

The Caucus Corner

The National Caucus and Center on Black Aging, Inc. (NCBA)
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What Is Respite Care? A Guide for Caregivers

As a caregiver for a family member, you give so much of yourself every day. The support and companionship you provide help that person age with dignity and live as productive a life as possible. You cherish the close bond you share and those small moments of connection and appreciation. If you had to do it all over again, you would.

But there’s another side to the caregiving coin, too. You may face physical exhaustion along with sleep problems, poor diet, and lack of exercise. You may neglect your own health care needs. Your daily duties likely leave you little time for nurturing social connections, which can lead to a sense of social isolation and loneliness. According to Family Caregiver Alliance, roughly 20% of caregivers suffer from depression—and that’s a conservative estimate.¹ Over time, the pressures of caregiving can lead to burnout, which can have harmful consequences for both you and the person you care for. That’s where respite care comes in.

What is respite care?

Respite care provides temporary relief for you as the primary caregiver while ensuring your care recipient continues to receive what they need. It gives you the opportunity to take a well-deserved break from your duties—whether it’s for a few hours, a day, or even longer. You can use this time to manage personal tasks, visit other family and friends, travel, or simply rest and look after your own well-being. Respite care can be planned in advance or arranged in emergency situations, depending on your needs.

There are different types of respite care:

- **Informal respite care:** If you’re fortunate enough, family members, friends, or neighbors can step in to care for your relative for short periods—either for no cost or a small fee.
- **In-home respite care:** With this type of care, a professional caregiver comes to the home, allowing your family member to stay comfortably in their own environment. Professional caregivers may work for a home care agency, or they may work independently.
- **Adult day centers:** These centers offer a safe and engaging place for your care recipient to stay during the day while you manage other responsibilities. These facilities may be standalone or located within senior centers or other

community-based organizations. At an adult day center, your family member can get personal assistance and supervision as well as social and recreational activities, meals, and certain health services.

Typical participants are adults with mild to moderate dementia or a chronic condition or physical disability requiring assistance with at least one activity of daily living and medication management.

- **Residential or facility-based respite care:** Short-term, overnight stays are usually available in assisted living or nursing home facilities. This may be a good option if you need respite care for several days or longer—for example, if you're going out of town for a wedding.

What happens at respite care?

Respite care services vary widely, and the scope of services provided depends on the needs of you and your family member. In addition to companionship, both informal and professional caregivers can help out with:

- Household tasks like meal preparation, laundry, and cleaning
- Medication management
- Transportation to and from medical appointments
- Personal care tasks like dressing, bathing, and toileting

Professionally trained caregivers cannot provide complex medical care, but they may perform basic tasks like wound care and monitoring vital signs.

How can respite care help family caregivers?

Respite care is a valuable tool for managing the ongoing physical and emotional requirements of caregiving. Below are some of the key benefits of respite care:

- **Physical and emotional relief:** If you feel drained and “burnt out” from the 24/7 demands of caregiving, respite care gives you a time-out to just breathe, relax, and reset.
- **Opportunity for self-care:** Respite care frees up time to manage your own needs—such as household tasks, medical appointments, and errands. You can address other family needs that may have taken a back burner because of caregiving. You can also use this time to sleep, meet friends to socialize over coffee, go to the gym, or participate in your favorite hobbies. Having a few uninterrupted hours to focus just on you can be very restorative.

- **Better caregiving:** After resting and recharging your batteries, you can return to your caregiving duties with a fresh batch of patience, energy, and attentiveness. You may even find you have a new appreciation for your role.

Who is respite care best suited for?

Respite care is valuable if you're providing daily support to an older adult or someone with a disability or chronic health condition. Particularly if you're juggling other responsibilities, such as work and children, occasional or regular respite care can give you the flexibility to maintain a healthier balance.

Respite care is also useful in situations where you need short-term help, such as during medical treatments or recovery periods, or if you have to go out of town for leisure or business.

Who pays for respite care?

The cost of respite care varies based on the level, duration, and location of care. Most respite services are paid for out of pocket by the care recipient or caregiver.

While cost is a concern, there are many options worth exploring to help cover some or all of these expenses:

- **Medicare:** With original Medicare, respite care is only covered under the Part A hospice benefit for end-of-life pain management and comfort care for those with a terminal illness.

Some Medicare Advantage (Part C) plans offer supplemental benefits that include respite care as a value-added service—so be sure to check with your family member's plan provider.

- **Long-term care insurance:** If your family member has long-term care insurance, respite care may be covered by their policy benefits.
- **Veteran benefits:** If the person you care for receives Department of Veterans Affairs (VA) benefits, they may qualify for up to 30 days of respite care in a VA facility. They may also be eligible for coverage through VA Aid and Attendance or Housebound benefits.

The VA also offers a caregiver education, services, and support program that can help reduce the burden and expense of caregiving.

- **Non-profit assistance programs:** Some national, state, and local programs offer respite care services at no cost (or financial support for caregivers). Funding may be available through the National Family Caregiver Support Program, which is administered through your local Area Agency on Aging (AAA). You can also visit the Family Caregiver Alliance website to search for state-funded family caregiver support or respite programs in your area.

- **Medicaid:** While respite care is not a standard Medicaid benefit, your family member's state may have a waiver program that includes some coverage for this type of care. However, they must first qualify for Medicaid. In addition, eligibility requirements vary by state, and coverage may be limited.

- **Your health plan:** If you have private health insurance through your employer, contact the plan provider to see if your plan offers any supplemental benefits for caregivers. It's also a good idea to check with your employer directly to see if they offer an Employee Assistance Program (EAP) that includes caregiver-related benefits.

Where do I find respite care services?

These sources can help you find quality respite care services:

- **Friends and family:** If your support network is able and willing to help, friends and family are a great place to find informal respite care. Knowing your family member is with someone you trust will give you peace of mind while you take a break. Friends and family may also be able to help you find private duty nurses, certified nursing assistants, or professional caregivers who can provide in-home respite services, typically for an hourly fee.
- **Health care providers:** Check with your relative's health care team for respite care service referrals.
- **Centers for Independent Living:** Available in most communities across the U.S., these organizations maintain a list of personal care attendants who can provide in-home respite services.
- **National Adult Day Services Association:** This association provides a step-by-step guide to choosing an adult day center that's right for your care recipient. Their website also includes a nationwide center locator, searchable by ZIP code.
- **ARCH:** The ARCH National Respite Network and Resource Center offers a convenient online National Respite Locator Service.
- **Area Agency on Aging:** Find and contact your local AAA to learn about reputable respite care providers in your area.



Taking a pause from caregiving may feel like a luxury—and feelings of guilt can creep in. But remind yourself you're not doing anything wrong by seeking respite care.

“Don't get caught up on the idea that you're letting the person you care for down,” said Kathleen Cameron, former Senior Director of NCOA's Center for Healthy Aging. The truth is you can't pour from an empty cup. Taking of yourself is a necessity that will help you be fully present for your family member and provide the best care possible,” Cameron said.

Interested in becoming a professional caregiver?

With a growing aging population, compassionate and skilled caregivers are in short supply. According to the U.S. Bureau of Labor Statistics, demand for home health and personal care aides is expected to grow by 21% through 2033—much faster than the average for other occupations.²

If you can see yourself making a difference in people's lives as a caregiver, reach out to your local community college or job training organization to ask about available training opportunities.

Sources

1. **Family Caregiver Alliance. Caregiver Depression: A Silent Health Crisis.** Found on the internet at <https://www.caregiver.org/resource/caregiver-depression-silent-health-crisis/>

2. **U.S. Bureau of Labor Statistics - Occupational Outlook Handbook. Home Health and Personal Care Aides.** Found on the internet at <https://www.bls.gov/ooh/healthcare/home-health-aides-and-personal-care-aides.htm>

Does Medicare Cover Respite Care?

Key Takeaways

- The cost of respite care can vary depending on the care setting and the duration and level of care provided.
- Medicare only covers respite care under the Part A hospice benefit, while Medicaid may offer limited coverage to eligible beneficiaries.
- Learn about additional ways to afford respite care, including long-term care insurance and financial assistance programs.

If you care for a family member, you know the constant balancing act between ensuring their needs are met and managing your own life. When you're feeling overwhelmed by it all, [respite care](#)—services that provide temporary relief for [family caregivers](#) (or care partners)—can offer a lifeline.

But affording that extra help can be a concern. Who pays for respite care? Does [Medicare](#) cover it? Understanding the cost of these services and the funding sources available can help put respite care in easier reach.

How much does respite care cost?

Here's what you need to know about the cost of respite care, which can vary based on several factors:

- **Type of care:** Different types of respite care come with different price tags. In-home care tends to cost less than facility-based care (but it depends on the level of assistance required). Adult day centers, which provide care during daytime hours, can be more affordable—while a short-term stay in an assisted living or nursing facility is more expensive. You may be charged by the hour, day, or month for respite care, depending on the setting and how long you need care.
- **Personal care needs:** If your family member has more complex personal care or medical needs, respite care costs may be higher due to the additional time and resources involved.
- **Location of care:** Urban areas or regions with a higher cost of living tend to have higher respite care rates compared to rural areas. For example, according to the [Genworth Cost of Care Survey](#), the average hourly cost for a home health aide in Madison, Wisconsin in 2023 was \$23, while the daily rate for an adult day center was \$90. In Sacramento, California, the hourly cost for a home health aide was \$35 and the daily rate for an adult day center was \$400.¹

Does Medicare cover respite care?

Medicare's coverage for respite care is limited. If you have original Medicare (Parts A and B), respite care is only covered under the Part A [hospice care benefit](#). To receive this benefit, your family member must be enrolled in [Medicare Part A](#) and be eligible for [hospice care](#)—which means a physician has certified they have a terminal illness with a life expectancy of six months or less.



If the person you care for qualifies for hospice, Medicare will pay for end-of-life pain management and comfort care. The hospice respite care benefit covers up to five consecutive days at a time, but care must take place in a Medicare-certified hospital, skilled nursing facility, or inpatient hospice facility. Medicare does not cover all the costs for this benefit; you may pay 5% of the Medicare-approved amount for inpatient respite care. However, your copayment cannot be more than your inpatient hospital deductible for the year.

If your family member qualifies for this benefit, they can receive hospice care for two 90-day benefit periods. This is followed by an unlimited number of 60-day benefit periods. It's important to keep in mind that the transfer to a hospice location outside the home can be disruptive and disorientating to a person with a terminal illness—and inconvenient for a caregiver.

For non-hospice situations, original Medicare does not cover respite care. However, some Medicare Advantage (Part C) plans include benefits that original Medicare does not cover such as in-home respite care and adult day services, as well as supports like meal delivery and non-emergency medical transportation. Check with your family member's plan provider to find out what extra benefits are available.

Does Medicaid cover respite care?

Almost all states cover some form of respite care through Medicaid home and community-based services (HCBS) waivers. HCBS Waivers aim to meet the needs of people who want to receive long-term care services and supports in their own home or community, instead of in a nursing home or other institutional setting.

To receive Medicaid-funded respite care, your family member must first qualify for Medicaid. Respite care coverage tends to be limited and is based on strict rules related to the care recipient's income, assets, and health or disability status. Since Medicaid is administered at the state level, every program has different eligibility requirements and coverages. Check with your family member's state Medicaid agency for details.

Since Medicaid is administered at the state level, every program has different eligibility requirements and coverages.

Check with your family member's state Medicaid agency for details by visiting: <https://www.medicaid.gov/about-us/contact-us/index.html>.

What are some other ways to pay for respite care?

There are a number of additional options that may be able to help you fund the costs of respite care:

- **Private pay:** Most respite care costs are paid for out of pocket by either the caregiver or care recipient. Keep in mind that as a family caregiver, your out-of-pocket expenses may be tax-deductible (as medical expenses). You may also be able to use a flexible spending account (FSA) or health savings account (HSA) to reduce your cost burden.
- **Veteran benefits:** Is your family member a veteran who receives Department of Veterans Affairs (VA) benefits? They may be able to get respite care services through the VA, which are provided in the home or in a VA Community Living Center or community nursing home. They may also be eligible for coverage through VA Aid and Attendance or Housebound benefits.



The VA offers the [VA Caregiver Support Program](#) as well, which includes comprehensive education opportunities and services that can help ease the strain and expense of caregiving.

- **Long-term care insurance:** If your family member has [long-term care insurance](#), respite care may be covered by their policy benefits, depending on the policy's terms.
- **Your health insurance plan:** If you have private health insurance through your employer, contact the plan provider to see if your plan offers any supplemental benefits for caregivers. In addition, ask your employer whether they offer an Employee Assistance Program (EAP) that includes benefits for caregivers.
- **Respite care grants/financial assistance programs:** Some organizations provide grants and other types of financial aid to help families get the services they need:
 - The Lifespan Respite Care program offers state-level voucher or reimbursement programs that let family caregivers choose and hire their own respite care providers. [Visit the ARCH National Respite Network website](#) and click on the map to see if there are programs available in your state.
 - The [HFC Caregiver Respite Program](#) provides grants covering the cost of in-home care for people with Alzheimer's disease or other types of dementia.
 - The [National Family Caregiver Support Program \(NFCSP\)](#) provides grants to states to fund various community programs that support family caregivers of older adults. Contact your local [Area Agency on Aging](#) to see what services are offered in your area.

You can also check with faith-based organizations, veteran service organizations, and caregiver support groups in your region to see if they offer caregiving or respite care services.

Need help navigating your options? [Ryan Ramsey](#), Associate Director of Health Coverage and Benefits at NCOA, suggests connecting with a social worker or [geriatric care manager](#): "A social worker can offer valuable assistance in making a respite care plan and finding services in your community," he explained. "Check with adult day centers near you who have social workers on staff, call your Area Agency on Aging, or contact local hospitals and home health care agencies to see what they recommend."

It pays to do your homework on respite care

Respite care can be expensive. And while Medicare, Medicaid, and the VA may offer some coverage, not everyone will qualify for these benefits. The good news: There are other avenues worth exploring that can help you pay for short-term help. Finding affordable or no-cost respite care may not be easy or quick—but with a bit of research, you may find an option that provides the relief you need and the quality care your family member deserves.

Source

1. [Genworth Cost of Care Survey](#). Found on the internet at <https://www.genworth.com/aging-and-you/finances/cost-of-care>

MEDICARE & RESPITE CARE

What you need to know

- HOSPICE CARE**
If the care recipient has Medicare Part A and is on hospice care, then respite care is covered for a small 5% coinsurance fee.
- PART C PLANS**
Some Medicare Advantage (Part C) plans offer caregiver support and may cover respite care. Check the plan to see how and if it's covered.
- FACILITIES**
Another option for respite care is to look for facilities outside of Medicare that offer respite care, such as adult daycare centers and nursing homes.
- FAMILY MEMBERS**
When in doubt, try asking another family member to take over care for a few days while you take a break.

As the viruses that cause COVID-19 and flu spread, they change.

UPDATED VACCINES ARE NOW AVAILABLE

Staying up to date with recommended vaccines helps keep you protected.

Changing Viruses

Viruses change so they can avoid our natural immune response, and the protection provided by vaccines. This is known as “mutation.” The virus that causes COVID-19 has “mutated” throughout the pandemic. This has resulted in many “variants” – versions of the virus that are different from its original form. COVID-19 and flu vaccines are updated to specifically address changing viruses and protect against the variants that are circulating.

Updated Vaccines

The vaccines targeting COVID-19, and flu are updated regularly to provide protection against changing viruses. Updated vaccines target variants expected to be circulating during the fall and winter. Some viruses, like measles and polio, don’t mutate or do so infrequently. This is why vaccination against these types of diseases provides longer-lasting protection.

Staying Up to Date With Your Vaccines Is Still Critical

COVID-19 and flu result in thousands of hospitalizations and deaths each year. The best way to reduce the risk of severe illness from infectious respiratory disease is to stay up to date with recommended vaccinations.

What to Know About RSV Vaccines for Older Adults

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Respiratory syncytial virus (RSV) is a common infectious respiratory virus that usually causes cold-like symptoms but can lead to serious illness among infants, some young children, and older adults.¹ For older adults, RSV can be very serious and causes hospitalizations and death each year. In the United States, RSV results in thousands of hospitalizations and deaths annually among adults aged 65 and older.²

Vaccines are available to help protect against RSV and the Centers for Disease Control and Prevention (CDC) recommends vaccination for people who are at increased risk for severe RSV.

I'm over the age of 60. Do I need an RSV vaccine?

- ➔ **For adults 75 years of age and older**, the CDC recommends "routine" vaccination, meaning all individuals in this age group should receive an RSV vaccine.
- ➔ **For adults 60 - 74 years of age**, the CDC recommends a "risk-based" approach to vaccination. This means that vaccination against RSV is recommended for those with certain chronic health conditions and/or those living in nursing home settings, which can increase the risk of severe RSV.

What steps should I take to get vaccinated?

- ✓ Adults who are eligible can get an RSV vaccine at any time. Ensuring that you are up to date on your RSV vaccine is the best way to help protect yourself from serious RSV infection.³
- ✓ If you are aged 60-74 with a risk condition, qualified vaccinators, like pharmacists, nurse practitioners, and other providers, may determine your eligibility for an RSV vaccine based on a clinical assessment, even in the absence of medical documentation of a risk condition.⁴ According to the CDC, self-reporting a risk condition is sufficient evidence, and vaccinators should not deny RSV vaccination due to a lack of documentation.

If you are between 60–74 years of age and have any of the following conditions that may put you at greater risk for severe RSV disease, CDC recommends RSV vaccination.

- ▶ Chronic cardiovascular disease
- ▶ Chronic lung or respiratory disease
- ▶ Severe obesity (BMI ≥ 40 kg / m²)
- ▶ Chronic hematologic conditions, including sickle cell disease
- ▶ Neurologic or neuromuscular conditions causing impaired airway clearance or respiratory muscle weakness
- ▶ Diabetes complicated by chronic kidney disease, neuropathy, retinopathy, or other end-organ damage, or requiring treatment with insulin SGLT2 inhibitors
- ▶ End-stage renal disease or dependence on hemodialysis or other renal replacement therapy
- ▶ Residence in a nursing home
- ▶ Chronic liver disease
- ▶ Moderate or severe immunocompromise
- ▶ Other chronic medical conditions or risk factors that a health care provider determines would increase the risk for severe disease due to viral respiratory infection

If you have any questions about RSV vaccination or whether you have eligible risk conditions, please talk to a healthcare provider.

¹ <https://www.cdc.gov/rsv/about/index.html>

² <https://www.cdc.gov/mmwr/volumes/72/wr/mm7240a1.htm>

³ <https://www.cdc.gov/vaccines/vpd/rsv/hcp/older-adults-faqs.html>

⁴ <https://www.cdc.gov/mmwr/volumes/73/wr/mm7332e1.htm>

DOES INSURANCE COVER RESPIRATORY VACCINES?

Nearly all private and public health insurance plans cover all vaccines recommended by the Centers for Disease Control and Prevention’s (CDC) Advisory Committee on Immunization Practices (ACIP)—which includes vaccines that protect against COVID-19, flu, pneumococcal disease, RSV, and pertussis (whooping cough)—free of cost to you.

This applies to all vaccines with routine, aged-based, risk-based, catch up, and shared clinical decision-making recommendations from ACIP.

For **adults** covered by...

Are Respiratory Vaccines Covered Free of Cost?

Background on Coverage Requirements

MEDICAID



YES. All ACIP-recommended vaccines are available to Medicaid beneficiaries with no out-of-pocket costs.

The Inflation Reduction Act (IRA) requires state Medicaid agencies to cover all vaccines recommended by CDC’s ACIP for Medicaid beneficiaries with no out-of-pocket costs.

MEDICARE



YES. Under Medicare, all ACIP-recommended vaccines are covered through either Medicare Part B or Part D without cost-sharing provided the vaccine is administered through an in-network provider. Medicare Part B vaccines include those for flu, COVID-19, and pneumococcal disease. Vaccines for RSV and pertussis (whooping cough) are covered through Medicare Part D.*

Recent changes to Medicare now ensure that all ACIP-recommended vaccines—both those covered under Part B and Part D—are available free of cost to Medicare beneficiaries.

TRICARE



YES. All ACIP-recommended vaccines administered through an authorized provider or in-network pharmacy are covered by TRICARE for all beneficiaries with no out-of-pocket costs.

TRICARE covers all age-appropriate doses of vaccines including respiratory vaccines—as recommended by CDC.

PRIVATE INSURANCE



YES. Those with private insurance, including those with employer-provided health insurance or insurance purchased through the healthcare marketplace, can access ACIP-recommended vaccines with no out-of-pocket costs through in-network providers.**

Under the Affordable Care Act (ACA), private insurance plans are required to cover all vaccines recommended by ACIP free of cost-sharing.

ADULTS WITHOUT INSURANCE

Adults without insurance may be able to access vaccines free of cost through patient assistance programs or state health departments. The Bridge Access Program, which provided free COVID-19 vaccines to adults without health insurance, ended in August 2024.

* While all Medicare Part D vaccines are covered free of cost to beneficiaries, Part D coverage is optional, so those opting out of Part D may lack coverage for vaccines not covered under Part B.

** Certain grandfathered (pre-Affordable Care Act) plans may require cost-sharing for recommended vaccines.

Have more questions about coverage for respiratory vaccines?
Visit cveep.org/covered

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DOES INSURANCE COVER RESPIRATORY VACCINES?

Nearly all private and public health insurance plans cover all vaccines recommended by the Centers for Disease Control and Prevention’s (CDC’s) Advisory Committee on Immunization Practices (ACIP)—which includes vaccines that protect against COVID-19, flu, pneumococcal disease, RSV, and pertussis (whooping cough)—free of cost to you.

This applies to all vaccines with routine, aged-based, risk-based, catch up, and shared clinical decision-making recommendations from ACIP.

For children covered by...

Are Respiratory Vaccines Covered Free of Cost?

Background on Coverage Requirements

THE VACCINES FOR CHILDREN (VFC) PROGRAM

The VFC Program is a federally funded program that provides vaccines for children (18 years old and under) who are uninsured or otherwise unable to afford the cost of vaccines. The program supplies over 50% of vaccines for children in the U.S. In addition to providing vaccines free of cost for children without insurance, a child may also receive a vaccine through the VFC Program if they are covered by Medicaid or the Children’s Health Insurance Program (CHIP).

MEDICAID



YES. All ACIP-recommended vaccines are available to Medicaid-eligible children 18 years old and younger with no out-of-pocket costs.

Children enrolled in Medicaid receive all ACIP recommended vaccines through the VFC Program.

CHILDREN’S HEALTH INSURANCE PROGRAM (CHIP)



YES. CHIP is required to cover all ACIP-recommended vaccines for children 18 years and under with zero cost-sharing, which means vaccines are free of cost for those receiving them.

CHIP is a state-run program and therefore how vaccines are covered varies by state. That said, regardless of the type of CHIP coverage a state selects, all states must provide access to ACIP-recommended vaccines free of cost to beneficiaries. Depending on the state’s plan type, these vaccines may be covered by CHIP or by VFC.

CHILDREN WITHOUT INSURANCE



YES. For children 18 years old and under who are uninsured or underinsured (e.g., if the child has health insurance but the plan doesn’t cover vaccines), as well as Alaska Native and American Indian children, the VFC Program provides ACIP-recommended vaccines free of cost.

Uninsured and underinsured children can access ACIP-recommended vaccines free of cost by visiting a provider enrolled in the VFC Program or through a public health clinic, a federally qualified health center (FQHC), or a rural health clinic.

PRIVATE INSURANCE



YES. For children insured through a private plan, including those with coverage through a parent or guardian’s employer-provided plan or plan purchased through the healthcare marketplace, ACIP recommended vaccines can be accessed with no out-of-pocket costs at in-network providers.

Under the Affordable Care Act (ACA), private insurance plans are required to cover all vaccines recommended by ACIP free of cost-sharing.

TRICARE



YES. Recommended respiratory vaccines administered through an authorized provider or in-network pharmacy are covered by TRICARE for all beneficiaries with no out-of-pocket costs.

TRICARE covers all age-appropriate doses of vaccines—which includes respiratory vaccines—as recommended by CDC.

Have more questions about coverage for respiratory vaccines?
Visit cveep.org/covered

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Take Advantage of FMLA

Employed caregivers also have laws on their side. The Family Medical Leave Act (FMLA) allows employees to take 12 weeks of unpaid leave per year while retaining job security. Certain qualifications have to be met in order to be eligible for FMLA. Employees must have worked in the company for at least 12 months before taking advantage of FMLA.

Eligible personnel must also work in a company with at least 50 employees, in a government agency or in an elementary school. Some states allow coverage for staff who work at smaller companies.

An employer might require the caregiver to use vacation time prior to using FMLA. Plus, the caregiver does not have to use up all the FMLA time at once. Taking smaller chunks of FMLA is beneficial when helping a parent with a short-term illness.

Stay Focused

While on the job, focus on work rather than caregiving. When it is necessary to research a parent's ailment, do so after work hours. Schedule doctor's appointments and therapies during lunch. As an employed caregiver, it is important to keep caregiving and work life separate.

Prepare a Backup Plan

Health crises happen; and when Mom or Dad suddenly falls ill, the family caregiver will need to provide direct support. Have a backup plan beforehand. Arrange for colleagues to step in when a caregiving emergency requires immediate assistance and leaving work in a hurry is crucial.

Inform the Employer

Rather than wait for a caregiving emergency to notify an employer, family caregivers are encouraged to let a boss know early on about the extra responsibilities at home. Initiate a formal discussion with either human resources or a supervisor. A sit-down talk allows both parties to be focused.

While having the conversation about caregiving responsibilities at home, consider it an opportune time to talk about schedule accommodations. If telecommuting or schedule changes are in the foreseeable future, the transitions will take time to establish. Also let a boss know that work is still a priority.

For more information, visit:

<https://assistinghands.com/34/florida/palmbeach/blog/how-to-care-for-elderly-parents-while-working-full-time/>



Four Tips to Help Caregivers Care for Themselves

Entering the role of caregiving often comes with a profound sense of duty, believing we must handle it all on our own, but the weight of caregiving can take a toll on our mental health, leading to feelings of guilt, exhaustion, and anxiety. In navigating these challenges, it's crucial to recognize that caring for ourselves is not just essential for our own well-being, but also pivotal for creating a world where we all thrive.

Caregiving is often viewed as an individual burden rather than a shared responsibility. But to truly support caregivers and foster a culture of care, we must acknowledge that caregivers also deserve care and support.

Here are some practical tips to help you navigate your caregiving journey with more ease:

1. Make time for yourself

Schedule regular breaks throughout your day, even if they're short, to engage in activities that bring you joy and relaxation. Whether it's spending a few moments in quiet meditation, watching a feel-good movie, binge-watching a TV series (we've compiled a list of some great care moments on TV [here](#)), getting lost in the pages of a captivating book, enjoying a cup of tea, or taking a brisk walk around the block, these moments of self-care can help you recharge and refocus. You may also consider exploring [respite care options](#) for additional assistance with your care responsibilities – so you can have even more time to take care of what you need to.

2. Communicate your needs

Whether you need assistance with caregiving tasks, emotional support, or simply someone to listen, your friends, family, and support networks can provide invaluable relief and connection. Be honest and transparent about your feelings and needs, even if it feels vulnerable or uncomfortable. Remember that setting boundaries and prioritizing your well-being isn't selfish—it's an important part of maintaining your physical and emotional health as a caregiver. By [communicating your needs](#) and seeking support, you're better equipped to fulfill your caregiving responsibilities.

3. Find community

We will all give or receive care at some point in our lives. You'd be surprised how many people are going through a similar experience as yours. Finding community as a caregiver is essential for support and understanding. Consider joining caregiver support groups, participating in [online advocacy groups](#), or attending community events. You're not alone. Building a network of peers who understand your care journey can help you navigate the challenges of caregiving with greater support.

4. Get mental health support

When facing a difficult care journey, mental health support can be a crucial resource for caregivers. Consider reaching out to mental health professionals for therapy or counseling sessions tailored to your specific needs. The [National Alliance on Mental Illness](#) provides information and helplines specifically for caregivers.

Prioritizing your mental well-being, taking time for yourself, and seeking support is not a sign of weakness or selfishness, it is an acknowledgment that caregiving can be tough, and that we can't do it all on our own. We're stronger when we take these journeys together.

Now Available: [Caregiving Smarts](#)



Caregiving Smarts™ is a comprehensive listing and explanation of providers and services to assist family caregivers. It is designed to work for YOU! Information contained herein has been supplied by the organizations and facilities. While the information has been thoroughly cross-referenced and phone numbers verified as of June 2024, the Area Office on Aging of Northwestern Ohio, Inc, and Senior Impact Publications, LLC assume no responsibility for omissions or errors. We welcome all updates and corrections.

To download a copy of this report, visit: <https://s3.us-east-1.amazonaws.com/areaofficeonaging/images/Caregiving-Smarts-10th-Edition-Compressed.pdf>.

Caregivers may also struggle with financial hardship if they start spending their own money on groceries, medical equipment or other items required for care. This is especially true if your caregiving role requires you to cut back on work hours.

Who pays for in-home health care?

Government programs, like Medicare, Medicaid and Veterans' Administration (VA) benefits may cover some or all medically necessary in-home health care for patients who meet certain requirements. It's important to understand which services are covered and which services may come with out-of-pocket costs.

Private insurance, like an individual or family health plan you may get through an employer or through a Marketplace Affordable Care Act (ACA) plan, may provide some coverage for skilled medical care, but typically these plans do not cover personal care. It's best to check your plan details or call your insurance company to make sure you understand your benefits around in-home health care.

If your insurance doesn't cover in-home health care, you could look into hiring an in-home care provider and pay for services out of pocket. Be sure to shop around and compare costs because these services can get expensive. Or, reach out your local social services agency or your local offices on aging to see if your loved one qualifies for financial support.¹

Where can I find caregiver resources?

There are many resources available to help caregivers. Here are a few:

- **Public/government resources.** Search your county and state websites (try a term like "senior services"). You can find resources about helping seniors live as independently as possible. These might include information on support planning and community-based programs.
- **Respite care.** You'll likely need breaks from caregiving. If you don't have a network of friends or family willing to help, you can visit **archrespite.org** by visiting: **<https://archrespite.org/>** to find respite providers and programs in your area.
- **Delivery services.** Whether it's medications, household supplies or food delivery services, you might be surprised at what you can have delivered right to your door.

For more information, visit: <https://www.uhc.com/health-and-wellness/caregiver-resources/in-home-health-care?msocid=291161c2924469b32fb775549356680a>



GrandFamilies

Family and Kinship

5 tips for grandfamilies facing mental health concerns

The U.S. is in a child and adolescent mental health emergency, on top of a national mental health crisis for Americans of all ages. While everyone can be impacted, there is one particular type of family that is particularly vulnerable to mental health concerns: grandfamilies.

What are grandfamilies?

Grandfamilies, also known as kinship families, are families in which grandparents, other relatives, or close family friends are raising children with no parents in the home. There are at least 2.4 million children growing up in grandfamilies, and 7.6 million children are living in households where another relative (not their parent) is head of the household. Grandfamilies are diverse and exist across various geographies, socioeconomic statuses, races, and ethnicities. Yet, they are disproportionately Black, African American, American Indian, Alaska Native, and, in some areas, Latino.

Grandfamilies form out of events that separate children from their parents, such as a parental death, incarceration, deportation, divorce, military deployment, or the growing concern of mental health and substance use disorders. Research shows that between 2002 and 2019, grandparents reporting parents' substance use as a reason for raising their grandchildren jumped from 21% to 40%.

Grandfamily mental health impacts

Grandfamilies have many strengths, including resilience, which can mediate the effects of trauma; family connections and legacies; adaptability; and the ability to co-parent with birth parents. Research indicates that children in grandfamilies do better than when they are placed in non-relative foster care, especially when the grandfamilies have the services and support they need. However, mental health services and systems of support remain difficult to navigate and access – if not impossible – due to high costs, lack of availability of qualified mental health providers, lack of culturally appropriate services, stigma, ageism, and more.



Children and their grandfamily caregivers can have many layers of trauma and mental health challenges. Children may come to grandfamilies with past experiences of trauma – such as a parental substance use disorder and other untreated mental health conditions, neglect, abuse, the trauma of being separated from their parents, and more – which can cause significant mental health concerns even when they are safely living in a grandfamily home. Children who have experienced trauma may live with learning difficulties, chronic health conditions, and mental health conditions, like post-traumatic stress disorder (PTSD).

Grandfamily caregivers' mental health, physical health, and general well-being also is highly impacted when raising others' children. Caregivers could experience chronic stress not only from the common stressors of child-rearing and difficulties navigating relationships with the child's parents, but also from housing strains, financial pressures, social isolation, food insecurity, lack of self-care, and other issues brought on by the sudden responsibility of raising children.

Birth parents of children living in grandfamilies often experience undiagnosed and/or untreated mental health conditions. More than 1 in 4 adults living with serious mental health problems also has a substance use problem, a key reason that children come into the care of relatives.

The pandemic, increased racial violence, war, and other events in recent years have added even more layers of stress and trauma for grandfamilies.

Research shows that improved access to mental health supports, and concrete material supports (such as financial, food and nutrition, housing, etc.) improves mental health outcomes for children and caregivers in grandfamilies.

Tips for grandfamilies

- 1. Explore employer-based support:** More than half of grandfamily caregivers are in the labor force, and some employers offer supports that can be helpful. Employers may offer mental health support and treatment through health insurance, Employee Assistance Programs (EAPs), or employee support groups.
- 2. Utilize school and community-based mental health supports:** School counselors and social workers can often help provide support or point grandfamilies to appropriate mental health services. Community-based mental health programs can also be helpful.
- 3. Obtain accurate diagnoses for mental health concerns:** Accurate diagnoses for children and their caregivers can help with understanding behaviors and assist with getting appropriate treatment. Understanding trauma is particularly critical in these situations.
- 4. Find a grandfamily support group:** It's critical to connect with other grandfamilies for support and understanding, and support groups generally include education about challenges and resources. Find a support group by clicking a state on the [GrandFacts: Fact Sheets for Grandfamilies page](#), contacting the [local area agency on aging](#), or inquiring at a child's school.
- 5. Tap into respite care:** Grandfamily caregivers need respite – a break from caregiving – in order to manage chronic stress, take care of themselves, and “reboot.” Even a few hours can make a big difference. Respite care may be provided through in-home care, center-based care, camps, therapeutic recreation programs, Head Start, state-funded pre-K, community centers, YMCA, afterschool programs, or faith-based organizations. Also try searching for a grandfamily respite program through the [ARCH National Respite Network](#).

For more information, visit:

<https://www.mhanational.org/blog/grandfamilies-facing-mental-health-concerns>





Founded in 1970, The National Caucus and Center on Black Aging, Inc. (NCBA) is a national 501 (c) (3) nonprofit organization. Headquartered in Washington, DC, NCBA is the only national aging organization who meets and addresses the social and economic challenges of low-income African American and Black older adults, their families, and caregivers.

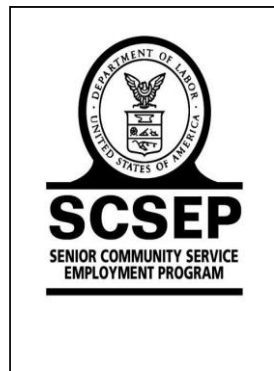
NCBA Supportive Services include:

Job Training & Employment

NCBA administers Senior Community Service Employment Program (SCSEP) with funding from the U.S. Department of Labor (DOL) to over 3,500 older adults, age 60+ in North Carolina, Arkansas, Washington, DC, Illinois, Missouri, Michigan, Ohio, Florida, and Mississippi.

SCSEP is a part-time community service and work-based job training program that offers older adults the opportunity to return or remain active in the workforce through on the job training in community-based organizations in identified growth industries.

Priority is given to Veterans and their qualified spouses, then to individuals who: are over age 65; have a disability; have low literacy skills or limited English proficiency; reside in a rural area; may be homeless or at risk for homelessness; have low employment prospects; failed to find employment after using services through the American Job Center system.



Annually, NCBA and CVS partner to host job fairs to orient SCSEP participants about the benefits of working at CVS as a mature worker.

To learn more about the Senior Community Service Employment Program (SCSEP), visit: <https://ncba-aging.org/employment-program-resources>

NCBA administers the Environmental Employment (SEE) Program with funding from the U.S. Environmental Protection Agency.



Agency (EPA) to older adults, age 55+ with professional backgrounds in engineering, public information, chemistry, writing and administration the opportunity to remain active in the workforce while sharing their talents with the U.S. Environmental Protection Agency (EPA) in Washington, DC, and at EPA Regional Offices and Environmental Laboratories in NC, OK, FL, and GA.

To learn more about the Senior Employment Environment Program (SEE), visit: <https://www.ncba-aged.org/environmental-employment-program-resources>



Health

The NCBA Health and Wellness Program offers continual education, resources, and technical assistance either in-person, online, or through self-paced learning opportunities. The program offers a wide variety of social and economic services and support including, the delivery and coordination of national health education and promotion activities, and the dissemination of and referral to resources.

To learn more visit <https://ncba-aging.org/health-and-wellness>

Housing

Established in 1977, the NCBA Housing Management Corporation (NCBA-HMC) is the organization's largest program and service to seniors. NCBA-HMC provides senior housing for over 500 low-income seniors with operations in Washington, DC, Jackson, MS, Hernando, MS, Marks, MS, Mayersville, MS and Reidsville, NC.

To learn more about NCBA Housing Program, visit <https://www.ncba-aged.org/affordable-housing/>



Samuel J. Simmons NCBA Estates located in Washington, DC



NCBA Presents Free Tool Kit and Recorded Webinar for Dispelling Fears and Myths about COVID-19 Vaccines

Rather than a live webinar, we have linked a **recorded webinar** for you to view at your convenience to help in your outreach to older African Americans in your community who are still wary about the Covid-19 vaccines or have trouble accessing services. The webinar runs less than 20 minutes.



The webinar offers practical learned" about organizations seeking to educate their members and facilitate vaccinations, but it also includes a **Tool Kit** with an infographic, tip sheet, a brief informational video that addresses myths and facts about the vaccines, and appointment cards to help recipients keep track.

[Here is the link to the Recorded Webinar and the Tool Kit.](#)

We strongly encourage you to download the **informational video in the Tool Kit** for public showings, to email it to members, or to share with other organizations and individuals who are engaged in Covid-19 education. There is no copyright on the video, so feel free to distribute it far and wide.

We would very much appreciate your feedback about this webinar, the Tool Kit and your distribution numbers. Please let us hear from you at covided@ncba-aging.org.

NCBA social media



To learn more about NCBA programs, services, and upcoming events, follow us on Facebook, Twitter, and Instagram!

Facebook @NCBA1970

Twitter@NCBA1970

Instagram@NCBA_1970

You're also welcome to learn more about NCBA by visiting our website at www.ncba-aging.org. We look forward to hearing from you!

****Get our Newsletter****

Want the latest news about aging, including resources and technical assistance? Email Angie Boddie @ aboddie@ncba-aging.org or call the NCBA Hotline at 202-796-0099.

For more information about NCBA programs and services, visit:
www.ncba-aging.org