

Nova Scotia Caregiver Benefit Program

The Nova Scotia Caregiver Benefit Program is a benefit program, run by the Nova Scotia Department of Health and Wellness, that provides caregivers with monthly funding to support them as they support their family members. The program is for the caregivers of low income adults who live with a severe disability or impairment. If the caregiver and the care recipient both qualify for the program, the caregiver will receive \$400 per month.

More information on the Nova Scotia Caregiver Benefit Program can be accessed [here](#).

The Nova Scotia Caregiver Program *Application Process*

Confirm Eligibility

To be eligible for the Nova Scotia Caregiver Benefit there are eligibility requirements for both (1) the person receiving care and (2) the caregiver.

Eligibility for the person receiving care:

To apply for the Nova Scotia Caregiver Benefit, the person receiving care must:

- Be 19 years of age or older;
- Be a Nova Scotia resident;
- Be in a care relationship with a caregiver;
- Have a net annual income of \$22,125 or less if single, or a total net household income of \$37,209 or less, if married or common-law.
- Have been assessed by a Nova Scotia Health Authority care coordinator as having a high level or impairment of disability requiring

Eligibility for caregivers:

To apply for the Nova Scotia Caregiver Benefit, the caregivers must:

- Be 19 years of age or older.
- Be a Nova Scotia resident.
- Be in an ongoing care relationship with the person receiving care, providing 20 or more hours of assistance per week.
- Not already be receiving payment to provide assistance to the person for whom she/he is providing care.
- Be willing to sign an agreement that defines the terms and conditions for receiving the Caregiver Benefit.

Apply for the Caregiver Benefit:

To apply, call Continuing Care, toll free at **1-800-225-7225**. You, your caregiver or someone else (with your consent) can make an application.

You will need to provide your name, Health Card Number and some additional information about your situation.



Eligibility Assessment

Upon applying, a referral may then be made to a care coordinator who will meet with you to do an assessment to identify your care needs and determine if you qualify for the program.

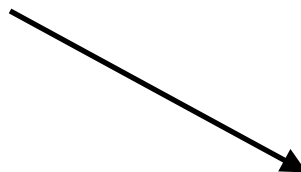


Approval

If approved you will receive a letter saying whether or not you qualify for the drug coverage and, if so, how much you

Rejection

If rejected you will receive a letter saying whether or not you qualify for the drug coverage that outlines the appeals



Receive Funding

Once approved the the caregiver should receive \$400 a month. This should continue annually until the child turns 18 years old. To ensure you continue to receive the funding, you must continue to file income taxes annually.