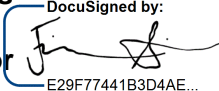




NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
JOYCE MASSEY-SMITH • Director
Division of Aging and Adult Services

DIVISION OF AGING ADMINISTRATIVE LETTER NO. 24-10

TO: Area Agency on Aging Directors
FROM: Jill Simmerman, Deputy Director 
DATE: December 20, 2024
SUBJECT: Flexibilities in Response to Hurricane Helene

On September 27, 2024, the path of Hurricane Helene crossed North Carolina as a tropical storm, causing catastrophic flooding in the western part of the state. On September 29th, President Biden approved the Major Disaster Declaration (MDD) for North Carolina in response to the tropical storm. On October 9, 2024, Governor Cooper signed [Executive Order 319](#), authorizing actions to meet NC’s health and human services needs in support of relief efforts.

This letter specifies flexibilities the Division of Aging is authorizing to impacted area agencies on aging (AAAs) for improved access to community-based services during the MDD timeframe. These will expire once the MDD has ended. Flexibilities not specified in this letter will be handled on a case-by-case basis.

Adult Day Services

For adult day services programs who experienced closures due to Hurricane Helene, billing may be charged to the Home and Community Care Block Grant (HCCBG), State Adult Day Care Fund (SADCF) and State In-Home Fund (SIHF) for the time of closure. Billing must be based on the daily participant count as of September 30, 2024. This applies to currently certified programs only. Providers cannot request reimbursement beyond the current budgeted amount for each funding source. The following guidelines apply:

- Providers are required, at a minimum, to conduct a daily wellness check with all enrolled participants, document the results, and seek assistance from local and state resources as needs arise. Wellness checks could be provided in-person or through alternative means (e.g., telephone).
- To ensure that the funds are reimbursed properly, the scheduled days of attendance must be listed on each participant’s service plan in his/her record and the fund paying for each of the scheduled days of attendance must be clearly identified on each service plan per North Carolina Adult Day Care/Day Health Services Standards for Certification. Providers must maintain a record of the days the programs were closed and the reason for the closure.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF AGING AND ADULT SERVICES

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- Reimbursement is submitted through the Aging Resource Management System (ARMS) for HCCBG or through the Services Information System (SIS) for SADCF and SIHF. All applicable days covered by this policy must be entered into the appropriate system(s).

Family Caregiver Support Program (FCSP)

- The 20% cap on FCSP Category V (supplemental services) is waived to allow for expenditures that allow caregivers to continue safely caring for the care recipient during the recovery phase. Allowable expenditures include consumable supplies, assistive technologies, safety/durable medical equipment, and emergency response systems.
- Program codes 829, 839, and 869 can be used to allow for wellness calls, virtual support groups and other disaster support.
- Caregiver-directed respite vouchers can be used to hire immediate family members so long as the person is age 18 or older, does not reside in the same household/home as the care recipient, does not play an active role in care delivery, and does not have a legal or financial relationship with the care recipient (e.g., power of attorney or guardianship).
- The combined FCSP and Project C.A.R.E. respite cap is raised to \$5000.

In-Home Aide

In-home reassessments may be conducted via telephone rather than in the client's home as authorized by Executive Order 319.

Lifespan Respite

The respite voucher utilization timeframe is increased from 90 days to 180 days.

Nutrition

- Congregate (C1): Nutrition providers in impacted counties may use up to 25% of their III-C1 funding to provide grab and go meals while providing opportunities to congregate in-person or virtually.
- Home-delivered (CII): Nutrition providers in impacted counties may allow grab and go meals in place of traditional home-delivery.
- The requirement for senior nutrition programs to operate 5 days/week year-round is waived during emergency situations [10A NCAC 06K .0205 (7)].
- Nutrition providers in impacted counties may transfer portions of regular Title III-B funding into two special ARMS service codes that allow them to temporarily provide meals that do not meet one-third of the Dietary Reference Intakes (DRI) in the *Dietary Guidelines for Americans* (DGAs). The Division of Aging will update ARMS with new codes for emergencies and send these codes via email in the coming weeks. (Similar III-B service codes were used in the early pandemic response allowing for the temporary provision of meals that did not meet the nutrition program requirements.) Providers must document this transfer of funds by submitting an updated 732 Provider Services Summary to the AAA.

Project C.A.R.E.

- The combined FCSP and Project C.A.R.E. respite cap is raised to \$5000.
- Assessments may be conducted via telephone rather than in the client's home.

Other: Self-Assessments

- SFY 25 Self-assessments are due January 17 for non-MDD impacted AAAs.
- SFY 25 Service Operations self-assessments are optional for the nine MDD-impacted AAAs.

Other: Monitoring

Administrative Letter 24-07 provided SFY 25 monitoring guidance for regular monitoring within the normal September 1 - April 30 timeframe. AAAs in an MDD-impacted area should consider what, if any, monitoring can be conducted in counties impacted by storm damage. The following flexibilities are offered to AAAs with counties in the MDD coverage area:

- AAAs that submitted their annual updated SFY 25 Exhibit 14 monitoring plan and Exhibit 14A subcontractor lists prior to the storm may reevaluate their plans and determine what monitoring can reasonably be completed by April 30, 2025, given disaster response and recovery activities. Revisions to the monitoring plan may be submitted until March 1.
- By March 1, 2025, impacted AAAs may request a waiver of some or all SFY 25 monitoring of providers as needed. Include a brief justification of why monitoring would be a hardship for specific county service providers or the AAA.

Other: General

- Client registration forms may be updated via telephone during annual reassessments. When registering a new client, the client registration form may be completed by telephone and then the client's signature on the original may be obtained by mail if needed.
- Changes may be requested in the SFY 25 Exhibit 13 direct service waivers to accommodate special circumstances.

Questions should be addressed to the relevant program consultants and Rebecca Freeman-rebecca.freeman@dhhs.nc.gov.

JS/RF/pg