



Coast Guard Mutual Assistance Respite Care Program

Purpose:

The objective of the CGMA Respite Care Program is to provide a “break” for a few hours a week, or month, to eligible Coast Guard clients who have responsibility 24 hours per day to care for an ill or disabled family member who lives in the same household.

Respite care is not meant to be considered as an on-going benefit, but as a short-term help to allow the family to work towards building their own resources for self-financed respite care and to apply for assistance offered through their health insurance, governmental, or community agencies. The program is specifically designed to help **facilitate Coast Guard readiness** and not all categories of Coast Guard Mutual Assistance clients are eligible.

CGMA assistance for respite care is based on need—the need for respite time, as well as financial need- and is given as a grant.

Eligibility:

- Coast Guard families in which a family member has been diagnosed with a profound disability, or a serious or terminal illness that requires on-going care and attention and is enrolled in the Coast Guard Special Needs Program in accordance with COMDTINST 1754.7 series.
- The person with special needs may be a spouse, a dependent child, or dependent parent (must be registered in DEERS).
- Eligibility of the applicant must be verified and endorsed by a Family Resource Specialist (FRS) and/or Family Advocacy Specialist (FAS) at a local Work-Life Regional Practice and forwarded to the Headquarters Special Needs and/or Family Advocacy Program Manager (CG-1112).
- Having a family member enrolled in the Special Needs Program does not automatically make the Coast Guard client eligible for a CGMA Respite Care Grant. The family member must have severe special needs or the special needs are compounded by additional stressors affecting the family, as determined by the local Family Resource Specialist or the Family Advocacy Specialist.

Process:

- After verification of the CGMA Respite Care Grant eligibility criteria by a Family Resource Specialist or Family Advocacy Specialist at the local Work-Life Regional Practice, a signed request is forwarded to the Headquarters Special Needs and/or Family Advocacy Program Manager (CG-1112), utilizing the *Respite Care Certificate* (CGMA Form 60a). The certificate contains a recommendation for the number of hours required to meet the individual family's need (must not exceed 40 hours per month for a period of three months) and a brief description of the family's situation.
- The Headquarters Special Needs and/or Family Advocacy Program Manager (CG-1112) will complete and sign the *Respite Care Certificate*, indicating approval of the number of hours, frequency and duration of the Respite Care. A completed copy of the approved *Respite Care Certificate* will be forwarded to the local Work-Life Regional Practice and to CGMA Headquarters, via email, USPS or secure fax.
- The local Work-Life Regional Practice will provide a copy of the *Respite Care Certificate* and *Caregiver Verification Form* (CGMA Form 60b) to the client and shall ensure that the client understands that CGMA will provide funds for care not to exceed the number of hours and dollar amount approved. The client should also be provided a copy of *Respite Care Helpful Information for Caregiver* for use at their discretion.
- The family finds a provider and agrees on the hourly rate not to exceed \$20/hour. Care may be provided in the family's home, or in out-of-home settings. The CGMA Respite Care Grant may not be used to pay for care provided by a relative or an individual who is also receiving a CGMA Respite Care Grant.
- The client should arrange with the care provider to be paid bi-weekly or monthly. Payments will be made after the care has been provided. Checks will be made payable to the caregiver. The *Caregiver Verification Form* (CGMA Form 60b) must be signed by **both** the care provider and the Coast Guard client before a check can be issued. The completed form must be emailed, faxed or mailed to CGMA HQ for payment. The CGMA HQ address and fax number are indicated on the form. CGMA HQ will track payments made, hours used and remaining balances of approved amounts.
- If additional respite care assistance is needed after the initial three-month period, **one additional** three-month period may be approved by the Headquarters Special Needs and/or Family Advocacy Program Manager. Approval for the additional period must be obtained in advance. A new *Respite Care Certificate* **must** be issued, and financial need must be demonstrated and documented by completing a *CGMA Budget Form* (CGMA Form 15). Both the *Respite Care Certificate* and *CGMA Budget Form* must be submitted to the Headquarters Special Needs and/or Family Advocacy Program Manager

General Guidelines:

- The maximum number of respite care hours may not exceed 40 hrs per month (average usage 8 hrs per week). Anything in excess must be approved by CGMA HQ and Special Needs/Family Advocacy Program Manager (CG-1112) in advance.
- The maximum hourly rate for respite care may not exceed \$20/hour, or must be justified and approved in advance by CGMA HQ.

Attachments:

CGMA Respite Care Certificate (CGMA Form 60a)

Caregiver Verification Form (CGMA Form 60b)

Respite Care Helpful Information for Caregiver