

Virginia Lifespan Respite Voucher Program

Effective Date: July 2022; Revised Jan 2026

Purpose

This manual explains how to receive, review, approve, and reimburse applications for the Virginia Lifespan Respite Voucher Program (VLRVP). This manual also outlines required data entry, documentation, and recordkeeping procedures to ensure compliance with various federal grant requirements and state fiscal requirements.

Procedures

1. Application Overview

1.1. Application Access

The VLRVP application is a 5-page form that is publicly located on: <https://vda.virginia.gov/vlrp.htm>. The Kinship application mirrors the VLRVP application and is located on the same page.

The Grant Coordinator will email or mail the application, if requested.

1.2. How Applicants may Submit

Applications may be submitted in one of the following ways:

- **By Email:** www.vlrp@dars.virginia.gov
- **By Mail:**
Virginia Department for Aging and Rehabilitative Services (DARS)
5620 Cox Rd Glen Allen, VA 23060
- **By Fax:** (804) 662-9354

2. Required Application Materials

Applicants must submit all required materials listed below for the application to be reviewed and considered for approval.

2.1. Completed Application

A fully completed five (5)-page Virginia Lifespan Respite Voucher Program (VLRVP) application or Kinship Program application.

2.2. Verification of Disability or Medical Condition- VLRVP Only

Applicants must submit documentation verifying the disability or medical condition of the respite care recipient.

Verification documentation must be dated within the past two (2) years at the time of application submission.

Acceptable verification documentation includes one (1) of the following:

- Written diagnosis from a licensed physician
- Hospital visit or discharge summary
- Social Security Administration benefit or eligibility letter
- Early Intervention eligibility documentation
- Vocational Rehabilitation statement verifying a qualifying disability
- Long-term disability insurance statement

2.3. **Custody Verification- Kinship Only**

Applicants must submit documentation verifying custodial responsibility for the child.

Acceptable verification documentation includes one (1) of the following:

- Court custody or guardianship documents
- Temporary Assistance for Needy Families (TANF) – Child Only verification
- Power of Attorney documentation
- Foster care confirmation documents
- Parental agreement or plan for temporary custody

3. **Program Eligibility**

Applicants must meet all eligibility requirements outlined below to be eligible for the Virginia Lifespan Respite Voucher Program (VLRVP) or Kinship Program:

- The applicant must reside in the Commonwealth of Virginia
- The primary caregiver must reside with the care recipient on a full-time or part-time basis
- The applicant must provide verifiable documentation of a significant disability or medical condition for the care recipient or custody for kinship, as outlined in **Section 2**
- Grant funds may be used solely to provide respite services for the primary caregiver
- Primary caregivers may apply for the program once per calendar year

4. **Application Receipt and Initial Review**

4.1. **Application Receipt**

Upon receipt, staff must verify that the application is complete. This includes:

- All five (5) pages of the VLRVP or Kinship application completed
- Disability or medical condition verification for VLRVP applicants
- Custody verification for Kinship applicants

Applications that are incomplete must be processed as pending in accordance with **Section 4.5.**

4.2. Review

The VLRVP Coordinator has up to thirty (30) calendar days from the date of receipt to review the application and notify the applicant of the determination.

Applications will not be approved if it is determined the applicant does not meet the program eligibility criteria or does not submit the required verification documentation.

4.3. Unique Identification Number Assignment

Enter the applicant's name, address, phone number, and email address into the Application Matrix (Identifiable) worksheet.

Verify whether the applicant has previously applied to the program:

- **If the applicant has applied previously**, the original applicant identification number must be reused
- **If the applicant is new to the program**, a new applicant identification number must be generated

4.4. De-Identified Data Entry

Enter the application data into the Year [#] Application Matrix for the current program year as defined in **Section 9**. The data entry date serves as the determination date unless additional information is required. Applications requiring additional information are entered and marked as pending by designating the corresponding data row within the matrix in **yellow**.

4.5. Pending Applications

If required information or documentation is missing, staff must initiate the pending determination process as follows:

Preferred communication method: Mail

- Locate the Pending Letter template: K:→Programs→VLRVP 2021–2026→[Program Year] →Templates
- Complete the template, clearly identifying missing documentation (including disability or custody verification, if applicable) and requested response date
- Print 2 copies of the letter, sign both, and mail one to the applicant at the mailing address listed on the application
- Include the other letter in the paper application file.

Preferred communication method: Email

- Complete the email template that has been pre-set in Outlook, clearly identifying the missing documentation and requested response date
- Send the pending email to the applicant via email

Place the application in the Pending Folder until a determination can be made.

Applicants typically have 10 business days to respond before the application is considered denied for either failure to provide or unable to determine eligibility.

4.6. Denial

If an applicant does not meet program eligibility requirements, does not provide the required verification, or otherwise submits an incomplete application, it will be considered denied. A denial notification must be sent to the preferred communication method in the process described above, if it is provided. Data entry must still be completed in the Application Matrix as described in **Section 9**.

4.7. Application Filing and Recordkeeping

Approved, pending, and denied applications must be filed numerically in the secure program filing cabinet for review and record retention purposes until scanning can be completed.

Files are scanned and placed on the K drive under VLRVP Digital Archive in their respective determination folder.

The file naming convention will be **unique ID** (ex. 1), **clients last name** (John Doe) and **date received** (1/1/2021); i.e. *1_Doe_01012021*

5. Approval and Notification Procedures

All approval and notification activities for the VLRVP and Kinship program must be completed in accordance with the procedures outlined below. Applicants must be notified of approval, denial, or pending status by mail or email within thirty (30) calendar days of application receipt.

5.1. Approval Packet Preparation

Access the Approval Packet located at:

K: → Programs → VLRVP 2021–2026 → [Program Year] → Templates → Approval Packet

Complete the Approval Packet as follows:

- Enter to primary caregiver’s name and mailing address
- Enter the assigned caregiver identification number
- Enter the approved reimbursement start and end dates on Page 2.
 - The voucher period is typically 90 days from the date of approval, but can be adjusted on an as needed basis up to 90 days prior to capture already incurred respite costs or extended beyond 90 days if caregiver will need more time to take full advantage of the program.
 - Typically, the extensions should be contained within one calendar year to reduce the chance a 1099-MISC will be generated if payments from the program exceed the \$600 reporting threshold, but it is not a prohibition.
- Enter the care recipient’s full name on Page 2.

The completed Approval Packet must be saved using the following naming convention: *Last Name, First Name*, and stored in the appropriate approval folder.

5.2. Approval Notification

Email Notification-

When sending approval by email, staff must:

- Print and attach Pages 1 and 2 of the Approval Packet to the application file
- Email the Approval Packet to the applicant as an attachment
- Include the acceptance message template and program contact information in the email

Mail Notification-

When sending approval by mail, staff must:

- Print the full Approval Packet
- Print a second copy of the first 2 pages of the Approval Packet and attach it to the application
- Use a DARS envelope and routing slip
- Place the packet in the outgoing mailbox

6. Reimbursement Processing

The primary caregiver named on Page 1 of the application is typically the reimbursement recipient unless an alternative has been otherwise approved, such as a spouse or an organization that will receive a direct payment.

If reimbursement is requested to be paid directly to a service provider or agency, the request must be communicated to the program via email or phone call at the time of application and prior to program approval. The Lifespan Respite Grant Coordinator will work with the agency to receive direct payment to confirm their willingness to receive direct payment, and work with the organization and caregiver to coordinate the completion of all required forms.

Approved caregivers are eligible to receive reimbursement for eligible respite expenses incurred within the ninety (90) day approval period, not to exceed a maximum of five hundred ninety-five dollars (\$595). The approval period may be extended by request of the caregiver up to the end of the calendar year in which the application was approved.

All reimbursement requests must be processed within 45 days of receipt in accordance with DARS Fiscal policies and procedures, which includes the Virginia Prompt Pay Act.

6.1. Reimbursement Packet Requirements

The reimbursement packet must include the following documents for each request:

- Reimbursement Form
- Signed Reimbursement Acknowledgement
 - Must be signed by both the caregiver and respite provider
 - When the respite provider is a known professional organization and proof of payment is an invoice with clear proof of payment, the respite provider signature may be overridden in that instance only
- Satisfaction Survey
- Completed W-9 form

- Proof of payment (examples include cashed check, paid invoice, or payment app screenshot, or cash attestation sheet provided by VLRVP)

Kinship applicants follow the same documentation requirements as the standard VLRVP participants.

6.2. W-9 Completion

The W-9 form must be completed and signed by the primary caregiver, or by the individual who will be receiving the reimbursement on behalf of the caregiver, such as a spouse or power of attorney (POA).

If reimbursement is to be paid directly to the respite provider organization, the identified vendor or agency must complete and sign the W-9 form prior to reimbursement approval.

6.3. Reimbursement Review Procedures

Staff must review the reimbursement packet in accordance with the following:

- Confirm that the W-9 form is completed, signed, and accurate
- Confirm that proof of payment matches the totals on the time sheet/reimbursement log
- Verify that all required signatures and dates are present
- If errors or missing information are identified, staff must contact the caregiver or agency for correction before processing payment

Reimbursements must supplement, not supplant, any existing funding or services the caregiver receives for respite services. (ex. You cannot be a paid caregiver through Medicaid and also get reimbursed through this program for the same time period)

6.4. Vendor Request Process

- Scan and save the completed W-9 form under the caregiver or agency name (K: → Programs → VLRVP 2021-2026 → [Program Year] → Reimbursements → W-9 Scans)
- Email the W9 as an attachment to Vendor Request following their email requirements
File the packet in the Pending Vendor Requests Sent Folder until the applicant or agency receives an assigned Cardinal and Vendor ID

7. Voucher Transmittal

All reimbursement requests must follow established DARS fiscal payment policies.

7.1. Voucher Transmittal Completion

Staff must open the Voucher Transmittal spreadsheet located at:
[Program year] → Reimbursements → Voucher Transmittal.xlsx

Complete all required fields in the spreadsheet:

- Vendor Name: Enter the primary caregiver's name
- Vendor ID: Enter the assigned Cardinal number
- Invoice Receipt Date: The date that all information was received to approve the payment (may be the original receipt date or a later date if more information was needed)

- Good and/or Services Received Date: This is the last date on the Reimbursement Form in which respite was provided
- Amounts: The total cost of respite listed on the Reimbursement Form, not to exceed \$595

Save the completed spreadsheet using the naming convention: *Last Name, First Name*, in the Completed Admin Voucher folder.

7.2. Final Packet Assembly

Staff must assemble the final reimbursement packet in the following order:

1. Voucher transmittal spreadsheet
2. Application Pages 1–2
3. Approval Packet Pages 1–2
4. Reimbursement Form
5. Signed Reimbursement Acknowledgment
6. Proof of Payment
7. W-9 Form
8. Correspondence (circle final submission date)

9. RCAW Training Certification
10. Remaining Application Pages
11. Satisfaction Survey

8. Final Processing

Items 1-8 described in **Section 7.2** are printed and submitted for supervisor review and signature. The Human Services Program Coordinator (or the Assistant Director of Aging Programs in their absence) reviews, approves and signs the Voucher Transmittal Packet. After approval, signed vouchers are returned to the Lifespan Respite Grant Coordinator.

8.1. Scanning and Naming Convention

Rescan the signed Voucher transmittal and save in *K:→Programs →VLRVP 2021-2026→[Program Year]→Reimbursements→ Electronic Voucher Transmittals*

Save the scanned file using the following naming convention: *262_Last Name_Invoice Date*

8.2. Uploading to Fiscal Shared Drive

Copy or drag and drop the files processed above into *F:→FY[Current FY]→AP→Aging*

Once the files are copied accordingly, move all files into the Already Sent Folder

Place the Final Client Record (Final Packet- Items 1-11 as described above in **Section 7.2**) in *K:→Programs →VLRVP 2021-2026→VLRVP Digital Archive→ Approved VLRVP Applications*

9. Data Entry Requirements

All applicant and reimbursement data must be entered into the correct matrix.

9.1. General

All data entered into the Matrix must be de-identified. If PII is used in open ended questions, replace applicant or respite care recipient names with [PC] or [RCR] respectively.

Enter responses exactly as written when possible. Minor spelling mistakes can be corrected, or further grammatical context may be provided when it is apparent from the application or client record, but would be difficult to understand if reviewing the data independently.

Use the data code **-99** to indicate missing data.

Color coding the matrix can be helpful, but ultimately status coding should be used to indicate if a record was approved, pending, denied, withdrawn or expired.

9.2. Application Matrix

- Refer to the Application PC Data Dictionary for application page 1 data entry
- Refer to Application RCR Data Dictionary for application page 2 data entry
- Refer to Pg 3&4 Data Dictionary for application pages 3 and 4 data entry
- Page 5 contains acknowledgements and caregiver signatures and is not entered

If an application is denied, data entry stops here.

9.3. Reimbursement Matrix

- Refer to Reimbursement Data Dictionary for Reimbursement Form data entry

Voucher start and end date and service start and end date is captured in this matrix also.

If an application was approved but their approval period has expired or has been withdrawn, data entry stops here.

9.4. Satisfaction Matrix

- Refer to the Satisfaction Data Dictionary for satisfaction survey page 1-5 data entry

Reasonable efforts should be made to ensure the satisfaction survey has been returned and completed by the caregiver, however, failure to provide the satisfaction survey will not prevent a reimbursement from being processed. If that occurs, the fields in the matrix row should be marked -99.

Upon completion of all data entry place the final client record in *K:→Programs → VLRVP 2021-2026→ VLRVP Digital Archive→ Approved VLRVP Applications*