are not eligible to apply for the grant again for three (3) consecutive calendar years.

What is a 1099 form?

An Internal Revenue Service (IRS) form.

Why will I receive a 1099 form?

If the reimbursement amount is \$600 or more, it is considered a form of payment. The Arizona Department of Economic Security (DES) is required to send a 1099 form to the family caregiver as the reimbursement is taxable income.

What do I have to do with the 1099 form?

Include the 1099 when filing your annual taxes.

[More Questions](#)

What if I have more questions?

Please contact a Caregiver Resource Specialist at (888) 737-7494 or email at CRL@AZcaregiver.org.