

DEVELOPMENTAL DISABILITIES SERVICES  
COVID-19 EMERGENCY SUPPORTS FOR FAMILY CAREGIVERS  
UPDATED FOR IMPLEMENTATION 7/1/2020-9/30/20

In response to short terms waivers being offered by the federal government during the COVID-19 state of emergency, the Department of Disabilities, Aging and Independent Living, Division of Developmental Disabilities Services (DDSD) is authorizing Designated and Specialized Services Agencies and the Independent Service Organization Transition II to make temporary supports available to family caregivers of individuals with intellectual and developmental disabilities under three categories of support: Family-Managed Funds Conversion, a Flexible COVID-19 Crisis Stipend, and Flexible use of One-Time funds. Requirements for each category are listed below.

1. DEVELOPMENTAL DISABILITIES HOME & COMMUNITY BASED SERVICES (HCBS) –  
CONVERSION OF RESPITE AND/OR OTHER FAMILY-MANAGED FUNDS

DDSD will allow designated agencies, specialized services agencies, and intermediary service organization (DAs/SSAs/ISO) to convert unused respite and/or other family-managed funds into a Difficulty of Care stipend for the time period of 7/1/20-9/30/20. The purpose of this Difficulty of Care (DOC) stipend is for unpaid family caregivers, including parents and guardians, to maintain the health and safety of a minor or adult child during the COVID-19 state of emergency. Family caregivers are eligible to request payments when the following statements are true:

- A minor or adult child has an approved HCBS budget; and
- The budget has portions that are managed by the family; and
- The individual is living in the home of the family caregiver; and
- The family caregiver is providing additional care beyond the amount of natural support they typically provide as a result of the consistent loss of typical hourly or daily services. This is when some services are reduced due to either the unavailability of workers to provide the service or a team decision that participating in services poses a Coronavirus-related health and safety risk; and
- There are unused respite or other family-managed funds (not associated with agency-hired staff) in their HCBS budget as of 7/1/20 through 9/30/20.

An unpaid family caregiver is not able to receive a difficulty of care stipend when services are determined to be reasonably safe and workers are available.

### How much will they receive?

Family caregivers, in consultation with their agency or Transition II, may have unused funds managed by the family converted to a non-payroll, invoiced stipend amount up to, but not to exceed, **\$5,000 or one quarter of their annual allocation for family-managed direct services, whichever is less**, per eligible individual for the period of 7/1/20-9/30/20. The maximum allowable amount does not constitute a guarantee. Agencies must evaluate the level of typical supports against what is being provided by the unpaid family caregiver in order to determine the appropriate amount.

**The agency or Transition II** must confirm with ARIS the amount of unused monies remaining in the person's budget. The agency will speak with the family about current needs and appropriate level of monies to convert, taking into consideration the possible need for funds to be available through 9/30/20 if the state of emergency is lifted prior to that time or it is anticipated that workers will be providing services again.

The decision to resume services should be made by the team using the tools provided by the Division:  
[https://ddsd.vermont.gov/sites/ddsd/files/documents/Return\\_to\\_Community%20Activities\\_Svcs\\_Assess\\_Tool.pdf](https://ddsd.vermont.gov/sites/ddsd/files/documents/Return_to_Community%20Activities_Svcs_Assess_Tool.pdf)  
[https://ddsd.vermont.gov/sites/ddsd/files/documents/Return\\_to\\_Employment\\_Svcs\\_Assess\\_Tool.pdf](https://ddsd.vermont.gov/sites/ddsd/files/documents/Return_to_Employment_Svcs_Assess_Tool.pdf).

**The agency or Transition II authorizes** the stipend amount for ARIS to be paid to the family caregiver via a non-payroll invoice. Agencies or Transition II must complete this form and send it to ARIS:  
[https://ddsd.vermont.gov/sites/ddsd/files/documents/DDS\\_COVID\\_Payment\\_Authorization\\_Form-Fillable.pdf](https://ddsd.vermont.gov/sites/ddsd/files/documents/DDS_COVID_Payment_Authorization_Form-Fillable.pdf)

These payments are made from the HCBS funds that are authorized by agencies for services that are managed by families and paid through ARIS.

## 2. DEVELOPMENTAL DISABILITIES HOME & COMMUNITY BASED SERVICES- FLEXIBLE COVID-19 CRISIS STIPEND TO FAMILY CAREGIVERS

In exceptional circumstances agencies may, at their discretion, choose to make a crisis Difficulty of Care stipend from their available revenue to family caregivers, including parents and guardians, for the time period of 7/1/20-9/30/20.

This option is not mandated. These expenditures may be eligible for reimbursement through the Coronavirus Relief Funds (CRF), however, the state is not requiring payments to family caregivers under this option because reimbursement of agencies through CRF is not guaranteed.

A crisis Difficulty of Care stipend may be paid when the following statements are true:

- A minor or adult child has an approved HCBS budget; and
- The individual is living in the home of the family caregiver; and
- The family caregiver is providing additional care beyond the amount of natural support they typically provide as a result of the consistent loss of typical hourly or daily agency-managed services. This is when some services are reduced due to either the unavailability of workers to provide the service or a team decision that participating in services poses a Coronavirus-related health and safety risk; and
- The agency is able to bear the cost of the Difficulty of Care stipend in the instance that CRF is not awarded.

An unpaid family caregiver is not able to receive a Difficulty of Care stipend when services are determined to be reasonably safe and workers are available.

#### **How much will they receive?**

Upon approval by their provider agency, family caregivers may receive a stipend of up to a maximum of **\$2,000** per eligible individual due to loss of consistent typically provided hourly or daily agency -managed support (as described above) for the period of 7/1/20-9/30/20. The maximum allowable amount does not constitute a guarantee. Agencies must evaluate the level of typical supports against what is being provided by the unpaid family caregiver in order to determine the appropriate amount. Because there is not a guarantee of reimbursement through the Coronavirus Relief Fund, this option is encouraged for exceptional circumstances and is at the discretion of the agency.

#### **Who does the stipend come from?**

Provider Agencies approve and issue the stipend in a lump sum directly to the family caregiver.

Agencies may provide these stipends to family caregivers and seek reimbursement from the Coronavirus Relief Fund after expenses have been incurred. Provision of these funds is at the discretion of the providers because there is not a guarantee of reimbursement of the agency from the Coronavirus Relief Fund.

#### **How do families find out if they are eligible for it?**

Families make a request to their provider agency.

#### **How does the agency document and track stipends?**

Agencies must submit all required documentation in their applications for the Coronavirus Relief Funds.

**3. FLEXIBLE USE OF ONE-TIME FUNDS ALLOCATION TO DESIGNATED AGENCIES(DAS)  
AND SPECIALIZED SERVICE AGENCIES (SSAS) - (FUNDS ALREADY ISSUED)**

One-time funds may be used to address health and safety and/or crisis needs of any individuals within the Designated Agency catchment areas and current recipients at Specialized Service Agencies who are eligible for services.

During the COVID-19 state of emergency please note and prioritize Vermont State System of Care Plan, first three **Allowable Uses for One-Time Funding by Agencies (DA/SSA) and Supportive ISO** as follows:

- A) One-time funding must be prioritized for use as Flexible Family Funding (FFF);
- B) One-time allocations to address personal health or safety or public safety issues for individuals with developmental disabilities;
- C) Short term increases in supports to individuals already receiving services to resolve or prevent a crisis.

Agencies will indicate on their One-Time Funds Reporting Spreadsheet if a particular allocation is due to the COVID 19 healthcare crisis/state of emergency.

#### **How do parents/caregivers access it?**

New families should apply at their local Designated Agency. Current recipients should apply at their current provider agency.

**Note:** *Funds previously available to increase Family-managed Respite (FMR) allocations are no longer available. Agencies must follow the current FMR Guidelines for allocating FMR funds to families.*