

PAYING FOR LONG-TERM CARE

There are four basic ways to pay for long-term care:

1. Medicare. Medicare is a federal health insurance program divided into two parts. Part A pays for inpatient hospital services, care in a subacute rehabilitation facility, skilled nursing services in a nursing home for a limited period of time, skilled home health services and hospice care. Medicare Part B covers physicians' services, outpatient hospital care, medical equipment and other health services. Eligibility for Medicare is not based on financial need and is open to nearly all seniors.

2. Medicaid. Medicaid is a combined state and federal program that pays most skilled nursing home costs for people with limited financial resources. A limited number of assisted living facilities are also Medicaid-funded. The program has strict eligibility guidelines as to the amount of assets the patient may own and the income he or she may receive each month.

3. Private Pay. Insurance experts estimate that about one third of all long-term care is paid for by individuals from their own funds. These "private pay" sources include savings, investments, pension plans, employee stock ownership plans, single premium annuities and cash value of life insurance policies.

4. Long-Term Care Insurance. Given the increasingly high cost of health care, long-term care insurance is becoming more popular as a way to help defray future costs and provide peace of mind. Policies must be purchased prior to needing long-term care, as eligibility is based on current health. If you are already a candidate for long-term care, you may not qualify for coverage. Premiums are based on age, health and the type of plan purchased. Most financial planners recommend that long-term care insurance be purchased when people are in their late 50s to early 60s, when premiums are more affordable.

DO YOUR HEALTH CARE HOMEWORK

Many valuable resources are available to seniors and their families who want to learn more about senior care options. Here are just a few.

National Council on the Aging

This private, non-profit association is committed to promoting the dignity, self-determination, and well-being of older persons.

Call 800-424-9046 or visit www.ncoa.org.

Center for Medicare & Medicaid (CMS)

This agency provides information on government health programs and a wide range of senior health topics.

Call 800-MEDICARE (633-4227) or visit www.medicare.gov.

American Association of Homes and Services for the Aging (AAHSA)

Members of AAHSA are not-for-profit organizations representing a continuum of aging services: adult day services, home health, community services, senior housing, assisted living residences, continuing care retirement communities and nursing homes.

Call 866-783-2242 or visit www.aahsa.org.

American Health Care Association (AHCA)

A non-profit federation of health care providers, AHCA serves as a force for change within the long-term care industry and provides information, education and administrative tools that enhance quality at every level.

Call 202-842-4444 or visit www.longtermcareliving.com.

Elder Law Answers

Dealing with health care, estate planning and other issues facing the elderly and their families often requires legal consultation. This organization offers information and listings of attorneys specializing in this branch of law.

Call 866-267-0947 or visit www.elderlawanswers.com.

Social Security Administration

Call 800-772-1213 or visit www.ssa.gov.

At The Oscar and Ella Wilf Campus For Senior Living, health care professionals collaborate with community health service providers to deliver a full continuum of services to older adults in Central New Jersey and the surrounding areas. These include independent living, assisted living, specialized memory enrichment, short-term rehabilitation, skilled nursing and hospice care.

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THE LENA *and* DAVID T. WILENTZ
SENIOR RESIDENCE
732-873-3830

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HOW DO YOU KNOW WHEN THE TIME IS RIGHT?

The reality is that at some point in time, some seniors will likely require some level of assistance outside the home. If your loved one is experiencing ongoing health difficulties or needs assistance with activities of daily living, take a few moments to answer the questions below. If you can answer “yes” to any of them, the time has probably come to make a decision concerning long-term care.

- ▶ *Does your loved one have a chronic health condition causing seriously diminished strength and loss of the ability to function independently?*
- ▶ *Is providing adequate care for your loved one requiring regular use of home health aides and other professionals in senior care?*
- ▶ *Have escalating care needs or changes in the behavior of your loved one rendered the current setting for care inadequate or unsafe?*

WHEN EVERYONE SUFFERS

All too often, a sense of guilt keeps people from seeking the help they need to care for aging parents



or family members who can no longer function independently. Despite ever-increasing physical and emotional demands, they attempt to care for their loved ones themselves and may jeopardize their own physical and mental health in the process. At-home caregivers frequently

push themselves to the limit and put a great burden on themselves and their families. In these situations, making a prompt but well-considered decision that is in the best interest of everyone involved is very important.

RESPONDING TO CHANGING TIMES AND CHANGING NEEDS

Over the years, senior care has evolved, adjusting to meet changing times and responding to many different needs – the health of the older adult, his or her cognitive capabilities, the desire for social interaction and the family’s ability to participate in the care.

LONG-TERM SENIOR CARE OPTIONS

In choosing long-term care, you will be addressing the health, personal care, lifestyle and social needs of your loved one. Several options are available to consider. Some of these options are transitional and some are permanent. Most offer social and recreational services along with professional health care support. The following brief descriptions will give you a basic understanding of the most readily available alternatives.

Independent Living Facilities - While they do not provide “hands on” clinical support, independent living facilities offer still active, independent seniors an attractive lifestyle alternative. Seniors who are no longer able or willing to assume the expenses and responsibilities of private home or apartment living will often benefit from this increasingly popular option. Residents typically pay a monthly rental fee and in exchange receive a private suite or apartment, comprehensive maintenance and upkeep services, and some or all meals. Some facilities also offer social and recreational activities that create increased opportunities for peer interaction and communication. When choosing an independent living facility, be sure to determine whether residents have access to sources of continuing care in the event of changing health requirements.

Assisted Living Residences - Assisted living provides personal assistance in a home-like environment to seniors who need help with activities of daily living. Typical services may include:

- ▶ *Private or semi-private rooms*
- ▶ *Three meals a day served in a common dining area*

- ▶ *Housekeeping*
- ▶ *Transportation*
- ▶ *Assistance with activities such as bathing, dressing and toileting*
- ▶ *24-hour security*
- ▶ *Laundry services*
- ▶ *Social and recreational activities*

Limited health care services are typically provided by the facility. When required, clinical care is generally provided by outside professionals and home health care agencies at an additional cost.



Subacute Care and Rehabilitation – Subacute care is the answer for those recovering from surgery, a serious injury or illness, who still require some help with their recovery, but no longer qualify for the acute care provided in a hospital. Skilled nursing facilities frequently provide subacute care and rehabilitation both to residents and short-term non-residential patients. In many communities subacute care is also provided by freestanding facilities. Patients receive skilled nursing care, rehabilitation therapies, wound care and other specialized services until they are able to return home or move to an alternate level of care.

Skilled Nursing Facilities - For most people, long-term care is synonymous with “nursing home care.” When patients are no longer able to care for themselves, a skilled nursing facility provides round-the-clock care and personal assistance. Most facilities today offer far more than just quality nursing care.

Additional services may include short-term rehabilitation, dementia care, respiratory therapy and psychiatric support. They also offer a full range of social and recreational activities to enrich and enhance the lives of the residents.

Hospice - Hospice care helps prepare patients and their families for the end of life. Hospice is a program of pain relief and symptom control combined with emotional, psychological and spiritual support. Care is focused on comfort, not cure. Given primarily in the home, services are provided by a team of specially trained professionals under the direction of the patient’s physician. If desired or if the patient’s symptoms become too severe to be managed at home, hospice care is also available at many skilled nursing facilities, specialized residences and hospitals.

Specialized Dementia Care - Programs designed specifically for people with Alzheimer’s disease and other forms of dementia or memory impairment are offered by some assisted living and skilled nursing facilities. Dedicated units, wings or freestanding facilities offer a safe and secure setting for care. Specially trained staff provides health care support and supervision. Structured activities are designed to stimulate and encourage residents to function at their highest possible level.

THE POWER OF PARTICIPATION

Families who remain connected to their loved ones after they have entered a senior care program or long-term care facility are empowered by this involvement. By visiting often, participating in care decisions and becoming involved in recreational and social activities, everyone benefits. The resident does not feel abandoned, the family continues to contribute to the resident’s well-being, and professional caregivers have reliable resources to draw upon in designing a care plan to best meet the individual’s needs.