North Central Texas Area Agency on Aging Fiscal Year 2026 Caregiver Support Eligibility Screening Form

(This form is to be completed along with the NCTAAA intake form)
Date: Referral Source:
Name of Caregiver:
Name of Care Recipient:
 Care recipient must be at least 60 years old OR have dementia Care recipient must live in Collin, Denton, Ellis, Erath, Hood, Hunt, Johnson, Kaufman, Navarro, Palo Pinto, Parker Rockwall, Somervell or Wise County
In order for the agency to pay for services provided, the caregiver OR care receiver should be experiencing financial need, such as:
 low income for the caregiver's household (i.e., no more than \$1,956 for one-person household, \$2,645 for two-person household, \$3,331 for three-person household, and \$4,019 for four-person household); or low income for the care recipient (i.e., no more than \$1,956 for one-person household, \$2,645 for two-person household, \$3,331 for three-person household, and \$4,019 for four-person household); or expenses that exceed the caregiver's or care recipient's income
The caregiver must meet at least FOUR of the following (check all that apply):
☐ Cares for someone who has difficulty with three or more activities of daily living (getting out of bed or chair, walking, dressing, bathing/showering, toileting, feeding, or grooming)
\square Has a severe health condition with need for assistance on a regular basis
☐ Cares for someone who has been in a hospital, rehabilitation facility, emergency department, or skilled nursing facility within the last four weeks, and/or exhibits behaviors that are dangerous to self/others
☐ Has had to cut back on work hours or activities because of care responsibilities, and/or has experienced physical/emotional problems because of care responsibilities
\square Cares for someone who has no other help — either paid or unpaid
\square Lives in the same house as the person receiving care
Fax completed form and NCTAAA intake form to 940-222-4741
For NCTAAA office use only:
Notes (if applicable):
Staff Signature: Date:

North Central Texas Area Agency on Aging Fiscal Year 2026 Older Relative Caregiver Eligibility Screening Form

(This form is to be completed along with the NCTAAA intake form)

Date:	Referral Source:	
Name of Caregiver:		
Name of Care Recipient:		

Care recipient must live in Collin, Denton, Ellis, Erath, Hood, Hunt, Johnson, Kaufman, Navarro, Palo Pinto, Parker, Rockwall, Somervell or Wise County

Older relative eligibility criteria:

- Older relative (other than biological parent) age 55 and older providing care to children aged 18 or younger who:
 - o is the grandparent, step-grandparent or other relative (other than the parent) by blood, marriage or adoption, of the child; and
 - o is the primary caregiver of the child because the biological or adoptive parents are unable or unwilling to serve as the primary caregivers of the child; and
 - o has a legal relationship to the child, such as legal custody, adoption or guardianship, or is raising the child informally
- Older relative, age 55 and older providing care to adults ages 18-59 with a disability who:
 - Lives with, is the informal provider of in-home and community care, is the primary caregiver, <u>and</u> is related by blood, marriage or adoption to the person with a disability. Disability is defined as "mental or physical impairment, or a combination of mental and physical impairments that are likely to continue indefinitely and result in substantial functional limitation in three or more major life activities," including self-care; receptive and expressive language; learning; mobility; self-direction; capacity for independent living; economic self-sufficiency; cognitive functioning; and emotional adjustment."
 - The care receiver must need help with at least two activities of daily living to qualify for respite care.

The care	giver must meet at least THREE of the following (check all that apply):
	Cares for a person who has cognitive impairment
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	Cares for someone who has difficulty with three or more activities of daily living; and/or severe health condition with need for frequent assistance
s	Cares for person who has been in a hospital, rehabilitation facility, or nursing facility within the last everal weeks (generally 2-4 weeks), and/or has experienced physical problems because of care esponsibilities
	Cares for person who has no other help — either paid or unpaid
f	las income no more than 150% of the poverty level (\$1,956 for individual, \$2,645 for a couple, \$3,331 or a three-person household, \$4,019 for a four-person household), not including the care receiver's ncome
	Fax completed form and NCTAAA intake form to 940-222-4741
Notes (if a	oplicable):
Staff Signa	ture: Date: