

CAREGIVER RESOURCE GUIDE[©] for Planning the Care of Aging Loved Ones

2011 EDITION



Alzheimer's Association
435 East Henrietta Road
Rochester, NY 14620
(585) 760-5470 Phone
(585) 760-5401 Facsimile
www.alz.org/rochesterny

Caregiver Support Services *The*
official Caregiver Resource Center for
Monroe County

alzheimer's  association

CAREGIVER RESOURCE GUIDE[©]

for Planning the Care of Aging Loved Ones

2011 Edition

Published by:

alzheimer's  association

The Official Caregiver Resource Center for Monroe County

435 East Henrietta Road, Rochester NY 14620
(585) 760-5470 phone (585) 760-5401 facsimile
www.alz.org/rochesterny

Editor:

Melissa von Stein

Assistant Editors:

Tanita Bell
Paula Casselman
Tracy Edelstein
Amanda Fantauzzo
Kathleen Holroyd
M. Gratia L'Esperance
Julie Luther

Funded by:

Monroe County Office for Aging
New York State Office for the Aging

We gratefully acknowledge Miles Zatkowsky, Attorney at Law (Dutcher & Zatkowsky) who reviewed this material and offered constructive guidance.

This *Caregiver Resource Guide*© includes information on numerous topics related to aging, family caregiving, health care systems and providers, financing care, elder law, and listings of community agencies.

Every effort has been made to ensure the accuracy of the materials included, but the reader is cautioned that changes occur frequently.

**These materials are not all-inclusive,
are not a substitute for professional counsel,
nor do they constitute a recommendation
by the Alzheimer's Association
as to the quality of the services provided.**

©2011 Alzheimer's Association. All rights reserved.

All materials developed for this *Caregiver Resource Guide*© are the sole property of the Alzheimer's Association, for the personal use of its participants and those who purchase the Guide.

Duplication of any part is not permitted without written authorization from the Alzheimer's Association.

When you call the individuals or organizations listed in this *Caregiver Resource Guide*©, please tell them that you were referred by the Caregiver Support Services Program of the Alzheimer's Association.

Chapter 1: Caregiver Support and Services

Goals for this chapter:

1. To understand the purpose of the *Caregiver Resource Guide*©
2. To understand the services provided by the Caregiver Support Services Program
3. To understand the services provided by the Alzheimer’s Association

I. About the Guide	2
II. Caregiver Support Services Program Description and Service Area	2
A. Information and Assistance	2
B. Education Seminars	2
C. Resources	2
D. Caregiver Support Groups	2
III. Alzheimer's Association Description and Service Area	3
A. 24-Hour Helpline	3
B. Information and Referral	3
C. Marie C. and Joseph C. Wilson Library	3
D. Care Consultation	3
E. Counseling	3
F. Learning Institute™	3
G. MedicAlert® + Alzheimer’s Association Safe Return®	4
H. Alzheimer’s Association Comfort Zone™	4
I. Alzheimer’s Association TrialMatch™	4
J. International Society to Advance Alzheimer Research and Treatment	4
K. Support Options for Persons with Dementia and their Care Partner	4
L. Support Options Specifically for the Care Partner	6
M. Support Options for People with Dementia	6
N. Respite Services	7
O. Project: Caregivers Connect	7
P. Dementia Support Services Program	8
Q. Site Specific Care and Support Model	9

I. About the Guide

The **Caregiver Resource Guide**© was designed for both health care providers and family care partners to provide guidance to families in planning the care of their aging loved one and to outline services offered throughout Monroe County. The guide covers tools for planning; how to access services; aging trends; sensory impairment and mental health services; caregiving communication, roles and responsibilities; health systems; home care services; alternative housing options; skilled nursing facilities; hospital care; and nurturing the human spirit. The guide is updated annually to provide you the most up-to-date information on local resources.

II. Caregiver Support Services (CSS) Program Description and Service Area

CSS serves as Monroe County's *Official Caregiver Resource Center* through funding from the Monroe County Office for the Aging and United Way. The program provides care and support for families caring for an aging loved one with short term or long term care needs throughout Monroe County through:

- A. Information & Assistance:** Information about caregiving, referrals to community resources and assistance in developing a plan to meet your loved one's needs.
- B. Education Seminars:** Comprehensive 6-week caregiver education series and single caregiver seminars on a variety of topics relating to caregiving.
- C. Resources:** Caregiver resource library for lending or purchasing books and videos. ***Caregiver Resource Guide for Planning the Care of Aging Loved Ones***©. Caregiver Resource Centers located in communities throughout Monroe County allowing easier access to information and local resources.
- D. Caregiver Support Groups:** Regularly scheduled facilitated sessions for caregivers of older adults allowing an opportunity to network with other caregivers in the community facing similar challenges.

III. Alzheimer's Association Description and Service Area

The Alzheimer's Association serves people with Alzheimer's disease and related dementias, their families, and care partners. Established in 1981, the Association covers a nine-county region, that includes Chemung, Livingston, Monroe, Ontario, Schuyler, Seneca, Steuben, Wayne, and Yates counties.

Our Vision:

A world without Alzheimer's disease.

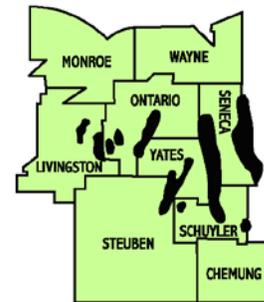
Our Mission:

To eliminate Alzheimer's disease through the advancement of research;
to provide and enhance care and support for all affected;
and to reduce the risk of dementia through the promotion of brain health.

III. Alzheimer's Association Description and Service Area (continued)

**Alzheimer's Association,
Rochester Chapter**

435 E. Henrietta Rd., Rochester 14620
(585) 760-5400
(800) 272-3900 24-hour helpline
www.alz.org/rochesterny



The **Alzheimer's Association** offers care and support through:

- A. 24-Hour Helpline:** Information and reliable guidance is provided 24 hours a day, seven days a week by calling (800) 272-3900.
- B. Information and Referral:** Information about dementia care and treatment to help individuals, families and professionals expand their understanding of the disease and get linked with programs and services offered in the community.
- C. Marie C. and Joseph C. Wilson Library:** This extensive library of books, videos, DVD's and memory boxes is dedicated to increasing knowledge and understanding of the clinical, scientific and social aspects of Alzheimer's disease and caregiving. All materials are available to borrow and many materials are also available for purchase.
- D. Care Consultation:** Components of care consultation include: assessment of needs, assistance with planning and problem solving, the development of an action plan, and provision of support to assist consumers and their families in planning for and dealing with all aspects of the illness experience.
- E. Counseling:** Designed to help persons with dementia and their care partners reach decisions appropriate to their life circumstances. Counseling is provided by Masters prepared Social Workers with expertise in dementia-specific issues.
- F. Learning Institute™:** The Learning Institute™ educates professionals and non-professionals in person centered, culturally sensitive, dementia specific caregiving. Classes are taught by compassionate, experienced, credentialed dementia specialists, drawing from the latest validated research information to enrich the curriculum. The goal is to place applicable tools into the hands of care partners that allow them to work smarter, more efficiently, and with greater sensitivity and care. The Learning Institute™ offers a variety of ongoing educational programs for individuals with the disease, their families and care partners. All educational programs are evaluated against national benchmarks.

The faculty of the Learning Institute™ teaches in a variety of settings, including the fields of skilled nursing, assisted living, home care, and on behalf of the developmentally disabled. Over 364 classes of free community education are scheduled each year throughout the Finger Lakes region. Many classes target

III. Alzheimer's Association Description and Service Area (continued)

historically underserved populations, including the Spanish language, African-American, and the Blind or Visually Impaired communities. Online dementia education courses and "One Minute Caregiver Video Education" have received widespread acclaim and are maintained to assure the delivery of the latest information. The Learning Institute™ organizes and coordinates numerous annual and semi-annual educational events. Since its beginning in 2000, the Learning Institute™ has become the recognized leader in the community in dementia caregiver education.

A current listing of offerings, dates and locations, can be requested by calling the Alzheimer's Association.

- G. MedicAlert® + Alzheimer's Association Safe Return®:** MedicAlert + Safe Return® is a nationwide identification, support and enrollment program that provides assistance and access to vital medical information when someone with Alzheimer's disease or related dementia wanders or becomes lost locally or far from home. Assistance is available 24 hours a day, every day, whenever a person is lost or found.



- H. Alzheimer's Association Comfort ZoneM:** Alzheimer's Association Comfort Zone™, powered by Omnilink, provides location updates for people with dementia. Family members can monitor a person's location, while the individual with Alzheimer's maintains their independence and enjoys the emotional security of familiar routines and surroundings.
- I. Alzheimer's Association TrialMatchM:** A free and confidential interactive tool that provides comprehensive clinical trial information and an individualized trial matching service for people with Alzheimer's disease and related dementias. This powerful new tool is also available to care partners, physicians, researchers, and people interested in becoming "healthy volunteers." To learn more information, visit www.alz.org/TrialMatch or call (800) 272-3900.
- J. International Society to Advance Alzheimer Research and Treatment (ISTAART):** A society dedicated to connecting and supporting dementia science professionals. To become a member of this exclusive research group or to learn more information, visit www.alz.org/ISTAART or call (312) 335-5188.
- K. Support Options Designed for Both the Person with Dementia and their Care Partner**
- **24/7 Online Support Community:** The national Alzheimer's Association provides anonymous online chat rooms and message boards for people with Alzheimer's, care partners and professional caregivers. There is no sign up required or personal data captured. To take part in this online community, go to www.alz.org/messageboards.

III. Alzheimer's Association Description and Service Area (continued)

- **Alzheimer's Association Blog:** Provide insights from the frontlines of Alzheimer research, allows care partners and those with Alzheimer's to share their story, and keeps the Alzheimer community up-to-date on efforts to increase awareness and federal funding of research. Visit the blog at www.blog.alz.org.
- **Bed and Breakfast Hospitality Hour:** Encourages people with dementia in the early to middle stages and a family member or friend to learn about the history of the Inn; enjoy a light snack; and build relationships with others impacted by dementia in a relaxing environment.
- **CareLine:** A telephone support link between dedicated volunteers and people with dementia who need a good listener and who may not be able to get to a support group meeting or may need additional support.
- **Early Stage Support Group:** An eight-session program especially designed to meet the need for support and education for both the person in the early stage of Alzheimer's disease or related dementia and their care partners.
- **Email Connections:** A program designed to reduce the isolation and loneliness often experienced by care partners of loved ones with younger-onset *and* addresses the unique needs of individuals with dementia by linking them with other individuals nationwide via email.
- **GEVA:** People with dementia and their care partners are invited to attend select performances at GEVA Theatre in Rochester.
- **Hounds with Heart:** This program, offered through a partnership with Therapy Dogs International (TDI), provides residents in the community home visits by a certified therapy dog and their handler to spark memories and offer comfort and companionship. Also available at selected support groups and supportive activities for those with dementia and their care partners.
- **Just Friends Social Club:** Provides people in the early stages of dementia and a family member or friend an opportunity to socialize within a safe and nurturing environment with others. The Club offers a series of six sessions and provides a variety of activities and social events on and off site, social interaction, a catered dinner, transportation and companionship as needed.
- **Just For Coffee:** A program that creates an opportunity for individuals with dementia and their care partner to enhance relationships in a casual environment. The group meets twice monthly and coffee, tea, pastries, and snacks are available during the program for a small fee.
- **Meet Me at the MAG:** A program that allows people with dementia and their care partner an opportunity to engage in an interactive tour led by docents of the Memorial Art Gallery. The 1½ hour tour aims to rekindle fond memories of the past and promote self expression using art as a tool to enhance communication.
- **Rochester Philharmonic Orchestra:** Welcomes people with dementia and their care partner to attend select rehearsals of the RPO.

III. Alzheimer's Association Description and Service Area (continued)

- **Stepping Out:** In partnership with the Jewish Community Center, this program provides people in the early to mid stages of dementia and a family member or friend an opportunity to exercise with others in a safe and nurturing environment while under the supervision of personal trainers.
- **Susan B. Anthony House:** A program that offers individuals with dementia and a care partner a tour of the home of civil rights activist Susan B. Anthony. Docents use items in the house to facilitate discussion about the life of Susan B. Anthony.

L. Support Options Provided Specifically for the Care Partner

Provides opportunities for family members, friends, or care partners to meet regularly for mutual emotional support and to exchange coping skills with one another in matters relating to dementia. A variety of support options are available:

- **Caregiver Support Groups:** Held throughout the Chapter's nine-county area, these monthly meetings offer family members and friends a time to share thoughts, feelings and information with other care partners who are experiencing many of the same situations.
- **CareLine:** A telephone support link between dedicated volunteers and care partners who need a good listener and who may not be able to get to a support group meeting or may need additional support.
- **Specialty Groups:** Support for targeted audiences such as individuals who have a loved one with Younger Onset and those that have transitioned loved ones into a care facility.

M. Support Options for People with Dementia

Many opportunities exist for people with dementia to participate in support groups and supportive activities and become actively involved in their community, including:

- **Advocacy:** "Voices" is a group that meets quarterly to discuss issues pertinent to people with dementia and to bring awareness of these issues to the general public and to our political officials.
- **Early Stage Advisory Council:** A group to engage individuals in the early stages of dementia in raising awareness about early stage issues, help assist the Alzheimer's Association expand program opportunities, and provide feedback on programs and services that they have accessed. Council members serve a one year term and are asked to assist with events such as the Early Stage Conference, panel discussions, media opportunities, and program promotion.
- **Memories in the Making®:** Offers art as a means to enhance communication, increase self-esteem, and to provide sensory stimulation for participants with Alzheimer's disease or related dementia.
- **Support Groups for Persons with Dementia:** Traditional support groups offering an opportunity for persons with dementia to talk and share their experiences.

III. Alzheimer's Association Description and Service Area (continued)

- **Support through Active Reminiscence (STAR):** Provides those in the middle stage of dementia a welcoming environment where they are free to share both memories of the past and feelings about the present and future related to their diagnosis.

L. Respite Services

The Alzheimer's Association has three different types of respite care for families caring for a loved one with Alzheimer's disease or related dementia. Respite services are short-term and intended to provide the care partner with a break from their caregiving role, as well as offer an opportunity for the care partner to meet his/her own personal needs. Respite options include in-home respite with companions, home health aides, adult day programs, and skilled nursing facilities.

For in-home respite, Dementia Care Specialists (DCS), through partnering home health agencies, assist as companions and home health aides. All DCS are screened through a criminal background check, and are trained by the Alzheimer's Association to work specifically with people who have dementia. Respite options include:

- **Association Programs and Services:** In-home respite may be used while the care partner attends an Association-sponsored education program, receives counseling through the Association, or to attend up to three support group meetings.
- **Intellectual Disabilities:** Care Partners caring for a loved one with an intellectual disability are eligible for respite assistance if the loved one with an intellectual disability is over the age of forty and lives with the care partner in his/her own home. Respite is provided in the home. ***The person with an intellectual disability does not need to have dementia.***
- **Project: Caregivers Connect:** Families who are enrolled in Project: Caregivers Connect may be eligible to receive respite assistance through this program on a time-limited basis to relieve family members of their caregiving responsibilities. In-home respite, as well as respite at social-model adult day programs is available.

M. Project: Caregivers Connect

This program connects families caring for a loved one with Alzheimer's disease or related dementias to supportive services in their communities. Enrolled participants are eligible for:

- **In home assessments:** Each family receives a home visit by a Care Coordinator from the Alzheimer's Association. A written Plan of Services is provided outlining beneficial support services for the care partner and the care receiver that promote aging in place.
- **Counseling:** Counseling is provided either individually or in family sessions. Families enrolled in this program can receive up to four (4) sessions free.

III. Alzheimer's Association Description and Service Area (continued)

- **Care Consultation:** Care Coordinators are available to assist families in achieving the goals outlined in the Plan of Services by offering professional guidance and oversight to ensure families receive the support and services needed to care for their loved one at home.
- **Hands-On Education:** A DCS can come into the home to demonstrate care techniques to care partners in areas they find challenging.
- **Home Safety Assessments:** Identifies potential safety hazards in the home and promotes quality of life and wellbeing. Assessments are completed by an occupational therapist and written recommendations are given to the family. Each consulting occupational therapist has received special training from the Alzheimer's Association's Learning Institute™ on dementia.
- **Respite:** A Dementia Care Specialist (DCS) from a partnering agency who has been approved by the Alzheimer's Association may provide respite services to relieve families of their caregiving responsibilities. In-home respite, as well as respite at social-model adult day programs is available on a time-limited basis following a needs assessment.
- **MedicAlert® + Alzheimer's Association Safe Return®:** To help identify, locate, and return individuals who are memory impaired. The partnership with MedicAlert® ensures that medical information is available for emergency providers upon recovery. Provides family support and ongoing educational opportunities to emergency personnel as well as the lay community on wandering behavior and recovering a person with dementia.

N. Dementia Support Services Program (DSSP)

This program model promotes aging in place with great sensitivity for the health and safety of persons with intellectual disabilities (ID) and Alzheimer's disease and other dementias (ADD). Using an approach that blends support and management strategies to delay or avoid nursing home placement, the program aims to increase collaboration and cross-agency responses to the home and community-based needs of persons with ID and ADD and their care partners. The program includes:

- **Care Consultation:** Care Coordinators provide an assessment of dementia specific needs every six (6) months with the interdisciplinary team and develop and implement an action plan. Oversight on the plan to ensure dementia-specific needs are addressed is ensured through monthly face-to-face contact with enrollees.
- **Monthly Face-to-Face Visits:** Care Coordinators meet with each individual to monitor for changes and ensure that the dementia specific needs of the individual are being met.
- **Education and Discussion for ID Providers and Family Caregivers:** Individually-driven, on-site guided education and discussion on dementia-related issues and advanced education is available through the Learning Institute™.

III. Alzheimer's Association Description and Service Area (continued)

- **Hands on Education:** Instruction on meeting personal care needs, providing meaningful activities, ensuring proper nutrition, etc. Training is designed specifically for the person with dementia and is offered one-on-one in the home or day program.
- **Peer Discussion Groups:** Informal meetings with other individuals of the residential or day program site to develop a greater sensitivity to the changes observed in their peer.
- **Life Enrichment:** Environmental assessments at residential and day sites are completed to explore memory and sensory adaptations that promote independence and enhance functional abilities. Adaptive furnishings and safety devices are also suggested as appropriate for each individual in the program.

O. Site Specific Care and Support Model

This program model is designed to create an environment that is sensitive to the health and safety needs of persons with intellectual disabilities (ID) and Alzheimer's disease and other dementias (ADD). It will use an approach that blends the existing Dementia Support Services Program (DSSP) where the focus is on the individual consumer, coupled with the *enhanced* services for the identified site. This model will explore the needs of each person served within that setting to foster growth in a caring and supportive environment. The model aims to create a dementia-friendly environment that can support the needs of all served through consultation, education and support at a designated site serving older adults.

Initiating Enhanced Services

Enhanced services will be delivered based on a needs assessment completed by the Alzheimer's Association in consultation with staff of the identified site. Services will be delivered on site over a six-month period to promote a dementia-friendly environment. During the six-month enrollment the Alzheimer's Association will assist staff in identifying individuals who exhibit signs and symptoms of dementia and initiate individually-driven services via the DSSP. Following the six months, services will be provided based on the needs of each individual enrolled in the DSSP.

Provision of Services by the Alzheimer's Association

Consultation:

- Evaluation of each individual meeting *any* of the following criteria
 - Over 40 years of age with Down Syndrome
 - Over 40 with former head trauma
 - Over 65 years of age with any intellectual disability
 - Any individual onsite exhibiting signs and symptoms of dementia
- One on one or consultation with the team of the site to address site-specific challenges brought on by aging or dementia

Education:

- Broad based education on aging and dementia to serve the needs identified by the site

III. Alzheimer's Association Description and Service Area (continued)

- Online education that can be accessed anytime day or night

Support:

- One on one counseling provided by Masters prepared Social Workers specializing in dementia to address grief and bereavement issues.
 - Up to 4 individual sessions can be offered to staff
 - Up to 4 individual sessions can be offered to each individual
- Bereavement groups are also available on site after the loss of the individual for both staff and individual

Chapter 2: Financial and Legal Issues

Goals for this chapter:

1. To learn basic information about financial planning and elder law.
2. To receive information about safety and security.
3. To receive information about legal/financial directives and advance care planning.
4. To learn a summary of key provisions for the Family Health Care Decisions Act of 2010

I. Financial Planning	12
A. What to Look for in a Financial Planner	12
B. Gather Financial and Legal Documents	13
C. Explore Financial Resources to Cover Costs	13
D. Reviewing Benefits	14
E. Important Steps to Consider in Planning for Financial Goals	14
F. Goals People Often Want to Achieve	14
G. Other Points to Consider	14
H. Basic Financial Questions that Care Partners Need to Ask	15
II. Safety and Security	16
A. Personal Safety	16
B. Frauds and Scams	17
C. Access to Credit Reports	18
III. Federal and New York State Tax Breaks	18
A. Long-Term Care Insurance Deduction	18
B. New York State School Tax Relief (STAR)	18
C. Federal Gift Tax Exemption	19
IV. Bill Paying Services	19
V. Elder Law	19
A. What to Look for in an Elder Law Attorney	19
B. Resources for Elder Law Attorneys and Law Firms	20
VI. Legal and Financial Directives	21
VII. Family Health Care Decisions Act (2010)	33

I. Financial Planning

Consider selecting appropriate professional advisors. Their fees are a wise investment that can save you major worry or financial penalties by anticipating problems and providing adequate information for planning and making decisions.

A. What to Look for in a Financial Plannerⁱ

1. Education

- What are your educational qualifications?
- What financial planning designation(s) or certification(s) do you hold?
- What financial planning continuing education requirements do you fulfill?
_____ hours every _____ year

2. Experience

- Do you have experience in providing advice on the following topics? If yes, indicate the number of years.
 - Retirement Planning
 - Investment Planning
 - Tax Planning
 - Estate Planning
 - Insurance Planning
 - Comprehensive Planning
 - Other
- What are your areas of specialization?
- What qualifies you in this field?
- How long have you been offering financial planning advice to clients?
- How many clients do you currently have?
- Briefly describe your work history.

3. Fees & Compensation

- How are you paid for your services (e.g. fee, commission, fee & commission, salary, other)?
- What do you typically charge?
 1. Fee:
 - Hourly rate \$ _____
 - Flat fee (range) \$ _____ to \$ _____
 - Percentage of assets under management: _____ percent
 2. Commission:
 - What is the approximate percentage of the investment or premium you receive on: stocks and bonds _____; mutual funds _____; annuities _____; insurance products _____; other _____
- Do you provide a written client engagement agreement?

4. General

- How might you address my particular needs?
- How often will my plan be updated?
- Are you affiliated with any professional associations?

I. Financial Planning (continued)

5. Services & Work Philosophy

- What services do you offer?
- Describe your approach to financial planning.
- Who will work with me (e.g. planner, associates)?
- Will the same individual(s) review my financial situation?
- What type of clients do you serve?
- Do you have a minimum net worth or income requirement?
- What kind of services can I expect?

B. Gather financial and legal documentsⁱⁱ

Your first step is to carefully go over all financial and legal documents including:

- Wills
- Medical and durable powers of attorney
- Bank and brokerage accounts
- Deeds, mortgage papers or ownership statements
- Pension and other retirements benefit summaries
- Social Security payment information
- Stock and bond certificates
- Monthly or outstanding bills
- Insurance policies

Studying these documents will help you get a handle on existing expenses, assets and income, and help you identify any necessary documents that are not in place.

C. Explore financial resources to cover costs

A number of assets and non-traditional financial resources are available to help cover the costs of long-term care. These include:

- Insurance, including government insurance programs such as Medicare and Medigap; disability insurance from an employer-paid plan or personal policy; group employee plan or retiree medical coverage; life insurance and long-term care insurance. It is usually impossible to purchase insurance after symptoms of Alzheimer's appear.
- Retirement benefits, including individual retirement accounts (IRAs), employee-funded retirement plans, such as a 401(k), 403(b) and Keough.
- Personal savings and assets, including stocks, bonds, savings accounts, real estate and personal property, such as jewelry or artwork.
- Government help, including Social Security Disability Income (SSDI) for workers under age 65; Supplemental Security Income (SSI); Medicaid; veterans benefits; and tax deductions and credits, such as the Household and Dependent Care Credit.
- Community support, including low-or no-cost support services, respite care, support groups, transportation and meal delivery.

I. Financial Planning (continued)

D. Reviewing Benefits

Have your advisor review benefits from health and all other insurances, especially if Medicare, Medicaid, or Veterans Administration rules do not seem to allow the skilled care or custodial care your loved one requires. To update your information:

- Contact both insurance and employee benefits offices, including the Veterans Administration.
- Explore web sites where seniors can enter information to find out if they may be eligible for state and federal programs:

www.benefitscheckup.org

Note: A service of the National Council of Aging

www.govbenefits.gov

Note: A partnership of Federal agencies with a shared vision to provide improved, personalized access to government assistance programs

www.healthcare.gov

Note: The first website to provide consumers with both public and private health coverage options tailored specifically for their needs in a single, easy-to-use tool

E. Important Steps to Consider in Planning for Financial Goals

- Calculate where you are now: your assets, liabilities, insurance coverage.
- Put your goals into words: where you want to go, what you wish to achieve.
- Consider what problems or obstacles might stop you from getting there.
- Develop a written plan with specific goals. Keep in mind that risk is unavoidable.
- Implement the plan.
- Regularly review and revise the plan.

F. Some of the goals that people often want to achieveⁱⁱⁱ

- I want to avoid depending on others for my care.
- I do not want to be a burden to my children or my spouse.
- I want to preserve my independence and avoid welfare.
- I want to guarantee my access to quality care.
- I want to protect my assets and have an estate for my heirs.
- I do not want to leave a legacy of debt.
- I do not want to spend through everything it took a lifetime to create.

G. Other Points to Consider

Review and update the following items with professional counsel.

- Life insurance: Who owns it? Who is the designated beneficiary?
- Plan for transfer of any business that you own.
- Estate tax and income tax after your death.
- Advisability of a **Reverse Mortgage** or **Home Equity Loan**

I. Financial Planning (continued)

1. **Reverse Mortgage^{iv}**: Enables you as the homeowner to convert part of the equity in your home into tax free cash. It does not have monthly payments, or need to be repaid as long as you live there, no matter how long that may be. There are no restrictions on how you may use your proceeds.

Useful when: (1) you plan to stay in your home for the foreseeable future; (2) you need funds for daily living; (3) would like to pay off existing debts; or (4) you need funds for a wide variety of home services.

Eligibility: Age 62+ and own your own home.

Options: Lump sum, line of credit, fixed monthly payouts, or any combination of these.

Repayment: Only required when you move permanently from your home. The loan will be automatically repaid when you or your heirs sell the home. Remaining equity is yours. Repayment restricted to the home value only.

Counseling: You will speak with a HUD or AARP counselor (free) to help you understand your options.

Resources for Reverse Mortgages

Local

HomeChex

132 Allens Creek Rd., Rochester 14618
(585) 461-6290
www.homechex.com

The Housing Council

75 College Ave., Rochester 14607
(585) 546-3700
www.thehousingcouncil.org

National

AARP "Home Made Money" Booklet

www.aarp.org/revmort

AARP Reverse Mortgage Education Program

601 E. Street Northwest, Room B4210
Attn: Ms. Bridget Small
Washington, DC 20049
(800) 209-8085
www.hud.gov
Note: Type in "reverse mortgage" in search box.

National Reverse Mortgage Lender's Association

(866) 264-4466 Consumer Line
Note: Answering machine only. Leave message for materials to be mailed from Washington, DC. Takes 5 weeks to receive materials.

www.reversemortgage.org

Note: Assists in estimating loan proceeds as well as finding a lender.

I. Financial Planning (continued)

- 2. Home Equity Loan^v:** A mortgage loan or “lien” of borrowed funds secured by the value or equity of your home. You must “qualify” for the loan and then make regular monthly payments for a specified term. If you default, you must repay the remaining amount you have borrowed upon demand by the bank. The bank may look to other assets if you cannot repay completely. This type of loan may be appropriate for smaller amounts or shorter time periods.

H. Basic Financial Questions that Care Partners Need to Ask^{vi}

- What is your income, and where does it come from?
- Are your Social Security checks deposited directly to your bank account?
- How do you collect dividends or interest from investments?
- Do you have any life insurance policies? When did you last review them?
- Who are your financial advisors: accountant, broker, banker, lawyer?
- With which financial institutions do you do business?
- Do you still receive benefits from a previous employer, and what is the name of the person there who helps you when you call?
- Where do you keep legal documents (stocks, pre-nuptial agreement, will, power of attorney, health proxy, deed to the house)? At home, or in a safe deposit box?
- When did you last review them?
- What regular expenses do you have (i.e. home equity loan, utilities, telephone)?
- Does anyone owe you money?
- Have you done a business continuation plan and reviewed your estate plan recently? (If the person owns a business or has a large estate)
- Since many of us are living longer, how can I help you save more now for the future?
 - Proper budgeting
 - Minimize taxation of returns on investments
 - Re-title assets
 - Prudent repositioning of investments
- Is it time for me to have power of attorney so that I might help you handle these affairs?

Note: Financial consultants can be found in the yellow pages under Financial Planning Consultants

II. Safety and Security

A. Personal Safety

- Avoid using ATMs after dark or in secluded places. Use one located inside a store where you are not alone.
- If your wallet or purse is stolen:
 - First call the police.
 - Call your bank.
 - Report it to all your credit card companies.
 - Notify the Department of Motor Vehicles.

II. Safety and Security (Personal Safety, continued)

- Prevent identity theft:
 - Check financial statements promptly. Get your free annual credit report.
 - Guard your mail and personal information; shred before discarding.
 - Keep credit cards out of others' viewing range when in use.

Resource for Preventing Identity Theft

NYS Consumer Protection Board

5 Empire State Plaza, Suite Z101, Albany, NY 12223-1556

(800) 697-1220

www.nysconsumer.gov

Note: Provides tips for preventing identity theft

B. Frauds and Scams

- If someone calls you and requests personal information over the phone, the rule is **SAY NO and HANG UP. Never** give out:
 - Credit card information
 - Social Security number
 - Bank account numbers
 - Driver's license number
- **Be skeptical of unsolicited calls** or door-to-door sales. It is wise to say, "I'm not interested, thank you," and then hang up. You are under no obligation to listen to any sales pitches. Take time to consider and investigate before signing. You are entitled to cancel any transaction within 3 business days. Unsolicited contacts may include:
 - "Special deals" on home improvements
 - "You Have Won" notifications (calls/mail)
 - Changes in the Medicare program (such callers have no authorization from the government)
- Never dial or respond to any message from area code 809, located in the Dominican Republic. It is a "pay-per-call" number (similar to 900 numbers in the US), but not covered by U.S. regulations, which require that you be notified and warned of charges and rates involved. If you call from the US, you will apparently be charged \$2,425.00 per minute.

Resources for Frauds and Scams

Better Business Bureau/ Fair Business Council

(800) 828-5000
www.upstateny.bbb.org

Lifespan: Scam Prevention/ Consumer Fraud

1900 Clinton Ave. S., Rochester 14618
(585) 244-8400 x193
Attn: Maureen Murphy
www.lifespan-roch.org

Local police or postal inspector

National Do Not Call Registry

(888) 382-1222
www.donotcall.gov

New York State Attorney General

(800) 771-7755
www.ag.ny.gov

Rochester Office

144 Exchange Blvd., Suite 200
Rochester 14614
(585) 546-7430

Note: The NY Attorney General's office has a scams database to document patterns of crime in different places.

II. Safety and Security (continued)

C. Access to Credit Reports^{vii}

Federal law requires the three major consumer reporting agencies to provide consumers one free credit report every 12 months. You may order your free consumer credit report from:

Annual Credit Report Request Service

PO Box 105281
Atlanta, GA 30348-5281

Experian Security Freeze

PO Box 9554
Allen, TX 75013

Equifax Security Freeze

PO Box 105788
Atlanta, GA 30348

TransUnion Fraud Assistance Dept.

PO Box 6790
Fullerton, CA 92834

III. Federal and New York State Tax Breaks

A. Long-Term Care Insurance Deduction

A portion of the long-term care insurance premium is deductible.

1) Federal Tax^{viii}

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) recognizes long-term care insurance as medical expense insurance, giving it the same tax treatment as standard health insurance policies. The law also allows chronically ill individuals to cash in their life insurance policies on a tax-free basis to pay for long-term care. For people who itemize tax deductions, medical expenses are deductible if they exceed 7.5% of adjusted gross income (AGI). Medical expenses can include long-term care insurance premiums.

2) New York State Tax^{ix}

There is a state tax credit of 10% on qualified long-term care insurance premiums.

B. New York State School Tax Relief (STAR)^x

This is an exemption from school taxes for owner-occupied primary residences.

1. **Basic STAR exemption:** Available for owner-occupied, primary residences regardless of the owners' ages or incomes. Basic STAR works by exempting the first \$30,000 of the full value of a home from school taxes.
2. **Enhanced STAR exemption:** Seniors may qualify for a greater exemption, depending on income limits set by their county or town. For qualifying senior citizens, the Enhanced STAR program works by exempting the first \$60,100 of the full value of their home from school property taxes. For property owned by a husband and wife, or by siblings, only one of them must be at least 65 years of age as of December 31 of the year in which the exemption will begin to qualify for the Enhanced exemption. Their combined annual income, however, must not exceed the STAR income standard.

Please Note: The Rebate Program has been eliminated.

III. Federal and New York State Tax Breaks (STAR, continued)

For information on the STAR property tax exemption, please contact your local property assessor, or call toll-free (888) 697-8275.

C. Federal Gift Tax Exemption^{xi}

The \$13,000 (on or after January 1, 2009) amount allowed as a gift per person per year is a **tax** exemption. It is not a **Medicaid** exemption.

IV. Bill Paying Services

Catholic Family Center

(585) 232-1840

www.cfcrochester.org

Note: Provides financial management, case management, and guardianship services to county Adult Protective, Intensive Case Management (ICM), Veteran's Administration and private pay clients. Also provides short-term assistance, advice, and consultation to adults facing disability and their care partners. Services are available by contract to Monroe County Adult Protective clients age 18 or over in need of case management, Representative Payee, or guardianship services, and to Mental Health clients served by a local mental health center and identified as needing Representative Payee. Services are provided on a private fee basis.

Lifespan

(585) 244-8400

www.lifespan-roch.org

Note: Provides assistance with in-home budgeting and bill paying tasks (donation based). Provides full financial management with power of attorney (hourly fee of \$65).

V. Elder Law

Elder Law attorneys focus on the legal needs of the elderly, and work with a variety of legal tools and techniques to meet the goals and objectives of the older client. Under this holistic approach, the Elder Law practitioner handles general estate planning issues and counsels clients about planning for incapacity with alternative decision making documents. The attorney would also assist the client in planning for possible long-term care needs, including nursing home care. Locating the appropriate type of care, coordinating private and public resources to finance the cost of care, and working to ensure the client's right to quality care are all part of the Elder Law practice.^{xii}

A. What to Look for in an Elder Law Attorney

1. How long has the attorney been in practice?
2. Does his/her practice emphasize a particular area of law?
3. How long has he/she been in this field?

V. Elder Law (continued)

4. What percentage of his/her practice is devoted to elder law?
5. Is there a fee for the first consultation and if so, how much is it?
6. Given the nature of your problem, what information should you bring with you to the initial consultation?

B. Resources for Elder Law Attorneys and Law Firms

Local contacts

Eldersource

1900 S. Clinton Ave., Rochester 14618
(585) 325-2800

Note: Referral source for Elder Law Attorneys

Jewish Family Service of Rochester, Inc.

Department of Aging Services
441 East Avenue, Rochester 14607
(585) 461-0110
www.jfsrochester.org

Monroe County Bar Association

1 Exchange Street, 5th Floor
Rochester 14614
(585) 546-2130
www.mcba.org

Monroe County Office for the Aging

435 E. Henrietta Road, Rochester 14620
(585) 274-6280
www.monroecounty.gov

Note: Referral source for Elder Law Attorneys

The Piede Law Firm

100 E. Squire Dr, #3, Rochester 14623
(585) 678-1713
www.piedelaw.com

Note: Bi-lingual elder law attorneys are available

Online Resources

www.LawHelp.org

Note: Provides referrals to free legal services programs, information about legal rights, links to social services & government agencies and information about the court system

Four legal service providers share quarters at one location, creating a center for legal services for people with low incomes:

The providers include:

Empire Justice Center

1 West Main Street, Suite 200
Rochester 14614
(585) 454-4060
www.empirejusticecenter.org

Legal Aid Society

1 West Main Street, Suite 800
Rochester 14614
(585) 232-4090
www.legalaidsocietyofrochester.org

Monroe County

Legal Assistance Corp.

1 West Main Street, Suite 400
Rochester 14614
(585) 325-2520
www.nylc.org

Volunteer Legal Services Project

1 West Main Street, Suite 500
Rochester 14614
(585) 232-3051
www.vlsprochester.org

National Academy of Elder Law Attorneys, Inc.

(520) 881-4005
www.naela.org

Note: A professional association of attorneys; site includes a local elder law attorney search

VI. Legal and Financial Directives

It is wise to obtain professional advice in arranging for a Last Will and Power of Attorney. These documents each require a signed, properly witnessed form, and must be signed while you are still competent; they will continue to be effective if you subsequently become incompetent. Proper advance planning can avoid the time and expense of going to court for guardianship proceedings if you become impaired.

New York State law requires that a Power of Attorney and a Health Care Proxy be completed on separate forms. A combined form is not valid. Also, a person appointed as an agent cannot be a witness to the document appointing him or her. Any legal form validly completed in one state is valid in another state.

1) Last Will and Testament

Effective after your death, a will enables you to appoint an executor of your choice and direct bequests according to your wishes, rather than leaving these matters to the laws of the state (below is an example of what happens to someone who has no will). Through a will, you can also direct bequests to charity, take advantage of tax laws, and appoint guardians for minor children.

2) Importance of Last Will and Testament *(Materials by David Ferris, Attorney at Law)* (for John or Joan Q. Procrastinator who died without a valid will and instead had this will drawn up by the state)

Under the laws of the State of Inertia, I, John/Joan Q. Procrastinator, of Anytown, USA, do hereby make, publish, and declare this to be my Last Will and Testament.

FIRST ARTICLE

If I am not married at the time of my death, I direct the State to divide my estate among my next of kin, without regard to the kind of relationship I may have had with these persons. If no such persons are found, then the State may take my estate according to its particular law.

If I am married at the time of my death, I give my spouse only the first \$50,000 and one-half (1/2) of the remainder of my possessions, and I give our children the remaining one-half (1/2).

1. I appoint my spouse as guardian of our children, but as a safeguard I require that he/she report to the Probate Court each year, and render an account of how, why, and where the money necessary for the proper care of our children was spent.
2. As a further safeguard, I direct my spouse to produce to the Probate Court a Performance Bond to guarantee that proper judgment is exercised in the handling, investing, and spending of our children's money.
3. As a final safeguard, our children shall have the right to demand and receive a complete accounting from my spouse of all financial transactions with their money as soon as they reach legal age.

VI. Legal and Financial Directives (continued)

4. When our children reach age eighteen (18) years, they shall have full right to withdraw and spend their share of my estate. No one shall have any right to question their actions on how they decide to spend their respective shares.

SECOND ARTICLE

Should my spouse remarry, this second spouse shall be entitled to one-third (1/3) of everything my spouse possesses.

1. Should our children need some of this share for their support, the second spouse shall not be bound to spend any part of this share on our children's behalf.
2. The second spouse shall have sole right to decide who is to inherit this share, even to the exclusion of our children.

THIRD ARTICLE

Should my spouse predecease me or die while any of our children are minors, I do not wish to exercise my right to nominate the guardian of our children.

1. Rather than nominating a guardian of my preference, I direct my relatives and friends to get together and select a guardian by mutual agreement.
2. In the event that they fail to agree on a guardian, I direct the Probate Court to make the selection. If the Court wishes, it may appoint a stranger acceptable to it.

FOURTH ARTICLE

I do not want to give anything to my faith community or to my favorite charity.

FIFTH ARTICLE

Under existing tax laws, there are certain legitimate avenues open to me to lower death taxes. However, I direct that no effort be made to lower taxes, thus reducing the benefit to my spouse and children.

SIXTH ARTICLE

I do not wish to exercise my right to nominate an Administrator (Executor) of my estate; I direct the Probate Court to make the selection. In order to help the economy, the Executor of my estate shall use some of my estate to pay for a surety company bond, to insure that he/she properly performs the tasks of Executor.

This, my Last Will and Testament, requires no action on my part, no date, and no witnesses.

VI. Legal and Financial Directives (continued)

3) Power of Attorney* (*Materials provided by Dutcher and Zatkowsky*)

This permits you (the principal) to appoint one or more persons as your agent to act on your behalf in handling most legal or financial transactions, except health care decisions.

Effective September 1, 2009, a new power of attorney law in New York State made major changes to the way we establish the principal-agent relationship and made clearer the obligations of the agent and effect of the authority of the agent.

As a result of the new and complex law, it is not advisable to sign a power of attorney unless it was drafted by a qualified attorney familiar with the new law and after you have discussed your wishes and preferences with your counsel. You want to be sure that the powers you grant meet your needs and are not “boilerplate.”

A General Power of Attorney only becomes effective after the agent signs the document acknowledging his or her acceptance of responsibility to act as the agent for the principal. The new law makes clear that the agent is to act in the principal's best interests. It further provides that the agent must maintain accurate records of all transactions on behalf of the principal.

All powers of attorney signed after September 1, 2009 are deemed “durable” unless otherwise stated. Durable means that the appointment survives any future disability, allowing your designated agent to act on your behalf even if you later become incapacitated.

The new law still allows for a “springing” Power of Attorney, which delays the agent's legal authority to a future date upon the happening of an event specified by the principal (e.g. a doctor's certification of incapacity).

Under the new law, gifts over \$500 in the aggregate cannot be made by the agent on behalf of the principal unless the principal simultaneously (during the signing of the Power of Attorney) also signs a Statutory Major Gifts Rider, which must be signed in front of a notary public AND two witnesses.

As with the power of attorney document itself, the Statutory Major Gifts Rider is complex and you should consult a qualified attorney before drafting or signing the document.

The authority granted through a Power of Attorney may be general, or may be limited to a specific transaction such as banking. If it is to be used for any real estate transaction, it must be recorded with the clerk of the county in which the real estate is located. There is no time limit for such recording; old Powers of Attorney may be recorded any time.

Under the new law, however, unless the principal signed a Statutory Major Gifts Rider, the agent will not have the authority to transfer real property on behalf of the principal.

VI. Legal and Financial Directives (continued)

It is wise to use a NYS standard statutory form, and to execute an updated Power of Attorney about every 5 years, or when the person's situation changes.

Deviation from the form specified in the statute may result in complications and obstacles when the agent attempts to act on behalf of the principal.

4) SAMPLE Durable General Power of Attorney:

CAUTION: Do not use this sample without consulting a qualified attorney. The complexity of the form and the consequences for incorrectly executing the document can have severe consequences to the principal.

Power of Attorney New York Statutory Short Form

(a) CAUTION TO THE PRINCIPAL: Your Power of Attorney is an important document. As the "principal," you give the person whom you choose (your "agent") authority to spend your money and sell or dispose of your property during your lifetime without telling you. You do not lose your authority to act even though you have given your agent similar authority.

When your agent exercises this authority, he or she must act according to any instructions you have provided or, where there are no specific instructions, in your best interest. "Important Information for the Agent" at the end of this document describes your agent's responsibilities.

Your agent can act on your behalf only after signing the Power of Attorney before a notary public.

You can request information from your agent at any time. If you are revoking a prior Power of Attorney, you should provide written notice of the revocation to your prior agent(s) and to any third parties who may have acted upon it, including financial institutions where your accounts are located.

You can revoke or terminate your Power of Attorney at any time for any reason as long as you are of sound mind. If you are no longer of sound mind, a court can remove an agent for acting improperly.

Your agent cannot make health care decisions for you. You may execute a "Health Care Proxy" to do this.

The law governing Powers of Attorney is contained in the New York General Obligations Law, Article 5, Title 15. This law is available at a law library or online through the New York State Senate or Assembly websites, www.senate.state.ny.us or www.assembly.state.ny.us.

If there is anything about this document that you do not understand, you should ask a lawyer of your own choosing to explain it to you.

VI. Legal and Financial Directives (continued)

(b) DESIGNATION OF AGENT(S):

I, _____, residing at _____,

do hereby appoint:

_____, residing at _____.

and/or

_____, residing at _____.

as my agent(s).

IF YOU DESIGNATE MORE THAN ONE AGENT ABOVE, THEY MUST ACT TOGETHER UNLESS YOU INITIAL THE STATEMENT BELOW.

_____ My Agents may act SEPARATELY.

(c) DESIGNATION OF SUCCESSOR AGENT(S): (OPTIONAL)

If every agent designated above is unable or unwilling to serve, I appoint as my successor agent(s):

_____, residing at _____.

as my agent.

SUCCESSOR AGENTS DESIGNATED ABOVE MUST ACT TOGETHER UNLESS YOU INITIAL THE STATEMENT BELOW.

_____ My successor agents may act SEPARATELY.

You may provide for specific succession rules in this section. Insert specific succession provisions here: _____

(d) This POWER OF ATTORNEY shall not be affected by my subsequent incapacity unless I have stated otherwise below, under "Modifications."

(e) This POWER OF ATTORNEY DOES NOT REVOKE any Powers of Attorney previously executed by me unless I have stated otherwise below, under "Modifications."

If you do NOT revoke your prior Powers of Attorney, and if you have granted the same authority in this Power of Attorney as you granted to another agent in a prior Power of Attorney, each agent can act separately unless you indicate under "Modifications" that the agents with the same authority are to act together.

(f) GRANT OF AUTHORITY: To grant your agent some or all of the authority below, either:

- (1) Initial the bracket at each authority you grant, or
- (2) Write or type the letters for each authority you grant on the blank line at (P), and initial the bracket at (P). If you initial (P), you do not need to initial the other lines.

VI. Legal and Financial Directives (continued)

I grant authority to my agent(s) with respect to the following subjects as defined in sections 5-1502A through 5-1502N of the New York General Obligations Law:

- (A) Real estate transactions;
- (B) Chattel and goods transactions;
- (C) Bond, share and commodity transactions;
- (D) Banking transactions;
- (E) Business operating transactions;
- (F) Insurance transactions;
- (G) Estate transactions;
- (H) Claims and litigation;
- (I) Personal and family maintenance; If you grant your agent this authority, it will allow the agent to make gifts that you customarily have made to individuals, including the agent, and charitable organizations. The total amount of all such gifts in any one calendar year cannot exceed five hundred dollars;
- (J) Benefits from governmental programs or civil or military service;
- (K) Health care billing and payment matters; records, reports and statements;
- (L) Retirement benefit transactions;
- (M) Tax matters;
- (N) All other matters;
- (O) Full and unqualified authority to my agents to delegate any or all of the foregoing powers to any person or person whom my agent(s) select;
- (P) EACH of the matters identified by the following letters _____

You need not initial the other lines if you initial line (P).

(g) MODIFICATIONS: (OPTIONAL)

In this section, you may make additional provisions, including language to limit or supplement authority granted to your agent.

However, you cannot use this Modifications section to grant your agent authority to make gifts or changes to interests in your property. If you wish to grant your agent such authority, you **MUST** complete the Statutory Gifts Rider.

I SPECIFICALLY REVOKE ALL PREVIOUS POWERS OF ATTORNEY GRANTED BY ME

VI. Legal and Financial Directives (continued)

I SPECIFICALLY DO NOT REVOKE ALL PREVIOUS POWERS OF ATTORNEY GRANTED BY ME. ALL AGENTS, TO THE EXTENT THEY ARE DIFFERENT THAN THOSE NAMED HEREIN ON ANY PRIOR POWER OF ATTORNEY, MAY ACT SEPARATELY.

The following limitations on my agent's authority shall apply:

The following supplemental authority is granted to my agent:

Reasonable compensation, for purposes of section (j) below, shall mean the sum of \$_____per hour.

(h) CERTAIN GIFT TRANSACTIONS: STATUTORY GIFTS RIDER (OPTIONAL)

In order to authorize your agent to make gifts in excess of an annual total of \$500 for all gifts described in (l) of the grant of authority section of this document (under personal and family maintenance), you must initial the statement below and execute a Statutory Gifts Rider at the same time as this instrument. Initialing the statement below by itself does not authorize your agent to make gifts. The preparation of the Statutory Gifts Rider should be supervised by a lawyer.

(SGR) I grant my agent authority to make gifts in accordance with the terms and conditions of the Statutory Gifts Rider that supplements this Statutory Power of Attorney.

(i) DESIGNATION OF MONITOR(S): (OPTIONAL)

If you wish to appoint monitor(s), initial and fill in the section below:

I wish to designate _____, whose address(es) is (are) _____, as monitor(s).

Upon the request of the monitor(s), my agent(s) must provide the monitor(s) with a copy of the power of attorney and a record of all transactions done or made on my behalf. Third parties holding records of such transactions shall provide the records to the monitor(s) upon request.

I do not request Monitors.

(j) COMPENSATION OF AGENT(S): (OPTIONAL)

Your agent is entitled to be reimbursed from your assets for reasonable expenses incurred on your behalf. If you ALSO wish your agent(s) to be compensated from your assets for services rendered on your behalf, initial statement below. If you wish to define "reasonable compensation," you may do so above, under "Modifications."

VI. Legal and Financial Directives (continued)

[] My agent(s) shall be entitled to reasonable compensation for services rendered.

(k) ACCEPTANCE BY THIRD PARTIES: I agree to indemnify the third party for any claims that may arise against the third party because of reliance on this Power of Attorney. I understand that any termination of this Power of Attorney, whether the result of my revocation of the Power of Attorney or otherwise, is not effective as to a third party until the third party has actual notice or knowledge of the termination.

(l) TERMINATION: This Power of Attorney continues until I revoke it or it is terminated by my death or other event described in Section 5-1511 of the General Obligations Law.

Section 5-1511 of the General Obligations Law describes the manner in which you may revoke your Power of Attorney, and the events which terminate the Power of Attorney.

(m) SIGNATURE AND ACKNOWLEDGMENT:

In Witness Whereof, I have hereunto signed my name _____, 2011.

(PRINCIPAL SIGNS HERE) ==> _____

STATE OF NEW YORK)
COUNTY OF MONROE) ss:

On the _____ day of _____, 2011, before me, the undersigned, a Notary Public in and for said State, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that (s)he executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of whom the individual acted, executed the instrument.

Notary Public

(n) IMPORTANT INFORMATION FOR THE AGENT: When you accept the authority granted under this Power of Attorney, a special legal relationship is created between you and the principal. This relationship imposes on you legal responsibilities that continue until you resign or the Power of Attorney is terminated or revoked. You must:

- (1) Act according to any instructions from the principal, or, where there are no instructions, in the principal's best interest;
- (2) Avoid conflicts that would impair your ability to act in the principal's best interest;
- (3) Keep the principal's property separate and distinct from any assets you own or control, unless otherwise permitted by law;
- (4) Keep a record of all receipts, payments, and transactions conducted for the principal; and

VI. Legal and Financial Directives (continued)

- (5) Disclose your identity as an agent whenever you act for the principal by writing or printing the principal’s name and signing your own name as “agent” in either of the following manner: (principal’s name) by (your signature) as Agent, or (your signature) as Agent for (principal’s name).

You may not use the principal’s assets to benefit yourself or anyone else unless the principal has specifically granted you that authority in this document, which is either a Statutory Gifts Rider attached to a Statutory Short Form Power of Attorney or a Non-Statutory Power of Attorney. If you have that authority, you must act according to any instructions of the principal or, where there are no such instructions, in the principal’s best interest. You may resign by giving written notice to the principal and to any co-agent, successor agent, monitor if one has been named in this document or the principal’s guardian if one has been appointed.

If there is anything about this document or your responsibilities that you do not understand, you should seek legal advice.

LIABILITY OF AGENT: The meaning of the authority given to you is defined in New York’s General Obligations Law, Article 5, Title 15. If it is found that you have violated the law or acted outside the authority granted to you in the Power of Attorney, you may be liable under the law for your violation.

(o) AGENT’S SIGNATURE AND ACKNOWLEDGEMENT OF APPOINTMENT:

It is not required that the principal and the agent(s) sign at the same time, nor that multiple agents sign at the same time.

I/we _____, have read the foregoing Power of Attorney. I am/we are the person(s) identified therein as agent(s) for the principal named therein.

I/we acknowledge my/our legal responsibilities.

(AGENT SIGNS HERE) ==> _____

STATE OF NEW YORK)
COUNTY OF MONROE) ss:

On the ____ day of _____, 2011, before me, the undersigned, a Notary Public in and for said State, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that (s)he executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of whom the individual acted, executed the instrument.

Notary Public

VI. Legal and Financial Directives (continued)

(p) SUCCESSOR AGENT'S SIGNATURE AND ACKNOWLEDGMENT OF APPOINTMENT:

It is not required that the principal and the SUCCESSOR agent(s), if any, sign at the same time, nor that multiple SUCCESSOR agents sign at the same time. Furthermore, successor agents cannot use this power of attorney unless the agent(s) designated above is/are unable or unwilling to serve.

I/we _____, have read the foregoing Power of Attorney. I am/we are the person(s) identified therein as agent(s) for the principal named therein.

I/we acknowledge my/our legal responsibilities.

(AGENT SIGNS HERE) ==> _____

STATE OF NEW YORK)
COUNTY OF MONROE) ss:

On the ____ day of _____, 2011, before me, the undersigned, a Notary Public in and for said State, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that (s)he executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of whom the individual acted, executed the instrument.

Notary Public

**Power of Attorney
New York Statutory Gifts Rider
AUTHORIZATION FOR CERTAIN GIFT TRANSACTIONS**

CAUTION TO THE PRINCIPAL: This OPTIONAL rider allows you to authorize your agent to make gifts in excess of an annual total of \$500 for all gifts described in (I) of the Grant of Authority section of the statutory short form Power of Attorney (under personal and family maintenance), or certain other gift transactions during your lifetime. You do not have to execute this rider if you only want your agent to make gifts described in (I) of the Grant of Authority section of the statutory short form Power of Attorney and you initialed "(I)" on that section of that form. Granting any of the following authority to your agent gives your agent the authority to take actions which could significantly reduce your property or change how your property is distributed at your death. "Certain gift transactions" are described in Section 5-1514 of the General Obligations Law. This Gifts Rider does not require your agent to exercise granted authority, but when he or she exercises this authority, he or she must act according to any instructions you provide, or otherwise in your best interest.

VI. Legal and Financial Directives (continued)

This Gifts Rider and the Power of Attorney it supplements must be read together as a single instrument.

Before signing this document authorizing your agent to make gifts, you should seek legal advice to insure that your intentions are clearly and properly expressed.

(a) GRANT OF LIMITED AUTHORITY TO MAKE GIFTS:

Granting gifting authority to your agent gives your agent the authority to take actions which could significantly reduce your property.

If you wish to allow your agent to make gifts to himself or herself, you must separately grant that authority in subdivision (c) below.

To grant your agent the gifting authority provided below, initial the bracket to the left of the authority.

I grant authority to my agent to make gifts to my spouse, children and more remote descendants, and parents, not to exceed, for each donee, the annual federal gift tax exclusion amount pursuant to the Internal Revenue Code. For gifts to my children and more remote descendants, and parents, the maximum amount of the gift to each donee shall not exceed twice the gift tax exclusion amount, if my spouse agrees to split gift treatment pursuant to the Internal Revenue Code. This authority must be exercised pursuant to my instructions, or otherwise for purposes which the agent reasonably deems to be in my best interest.

(b) MODIFICATIONS:

Use this section if you wish to authorize gifts in amounts smaller than the gift tax exclusion amount, in amounts in excess of the gift tax exclusion amount, gifts to other beneficiaries or other gift transactions. Granting such authority to your agent gives your agent the authority to take actions which could significantly reduce your property and/or change how your property is distributed at your death. If you wish to authorize your agent to make gifts or transfers to himself or herself, you must separately grant that authority in subdivision (c) below.

I grant the following authority to my agent to make gifts pursuant to my instructions, or otherwise for purposes which the agent reasonably deems to be in my best interest.

[] *I grant the authority to my agent pursuant to General Obligations Law §5-1514 (3)(a) & (b) to make gifts to any person or persons unlimited in amount.*

(c) GRANT OF SPECIFIC AUTHORITY FOR AN AGENT TO MAKE MAJOR GIFTS OR OTHER TRANSFERS TO HIMSELF OR HERSELF: (OPTIONAL)

If you wish to authorize your agent to make gifts to himself or herself, you must grant that authority in this section, indicating to which agent(s) the authority is granted, and any limitations and guidelines.

VI. Legal and Financial Directives (continued)

I grant specific authority for the following agent(s) to make the following major gifts or other transfers to himself or herself:

This authority must be exercised pursuant to my instructions, or otherwise for purposes which the agent reasonably deems to be in my best interest.

- (d) **ACCEPTANCE BY THIRD PARTIES:** I agree to indemnify the third party for any claims that may arise against the third party because of reliance on this Gifts Rider.
- (e) **SIGNATURE AND ACKNOWLEDGMENT:**

In Witness Whereof, I have hereunto signed my name _____, 2011.

(PRINCIPAL SIGNS HERE) ==> _____

STATE OF NEW YORK)
COUNTY OF MONROE) ss:

On the ____ day of _____, 2011, before me, the undersigned, a Notary Public in and for said State, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that (s)he executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of whom the individual acted, executed the instrument.

Notary Public

(f) SIGNATURES OF WITNESSES:

By signing as a witness, I acknowledge that the principal signed the Statutory Gifts Rider in my presence and the presence of the other witness, or that the principal acknowledged to me that the principal's signature was affixed by him or her or at his or her direction. I also acknowledge that the principal has stated that this Statutory Gifts Rider reflects his or her wishes and that he or she has signed it voluntarily. I am not named herein as a permissible recipient of major gifts.

Signature of Witness 1

Signature of Witness 2

Date: _____, 2011

Date: _____, 2011

Print Name

Print Name

Address

Address

City, State, Zip Code

City, State, Zip Code

VI. Legal and Financial Directives (continued)

(g) THIS DOCUMENT PREPARED BY*:

Dutcher & Zatkowsky
 Elder Law Attorneys
 Miles P. Zatkowsky, Esq.
 1399 Monroe Avenue
 Rochester, New York 14618
 (585) 256-0090
 www.dutcher-zatkowsky.com

VII. Family Health Care Decisions Act (2010) - A Summary of Key Provisions

In the event that an individual does not execute a Health Care Proxy, or if the Health Care Proxy that was executed is invalid for some reason, then by a statute enacted in March of 2010, New York State still allows some health care related decision making authority on behalf of individuals who are incapacitated and who cannot make the decisions themselves.

The statute allows family members or close friends of an individual who resides in a hospital or residential health care facility (nursing home) to make medical treatment decisions for the patient in the event that the patient lacks capacity to make the decisions themselves.

a) In order of priority, the persons who may act as a surrogate decision-maker for the incapacitated patient are:

- 1 - a MHL Article 81 court-appointed guardian (if there is one)
- 2 - a spouse or domestic partner
- 3 - an adult child
- 4 - a parent
- 5 - a brother or sister
- 6 - a close friend
- 7 - hospital (last resort)- for major decisions (not routine treatment); attending Physician must consult with second physician and other staff involved with the patient's treatment; both physicians must agree

Any of the above persons who are acting as a surrogate have the authority to make all health care decisions for the patient that the patient could make for himself or herself, subject to certain standards and limitations. The law requires the surrogate decision maker to decide treatment based on the patients wishes, religious and moral beliefs and the patient's best interests.

b) The Family Health Care Decisions Act does not apply when:

- 1- there is a valid Health Care Proxy
- 2- persons who have a Court-appointed guardian under Article 17 of the SCPA
Or for whom decisions can be made under this Article
- 3- persons for whom treatment decisions may be made pursuant to OMH or OMRDD statutes and regulations

VII. Family Health Care Decisions Act (continued)

c) How is incapacity determined?

- 1 - specific hospital based process determined by the law
- 2 - patient and the potential surrogate decision maker are required to be informed of the determination of incapacity
- 3 - if patient objects to the determination of incapacity, or to the choice of the surrogate decision maker, or to the surrogate's actual decision, the patient's objection prevails (unless a Court has already determined or does determine that the patient lacks capacity).

Conclusion

The Act does not affect existing law concerning implied consent to health care in an emergency situation. While the Act does provide a measure of protection for individuals who do not have a Health Care Proxy, it is still a wise decision for individuals to execute a Health Care Proxy to an agent they trust so the agent can make any health care related decisions for the patient in the event the patient becomes incapacitated.

ⁱ <http://www.fpaforfinancialplanning.org/FindaPlanner/ChoosingaPlanner/QuestionstoAsk/>

ⁱⁱ Alzheimer's Association. *Planning Ahead for Long-Term Care Expenses Topic Sheet*.

ⁱⁱⁱ Adapted from Woerheide, W. in the Rochester *Democrat & Chronicle* (2001, April 8).

^{iv} National Reverse Mortgage Lenders Association (2008). Retrieved from <http://www.reversemortgage.org/> on November 11, 2008.

^v Adapted from Sadowsky, D. with HomeChex.

^{vi} Materials adapted from Herman, E.H. with Smith Barney.

^{vii} Office of the Attorney General of the State of New York (2008) *Smart Seniors, Access to Credit Reports* (p.19).

^{viii} The Federal Long Term Care Insurance Program. *Frequently Asked Questions*. Retrieved from <http://www.ltcfeds.com/help/faq/taxes.html> on November 18, 2009.

^{ix} Towns, Darryl C. *Facts About The New York State Partnership For Long-Term Care Program*. Retrieved from http://assembly.state.ny.us/member_files/054/20040609a/ on November 17, 2009.

^x Office of Real Property Services. *STAR - School Property Tax Exemption Questions & Answers*. Retrieved from <http://www.orps.state.ny.us/star/faq.htm> on November 18, 2009.

^{xi} United States Department of Treasury: Internal Revenue Service. *Frequently Asked Questions on Gift Taxes*. Retrieved from <http://www.irs.gov/businesses/small/article/0,,id=108139,00.html> on November 17, 2009.

^{xii} http://naela.com/Public_WhatIsElderLaw.aspx?Internal=true

Chapter 3: Insurance Coverage

Goals for this chapter:

1. To obtain information about various types, costs, and benefits of health coverage and assistance
2. To learn of different types of prescription assistance programs

I. Insurance Coverage	37
A. Medicare and Medicaid: Two distinct programs	38
II. Medicare	38
A. Original Medicare	38
B. Medigap	39
C. Medicare Advantage Plans	39
D. Medicare Prescription Drug Coverage	42
E. Other Medicare Health Plans	45
F. Medicare and TRICARE Coverage	45
G. Understanding Medicare Benefits	46
H. Medicare Coverage in Skilled Nursing Facilities	46
I. When Medicare Coverage in a Skilled Nursing Facility Ends	47
J. Medicare Rights	47
K. Medicare Preventative Health Benefits	47
L. Preventing Medicare Fraud	48
III. Prescription Assistance and Health Care Coverage	48
A. Monroe County Prescription Discount Plan	48
B. EPIC: New York State's Senior Prescription Plan	49
C. New York Prescription Save Card	49
D. Free or Low-Cost Prescriptions	49
IV. Long-Term Care Insurance	50
A. Considerations Before Purchasing Any Policy	50
B. Checklist for Comparing Long-Term Care Policies	51

(over)

V. Medicaid	53
A. Preparing for Medicaid Payment of Long Term Care	53
B. Medicaid Fraud Control	57
C. Applying for Medicaid	57
VI. Health Insurance Information, Counseling, and Assistance Program	59

I. Insurance Coverage

A. Medicare and Medicaid: Two distinct programs

	Medicare (Medical insurance for older adults and persons with disabilities)	Medicaid (Assistance for persons in need)
Type of Program	Federal health insurance program	Health care entitlement program financed jointly by federal, state, and local governments
Administered by	Social Security Administration	County Departments of Social Services/Human Services
Eligibility	<ul style="list-style-type: none"> ● Persons 65 or older ● Persons with disabilities who are under 65 ● Persons any age with End Stage Renal Disease 	<p>Persons who are needy or low income. These may include:</p> <ul style="list-style-type: none"> ● People who are 65 and over ● People who are blind or who have other disabilities <p><i>Note: Each state and county has its own eligibility criteria for their services. Apply to the Department of Social Services in the county where the person resides, or prior to nursing home admission.</i></p>
Benefits (2011)ⁱ	<p>Original Medicare Part A: After a deductible of \$1,132, which may be covered by the person's co-insurance, Medicare pays hospital charges for the first 60 days, and helps pay for days 61-150.</p> <p>Original Medicare Part B: Pays 80% of the approved physician charge, after a deductible of \$162. The individual pays the remaining 20%.</p>	<p>When eligible, the individual is covered for both institutional and out-patient services through:</p> <ul style="list-style-type: none"> ● A hospital ● A licensed long-term care facility ● A long-term home health care program ● Or a certified home health care agency
Premiums (2011)ⁱⁱ	<p>Part A: None (if you or your spouse have 40 quarters of Medicare-covered employment)</p> <p>Part B: \$115.40 per month, deducted from Social Security*</p>	
Contact	<p>(800) MEDICARE (633-4227) (877) 486-2048 TTY/TTD www.medicare.gov Upstate NY: www.umd.nycpic.com</p>	<p>County Departments of Social Services/Human Services Monroe County: (585) 753-6000 www.health.state.ny.us</p>

I. Insurance Coverage (continued)

*If your income is above \$85,000 (single) or \$170,000 (married couple), then your Medicare Part B premium may be higher than \$115.40 per month; however, most people will continue to pay the 2010 Part B premium they paid last year.

II. Medicareⁱⁱⁱ

Medicare is broken down into four (4) distinct categories which include the following:

1. Medicare Part A (Hospital Insurance)
 - Helps cover inpatient care in hospitals
 - Helps cover skilled nursing facility, hospice, and home health care
2. Medicare Part B (Medical Insurance)
 - Helps cover doctors' services, outpatient care, and home health care
 - Helps cover some preventive services to help maintain your health and to keep certain illnesses from getting worse
3. Medicare Part C (Medicare Advantage Plans like an HMO or PPO)
 - A health coverage option run by private insurance companies approved by and under contract with Medicare
 - Includes Part A, Part B, and usually other coverage like prescription drugs
4. Medicare Part D (Medicare Prescription Drug Coverage)
 - A prescription drug option run by private insurance companies approved by and under contract with Medicare
 - Helps cover the cost of prescription drugs
 - May help lower your prescription drug costs and help protect against higher costs in the future

A. Original Medicare

- Run by the Federal government.
- One of your health coverage choices as part of the Medicare Program.
- Provides your Part A and/or Part B coverage.
- You can go to any doctor or hospital that accepts Medicare.
- You can join a Medicare Prescription Drug Plan to add drug coverage.
- You can buy a Medigap (Medicare Supplement Insurance) policy (sold by private insurance companies) to help fill the gaps in Part A and Part B.
- Comprehensive drug coverage through a Medicare Prescription Drug Plan (Part D) can be added as most prescriptions aren't covered.
- You do not need a referral to see a specialist.
- You generally pay a set amount for your health care (deductible) before Medicare pays its share. Then, Medicare pays its share, and you pay your share (coinsurance/copayment) for covered services and supplies.
- You usually pay a monthly premium for Part B.

II. Medicare (continued)

B. Medigap (Medicare Supplement Insurance) Policies

A Medigap policy, sold by private insurance companies, can help pay some of the health care costs (“gaps”) that Original Medicare doesn’t cover (i.e. copayments, coinsurance, and deductibles). If you have Original Medicare and you buy a Medigap policy, both plans will pay their share of Medicare approved amounts for covered health care costs. Medicare doesn’t pay any of the costs for a Medigap policy.

Generally, you must have Part A and Part B to buy a Medigap policy. You pay a monthly premium for your Medigap policy to the private insurer, and you pay your monthly Part B premium. A Medigap policy only covers one person.

C. Medicare Advantage Plans (Part C)^{iv}

A Medicare Advantage Plan (like an HMO or PPO) is another health coverage choice you may have as part of Medicare. They are offered by private companies approved by Medicare. If you join a Medicare Advantage Plan, the plan will provide all of your Part A (Hospital Insurance) and Part B (Medical Insurance) coverage. You are always covered for emergency and urgent care. Medicare Advantage Plans must cover all of the services that Original Medicare covers except hospice care (original Medicare covers hospice care even if you are in a Medicare Advantage Plan). Medicare Advantage Plans may offer extra coverage, such as vision, hearing, dental, and/or health and wellness programs. Most include Medicare prescription drug coverage. In addition to your Part B premium, you usually pay one monthly premium for the services provided. Run by private insurance companies approved by and under contract with Medicare. Provides your Part A and Part B coverage but can charge different amounts for certain services. May offer extra coverage and prescription drug coverage, sometimes for an extra cost. Cost for items and services vary by plan. If you want drug coverage, you must get it through your plan (in most cases). You don’t need, and you can’t use a Medigap policy with a Medicare Advantage Plan.

Rochester Area Medicare Advantage Plans Providers:

**Excellus BlueCross BlueShield
Medicare Division**
(800) 659-1986
www.excellusbcbs.com

MVP
(585) 325-3920
www.mvphealthcare.com

II. Medicare (Medicare Advantage Plans Part C, continued)

	Health Maintenance Organization (HMO) Plan	Preferred Provider Organization (PPO) Plan	Private Fee-For-Service (PFFS) Plans	Medical Savings Account (MSA) Plan	Special Needs Plan (SNP)
Can I get my health care from any doctor or hospital?	No. You generally must get your care and services from doctors or hospitals in the plan's network (except emergency care, out-of-area urgent care, or out-of-area dialysis). In some plans, you may be able to go out-of-network for certain services usually for a higher cost.	Yes. PPOs have network doctors and hospitals, but you can also use out-of-network providers for covered services, usually for a higher cost.	In some cases, yes. You can go to any Medicare-approved doctor or hospital that accepts the plan's payment terms and agrees to treat you. Not all providers will. If you join a PFFS Plan that has a network, you will usually pay more to see out-of-network providers.	Yes. Some plans may have preferred doctors and hospitals you could go to for a lower cost.	You generally must get your care and services from doctors or hospitals in the plan's network (except emergency care, out-of-area urgent care, or out-of-area dialysis). Plans typically have specialists for the diseases or conditions that affect their members.
Are prescription drugs covered?	In most cases, if you want drug coverage, you must join an HMO Plan that offers prescription drug coverage.	In most cases, yes. Ask the plan. If you want drug coverage, you must join a PPO Plan that offers prescription drug coverage.	Sometimes. If your PFFS Plan doesn't offer drug coverage, you can join a Medicare Prescription Drug Plan to get coverage.	No. You can join a Medicare Prescription Drug Plan to get drug coverage.	Yes. All SNPs must provide Medicare prescription drug coverage (Part D).
Do I need to choose a Primary Care Doctor?	In most cases, yes.	No.	No.	No.	Generally, yes, or you may need to have a care coordinator to help plan your care.
Do I need a referral to see a specialist?	In most cases, yes. Yearly screening mammograms and in-network Pap tests and pelvic exams (at least every other year) don't require a referral.	No.	No.	No.	In most cases, yes. Yearly screening mammograms and an in-network Pap test and pelvic exam (at least every other year) don't require a referral.

II. Medicare (Medicare Advantage Plans Part C, continued)

	Health Maintenance Organization (HMO) Plan	Preferred Provider Organization (PPO) Plan	Private Fee-For-Service (PFFS) Plans	Medical Savings Account (MSA) Plan	Special Needs Plan (SNP)
What else do I need to know about this plan?	<p><input type="checkbox"/> If your doctor leaves the plan, your plan will notify you. You can then choose another doctor in the plan.</p> <p><input type="checkbox"/> If you get health care outside the plan's network, you may have to pay the full cost.</p> <p><input type="checkbox"/> It's important that you follow the plan's rules, like getting prior approval for a certain service when needed.</p>	<p><input type="checkbox"/> There are two types of PPOs— Regional PPOs and Local PPOs.</p> <p><input type="checkbox"/> Regional PPOs serve one of 26 regions set by Medicare.</p> <p><input type="checkbox"/> Local PPOs serve the counties the PPO Plan chooses to include in its service area.</p>	<p><input type="checkbox"/> PFFS Plans aren't the same as Original Medicare or Medigap.</p> <p><input type="checkbox"/> The plan decides how much you must pay for services.</p> <p><input type="checkbox"/> Doctors, hospitals, and other providers may decide on a case-by- case basis not to treat you even if you've seen them before.</p> <p><input type="checkbox"/> For each service you get, check to make sure your doctors, hospitals, and other providers will agree to treat you under the plan, and that they will accept the PFFS Plan's payment terms.</p> <p><input type="checkbox"/> In an emergency, doctors, hospitals, and other providers must agree to treat you.</p>	<p><input type="checkbox"/> Medicare MSA Plans have two parts: a high deductible health plan and a bank account. Medicare gives the plan an amount each year for your health care, and the plan deposits a portion of this money into your account. The amount deposited is less than your deductible amount, so you will have to pay out-of-pocket before your coverage begins.</p> <p><input type="checkbox"/> Money spent for Medicare -covered Part A and Part B services counts toward your plan's deductible. After you reach your out-of-pocket limit, your plan will cover your Medicare-covered services in full.</p> <p><input type="checkbox"/> Any money left in your account at the end of the year remains in your account along with the deposit for next</p>	<p><input type="checkbox"/> A plan must limit plan membership to people in the following groups:</p> <ol style="list-style-type: none"> 1) live in certain institutions (like a nursing home) or who require nursing care at home, 2) eligible for both Medicare and Medicaid, 3) have one or more specific chronic or disabling conditions (like diabetes, congestive heart failure, or HIV/AIDS). <p><input type="checkbox"/> Plans may further limit membership within these groups.</p> <p><input type="checkbox"/> Plans should coordinate the services and providers you need to help you stay healthy and follow your doctor's orders.</p> <p><input type="checkbox"/> If you live in an institution, make sure that plan doctors or other health care providers serve people where you live.</p>

II. Medicare (continued)

D. Medicare Prescription Drug Coverage (Part D)^v

- You can join a Medicare drug plan from three months before you turn 65 to three months after you turn 65 (the initial enrollment period).
- Every year from November 15–December 31 you can switch to a different Medicare drug plan if your needs change.
- The example below shows costs for covered drugs in 2011 for a plan that has a coverage gap.^{vi}

Yearly Deductible	Copayment/Coinsurance	Coverage Gap	Catastrophic Coverage
Ms. Smith pays the first \$310 of her drug costs before her plan starts to pay its share.	Ms. Smith pays a copayment, and her plan pays its share for each covered drug until their combined amount (plus the deductible) reaches \$2,840.	Once Ms. Smith and her plan have spent \$2,840 for covered drugs, she is in the coverage gap. In 2011, she gets a 50% discount on covered brand-name prescription drugs that counts as out-of-pocket spending, and helps her get out of the coverage gap.	Once Ms. Smith has spent \$4,550 out-of-pocket for the year, her coverage gap ends. Now she only pays a small copayment for each drug until the end of the year.

Note: Important Change in Medicare Drug Coverage - Closing the Coverage Gap ("Donut Hole")

Beginning January 1, 2011, for the first time, people with Medicare drug coverage will not have to pay all of the costs of their drugs while in the coverage gap. Medicare beneficiaries will get a 50% discount on brand name prescription drugs on their plan's formulary while in the coverage gap. They will get a 7% discount of the cost of generic drugs on the plan's formulary during the coverage gap. They will get the discount at the time they buy the drugs.

Over the next 10 years, Medicare drug coverage will continue to increase for all covered drugs in the coverage gap until the coverage gap closes in 2020. At that time, Medicare beneficiaries will pay 25% of the cost of their drugs.

These changes do not apply if for individuals who already receive Extra Help.

Resources for Choosing a Drug Benefit

www.maprx.info

www.medicare.gov
Note: Individual plan formulary information

www.medicareinteractive.org

www.mymedicarematters.org
Note: For assistance in applying for Medicare drug benefit

II. Medicare (Medicare Prescription Drug Coverage, continued)

- 1) The “Landscape of Local Plans State By State” lists Medicare-approved drug plans available in each state. It charts the name of each plan, the amount of the monthly premium, whether it is a zero-premium plan for low income subsidy recipients, or there is coverage during the donut hole and more.^{vii}
- 2) People with limited income and resources may qualify for “Extra Help” paying their Medicare prescription drug coverage costs. If you automatically qualify for “Extra Help,” you won’t pay a premium if you join certain Medicare drug plans. If you don’t automatically qualify, you may still get help to pay your prescription drug costs.

II. Medicare (2011 Extra Help^{viii}, continued)

Full Subsidy						
Beneficiary Group	Income Eligibility Requirement	Asset Eligibility Requirement	Need to apply for LIS?	Monthly Premium	Annual Deductible	Co-pay/Co-insurance for drugs on plan formulary
Duals (people with Medicare & full Medicaid) who reside in long-term care facilities	Meet State Medicaid financial eligibility rules	Meet State Medicaid financial eligibility rules	No, receive it automatically	No	No	None
Other people with Medicare and Medicaid, including those enrolled in a Medicare Savings Program (MSP)	Meet State Medicaid financial eligibility rules	Meet State Medicaid financial eligibility rules	No, receive it automatically	No	No	<i>Co-pay: \$1.10 generic /\$3.30 brand name if income ≤ 100% FPL (\$902.50/month single or \$1,214.17 married) Co-pay: \$2.50 generic/\$6.30 brand name if income > 100% FPL or if MSP-only No co-pay after \$6,447.50 limit</i>
Non-duals with income < 135% FPL	\$1,218.38/month or less if single; \$1,639.13/month or less if married	\$8,180 or less if single; \$13,020 or less if married *	No if on SSI; otherwise yes	No	No	<i>Co-pay: \$2.50 generic/\$6.30 brand name No co-pay after \$6,447.50 limit</i>
Partial Subsidy						
Beneficiary Group	Income Eligibility Requirement	Asset Eligibility Requirement	Need to apply for LIS?	Monthly Premium	Annual Deductible	Co-pay/Co-insurance for drugs on plan formulary
Non duals with income < 135% FPL AND assets between \$8,180 and \$12,640 if single, or between \$13,020 and \$25,260 if married *	\$1,218.38/month or less if single; \$1,639.13/month or less if married	Between \$8,180 and \$12,640 if single; between \$12,640 and \$25,260 if married *	Yes	No	\$63	<i>Co-insurance: 15% (up to \$6,447.50) Co-pay: \$2.50 generic/\$6.30 brand name after \$6,447.50 limit</i>
Non duals with income between 135 and 150% FPL	\$1,353.75/month or less if single; \$1,821.25/month or less if married	\$12,640 or less if single; \$25,260 or less if married *	Yes	Sliding scale	\$63	<i>Co-insurance: 15% (up to \$6,447.50 limit) Co-pay: \$2.50 generic/\$6.30 brand name after \$6,447.50 limit</i>

* All asset eligibility limits include \$1,500/person burial allowance

II. Medicare (continued)

E. Other Medicare Health Plans

Plans that aren't Medicare Advantage Plans but are still part of Medicare. Include Medicare Cost Plans, Demonstration/Pilot Programs, and Programs of All-inclusive Care for the Elderly (PACE). Most plans provide Part A and Part B coverage, and some also provide prescription drug coverage (Part D).

1) Programs of All-Inclusive Care for the Elderly (PACE)

PACE combines medical, social, long-term care services and prescription drug coverage for frail elderly and disabled people. This program provides community-based care and services to people who otherwise need a nursing home-level of care.

To qualify for PACE, you must meet the following conditions:

- You are age 55 or older.
- You live in the service area of a PACE organization.
- You are certified by your state as meeting the need for a nursing home-level of care.
- At the time you join, you are able to live safely in the community with the help of PACE services.
- PACE uses Medicare and Medicaid funds to cover all of your medically necessary care and services. You can have either Medicare or Medicaid or both to join PACE.

F. Medicare and TRICARE Coverage

TRICARE (Military Health Benefits) is a health care plan for active-duty service members, retirees, and their families. Most people with TRICARE who are entitled to Part A must have Part B to keep TRICARE prescription drug benefits. If you have TRICARE, you aren't required to join a Medicare Prescription Drug Plan. If you do, your Medicare drug plan pays first, and TRICARE pays second. If you join a Medicare Advantage Plan with prescription drug coverage, TRICARE won't pay for your prescription drugs.

Resources for V. A. Medical Benefits

General U.S. Government benefits

www.govbenefits.gov

TRICARE for Life (TFL)

(866) 773-0404

(877) 540-6261

www.tricare.mil

U.S. Department of Veterans Affairs

(585) 232-5040

(800) 827-1000

www.va.gov

Veterans Administration

465 Westfall Rd., Rochester 14620

(585) 463-2600

Note: VA authorization is required within 48 hours in order to cover emergency care or other care offered by any other health provider.

II. Medicare (continued)

G. Understanding Medicare Benefits

Medicare generally doesn't pay for long-term care. Medicare also doesn't pay for help with activities of daily living or other care that most people can do themselves. Some examples of activities of daily living include eating, bathing, dressing, and using the bathroom. Medicare will help pay for skilled nursing or home health care if you meet the following conditions:

- You must have Medicare Part A (Hospital Insurance) and have days left in your benefit period available to use.
- You must have a qualifying hospital stay. This means an inpatient hospital stay of 3 consecutive days or more, starting with the day the hospital admits you as an inpatient, but not including the day you leave the hospital. You must enter the Skilled Nursing Facility (SNF) within a short period of time (generally 30 days) of leaving the hospital. After you leave the SNF, if you re-enter the same or another SNF within 30 days, you may not need another 3-day qualifying hospital stay to get additional SNF benefits. This is also true if you stop getting skilled care while in the SNF and then start getting skilled care again within 30 days.
- Your doctor must order the services you need in the SNF care, which require the skills of professionals such as registered nurses, licensed practical nurses, physical therapists, occupational therapists, speech-language pathologists or audiologists, and are furnished by, or under the supervision of, these skilled personnel.
- You must require the skilled care on a **daily** basis in a SNF on an inpatient basis. If you are in a SNF for skilled rehabilitation services only, your care is considered daily care even if the therapy services are offered just 5 or 6 days a week.

H. Medicare coverage in Skilled Nursing Facilities (SNF)

Medicare uses a period of time called a benefit period. A benefit period begins on the day you start using hospital or SNF benefits under Part A of Medicare. You can get up to 100 days of SNF coverage in a benefit period. Once you use those 100 days, your current benefit period must end before you can renew your SNF benefits. Your benefit period ends when you have not been in a SNF or a hospital for at least 60 days in a row, OR if you remain in a SNF, when you haven't received skilled care there for at least 60 days in a row. There is no limit to the number of benefit periods you can have.

However, once a benefit period ends, you must have another 3-day qualifying hospital stay and meet the Medicare requirements before you can get up to another 100 days of SNF benefits.

For those meeting Medicare eligibility in a SNF, the first 20 days are covered in full. Day 21-100 there is a \$141.50 co-payment per day. After day 100, there is no coverage unless it is a new benefit period.

Participants in Medicare HMO's need to determine coverage from their individual insurers (i.e. MVP).

II. Medicare (continued)

I. When Medicare Coverage in a Skilled Nursing Facility (SNF) Ends

"Skilled Nursing Facility Advance Beneficiary Notice of Non-Coverage" must be provided to let you know that the SNF believes you no longer qualify for SNF services paid by Medicare. If someone is acting on your behalf, the facility must notify him or her in writing. Medicare coverage ends the day after you get the notice.

The Notice of Medicare Non-Coverage must tell you

- The date Medicare coverage will end (and you must start to pay).
- Why the stay is no longer covered.
- The estimated cost of the non-covered care.
- Where you (or someone acting on your behalf) should sign to show receipt of the notice.
- The right to request that the SNF submit a claim to Medicare so that an official payment decision from Medicare is received—this type of claim is sometimes called a "demand bill."

If a request to have a claim submitted is made, the resident is not required to pay for the SNF stay until they are informed of Medicare's decision* (you do have to pay any coinsurance charged, and for services and supplies not covered by Medicare).

A Medicare Advantage Plan (i.e. MVP) will have their own plan on how to notify when Medicare coverage is ending. You can ask for advance notice of non-coverage from the plan or the SNF. If you don't agree with the decision, you can then file an appeal. You will be responsible for the cost of the stay if Medicare determines you didn't meet Medicare's criteria.

J. Medicare Rights^{ix}

- Be treated with dignity and respect at all times
- Be protected from discrimination
- Access to doctors, specialists, and hospitals
- Have your questions about Medicare answered
- Learn about all of your treatment choices and participate in treatment decisions
- Get information in a way you understand from Medicare, its providers, and contractors under certain circumstances
- Get emergency care when and where you need it
- Get a decision about health care payment or services, or prescription drug coverage
- Get a review of (appeal) certain decisions about health care payment, coverage of services, or prescription drug coverage
- File complaints (sometimes called grievances), including complaints about the quality of your care
- Have your personal and health information kept private

K. Medicare Preventive Health Benefits

For a list of specific tests and screenings, see the "Medicare and You" booklet mailed to Medicare participants or available online at medicare.gov. A free booklet is also available by calling (800) MEDICARE (633-4227).

II. Medicare (continued)

L. Preventing Medicare Fraud^x

- a) When you get health care services, you may want to save the receipts you get from providers. Use your receipts to check for mistakes on statements you get.
- b) Keep your personal information safe. Only give personal information to doctors, other providers, and plans approved by Medicare, and to people in the community who work with Medicare, like your State Health Insurance Assistance Program (SHIP) or Social Security.
- c) Medicare plans can't ask you for credit card or banking information over the telephone unless you are already a member of that plan. In most cases, Medicare plans can't call you to enroll in a plan; instead, you must call them.

To report a suspected instance of fraud or abuse by a health care provider, all the Inspector General's hotline at 800-HHS-TIPS (447-8477)

III. Prescription Assistance and Health Care Coverage

A. Monroe County Prescription Discount Plan

(585) 753-6280

1050 University Avenue, Suite A, Rochester 14607

www.monroecounty.gov/aging-rx.php

Monroe County has joined The RxChoice Drugstore Savings Club, a prescription drug discount card with 2 million members nationwide.

Monroe County-RxChoice Cards:

To enroll: No fee; this card is free

Who is eligible: All residents of Monroe County, regardless of income

Where accepted: At most major retail pharmacies (e.g. Wegmans, Tops, CVS, Eckerd, Kmart, Rite Aid, Target and Wal-Mart)

Drug coverage: All brand name and generic drugs, saving residents an average of 15% on brand name and 44% on generics

Other plans: Even if you have other insurance coverage or another prescription card, enroll in this free plan and compare discounts and overall savings



III. Prescription Assistance and Health Care Coverage (continued)

- B. EPIC: New York State's Senior Prescription Plan** (800) 332-3742
 PO Box 15018, Albany 12212-5018
www.health.state.ny.us (click on EPIC)

This plan helps eligible state residents 65 and older with prescription costs, unless they have better prescription coverage through a private insurer or Medicaid.

EPIC plans	Eligibility based on the following income limits:		
Individual fee plan	\$20,000	Individual deductible plan	\$35,000
Married couple fee plan	\$26,000	Married couple deductible plan	\$50,000

Co-payments are based on prescription costs

- C. New York Prescription Saver Card** (800) 788-6917
 PO Box 12069, Albany 12212-2069
www.nyprescriptionsaver.fhsc.com

Free pharmacy discount card that is sponsored by NYS. You can use this card at participating pharmacies to save as much as 60% on generics and 30% on brand name drugs. You must be a resident of NYS, not receiving Medicaid, either (a) age 50 up to 65, or (b) determined disabled by the Social Security Administration AND have annual income under \$35,000 if single and \$50,000 if married.

D. Free or low-cost prescriptions

- Affordable HealthLine**, a program of Unity Health (328-7000) sponsored by Rochester Primary Care Network (RCPN), offers discounted health care for the uninsured or underinsured.
- Family Health Plus Program** provides health coverage for New York State residents age 19–64 who earn too much to qualify for Medicaid but not enough to afford health insurance.

Family Size (for larger families, call or see web site)	Yearly Income Limit: up to	For information or enrollment, call
Single adult	\$10,830	<u>Monroe County</u> (585) 753-6702
Couple with no children	\$14,570	<u>Other counties</u> (877) 934-7587 Toll-Free
1 Parent or Legal Guardian + 1 Child	\$21,855	<u>New York State</u> www.nyhealth.gov
1 Parent or Legal Guardian + 2 Children or 2 Parents + 1 Child	\$27,465	

Note: For additional information through New York State log onto nyhealth.gov

IV. Long-Term Care Insurance^{xi}

Long-term care insurance covers long-term care services provided in a nursing home, at home, or in community-based settings, which Medicare, Medicare supplemental insurance (Medigap), and traditional health and disability insurance plans typically do not cover. It is available through private insurance companies as a means for individuals to pay for needed care and protect themselves against the high costs of long-term care. This is the most comprehensive level of coverage for long-term care services under insurance regulations in New York State.

Two general types of long-term care insurance in New York State:

- 1) The New York State Partnership for Long-Term Care is a unique program combining private long-term care insurance and Medicaid Extended Coverage.

Its purpose is to help New Yorkers financially prepare for the possibility of needing nursing home care, home care, or assisted living services someday. The program allows New Yorkers to protect some or all of their assets (depending on the insurance plan purchased), if their long-term care needs extend beyond the period covered by their private insurance policy.

Under the Partnership program, if you purchase a Partnership-approved long term care policy and satisfy the duration requirements of your policy, you can then apply for a special Medicaid program called "Medicaid Extended Coverage".

- 2) Traditional, non-Partnership insurance

Note: An "Inflation Protection Benefit" is an important option to consider. It increases the daily benefit amount and policy maximums over time to help keep pace with inflation and increased expenses.

A. Considerations Before Purchasing Any Policy

- 1) Have you found an agent you trust? Your agent can help you decide if a partnership policy is right for you. Your agent should have specialized knowledge and represent a variety of insurance companies. The agent should guide you without any pressure and answer all your questions. Ask friends for referrals, attend seminars, and/or speak with a number of agents to help make the correct choice.
- 2) Do you have income beyond your usual needs to afford the premiums?
- 3) Are you selecting the most appropriate benefits while balancing the costs?
- 4) Are you clear about all the details of your own situation?
- 5) What specific goals do you want to accomplish?
- 6) Have you carefully reviewed each policy to find out if there are restrictions (such as pre-existing conditions or portability), or services that are not covered? For example, some policies may require prior hospitalization; this may make the policy more affordable, but may not meet your particular needs. Inquire about a no-cost rider that reduces or eliminates the policy's waiting period when care is given by a designated provider.

IV. Long-Term Care Insurance^{xii} (continued)

- 7) A long-term care policy should include:
 - a) Well defined benefit triggers
 - b) Guaranteed renewability (this does not mean your rate will never change)
 - c) No prior hospitalization requirement
 - d) A financially stable company through which it is offered

- 8) Factors that affect the premium:
 - a) Length of benefit period
 - b) Amount of the daily benefit
 - c) Elimination period
 - d) Home health care coverage
 - e) Type of inflation protection
 - f) Optional riders
 - g) Schedule of payments
 - h) Your age and health at application

B. Check List for Comparing Long-Term Care Policies *(Materials adapted from Woods, Oviatt, Gilman, Attorneys at Law and the Finger Lakes Health Systems Agency)*

This check list will help you compare the policies that you may be considering, and indicate some of the questions that are important to ask.

Policy A	Policy B	
(name of policy)	(name of policy)	
	Policy A	Policy B
1. What services are covered?		
• Skilled care	_____	_____
• Intermediate care	_____	_____
• Custodial care	_____	_____
• Home health care	_____	_____
2. Who makes the final decision about coverage?		
• Physician?	_____	_____
• Insurance reviewer?	_____	_____
• Other care provider?	_____	_____
3. How many ADLs (activities of daily living -- such as dressing, bathing, eating, toileting) must I need help with before coverage is approved?	_____	_____
4. How much of the average cost per day will the policy pay for		
• Skilled care?	_____	_____
• Intermediate care?	_____	_____
• Custodial care?	_____	_____
• Home health care?	_____	_____
• Adult day services?	_____	_____
• Other care?	_____	_____

IV. Long-Term Care Insurance^{xiii} (continued)

- | | | |
|---|-------|-------|
| 5. Does the policy offer a means for increasing benefits to account for inflation in future costs?
If so, how does this compare to the current annual rate of inflation? | _____ | _____ |
| 6. Does the policy have a maximum lifetime benefit?
If so, what is it? | | |
| • For nursing home care? | _____ | _____ |
| • For home health care? | _____ | _____ |
| 7. Does the policy have a maximum length of coverage per “spell of illness” or maximum benefit period?
If so, what is it? | | |
| • For nursing home care? | _____ | _____ |
| • For home health care? | _____ | _____ |
| 8. How long do I have to wait before pre-existing conditions are covered? | _____ | _____ |
| 9. Is Alzheimer’s disease covered? | _____ | _____ |
| 10. How many days is the elimination or deductible period before benefits begin? | _____ | _____ |
| 11. Does this policy require | | |
| • Physician certification of need? | _____ | _____ |
| • A functional assessment? | _____ | _____ |
| • A prior <u>hospital</u> stay for | | |
| ○ Nursing home care? | _____ | _____ |
| ○ Home health care? | _____ | _____ |
| ○ Adult day services? | _____ | _____ |
| 12. Can the policy be cancelled? | _____ | _____ |
| 13. Will the policy cover me if I move to another area? | _____ | _____ |
| 14. What is the age range for enrollment? | _____ | _____ |
| 15. What does the policy cost? | | |
| • Per month? | _____ | _____ |
| • Per year? | _____ | _____ |
| 16. Can the amount of the premium be increased? | _____ | _____ |
| 17. Is this policy part of the Robert Wood Johnson Partnership and thus limited to New York State | | |

residents?

IV. Long-Term Care Insurance^{xiv} (continued)

Resources for Information on Long-Term Care Insurance

Lifespan of Greater Rochester, Inc.
1900 S. Clinton Ave., Rochester 14618
(585) 244-8400 x113
www.lifespan-roch.org

Note: Part of the NY State Long-Term Care Education Outreach Program

National Association of Insurance Commissioners

(816) 842-3600
(866) 470-6242
www.naic.org

Note: Request booklet: "A Shopper's Guide to Long-Term Care Insurance," which explains Long Term Care, gives a glossary of terms, helps identify if this coverage is appropriate for you. You can request this also from a life or health insurance agent

New York State Partnership for Long-Term Care

(888) 697-7582
www.nyspltc.org

Note: Request booklet: "Affordable Financing for Long-Term Care"

State of New York Insurance Department

Agency Building One, Empire State Plaza
Albany 12257
(800) 342-3736

www.planaheadny.com

Note: Request booklet: "Insurance Policies Covering Long Term Care Services"

V. Medicaid

Medicaid is a joint Federal-State program based on financial need. It is an important source of payment for nursing homes and other long-term care programs. If you anticipate that you or a relative may need Medicaid to pay for such care, it is important to consult with an elder law attorney and to **save all financial records for five years.**

Disclaimer: The following information is accurate as of the date of its preparation, December 2010. This area of law is ever-changing. Your best source of information is a consultation with a knowledgeable and competent attorney.

A. Preparing for Medicaid Payment of Long Term Care

1. Medicaid: Payer of Last Resort

Medicaid will only pay after Medicare, private insurance, and private resources have been utilized. Medicare and private insurance usually pay a limited amount of the cost of chronic care. Thus, private funds and Medicaid are the normal sources of nursing home payment. One applies for Medicaid through the Department of Human Services (DHS)/Department of Social Services (DSS) in the county in which the person last resided.

2. Medicaid for Individuals Living in the Community^{xv}

For individuals in the community, Medicaid does not provide a community spouse income or resource allowance. Because spouses are legally responsible for each other, the income and resources of a well spouse are counted as available to pay for care.

V. Medicaid (continued)

- A. **The income level for one person remains at \$767 per month in 2011.** The first \$20.00 of any income is disregarded. Income over the monthly income level is considered available to pay medical bills.
- B. **The resource level for one person living in the community remains at \$13,800 and \$20,100 for two persons in 2011.** A home that the family lives in, as well as one vehicle, is not counted toward the resource level. A pre-paid burial trust is also not counted as an available resource.
- C. If the non-applying spouse "refuses" to make his or her income and/or resources available to the spouse applying for Medicaid, the agency will review the income and resources of the applying spouse only in making their eligibility determination. However, the refusing spouse could be subject to legal action by the County for support of their spouse. To understand the potential legal ramifications of filing a "Spousal Refusal" Medicaid application, the advice of an elder law attorney is critical.

3. Medicaid in a Skilled Nursing Facility or Long-Term Home Health Care Program

There are special rules for residents of long term care facilities and participants of the Long Term Home Health Care Program Medicaid waiver. If an individual is receiving Medicaid for community based services in their home or adult care facility, you cannot assume they will qualify for Medicaid in a nursing home or long term home health care program.

- A. Resource Standards
 - The Medicaid recipient is allowed a "resource allowance." These are assets that are considered "exempt" and are not considered available to pay for medical care. **In 2011 the resource allowance for a single applicant remains at \$13,800.**
 - A married applicant is treated differently than a single applicant. All assets of a married couple are looked at in determining eligibility. The spouse of a resident in a nursing home is allowed certain exempt resources and a
 - "community spouse resource allowance." This is in addition to the Medicaid recipient's resource allowance. **In 2011, the minimum Community Spouse Resource Allowance (CSRA) remains at \$74,820 and the maximum remains at \$109,560.**
 - A Medicaid recipient and his or her spouse can have a prepaid burial contract with a funeral home. The Medicaid applicant's contract must be in an irrevocable trust. The irrevocable pre-need contract can be for any amount designated for funeral/burial services. If a recipient does not wish to pre-pay for funeral/burial services, he or she can have a burial account of up to \$1,500 in a separately identified account. Burial space is also considered exempt.
- B. Exempt Resources when there is a Spouse

If a Medicaid recipient in a nursing home has a spouse, the following resources are exempt (not available to pay medical bills) and are transferred to the community spouse.

V. Medicaid (continued)

This is not a complete list of all exempt resources, but some of the most common items:

- The homestead (the house that the community spouse resides in)
- One motor vehicle
- Personal property such as furniture, appliances, etc.
- Burial space
- \$1,500 Burial fund or irrevocable burial trust for prepaid funeral expenses
- \$74,820 in assets (may rise to a maximum of \$109,560)

C. Income Standards

1) Income allowance for the Medicaid recipient:

The Medicaid recipient is allotted \$50.00 per month for personal care needs. This is often deposited into a “personal needs account” at the facility. The amount of any health insurance premium is also covered. For a single individual in a nursing home, all other income is considered available to pay toward the cost of care. If the individual has a qualified retirement plan, Medicaid rules require income distribution of the fund over the applicant’s life expectancy according to a Medicaid life expectancy chart.

2) Income allowance for spouse in the community:

The Medicaid recipient is allowed to provide for the support of the community spouse up to the federal guidelines. This is known as the **Minimum Monthly Maintenance Needs Allowance (MMMNA)**. This figure is set by the federal government. **In 2011, it remains at \$2,739 per month.**

The income of the community spouse is pre-determined. If income of the community spouse is below \$2,739 per month, income from the institutionalized spouse is budgeted to the community spouse up to a total of \$2,739 per month. You must know the income of each individual to calculate the MMMNA.

If the community spouse’s income is over the MMMNA, Monroe County requests 25% of the excess income over the \$2,739 level as a contribution by the community spouse toward the medical bills of the institutionalized spouse. Medicaid will not be denied if the community spouse refuses to pay this excess income, but the Department of Human Services has the right to bring an action for support against the community spouse who refuses to contribute.

The amount of income over the MMMNA is known as the Medicaid recipient’s **Net Available Monthly Income (NAMI)**. This is calculated by determining each spouse’s income, allowing sufficient income for the community spouse to be brought to the \$2,739 level, and budgeting the excess income toward payment of the medical bills.

V. Medicaid (continued)

3) Allowance for other family members:

Medicaid allows additional income for dependent or minor children up to \$1822 per month, depending upon the income of the dependents.

4. Transfer of Assets

A transfer is any funds, including income that is given away without fair compensation. There is a presumption that transfers were made for the purpose of becoming eligible for Medicaid. The burden is on the applicant to show that the transfer was made exclusively for another purpose. Transfers include more than gifts; for example, declining receipt of funds an applicant is entitled to can be counted as a transfer. Payment of expenses of others may also be considered a transfer.

Purchases by the Medicaid applicant or his/her spouse for their own needs are not "transfers." Examples of this include clothing, television, spouse making repairs to homestead, etc. There is also a provision for "hardship" situations (e.g. criminal financial abuse by a third party).

The Deficit Reduction Act of 2005 changed the way transfers of assets are treated. Transfers made after February 8, 2006 are treated differently than transfers made prior to this date.

Calculation of the "look back period" - A five year look back period is currently being phased in. For all transactions after February 8, 2006, a full five year look back is currently in effect. For transfers to a trust, the look back period is 5 years for all trusts both before and after February 8, 2006. A period of non-coverage, a penalty period, is imposed for the transfer of assets within the "look back" period.

- 1) Calculation of the penalty period – To determine the period of time Medicaid will not cover nursing facility care, the amount transferred is divided by the average cost of nursing home care in the county where the Medicaid applicant resides. The individual may be eligible for Medicaid coverage other than nursing home care.
- 2) Application of the penalty period
 - a) For all transfers after February 8, 2006 the penalty period starts when the Medicaid applicant is in the nursing home and is "otherwise eligible" for Medicaid. "Otherwise eligible" means that they have met all Medicaid eligibility criteria except for the transfer.
 - b) For all transfers before February 8, 2006, the penalty period starts the first day of the month after the date of transfer.
- 3) Exempt transfers
 - a) There is no transfer penalty for transfers between husband and wife.
 - b) There is no transfer penalty for transfers to disabled children.

V. Medicaid (continued)

- c) There is no transfer penalty for transfer of the homestead to an adult child who has lived in the homestead for two years immediately prior to the nursing home placement, and who has provided care (which has been documented) to his/her parent enabling them to remain in the home.
- d) There is no transfer penalty for transfer of a homestead to a sibling with an equity interest in the home, who has lived in the home for at least one year prior to the transfer.

B. Medicaid Fraud Control

Since fraud is so costly to everyone, evidence of any fraud should be reported.

Resources for Reporting of Medicaid Fraud by a Health Provider:

Medicaid Fraud Control Office of the Special Prosecutor (585) 262-2860
144 Exchange Boulevard, Rochester 14614

Note: This office serves a 9-county region

C. Applying for Medicaid

1. Documents Needed (A partial listing)

Type of Document	Description
1. Personal status	Proof of birth, citizenship, and marital status (if married, widowed, or divorced), driver's license or photo ID
2. All income and assets: bank accounts, pension, stocks, bonds, annuities, interest, rents, etc.	Records for 36 months (three years) phasing into 60 months (five years), including copies of all statements on all accounts in the name of the applicant and the non-applying spouse (see also "transfers" below)
3. Powers of Attorney	
4. Social Security	Statement of monthly Social Security benefits
5. Medicare insurance	ID number
Other supplementary insurance	Type, ID number, quarterly premium bill
6. Life insurance policies	Copy of policy, or statement from insurance company stating policy number, ownership, and current cash value or worth. The cash value of life insurance policies may be put into a burial fund. If not needed for this purpose, the ownership of a policy with cash value may be transferred to a spouse (consult an elder law attorney)

V. Medicaid (continued)

- | | |
|---|--|
| 7. EPIC (New York State's Senior Prescription Plan) | Record of enrollment (for those qualified) |
| 8. Medical bills | Receipts and/or outstanding bills for preceding 3 months |
| 9. Car | Title of ownership |
| 10. Real estate | Deed to house, any other property; tax bills |
| 11. Funeral/burial arrangements: assets may be used to pre-pay burial expenses (see preceding pages). | Record of:
- Separate \$1,500 burial account or
- Prepaid burial trust with a funeral director or
- Cash value of a life insurance policy |
| 12. Transfers of assets
- For ordinary transfers: | "Look-back" period (see also preceding pages)
Financial records for previous <u>36 months</u> (phasing into 60 months) |
| - For transfers to trusts: | Financial records for previous <u>60 months</u> |

2. Application Process

- a. Consult with professional advisors who keep abreast of the changes in Medicaid law.
- b. Collect copies of required documents such as those listed on previous page.
- c. Complete the application form and send it in with copies of the documents required (keep original copies).
- d. An appointment will usually be scheduled within 10 days after initial receipt of the application.
- e. A request for additional documents, if needed, will be sent along with the date of the appointment.
- f. County Departments of Human Services (DHS)/Departments of Social Services (DSS) offer preliminary informational meetings prior to interviews.
- g. Do not let the process go beyond 3 months. If you need additional time to obtain required items, ask for an extension from the examiner. Stay in touch with the case worker.
- h. If advised that the application will be denied, request a written denial. It is not possible to appeal an oral denial or a withdrawn or discontinued application.
- i. If you believe that Medicaid has been improperly denied, request a fair hearing. Observe time limits for filing this request.

Resources for Medicaid Applications

County Departments of Social or Human Services
Monroe County:

(585) 753-6960

Note: For a listing of resources for Elder Law Attorneys and Law Firms, please refer to Chapter 2, "Legal and Financial Issues."

V. Medicaid (continued)**3. 2011 Income and Resource Levels for Medicaid^{xvi}**

	Net Income for Families; and Individuals who are Blind, Disabled or Age 65+		Resource Level (Individuals who are Blind, Disabled or Age 65+ ONLY)
	Annual	Monthly	
1	\$9,200	\$767	\$13,800
2	\$13,400	\$1,117	\$20,100
3	\$15,410	\$1,285	\$23,115
4	\$17,420	\$1,452	\$26,130
For each additional person, add:	\$2,010	\$168	\$3,015

**VI. Health Insurance Information, Counseling, and Assistance Program
(HIICAP)^{xvii}**

HIICAP provides one-on-one advice about Medicare and other insurance programs. This program is available through every county for Medicare beneficiaries, their representatives, or persons soon to be eligible for Medicare (check with Area/County Offices for Aging).

Through this program, certified counselors can help you:

- 1) Understand Medicare and private health insurance plans
- 2) Make informed decisions about important health insurance issues, such as choosing the right plan for you
- 3) Advocate on your behalf, such as making an appeal to Medicare regarding a payment
- 4) Find resource materials and resource persons to speak to organizations

Note: HIICAP insurance counseling is free and confidential. Contributions are accepted and will be used to enhance the program.

VI. Health Insurance Information, Counseling, and Assistance Program (HIICAP)^{xviii}

Resources for Health Insurance Information and Counseling

Local

Affordable Health Line

(585) 328-7000

Note: Information for persons who are uninsured or underinsured

Lifespan HIICAP Counselor:

Ron Brandwein

(585) 244-8400 x113

Oasis Volunteers Medicare Counseling Program:

(585) 730-8800

New York State

HIICAP Toll Free Hotline

(800) 701-0501

www.hiicap.state.ny.us

National

www.benefitscheckup.org or

www.govbenefits.gov

Note: For information on seniors' eligibility for state and federal programs

www.healthcare.gov

Note: Website provides consumers with public and private health coverage options tailored specifically for their needs in a single, easy-to-use tool.

-
- ⁱ Centers for Medicare & Medicaid Services. *Medicare and You 2011*. Retrieved from <http://www.medicare.gov/Publications/Pubs/pdf/10050.pdf> on December 2, 2010.
- ⁱⁱ Centers for Medicare & Medicaid Services. *Medicare and You 2011*. Retrieved from <http://www.medicare.gov/Publications/Pubs/pdf/10050.pdf> on December 2, 2010.
- ⁱⁱⁱ Centers for Medicare & Medicaid Services. *Medicare and You 2011*. Retrieved from <http://www.medicare.gov/Publications/Pubs/pdf/10050.pdf> on December 2, 2010.
- ^{iv} Centers for Medicare & Medicaid Services. *Medicare and You 2011*. Retrieved from <http://www.medicare.gov/Publications/Pubs/pdf/10050.pdf> on December 2, 2010.
- ^v Centers for Medicare & Medicaid Services. *Medicare and You 2011*. Retrieved from <http://www.medicare.gov/Publications/Pubs/pdf/10050.pdf> on December 2, 2010.
- ^{vi} Centers for Medicare & Medicaid Services. *Medicare and You 2011*. Retrieved from <http://www.medicare.gov/Publications/Pubs/pdf/10050.pdf> on December 2, 2010.
- ^{vii} US Department of Health and Human Services. Retrieved from <http://www.medicare.gov/medicarereform/landscapeintro.asp> on November 18, 2009.
- ^{viii} 2011 Low-Income Subsidy (LIS)/Extra Help Eligibility and Cost-Sharing Chart. Retrieved December 2, 2010 from http://www.mymedicarecommunity.org/library/benefits-programs/extra-help/2011-LIS-Eligibility-and-Benefits-Chart_Updated_11.17.10.pdf
- ^{ix} Centers for Medicare & Medicaid Services. *Medicare and You 2010*. Retrieved from <http://www.medicare.gov/Publications/Pubs/pdf/10050.pdf> on November 17, 2009.
- ^x Centers for Medicare & Medicaid Services. *Medicare and You 2010*. Retrieved from <http://www.medicare.gov/Publications/Pubs/pdf/10050.pdf> on November 17, 2009.
- ^{xi} New York State Insurance Department. *Basics of Long Term Care Insurance*. Retrieved from http://www.ins.state.ny.us/ltc/ltc_ins_cov_nys_part.htm on November 18, 2009.
- ^{xii} New York State Insurance Department. *Basics of Long Term Care Insurance*. Retrieved from http://www.ins.state.ny.us/ltc/ltc_ins_cov_nys_part.htm on November 18, 2009.
- ^{xiii} New York State Insurance Department. *Basics of Long Term Care Insurance*. Retrieved from http://www.ins.state.ny.us/ltc/ltc_ins_cov_nys_part.htm on November 18, 2009.
- ^{xiv} New York State Insurance Department. *Basics of Long Term Care Insurance*. Retrieved from http://www.ins.state.ny.us/ltc/ltc_ins_cov_nys_part.htm on November 18, 2009.
- ^{xv} New York State Department of Health. Retrieved from http://www.health.state.ny.us/health_care/medicaid/publications/docs/gis/09ma026.pdf on August 26, 2010.
- ^{xvi} New York State Department of Health. Retrieved from http://www.nyhealth.gov/health_care/medicaid/publications/docs/gis/10ma026.pdf on January 6, 2011.
- ^{xvii} Lifespan. *Health Insurance Information Counseling Assistance Program*. Retrieved from <http://www.lifespan-roch.org/medicare-health-insurance.htm> on November 11, 2008.
- ^{xviii} Lifespan. *Health Insurance Information Counseling Assistance Program*. Retrieved from <http://www.lifespan-roch.org/medicare-health-insurance.htm> on November 11, 2008.

NOTES

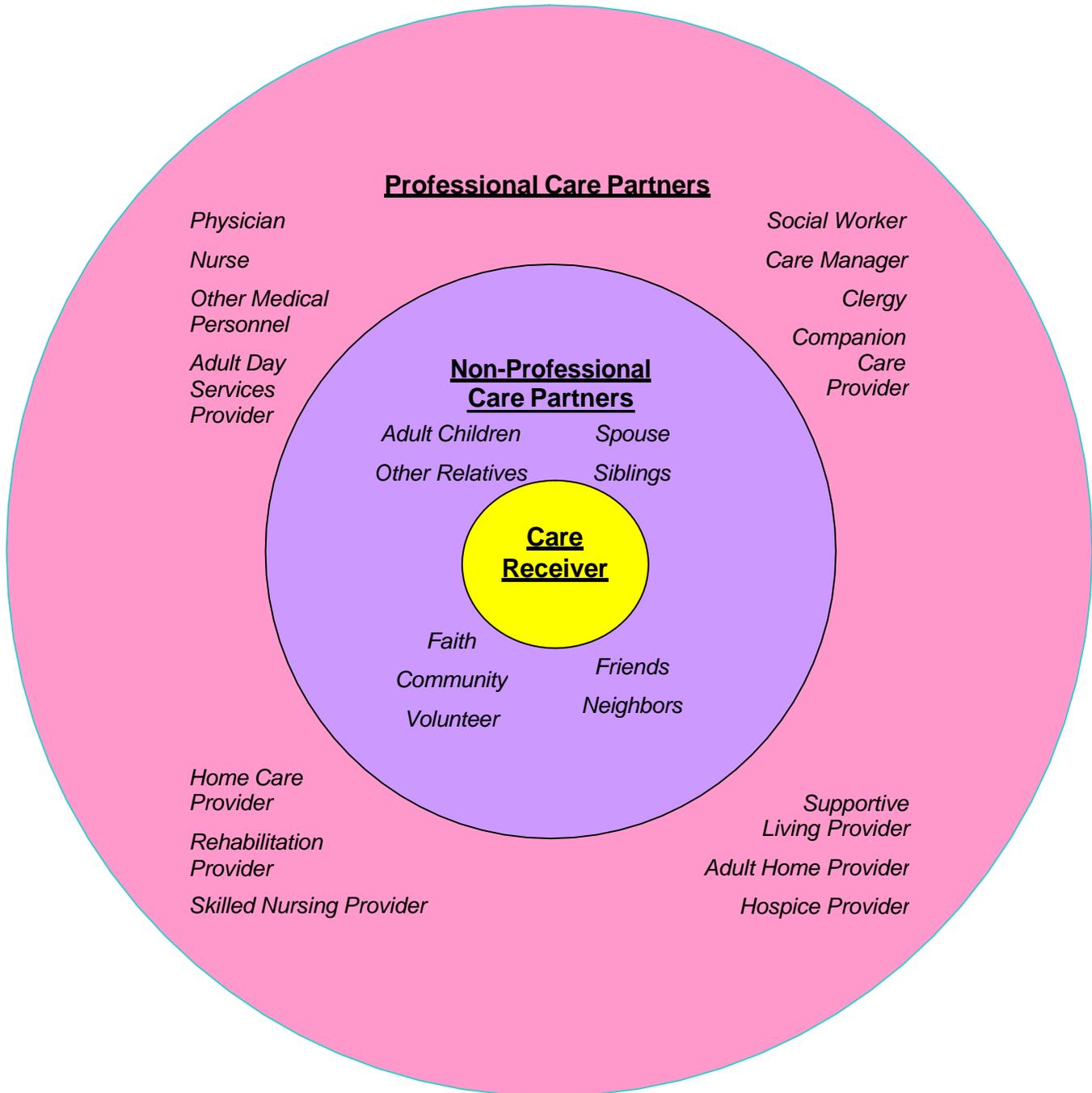
Chapter 4: Community Resources & Services

Goals for this chapter:

1. To understand the Circle of Support and Care
2. To learn where to find local, state, and national services and agencies

I. The Circle of Support and Care	64
II. Access to Community Services	65
A. Gateways to Services	65
B. Health Assessment Programs	67
C. Assistance with Health Services	68
D. Geriatricians in Monroe County	69
E. Prescription Assistance	70
F. Pharmacies that Deliver	71
G. Resources for Dental Health	72
H. Referral Sources for Counseling	73
I. Senior Centers and Senior Nutrition Sites	74
J. Food Cupboards	75
K. Other Local Resources for Nutrition	77
L. Senior Citizen Pet Assistance Program	78
M. Medical Adult Day Health Services	78
N. Social Adult Day Services	79
O. Fitness Opportunities	80
P. Transportation Services	82
III. Out of Home Respite Care	84
A. In a Skilled Nursing Facility (Nursing Home)	84
B. In an Assisted Living or Adult Home Setting	84
IV. Local Organization for Health or Help with Chronic Conditions	85
V. New York State Government Agencies and Services	88
A. Other New York State Services	89
VI. National Resources through the Federal Government	89
A. Other National Resources	91

I. The Circle of Support and Care



Caring for an elderly relative or friend can be a personal or family challenge filled with questions, concerns, anxiety and confusion. It can also be a wonderful journey into family caregiving that can ultimately bring peace, joy and satisfaction.

II. Access to Community Services (Local, State, and National)

All services require a preliminary assessment and screening to determine the client's needs and the appropriate type of care.

A. Gateways to Services

1. **Area/County Offices for Aging***: Every county has an Office for Aging (or Area Agency on Aging) to:

- Refer callers to services in that area and also to similar offices located anywhere in the nation
- Provide or subcontract a wide range of elder services

Monroe County

435 East Henrietta Rd.
Faith 3rd Floor West
Rochester 14620
(585) 753-6280
www.monroecounty.gov

Seneca County

1 DiPronio Drive
Waterloo 13165
(315) 539-1765
www.co.seneca.ny.us

Chemung County

425 Pennsylvania Ave
Elmira 14902
(607) 737-5520
www.chemungcounty.com

Steuben County

3 E. Pulteney Square
Bath 14810
(607) 664-2298
www.steubencony.org

Livingston County

8 Murray Hill Drive
Mt. Morris 14510
(585) 243-7520
www.co.livingston.state.ny.us

Wayne County

1519 Nye Rd., Suite 300
Lyons 14489
(315) 946-5624
www.co.wayne.ny.us

Ontario County

3010 County Complex Dr.
Canandaigua 14424
(585) 396-4040 or
(315) 781-1321
www.co.ontario.ny.us

Yates County

417 Liberty Street
Penn Yan 14527
(315) 536-5515
www.proactioninc.org

Schuyler County

323 Owego Street, Unit 7
Montour Falls 14865
(607) 535-7108
www.schuylercounty.us

**This list reflects the 9 counties served through the Alzheimer's Association.*

2. **NY Connects: Choices for Long-Term Care**, A program free of cost, funded by the New York State Office for Aging, offered through Monroe County to provide the following services:

- Comprehensive and unbiased information and assistance for all long-term care services and support, regardless of age

II. Access to Community Services (NY Connects, continued)

- Screening for social and medical needs, financial status, and available service options regardless of payer source
- Comprehensive needs assessment
- Service/care coordination
- Public education about planning, personal choices, and preparing financially

NY Connects: Monroe County

(585) 325-2800
www.nyconnects.org

3. Eldersource: A collaborative project within Monroe County to:

- Connect callers with services, elder resources, and care management
- Make referrals to other Monroe County services

Eldersource

(585) 325-2800
www.eldersource.org

Eldersource Collaborative Agencies:

Catholic Family Center

Aging and Adult Services

30 N. Clinton Ave., Rochester 14604
(585) 262-7050
www.cfcrochester.org

Lifespan

1900 Clinton Avenue South
Rochester 14618
(585) 244-8400
www.lifespan-roch.org

4. Passport Senior Services: A community partnership serving Jewish seniors and their care partners that offers:

- Transportation services (JFS Express)
- Care management and referrals (Jewish Family Service)
- Counseling (Jewish Family Service)
- Social, educational, and recreational activities (Jewish Community Center)

Passport Senior Services

441 East Avenue, Rochester 14607
(585) 697-3030
www.jfsrochester.org/aging

5. Information and Assistance Phone Numbers

Referrals to human services agencies	211
Non-emergency calls to City Hall, Rochester	311
Directory assistance	411
Access to traffic information	511
Cellular repair service (dialed from cell phone)	611
New York Relay (to link voice and TTY users)	711
Local telephone company business office (not available locally)	811
Police, Fire, Ambulance Emergency	911

II. Access to Community Services (continued)

6. Interpreting Services

Lifespan

(585) 244-8400 x175

Note: Sign Language Interpreters

MAS Translation

(585) 266-3990

Note: Services are provided in Dutch, English, French, and Spanish

ME Services Communication

(585) 256-6519

Note: 24-hour service. Multi-linguist oral interpreting, foreign language text translation for 82 languages and sign language interpreting.

Sign Language Connection

(585) 454-4220

(877) 454-4220 Toll-Free

www.slc-inc.com

7. In Case of Emergency:

Police, fire, or ambulance emergency response only
911

Life Line and Community Mobile Crisis Team

(585) 275-5151

(585) 275-2700 TTY

(800) 310-1160

Note: For mental health emergencies

Protective Services for Adults

(585) 753-6532

(585) 461-5698 Afterhours/Emergency

Note: For adults with a physical or mental impairment that affects their ability to protect themselves and/or provide for their basic needs who have no one else to assist them.

B. Health Assessment Programs: Using a preventative approach, geriatric specialists assist elders and their families to maintain as much independence and functioning as possible. They can provide a second opinion on a client's condition.

1. Geriatric Assessment Clinic at Monroe Community Hospital: As part of the Consultative Services Department, a team of specialists provide:

- A complete medical, social, mental, and emotional assessment on an outpatient basis which is covered by the usual health insurances.
- An evaluation which serves as a second opinion. Reports are given to the client, family, and primary physician.

Geriatric Assessment Clinic (University of Rochester)

Monroe Community Hospital

435 East Henrietta Road, Rochester 14620

(585) 760-6589

Note: Referrals can be made by family members, the individual, or a physician. Scheduling is usually several weeks in advance. Eligibility: individuals 65 and older who are not already in an institution.

II. Access to Community Services (Health Assessment Programs, continued)

2. Geriatric Consultative Services at Rochester General Hospital

Evaluation and help to:

- Find community resources
- Deal with geriatric syndromes such as dementia, incontinence, depression, chronic pain, etc.

Geriatric Consultative Services

Rochester General Hospital Medical Building
1415 Portland Avenue, 2nd Floor, Suite 200, Rochester 14621
(585) 922-0390

Note: Most insurances accepted and local residence is not required

3. Geriatrics and Medicine Associates: A group practice devoted exclusively to senior health care. Provides comprehensive care for older individuals, specializing in the evaluation and treatment of diseases and conditions of later life.

990 South Avenue, Suite 207, Rochester 14620
(585) 341-6660 (*For Geriatrics*)

<http://www.urmc.rochester.edu/hh/services-centers/geriatrics/gama/index.cfm>

4. Memory Disorders Clinic (*affiliated with U of R Medical School*) provides:

- Comprehensive assessment of persons experiencing memory problems
- Current information regarding treatment options
- Links with community resources and support services

Memory Disorders Clinic at Monroe Community Hospital

435 E. Henrietta Road, Rochester 14620
(585) 760-6221

www.memoryhelp.us

5. Memory Care Program: Provides diagnosis, treatment, and care of neurological conditions that affect the elderly and the aging nervous system. Consists of two neurologists, three geriatric psychiatrists, a geriatrician, a neuropsychologist, a nurse practitioner, and a social worker.

- Assessment, evaluation, and diagnostic workup
- Ongoing medication management and help with challenging behaviors
- Recommendations for treatment and referrals for community resources
- Information, education, and support for family caregivers
- Opportunities to participate in research studies

Memory Care Program

Building C, Suite 220
919 Westfall Road, Rochester 14618
(585) 273-5454

6. How's Your Health? An anonymous survey online (howsyourhealth.org) to:

- Help you prevent and manage health problems and concerns
- Provide health information designed for you, helpful forms for you and your doctor, and other information based on your responses.

II. Access to Community Services (Assistance with Health Services, continued)

C. Assistance with Health Services: For persons with lower income or without health insurance.

Affordable HealthLine

(585) 328-7000

Note: Sponsored by Rochester Primary Care Network. A program of Unity Health for referrals to neighborhood health services and public or discounted insurance programs.

Anthony L. Jordan Health Center

82 Holland Street, Rochester 14605

(585) 423-5800

www.jordanhealth.org

Baden Street Settlement

Mature Adult Resource Center

86 Vienna Street, Rochester 14605

(585) 325-8134

(585) 325-8129

www.badenstreet.org

Clinton Family Health Center

293 Upper Falls Blvd., Rochester 14605

(585) 922-0200

Lakeside Child and Family Center

75 Stutson St., Rochester 14612

(585) 663-2930

LinkLine

(Rochester General Health System)

(585) 922-5465

(877) 922-5465 Toll-Free

Note: Monroe, Wayne, and Ontario Counties. Sponsored by Rochester Primary Care Network. A comprehensive program of Rochester General Hospital for referrals to neighborhood health services and public or discounted insurance programs and health information.

Mercy Outreach Center

142 Webster Avenue, Rochester 14609

(585) 288-2634

Southeast Ecumenical Ministry (SEM)

(585) 271-7111

Note: For transportation; Community Health and Pharmacy Partnership (CHAPP); Food cupboard will deliver to senior citizens who qualify.

St. Joseph's Neighborhood Center

417 South Ave., Rochester 14620

(585) 325-5260

www.sjncenter.org

Women's Health Partnership

46 Prince Street, Rochester 14607

(585) 274-6978

(585) 224-3070

Note: Pays for mammograms and breast or cervical cancer screening services for persons over age 40 who are underinsured, uninsured or are income eligible.

Woodward Health Center

(Westside Health Services)

480 Genesee Street, Rochester 14611

(585) 436-3040

D. Geriatricians in Monroe County

A geriatrician is a physician who has completed a residency in either Internal Medicine or Family Medicine with an additional 1-2 years training fellowship in the medical, social, and psychological issues that concern older adults.

II. Access to Community Services (Geriatricians in Monroe County, continued)**Algase, Leslie F.**

Linden Oaks Medical Campus
30 Hagen Drive, Suite 310
Rochester 14625
(585) 641-0400

Bayer, William H

924 Jefferson Ave., Rochester 14611
(585) 463-3870

Brandon, Robert

Brandon Family Medicine
2550 Baird Road, Penfield 14526
(585) 385-0590

Cuyler, Gina

2400 Clinton Avenue South, Building H
Rochester 14618
(585) 341-7299

Dumitrescu, Emily

Unity Geriatric Associates
105 Canal Landing Boulevard, Suite 1
Rochester 14626
(585) 368-4050

Golden, Reynold

Unity Geriatrics Associates
105 Canal Landing Boulevard, Suite 1
Rochester 14626
(585) 368-4050

Heppard, Brian L.

Jewish Senior Life
Physician House Calls Program
2021 Winton Rd. S., Rochester 14618
(585) 244-5993

Iannucci, Brenda J.

1880 Ridge Road East, Suite 5
Rochester 14622
(585) 697-7775

Karlic, Alexander

Unity Geriatric Associates
105 Canal Landing Boulevard, Suite 1
Rochester 14626
(585) 368-4050

McCormick, Kevin

990 South Avenue, Suite 207
Rochester 14620
(585) 341-6660

Mehta, Jagat S.

2211 Lyell Avenue, Suite 111
Rochester 14606
(585) 429-6550

Mittereder, Richard

Unity Geriatric Associates
105 Canal Landing Boulevard, Suite 1
Rochester 14626
(585) 368-4050

Ponnuri, Jyothsna

Unity Geriatric Associates
105 Canal Landing Boulevard, Suite 1
Rochester 14626
(585) 368-4050

Postigo, Luis G.

Senior Medical Care
PO Box 191, Webster 14580
(585) 872-2710

Note: Makes house calls; Fluent in English and Spanish

Potter, Douglas H.

1742 East Ridge Road, Rochester 14622
(585) 467-7020

Tetreault, Dolores

990 South Avenue, Suite 207
Rochester 14620
(585) 341-6660

Ver, Eugene L.

62 North Main Street, Brockport 14420
(585) 637-9220

Zatreanu, Daniel

105 Canal Landing Boulevard, Suite 1
Rochester 14626
(585) 368-4050

II. Access to Community Services (Prescription Assistance, continued)

E. Prescription Assistance

EPIC Prescription Program

(800) 332-3742
(800) 290-9138 TTY

Lilly Medicare Answers

(877) 795-4559
www.lillymedicareanswers.com

Note: Patient assistance program that provides eligible Medicare recipients access to affordable medications outside of their Medicare Part D Plan.

Monroe County

Prescription Discount Plan

(585) 753-7455
www.monroecounty.gov/aging-rx.php

NYS Department of Health

Prescription Drug Prices

(866) 881-2809
www.rx.nyhealth.gov

Partnership for Prescription

Assistance

(888) 477-2669
www.pparx.org
Note: Helps link those who cannot afford medication to prescription assistance programs that provide free or nearly free medicines to eligible individuals.

Rx Outreach Program

(800) 769-3880
www.rxoutreach.com

Note: If income eligible, help on more than 50 generics regardless of age or insurance

RxAssist Patient Assistance Program Center

(401) 729-3284
www.rxassist.org

Note: Resource center with information about patient assistance programs, Medicare Part D, programs for low cost medications and other issues related to pharmaceutical access.

F. Pharmacies that Deliver

Clinton Pharmacy

821 Clinton Avenue North
Rochester 14605
(585) 530-3570
Note: Free delivery within city limits and sections of Greece

Faris Pharmacy

2050 Latta Road, Suite 2
Rochester 14612
(585) 663-6950
Note: Free delivery in Greece

Highland South Wedge Pharmacy

777 Clinton Avenue S. Rochester 14620
(585) 279-4790
Note: Free delivery within city limits

Hilton Family Pharmacy

32 Main Street, Hilton 14468
(585) 392-7979
Note: Free delivery within the village of Hilton

Medicine Shoppe

545 Titus Avenue, Rochester 14617
(585) 266-5685
Note: Free delivery within in Irondequoit and sections of the city

II. Access to Community Services (Pharmacies that Deliver, continued)**Mendon Pharmacy**

51 Assembly Drive, Mendon 14506
(585) 624-8010

Note: Free delivery within Mendon

Metro Health East Pharmacy

153 West Commercial Street
East Rochester 14445
(585) 662-5562

Note: Free delivery within Monroe County

Miller's Pharmacy

201 Scottsville-West Henrietta Road
West Henrietta 14584
(585) 889-3510

Note: Case-by-case basis, please call

Monroe Pharmacy LLC

2672 West Ridge Road
Rochester 14626
(585) 723-1755

Note: Free delivery

Pleasant Street Apothecary

87 Clinton Avenue North
Rochester 14604
(585) 241-9000

Note: Free delivery within city limits and sections of Monroe County

R Drugs Etc.

222 Alexander Street, Suite 2700
Rochester 14607
(585) 262-3760

Note: Free delivery within city limits

Saratoga Pharmacy

192 Lyell Avenue, Rochester 14608
(585) 458-2326

Note: Free delivery within Monroe County, emergency delivery is \$5

W A B Pharmacy

4414 Culver Road, Rochester 14622
(585) 323-1470

Note: Free delivery. Case-by-case basis, please call

Warrens Pharmacy Inc.

595 Jefferson Avenue, Suite 1
Rochester 14611
(585) 235-3225

Note: Free delivery within Monroe County

Wilson Center Pharmacy

800 Carter Street, Rochester 14621
(585) 338-4973

Note: Delivers within Monroe County for a \$6 charge

G. Resources for Dental Health**Anthony Jordan Health Center**

82 Holland St., Rochester 14605
(585) 423-5887

Note: Medicaid accepted, Spanish/English accommodated

Brown Square (Westside Health Services)

322 Lake Ave., Rochester 14608
(585) 672-1710

Note: Sliding scale fee based on income, discounts up to 75% available, Medicaid, variety of languages can be accommodated

Eastman Dental Center

625 Elmwood Ave., Rochester 14620
(585) 275-5051

158 Orchard St., Rochester 14611
(585) 263-6599

Note: 10% discount on services for those 65+ years of age, Medicaid accepted

Eastman Dental Center (Sibley Tower Building)

228 East Main Street, Rochester 14604
(585) 263-6599

Note: Open Mon.-Fri., Sliding Scale application, Medicaid accepted

II. Access to Community Services (Dental Health Services, continued)**Highland Dental Care**

990 South Ave., Suite 020, Rochester
14620 (585) 341-6888

Note: Medicaid accepted

Monroe Community College**Dental Hygiene Clinic**

(585) 292-2045

Note: Reduced cost dental hygiene care, services are free to anyone 62+, clinic is closed during summer months

Monroe County Dental Society

(585) 385-9550

Note: Provides the name of a private dentist in your residential area

Oak Orchard Community Health Center

300 West Avenue, Brockport 14420

(585) 637-5394 x2

Note: Sliding fee scale based on income, Medicaid accepted

Pluta Dental Center at Rochester General Hospital

1425 Portland Avenue

Rochester 14621

(585) 922-4103

Note: No sliding fee scale, Medicaid accepted

Q Dental Group PC

Note: 20% discount to seniors without insurance.

Gates

2300 Buffalo Rd., Suite 400A

Rochester 14624

(585) 426-3020

Greece

1100 Long Pond Rd., Suite 115

Rochester 14626

(585) 225-7790

Q Dental Group PC, continued**Irondequoit**

1338 East Ridge Rd., Rochester 14621

(585) 544-2003

Note: Those younger than 60 receive 15-20% off

Penfield

43 Willow Pond Way

Willow Pond Office Park, Suite 107

Penfield 14526

(585) 421-8168

Strong Memorial Hospital**Dental Clinic**

601 Elmwood Ave., Rochester 14642

(585) 275-5531

Note: No sliding fee schedule, Medicaid accepted

Unity Dental Group**Greece**

2440 Ridgeway Ave., Rochester 14626

(585) 295-1890

Note: No sliding fee schedule, Medicaid accepted

Penfield

2060 Fairport Nine Mile Point Road

Penfield 14526

(585) 377-5810

Note: 10% discount for seniors without insurance

Rochester

909 West Main St., Rochester 14611

(585) 368-3800

Note: No sliding fee schedule, Medicaid accepted

Woodward Health Center (Westside Health Services)

480 Genesee Street, Rochester 14611

(585) 436-3040 (Press 8 for Dental)

Note: Sliding fee scale based on income, discounts up to 75% are possible with a minimum payment of \$30, Medicaid accepted

II. Access to Community Services (continued)

H. Referral Sources for Counseling (see also yellow pages for "Counselors")

**Alzheimer's Association,
Rochester Chapter
Ann Lib Kozel Counseling Program**
435 E. Henrietta Rd., Rochester 14620
(585) 760-5400
(800) 272-3900 24-hour helpline
www.alz.org/rochesterny

**Catholic Family Center,
Aging and Adult Services**
30 N. Clinton Ave., Rochester 14604
(585) 262-7050
www.cfcrochester.org

City of Rochester
www.thecityofrochester.org/counseling
Note: General Listings

Jewish Family Service
441 East Ave., Rochester 14607
(585) 461-0110
www.jfsrochester.org

Mental Health Association
320 N. Goodman St., Rochester 14607
(585) 325-3145
www.mharochester.org

PATHS Program
1900 S. Clinton Ave., Rochester 14618
(585) 325-2800
*Note: 60 or older; diagnosis of anxiety
and/or depression. Partnership of
Eldersource, Catholic Family Center,
Jewish Family Service and the Mental Health
Association*

I. Senior Centers and Senior Nutrition Sites

*Note: Must be 60+; recommended donation is \$3.00 per meal; please call for hours.
and transportation resources.*

**Catholic Family Center
Older Adult Resource Center**
800 Carter Street, Rochester 14621
(585) 336-4340

Centro de Oro
817 East Main Street, Rochester 14605
(585) 256-8900 x23

Chili Senior Center
3235 Chili Avenue, Rochester 14624
(585) 889-6185

Community Place Senior Center
145 Parsells Avenue, Rochester 14609
(585) 224-2616
(585) 288-0021 x173

Greece Community & Senior Center
3 Vince Tofany Blvd., Rochester 14612
(585) 723-2425

Henrietta Senior Center
515 Calkins Road, Henrietta 14467
(585) 334-4030

Hilton-Parma Senior Center
59 Henry Street, Hilton 14468
(585) 392-9030

Irondequoit Senior Center
154 Pinegrove Ave., Rochester 14617
(585) 336-6078

Italian American Community Center
150 Frank Dimino Way
Rochester 14624
(585) 594-8882

*Note: Supper Club 60 on Tuesday and
Thursday only*

Lifespan's Downtown Senior Center
25 Franklin Street, Rochester 14604
(585) 232-3280

M.A.R.C. of Baden Street
86 Vienna Street, Rochester 14605
(585) 325-8134
(585) 358-8129

Northwest Rochester Senior Center
71 Parkway, Rochester 14608
(585) 277-0813

II. Access to Community Services (Senior Centers & Senior Nutrition Sites, cont.)

Ogden Senior Center

200 South Union Street
Spencerport 14559
(585) 352-3250

Pittsford Senior Center

3750 Monroe Avenue, Pittsford 14534
(585) 248-6235

Southwest Senior Center at Montgomery Neighborhood Center

10 Cady Street, Rochester 14608
(585) 436-3090

Sweden Senior Center

133 State Street, Brockport 14420
(585) 637-8161

Webster Senior Center

979 Bay Road, Webster 14580
(585) 872-7088

Wheatland Senior Center

22 Main Street, Scottsville 14546
(585) 889-1284

Meal Sites Only

Association for the Blind & Visually Impaired/Goodwill Services

422 S. Clinton Avenue
Rochester 14610
(585) 697-5714

Meal Sites Only, continued

Dunn Towers Apartments

100 Dunn Tower Drive, Rochester 14606
(585) 277-0813

Friendly's Breakfast Club

2425 West Henrietta Road
Rochester 14623
(585) 424-1370

362 Greece Ridge Center

Mall Entrance #6
(585) 227-5520

Monroe County Office for the Aging Meal Program

Monroe Community Hospital
435 E. Henrietta Road, Rochester 14620
(585) 753-6280

Supper Club 60

Wegmans Chili-Paul Market Café

3175 Chili Avenue, Rochester 14624
(585) 753-6281

*Note: Dinners served on Tuesdays from
4-5pm. Requested is \$4.*

J. Food Cupboards

Note: Appointment, identification, or referral may be required. Some locations are open only certain days and times. To find a food cupboard by location, call LifeLine at (585) 275-5151.

Antioch Baptist Church

(585) 454-6096
*Notes: Serves north side of the city of
Rochester. Hot meal on Thursdays.*

Baden Street Settlement

(585) 325-4910
Note: Serves 14605 only

Bethany House

(585) 454-4197
Note: Serves women and Children only

Bethesda Church of God in Christ

(585) 546-6067
Note: Serves Monroe County

Blessed Sacrament

(585) 442-5279
*Note: Serves 14607 only. Provides a supper
program on weeknights.*

Brockport Food Cupboard

(585) 637-8169
Note: Serves 14420 only

II. Access to Community Services (Food Cupboards, continued)**Caledonia Parish Pantry**

(585) 538-6181

*Note: Serves 14423 and 14511 only***Calvary St. Andrew's Food Cupboard**

(585) 325-4950

*Note: Serves 14620 only***Catholic Family Center**

(585) 232-2050

*Note: Serves Monroe County***Charles Settlement House**

(585) 328-5453

*Note: Serves 14614 only***Church of Love Food Pantry**

(585) 454-3270

*Note: Serves 14608, 14611, and 14619***Community Place
of Greater Rochester**

(585) 288-0021

*Note: Serves 14605 (parts of), 14607,
14609, 14610, 14621*

(585) 327-7200

*Note: Serves 14605 and 14609***Dimitri House**

(585) 325-1796

*Note: Serves 14604, 14605, 14607 and
14609***East Rochester Food Shelf**

(585) 586-0525

*Note: Serves 14445 only***Fairport/Perinton Food Cupboard**

(585) 425-7410

*Note: Serves 14450 only***Family Restoration Center**

(585) 328-9270

*Note: Serves 14608, 14611, and 14619***FISH (Friends in Service Here)**

(585) 453-2370

*Note: Serves Honeoye Falls, Mendon,
and West Bloomfield***Grace Covenant Church**

(585) 889-2130

*Note: Serves Gates/Chili area***Greece Ecumenical Food Shelf**

(585) 453-2370

*Note: Serves 14612, 14615, 14616 and
14626***Greece Food Shelf**

(585) 277-5370

*Note: Serves 14616 only***Hamlin Community Bread and Thread**

(585) 964-7420

*Note: Serves 14464 only***House of Mercy**

(585) 266-2580

*Note: Serves Monroe County***Ibero-American Action League**

(585) 454-1430

*Note: Serves Monroe County***Irondequoit Community Cupboard**

(585) 336-9107

*Note: Serves Irondequoit***Jewish Family Service**

(585) 461-0110

*Note: Serves Penfield, Brighton,
Irondequoit, and Pittsford. Serves
Jewish individuals regardless of
residence.***Life Solutions of Hamlin**

(585) 964-7420

*Note: Serves Hamlin***Light House Assembly of God**

(585) 254-2226

*Note: Serves 14606 and 14613***Meek (Maplewood-Edgerton
Emergency Cupboard)**

(585) 458-4692

*Note: Serves 14613 and 14615***Memorial AME Zion Church**

(585) 546-5997

Note: Serves Rochester area

II. Access to Community Services (Food Cupboards, continued)

Mt. Vernon Baptist Church

(585) 454-5622

Note: Serves 14605

Neighbor to Neighbor

(585) 503-8891

Note: Serves 14450

New Bethel CME Church

(585) 232-3815

Note: Serves city area

New Life Presbyterian Church

(585) 473-1240

Note: Serves 14620 preferably

Our Lady of Perpetual Help

(585) 467-2725

Note: Serves 14621

Penfield Ecumenical Food Shelf

(585) 234-0799

Note: Serves 14625 and 14426

Perinton Food Shelf

(585) 425-7410

Note: Serves 14450

Pittsford Food Cupboard

(585) 264-9860

Note: Serves 14534, 14445, 14607, 14610, 14618, and 14620

Reformation Lutheran Church

(585) 454-3367

RHAFT

(585) 453-2370

Note: Serves 14623 and 14543

Rochester Family Mission

(585) 436-7523

Note: Serves 14606, 14608 and 14619

Salvation Army

(585) 987-9500 x2268

Note: Serves Monroe County

SEM/SeaFish

(Southeast Ecumenical Ministry)

(585) 271-5355

Note: Provides food to case managers and social workers for their Monroe County clients

Spencerport Ecumenical Food Shelf

(585) 277-4917

Note: Serves Spencerport and North Chili

St. Andrew's

(585) 338-1764

Note: Serves sections of 14609 and 14621

St. Mark's and St. John's Episcopal Church

(585) 654-9229

Note: Serves zip code 14609 only

St. Theodore's Social Ministries

(585) 429-5360

Note: Serves zip code 14606 only

SWEM

(Southeast Ecumenical Ministry)

(585) 235-4491

Note: Serves 14606, 14608, 14611, 14614, 14615 and 14619

Third Presbyterian Church

(585) 271-6513

Note: Serves 14604, 14607, and 14620

Volunteers of America

(585) 454-1151 x7416

Note: Serves 14611 and 14613

Webster Community Chest

(585) 671-2060

Note: Serves residents of Webster

II. Access to Community Services (Nutrition, continued)

K. Other Local Resources for Nutrition

Angel Food Ministries

(877) 366-3646 24-hour helpline
www.angelfoodministries.com

Note: Angel Food Ministries is a non-profit, non-denominational organization dedicated to providing food relief and contributing to benevolent outreaches in communities throughout the United States.

Foodlink

(585) 328-3380 or (800) 724-9632
www.foodlinkny.org

Note: Foodlink is the food bank of the Genesee Valley and of the Finger Lakes region. The agency distributes goods donated by food manufacturers and retailers to a network of over 550 programs that feed the hungry. Foodlink does not serve individuals directly, but can refer them to an emergency agency that serves their neighborhood.

Medical Nutrition Therapy through Jewish Senior LifeM

2021 Winton Road South, Rochester 14618
(585) 784-6530 (Outpatient Rehabilitation)
www.jewishseniorlife.org

Note: This program offers nutritional diagnostic, therapeutic and counseling services for disease management. Therapy is provided by Registered Dietitians, who assist patients with diabetes, chronic renal insufficiency, end-stage renal disease and a variety of conditions and diseases, including but not limited to obesity, cardiac complications, eating disorders, and allergies.

L. Senior Citizen Pet Assistance Program

1. Scope of Services

- Helps senior citizens with small veterinary expenses or donated pet food (as supply of food is available). Qualifications:
 - Monroe County residency
 - Income of \$18,000 or less
- Also available: Rochester Pet-Friendly Apartment List

2. Primary Payer

- Donations welcome

3. Resources

Humane Society at Lollypop Farm
(585) 223-1330 x251
www.lollypop.org

M. Medical Adult Day Health Care Services

Medically supervised services provided during the day (typically do not provide overnight care) within a facility setting. All patients are required to be eligible for nursing home placement and have a physician's order for the day services.

II. Access to Community Services (Medical Adult Day Health Services, continued)

New York State law provides general standards under which the adult day programs operate, and the NYS Department of Health is responsible for quality assurance. The standards to which the services must adhere relate to admission, assessment, staffing qualifications, and patients' rights.

1. Scope of Services

- Case management
- Social work
- Skilled nursing
- Medication
- Social/recreational activities
- Exercise and wellness programs
- Therapies: physical, occupational, speech
- Personal care services
- Nutrition/Meals
- Transportation
- Dental hygiene
- Referral: laboratory, x-ray

2. Primary Payer

- Medicaid (Long-Term Home Health Care Program or P.A.C.E. programs)
- Blue Choice (limited)
- Private pay
- Self
- Long-term care insurance
- Other

3. Resources

DayTimers

2021 Winton Rd. S., Rochester 14618
(585) 424-1420 x711
www.jewishseniorlife.org

Home Connection

at St. Ann's Community
1500 Portland Ave., Rochester 14621
(585) 697-6361
www.stannscommunity.com

Independent Living for Seniors - Hudson Center

2066 Hudson Ave., Rochester 14617
(585) 922-2800
www.rochestergeneral.org

LifeTimes Adult Day Care

1400 S. Plymouth Ave., Rochester 14611
(585) 328-3590
www.fairportbaptisthomes.org

Meadowbrook at The Highlands

100 Hahnemann Tr., Pittsford 14534
(585) 383-1700 x235
www.stronghealth.com

MS Achievement Center at Unity

2300 Buffalo Road, Building 600B
Rochester 14624
(585) 368-6470
www.unityhealth.org

Skalny Day Break at St. John's Home

150 Highland Ave., Rochester 14620
(585) 256-1300
www.stjohnsliving.org

Unity Adult Day Services at Park Ridge

1555 Long Pond Road
Rochester 14626
(585) 723-7260
www.unityhealth.org

Unity Adult Day Services at Parkway

700 Island Cottage Road
Rochester 14612
(585) 368-6130
www.unityhealth.org

II. Access to Community Services (Social Adult Day Services, continued)

N. Social Adult Day Services

Non-licensed day programs that provide a variety of services during the day (typically do not provide overnight care) for the elderly.

1. Scope of Services

- Supervision
- Medication reminders
- Care management
- Some personal care (varies)
- Social/recreational activities
- Exercise and wellness programs
- Meals

2. Primary Payer

- Medicaid (for those in a Long-Term Home Health Care Program)
- Private pay
- EISEP (offered through Catholic Family Center)
 - o Helps pay all or a part of cost of a limited number of days of social adult day programs

3. Resources

Caring House at Grand Vie

2140 Five Mile Line Rd., Penfield 14526
(585) 381-0680
www.grandvie.com

Finer Day at Atria of Greece

150 Towngate Road, Rochester 14626
(585) 225-3010
www.atriaseniorliving.com

Generations Elder Care

2400 Chili Avenue, Rochester 14624
(585) 247-3490
www.generations-care.com

Home & Heart at the Cathedral

287 Flower City Pk., Rochester 14615
(585) 697-6086
www.stannscommunity.com

Home & Heart of Penfield

1957 Five Mile Line Rd., Penfield 14526
(585) 697-6087
www.stannscommunity.com

Lifespan Adult Day Services

1900 S. Clinton Ave., Rochester 14618
(585) 244-8400 x108
www.lifespan-roch.org

Note: For older adults with intellectual disabilities

Seniorsfirst Adult Day Program

1530 East Avenue, Rochester 14610
(585) 770-1800
www.seniorsfirstonline.com

Unity Adult Day Services at Cornerstone

2300 Buffalo Road, Bldg. 600 A
Rochester 14624
(585) 368-6480
www.unityhealth.org

Unity Adult Day Services at St. Bernard's

2260 Lake Avenue, Bldg 5
Rochester 14612
(585) 254-7990
www.unityhealth.org

Note: For those with Alzheimer's disease and other forms of dementia

Unity Adult Day Services at St. Mary's

89 Genesee Street, Rochester 14611
(585) 368-3942
www.unityhealth.org

II. Access to Community Services (continued)**O. Fitness Opportunities****Bally Total Fitness**

www.ballyfitness.com

Greece

3160 W. Ridge Rd., Rochester 14626
(585) 720-5410

Henrietta

1225 Jefferson Rd., Rochester 14623
(585) 427-7890**JCC of Greater Rochester**

1200 Edgewood Avenue

Rochester 14618

(585) 461-2000

www.jccrochester.org

OASIS

259 Monroe Ave., Rochester 14607

(585) 730-8800

www.oasisnet.org

Planet Fitness

www.planetfitness.com

Gates (Gates Plaza)

50 Spencerport Rd., Rochester 14606

(585) 426-6989

Greece

4423 Dewey Avenue, Rochester 14616

(595) 865-9691

Henrietta (Southtown Plaza)

3333 West Henrietta Road

Rochester 14623

(585) 272-0099

Irondequoit (Planet Fitness Plaza)

1850 East Ridge Road

Rochester 14622

(585) 544-9213

Rochester Athletic Clubs

www.rochesterathletic.com

Brighton/Henrietta

21 Goodway Drive, Rochester 14623

(585) 424-2222

Rochester Athletic Clubs, continued

Greece

190 Greece Ridge Center Drive

Rochester 14626

(585) 225-8888

Greece (Stoneridge Plaza)

1544 W. Ridge Rd., Rochester 14615

(585) 621-3333

Note: Women only

Perinton

(Perinton Hills Shopping Center)

687 Mosley Road, Fairport 14450

(585) 223-1111

Note: Women only

Pittsford (Pittsford Colony)

3400 Monroe Ave., Pittsford 14618

(585) 899-6666

*Note: Women only***World Gym**

www.worldgym.com

1717 East Avenue, Rochester 14618

(585) 271-0440

187 West Main Street, Webster 14580

(585) 265-4530

YMCA of Greater Rochester

www.rochesterymca.org

444 East Main Street, Rochester 14604

(585) 546-5500

BayView Family YMCA

1209 Bay Road, Webster 14580

(585) 671-8414

Chester F. Carlson Metro Center

444 East Main Street, Rochester 14604

(585) 325-2880

Eastside Family YMCA

1835 Fairport Nine Mile Point

Penfield 14526

(585) 341-4000

II. Access to Community Services (Fitness Opportunities, continued)

YMCA of Greater Rochester, cont.

Maplewood Family YMCA
25 Driving Park, Rochester 14613
(585) 647-3600

Monroe Family YMCA
797 Monroe Ave., Rochester 14607
(585) 271-5320

Northwest Family YMCA
730 Long Pond Rd., Rochester 14612
(585) 227-3900

Southeast Family YMCA
111 East Jefferson Rd., Pittsford 14534
(585) 385-4665

Southwest Family YMCA
575 Thurston Road, Rochester 14619
(585) 328-9330

Westside Family YMCA
920 Elmgrove Road, Rochester 14624
(585) 247-3501

P. Transportation Services

Transportation services are usually available only with advance notice and for specific purposes

Emergencies

911

TRansportation ACcess (TRAC)

(585) 325-2800

Note: Must be 60 years of age or older and reside in Monroe County. TRAC operators are available 24 hours a day and will help connect you with an appropriate travel solution. TRAC Case-Management services are provided free of charge and ride fees for transportation may vary based upon eligibility.

Subsidized Transportation

Lift Line

(585) 426-3520 Administration
(585) 224-8330 Scheduling/
Applications

www.rgrta.org

Note: For persons with disability

Taxis with Senior Discount

A-1 Transportation

(585) 474-0237

Handicapped Parking Permits

(Permanent and Temporary)

Rochester City Clerk's Office

City Hall #100A

(585) 428-6617

Note: For information and application forms; for other towns or counties, contact clerk's office

Medical Motor Service

(585) 654-6030 Administration

(585) 654-7030 Trip Information

www.medicalmotors.org

Note: Car or wheelchair van

Regional Transit Services Buses

(585) 654-0200 Customer Service

(585) 288-1700 Route Information

www.rgrta.com

Medical Transportation for

Medicaid Recipients

(585) 288-4680

Note: After authorization by DHS

II. Access to Community Services (Transportation Services, continued)

Services by Donation/Areas Served

(leave message for call back)

City East Senior Transportation Ministry

(585) 266-6570

DOVE (Webster)

(585) 760-4734

Elderberry Express (Pittsford)

(585) 248-6237

FISH (Friends in Service Here)

(585) 453-2370

*Note: Serves Henrietta, Honeoye Falls,
Lima, Mendon, Rush, and W.
Bloomfield*

(585) 277-5370

Note: Serves Charlotte and Greece

Good Samaritan Transportation

(585) 336-1777

*Note: For members of 6 Roman
Catholic parishes through Irondequoit
Senior Ministries*

Irondequoit FaithLink

PO Box 17606, Rochester 14617

(585) 288-4099

www.medicalmotors.org

*Note: For residents 60 and older
through Irondequoit Sr. Transp. Ministry*

Jewish Family Service -

JFS Express

(585) 461-0110 x108

www.jfsrochester.org

Lifespan's Give a Lift

(585) 244-8400 x142

SEM/SEAFISH (Southeast Ecumenical Ministries Friends In Service Here)

(585) 271-7111

*Note: Serves zip codes, 14604, 14607,
14610, 14618, 14620*

Sisters Care

(585) 458-8540

www.sisterscaressj.org

SOFI Elderbus Transportation

(585) 377-8117

*Note: For residents of Perinton or
Fairport*

STAR (Catholic Family Center)

(585) 262-7050

www.cfcrochester.org

*Note: Non-medical home support to frail
elders including transportation and other
services*

Tender Loving Family Care, Inc.

(585) 637-0333

www.tenderlovingfamilycare.com

Private Services

Able Medical Transportation Inc.

(585) 756-2222

ABVI-Goodwill

(585) 697-5732

www.abvi-goodwill.com

*Note: For blind or visually-impaired
clients*

Apple Transportation Inc.

(585) 427-7330

www.appletransportationinc.com

Companion Care of Rochester

(585) 546-1600

(800) 414-2355

www.companioncareofroch.net

Genesee Transportation Inc.

(585) 256-1510

www.geneseetrans.com

Monroe Medi-Trans

(585) 454-6211

www.monroeambulance.com

Rochester Medical Transportation, Inc

(585) 288-3444

www.rmtrans.com

II. Access to Community Services (Transportation Services, continued)

Wheelchair Services

Able Medical Transportation Inc.
(585) 756-2222

Genesee Transportation
(585) 256-1510

Medicab
(585) 342-7150
www.medicabny.com

Note: For those on Medicaid

Rochester Medical Transportation Inc.
(585) 288-3444
www.rmtrans.com

Services for Seniors, LLC
(585) 461-1190
www.servicesforseniors.com

III. Out of Home Respite Care

A. In a Skilled Nursing Facility (Nursing Home)

1. Scope of Services

- Provides a break for the care partner using a planned short-term stay (a few days or weeks).

2. Primary Payer

- Private pay
- Long-term care insurance (if covered)
- Medicaid long-term home health care programs

Many nursing homes provide short-term respite for persons who need skilled care. See listings in Chapter 7, “Health Systems,” and in Chapter 10, “Skilled Nursing Facilities.”

Secure a contract in writing to assure that your respite need will be met.

B. In an Assisted Living or Adult Home setting (for those needing custodial care)

1. Scope of Services

- Provides a break for the care partner using a planned short-term stay (a few days or weeks)

2. Primary Payer

- Private pay
- Long-term care insurance (if covered)

Many assisted living facilities or adult homes provide short-term respite for persons who need assistance with activities of daily living. See Chapter 7, “Health Systems,” and Chapter 9, “Alternative Housing Options.”

Secure a contract in writing to assure that your respite need will be met

IV. Local Organizations for Health or Help with Chronic Conditions

The Advocacy Center

590 South Ave., Rochester 14620
 (585) 546-1700 Voice & TDD
www.advocacycenter.com

AIDS Care

259 Monroe Avenue, Rochester 14607
 (585) 545-7200
www.aidscares.org

Al-Anon/Ala-Teen

(585) 288-0540
www.aisrochester.org

Alcoholics Anonymous

(585) 232-6720
www.rochester-ny-aa.org

Alcoholism and Substance Abuse Services, Finger Lakes Regional Office

109 S. Union Street, Rochester 14607
 (585) 454-4320

Alzheimer's Association, Rochester Chapter

435 E. Henrietta Road, Rochester 14620
 (585) 760-5400
 (800) 272-3900 24-hour helpline
www.alz.org/rochesterny

Alzheimer's Dementia Outreach Program

Cornerstone Center Building
 2300 Buffalo Road, Rochester 14624
 (585) 368-6305
www.unityhealth.org

American Cancer Society, Finger Lakes Region

1400 N. Winton Road, Rochester 14609
 (585) 288-1950
 (800) 227-2345 Information Line
 (866) 228-4327 TTY
www.cancer.org

American Diabetes Association, Rochester Regional Chapter

160 Allens Creek Road, Rochester 14618
 (585) 458-3040
 (800) 342-2383
www.diabetes.org

American Heart Association (and Stroke), Rochester Division

3500 Winton Place., Suite 4
 Rochester 14623
 (585) 426-4050
 (800) 242-8721
www.heart.org

American Liver Foundation of NYS

75 Maiden Lane, New York, NY 10038
 (585) 271-2859
 (800) 465-4837
www.liverfoundation.org

American Lung Association, Finger Lakes Region

1595 Elmwood Ave., Rochester 14620
 (585) 442-4260
www.lungusa.org

The Arc of Monroe County

1000 Elmwood Avenue, Suite 500
 Rochester 14620
 (585) 271-0660
www.arcmonroe.org
Note: For persons with intellectual disabilities.

Arthritis Foundation, Rochester Office

3300 Monroe Avenue, Suite 319
 Rochester 14618
 (585) 264-1480
www.arthritis.org

Association for the Blind and Visually Impaired (ABVI) - Goodwill

422 S. Clinton Avenue, Rochester 14620
 (585) 232-1111
www.abvi-goodwill.org

Center for Disability Rights

497 State Street, Rochester 14608
 (585) 546-7510
 (585) 546-7512 TDD
www.cdrnys.org

IV. Local Organizations for Health or Help with Chronic Conditions (cont.)**CLIC-on-Health Program**

www.cliconhealth.org

Note: Provides up-to-date consumer health information and directory of local health resources

Continuing Developmental Services (CDS)

860 Hard Road, Webster 14450

(585) 341-4600

www.cdsunistel.org

Note: For persons with intellectual disabilities.

CP Rochester (Cerebral Palsy)

3399 Winton Road S., Rochester 14623

(585) 334-6000

www.cprochester.org

Epilepsy Foundation of Rochester

1650 South Ave., #300, Rochester 14620

(585) 442-4430

(800) 724-7930

www.epilepsyfoundation.org

Fibromyalgia Association of Rochester NY

PO Box 90331, Rochester 14609

(585) 234-9416

www.farny.org

Note: Support Groups in Greece and Brighton

Finger Lakes Developmental Disabilities Services Office (FLDDSO)

620 Westfall Road, Rochester 14620

(800) 797-7650

(585) 461-8500

www.omr.state.ny.us

Gilda's Club

225 Alexander Street, Rochester 14607

(585) 423-9700

www.canceraction.org

Heritage Christian Services

349 West Commercial Street, Suite 2795

East Rochester 14445

(585) 340-2000

www.heritagechristianservices.org

Note: For persons with intellectual disabilities.

Ibero-American Action League, Inc.

911 East Main Street, Rochester 14605

(585) 256-8900

www.iaal.org/en/

LDA Life and Learning Services

339 East Avenue, Suite 420

Rochester 14604

(585) 263-3323

www.ldarochester.org

Lifetime Assistance, Inc.

425 Paul Road, Rochester 14624

(585) 426-4120

www.lifetimeassistance.org

Note: For persons with intellectual disabilities

Lupus Foundation of America, Genesee Valley Chapter

500 Helendale Road, Suite 153

Rochester 14609

(585) 288-2910

www.lupusgvc.org

Mended Hearts, Greater Rochester Chapter

(585) 234-1538

www.mendedheartsrochester.org

Note: For people with heart disease & families

Multiple Sclerosis Center

University of Rochester Medical Center

601 Elmwood Avenue, Rochester 14642

(585) 275-7854

IV. Local Organizations for Health or Help with Chronic Conditions (cont.)

Muscular Dystrophy Association

1425 Jefferson Road, Suite 19
Rochester 14623
(585) 424-6560
www.mda.org

Narcotics Anonymous, Rochester

PO Box 40255, Rochester 14604
(585) 234-7889 24-hour hotline
www.rochesterny-na.org

National Alliance on Mental Illness (NAMI), Rochester Chapter

320 North Goodman Street, Suite 102
Rochester 14607
(585) 423-1593
www.namirochester.org

National Council on Alcoholism & Drug Dependence, Rochester Area (NCADD-RA)

1931 Buffalo Road, Rochester 14624
(585) 426-8000
www.nydas.org

National Kidney Foundation of Upstate NY

15 Prince Street, Rochester 14607
(585) 697-0874
(800) 488-2277
www.kidneynyup.org

National Multiple Sclerosis Society, Upstate NY Chapter

1650 South Avenue, Suite 100
Rochester 14620
(585) 271-0801
(800) 344-4867
www.nationalmssociety.org

National Parkinson Foundation (NPF) Center of Excellence

University of Rochester Medical Center
Department of Neurology
919 Westfall Road, C-220
Rochester 14618
(585) 341-7569

Parkinson Support Group of Upstate NY, Inc.

PO Box 23204, Rochester 14692
(585) 234-5355
www.psgunys.org

PRALID, Inc.

2 Townline Circle, Rochester 14623
(585) 442-6420
www.pralid.org

Note: For persons with head trauma, brain injury or intellectual disabilities

Rochester Area Association of Homes & Services for the Aging

3445 Winton Place, Suite 222
Rochester 14623
www.rahsa.org

www.choicesforseniors.org

Note: An association of not-for-profit and public long-term care facilities with links to member facilities.

Rochester/Finger Lakes Eye & Tissue Bank

524 White Spruce Blvd., Rochester 14623
(585) 272-7890
(800) 568-4321
www.rehpb.org

Rochester Hearing and Speech Center

www.rhsc.org

Greece

3199 Ridge Road West, Rochester 14626
(585) 723-2140
(585) 723-3856 TTY

Mobile Services Division

(585) 271-0680 x680
(800) 232-8644

Rochester

1000 Elmwood Avenue, Door 1
Rochester 14620
(585) 271-0680 x873
(585) 442-2985 TTY

Webster

1170 Ridge Road, Webster 14580
(585) 872-8073
(585) 442-2985 TTY

IV. Local Organizations for Health or Help with Chronic Conditions (cont.)

Rochester Rehabilitation Center

1000 Elmwood Avenue, Suite 600
Rochester 14620

(585) 271-2520

(585) 442-1088 TTY

www.rochesterrehab.org

Note: Driver evaluation available

Samaritan Women Inc.

875 East Main Street, Suite 390

Rochester 14605

(585) 454-1870

Sickle Cell Disease Association

(800) 421-8453

www.sicklecelldisease.org

URMC Movement & Inherited Neurological Disorders Unit

919 Westfall Road, Building C, #220

Rochester 14618

(585) 341-7500

www.stronghealth.com

V. New York State Government Agencies and Services

EPIC Prescription Program

(800) 332-3742

(800) 290-9138 TTY

www.health.state.ny.us

Health Insurance Information, Counseling, and Assistance Program

(800) 701-0501

www.hiicap.state.ny.us

NYS Attorney General's Office

(585) 546-7430 Rochester

(800) 771-7755 State

www.oag.state.ny.us

Note: Senior citizen rights; suspicion of fraud by charity or professional fundraiser.

NYS Commission on Quality of Care and Advocacy for Persons with Disabilities

(800) 624-4143

www.cqc.state.ny.us

NYS Consumer Protection Board

(800) 697-1220

www.nysconsumer.gov

Note: Complaints about a product, service, or merchant.

NYS Crime Victims Board

(800) 247-8035

(888) 289-9747 TTY

www.cvb.state.ny.us

NYS Department of Health:

For Adult Homes

(866) 893-6772

For Home Health Care Agencies

(800) 628-5972

For Hospitals

(800) 804-5447

For Nursing Homes

(888) 201-4563

www.nyhealth.gov

Note: To obtain medical records or make complaints about patient care.

NYS Division of Human Rights

(585) 238-8250 Rochester

(888) 392-3644 State

www.dhr.state.ny.us

Note: For age and disability discrimination

NYS Division of Veterans Affairs

(585) 546-4510 Rochester

(888) VETSNY (838-7697) State

www.veterans.ny.gov

NYS Domestic Violence Hotline

(800) 942-6906 English

(800) 942-6908 Spanish

(800) 818-0656 TTY English

(800) 780-7660 TTY Spanish

www.nyscadv.org

NYS Guide to Senior Housing

www.seniorhousing.state.ny.us

V. New York State Government Agencies and Services (continued)

NYS Insurance Department

(800) 342-3736

www.ins.state.ny.us

Note: A Guide for Long Term Care Insurance

NYS Office for Aging

(800) 342-9871

www.aging.ny.gov

Note: Provides access to many web sites

NYS Office of Mental Health

(800) 597-8481

www.omh.state.ny.us

Note: For questions about mental health services, to find a mental health service provider, or to make a complaint

Other NYS Services

Finger Lakes Donor Recovery Network

(585) 272-4930

www.donorrecovery.org

International Hearing Society,

Hearing Aid Helpline

(800) 521-5247

www.ihsinfo.org

NY Online Access to Health (NOAH)

www.noah-health.org

NY Statewide Senior Action Council, Inc.

(800) 333-4374

www.nysenior.org

Note: Advocacy issues

NYS Public Service Commission

(888) 275-7721 Information

(800) 335-2120 Opinion Line

(800) 342-3377 Helpline

www.dps.state.ny.us

Note: Information about gas, electric, water, steam, telephone, cable TV, billing

Promoting Respect, Integrity, and Dignity in Elders (P.R.I.D.E.)

www.monroecounty.gov/aging-pride.php

NYS Department of Health

Prescription Drug Prices

(866) 881-2809

www.rx.nyhealth.gov

Note: Drug costs for all counties in NYS

NYS Health Facilities Association Inc.

(518) 426-4800

www.nyshfa.org

Note: Nursing home financing, admissions, or other issues

NYS Physician Profile Website

(888) 338-6999

www.nydoctorprofile.com

Note: Lists your doctor's education, practice, hospital affiliations

VI. National Resources through the Federal Government

Administration on Aging

(202) 619-0724

www.aoa.gov

Note: Elder care issues/legislation, links to other US government agencies

Agency for Healthcare Research and Quality (AHRQ)

(301) 427-1364

www.ahrq.gov

VI. National Resources through the Federal Government (continued)**Alzheimer's Disease Education and Referral (ADEAR)**

(800) 438-4380
www.nia.nih.gov/alzheimers

American Parkinson Disease Association (APDA)

(800) 223-2732
www.apdaparkinson.org

Centers for Disease Control and Prevention

(800) 232-4636
(888) 232-6348 TTY
www.cdc.gov

Eldercare Locator

(800) 677-1116
www.eldercare.gov
Note: Identifies resources in the U.S. Also includes "In Touch" action plan to help families find ways to assist older relatives.

Healthcare 411

(301) 427-1364
www.healthcare411.org
Note: A weekly audio newscast featuring latest findings on current health topics produced by the Agency for Healthcare Research and Quality (AHRQ)

Healthfinder.gov

Note: Information in English & Spanish for seniors, care partners; self-help and support groups

Internal Revenue Service (IRS)

(800) 829-1040
www.irs.gov

Medicare

(800) MEDICARE (633-4227)
www.medicare.gov

Medline Plus

www.medlineplus.gov
Note: Information on 800 health topics

National Adult Day Services Association

(877) 745-1440
www.nadsa.org

National Association for Home Care and Hospice

228 Seventh St. SE, Wash. DC 20003
(202) 547-7424
www.nahc.org

National Association of Professional Geriatric Care Managers

(520) 881-8008
www.caremanager.org

National Center on Elder Abuse

(302) 831-3525
www.ncea.aoa.gov

National Council on Aging

(202) 479-1200
www.ncoa.org
Note: A non-profit organization with a national network of more than 14,000 organizations and leaders

National Family Caregivers Association

(800) 896-3650
www.nfcacares.org
Note: Newsletter "Take Care!" - self care for the family caregiver

National Health Information Center

(800) 336-4797
www.health.gov/nhic
Note: A central source for information and referral for health questions

National Hospice and Palliative Care Organization

(800) 658-8898
www.nhpco.org

National Institute of Health, Senior Health

www.nihseniorhealth.gov

National Institute of Mental Health

(866) 615-6464
(866) 415-8051 TTY
www.nimh.nih.gov

National Parkinson's Foundation, Inc.

(800) 327-4545
www.parkinson.org

VI. National Resources through the Federal Government (continued)**National Senior Citizen's Law Center**

(202) 289-6976 East Coast
 (213) 639-0930 West Coast
www.nsclc.org

Senior Citizens' Resources

(800) 333-4636
www.usa.gov/Topics/Seniors.shtml

Social Security Administration

(800) 772-1213
 (800) 325-0778 TTY
www.ssa.gov

U.S. Census Bureau

(800) 562-5721 Regional Office
www.census.gov

U.S. Dept. of Health & Human Services

(877) 696-6775
www.hhs.gov

U.S. Dept. of Veterans Affairs

(800) 827-1000
www.va.gov

Other National Resources**Alzheimer's Association: CareFinder**

(585) 760-5400
 (800) 272-3900 24-hour helpline
www.alz.org/carefinder
Note: "CareFinder" booklets available at local chapter

American Association of Homes and Services for the Aging

(202) 783-2242
www.aahsa.org

American Association of Retired Persons (AARP)

(888) 687-2277
www.aarp.org

American Society on Aging

(800) 537-9728
www.asaging.org

Children of Aging Parents

(800) 227-7294
www.caps4caregivers.org

Other National Resources. continued**Family Caregiver Alliance**

(800) 445-8106
www.caregiver.org
Note: Articles on long-distance caregiving

The Gerontological Society of America

(202) 842-1275
www.geron.org

H.E.L.P. for Seniors

(310) 533-1996
www.help4srs.org
Note: Information, planning, problem solving services

Mayo Clinic Website

www.MayoClinic.org
Note: Clear information on diseases, drugs, healthy living, coping skills

Michael J. Fox Foundation (MJFF)

(212) 509-0995
www.michaeljfox.org

National Stroke Association

(800) STROKES (787-6537)
www.stroke.org

Older Women's League (OWL)

(800) 825-3695
www.owl-national.org

Parkinson's Action Network (PAN)

(800) 850-4726
www.parkinsonsaction.org

Parkinson's Disease Foundation

(800) 457-6676
www.pdf.org

People Living with Parkinson's

www.plwp.org

Supportive Care Coalition

(503) 215-5053
www.supportivecarecoalition.org

Well Spouse Association

(800) 838-0879
wellspouse.org

NOTES

Chapter 5: Caregiving 101 & Tools for Planning

Goals for this chapter:

1. To understand family dynamics
2. To learn techniques to improve communication skills
3. To gain an understanding of changing caregiving roles and responsibilities
4. To learn how to care for oneself to relieve caregiving stress
5. To recognize the importance of planning for care
6. To learn information about developing an individual care plan
7. To review sample forms and documents to aid in planning

I. Effective Skills for Communication	95
A. Preparing for My Visit	95
B. Developing My Skills as a Good Health Advocate	95
C. Listening Effectively to another Person	96
D. Confronting another Person about Behavior	97
E. Compromise/Negotiation	97
II. Individual and Family Responsibilities	98
A. The Range of Caregiving Tasks	98
B. The Changing Demands of Caregiving: How to Handle Them	98
C. The Importance of Planning	99
III. Developing an Individual Care Plan	99
A. The Person’s Wishes and Desires	99
B. Important Information to Gather	100
C. Obtaining an Assessment	100
D. Researching Community Resources	102
E. Developing a Care Plan	102
F. Gathering Information on Various Topics	103
G. Arranging for Important Legal Documents	103

(over)

IV. Documents for Elder Care Planning	104
A. Short-Term Caregiving Action Plan	104
B. Income and Expense Worksheet	105
C. Organizing Records	106
V. Care for the Care Partner	110
A. Ten Warning Signs of Care Partner Stress	110
B. Tips for Care Partners	111
C. Education Programs for Care Partners	112
D. Help for Grandparent Caregivers	112
VI. Economics of Caregiving	114
VII. Reflections	115
A. Life Situations of Older Persons and Their Care Partners	115
VIII. Elder Abuse and Prevention	117
A. Occurrence of Elder Abuse	117
B. Description of Elder Abuse	117
C. Sources of Elder Abuse	118
D. Resources for the Prevention of Elder Abuse	118

I. Effective Skills for Communication

A. Preparing for My Visit

1. Call ahead with one or two questions.
2. Role-play with myself about how the conversation might develop.
3. If I am a care partner, I ask myself: "Do I react in my role as an adult or in my role as a child of my parent?"
4. If I am a care receiver, I ask myself, "Do I respect the adult dignity of my son, my daughter, or other younger relative? Or do I treat them as if they were still small children?"

Tips for the care partner¹:

- If parents still treat you like a baby, tell them how you feel or what you do not like.
- If they manipulate you by making you feel guilty, the best reaction may be no reaction. Try a simple acknowledgement that you hear what they are suggesting.
- If they are ruthlessly controlling, you may need to see and talk to them less often.
- If they are very critical of your appearance, partner, lifestyle, etc., let them know that you will walk away if they continue to criticize – and then do it.

B. Developing My Skills as a Good Health Advocate

Tools for talking to physicians and other health care professionals:

1. Prepare for an office visit with a list of concerns.
2. Notice the sensitivity of the professionals to the older person's needs.
3. Check out the situation:
 - What is happening?
 - Why is it happening? What can be done about it?
 - How do I encourage the person and other members of the family to make needed changes?
 - Who else could help me?
4. Keep a small notebook to log the following:
 - Daily events
 - Changes in the person's status or symptoms
 - Results of visits with health professionals
 - Name and phone number of each contact
 - Recommendations
 - Decisions
5. Keep a written health record with the person's medical insurance cards for accuracy and convenience in working with health professionals:
 - The person's medical conditions
 - Medications (type, dosage, frequency)
 - Name and number of physicians, pharmacies, health agencies, therapists
 - Persons to be notified
6. Get a second opinion if there are any doubts about the person's care.

I. Effective Skills for Communication (continued)

C. Listening Effectively to another Personⁱⁱ



The characters which the Chinese use to represent the idea “to listen” show us important aspects of this skill.ⁱⁱⁱ

1. I need to have both time and attention to give in order to listen well. If not, I ask the person to respect my situation and come back another time.
2. I use active listening skills:
 - I keep the focus on the other person.
 - I encourage the person to talk through the problem.
 - I refrain from interrupting, arguing, or criticizing (reducing stress for the other).
 - I delay giving advice, suggestions, or solutions; preaching; using logic; interrogating; diagnosing; or minimizing. For the moment, I even delay praising or reassuring the person.
 - My immediate goal is to encourage the other person to describe the problem and to help that person take responsibility for figuring out the next steps more clearly for themselves. Advice and giving options can come later, if needed.
 - I encourage the other person to go on talking about the problem by giving close attention with an encouraging nod or word.
 - If the other gets bogged down, I begin a statement with the word "**YOU:**" "**You seem . . .**"/"**You sound . . .**"/"**You feel . . .**"
This approach helps me avoid beginning my statements with "**I . . .**" or "**My . . .**" which takes the ball away from the other person. It is very tempting to speak about myself, my own problems, or my similar experiences.
 - I focus on feelings, not content
 - I finish my statements with a word describing the emotions that I believe I hear beneath the other person's words or gestures.
 - I give attention to facial expressions, gestures, and especially tones of voice. These all show feelings under the words.
 - I try to reflect these feelings back to the speaker, because bringing feelings out into the light can be very helpful. This approach also keeps me from bogging down in the details of the problem.

I. Effective Skills for Communication (continued)

D. Confronting another Person about Behavior

Situation: *The other person's behavior is a problem for me. The other is either not aware of or not responsive to my problem (this is not a discussion or disagreement about ideals or values, but addresses concrete episodes).*

Response: *I try to help the other person become more aware of or more responsive to my legitimate feelings and needs (as distinct from my wants).*

1. It is wise to avoid the following:
 - Putdowns: These violate the other person's dignity and leave him or her feeling powerless and resentful.
 - Arguing: This turns two people into adversaries rather than simply people who disagree about something. Blaming statements often come forth that have nothing to do with the immediate question.
 - Power Plays: Although these may get the short-term result I want (and may be necessary in a life-threatening situation), the price I pay may be expensive, less trust or willingness to listen to me.
 - Bribing/Instant Bargaining: Doing these too soon may reinforce unreasonable expectations and may undermine self-esteem.
2. Tools for Assertiveness:

These statements are called "I messages" because I take responsibility for communicating my own feelings, needs, and behavior.

What I say	How I say it	Why I do it this way
<u>I state my feelings</u> about the other person's behavior.	"I feel angry/sad/upset/afraid" . . . etc.	My feelings are a reality that others cannot deny or argue over.
<u>I describe the situation.</u>	". . . when you do this or that" . . . (be specific)	If the person's behavior is bothering me, I describe it, because I cannot expect the other to read my mind.
<u>I announce the consequences.</u>	". . . because this or that happens (or may happen)."	I explain the tangible effect the behavior has on me.

E. Compromise/Negotiation

1. I use active listening skills to hear the other person's feelings and needs.
2. I make use of "I messages" to communicate my own feelings and needs.

The goal is to work out a solution that both can accept -- a "win/win" result, rather than a "win/lose" effect.
3. I use strategies to reduce conflict:
 - S l o w d o w n !
 - Lower your voice and speak slowly.

I. Effective Skills for Communication (continued)

- Maintain eye contact.
- Remain objective.
- Focus on the issue.
- Leave the scene!
- Notify others of the conflict.

II. Individual and Family Responsibilities

A. The Range of Caregiving Tasks

Check off the tasks that you undertake in the chart at right:



I ...

deal with ...

assist with ...

arrange for ...

monitor ...

manage ...

provide ...

If you are doing all or most of the above, you are doing too much!

Personal Care	[]
Financial Concerns	[]
Personal Affairs	[]
Agency Services	[]
Medical Care	[]
Institutional Care	[]
Housekeeping	[]
Home Maintenance	[]
Housing Decisions	[]
Shopping	[]
Meal Preparation	[]
Dietary Needs	[]
Transportation	[]
Leisure Time Activities	[]
Special Occasions	[]
Companionship	[]
Pastoral Care	[]

B. The Changing Demands of Caregiving: How to Handle Them^{iv}

1. If possible, talk with your parents while they are still healthy. Encourage them to develop their will, power of attorney, and health care proxy.
2. Do not assume that your parents or older family members can take care of each other. Drop in to see what is really happening. Be supportive and solution-oriented, rather than critical.
3. As they age, discuss with them the possibility of having a geriatrician (a physician who is trained in health care for the elderly) evaluate them. Do you and the older adult have adequate information about the physical, emotional, and social situation as it changes, so that informed decisions can be made?

II. Individual and Family Responsibilities (continued)

4. If you suspect loss of memory or mental functioning, act immediately to get a medical assessment by a specialist. Some impairments are reversible if treated early (see Chapter 6, "Sensory Impairments and Mental Health").
5. Do you tend to do too much for aging relatives when they are capable of managing for themselves with some help? Can you set some boundaries?
6. Do your family members have strongly different views about how to care for the older person?
7. Is there reluctance to accept professional help, either by the older person or the care partner? Consider a facilitator or mediator if there is a difficult situation.
8. Is now the time to plan a family conference together?
 - To recognize and prioritize problems
 - To share mutual concerns, listen to one another, and recognize limits
 - To discuss caregiving responsibilities and how to distribute specific tasks (rather than putting them all on one person who could then become a "martyr" while the rest act out guilt by criticizing)
 - To determine what alternatives are available and to build collaborative partnerships among family, friends, neighbors, and health providers, in order to establish at least a short term plan of action (for a week or two)
 - To revisit the care plan and make adjustments as needed

Resource

"Lotsa Helping Hands" (*a service of the Alzheimer's Association*)

www.alzheimers.lotsahelpinghands.com/eldercare/home

Note: Lotsa Helping Hands is a private, web-based caregiving coordination service that allows family, friends, neighbors and colleagues to create a community and assist with the daily tasks that become a challenge when caring for an aging loved one or during long-term caregiving.

C. The Importance of Planning^v

Medical and technological advances are allowing individuals to live longer which means that issues related to our personal and most likely our care-partner's long term care needs will need to be addressed. Taking proactive measures to address these issues will help one avoid undue emotional and financial stress and will allow for the person's wishes, goals, and needs to be met. Furthermore, by advance care planning one can establish a spectrum of resources that will address your loved one's needs as they change.

III. Developing an Individual Care Plan^{vi}

A. The Person's Wishes and Desires

Begin by having a dialogue with your loved one regarding what their feelings are as they age. It is important to have their wishes be honored and it is their right to make their own choices related to the type of care they desire. This dialogue should be initiated as soon as possible while your loved one is still able to openly communicate their wishes and desires. If this is not possible, you may want to seek assistance from a professional.

III. Developing an Individual Care Plan^{vii} (continued)

The following questions will be helpful in this dialogue:

1. Has the person already made any future long term plans? If yes, what are these plans?
2. Would the person like to remain in their home with assistance? If yes, would they prefer family or paid care partners?
3. Does the person want to explore alternative housing (e.g. live with a relative, senior housing, assisted living)?
4. Which family members would the person like to assist with long term care issues?
5. Has the person taken any steps in the area of healthcare and financial planning (e.g. long term healthcare insurance, Living Will, power of attorney)?

B. Important Information to Gather

Help your loved one gather important information that will be necessary in case medical treatment is needed, a crisis occurs, or upon the person's death.

Information that you will want to collect includes:

- Social Security #
- Medicare #
- Medicaid #
- Veterans Administration Claim #
- List of Insurance Plans (e.g. medical, car, life)
- List of Doctors and their Telephone Numbers
- Medical History
- Medications and their Dosages
- Financial Information
- Legal Papers (e.g. Will)
- List of Medical Devices (e.g. pacemakers, hearing aids, or bifocals)
- Driver's License Number
- Passport Number
- Name of Mortuary, Location of Burial Plot, and Deed
- Birth Certificate

C. Obtaining an Assessment

Geriatric Care Managers can provide comprehensive assessments to determine an older adult's individual care needs and identify services that are appropriate or necessary for safe and comfortable living. They have extensive knowledge about the costs, quality, and availability of services in their community.

The assessment should evaluate the person's medical, mental, physical, social, environmental, and financial status. This process is used to determine the person's capabilities, and will be used as a baseline for moving forward in the development of an individual care plan.

III. Developing an Individual Care Plan (continued)

Note: NYS does not require certification for Geriatric Care Managers; therefore, ask for credentials such as a degree in the field of human services (Social Work, Nursing, or an equivalent background) as well as experience in the delivery of services to the elderly and their families.

1. Components of a Comprehensive Geriatric Assessment

- Basic activities of daily living (ADLs) - focus on the elder's daily self-care activities (e.g. eating, dressing, bathing, using the toilet).
- Instrumental activities of daily living (IADLs) - focus on activities that enable a person to live independently in their home (e.g. shopping, cooking, taking medication, managing finances, using a telephone).
- Advanced activities of daily living - focus on more independent activities (e.g. driving, travel, gardening)
- Physical Status
 - Medical History
 - Physical Examination
 - Vision
 - Hearing
 - Continence
 - Gait
 - Balance
 - Chronic Pain
 - Sexual Dysfunction
 - Substance Abuse
- Cognitive and Mental Health
 - Cognitive Dysfunction
 - Anxiety
 - Depression
 - Specific psychiatric symptoms (e.g. paranoia, delusions, behavior abnormalities)
- Social
 - Social Interaction (e.g. Senior Center)
 - Social Support Resources (e.g. friends)
 - Identify present and potential care partners
- Environmental
 - Evaluate the elder's physical environment (e.g. determine safety, physical barriers, bathroom access)
 - Special Needs (e.g. transportation to doctors, shopping)
- Legal - Financial Evaluation (e.g. financial resources, ability to manage own finances, advance medical directives)
- Nutrition
- Sleep
- Medications and Medication Compliance

III. Developing an Individual Care Plan (continued)

D. Researching Community Resources

Upon the completion of the comprehensive geriatric assessment, community resources that will help meet the older adult's needs should be researched and accessed if necessary. It may also be beneficial to arrange a "family" meeting in order to inform all appropriate people of what the older adult's needs consist of, of what action has already been taken, and their desired plan for moving forward.

During this meeting, it would also be helpful if individuals volunteer to assist in various caregiving tasks (e.g. household chores, transportation, etc.).

Ask for help rather than doing everything yourself. In dealing with complicated health care, legal, and financial systems, everyone needs a good advocate or collaborator. Look for social support from your family, friends, and neighbors as well as assistance from community agencies. County Offices of Aging are an important source of information and referral to community agencies and services.

E. Developing a Care Plan

A trained professional such as a Geriatric Care Manager, will help develop a care plan that is based on the person's elder's needs, wishes and desires, finances, access to community resources, and support system. The information from the comprehensive geriatric assessment will be used to outline an action plan will focus on their needs, any treatment they may need (e.g. physical therapy, medical), housing requirements, and utilization of community resources.

If the person is at home, the referral services listed in Chapter 4 may be helpful in designing a care plan (see Chapter 8, "Home Care"). Options for home care are usually self-paid and available in a wide range of services and fees.

If the person is in the hospital or a skilled nursing facility, seek advice immediately from the nurse manager, social worker, or other discharge planner on the unit or floor to identify some options for care after discharge.

Schedule a discharge planning meeting with hospital or facility staff, including possible home care agencies. The person and/or family members are entitled to a written discharge plan (see Chapter 11, "Hospital and Urgent Care").

It is important to continually monitor the elder, and as their needs change, the care plan will need to be modified to address their evolving needs. The spectrum of care may include home care, adult day care, respite care, and residential care (e.g. assisted living, skilled nursing facility, etc).

For caregivers of a person with disabilities, who may be unable to plan for himself or herself, it is essential to plan for future care in the event that the caregiver is no longer able to continue:

Future Care Planning Services

(585) 271-0660 x306

(585) 402-7840

www.futurecareplanning.org

Note: A partnership of Al Sigl Center, Lifespan, and ARC of Monroe County

III. Developing an Individual Care Plan (continued)

F. Gathering Information on Various Topics

Depending on the status and individual needs of the elder, it will be important to obtain as much information as possible about relevant topics such as aging, caregiving, dementia, depression, alternative housing options, Alzheimer's Disease, Parkinson's Disease, Hospice, etc. Refer to the Table of Contents listed in this guide for more information on various topics related to caregiving.

G. Arranging for Important Legal Documents

It is wise to obtain professional advice in arranging for important legal document such as a Last Will and Power of Attorney. Please refer to Chapter 2, "Financial and Legal Issues" for detailed information on these topics. Advance directives such as a Health Care Proxy, Do Not Resuscitate Order, and Medical Orders for Life-Sustaining Treatment should all be explored to ensure that the older person's wishes and desires are made known while they are still competent. By having these documents in place, there will be less stress for the family as their loved one's wishes are known and can be honored. Please refer to Chapter 12, "End of Life Issues" for detailed information on these topics.

IV. Documents for Elder Care Planning

A. Short-Term Caregiving Action Plan

Primary Issues Or Concerns	Communication among Care Partners & Care Receivers	Informal Support: Other Family, Friends, Neighbors	Professional Services and Community Resources	Legal and Financial Concerns	Time Line	Evaluation <i>How did we respond to the need?</i> <i>Was it a good plan?</i> <i>Does anything need to be changed?</i>	Family Conference <i>Do we need a professional facilitator?</i>
YOUR PLAN							

IV. Documents for Elder Care Planning (continued)

B. Income and Expense Worksheet (Materials by John K. Best, CLU, ChFC, Ed.D)

Annual Income	
Assets Converted to Cash @ ___%	\$
Bond/Unit Trust Income	\$
Capital Gains	\$
Certificates of Deposit Interest	\$
Deferred Compensation 401-K Plan	\$
Individual Retirement Account	\$
Keough Self-Employed Plan	\$
Money Market Interest	\$
Municipal Bond Interest	\$
Mutual Fund Income	\$
Other Retirement Plans	\$
Pension/Retirement Plan	\$
Personal Annuity Plan	\$
Profit Sharing/Thrift Plan	\$
Rental/Real Estate Income	\$
Savings Bank Interest	\$
Social Security Benefits	\$
Stock Dividends	\$
T-Bills/Notes Interest	\$
Tax Shelter Income	\$
Wages, Salary, Tips	\$
Other Income _____	\$
_____	\$
_____	\$

Total Annual Income = \$ _____

Total Annual Income
 Subtract Total Annual Expenses - _____
 Annual overage or shortfall = \$ _____

Annual Expenses	
Auto Loan/Lease	\$
Cable/Internet fees	\$
Charge Accounts	\$
Charitable Contributions	\$
Clothing	\$
Club Dues	\$
Education	\$
Electricity	\$
Entertainment, Recreation, Gifts	\$
Food	\$
Furniture, Decorating	\$
Garbage Pickup	\$
Gas (heating)	\$
Health Insurance	\$
Household Maintenance, Repair	\$
Income Taxes	\$
Long-Term Care Insurance	\$
Medical	\$
Mortgage Payment/Rent	\$
Other Insurance	\$
Other Loan Payments	\$
Personal Loans	\$
Property/Casualty Insurance	\$
Real Estate Taxes	\$
Retirement Plan Contributions	\$
Savings and Investments	\$
Second Home Mortgage	\$
Social Security Taxes	\$
Telephone	\$
Transportation	\$
Water	\$
Other Expenses	\$

Total Annual Expenses = \$ _____

IV. Documents for Elder Care Planning (continued)

C. Organizing Records

1. Medical Information^{viii}

Doctors (Include dentists and other specialists)			
Name	Specialty	Address	Phone Number

Other Health Care Providers (Include In-Home Care Providers)			
Name	Specialty	Address	Phone Number

Current Medications		
Name of Prescription Drug/Non-Prescription/Vitamins	Dosage	Frequency Taken

IV. Documents for Elder Care Planning (continued)

2. Insurance Information

Type of Insurance	Company or Agent	Location of Policy
<input type="checkbox"/> Medicare <input type="checkbox"/> Other <u>Primary</u> Health	ID #:	
Medigap (supplemental)		
Medicaid	ID #:	
Dental		
Disability		
Long-Term Care		
Homeowners/Renters		
Life		
Liability		
Auto		
Other:		

3. Legal/Advance Health Care Directives Information

Type of Document	Dated	Location of Document(s)
Will		
Power of Attorney		
Health Care Proxy or (in some states) Durable Medical Power of Attorney		
Living Will		
HIPAA authorizations to release medical information to agent(s) & family		
Birth Certificate		
Marriage License/Divorce Decree		
Property Deed(s)		
Safe Deposit Box (location of keys)		
State & Federal Tax Records		
Other (pre-nuptial, death certificates)		

IV. Documents for Elder Care Planning (continued)

Name of Attorney(s)	Firm/Address	Phone Number

4. Financial Information

Sources of Income (Pension, Social Security, etc.)	Monthly Amount	How Paid? (Check, Direct deposit)

Debts	Lender/Address	Phone Number
Mortgage(s)		
Loan(s)		
Taxes		
Other:		

Bank Accounts	Name of Bank/Institution	Account/ID Number
Checking		
Savings		
Credit Card(s)		
Other:		

Investment Information			
Type	Institution/Broker	Phone Number	Location of Statements
Stocks			
Bonds			
Annuities			
CDs (Cert. of Deposit)			
Mutual Funds			
<input type="checkbox"/> IRA <input type="checkbox"/> Other			
Money Market			
Other:			

IV. Documents for Elder Care Planning (continued)

Accountant/Investment Broker/Financial Planner		
Name	Address	Phone Number

5. Funeral/Burial Instructions

Clergy Name:	Phone:
Funeral Home:	Phone:
Burial Plot Location:	
Organ/Tissue Donation: Yes ____: any needed organs/tissues ____ only those specified below No ____	
Instructions:	
Location of required documentation:	

6. Contact Persons

a. Closest Relative(s)/Next of Kin

Name	Relationship	Address	Phone Number

b. Close Friends/Neighbors

Name	Address	Phone Number

IV. Documents for Elder Care Planning (continued)

Resource

Lifespan: Peace of Mind Planning

1900 Clinton Ave. S., Rochester 14618
(585) 244-8400 x116

Note: Helps you organize all your important legal, financial documents/accounts, and health information with attention to your needs. Tells you what you are missing and written recommendations for future action are provided along with a six month follow up call

V. Care for the Care Partner

A. Ten Warning Signs of Care Partner Stress^{ix}

Denial about the care receiver's condition and its effects.	<i>I know he/she is going to get better.</i>
Anger at the care receiver or others or because treatment seems ineffective or nonexistent.	<i>If this happens again, I'll scream.</i>
Social withdrawal , avoiding friends and activities.	<i>I don't care about getting together any more.</i>
Depression begins to break one's spirit and one's ability to cope.	<i>I don't care anymore.</i>
Anxiety about facing another day and what the future holds; feeling scared or inadequate.	<i>What happens when he/she needs more care than I can provide?</i>
Exhaustion making it nearly impossible to complete needed daily tasks; feeling rushed.	<i>I'm too tired for this. I have no energy.</i>
Sleeplessness caused by a never ending list of concerns.	<i>What if he/she falls?</i>
Irritability, impatience, complaining, or moodiness that can trigger negative responses and reactions from others.	<i>Leave me alone!</i>
Lack of concentration making it difficult to perform daily tasks.	<i>I was so busy, I forgot our appointment.</i>

V. Care for the Care Partner (Care Partner Stress, continued).

Health problems beginning to take a toll, both mentally and physically. Three out of four care partners report that they have not visited a doctor on a regular schedule and have missed scheduled appointments.

I can't remember the last time I felt well.

B. Tips for Care Partners

1. Set realistic expectations for yourself.
2. Recognize your own needs, desires, and limitations.
3. Do not judge yourself harshly for negative feelings. "Be gentle with yourself."
4. Communicate openly and honestly.
5. Do not make unilateral decisions or choices regarding caregiving responsibilities.
6. Consult as widely as possible.
7. Do not expect a spouse or child to feel the same way as you do in a caregiving situation.
8. Keep parent care in perspective. Remember that you need to maintain and nurture other relationships.
9. If you never say NO, what is your YES worth?
10. Take responsibility for your decisions. Say, "I choose" rather than "I should," "I must," "I have to," "I ought." Say "I won't" rather than "I can't."
11. Be responsible to others, not for others.
12. Allow yourself to be able to make mistakes and to change your mind.
13. Learn to utilize available resources.
14. Schedule "me time" to rejuvenate yourself, which is vital to your own mental and physical health. What are you doing to take care of yourself?
 - Take time to laugh and play
 - Take pleasure in bath/shower/hot tub/massage
 - Focus on the moment
 - Relate to family/friends/pets
 - Engage in a hobby/gardening/cooking
 - Organize/make to-do lists
 - Exercise/yoga/Tai Chi/etc.
 - Shop
 - Enjoy music/radio/TV/games
 - Read/write/respond to mail
 - Tackle repairs/cleaning
 - Meditate/pray

V. Care for the Care Partner (continued)

C. Education Programs for Care Partners

Alzheimer's Association Learning Institute

435 E. Henrietta Rd., Rochester 14620
(585) 760-5400

www.alz.org/rochesterny

Note: Dementia-specific caregiver educational seminars, forums, annual symposium, and web-based education

Caregiver Support Services of the Alzheimer's Association

435 E. Henrietta Rd., Rochester 14620
(585) 760-5470

Note: Caregiver educational programs for anyone caring for an aging loved one

The Center for Compassion and Healing at Lifetime Care

3111 Winton Road S., Rochester 14623
(585) 475-8800

www.compassionandhealing.org

Note: Offers "Caregiver Wellness Days" and caregiver support group

Lifespan

1900 Clinton Ave. S., Rochester 14618
(585) 244-8400

www.lifespan-roch.org

Mental Health Association of Rochester/Monroe County

339 East Avenue, Rochester 14604
(585) 325-3145

www.mharochester.org

Note: Quarterly educational programs on topics related to older persons and mental health

D. Help for Grandparent Caregivers

1. Background:

According to the 2005 U.S. Census, more than six million children live in grandparent-headed households. In New York, more than 400,000 children live in households headed by a grandparent or other relative.* Of the 11,551 children in the Rochester area living with a relative other than their parents, 92.3% are being cared for by their grandparents.** This number continues to rise because of the absence of one or both of the parents due to AIDS, alcohol/substance abuse, incarceration, death, divorce, poverty and the increase in teen pregnancies.

2. Current Law in New York State:

Unless grandparents are recognized as primary caregivers by the states where they live, they often cannot register children for school, get medical care, or secure government assistance.

Effective in New York State on January 5, 2004, the **Grandparent Caregivers' Rights Act** provides recognition of the role of grandparents in keeping together families at risk.

The law clarifies grandparent custody rights and requires notification of grandparents of children who are removed from parental homes by Child Protective Services.

V. Care for the Care Partner (continued)

3. Resources for Grandparent Caregivers

Local

Grandparents for Grandparents Support Group

Henrietta Town Hall: Main Meeting Room

475 Calkins Road, Henrietta 14467

Note: Support group meets the 4th Thursday of every month from 6:30pm-8:30pm. Childcare provided in meeting room A. For more information, call Anita at Henrietta Recreation Department & Youth Bureau (585) 359-2540.

Kinship Care Resource Network

Catholic Family Center

(585) 262-7048

www.cfcrochester.org

Note: Lead agency for this network which provides an integrated care management approach for grandparents and other kinship caregivers, linking kinship caregivers and their families to services they need: support groups, information and referral, education, counseling, social supports, legal assistance, financial counseling, case management, respite and advocacy

Skip Generations Grandparents Who Are Raising Grandchildren Group

Southwest Family Resource Center

89 Genesee Street, Rochester 14611

Note: An educational support group for grandparents who are raising their grandchildren. The group is held on Tuesdays from 11:30am-1:30pm and Thursdays from 11:30am-1:30pm. For more information, contact Linda James at (585) 436-0370 x302.

State

Kinship Navigator

(877) 4KININFO

(877) 454-6463

Note: Toll-free information & referral statewide system with an educational component whose main goal is to provide education about issues of kinship caregivers and how various systems can help these families

V. Care for the Care Partner (Resources for Grandparent Caregivers, continued)

National

AARP Grandparent Information Center

601 E Street, NW, Washington, DC 20049
(888) 687-2277

The Brookdale Foundation Group

950 Third Avenue, New York, NY 10022
(212) 308-7355
www.brookdalefoundation.org

Child Welfare Information Gateway

1250 Maryland Avenue SW, 8th Floor, Washington, DC 20024
(800) 394-3366
www.childwelfare.gov

Child Welfare League of America

2345 Crystal Drive, #250, Arlington, VA 22202
(703) 412-2400
www.cwla.org

Children's Defense Fund

25 E. Street NW, Washington, DC 20001
(800) CDF-1200 (223-1200)
www.childrensdefense.org

Generations United

1331 H. Street NW, Suite 900, Washington, DC 20005
(202) 289-3979
www.gu.org

National Committee of Grandparents for Children's Rights

(866) 624-9900
www.grandparentsforchildren.org

VI. Economics of Caregiving^x

“Valuing the Invaluable:” The contributions of unpaid caregivers are not only the foundation of the nation’s long-term care system but an important component of the U.S. economy.

Estimates of Care Contributed by Family, Friends, or Neighbors

Average number of caregivers	34 million (total estimated at 44 million)
Average cost per hour	\$10.10

VI. Economics of Caregiving^{xi} (Estimates of Care, continued)

Average hours per week	21
Average hours per year	1,080
Estimated total contribution (average)	\$375 billion
Out-of-pocket spending by caregivers	\$5.531
Caregivers who are employed full or part time	59%
Having to take time off during the work day	83%
Having to take a leave of absence	41%
Going from working full time to part time	37%
Giving up work entirely	35%
Losing job benefits	15%
Turning down a promotion	14%
Choosing early retirement.	12%
Productivity losses to U.S. businesses	\$33.6 billion

VII. Reflections

A. Life Situations of Older Persons and Their Care Partners

These charts offer an opportunity to reflect on important situations that aging parents and adult sons and daughters may encounter, and the possible results of each.

1. Physical and Emotional

Older Persons		Care Partners	
Situation	Possible Result	Situation	Possible Result
Loss	→ Depression	Signs of aging in parents and self	→ Denial
Growing problems	→ Anxiety	Feelings of love and hate	→ Guilt, tension, anxiety
Loss of strengths	→ Frustration, bitterness, lack of respect	Need to care for parent	→ Acceptance or rejection of changing roles
Need for attention	→ Acting out		
Chronic conditions	→ Health a major issue		

VII. Reflections (continued)

2. Social

Older Persons		Care Partners	
Situation	Possible Result	Situation	Possible Result
Reminiscing, story-telling	→ Enriched legacy of family and local history	At peak of career and family/social responsibilities	→ Limited time for parents
Traditional values	→ Frustration with changes	Grandparenting begins	→ Attention on grandchildren
Loss of spouse and friends; busy family	→ Loneliness, isolation	First-time loss of relatives, friends	→ Denial, inability to deal with parents
Restricted mobility	→ Feeling of uselessness	Changes in roles and relationships of men and women	→ Stress, uncertainty
Eating alone	→ Malnutrition	Renewed relationship with spouse, new career	→ New growth, risk taking
Narrowed interests	→ Focus on own illnesses, friends' troubles		

3. Spiritual

Older Persons		Care Partners	
Situation	Possible Result	Situation	Possible Result
Strong devotion; life review; realism about limitations	→ Greater self acceptance and understanding of life's meaning and value	Childhood level of faith development	→ Difficulty in making ethical decisions
Limited outreach and support from faith community	→ Difficulty with growth in prayer, ethical decision making	Criticism by parent of religious practice	→ Conflicts, guilt
		Limited outreach and support from faith community	→ Alienation

VII. Reflections (continued)

4. Economic

Older Persons		Care Partners	
Situation	Possible Result	Situation	Possible Result
Struggle to survive (food, shelter, medications)	→ Not coping with other aspects of life	“There’s nothing I can get them for birthdays or Christmas!”	→ Resentment
Inability to pay, rising healthcare costs	→ Health problems	“I feel responsible, but I have other obligations too!”	→ Anger, rejection
Home no longer suitable	→ Need for alternative options	Who gets what after parents’ death; transfer of assets	→ Family conflicts
Limited income or pension (especially for women)	→ Financial hardship, need for security		
Concern for privacy, concealing problems for fear of change	→ Lack of planning until crisis occurs		

VIII. Elder Abuse and Prevention

A. Occurrence of Elder Abuse^{xii}

Elder abuse is a growing and alarming public health issue that is present in every community, among all social strata. Nationally, it is estimated that just one in 14 cases of elder abuse is ever reported. Elder abuse is under-recognized, under-reported, and under-prosecuted. It is a hidden epidemic that results in:

- Increased mortality rates
- Unnecessary suffering, injury, pain, decreased quality of life
- Loss or violation of human rights

B. Description of Elder Abuse

1. Abuse takes 4 distinct forms:

- **Emotional abuse:** Emotional stress or injury through verbal abuse or threats
- **Domestic violence, physical or sexual abuse:** Any bodily harm, contact, or injury inflicted by a relative or other individual in efforts to gain power and control
- **Financial abuse:** Misappropriation of funds, theft of property or possessions
- **Neglect or abandonment:** Intentional or unintentional failure to provide some degree of minimal care

VIII. Elder Abuse and Prevention (continued)

2. Early detection is important because the abusive situations outlined above tend to become more frequent and severe over time.

C. Sources of Elder Abuse^{xiii}:

1. Typical perpetrators are:

Family members:	61.7%
A spouse or intimate partner (see below)	30.2%
An adult son or daughter	17.6%
Staff of an institution or facility	4.4%

Intimate partner abuse happens to older women: it has no age limit. More than a quarter of women 65+ reported being physically or psychologically abused during their adult life. Only 3% of the women said that they had ever been asked about this by a health care provider, suggesting a need for increased efforts to address partner violence affecting older women.^{xiv}

2. Factors that increase risk of abuse:

- **Mental Illness:** Many perpetrators have a history of mental illness.
- **Dependency:** Both the abused and the abuser are likely to have some degree of dependency on the other; each is likely to have something the other needs.
- **External Stress:** Some families become frustrated over financial problems, caregiving responsibilities, or other tensions and express them through acts of abuse.
- **Isolation:** Families with friends or relatives in close proximity and those that have frequent social interaction seem to have fewer incidents of family violence, including elder abuse.

D. Resources for Prevention of Elder Abuse

Local

Alternatives for Battered Women

(585) 232-7353
 (585) 232-1741 TTY
www.abwrochester.org

Elder Abuse Prevention Program through Lifespan

(585) 244-8400 x110
www.lifepan-roch.org

Protective Services for Adults

(585) 753-6532
 (585) 461-5698 Afterhours/Emergency
Note: For adults with a physical or mental impairment that affects their ability to protect themselves and/or provide for their basic needs who have no one else to assist them.

VIII. Elder Abuse and Prevention (continued)

Local, continued

Safe Journey

PO Box 21, Fairport 14450

(585) 425-1580

www.safejourney.org

Note: A non-profit agency supporting victims of domestic violence. Counseling, support groups, case management, advocacy and referrals.

National

National Center on Elder Abuse

(302) 831-3525

www.ncea.aoa.gov

Note: Monitors national trends, standardizes definitions and reporting procedures.

-
- ⁱ Newman, S. (2003). *Nobody's Baby Now: Reinventing Your Adult Relationship with Your Mother and Father*. New York, NY: Walker & Company.
- ⁱⁱ Materials on listening and confronting skills adapted from Dr. Thomas Gordon, "Parent Effectiveness Training", 2000 revised edition; materials developed by Margaret Barnhart, M. Gratia L'Esperance, RSM, MA, M Div. and Anne Maloy, RSM, MSW.
- ⁱⁱⁱ Adler, R. & Towne, N. (1998). *Looking Out / Looking In: Interpersonal Communication*, 3rd Ed., 225.
- ^{iv} Materials adapted from Jane Glenn Haas in the *Democrat & Chronicle*, July 2001
- ^v The Caregiver Resource Center. Advanced Care Planning. Retrieved on April 8, 2010 from http://www.caregiverresourcecenter.com/advanced_elder_care_planning.htm
- ^{vi} The Caregiver Resource Center. Advanced Care Planning. Retrieved on April 8, 2010 from http://www.caregiverresourcecenter.com/advanced_elder_care_planning.htm
- ^{vii} The Caregiver Resource Center. Advanced Care Planning. Retrieved on April 8, 2010 from http://www.caregiverresourcecenter.com/advanced_elder_care_planning.htm
- ^{viii} Seniors Inc. Elder Care Planning Checklist. Retrieved April 8, 2010 from <http://www.seniorsinc.org/ecchecklist.htm>
- ^{ix} Materials adapted from the Alzheimer's Association
- *Senator Hillary Rodham Clinton. Statements and Releases. March 12, 2007. Retrieved from the website www.clinton.senate.gov/news/statements on November 16, 2008.
- **Catholic Charities USA Presentation on Family Strengthening, September 2008. Retrieved from the website www.cfcrochester.org on November 16, 2008.
- ^x Gibson, M.J. & Houser, A.N. (2008, November). *Valuing the Invaluable: A New Look at the Economic Value of Family Caregiving, 2008 Update*. Retrieved December 2, 2010 from http://assets.aarp.org/rgcenter/il/i13_caregiving.pdf.
- ^{xi} Gibson, M.J. & Houser, A.N. (2008, November). *Valuing the Invaluable: A New Look at the Economic Value of Family Caregiving, 2008 Update*. Retrieved December 2, 2010 from http://assets.aarp.org/rgcenter/il/i13_caregiving.pdf.
- ^{xii} Materials adapted from Patricia A. Bomba & Lifespan's Elder Abuse and Prevention Program
- ^{xiii} National Center on Elder Abuse. *2000 State Adult Protective Services Survey Results*. Retrieved December 2, 2010 from http://www.ncea.aoa.gov/NCEAroot/Main_Site/pdf/research/apsreport030703.pdf.
- ^{xiv} US Department of Health and Human Services, Agency for Healthcare Research and Quality (2007, March). Intimate Partner Abuse has No Age Limit. *Research Activities*, 319. Retrieved December 2, 2010 from <http://www.ahrq.gov/research/mar07/307RA21.htm>.

NOTES

Chapter 6: Sensory Impairments and Mental Health

Goals for this chapter:

1. To review the factors that influence aging
2. To understand the causes and effects of sensory change, how they may affect the individual, and how to cope with them
3. To identify mental health concerns in the older person or in the care partner and to understand the common causes and symptoms of these conditions and learn how to address and manage them

I. Factors that Influence Aging	122
A. Primary Aging	122
B. Secondary Aging	122
C. Physical Age Changes	122
D. Healthy Aging	122
II. Sensory Impairments	123
A. Vision	123
B. Hearing Loss	124
C. Driving Safety	126
III. Mental Health: Potential Problem Areas that are Not Normal Aging	128
A. Dementia: Memory Loss or Confusion	128
B. Isolation and Loneliness	130
C. Depression	131
D. Anxiety Disorders	134
E. Grief	133
F. Substance Abuse Facts	134
G. Suicide	135
H. Resources to Address General Mental Health Concerns	136

I. Factors that Influence Aging

A. Primary Aging: Based on hereditary factors: "We are what we have been given."

B. Secondary Aging: Refers to the results of diseases, substance abuse, and environmental factors that are not hereditary.

- At all ages, people differ in their mobility, energy levels, work activity, health, or nutritional needs.
- Our bodies may continue to function efficiently as we age, as long as we experience no extraordinary demands or traumas.
- Various parts of our bodies may age at different rates.

C. Physical Age Changes:

1. General appearance
 - Skin becomes thinner, more sensitive, wrinkled
 - Hair turns gray; changes in distribution
 - Muscle mass decreases
 - Body fat increases
 - Weight tends to increase; height decreases
2. Mobility can be affected by:
 - Arthritis
 - Osteoporosis
3. Incontinence is **not** a normal condition. Problems with bladder or bowel are treatable and should not be ignored.
4. If ability to do "usual" activities has changed, consult with health care provider.

D. Healthy Agingⁱ

1. "Ten Commandments" of Healthy Aging

- | | |
|---|--|
| <ol style="list-style-type: none"> I. Thou shalt eat right and maintain a healthy body weight. II. Thou shalt stay active, maintain balance and safety. III. Thou shalt not smoke. IV. Thou shalt avoid drugs and excessive alcohol. V. Thou shalt reduce and manage stress. VI. Thou shalt stay connected and build relationships with family and friends. | <ol style="list-style-type: none"> VII. Thou shalt have regular medical and dental check-ups, health screenings, and immunizations. VIII. Thou shalt manage any chronic medical conditions and medications. IX. Thou shalt build a partnership with thy physician. X. Thou shalt actively participate and plan for future health care needs using the Advance Care Planning Process. |
|---|--|

If persons in middle age modify unhealthy habits (such as smoking, overeating, or inactivity), and control diabetes, high blood pressure, and high cholesterol, they may reduce the likelihood of nursing home admission later in life.ⁱⁱ

I. Factors that Influence Aging (Healthy Aging, continued)

2. Know Your Numbers (see how your test results compare with the ideal):

Normal Blood Pressure ⁱⁱⁱ	120/80
Normal Blood Sugar (A1C) ^{iv}	4.5%-6%
Triglycerides ^v	Below 150 mg/dL
Total Cholesterol ^{vi}	Below 200 mg/dL
LDL (“bad”) Cholesterol ^{vii}	Below 130 mg/dL
HDL (“good”) Cholesterol ^{viii}	Above 40 mg/dL (Men) Above 50 mg/dL (Women)

3. Resources for Healthy Aging (also see listings for health centers and fitness clubs in the Yellow Pages):

Agency for Healthcare Research and Quality (AHRQ)

(800) 358-9295
(888) 586-6340 TDD
www.ahrq.gov/consumer/index.html#prevention

Note: For information on what screening tests are needed for health by men and women.

Jewish Community Center

1200 Edgewood Ave., Rochester 14618
(585) 461-2000
www.jccrochester.org

Lakeside Family Wellness Center

80 West Avenue, Suite #209
Brockport 14420
(585) 637-6044
www.lakesidehealth.org

II. Sensory Impairments

A. Vision

1. Potential problems^{ix}:

- **Farsightedness:** A common vision condition in which you can see objects in the distance clearly, but objects nearby may be blurry.

- **Cataracts:** A clouding of the normally clear lens of your eye.

Note: Both of these conditions can be corrected and vision restored.

- **Glaucoma:** A group of conditions resulting in optic nerve damage, which diminishes sight.

Note: Early diagnosis and treatment can minimize or prevent optic nerve damage and limit glaucoma-related vision loss.

- **Dry Macular Degeneration:** A chronic eye disease marked by deterioration of tissue in the part of your eye that's responsible for central vision. It does not cause total blindness, but it worsens your quality of life by blurring or causing a blind spot in your central vision.

2. Tips for enhancing self-reliance and functioning^x:

Request the person's eye care specialist to make a referral to ABVI-Goodwill with a medical report. An eye examination within the past year is required. The ABVI-Goodwill offers a wide range of adaptive devices.

II. Sensory Impairments (Vision, continued)

3. Tips for interacting with visually-impaired persons^{xi}:
 - Introduce yourself. Not everyone recognizes or remembers voices.
 - Do not raise your voice, unless they are also hard-of-hearing.
 - Speak directly to them, rather than ignoring them by directing questions to a family member or friend. Allow them to speak for themselves.
 - Let the person know when you are leaving the room or house.
 - Avoid hand signals such as waving or pointing.
 - Do not avoid words like “see” or “look.”
 - Do not rearrange furniture or personal items without telling the person.
 - Offer your arm for assistance, and avoid pushing, pulling, or grabbing
 - Encourage use of special equipment and optical aids.

4. Resources:

Association for the Blind and Visually Impaired (ABVI)-Goodwill
 422 S. Clinton Ave., Rochester 14620
 (585) 232-1111
www.abvigoodwill.org

Note: Serves 5 county area (Monroe, Livingston, Ontario, Steuben and Wayne); offers numerous services, including low vision evaluations, rehabilitation teaching, orientation & mobility, recreational programs and support groups.

NYS Commission for the Blind and Visually Impaired

(866) 871-3000
www.ocfs.state.ny.us/main/cbvh/
Note: Calls will be automatically routed to the closest of 7 regional offices.

WXXI Reachout Radio

280 State Street, Rochester 14614
 (585) 325-7500
 (585) 258-0333
www.wxxi.org/reachout

Note: A radio reading service that provides 24-hour per day readings of local and national newspapers, magazines, and books for people who are print handicapped.

B. Hearing Loss^{xii}

1. Approximately one-third of Americans between the ages of 65 and 74 have hearing problems. About half of people ages 85 and older have hearing loss. Difficulty hearing can be a serious concern and, if left untreated, can get worse.

Hearing loss can affect your life in a number of ways. You may misunderstand family and friends during conversations, have trouble speaking on the phone or miss part of what your doctor says to you during a medical appointment. Hearing problems can cause a person to feel embarrassed or upset, and at times may cause a person to withdraw socially.

If you have trouble hearing, there is help. Depending on the type and extent of your hearing loss, there are treatment options available that may improve your quality of life. The first step is to discuss your hearing problems with your doctor.

II. Sensory Impairments (Hearing Loss, continued)

2. Tips for interacting with a person who is hard-of-hearing
 - Make sure you are in the same room with the person.
 - Get the person's attention before speaking (i.e. lightly touch the person's arm).
 - Face the person so he or she can clearly see your face. The best distance is about three feet.
 - Position yourself so the light is on your face and there is no bright light glaring in the person's eyes.
 - Speak slowly and clearly but do not exaggerate mouth movements.
 - Raise the level of conversation slightly if you have to but do not shout.
 - Rephrase the sentence or use different cues (i.e. facial expressions or body language) if you are asked to repeat something.
 - Remove background noise if possible or move away from the noise.
 - Be patient and relax. By working together, you can communicate successfully.
3. Resources for Hearing Loss:

Hearing Loss Association of America, Rochester Chapter
240 Lake Shore Boulevard Extension
Rochester 14617
(585) 266-7890
www.hlaa-rochester-ny.org

Lifespan's Interpreting Service
(585) 244-8400 x175
(585) 340-2313 TTY
(585) 340-2313 Video Phone
www.lifespan-roch.org

Rochester Hearing and Speech Center
www.rhsc.org

Greece
3199 Ridge Rd. West, Rochester 14626
(585) 723-2140

Mobile Services Division
(585) 271-0680 x680
(800) 232-8644

Rochester Hearing and Speech Center,
continued

Rochester
1000 Elmwood Avenue, Door 1
Rochester 14620
(585) 271-0680 x873
(585) 442-2985 TTY

Webster
1170 Ridge Road, Webster 14580
(585) 872-8073
(585) 442-2985 TTY

Self-Help for Hard of Hearing People (SHHH)
(585) 266-7890

II. Sensory Impairments (continued)

C. Driving Safety^{xiii}

For families, friends and care partners, it can be both perplexing and paralyzing to know what to do about an aging loved one who is no longer driving safely. For many, driving is a sign of independence. Giving up the car keys can be one of the most difficult challenges an older person will face.

Safe driving is a significant personal and community responsibility. If physical or cognitive factors impede ability at any age we owe it to ourselves to assess our road safety. Likewise, if you are concerned about another person's driving ability, you owe it to that person and to the community to speak up and take action.

1. How to prepare for a discussion

- Ride in the car with the older person while he or she is driving.
- Put together a list of your safety, medical and behavioral concerns.
- Speak with the older person's physician about your concerns and ask for a recommendation about whether it is safe or not for the person to drive.

Drivers need:

- | | |
|--------------------------------------|---------------------------------|
| <input type="checkbox"/> Good vision | • Alertness to what is going on |
| • Good hearing | • Good coordination |
| • Quick reaction time | • Good judgment |

- Ask if any of the medications the person is taking may be adversely affecting his or her driving ability. If the physician recommends that the person should not drive, make sure it is in writing. It may be helpful to have the physician participate in the discussion with the person.
- In addition to the physician, discuss your concerns with other involved family members and the family attorney. It may be helpful to have them participate in the discussion with the older person as well.
- Find out about resources in your community, such as driver evaluation programs and alternative methods of transportation.
- When speaking with the older person, be firm but gentle. Avoid confrontation.
- If the older person has a cognitive impairment that prevents him or her from recognizing that he or she may no longer be able to drive safely, further intervention may be needed. Contact the Alzheimer's Association at (585) 760-5400 or speak with the person's physician about the options.

Resources for Driving Safety

A.A.R.P. Programs

(888) 227-7669 (Option 2)
www.aarp.org/family/housing/driver-safety-program/

Note: Local service covers 11 counties; taking the 8-hour course can reduce vehicle insurance cost.

"At the Crossroads: A Guide to Alzheimer's Disease, Dementia, and Driving"

The Hartford Financial Services Group
 (585) 760-5400

www.thehartford.com/alzheimers

Note: Available from Alzheimer's Association or The Hartford

II. Sensory Impairments (Driving Safety, continued)

DriveOn

2021 Winton Road South
Rochester 14618
(585) 784-6530

www.jewishseniorlife.org

Note: Jewish Senior Life and Rochester Rehabilitation that provides driver evaluation and driving training.

Driver Evaluation and Training Program at the Rochester Rehabilitation Center

1000 Elmwood Avenue, Suite 600
Rochester 14620
(585) 271-2520

www.rochesterrehab.org

"Driving Decisions" Workbook

D. W. Eby; L. J. Molnar,
J. T. Shope. 2000

Note: Available from Alzheimer's Association, Rochester Chapter at (585) 760-5400 or the Transportation Research Institute, Michigan University, Ann Arbor

National Safety Council

Defensive Driving Course

200 Salina Meadows Parkway
Syracuse 13212
(800) 962-3434

www.nsc.org

Note: Can reduce vehicle insurance cost or violation points

"When You are Concerned: A Guide for Families Concerned about the Safety of an Older Driver"

New York State Office for the Aging
2 Empire State Plaza, Albany 12223
(800) 342-9871

www.aging.ny.gov



III. Mental Health: Potential Problem Areas that Are Not Normal Aging

Studies show that one in four hospital patients are admitted with a mental health or substance abuse disorder or both. Many of these patients are older persons, often with dementia.^{xiv}

A. Dementia: Memory Loss or Confusion^{xv}

1. General Description:

Dementia can show itself in periodic confusion, memory loss, or reduced mental function. Medical conditions, not aging, are the cause of memory loss or mental impairment.

It is vital to have a good professional assessment done if the person is showing signs of change in function (see Chapter 4, “Community Resources & Services”).

Physicians may neglect to treat memory loss, so care partners need to become effective advocates and resist panic or denial out of fear.

2. Warning signs of dementia

- Memory changes that disrupt daily life
- Challenges in planning or solving problems
- Difficulty completing familiar tasks
- Confusion with time or place
- Trouble understanding visual images and spatial relationships
- New problems with words in speaking or writing
- Misplacing things and losing the ability to retrace steps
- Decreased or poor judgment
- Withdrawal from work or social activities
- Changes in mood or personality

3. Types of Dementia^{xvi}

a. Some conditions are **reversible** if treated early enough:

- **Reactions to medications:** Sometimes medications can have side effects, either alone or in combination with other medications. These side effects could develop rapidly or slowly over time.
- **Metabolic and endocrine abnormalities:** Problems with the thyroid, with hypoglycemia, or too little or an excess of sodium or calcium can trigger changes within the brain.
- **Nutrition:** A vitamin deficiency, lack of a balanced diet, or dehydration can lead to mental impairments.
- **Infection:** Confusion or delirium can be a result of fever or other side effects when the body fights to overcome infection.
- **Subdural hematoma:** Bleeding between the surface and the outer covering of the brain can cause changes in mental functioning.
- **Poisons:** From toxins or substance abuse, the treatment and recovery will depend on the severity of the poisoning.
- **Brain tumors:** This could result in damage to the brain thereby affecting a person’s functioning.
- **Anoxia or oxygen deprivation:** Could be caused by a number of health problems such as heart attack, heart surgery, carbon monoxide or smoke inhalation, severe asthma and more. Recovery depends on the severity.

III. Mental Health (Types of Dementia, continued)

- **Heart and lung problems:** Chronic problems in these two areas can also prevent the brain from receiving oxygen.
 - **Emotional disorders:** Conditions such as depression or schizophrenia can mimic dementia when untreated.
- b. Some **irreversible** causes of dementia could include:
- **Alzheimer's disease:** The most common cause of dementia in people over the age of 65. It results in a gradual decline in cognitive abilities and eventually affects all brain functions.
 - **Vascular dementia:** The second most common cause of dementia and is usually brought upon by strokes. It often progresses in a step-like manner, characterized by sudden changes in functioning.
 - **Head trauma:** A single blow to the head or repeated wounds could result in traumatic brain injury (TBI). Often, symptoms will not be apparent until years after the injury. These symptoms will vary depending on which part of the brain was affected.
 - **Movement disorders:** Secondary dementia can occur in people diagnosed with other disorders that primarily affect movement, such as Parkinson's disease, multiple sclerosis and normal pressure hydrocephalus. It is still unknown if there is a link between these and other types of movement disorders and developing dementia, or if the two conditions can simply co-exist.
 - **Rare dementias:** There are many, far rarer diseases and conditions that can cause dementia. Some of these include: frontotemporal dementias, HIV-associated dementia, Huntington's disease, corticobasal degeneration, Creutzfeldt-Jakob disease, Binswanger's disease, Wernicke-Korsakoff Syndrome and more.

Resources to Address Dementia

Local

Alzheimer's Disease Care, Research and Education Program (AD-CARE)

435 East Henrietta Road, Rochester 14620

www.memoryhelp.us

(585) 760-6550

Note: The University of Rochester studies are recruiting participants on an ongoing basis.

III. Mental Health (Resources to Address Dementia, continued)

Memory Care Program

Building C, Suite 220
919 Westfall Road, Rochester 14618
(585) 273-5454

- *Assessment, evaluation, and diagnostic workup*
- *Ongoing medication management and help with challenging behaviors*
- *Recommendations for treatment and referrals for community resources*
- *Information, education, and support for family caregivers*
- *Opportunities to participate in research studies*

Memory Disorders Clinic

Monroe Community Hospital
435 E. Henrietta Rd., Rochester 14620
(585) 760-6221

www.urmc.rochester.edu/alzheimers_care

Note: Answering machine only on Mondays, Tuesdays, and Wednesdays. Part of the U of R's Memory Program. Provide care, research, and treatment services for families affected by dementia and related disorders:

- *Comprehensive assessments of persons experiencing memory problems*
- *Current information regarding treatment options*

B. Isolation and Loneliness may arise from:

- Lack of social contacts
- Lack of stimulus in the environment
- Lack of transportation

Isolation may cause or worsen any of the emotional concerns described below.

Unity Dementia Care Program

1559 Long Pond Road
Rochester 14626
(585) 368-6305
www.unityhealth.org
Note: For persons at home

National

Alzheimer's Association

(800) 272-3900
www.alz.org

International

Dementia Advocacy & Support Network

www.dasninternational.org

“... Loneliness is a major risk factor for increasing blood pressure in older Americans.”

- Center for Cognitive and Social Neuroscience, University of Chicago

“... Loneliness is the most terrible poverty.”

- Mother Teresa of Calcutta

III. Mental Health (Depression, continued)

C. Depression^{xvii}

Clinical depression affects more than 19 million Americans each year which can include major depressive disorder, manic depression, and dysthymia, a milder and longer-lasting form of depression. More than two million of the 34 million Americans age 65 and older suffer from some form of depression.

Depression does not discriminate against age, race, or ethnicity and is not a "normal" part of life. Unfortunately, roughly only half of individuals with depression seek treatment. This may be due to feelings that their condition is not serious or that they can treat it themselves or beliefs that it is a personal weakness rather than a medical illness.

1. Causes

There are many factors that can contribute to clinical depression. For some, a number of things could be involved while for others, perhaps there is just a single factor. People can also become depressed for no apparent reason.

- *Biological* - People with depression typically have too little or too much of certain brain chemicals, called "neurotransmitters." Changes in these brain chemicals may cause or contribute to clinical depression.
- *Cognitive* - People with negative thinking patterns and low self-esteem are more likely to develop clinical depression.
- *Gender* - Women experience clinical depression at a rate that is nearly twice that of men. While the reasons for this are still unclear, they may include the hormonal changes women go through during menstruation, pregnancy, childbirth and menopause. Other reasons may include the stress caused by the multiple responsibilities that women have.
- *Co-occurrence* - Clinical depression is more likely to occur along with certain illnesses, such as heart disease, cancer, Parkinson's disease, diabetes, Alzheimer's disease and hormonal disorders.
- *Medications* - Side effects of some medications can bring about depression.
- *Genetic* - A family history of clinical depression increases the risk for developing the illness.
- *Situational* - Difficult life events, including divorce, financial problems or the death of a loved one can contribute to clinical depression.

2. Symptoms

- Persistent sad, anxious or "empty" mood
- Sleeping too much or too little, middle of the night or early morning waking
- Reduced appetite and weight loss, or increased appetite and weight gain
- Loss of pleasure and interest in activities once enjoyed
- Restlessness, irritability
- Persistent physical symptoms that do not respond to treatment (such as chronic pain or digestive disorders)
- Difficulty concentrating, remembering or making decisions
- Fatigue or loss of energy
- Feeling guilty, hopeless or worthless
- Thoughts of suicide or death

III. Mental Health (Depression, continued)

3. Treatment

More than 80% of those who seek treatment for clinical depression show improvement. Commonly used treatments include the use of antidepressant medication, psychotherapy or a combination of the two.

The type of treatment will depend upon the pattern, severity, persistence of symptoms, and personal history. Early treatment is more effective and can help prevent symptom reoccurrence. Depression should always be treated by a physician or qualified mental health professional.

Resources to Address Depression (screening and treatment services are regularly available at these and other sites on a private-pay basis):

Depression and Bipolar Support Alliance

(585) 924-7936
www.dbsaroch.org

Jewish Family Service

441 East Avenue, Rochester 14607
(585) 461-0110
www.jfsrochester.org

National Alliance on Mental Illness

320 Goodman Street North, Suite 102
Rochester 14607
(585) 423-1593
www.namirochester.org

Rochester Mental Health Center

490 East Ridge Road, Rochester 14617
(585) 922-2500
www.rochestergeneral.org

Strong Behavioral Health, Older Adults Service

315 Science Parkway, Rochester 14620
(585) 279-7849
www.stronghealth.com

Unity Behavioral Health

100 Pinewild Drive, Suite 2A
Rochester 14606
(585) 368-6700

835 West Main Street, Rochester 14611
(585) 368-6550

81 Lake Avenue, Rochester 14608
(585) 368-6900

www.unityhealth.org/mentalhealth

ViaHealth Behavioral Health Network

409 East Ridge Road, Rochester 14621
(585) 922-2500
www.rochestergeneral.org

D. Anxiety Disorders^{xviii}

With aging comes a higher prevalence of medical and physical concerns as well as the greater use of prescription medications. Because of this, recognizing an anxiety disorder in an older adult can be challenging and separating a medical condition from an anxiety disorder becomes complicated.

If you are worried about an aging parent or relative, ask about any changes you notice in the following areas:

- *Daily routines and activities.* Is Grandma refusing to do routine activities or avoiding social situations she used to enjoy?
- *Worries.* Does Dad seem to have more worries than before? If so, do those worries seem out of proportion to reality (such as a real threat to his safety)?

III. Mental Health (Anxiety Disorders, continued)

- *Medication.* Has Mom recently started taking another medicine? Is she using more of a particular medication than before? Side effects, such as breathing problems, irregular heartbeat, or tremors, can simulate symptoms of anxiety. An increased use of medication or alcohol may indicate an attempt to self-medicate.
- *Overall mood.* Depression and anxiety often occur together. Tearfulness, apathy, and a loss of interest in formerly enjoyable activities are possible signs of depression.

Resources for Anxiety Disorders

**Anxiety Disorders
Association of America**
www.adaa.org

Mental Health Association
320 N. Goodman Street, Rochester 14607
(585) 325-3145
www.mharochester.org

E. Grief^{xix}

It is normal to feel loss when you care about someone who has a life threatening illness. It is also normal to feel guilty, abandoned and angry. You are entitled to these emotions and may start to experience them as soon as you learn of the diagnosis. As the illness progresses, you will mourn him or her and experience the phases of grieving: denial, anger, guilt, sadness and acceptance. The stages of grief don't happen neatly in order. You will move in and out of different stages as time goes on. Some common experiences in the grieving process include:

Denial

- Hoping that the person is not ill.
- Expecting the person to get better.
- Convincing yourself that the person hasn't changed.
- Attempting to normalize problematic behaviors.

Anger

- Being frustrated with the person.
- Resenting the demands of caregiving.
- Resenting family members who cannot or will not help provide care.
- Feeling abandoned and resenting it.

Guilt

- Wondering if you did something to cause the illness.
- Regretting your actions after the diagnosis.
- Feeling bad because you're still able to enjoy life.
- Feeling that you've failed. For example, when you can't care for your loved one at home.
- Having negative thoughts about the person or wishing that he or she would go away or die.
- Regretting things about your relationship before the diagnosis.
- Having unrealistic expectations of yourself, with thoughts such as: "I should have done..." "I must do everything for him or her." "I must visit him or her every day."

III. Mental Health (Grief, continued)

Sadness

- Feeling despair or depression.
- Withdrawing from social activities.
- Withholding your emotions.

Acceptance

- Finding personal meaning in caring for someone who is terminally ill.
- Seeing how the grieving process affects your life.
- Appreciating the personal growth that comes from surviving loss.

Take Care of Yourself

- Remember that switching from concentrating all your efforts on caring for the person to caring for yourself can be difficult. The best thing you can do for the person is to stay healthy by caring for your physical, mental and emotional well-being.
- Ask others for emotional support and for help with caregiving.
- Create balance in your life. Do things that bring you joy and comfort.
- Give yourself time to rest. You'll be less vulnerable to illness.
- Listen to relaxation tapes or soothing music, take a walk, or try deep breathing exercises to help relieve stress.
- Let yourself enjoy humorous moments.
- Dream about the future. As you grieve, new dreams will begin to replace old ones.

Resources to Help with Grief

Local

Lifetime Care Bereavement Groups
(585) 214-1000
www.lifetimecare.org

National

National Hospice and Palliative Care Organization
(800) 658-8898 Helpline
www.nhpco.org

F. Substance Abuse Facts:

- As many as 17% of people ages 65 and older have an alcohol-abuse problem.^{xx}
- As people age, their sensitivity to alcohol increases. Older adults can become intoxicated more easily. Adults over the age of 65 are more likely to be affected by at least one chronic illness, many of which can make them more vulnerable to the negative effects of alcohol consumption.^{xxi}
- People ages 65 and older account for approximately one-third of all medications prescribed in the U.S. Older adults are more likely to be prescribed long-term and multiple prescriptions, which could lead to unintentional misuse, abuse or addiction.^{xxii}
- Up to 75% of older adult emergency room visits could be alcohol or drug related.^{xxiii}
- Estimates suggest that the number of substance dependent and abusing adults aged 50 or older will climb from approximately 1.7 million in the U.S. in 2001 to 4.4 million in 2020.^{xxiv}

III. Mental Health (Substance Abuse, continued)**Resources for Substance Abuse****Alcoholics Anonymous**

10 Manhattan Square Drive
Rochester 14607
(585) 232-6720

Geriatric Addictions Program (GAP) through Lifespan

1900 South Clinton Avenue
Rochester 14618
(585) 244-8400 x184
www.lifespan-roch.org

Note: Offers on-site or in-patient treatment

National Council on Alcoholism and Drug Dependence, Rochester Area

1931 Buffalo Rd., Rochester 14624
(585) 426-8000
www.nydas.org

Unity Chemical Dependency, Inpatient Unit

1565 Long Pond Road
Rochester 14626
(585) 723-7723
www.unityhealth.org

Unity Chemical Dependency, Older Adult Program

1565 Long Pond Road
Rochester 14626
(585) 723-7740
www.unityhealth.org

Veterans Administration

465 Westfall Rd., Rochester 14620
(585) 463-2600

G. Suicide: If someone threatens suicide, call 911 or Life Line at 275-5151

Suicide rates are highest in older adults as 20% of the population and 40% of suicide victims are over 60. After age 75, the rate is three times higher than average, and among white men over 80, it is six times higher than average.^{xxv}

1. Risk factors associated with suicide in older adults include^{xxvi}:
 - the death of a loved one
 - physical illness
 - uncontrollable pain
 - fear of dying a prolonged death
 - social isolation
 - loneliness and/or
 - changes in life roles, such as retirement.
2. Warning signs to watch for include^{xxvii}:
 - Verbal suicide threats such as, “You’d be better off without me.” or “Maybe I won’t be around”
 - Expressions of hopelessness and helplessness
 - Previous suicide attempts
 - Daring or risk-taking behavior
 - Personality changes
 - Depression
 - Giving away prized possessions
 - Lack of interest in future plans

III. Mental Health (Suicide Risk Factors, continued)

3. Steps you can take to assist include^{xxviii}:
 - Trust your instincts that the person may be in trouble
 - Talk with the person about your concerns. Communication needs to include LISTENING
 - Ask direct questions without being judgmental. Determine if the person has a specific plan to carry out the suicide. The more detailed the plan, the greater the risk
 - Get professional help, even if the person resists
 - Do not leave the person alone
 - Do not swear to secrecy
 - Do not act shocked or judgmental
 - Do not counsel the person yourself
4. Resources to Address Suicide:

"After Suicide" Support Group
3339 Winton Road, Rochester 14623
(585) 265-0449

*Note: Meets at CP Rochester.
Peer led support group held twice a month.*

**American Foundation
for Suicide Prevention**
(888) 333-2377

www.afsp.org
Note: Research, education, treatment

National Suicide Hotline
(800) 784-2433
www.suicidehotlines.com

National Suicide Prevention Lifeline
(800) 273-8255

Survivors of Suicide
www.survivorsof suicide.com
Note: Online support and lists of support groups

H. Resources to Address General Mental Health Concerns

Local

**Life Line and Community
MobileCrisis Team**
(585) 275-5151

Mental Health Association
320 N. Goodman St, Rochester 14607
(585) 325-3145
www.mharochester.org

**Monroe County
Department of Mental Health**
(585) 753-6047
www.monroecounty.gov

**National Alliance for the Mentally
III (NAMI), Rochester Chapter**
(585) 423-1593
www.namirochester.org

Rochester Mental Health Center
490 E. Ridge Road, Rochester 14621
(585) 922-2500
www.rochestergeneral.org

Rochester Rehabilitation Center
1000 Elmwood Ave., Rochester 14620
(585) 271-2520
www.rochesterrehab.org

**Strong Behavioral Health:
Older Adults Service**
315 Science Pkwy, Rochester 14620
(585) 279-7849
www.stronghealth.com

III. Mental Health (continued)

Local Resources, continued

Unity Behavioral Health

www.unityhealth.org

Evelyn Brandon Health Center
81 Lake Avenue, Rochester 14608
(585) 368-6900

100 Pinewild Drive, Suite 2A
Rochester 14606
(585) 368-6750

835 West Main Street
Rochester 14611
(585) 368-6550

National

National Institute of Mental Health

(301) 443-4513
(866) 615-NIMH (6464)
www.nimh.nih.gov

National Alliance on Mental Illness (NAMI)

(800) 950-NAMI (6264)
www.nami.org

*Note: Umbrella organization of
support/advocacy group/non-medical
services in local areas*

National Depression Screening Day

(781) 239-0071
www.mentalhealthscreening.org

- ⁱ Bomba, P.A. *Ten Commandments for Healthy Living*. Retrieved September 18, 2008 from www.compassionandsupport.org.
- ⁱⁱ Valiyeva, R & Miller, S. (2006). Lifestyle-Related Risk Factors. *Archives of Internal Medicine*, 166, 985- 990.
- ⁱⁱⁱ MedlinePlus (2010). High Blood Pressure. Retrieved from <http://www.nlm.nih.gov/medlineplus/highbloodpressure.html> on April 20, 2010.
- ^{iv} MayoClinic. *A1C: Results*. Retrieved from <http://www.mayoclinic.com/health/a1c-test/MY00142/DSECTION=results> on April 20, 2010.
- ^v MayoClinic. High Blood Cholesterol: Triglycerides: Why do they Matter. Retrieved from <http://www.mayoclinic.com/health/triglycerides/CL00015> on April 20, 2010.
- ^{vi} MayoClinic. *High Blood Cholesterol, Cholesterol levels: What Numbers Should You Aim For?* Retrieved from <http://www.mayoclinic.com/health/cholesterol-levels/CL00001> on April 20, 2010.
- ^{vii} MayoClinic. *High Blood Cholesterol, Cholesterol levels: What Numbers Should You Aim For?* Retrieved from <http://www.mayoclinic.com/health/cholesterol-levels/CL00001> on April 20, 2010.
- ^{viii} MayoClinic. *High Blood Cholesterol, Cholesterol levels: What Numbers Should You Aim For?* Retrieved from <http://www.mayoclinic.com/health/cholesterol-levels/CL00001> on April 20, 2010.
- ^{ix} Information retrieved from the Mayo Clinic at <http://www.mayoclinic.com/> on December 9, 2009
- ^x The Association for the Blind and Visually Impaired – Goodwill Industries of Greater Rochester, Inc. *A Guide for Sighted People*. Retrieved from www.abvi-goodwill.org on November 13, 2008.
- ^{xi} The Association for the Blind and Visually Impaired – Goodwill Industries of Greater Rochester, Inc. *A Guide for Sighted People*. Retrieved from www.abvi-goodwill.org on November 13, 2008.
- ^{xii} Rochester Hearing and Speech Center. *Communication Strategies You Can Use When Talking to a Person Who is Hard of Hearing*. Retrieved from the website www.rhsc.org on October 24, 2008.
- ^{xiii} New York State Office for the Aging (2000). *When You Are Concerned*. Retrieved from www.aging.ny.gov on October 22, 2008.
- ^{xiv} US Department of Health and Human Services, Agency for Healthcare Research and Quality. (April 2007). *Research Activities*, 320, 1. Retrieved from www.ahrq.gov/research/apr07/0407RA.pdf on January 7, 2008.
- ^{xv} Alzheimer's Association. *Dementia Topic Sheet*.
- ^{xvi} Alzheimer's Association. *Dementia Topic Sheet*.
- ^{xvii} Mental Health America. *Factsheet: Depression: What You Need to Know*. Retrieved from <http://www.mentalhealthamerica.net/go/information/get-info/depression/depression-what-you-need-to-know/depression-what-you-need-to-know#end> on April 14, 2010.
- ^{xviii} Anxiety Disorders Association of America. *Living with Anxiety: Older Adults*. Retrieved from <http://www.adaa.org/living-with-anxiety/older-adults> on April 20, 2010.
- ^{xix} Caregiver Support Services (2008). *Grief, Mourning, and Guilt Topic Sheet*.
- ^{xx} U.S. Department of Health & Human Services & SAMHSA National Clearinghouse for Alcohol & Drug Information (November 2007). *The DASIS Report*. Retrieved from the website www.ncadi.samhsa.gov on October 27, 2008.
- ^{xxi} NYS Office of Alcoholism & Substance Abuse Services. *Ageing-Related Changes in How Alcohol Affects the Body*. Retrieved from www.oasas.state.ny.us on October 27, 2008.
- ^{xxii} News from the NYS Assembly Committee on Alcoholism & Drug Abuse (Winter 2005/2006). Retrieved from www.assembly.state.ny.us on October 27, 2008.
- ^{xxiii} Lifespan's Geriatric Additions Program.
- ^{xxiv} NYS Office of Alcoholism & Substance Abuse Services. *Elderly Alcohol & Substance Abuse*. Retrieved from www.oasas.state.ny.us on October 27, 2008.
- ^{xxv} National Institute of Mental Health. *Factsheet: Suicide*. Retrieved from <http://www.mentalhealthamerica.net/go/information/get-info/suicide/suicide> on April 19, 2010.
- ^{xxvi} *The Suicide of Older Men and Women; How You Can Prevent Tragedy*. Retrieved from www.healthyplace.com on October 27, 2008.
- ^{xxvii} National Institute of Mental Health. *Factsheet: Suicide*. Retrieved from <http://www.mentalhealthamerica.net/go/information/get-info/suicide/suicide> on April 19, 2010.
- ^{xxviii} National Institute of Mental Health. *Factsheet: Suicide*. Retrieved from <http://www.mentalhealthamerica.net/go/information/get-info/suicide/suicide> on April 19, 2010.

Chapter 7: Health Systems

Goals for this chapter:

1. To find out how to select a physician and gain access to local geriatric practices
 2. To recognize various possibilities and levels of care
 3. To become aware of privacy regulations
 4. To be able to identify local health provider systems
-

I. Selecting Your Physician Partner and Sharing Responsibility	140
A. Selecting a Physician	140
B. Sharing Responsibility	140
II. Sites Where Health Care Can Be Provided	142
III. Federal Regulations about Privacy	142
IV. Addressing Problems with Patient Care	143
V. Multiple-Level Care Providers	143
A. Hospital-Based Systems	143
B. Nursing-Home-Related Facilities and Programs	151

I. Selecting Your Physician Partner and Sharing Responsibility

A. Selecting a Physician:

1. Select a physician who is sensitive to elder care and regularly monitors pain levels.
2. Ask to have a preliminary interview to determine if the relationship will be satisfactory to all parties. Patients often look for characteristics such as:
 - Trustworthiness
 - Good judgment
 - Good communication skills for listening and explaining
 - Ability to keep up-to-date with changes in the field
3. It may be desirable to have someone accompany an older person on office visits.

Physician Referral Lines

Local

Lakeside Health System

(800) 252-5374
www.lakesidehealth.org

Unity Health System:

www.unityhealth.org
Unity Geriatric Associates
(585) 368-4050
Unity Health System's OnCall
(585) 368-3000

Note: Health Information Service

University of Rochester Medical Center:

www.urmc.rochester.edu
Internal Medicine Group
(585) 275-7424
Strong Memorial Hospital
(585) 275-2838; (888) 661-6162
University of Rochester Medical Center
(585) 275-2838; (888) 661-6162

ViaHealth System

(585) 922-LINK(5465)
(877) 922-5465
www.viahealth.org

National

Find A Doctor

www.findadoctor.com

B. Sharing Responsibility:

1. Be active and inquisitive. Write a list of questions and concerns. Do not let fear or embarrassment keep you from bringing up whatever health concerns you have. Be ready to report when the problem began, what brings it on, what relieves it, and what does not.
2. Have a pad and pen with you for taking notes. Ask questions if you do not understand the doctor's explanation or use of medical terms.
3. Ask your physician three basic questions¹:
 - What is my main problem?
 - What do I need to do?
 - Why is it important to do this?

I. Selecting Your Physician Partner and Sharing Responsibility (continued)

4. Bring all your prescriptions, over-the counter, and herbal medications with you. Ask questions about them (also consult with your pharmacist):
 - Why am I taking this drug? What does it treat?
 - In general terms, how does it work?
 - Will it interact with other drugs I take?
 - What are the benefits or side effects?
 - How long do I take it?
 - What is the best way to take it (morning or night, with or without food)?
 - What if I miss a dose?

5. If tests are scheduled, find out what will happen during the procedures, when the results will be available and how you will be informed about them.

6. With serious health concerns, a second opinion by another physician or specialist can be helpful. Tell your physician you want another opinion and enlist his or her help. To get a truly informed opinion, the second physician will need your medical records. Again, bring your questions, take notes and have someone with you. If your first and second physicians do not agree, get a third opinion.
**Approach second opinions on the internet with extreme caution.*

7. Pain Managementⁱⁱ:
 - Assessing pain levels should be a regular part of taking a person's vital signs in addition to temperature, blood pressure, pulse, and respiration or breathing.
 - Pain management is critical to promote health and healing.
 - Persons able to respond are asked to rate their pain on a scale of 1 (very low level) to 10 (very high level).
 - Persons unable to respond can be assessed for pain levels in various other ways, such as:
 - Verbal Cues: moans, grunts, cries, calling out, rapid or impaired breathing, being verbally abusive to care partners
 - Facial Cues: grimaces, furrowing brows, frown, clenched teeth, uncomfortable expression
 - Body Language Cues: clutching something tightly (arms of chair, bedrail, clothing), restlessness, rocking back and forth, rubbing a particular area, inability to keep still, wringing hands, clenching fists
 - Behavioral Cues: pulling or pushing away, hitting, biting, kicking or other physical avoidance, loss of sleep, lack of appetite, wandering

I. Selecting Your Physician Partner and Sharing Responsibility (continued)

Resources for Preparing for Doctor Visits

"Partnering with Your Doctor: A Guide for Persons with Memory Problems and their Care Partners"

(585) 760-5400

www.alz.org

Note: Booklet available online from the Alzheimer's Association

"Talking with Your Doctor: A Guide for Older People"

www.nia.nih.gov/HealthInformation

Note: Booklet available from National Institute of Health

II. Sites Where Health Care Can Be Provided

- Your Home: Services can be provided by many home care agencies or programs
- Independent Living Units or Apartments
- Supportive/Assistive Senior Housing
- Enriched Housing
- Adult Care Homes
- NY State Licensed Assisted Living Programs
- Skilled Nursing Facilities
- Continuing Care Retirement Communities
- Hospitals provide short-term care (acute care) until a patient's condition is stabilized. Many hospitals also include outpatient services such as clinics, ambulatory surgeries, physical therapy, and laboratory services
- Urgent Care Providers offer care for minor emergencies.

III. Federal Regulations about Privacy

H.I.P.A.A., the federal Health Insurance Portability & Accountability Act of 1996, is intended to protect your right to privacy by restricting the release of medical information only to those persons whom you designate, including family members and friends; two way releases may be needed between medical providers and insurers. H.I.P.A.A. regulations reflect five basic principles:

1. **Consumer Control:** The regulation provides consumers with critical new rights to control the release of their medical information.
2. **Boundaries:** With few exceptions, an individual's health care information should be used for health purposes only, including treatment and payment.
3. **Accountability:** Under H.I.P.A.A., for the first time, there will be specific federal penalties if a patient's right to privacy is violated.
4. **Public Responsibility:** The new standards reflect the need to balance privacy protections with the public responsibility to support such national priorities as protecting public health, conducting medical research, improving the quality of care, and fighting health care fraud and abuse.
5. **Security:** It is the responsibility of organizations that are entrusted with health information to protect it against deliberate or inadvertent misuse or disclosure. If you want information provided to family, friends, or clergy, or visits from them:
 - Have conversations to inform them about your wishes in advance.
 - Write your wishes, date and sign the document, and carry it with you. Give copies to the appropriate persons.

IV. Addressing Problems with Patient Care

- Discuss problems first with the persons directly responsible for giving care.
- If you are not satisfied, approach the appropriate supervisors and then the administrators.
- As a last resort, contact the NYS Department of Health for investigation of complaints about patient care or trouble getting medical records. This Department can also provide general information.
- For health care concerns:

Centers for Medicare & Medicaid Services

www.hospitalcompare.hhs.gov

Note: For national information about the quality of hospital care, rated for three specific conditions: heart attack, heart failure, and pneumonia.

NYS Centralized Complaint Nursing Home Intake Program
(888) 201-4563

NYS Department of Health

www.nyhealth.gov

For Adult Homes

(585) 238-8185; (866) 893-6772

For Home Health Care Agencies

(585) 423-8121; (800) 628-5972

For Hospitals

(585) 423-8053; (800) 804-5447

For Nursing Homes

(585) 423-8020; (888) 201-4563

Patient's Rights Hotline

(800) 331-7767

Note: To obtain medical records or make complaints about patient care.

V. Multiple-Level Care Providers

Many hospitals and nursing homes have expanded to include a variety of services. The advantage to clients is that an integrated system may make it easier to change from one level of care to another when needed. Facilities and programs described below are also listed in separate chapters of this *Caregiver Resource Guide* according to the type of care offered.

A. Hospital-Based Systems

1. **Lakeside Health System**

156 West Avenue, Brockport 14420

(585) 637-3131

Includes:

Lakeside Beikirch Care Center

170 West Avenue, Brockport 14420

(585) 395-6052

Note: Skilled nursing care, dementia care, hospice (comfort) care

Lakeside Family Wellness Center

80 West Avenue, Suite 209, Brockport 14420

(585) 637-6044

Note: A wide variety of programs and support groups

V. Multiple-Level Care Providers (Hospital-Based Systems, continued)

1. Lakeside Health System (continued)

Lakeside Memorial Hospital

156 West Avenue, Brockport 14420

(585) 395-6095

Note: Emergency and acute care (short-term), acute (short-term) rehabilitation, ambulatory surgeries, outpatient clinics

Lakeside Physical Therapy & Comprehensive Rehabilitation Services

156 West Avenue, Brockport 14420

(585) 395-6093

2. Rochester General Health System

www.rochestergeneral.org

Includes:

Behavioral Health Network

(585) 922-2500

Note: Rochester Mental Health Center, Genesee Mental Health Center, Rochester General Department of Psychiatry, Newark-Wayne Community Hospital, Mental Health Program, Rochester General Hospital Addiction Services

DeMay Living Center

100 Sunset Drive, Newark 14513

(315) 332-2337

Note: Skilled nursing care, dementia care, respite care, hospice (comfort) care

Genesee Health Service

220/222 Alexander Street, Rochester 14607

(585) 922-8003

Note: Care to qualified patients at discounted pricing, comprehensive primary care services, specialty services in Endocrinology, Allergy, Rheumatology and Immunology

Geriatric Consultative Services

Rochester General Hospital Medical Building

1415 Portland Avenue, 2nd Floor, Suite 200, Rochester 14621

(585) 922-0390

Hill Haven Nursing Home

1550 Empire Boulevard, Webster 14580

(585) 671-4300

(585) 922-2215 Admissions

Note: Skilled nursing care, subacute/transitional care/rehabilitation, dementia care, hospice (comfort) care

V. Multiple-Level Care Providers (Hospital-Based Systems, continued)

2. Rochester General Health System (continued)

Independent Living for Seniors

(585) 922-2800 Main Office

Hudson Center

2066 Hudson Avenue, Rochester 14617

(585) 922-2800

www.independentlivingforseniors.org

Note: All-Inclusive Care for the Elderly, in-home medical care and allied health services, adult day services

Lipson Cancer Center

(585) 922-4020

Newark Wayne Community Hospital

1200 Driving Park Avenue, Newark 14513

(315) 332-2022

Note: Emergency and acute care (short-term), pastoral care, acute (short-term) rehabilitation, ambulatory surgeries, outpatient clinics, women's health services, mental health services, adult day medical program

Rochester General Hospital

1425 Portland Avenue, Rochester 14621

(585) 922-4000

www.rochestergeneral.org

Note: Emergency and acute care (short-term), pastoral care, acute (short-term) rehabilitation, ambulatory surgeries, outpatient clinics

Rochester Heart Institute

Rochester General Hospital, 1425 Portland Avenue, Rochester 14621

(585) 922-5400

Note: Partnership with the Cleveland Clinic Heart Surgery Center

Stabins Wellness Information Center

(585) 922-9355

Note: Werner Medical Library provides caller with information and resources related to medical issues

3. Strong Health System

www.stronghealth.com

Includes:

Eastman Institute for Oral Health

625 Elmwood Avenue, Rochester 14620

(585) 275-5051

Note: Oral health diagnostic and treatment facility

Edward G. Miner Medical Library

601 Elmwood Avenue, Rochester 14642

(585) 275-3361

V. Multiple-Level Care Providers (Hospital-Based Systems, continued)

3. Strong Health System (continued)

Geriatric Associates Practice at Laurelwood (GAP)

300 Hahnemann Trail, Pittsford 14534
(585) 381-4465

Geriatrics and Medicine Associates at Highland Hospital

990 South Avenue, #207, Rochester 14620
(585) 341-6660

Highland Hospital

1000 South Avenue, Rochester 14620
(585) 473-2200

Note: Emergency and acute care (short-term), ACE (Acute Care for Elderly) unit, women's services, bariatric surgery center, alternative health services

The Highlands at Brighton

5901 Lac de Ville Boulevard, Rochester 14618
(585) 442-7960

Note: Skilled nursing, specialized care for acute, long-term care patients, rehabilitation unit offers short-term stays to those requiring neurological and orthopedic restorative care, dementia unit, neuro-behavioral unit: for patients with chronic psychiatric disorders and neuro-muscular diseases, such as Huntington's Disease, ventilator unit for patients dependent on ventilators

The Highlands at Pittsford

100 Hahnemann Trail, Pittsford 14534
(585) 586-7600

The Cottages

Note: Independent residential homes

Hahnemann Square Apartments

Note: Independent apartment homes

Laurelwood

300 Hahnemann Trail, Pittsford 14534
(585) 389-1630

Note: Enriched living apartments

The Living Center

500 Hahnemann Trail, Pittsford 14534
(585) 383-1700

Note: Skilled nursing care, short-term rehabilitation, respite care, hemodialysis and peritoneal dialysis, dementia care, hospice care

Meadowbrook

500 Hahnemann Trail, Pittsford 14534
(585) 383-1700

Note: Adult day medical health care program

V. Multiple-Level Care Providers (Hospital-Based Systems, continued)

3. Strong Health System (continued)

Strong Memorial Hospital

601 Elmwood Avenue, Rochester 14642
(585) 275-2100

Note: Emergency and acute care (short-term), ambulatory surgeries, outpatient clinics, behavioral health services (mental health/substance abuse), research and specialty services

Visiting Nurse Service (VNS)

2180 Empire Boulevard, Webster 14580
(585) 787-2233

www.vnsnet.com

Note: Certified home health care agency (CHHA)

Visiting Nurse Signature Care

(585) 288-7560

Note: Licensed home care services agency (LHCSA)

4. Unity Health System

www.unityhealth.org

Includes:

Community Outreach Programs:

Action towards Employment

(585) 368-6508

Children's Clothes Closet

(585) 368-3030

Genesee Specialty Care

(585) 368-3506

Health Care for the Homeless

(585) 368-3744

Healthy Start

(585) 368-3490

The Hamlet at Park Ridge

1471 Long Pond Road, Rochester 14626

(585) 723-7820

Note: Enriched living

Hilton Park

100 Leith Lane, Hilton 14468

(585) 392-1429

Note: Affordable independent living. Age 55+

V. Multiple-Level Care Providers (Hospital-Based Systems, continued)

4. Unity Health System (continued)

Living Centers:

(585) 723-7688 Admissions

Note: Provided at all three sites: Skilled nursing care, short-term rehabilitation, dementia care, hospice (comfort) care

Edna Tina Wilson Living Center

700 Island Cottage Road, Rochester 14612

(585) 368-6100

Park Ridge Living Center

1555 Long Pond Road, Rochester 14626

(585) 723-7688; (585) 723-7205

Unity Living Center

Unity St. Mary's Campus

89 Genesee Street, Rochester 14611

(585) 368-4200

Note: Ten-bed ventilator unit

Moore Park Senior Apartments

11 Chili Avenue, Rochester 14611

(585) 368-3250

Note: Affordable independent living. Age 55+

MS Achievement Center at Unity

Cornerstone Centre

2300 Buffalo Road, #600B, Rochester 14624

(585) 368-6470

Note: Adult day medical health care program

Park Ridge at Home

2300 Buffalo Road, #400, Rochester 14624

(585) 368-6342

Note: Long-term home health care program

Park Ridge Commons

1465 Long Pond Road, Rochester 14626

(585) 723-8688

Note: Subsidized independent living apartments

Resch Commons

600 Island Cottage Road, Rochester 14612

(585) 621-4263

Note: Subsidized independent living apartments

The Spine Center at Unity Hospital

89 Genesee Street, Rochester 14611

(585) 368-3213

V. Multiple-Level Care Providers (Hospital-Based Systems, continued)

4. Unity Health System (continued)

Unity Adult Day Services

at Cornerstone

2300 Buffalo Road, #600A, Rochester 14624
(585) 368-6480

Note: Social adult day program

at Park Ridge Day at the Park

1555 Long Pond Road, Rochester 14626
(585) 723-7260

Note: Adult day medical health care program

at Parkway

700 Island Cottage Road, Rochester 14612
(585) 368-6130

Note: Adult day medical health care program

at St. Bernard's

2260 Lake Avenue, Rochester 14612
(585) 254-7990

Note: Social adult day program for dementia clients

at St. Mary's

89 Genesee Street, Rochester 14611
(585) 368-3942

Note: Social adult day program

Unity at Home

89 Genesee Street, Rochester 14611
(585) 368-3440

Note: Licensed home care agency

Unity Care at Home

1477 Long Pond Road, Rochester 14626
(585) 723-7324

Note: Information and referral services, care management, non-medical in-home services (e.g. companion care, errands, home delivered meals and maintenance)

Unity Geriatric Associates

105 Canal Landing Boulevard, Suite 1, Rochester 14626
(585) 368-4050

Unity HealthCall: 24-Hour Emergency Response System

1477 Long Pond Road, Rochester 14626
(585) 723-7444

Unity Home Care Services for the Deaf

(585) 426-9404 TTY/Relay* 711

V. Multiple-Level Care Providers (Hospital-Based Systems, continued)

4. Unity Health System (continued)

Unity Hospital

1555 Long Pond Road, Rochester 14626
(585) 723-7000

Note: Emergency and acute care, pastoral care, ambulatory surgeries, outpatient clinics, women's health, family birth place, pain management center, psychiatry and behavioral health, joint replacement center

Unity St. Mary's Campus

89 Genesee Street, Rochester 14611
(585) 723-7000

Brain injury rehabilitation program

(585) 368-3222

Psychiatric inpatient unit

(585) 368-3600

Unity Center for Aging

(585) 368-4200

Walk-in urgent care center

(585) 368-3531

The Villages at Unity

1471 Long Pond Road, Rochester 14626
(585) 723-7442

Note: Independent living apartments

Woodland Village

1477 Long Pond Road, Rochester 14626
(585) 368-4040

Note: Independent living apartments

5. Veterans Administration

Includes:

Monroe County Veterans' Service Agency

125 Westfall Road, Rochester 14620
(585) 753-6040

NYS Division of Veterans' Affairs

457 South Avenue, Rochester 14620
(585) 546-4510

Rochester Vet Center

1867 Mt. Hope Avenue, Rochester 14620
(585) 232-5040

V. Multiple-Level Care Providers (Hospital-Based Systems, continued)

VA Canandaigua Medical Center

400 Fort Hill Avenue, Canandaigua 14424

(585) 394-2000

Local Office

465 Westfall Road, Rochester 14620

(585) 463-2600

www.va.gov

VA Healthcare Network Upstate NY

www.visn2.va.gov

Note: Provides health care services to eligible veterans and their families at five upstate New York Medical Centers and 29 community-based outpatient clinics.

B. Nursing Home Related Facilities and Programs

1. Episcopal SeniorLife Communities

www.episcopalseniorlife.org

Includes:

Brentland Woods

3831 East Henrietta Road, Henrietta 14467

(585) 321-1490

Note: Enriched living apartments

The Center for Rehabilitation

505 Mt. Hope Avenue, Rochester 14620

(585) 546-8400 x3711

Episcopal Church Home

505 Mt. Hope Avenue, Rochester 14620

(585) 546-8400 x3711

Note: Skilled nursing care, special care for mid to late-stage dementia

River Edge Manor

535 Mt. Hope Avenue, Rochester 14620

(585) 232-3130

Note: Independent living apartments with optional services

Seabury Woods

110 Dalaker Drive, Rochester 14624

(585) 426-4950

Note: Patio homes, enriched-living apartments, memory care studios

Traditions in Caring

1580 Elmwood Avenue, Rochester 14620

(585) 241-9580

Note: Licensed home health-care agency (a cooperative venture of the Episcopal SeniorLife Communities, the Friendly Home, the Jewish Home, St. Ann's Community, and St. John's Home).

V. Multiple-Level Care Providers (Nursing Home Related, continued)

2. Fairport Baptist Homes

www.fairportbaptisthomes.org

Includes:

Alvin C. Foster Residential Health Facility

4646 Nine Mile Point Road, Fairport 14450

(585) 388-2307

Note: Skilled nursing care, transitional care center, rehabilitation, dementia care, comfort care

Deland Acres Independent Living Community

DeLand Acres Drive, Fairport 14450

(585) 377-6560

Note: Middle-income rate apartments

ElizAl Court Apartments

1027 East Whitney Road, Fairport 14450

(585) 377-6560

Note: Ranch-style, garage, study, 2.5 bedrooms

Fairport Apartments

1030 East Whitney Road, Fairport 14450

(585) 377-6560

Note: Subsidized apartments, Section 8 vouchers accepted

LifeTimes Adult Day Health Care Plymouth Gardens

1400 South Plymouth Avenue, Rochester 14611

(585) 328-3590

Note: Adult day medical health care program

The Northfield Senior Living Facility

4560 Nine Mile Point Road, Fairport 14450

(585) 377-1810

Note: Low-to-moderate rate senior enriched living apartments

Rose Hollow

29 Durant Place, Fairport 14450

(585) 377-6560

Note: Lower-income rate apartments

Roselawn Shared Living Residence

41 Roselawn Avenue, Fairport 14450

(585) 377-6560

Note: A shared living setting for living independently

Senior Options for Independence (SOFI)

4646 Nine Mile Point Road, Fairport 14450

(585) 377-7830

Note: Care management and non-medical in-home support services (limited to residents of the Town of Perinton or Village of Fairport)

V. Multiple-Level Care Providers (Nursing Home Related, continued)

3. Fairport Baptist Homes (continued)

SOFI Elderbus Transportation

4646 Nine Mile Point Road, Fairport 14450

(585) 377-8117

Note: Limited to residents of Perinton or Fairport age 60 and older

4. Friendly Senior Services

www.friendlyhome.org

Includes:

Cloverwood

One Sinclair Drive, Pittsford 14534

(585) 218-8800

Note: Patio homes, independent apartments

The Friendly Home

3156 East Avenue, Rochester 14618

(585) 381-1600

Note: Skilled nursing care, memory care, hospice (comfort) care, transitional care center for short-term rehabilitation

Glenmere at Cloverwood

1 Wheatley Terrace, Pittsford 14534

(585) 248-1200

Linden Knoll

81 Linden Avenue, Rochester 14618

(585) 385-0223

Note: Senior apartments

4. Jewish Senior Life

www.jewishseniorlife.org

Includes:

DayTimers

2021 Winton Road South, Rochester 14618

(585) 424-1420 x711

Note: Adult day medical health care program

The Jewish Home of Rochester

2021 South Winton Road, Rochester 14618

(585) 427-7760 x231 Admissions

Note: Skilled nursing care, The Gateway dementia care unit, hospice care

The Summit at Brighton

2000 Summit Circle Drive, Rochester 14618

(585) 442-4500

Note: Independent-living apartments

V. Multiple-Level Care Providers (Nursing Home Related, continued)

4. Jewish Senior Life (continued)

Weinberg-Manson Rehabilitation Center

2021 Winton Road South, Rochester 14618

(585) 427-7760

Note: Short-term inpatient care after an illness or hospital stay for surgery

Wolk Manor

4000 Summit Circle Drive, Rochester 14618

(585) 442-1950

Note: Enriched living, dementia care

5. St. Ann's Community

www.stannscmmunity.com

Includes:

Chapel Oaks

1550 Portland Avenue, Rochester 14621

(585) 697-6600

www.chapeloaks.net

Note: Community for independent living

Cherry Ridge

900 Cherry Ridge Boulevard, Webster 14580

(585) 697-6700

www.cherryridgecommunity.com

Note: Independent living cottages and apartments, assisted living units, memory care

The Heritage

1450 Portland Avenue, Rochester 14621

(585) 697-6640

Note: Studio apartments with medical support

Home & Heart at the Cathedral

287 Flower City Park, Rochester 14615

(585) 697-6086

Note: Social adult day program

Home & Heart of Penfield

1957 Five Mile Line Road, Penfield 14526

(585) 697-6087

Note: Social adult day program

Home Connection

1500 Portland Avenue, Rochester 14621

(585) 697-6361

Note: Adult day medical health care program

V. Multiple-Level Care Providers (Nursing Home Related, continued)

5. St. Ann's Community (continued)

Irondequoit Senior Ministries

(585) 697-6322

www.irondequoitseniorministries.org

Note: Covering six Irondequoit Catholic Faith Communities, Communion Service Ministry (for those living in other Irondequoit senior facilities), Visitation Ministry

Palliative Center for Caring

(585) 697-6603

Note: Partnership between St. Ann's and Visiting Nurse Service

St. Ann's Home

1500 Portland Avenue, Rochester 14621

(585) 697-6068

Note: Skilled nursing care, transitional care program, rehabilitation services, special care unit for dementia, hospice care

6. St. John's Senior Communities

www.stjohnshome.com

Includes:

Skalny Day Break

150 Highland Avenue, Rochester 14620

(585) 760-1436

Note: Adult day medical health care program

St. John's Home

150 Highland Avenue, Rochester 14620

(585) 271-5413

Note: Skilled nursing care, dementia care, hospice (comfort) care: 25 beds

St. John's Meadows

1 Johnsarbor Drive West, Rochester 14620

(585) 473-8650

Note: The Cottages: Independent units, Chestnut Court Apartments: Independent living, The Hawthorne, The Briarwood: Independent living

Wolk Rehabilitation Center

150 Highland Avenue, Rochester 14620

(585) 760-1311

7. Seniorsfirst

www.seniorsfirstonline.com

Includes:

Assisted Living Center at Valley Manor

1570 East Avenue, Rochester 14610

(585) 770-1800

V. Multiple-Level Care Providers (Nursing Home Related, continued)

7. Seniorsfirst (continued)

Kirkhaven Nursing Home

254 Alexander Street, Rochester 14607

(585) 461-1991

Note: Skilled nursing care, Anderson Transitional Care Center for short-term rehabilitation, Hart Taylor Special Care Center for dementia care, hospice (comfort) care

Seniorsfirst 1570 Gallery

1570 East Avenue, Rochester 14610

(585) 770-1923

Note: Public gallery of regional and local artists, open 9am-5pm Mon-Fri and by appointment

Seniorsfirst Adult Day Program

1570 East Avenue, Rochester 14610

(585) 770-1800

Note: Social adult day program, 7:30am-5:30pm Mon-Fri, recreation, exercises, nutritious meals, and more

Seniorsfirst At Home Services

(585) 770-1800

Note: Coordination of services through contracts with preferred providers, housekeeping, ancillary cleaning services (windows, garage cleaning, carpets, etc.), emergency personal response system, home maintenance

Seniorsfirst Health & Fitness Programs

1570 East Avenue, Rochester 14610

(585) 770-1800

Note: For residents and seniors in the community, therapeutic pool (89-degree) with lift, locker rooms, fitness room with "senior-friendly" equipment, variety of weekly exercise and aquatic classes

Valley Manor

1570 East Avenue, Rochester 14610

(585) 442-6450

Note: Independent apartments

-
- ⁱ Partnership for Clear Health Communication. *Good Questions for Your Good Health*. Retrieved January 31, 2008 from www.npsf.org/askme3.
- ⁱⁱ Materials adapted from Rochester Community End-of-Life Survey Report RIPA / Blue Cross, January 2001.

NOTES

Chapter 8: Home Care

Goals of this chapter:

1. To learn the different levels of home care personnel
2. To receive help in making decisions about access to services
3. To identify the sources of coverage for home care
4. To understand the different types of home care, with their scope of services, primary payers, and provider resources
5. To learn of resources that provide assistance and support in the home

I. Home Care	161
A. Description	161
B. Home Care Agency Personnel	161
II. Making Decisions about Help at Home	161
A. The Following Questions May Help	161
B. Hiring Through an Agency	162
C. Hiring on Your Own	162
D. Costs of Care	163
E. Resources	163
III. Coverage for Home Care	163
A. Medicare	163
B. Medicaid	163
C. Veterans Administration	163
D. Long-Term Care Insurance	163
E. E.I.S.E.P.	163
IV. Elder Care Management	164
A. Geriatric Care Managers or Consultants	164
B. Naturally Occurring Retirement Communities	165
V. Types of Home Care	166
A. Certified Home Health Agencies	166
B. Licensed Home Care Service Agencies	167
C. Private Duty Nursing	168
D. Companion Care or Housekeeping/Chore Services in the Home	169

(over)

VI. Home Care Programs	170
A. Long-Term Home Health Care Program	170
B. Consumer Directed Personal Assistance Program	171
C. Nursing Home Transition and Diversion Medicaid Waiver	172
D. Programs of All-Inclusive Care for the Elderly	173
E. Alzheimer’s Dementia Outreach Program	173
F. Employee Assistance Program	174
VII. User-Friendly Clothing	174
VIII. Nutrition	175
A. Home Delivered Meals	175
IX. Support at Home	175
A. Personal Emergency Response Systems	175
B. Alarm Systems	176
C. In-Home Monitoring Services	176
D. Automated Medication Systems	177
E. Durable Medical Equipment and Supplies	177
F. Home Maintenance and Accessibility	179
G. Heating and Energy	180
H. Moving	181
X. Safety and Security	181
A. Safety Measures	181
B. Resources for Home Safety	182
C. Personal Safety	182
XI. Medical Assistance at Home	183
A. Physician House Calls	183
B. Home Visits Program	183

I. Home Care

A. Description: Provision of health and/or social supports to persons living at home.

Goals:

- Maintain independence for persons with chronic illness or disabilities
- Provide support during the healing process following acute illness
- Prevent premature or unnecessary institutional care
- Improve quality of life by providing care in a preferred setting
- Provides care partner relief and support

B. Home Care Agency Personnel

- 1. Community Health/Public Health Nurse:** Coordinates services, manages, and supervises of plan of care. Provides medical assessments and treatments in the home and assessment of clients' needs in order to determine eligibility for services.
- 2. Social Worker:** Assists with developing and modifying a plan of care in conjunction with the physician, community health nurse, and family. Provides financial information and supportive counseling on environmental, emotional, and other health related issues. Can refer to other services.
- 3. Licensed Practical Nurse:** Direct hands-on patient care; treatment as ordered by the physician; can administer medications.
- 4. Home Health Aide:** Supervised by a nurse. Provides hands-on personal care and other related support services such as meal preparation, housekeeping, or assistance with self-administered medications. May carry out simple procedures such as an extension of physical, speech, or occupational therapy under supervision. For coverage of services by insurance, a needs assessment for medical necessity and a physician's order are required.
- 5. Personal Care Aide:** Supervised by a nurse. Provides assistance with personal care, hygiene, dressing, meal preparation (including special diets), and incidental household tasks essential to the maintenance of an individual at home. Not covered by the usual health insurances.
- 6. Therapist:** Provides speech, physical, or occupational therapy as ordered by the physician.
- 7. Housekeeper/Homemaker:** Provides non-medical support services such as food preparation, shopping, and incidental household tasks. As a substitute for the family homemaker, may give child care. May not do hands-on personal care of the client.

II. Making Decisions about Help at Home¹

A. The following questions may help:

- Who would best support my ability to care for the elder person at home?
- What does he or she need that I cannot provide (exercise/help with bathing/medication management)?
- Who is the elder person most likely to trust?
- Which service or program would be easiest for us to use?

II. Making Decisions about Help at Homeⁱⁱ (continued)

- What time(s) would be best for us to have this help (weekends/nights/weekday afternoons)?
- How much money do we have to put towards home care services?
- What chores could I give up to save my time and energy?
- Is the helper willing to respect household rules (smoking/TV/telephone use)?
- Is the helper willing to do things the way we want them done?
- Is the helper willing to be flexible and do extra tasks if something comes up?
- Will the helper arrive on time and stay for the full time?
- What will happen in an emergency or if the regular helper cannot come as scheduled?

B. Hiring through an agency:

- Is the agency certified or licensed by the state?
- What services are provided?
- Are there minimum or maximum hours of service?
- Does the agency screening process for employees include background checks, medical reports, and referrals?
- Does the agency bond, insure, train, and supervise employees?
- What education, training, and experience does the helper have?
- Is the helper sensitive and skilled with cultural and language differences?
- What limits are there on the tasks that can be performed?
- What coverage is there for vacations or holidays?
- Who is the supervisor to reach in case of problems?
- What documentation is provided for tax purposes?

C. Hiring on your own:

- Ask for proof of education, training, and experience
- Request and check at least three references
- Set specific hours and tasks to be performed
- Review what will happen in case of emergency, or if the helper is late or sick
- Put in writing agreements about fees, insurance, bonding, vacations, holidays
- Decide on payroll documentation for tracking hours and for tax purposes

II. Making Decisions about Help at Home (continued)

D. Costs of Careⁱⁱⁱ

Average Costs of Care for Local Area (Rochester)

For Home Care	Medicare-Certified		State-Licensed	
	Local Median Rate/Hour	National Median Rate/Hour	Local Median Rate/Hour	National Median Rate/Hour
Home Health Aide Services	\$35.00	\$46.22	\$24.00	\$19.00
Homemaker Services			\$20.00	\$18.00

E. Resources

AARP/Andrus Foundation Booklet: “Steps for Success: Decisions about Help at Home for Alzheimer’s Caregivers” gives many tips that can be useful for everyone. Booklets are available from the Alzheimer’s Association, please call (585) 760-5400.

WXXI Public Broadcasting and the University of Rochester Medical Center: “Second Opinion: Caregiver’s Diary and Resource Guide” helps you manage your loved ones healthcare and find the resources you may need as a caregiver. Booklets are available from PBS at www.pbs.org/secondopinion.

III. Coverage for Home Care

Coverage is very limited for most types of home care. It is wise to consult with a counselor such as an elder-law attorney or a staff person from the Health Insurance Information, Counseling, and Assistance Program (244-8400 x113) to ensure that all possibilities have been explored.

- A. Medicare** and other health insurances such as Blue Cross/Blue Shield may provide some limited, short-term services for individuals who require skilled care at home by a registered nurse upon doctor’s orders. Under insurance guidelines, the client must be homebound.
- B. Medicaid** covers home care for those eligible through two different programs, each with its own budgeting process.
- C. Veterans Administration (V.A.):** Please refer to page 150 in Chapter 7
- D. Long-term care insurance:** Some carefully-selected policies provide for home care and care in intermediate facilities, as well as nursing home care. Some retirement plans also provide partial coverage depending on company policy.
- E. E.I.S.E.P.^{iv} (Expanded In-home Services for the Elderly Program):** Assists older people who need non-medical help with every day activities to take care of themselves, want to remain at home, and are not eligible for Medicaid.

III. Coverage for Home Care (continued)

The EISEP Program receives state and local funding. In addition, EISEP clients are required to cost share according to a sliding scale reflecting their income and the cost of the services they receive.

1. Eligibility

- Resident in the county where application is made
- 60 years of age or older
- Functionally impaired in at least one of the following: bathing, dressing, eating, transferring, toileting or two of the following: housekeeping, shopping, preparing meals, laundry, telephoning
- Not eligible for the same services under Medicaid, Medicare, or other program
- Can be maintained safely in the home

2. Services

a. Care Management: A care manager assesses, coordinates, monitors, and adjusts appropriate non-medical services in the home. Beginning steps:

- An interview in client's home to identify needs, so that a service plan designed for the individual can be prepared
- A financial inquiry to determine the amount of cost-share

b. In-Home Services assist with non-medical needs:

- Housekeeping/chore services provide help with cleaning, preparing meals, laundry
- Personal care services provide all of the above plus help with bathing, dressing, grooming, eating, walking, and toileting
- EISEP also can assist with paying for social adult day care to provide non-institutional respite

3. Provider

Catholic Family Center

(585) 262-7060

www.cfcrochester.org

IV. Elder Care Management

A. Geriatric Care Managers or Consultants: Assist care partners and older adults with planning, referral to services, advocacy, and support to maintain the person at home or find suitable options for placement.

1. Scope of Services

- Assessment (functional, psychological, social) and care plan development
- Linkage to needed services (e.g., therapy, home care)
- Crisis intervention
- Assistance with health insurance issues and government entitlements
- Assistance with appropriate placement or relocation
- Obtaining a P.R.I. and screen for nursing home placement
- Advocacy
- Continued monitoring at any location
- Counseling/education

IV. Elder Care Management (continued)

2. Primary Payer

- Private
- Donation-based

3. Resources

Local Agencies

Eldersource

(585) 325-2800

www.eldersource.org

Note: For information and referral

Jewish Family Service

(585) 461-0110

www.jfsrochester.org

Unity Care at Home

(585) 368-4139

www.unityhealth.org

National

National Association of Professional Geriatric Care Managers

(520) 881-8008

www.caremanager.org

B. Naturally Occurring Retirement Communities (NORCs)^v: Designed to make services and support available that maintain and/or increase the independence of people age 60 or older. To qualify, you must be a Monroe county resident, 60 years of age or older and live in one of the following targeted areas: in the Irondequoit neighborhoods surrounding King's Court Apartments, Crossroads Apartments, Keeler Street Apartments, Rochester Highland Apartments or Ellison Park.

1. Scope of Services

a. Care Management and Supportive Services include:

- Housekeeping
- Chores
- Personal Care
- Health Monitoring
- Screening
- Education
- Meal Preparation
- Transportation
- Home Modification & Repair
- Bill Paying & Budgeting
- Friendly Visiting

2. Primary Payer

- Grant-funded at no or low cost

IV. Elder Care Management (NORCs, continued)

3. Resources

Eldersource NORCs

(585) 325-2800

Note: A service of Eldersource in conjunction with Jewish Family Service, VNS of Rochester and Community Place.

Irondequoit NORC

(585) 342-1240

Jewish Family Service

Home Base NORC

(585) 288-3442

Note: Site-based case management program that supports the aging at home of residents 60+ living at Ellison Park.

Rochester Highlands

(585) 242-0742

V. Types of Home Care

A. Certified Home Health Agencies (CHHAs)^{vi}

Provide part-time, intermittent health care and support services to individuals who need intermediate and skilled health care. CHHAs can also provide long-term nursing and home health aide services, can help patients determine the level of services they need, and can either provide or arrange for other services including physical, occupational, and speech therapy, medical supplies and equipment, and social worker and nutritional services. NYS Department of Health regulations ensure that staff are appropriately qualified, trained, and supervised. In addition, unannounced surveys assess CHHAs' compliance with federal standards governing the quality and scope of services.

1. Scope of Services

- Evaluation/Assessment
- Case Management
- Skilled Nursing
- Therapies: Physical, Occupational, Speech, Respiratory
- Home Health Aide or Personal Care Aide
- Dietary
- I.V. Therapy
- Durable Medical Equipment and Supplies
- Specialty Services:
 - Some CHHAs offer a choice of alternative medicine
 - Some CHHAs are certified to offer hospice care

2. Primary Payer

- Medicare (limited to skilled nursing needs such as wound care or physical therapy)
- Medicaid
- Blue Cross/Blue Shield (some policies)
- Health Maintenance Organizations (HMOs)
- Private Pay (i.e. self, long-term insurance, other)

V. Types of Home Care (CHHA's, continued)

3. Resources

Home Care of Rochester
(585) 272-1930
www.homecarerochester.com

Visiting Nurse Service (VNS)
(585) 787-2233
www.vnsnet.com

Lifetime Care
(585) 214-1000
www.lifetimecare.org

B. Licensed Home Care Services Agencies (LHCSAs)^{vii}

Licensed by New York State, these agencies provide hourly nursing care and homemaker, housekeeper, personal-care attendants and other health and social services.

1. Scope of Services

- Aide Care:
 - Home Health Aide
 - Personal Care Aide
 - Housekeeper
 - Companion
 - Homemaker
- Hospice/Palliative Care (some agencies)
- Private Duty
 - Registered Nurse
 - Licensed Practical Nurse
- Temporary Services by Nurses/Aides in:
 - Hospitals
 - Home Care Agencies
 - Nursing Homes

2. Primary Payer

- Private Pay
 - Self
 - Long-term insurance
 - Other
- EISEP (through Catholic Family Center)
- Contracts with:
 - Certified Agencies
 - Long-term Home Health Care Programs

V. Types of Home Care (LHCSAs, continued)

3. Resources

All Metro Health Care

(585) 381-6240
www.all-metro.com

American HomePatient/PrimaCare

(585) 787-0100
www.ahom.com

Angels in Your Home (Hilton East)

(585) 392-1118 x302 or 301
www.hiltoneast.com

CareGivers

(585) 458-2150
www.caregivershomecare.com

Companion Care of Rochester Inc.

(585) 546-1600
(800) 414-2355
www.ccorhome.com

Interim Healthcare

(585) 454-4930
www.interimhealthcare.com

Maxim Healthcare Services

(585) 454-3550
www.maxhealth.com

Rural/Metro Inc.

(585) 546-2393

Serenity Homecare, Inc.

(585) 624-4550
www.bridgesofmendon.com

Sibley Nursing Service

(585) 325-3220
(888) 742-5392
www.sibleynursing.com

Traditions in Caring

(585) 241-9580
www.traditionsincaring.com
Note: Collaboration by 5 senior care communities

Unity Care at Home

(585) 723-7324
www.unityhealth.org

Unlimited Care Inc.

(585) 272-8800

Visiting Nurse Signature Care

(585) 787-2233
www.vnsnet.com

Westside Home Care Agency

(585) 637-7215
www.westsidehomecareagency.com

C. Private Duty Nursing

1. Scope of Services

- Registered Nurses or Licensed Practical Nurses provide services to:
 - Private homes
 - Nursing homes
 - Hospitals

2. Primary Payer

- Private-pay
 - Self
 - Long-term care insurance
 - Other

V. Types of Home Care (Private Duty Nursing, continued)

3. Resources

Eldersource

(585) 325-2800

www.eldersource.org

Note: For information and referral

Unity at Home

(585) 368-3463

www.unityhealth.org

*Or call a certified or licensed home care agency as listed in A & B above.

D. Companion Care or Housekeeping/Chore Services in the Home

1. Scope of Services

Agencies may choose to provide some or all of the following:

- Companion care services
 - Meals
 - Shopping
 - Hairdressing
 - Prescription pickup
 - Transportation
- Housekeeping services
 - House cleaning
 - Laundry
- Chore services
 - Lawn care
 - Snow plowing
 - Painting
 - Gutter cleaning
 - Electrical
 - Plumbing
 - Home maintenance
 - Roof/window repair
 - Large construction

2. Primary Payer

- Private Pay

3. Resources

All Metro Health Care

(585) 381-6240

www.all-metro.com

Assisting Angels Senior Care

(585) 329-4476

www.assistingangelsseniorecare.com

CareGivers

(585) 458-2150

www.caregivershomecare.com

Catholic Family Center

(585) 262-7060 EISEP

(585) 262-7050 STAR

www.cfcrochester.org

Comfort Keepers

(585) 249-0100 Eastside

(585) 663-5730 Westside

www.comfortkeepers.com

Companion Care of Rochester

(585) 546-1600

(800) 414-2355

www.ccorhome.com

Deliver-Ease

(585) 544-6342

Eldergard Services

(585) 256-3510

V. Types of Home Care (Companion Care, continued)

Happier at Home

(585) 248-5021
www.HappierAtHome.org

Home Instead Senior Care

(585) 663-4620
www.homeinstead.com

Homestay Companion Care

(585) 272-1311
Note: Referral for live-in care

Kindred Senior Care

(585) 210-0296
www.rochester@kindredseniorcare.com

Lifespan Partners in Caring

(585) 244-8400 x177
www.fianationalnetwork.org

Pride in Caring

(585) 697-2900
www.prideincaring.com

Services for Seniors, LLC

(585) 723-8760
www.servicesforseniors.com

Sisters Care

(585) 458-8540
www.sisterscaressj.org

Tender Loving Family Care, Inc

(585) 637-0333
www.tenderlovingfamilycare.com

Touching Hearts at Home

(585) 271-7390
www.touchingheartsnyc.com

Traditions in Caring

(585) 241-9580
www.traditionsincaring.com

Unity Care at Home

(585) 723-7324
www.unityhealth.org

Visiting Nurse Signature Care

(585) 787-2233
www.vnsnet.com

VI. Home Care Programs

A. Long-Term Home Health Care Programs (LTHHCPs)^{viii}

Coordinated plan of medical, nursing, and rehabilitative care provided at home to disabled persons who are medically eligible for placement in a nursing home and choose to receive services at home. These individuals must have care costs which are less than the nursing home cost in the county. The local department of social services is responsible for participating in the periodic reassessment of the services provided. The providers are responsible for obtaining physician orders and administering the assessment tools. The NYS Department of Health periodically surveys the providers to determine the quality and scope of the medical, nursing, and rehabilitative care they deliver.

1. Scope of Services

- Evaluation/Assessment
- Case Management
- Skilled Nursing
- Therapies: Physical, Occupational, Speech, Respiratory
- Durable Medical Equipment and Supplies (see listings on page 167)
- Social Work
- Dietary
- Audiology

VI. Home Care Programs (LTHHCPs, continued)

- Aide Care:
 - Home Health Aide
 - Personal Care Aide
 - Homemaker
 - Housekeeper
- Waivered Services:
 - Social Work Services
 - Moving Services
 - Respite Care
 - Personal Emergency Response Systems
 - Home-delivered meals
 - Home Improvement
 - Home Maintenance
 - Transportation
 - Social/Medical Adult Day Services (in NY)

2. Primary Payer

- Medicare (limited to skilled nursing needs; e.g., wound care or physical therapy)
- Medicaid
- Private-pay
 - Self
 - Long-term care insurance
- Other

3. Resources

Unity Park Ridge at Home
 (585) 368-6305
www.unityhealth.org

Visiting Nurse Service (VNS)
 (585) 787-2233
www.vnsnet.com

B. Consumer Directed Personal Assistance Program^{ix} (CDPAP)

This Medicaid program provides services to chronically ill or physically disabled individuals who have a medical need for help with activities of daily living (ADLs) or skilled nursing services. Recipients have flexibility and freedom in choosing their care partners. The consumer or the person acting on the consumer's behalf (such as the parent of a disabled or chronically ill child) assumes full responsibility for hiring, training, supervising, and if need be terminating the employment of persons providing the services.

Recipients must be able and willing to make informed choices regarding the management of the services they receive, or have a legal guardian or designated relative or other adult able and willing to help make informed choices.

Before a person can receive services, his or her doctor must send a completed Physician's Order for Services to the Monroe County Home Care Services Unit, which then completes a social and nursing assessment. A nurse assessor then determines whether the recipient can appropriately participate in CDPAP, and recommends the amount, frequency and duration of services.

VI. Home Care Programs (CDPAP, continued)

If participation in CDPAP is appropriate, the consumer can then choose their personal care aide, a back-up aide, and choose the provider agency for which their aide will work. In Monroe County, the five contracted provider agencies include:

All Metro Health Care

330 Monroe Avenue, Rochester 14618
(585) 381-6240

Innovative Care, LLC

2775 Buffalo Road, Rochester 14624
(585) 235-0560

Maxim Healthcare Services

150 State Street, Suite 140
Rochester 14614
(585) 454-3550

Medical Solutions, Inc.

2701 Culver Road, Suite 200
Rochester 14622
(585) 269-1864
(585) 261-5050

NurseCore of Rochester

1302 Scottsville Road, Rochester 14624
(585) 341-4494

C. Nursing Home Transition and Diversion (NHTD) Medicaid Waiver

A Home and Community Based Services (HCBS) program, administered by the New York State Department of Health (DOH) using Medicaid funding to provide supports and services to assist individuals with disabilities and seniors toward successful inclusion in the community. Waiver participants may come from a nursing facility or other institution (transition), or choose to participate in the waiver to prevent institutionalization (diversion). Waiver services may be considered when informal supports, local, state and federally funded services and Medicaid State Plan services are not sufficient to assure the health and welfare of the individual in the community, or when waiver services are a more efficient use of Medicaid funds.

1. Scope of Services

- Service Coordination
- Assistive Technology
- Community Integration Counseling
- Community Transitional Services
- Congregate and Home Delivered Meals
- Environmental Modifications Services
- Home and Community Support Services
- Home Visits by Medical Personnel
- Independent Living Skills Training
- Moving Assistance
- Nutritional Counseling/Educational Services
- Peer Mentoring
- Positive Behavioral Interventions and Supports
- Respiratory Therapy
- Respite Services
- Structured Day Program Services
- Wellness Counseling Service

VI. Home Care Programs (NHTD Waiver, continued)

2. Primary Payer

- Medicaid

3. Resources

Unity Health System

89 Genesee St., Rochester 14611

(585) 368-3562 Terri Mercado, RRDS

(585) 368-3563 Kathy Capomaccio, RRDS/NE

(585) 368-3564 Marisa Avery, RRDS

www.unityhealth.org

Note: Areas Served: Monroe, Wayne, Ontario, Seneca, Genesee, Livingston and Yates counties

D. Programs of All-inclusive Care for the Elderly (P.A.C.E.)

Cover all services (including physician and hospital services) a participant needs under the guidance of a team of doctors, nurses and other health professionals.

1. Scope of Services

- Integrates preventative care, primary care, acute (hospital) care, long-term care, home care, and medical adult day services
- Full scope of home care services, provided and coordinated from a single provider network

2. Primary Payer

- Medicare
- Medicaid
- Private-pay
 - Self
 - Long-term care insurance

3. Resources

ViaHealth Independent Living for Seniors - Hudson Center

2066 Hudson Avenue, Rochester 14617

(585) 922-2800

www.independentlivingforseniors.org

E. Alzheimer's Dementia Outreach Program (this can be part of a Long-Term Home Health Care Program; see)

1. Scope of Services

- A Care Team develops an individualized care plan, working with the patient and the family:
 - Identifying specific needs
 - Providing comprehensive services for care

2. Primary Payer

- Medicare (limited to skilled nursing needs such as wound care or physical therapy)
- Medicaid
- Private pay
 - Self
 - Long-term insurance
 - Other

VI. Home Care Programs (continued)

3. Resources

Unity Health System

(585) 368-6305

www.unityhealth.org

F. Employee Assistance Program

Emergency Backup Care for Elders. Kodak and Xerox provide this service for current employees through their Employee Assistance or Human Resource programs.

These services are designed to enable the care partner to stay at work rather than have to leave to tend to a relative's needs

1. Scope of Services

- Companion care
- Light housekeeping, light laundry, meal preparation
No hands-on personal care
- Can provide supplement to other home care services

2. Primary Payer

Partial payment by employer for up to 40 hours of emergency elder care. Contracted locally through Services for Seniors.

3. Resources

Services for Seniors, LLC

(585) 723-8760

VII. User-Friendly Clothing

1. Scope of Services

- Garments with easy-to-manage closures

2. Primary Payer

- Private

3. Resources

American Health Care Apparel

(800) 252-0584

www.clothesforseniors.com

Buck and Buck

(800) 458-0600

www.buckandbuck.com

Resident Shoppers Service

(800) 537-3811

www.shoppersservice.com

Silverts

(800) 387-7088

www.silverts.com

VIII. Nutrition

A. Home-Delivered Meals

1. Scope of Services

- Food service: up to 2 meals per day, 7 days per week

2. Primary Payer

- Private pay
 - Self
 - Long-term care insurance
- Long-Term Home Health Care Programs

3. Resources

Kosher2Go Meal Service

(Jewish Senior Life)

(585) 489-0804

www.jewishseniorlife.org

Note: Kosher take-out and meal delivery service

Lorraine's Food Factory

(585) 442-6574

www.lorrainesfoodfactory.com

Note: Frozen gourmet meals

Meals On Wheels (VNS)

(585) 787-8397

www.vnsnet.com/mow.htm

Note: To volunteer to deliver meals call (585) 787-8326

Unity Care at Home

(585) 723-7324

www.unityhealth.org

IX. Support at Home

A. Personal Emergency Response Systems: Necklace or bracelet alarm for help in your home in the event of an emergency.

1. Scope of Services

- Response to personal emergency; can be part of the services by Long-Term Home Health Care Programs or Certified Home Health Agencies

2. Primary Payer

- Private pay
 - Self
 - Long-term care insurance
 - Other
- Medicaid

3. Resources

Local

Doyle Medical Alarm

(585) 244-3400

(866) 463-6953

www.GoDoyle.com

Home Helpers

(585) 334-0999

Jewish Senior Life

(585) 427-8456

www.jewishseniorlife.org

Lifespan's Safety Alert For Emergency Response (SAFER)

(585) 244-8400

www.lifespan-roch.org

Note: Partnership between Lifespan and Doyle Medical Monitoring

Medi-Mate

(Lakeside Hospital: for Brockport, Churchville, Hilton, Kendall, and Spencerport only)

(585) 637-6044

IX. Support at Home (continued)

Safe Alert (Special CareSystems)
(585) 671-1180
www.specialcaresys.com

Unity Healthcall
(585) 723-7444
www.unityhealth.org

Visiting Nurse Signature Care
(585) 787-8346

Note: Partners with Philips Lifeline Systems. Lifeline with AutoAlert is a new product that provides an added layer of protection by automatically placing a call for help if a fall is detected.

National

All-Metro Lifeline
(800) 572-1700
www.amerslifeline.com

Link to Life
(888) 337-5433
www.linktolife.com

Philips Lifeline Systems
(800) 380-3111
www.lifelinesys.com

B. Alarm Systems

The following companies sell fall prevention and wandering management products:

AliMed
(800) 225-2610
www.alimed.com

The Alzheimer's Store
(800) 752-3238
www.alzstore.org

Personal Safety Corporation
(800) 373-2873
www.padalarm.com

Powderhorn Industries, Inc.
(800) 336-1414
www.powind.com

Note: Click on "Restraint Alternatives"

RF Technologies
(800) 669-9946
www.rft.com

C. In-Home Monitoring Services

Monitoring devices allow vital signs and other data to be transmitted directly from the home to the monitoring center. This helps break the cycle of emergency care and hospital re-admission for persons with chronic illnesses.

1. Scope of Services

Prescribed measurements of:

- Heart rate
- Blood pressure
- Weight
- Temperature
- Oxygen saturation
- Blood glucose levels
- Lung capacity
- Prothrombin time

2. Primary Payer

- Medicare-eligible clients of Lifetime Care who meet the selection criteria are monitored at no cost to the client
- Private pay

IX. Support at Home (In-Home Monitoring Services, continued)

3. Resources

Lifetime Care
(585) 214-1000
www.lifetimecare.org

Telehealth Monitoring System
(Unity Care at Home)
(585) 723-7324
www.unityhealth.org

D. Automated Medication Systems

1. Scope of Services

- A device to organize, remind, and dispense medications. Device can be locked to prevent tampering; battery backup; alarm warning until medications are removed; stores up to 7 days of 4 doses per day

2. Primary Payer

- Private pay

3. Resources

Comfort Keepers
(585) 249-0100 Eastside
(585) 663-5730 Westside
www.comfortkeepersofrochester.com

Unity MedSmart
(585) 723-7444
www.unityhealth.org

MedReady (Safe Home Products)
(877) 358-0900
www.safehomeproducts.com

E. Durable Medical Equipment and Supplies

1. Scope of Services (depending on the provider, may include):

- Canes
- Walkers
- Wheelchairs
- Scooters
- Electric lift chairs
- Hospital beds
- Orthotics
- Oxygen
- Bedpans
- Hygiene or surgical supplies

2. Primary Payer

- Medicare, Medicaid
- Private pay
- Other insurances (if eligible) through the supervising physician or agency

IX. Support at Home (Durable Medical Equipment and Supplies, continued)**3. Resources****American Home Care**

255 Middle Road, Henrietta 14467
(585) 334-5140

American HomePatient/PrimaCare

1851 Empire Blvd., Webster 14580
(585) 787-0100
www.ahom.com

Apria Healthcare

1250 Scottsville Rd., Rochester 14624
(585) 436-4910
www.apria.com

**Durable Medical Equipment
& Supplies**

2851 Clover Street, Pittsford 14534
(585) 383-0940
(866) 899-0940
www.power-chair.com

Fonte Surgical Supply Inc.

892 E. Ridge Road, Rochester 14621
(585) 338-1000
www.fontesurgical.com

**Monroe Oxygen
& Medical Equipment**

2672 Ridge Rd. W., Rochester 14621
(585) 271-1140
(877) 409-7778
www.monroeoxygen.com

Monroe Wheelchair

3340 Monroe Ave., Rochester 14618
(585) 385-3920
(888) 546-8595
www.monroewheelchair.com

Park Ridge Apothecary

1561 Long Pond Rd., Rochester 14626
(585) 723-7340
www.unityhealth.org

Rochester Oxygen

395 Summit Point Drive, Suite 3A
Henrietta 14467
(585) 334-0200
(888) 508-0202
www.rochesteroxygen.com

Southside Medical Supply

1815 Clinton Avenue South, Suite 405
Rochester 14618
(585) 271-7141
(800) 333-0979
www.southsidemedicalsupply.com

*Note: Now carrying incontinence supplies;
free samples and home delivery available.*

Upstate Home Care

200 Airpark Drive, #100, Rochester 14624
(585) 328-2050
www.upstatehomecare.com

Westside Medical Supply

765 Elmgrove Road, Rochester 14624
(585) 227-8750
www.wmsupply.com

Loan Closets**Masonic Service Bureau**

979 Bay Road, Webster 14580
(585) 671-9730
www.monroemasonic.com

Regional Center for Independent Living

497 State Street, Rochester 14608
(585) 442-6470
www.rcil.org

*Also inquire at local fire departments

IX. Support at Home (continued)

National

The Caregivers Marketplace (TCM)

(800) 888-0889

www.caregiversmarketplace.com

Note: Provides cash back on eligible products used every day

First Choice Home Health Care

(866) 314-2273

www.firstchoiceus.com

Note: Online store only

Sammons Preston Rolyan Online Catalogue

(800) 323-5547

www.sammonspreston.com

SureHands Lift & Care Systems

(800) 724-5305

www.surehands.com

Woodbury Products, Inc.

(800) 777-1111

www.woodburyproducts.com

*Note: For free samples, ask for Denise:
(888) 444-3331 x121*

F. Home Maintenance and Accessibility

1. Scope of Services

- Providers listed below offer assistance with home maintenance and repairs.
- Assist with home improvements
- Improve accessibility via lifts, ramps and other adaptive equipment

2. Primary Payer

- Private pay or membership fee

3. Resources

Access Lifts & Ramps Inc.

(585) 247-1210

(800) 515-5438

www.accessliftsandramps.com

Accessibility Solutions Inc.

(800) 683-9563

www.wantalift.com

AmRamp

(585) 345-1854

www.amramp.com

Barrier-Free Living

(585) 624-5160

www.barrierfree123.com

Bishop Sheen

Ecumenical Housing Foundation

(585) 657-4114

www.sheenhousing.org

Note: Please call for grant opportunities

City of Rochester

(Building & Housing Development)

(585) 428-6827

Note: Landlords may be eligible for a grant to assist with lead hazard remediation in the home.

IX. Support at Home (Home Maintenance and Accessibility, continued)

Functional Interiors

(585) 227-1045

www.functionalinteriors.com

HomeWorks (Catholic Family Center)

(585) 262-0335

www.cfcrochester.org

Note: Home maintenance and repairs

Lifespan's

"Home-Safe-Home" Program

(585) 244-8400

Note: Free presentations giving practical safety tips; upon referral by a senior care professional, "Safety and Security" volunteers conduct in-home safety assessments and home modifications, such as grab bars and handrails without charge to low or moderate income individuals.

Monroe Wheelchair

(585) 385-3920

www.monroewheelchair.com

Mr. Grab Bar, LLC

(585) 872-0820

www.grabbarofwny.com

Safety & Access Co.

(585) 458-3681

www.safetyandaccesscomp.com

Unity Care at Home

(585) 723-7324

www.unityhealth.org

Unity Safe at Home

(585) 723-7444

www.unityhealth.org

Note: In-home safety assessments and recommendations.

Victory Lifts Inc.

(585) 429-0356

www.victorylifts.com

G. Heating and Energy

1. Scope of Services

- Energy efficiency improvements
- Heating grants
- Reduce utility costs

2. Primary Payer

- Grants
- Subsidies

3. Resources

Assisted Home Performance with Energy Star®

(Offered through PathStone)

(585) 442-4554

www.pathstone.org

Note: Those who are income-eligible may qualify for a 50% incentive to help pay for energy efficiency improvements to their homes; some may qualify for a low-interest loan through the New York Energy loan fund or the PathStone Assisted Home Performance loan fund.

EmPower New YorkSM

(Offered through PathStone)

(585) 442-2030 x202

www.pathstone.org

Note: Provides cost-effective electric reduction measures, such as lighting and refrigerator replacements, and may provide other insulation, home energy efficiency and financial cost performance measures to eligible low-income people.

IX. Support at Home (Heating and Energy, continued)

Home Energy Assistance Program (HEAP)

State (800) 342-9871
 Local (585) 244-8400 x102 (Lifespan)
www.otda.state.ny.us/main/heap
Note: Federally-funded program that helps issue heating benefits to supplement a household's annual energy cost.

NYS Public Service Commission

(518) 474-7080
 (800) 342-3355 Gas, Electric Shutoff
 (800) 342-3377 Service, Billing
www.dps.state.ny.us

Public Utility Law Project of New York, Inc. (PULP)

(518) 449-3375
www.pulp.tc

Red Cross/RG&E Heating Fund

(585) 241-4474
www.rochesterredcross.org
Note: Heating fund grants to those residing in RG&E's service area, have a heating emergency such as lack of fuel oil, potential discontinuation of natural gas or electricity service, and do not qualify for government assistance such as HEAP

Weatherization Referral and Packaging (WRAP)

(Offered through Monroe County Office for the Aging)
 (585) 753-6560
www.monroecounty.gov
Note: Examiners identify low-income seniors who are in need of energy-related services, provide education and assist in obtaining available community resources.

H. Moving

1. Scope of Services

- Organize, pack and/or move personal belongings

3. Resources

Everything has a Place, LLC

(585) 797-9321
www.everythinghasaplace.com

Grandma's Helpers, LLC

(585) 334-3544
www.grandmashelpers.biz

2. Primary Payer

- Private Pay

Moving Memories

(585) 720-1830
www.movingmemoriesny.com

Structured Style

(585) 223-0929
www.structuredstyle.net

X. Safety and Security

A. Safety Measures

- Don't leave a spare house key under a doormat, a flowerpot, etc. Give keys to a family member and/or to a trusted neighbor instead.
- Keep shrubs and trees trimmed and away from your windows. Trees can be used to gain access to a second story. Shrubs that cover windows can give an intruder added protection.
- Maintain smoke and carbon monoxide detectors.
- Check temperature of water heater to avoid scalding (120° or less).

X. Safety and Security (continued)

- Install handrails and good lighting on indoor and outdoor stairs.
- Eliminate throw rugs or clutter on floors and flat surfaces.
- Consider relocation of laundry facilities.
- If you use a telephone answering device, consider the following:
 - Make sure your message is in a male's voice.
 - Your message should use the term "we", not "I." The more people the caller thinks live in the house, the better.
 - Never say you are not at home or out of town. You can simply say, "Leave a message if you wish."
 - Clear your messages regularly.

B. Resources for Home Safety

AARP

(888) 687-2277

www.aarp.org

Alzheimer's Association

(585) 760-5400

www.alz.org/rochesterny

Note: "Home Safety for People with Alzheimer's" booklets available

American Red Cross - National

(800) 733-2767

www.redcross.org

Note: Disaster Services and Emergency Assistance

Red Cross - Rochester Chapter

(585) 241-4400

www.rochesterredcross.org

Note: "Disaster Preparedness" brochures available by calling (866) 787-3470 or by going to their website

Home Safety Products

The Alzheimer's Store

(800) 752-3238

www.alzstore.com

Organized Solutions, LLC

(800) 349-8993

www.organizedsolutionsllc.com

Identification Products

Safe Assured ID

(888) 995-7233

www.safeassured-id.com

Senior Safety Net

(509) 224-1600

www.seniorsafetynet.org

Note: Web-based registry to identify missing persons

C. Personal Safety

- Try to avoid public rest stops. Find a well-populated restaurant or other place that offers more safety.
- Have your key in your hand ready to put into the lock as you walk to your car.
- Keep your car doors locked when driving.
- Avoid putting a purse on the seat where someone walking past the car can reach in and steal it.
- If stopped in traffic, leave enough space between you and the vehicle in front.
- Asking strangers for directions could lead to trouble. Go to a store or gas station.
- If you can't start your vehicle or have a flat tire, don't accept an offer of help from a stranger. Instead, go to a nearby place of business or residence to call for assistance.

XI. Medical Assistance at Home

A. Physician House Calls

1. Scope of Services

- In-home primary care and assessments of medical problems

2. Primary Payer

- Medicare
- Medicaid
- Private insurance

3. Resources

**The Jewish Senior Life
Physician House Calls Program**
(585) 244-5993
www.jewishseniorlife.org

Senior Medical Care, PLLC
(585) 872-2710
www.housecallmdforseniros.com

B. Home Visits Program

1. Scope of Services

- Nurse evaluation to help identify care needs
- Referral to other area providers as needed
- Post visit follow-up coordination with families and referral sources

2. Resources

Emeritus Senior Living Adult Care Communities
“You don’t have to live with us to help”
www.emeritus.com

- **The Landing at Brockport**
(585) 637-3140
- **Perinton Park Manor in Fairport**
(585) 425-0210
- **West Side Manor in Greece**
(585) 225-7210

-
- ⁱ AARP Andrus Foundation (2002). *Steps to Success: Decisions about Help at Home for Alzheimer's Caregivers*.
- ⁱⁱ AARP Andrus Foundation (2002). *Steps to Success: Decisions about Help at Home for Alzheimer's Caregivers*.
- ⁱⁱⁱ Genworth Financial (2010, April). 2010 Cost of Care Survey. Retrieved August 13, 2010 from <http://www.genworth.com/>
- ^{iv} Catholic Family Center (2009). Retrieved October 8, 2009 from www.cfcrochester.org/pg/eisep
- ^v New York State Department of Health (2003, May). Retrieved October 8, 2009 from www.health.state.ny.us
- ^{vi} New York State Department of Health (2003, May). Retrieved October 8, 2009 from www.health.state.ny.us
- ^{vii} New York State Department of Health (2003, May). Retrieved October 8, 2009 from www.health.state.ny.us
- ^{viii} New York State Department of Health (2003, May). Retrieved October 8, 2009 from www.health.state.ny.us
- ^{ix} Monroe County Department of Human Services. Financial Assistance. Retrieved August 17, 2010 from <http://www.monroecounty.gov/hs-assistance.php>.

Chapter 9: Alternative Housing Options

Goals for this Chapter:

1. To learn how to choose appropriate housing
2. To learn what questions to ask when selecting housing alternatives
3. To gain knowledge of the various senior housing options in the community

I. What to look for when choosing any living facility	186
II. What to ask	186
III. New York State Housing Options	186
A. Independent Living Units	186
B. Shared Housing or Group Residences	193
C. Adult Care Facilities	193
D. Adult Homes	193
E. Enriched Housing Programs	195
F. New York State Licensed Assisted Living Program	196
G. Licensed Assisted Living Residence	196
H. Dementia Care Facilities/Units	197
I. Multiple-Level Care Providers	198

I. What to look for when choosing any living facility:

- Tour the building. Be aware of the environment.
- Find out what services, recreation, and programs are available.
- Talk with the residents. Are they satisfied with the facility and its services?
- If needed, make sure the facility will accommodate special diets.

II. What to askⁱ:

- What is included in the basic fee? There is a wide range of costs and services.
- What is extra? What specific services are not covered in the basic rate?
- What happens if funds are depleted and payments can no longer be made? In other words, if residents need to apply for Medicaid, can they remain in the residence?
- Ask if the money is returned if the resident dies within the term of the lease.
- Does the residence have an affiliation with a hospital or skilled nursing facility?
- Who decides whether the resident must move to the next level of care: the facility staff, based on regulations or facility policies; or the resident and family?
- How are medical emergencies handled?
- How does the staff supervise and assist residents in taking medicine?
- Are the services of a physical, occupational, or speech therapist available or arranged?
- How is personal laundry handled? Is it an additional expense?
- Are housekeeping or maid services provided?
- Are barbers or beauticians available?
- What kind of group and individual recreational activities are offered?
- How does the residence get involved with community events?
- How are everyday transportation needs handled?
- Are there supplies for social activities or hobbies, such as games, cards, crafts, and gardening?
- Are religious services held on the premises? Does the resident assist in making arrangements for attending nearby services?
- What is the food like? Does the menu vary with each meal?
- Does a dietician plan or approve menus? Can special diets be met?
- Does the residence have furnished and unfurnished rooms? Is there space for at least some of the resident's own things?
- Does the residence provide ample security?

III. New York State Housing Optionsⁱⁱ

A. Independent Living Units:

These cottages, condominiums, patio homes, or apartments are restricted to seniors (usually age 55 and over). It is important to clarify how rental or purchase payment is made and what amenities may be offered. These units are **not** licensed by a government oversight agency. According to a 2005 state law, no supportive services or staffing (except for a "Life Line" or other emergency response system), may be included without application for a New York State license as an Assisted Living Residence. Since compliance with the new legislation is an ongoing process; the following listings and categories may change.

III. New York State Housing Optionsⁱⁱ (Independent Living Units, continued)

1. Cottages and Patio Homes:

College Greene Senior Apartments
45 College Greene Dr., North Chili 14514
(585) 594-2805
www.coniferrealtyllc.com

The Cottages at the Highlands at Pittsford
100 Hahnemann Trail, Pittsford 14534
(585) 586-7600
www.highlandsatpittsford.com

Rivers Run
50 Fairwood Drive, Rochester 14623
(585) 292-5440
www.riversrunliving.com
Note: Connected with Rochester Institute of Technology

Seabury Woods
110 Dalaker Dr., Rochester 14624
(585) 426-4950
www.episcopalseniorlife.org

St. John's Meadows
1 Johnsarbor Dr. W., Rochester 14620
(585) 473-8650
www.stjohnsliving.org

Sunflower Landing
500 East Avenue, Rochester 14420
(585) 737-3476
www.sunflowerlanding.com

The Villas
200 Kidd Castle Way, Webster 14580
(585) 670-7198
www.seniorlifestyle.com

2. Independent Apartments

Abraham Lincoln Apartments
355 North Park Drive
Rochester 14609
(585) 544-9100
www.coniferllc.com

Chapel Oaks
1550 Portland Avenue, Rochester 14621
(585) 697-6600
www.stannscommunity.com

Fielding Garden Apartments
293-A Alden Road, Rochester 14624
(585) 225-5990
www.fieldinggardens.com
Note: 55+

The Gables at Brighton
2001 South Clinton Avenue
Rochester 14618
(585) 461-1880
www.brookdaleliving.com

Georgetown Park Apartments
510 DeGeorge Circle, Rochester 14626
(585) 225-4480
www.dbiproperties.com

Hickory Hollow
2800 Spencerport Road
Spencerport 14559
(585) 352-4472
www.ogdenrentalsinc.com
Note: 55+

The Highlands at Pittsford
100 Hahnemann Trail, Pittsford 14534
(585) 586-7600
www.highlandsatpittsford.org

Jefferson Park Apartments
120 Jefferson Avenue, Fairport 14450
(585) 377-6115
www.coniferliving.com

Emeritus at Landing of Brockport
90 West Avenue, Brockport 14420
(585) 637-3140
www.emeritus.com

Legacy Locations:
www.legacyrochester.com
at Clover Blossom
100 McAuley Drive, Rochester 14610
(585) 218-9000

III. Housing Options (Independent Apartments, continued)

Legacy Locations, cont.

at Cranberry Landing

300 Cranberry Landing Drive

Rochester 14609

(585) 244-3630

at Erie Station

1545 Erie Station Road, Henrietta 14467

(585) 334-5006

at Park Crescent

1000 Providence Cir., Rochester 14616

(585) 865-0680

at Parklands

2000 Park Creek Ln, Churchville 14428

(585) 889-6590

at Willow Pond

40 Willow Pond Way, Penfield 14526

(585) 388-7663

Linden Knoll

81 Linden Avenue, Rochester 14610

(585) 385-0223

www.friendlyhome.org

Long Pond Garden Senior Apartments

49 B Demeter Drive, Rochester 14626

(585) 225-3510

www.morgancommunities.com

Madison Place Community, LLC

604 North Greece Rd., Rochester 14468

(585) 392-2177

www.madisonplacecommunity.com

Note: 55+

Maplewood Estates

55 Ayrault Road, Fairport 14450

(585) 218-9570

www.maplewoodestates.com

Mill Landing

100 Mill Landing, Rochester 14626

(585) 225-7923

www.milllanding.com

Note: 55+

The Park at Hickory Commons

Apartment Homes

100 Green Tree Lane, Rochester 14606

(585) 697-1770

www.theparkathickorycommons.com

Pinehurst Senior Living

1000 Pine Trail, Honeoye Falls 14472

(585) 624-5970

www.pinehurstseniorliving.com

River Edge Manor

535 Mt. Hope Avenue, Rochester 14620

(585) 232-3130

www.episcopalseniorlife.org

St. Michael's Senior Apartments

355 Clifford Avenue, Rochester 14621

(585) 232-8356

www.stmichaelsenior.com

Note: 62+

St. Michael's Senior Apartments II

108 Evergreen Street, Rochester 14605

(585) 232-8356

www.stmichaelsenior.com

The Summit at Brighton

2000 Summit Circle Drive

Rochester 14618

(585) 341-2300

www.summitbrighton.org

Valley Manor Apartments

1570 East Avenue, Rochester 14610

(585) 442-6450

www.valleymanor.com

The Village at Unity

1471 Long Pond Rd., Rochester 14626

(585) 723-7810

www.villagesseniorliving.org

Woodland Village at Park Ridge

1477 Long Pond Rd., Rochester 14626

(585) 368-4040

www.villagesseniorliving.org

3. Subsidized/Affordable Apartments (through Section 8, DSS, or other)

This is housing in which tenants pay less than the going market rate for rent or for rent and services. Subsidized housing providers receive financial assistance

III. Housing Options (Subsidized/Affordable Apartments, continued)

from a government or other public entity to build or operate the development, or to help pay for some of the rent and utility costs or for the provision of services. Rent prices are typically set or approved by the entity that provides the financial support. People who meet specified household-income guidelines are eligible to live in subsidized housing. For a listing of all Section 8 apartments, contact the Rochester Housing Authority, rochesterhousing.org or (585) 697-6100.

Subsidized units may be supervised by the US Dept. of Housing and Urban Development (HUD).

Ada Ridge Court Apartments

1311 Long Pond Road, Rochester 14626
(585) 227-8990
www.pathstone.org
Note: 55+

Ahepa 67 Apartments

100 Ahepa Circle, Webster 14580
(585) 872-6300

Andrews Terrace Apartments

125 St. Paul Street, Rochester 14604
(585) 325-5232

Antoinette Brown Blackwell Estates

5 Antoinette Drive, Rochester 14623
(585) 697-7180
www.rochesterhousing.org

Atlantic Townhouses

Atlantic Avenue, Rochester 14607
(585) 697-7180
www.rochesterhousing.org

Atwood Park Apartments

4 Atwood Drive, Rochester 14606
(585) 328-3210 x1417
www.providencehousing.org
Note: 62+

Bennington Hills Apartments

340 Bennington Hills Court
West Henrietta 14586
(585) 359-0055
www.benningtonhillsapartments.com
Note: Tax credit program

Brown's Memorial Manor

640 Hudson Avenue, Rochester 14621
(585) 278-1220
Note: 62+

Cedarwood Towers

2052 E. Main Street, Rochester 14609
(585) 288-0500

Charlotte Lake/River Homes

(585) 621-4890
www.charlotteharbortown.com

Charlotte Harbortown

4575 Lake Avenue, Rochester 14612
Riverview Manor
60 River Street, Rochester 14612

Cobbs Hill Village

645 Norris Drive, Rochester 14610
(585) 467-2442
www.rochestermanagement.com
Note: 55+, set rental rate

Creek House Commons

2000 White Swan Dr., Rochester 14626
(585) 225-8650
Note: Tax credit program

The Crosman

42 East Avenue, Fairport 14450
(585) 377-1190
www.dimarcogroup.com

Danforth Towers, East and West

140/160 West Ave., Rochester 14611
(585) 697-7180
www.rochesterhousing.org

Dunn Tower I Apartments

100 Dunn Tower Dr., Rochester 14606
(585) 429-5520
www.dunntower.com

III. Housing Options (Subsidized/Affordable Apartments, continued)

Dunn Tower II Apartments

200 Dunn Tower Drive, Rochester 14606
(585) 429-6840
www.dunntower.com

Edison Senior Apartments

783-797 Clifford Ave., Rochester 14621
(585) 467-6410 x126

Ehr-Dale Heights

1 William James Drive, Churchville 14428
(585) 293-9280
www.belmontmgmt.com
Note: 62+ or disabled

Elliott's Landing

25 Linhome Drive, West Henrietta 14586
(585) 546-6340
www.ruralinc.org

Elmdorf Apartments

663 Genesee Street, Rochester 14611
(585) 697-7180
www.rochesterhousing.org

Fairport Apartments

1030 East Whitney Road, Fairport 14450
(585) 377-6560
www.fairportbaptisthomes.org
Note: 62+

Ferncliff Gardens Apartments

895 Fernwood Park, Rochester 14609
(585) 224-8869
www.landsman.com
Note: Must be in wheelchair

Fernwood Park Apartments

65 Waring Road, Rochester 14609
(585) 288-6887
www.rochestermanagement.com
Note: Tax credit property

Genesee West Apartments

582 Lake Avenue, Rochester 14613
(585) 254-5446
www.dimarcogroup.com

Glenwood Gardens Apartments

41 Kestrel Street, Rochester 14613
(585) 697-7180
www.rochesterhousing.org

Glide Court

133-135 Glide Street, Rochester 14611
(585) 697-7180
www.rochesterhousing.org

Hilton Manor

1 Park Square Lane, Hilton 14468
(585) 392-4500

Hilton Park

100 Leith Lane, Hilton 14468
(585) 392-1429
www.unityhealth.org

Hobie Creek Apartments

111 Brower Road, Rochester 14622
(585) 266-4530
www.dimarcogroup.com

Hudson-Ridge Tower

401 Seneca Manor Drive
Rochester 14621
(585) 697-7180
www.rochesterhousing.org

Jack Kenny Memorial Apartments

220 Garland Avenue, Rochester 14611
(585) 235-2645
www.ehdoc.com

Jefferson Park Apartments

120 Jefferson Avenue, Fairport 14450
(585) 377-6115
www.coniferliving.com

Jonathan Child Apartments

399 Colvin Street, Rochester 14606
(585) 436-9462
www.fsr.org

Kennedy Tower

666 S. Plymouth Ave., Rochester 14608
(585) 697-7180
www.rochesterhousing.org

Lake Tower

321 Lake Avenue, Rochester 14608
(585) 697-7180
www.rochesterhousing.org

III. Housing Options (Subsidized/Affordable Apartments, continued)**Lena Gantt Estates**

86 Vienna Street, Rochester 14605
 (585) 697-7180
www.rochesterhousing.org

Lexington Court Apartments

29 Lexington Court, Rochester 14606
 (585) 697-7180
www.rochesterhousing.org

Manhattan Square Apartments

Savannah Apartments
 14 Savannah Street, Rochester 14607
 (585) 232-3842

Southeast Towers II

10 Manhattan Sq. Drive, Rochester 14607
 (585) 454-2010
www.landsman.com

Midtown Manor

475 East Broad Street, Rochester 14607
 (585) 546-3650
www.midtownmanorapts.com

Moore Park Apartments

11 Chili Avenue, Rochester 14611
 (585) 368-3250
www.unityhealth.org
Note: 55+

Norton Village

251 Norton Village Ln., Rochester 14609
 (585) 467-1755
www.rochestermanagement.com

Park Ridge Commons

1465 Long Pond Road, Rochester 14626
 (585) 723-8688
www.unityhealth.org

Parliament Arms Apartments

2120-2144 St. Paul Street
 Rochester 14621
 (585) 697-7180
www.rochesterhousing.org

Pinnacle Place

919 S. Clinton Ave., Rochester 14620
 (585) 442-9440
www.pinnacleplaceapartments.com
Note: Section 236

Plymouth Gardens

1400 Plymouth Avenue South
 Rochester 14611
 (585) 235-6010
www.rochestermanagement.com
Note: Accept section 8

Quinby Park Apartments

1030 Shoecraft Road, Webster 14580
 (585) 671-1450
www.ncr.org

Ramona Park Apartments

14 Ramona Park
 Rochester 14615
 (585) 254-0463 Rental Office
www.rochestermanagement.com
Note: Accept section 8

Red Maple Apartments

55 Linholm Drive, West Henrietta 14586
 (585) 546-7180
www.ruralinc.org

Resch Commons

600 Island Cottage Road
 Rochester 14612
 (585) 621-4263
www.unityhealth.org

R.L. Edwards Manor

615 Clarissa Street, Rochester 14608
 (585) 546-4701

Rochester General - Hudson Housing

2026 Hudson Avenue, Rochester 14617
 (585) 266-2500
www.coniferllc.com

III. Housing Options (Subsidized/Affordable Apartments, continued)**Rose Hollow Apartments**

29 Durant Place, Fairport 14450
 (585) 377-6560
www.fairportbaptisthomes.org

Royal Gardens Apartments

100 Royal Gardens Way
 Brockport 14420
 (585) 637-8220
www.christopher-community.org

Seneca Towers

200 Seth Green Drive, Rochester 14621
 (585) 467-3727
www.senecatowers.com

South Village Apartments

2515 Culver Road, Rochester 14609
 (585) 544-2690

Southview Towers

500 South Avenue, Rochester 14620
 (585) 325-2580
www.landsman.com

Springside Meadows

125 Scottsville-West Henrietta Road
 West Henrietta 14586
 (585) 359-3320
www.hmrproperties.com

St. Andrews Apartments

1180 Buffalo Road, Rochester 14624
 (585) 464-0880

Note: Affordable housing for persons with disabilities; all apartments have project-based voucher

St. Bernard's Park

2260 Lake Avenue, Rochester 14612
 (585) 458-9000

St. Jude's Apartments

4075 Lyell Road, Rochester 14606
 (585) 247-1060
www.christopher-community.org

St. Jude's II Apartments

4099 Lyell Road, Rochester 14606
 (585) 426-2350
www.christopher-community.org

St. Michael's Senior Apartments

355 Clifford Avenue, Rochester 14621
 (585) 232-8356
www.stmichaelsenior.com

Stonewood Village Apartments

200 Myrtlewood Drive, Henrietta 14467
 (585) 334-0440

Totiakton Manor

200 Pine Trail, Honeoye Falls 14472
 (585) 624-1970
www.coniferllc.com

Union Park

49 Union Square Boulevard
 North Chili 14514
 (585) 293-9150
www.providencehousing.org

University Tower

625 University Ave., Rochester 14607
 (585) 697-7180
www.rochesterhousing.org

Wellington Woods

701 Wellington Woods
 Brockport 14420
 (585) 637-6713

West Town Village

60 Hendrix Road, West Henrietta 14586
 (585) 321-3420
www.providencehousing.org

Westfall Heights

17 Metropolitan Drive, Rochester 14620
 (585) 723-8338
www.rochestermanagement.com

III. Housing Options (continued)

B. Shared Housing or Group Residences

This is housing for two to ten people who live together as a family. Residency may be restricted to seniors or may be intergenerational. This housing may be a shared single-family home or a shared apartment. Tenants share the finances and upkeep of the residence. Each has a private bedroom and bath. All share a common living room, dining room and kitchen. Shared living may or may not include activities, supportive services or personal care services for tenants.

Roselawn Shared Living Residence

41 Roselawn Avenue, Fairport 14450

(585) 421-3240

Note: Fairport/Perinton Senior Living Council, Inc.

C. Adult Care Facilitiesⁱⁱⁱ

New York State, through the State Department of Health, licenses and supervises adult care facilities which provide temporary or long-term, non-medical residential care services to adults who are substantially unable to live independently. Resident dependence may be the result of physical or other limitations associated with age, physical or mental disabilities or other factors. Residents of adult homes, enriched housing and assisted living programs are provided with personal care and services on a long-term basis; residences for adults provide long-term residential care with supervision but without personal care. Most residents of adult care facilities are in need of supervision and personal care services necessary to enable the resident to maintain good personal health and hygiene, to carry out the basic activities of daily living, and to participate in the ongoing activities of the facility. Personal care includes direction and assistance with grooming (including care of hair and ordinary care of nails, teeth and mouth); dressing; bathing; walking and ordinary movement from bed to chair or wheelchair; eating; and assisting with self-administration of medications. However, residents of adult care facilities must not require the continual medical or nursing services provided in acute care hospitals, in-patient psychiatric facilities, skilled nursing homes or health related facilities, since adult care facilities are not licensed to provide any nursing or medical care.

D. Adult Home^{iv}

An adult home is established and operated for the purpose of providing long-term residential care, room, board, housekeeping, personal care and supervision to five or more adults unrelated to the operator. Adult homes may be operated by a natural person, a partnership, a not-for-profit corporation, a public corporation, non publicly traded business corporation or a limited liability company.

III. Housing Options (Adult Home, continued)**Alterra Clare Bridge of Perinton**

159 Sully's Trail, Pittsford 14534
 (585) 249-9990
www.brookdaleliving.com

Atria, Greece

150 Towngate Road, Rochester 14626
 (585) 225-3010
www.atriaseniorliving.com

Atria, Penfield

2006 Five Mile Line Road, Penfield 14526
 (585) 381-0282
www.atriaseniorliving.com

Clancey Residence at**The Linden House**

209 Linden Street, Rochester 14620
 (585) 473-5484

Crimson Ridge Gardens

1 Treeline Drive, Rochester 14612
 (585) 720-9310
www.crimsonridgeseniorliving.com

Crimson Ridge Meadows

3 Treeline Drive, Rochester 14612
 (585) 720-9330
www.crimsonridgeseniorliving.com

GrandeVille Senior Living Community

555 Maiden Lane, Rochester 14616
 (585) 621-6160
www.grandeville.com

Heather Heights of Pittsford

160 West Jefferson Road, Pittsford 14534
 (585) 264-1600
www.heatherheights.com

Hilton East**Assisted Living Community**

231 East Avenue, Hilton 14468
 (585) 392-7171
www.hiltoneast.com

Linden House Senior Care Home

(585) 473-5484
 209 Linden Street, Rochester 14620

Emeritus @ Perinton Park Manor

7 Chardonnay Drive, Fairport 14450
 (585) 425-0210
www.emeritus.com

Rochester Presbyterian Home

256 Thurston Road, Rochester 14619
 (585) 235-9100
www.rph.org

The Shire at Culverton

2515 Culver Road, Rochester 14609
 (585) 467-4544
www.shireatculverton.com

Emeritus @ West Side Rochester

1404 Long Pond Road
 Rochester 14626
 (585) 225-7210
www.emeritus.com

Westwood Commons Adult Home

50 Union Square Boulevard
 North Chili 14514
 (585) 293-2060
www.depaul.org

Woodcrest Commons

4455 West Henrietta Road
 Henrietta 14467
 (585) 334-1800
www.depaul.org

III. Housing Options (continued)

E. Enriched Housing Program^Y:

An enriched housing program is established and operated for the purpose of providing long-term residential care to five or more adults, primarily persons sixty-five years of age or older, in community-integrated settings resembling independent housing units. The program provides or arranges for the provision of room, board, housekeeping, personal care and supervision.

Enriched housing programs may be operated by a natural person, a partnership, a not-for-profit corporation, a public corporation, a non-publicly traded business corporation or a limited liability company.

Brentland Woods

3831 E. Henrietta Road, Henrietta 14467
(585) 321-1490
www.episcopalseniorlife.org

Danforth Towers East

140 West Avenue, Rochester 14611
(585) 436-9400
www.fsr.org
www.rochesterhousing.org

Elderwood Assisted Living at Penfield

100 Elderwood Court, Penfield 14526
(585) 425-9663
www.elderwood.com

Glenmere at Cloverwood

One Wheatley Terrace, Pittsford 14534
(585) 248-1135
www.cloverwood.org

The Hamlet at Park Ridge

1471 Long Pond Road, Rochester 14626
(585) 723-7820
www.villagesseniorliving.org

Hudson-Ridge Towers

401 Seneca Manor Dr., Rochester 14621
(585) 266-5610
www.fsr.org

Jonathan Child Apartments

399 Colvin Avenue, Rochester 14611
(585) 436-9400
www.fsr.org

Emeritus at Landing of Brockport

90 West Avenue, Brockport 14420
(585) 637-3140
www.landing-AD@emeritus.com

Laurelwood at the Highlands

300 Hahnemann Trail, Pittsford 14534
(585) 389-1630
www.highlandsatpittsford.org

The Northfield

4560 Nine Mile Point Rd., Fairport 14550
(585) 377-1810
www.fsr.org

Sage Harbor at Baywinde

100 Kidd Castle Way, Webster 14580
(585) 670-7000
www.baywinde.com

Seabury Woods

110 Dalaker Drive, Rochester 14624
(585) 426-4950
www.episcopalseniorlife.org

Wolk Manor Enriched Living Center

4000 Summit Circle Drive
Rochester 14618
(585) 442-1950
www.jewishseniorlife.org

III. Housing Options (continued)

F. New York State Licensed Assisted Living Program [ALP]^{vi}

An assisted living program, which is available in some adult homes and enriched housing programs, combines residential and home care services. It is designed as an alternative to nursing home placement for individuals who historically have been admitted to nursing facilities for reasons that are primarily social, rather than medical in nature. The operator of the assisted living program is responsible for providing or arranging for resident services that must include room, board, housekeeping, supervision, personal care, case management and home health services.

Elderwood Assisted Living at Penfield

100 Elderwood Court, Penfield 14526
(585) 425-9663
www.elderwood.com

Fairport Baptist Homes

4646 Nine Mile Point Rd., Fairport 14450
(585) 377-0350
www.fairportbaptisthomes.org

Hilton East

Assisted Living Community
231 East Avenue, Hilton 14468
(585) 392-7171
www.hiltoneast.com

Jonathan Child Apartments

399 Colvin Street, Rochester 14611
(585) 436-9462
www.fsr.org

The Shire at Culverton

2515 Culver Road, Rochester 14609
(585) 467-4544
www.shireatculverton.com

Woodcrest Commons

4455 W. Henrietta Road, Henrietta 14467
(585) 334-1800
www.depaul.org

Note: This listing is taken directly from the New York State Department of Health's website. It is current as of December 2010.

G. Licensed Assisted Living Residences [ALR]

An entity which provides or arranges for housing, on-site monitoring, and personal care services and/or home care services (either directly or indirectly) in a home-like setting to five or more adult residents unrelated to the assisted living provider. An applicant for licensure as assisted living that has been approved in accordance with the provisions of this article must also provide daily food service, twenty-four hour on-site monitoring, case management services, and the development of an individualized service plan for each resident.^{vii}

An **enhanced assisted living certificate** means a certificate issued by the department which authorizes an ALR to provide aging in place by admitting and retaining residents who desire to continue to age in place and who:

1. Are chronically chairfast and unable to transfer, or chronically require the physical assistance of another person to transfer;
2. Chronically require the physical assistance of another person in order to walk;
3. Chronically require the physical assistance of another person to climb or descend stairs;
4. Are dependent on medical equipment and require more than intermittent or occasional assistance from medical personnel; or
5. Have chronic unmanaged urinary or bowel incontinence.^{viii}

III. Housing Options (Licensed Assisted Living Residences, continued)

A **special needs assisted living certificate** requires that the ALR provides a plan that must include, but need not be limited to, a written description of specialized services, staffing levels, staff education and training, work experience, professional affiliations or special considerations relevant to serving persons with special needs, as well as any environmental modifications that have been made or will be made to protect the health, safety, and welfare of such persons in residence. Individuals with such special needs may include a number of generally-accepted distinct subsets of similar cognitive, behavioral, medical, functional, characteristics or care needs).^{ix}

The plan shall include specifications of special activities and operating practices, adaptation of supervision, personal care and other services, and evidence of cooperation and coordination with other persons and agencies providing services to such residents.^x

GrandeVie Senior Living Community

2140 Five Mile Line Rd., Penfield 14526
(585) 381-0680
www.grandevie.com

*Note: Assisted Living Residence,
Enhanced Assisted Living, Special
Needs Assisted Living*

GrandVille Senior Living Community

555 Maiden Lane, Rochester 14616
(585) 621-6160
www.grandeville.com

*Note: Assisted Living Residence,
Special Needs Assisted Living*

Memory Care Residences at Cottage Grove

48 Cottage Grove Circle, N. Chili 14514
(585) 594-8719
www.rph.org

*Note: Assisted Living Residence, Special
Needs Assisted Living*

Rainier Grove at Cherry Ridge

900 Cherry Ridge Boulevard
Webster 14580
(585) 697-6700

www.stannscommunity.com

Note: Assisted Living Residence

Note: This listing is taken directly from the New York State Department of Health's website. It is current as of December 2010.

H. Dementia Care

The physical layout, programmatic aims, staffing, and care plans of this housing are specifically designed to address the needs of persons with Alzheimer's disease and related dementias. All skilled nursing facilities provide dementia care (see listing in Chapter 10).

A partial listing below indicates adult home-level care specializing in dementia care:

Alterra Clare Bridge of Perinton

159 Sullys Trail, Pittsford 14534
(585) 249-9990
www.brookdaleliving.com

Crimson Ridge Gardens

1 Treeline Drive, Rochester 14612
(585) 720-9310
www.crimsonridgeseniorliving.com

III. Housing Options (Dementia Care, continued)

Caring House at GrandeVie

2140 Five Mile Line Road
Penfield 14526
(585) 218-0680
www.grandevie.com

Heather Heights of Pittsford

160 W. Jefferson Road, Pittsford 14534
(585) 264-1600
www.heatherheights.com

The Landing of Brockport

90 West Avenue, Brockport 14420
(585) 637-3140
www.landing-AD@emeritus.com

Mary Regina Special Care Unit

555 Maiden Lane, Rochester 14616
(585) 621-6160
www.grandeville.com

**Memory Care Residences
at Cottage Grove**

48 Cottage Grove Circle
North Chili 14514
(585) 235-9100
www.rph.org

Ranier Grove at Cherry Ridge

900 Cherry Ridge Boulevard
Webster 14580
(585) 697-6700
www.stannscommunity.com

Sage Harbor Memory Care

100 Kidd Castle Way, Webster 14580
(585) 872-8100
www.baywinde.com

Seabury Woods Memory Care

110 Dalaker Drive, Rochester 14624
(585) 426-4950
www.episcopalseniorlife.org

Wolk Manor Enhanced Care

4000 Summit Circle Drive
Rochester 14618
(585) 442-1950
www.jewishhomeroch.org

I. Multiple-Level Care Providers

Many hospitals and nursing homes have expanded to include a variety of services. The advantage to clients is that an integrated system may make it easier to change from one level of care to another when needed. Facilities and programs that provide multiple-level care are listed in separate chapters of this *Caregiver Resource Guide* according to the type of care offered. Please refer to Chapter 7: Health Systems, Section VI.

-
- ⁱ National Center for Assisted Living (2005). *Checklist for Consumers and Prospective Residents*. Retrieved January 10, 2008 from <http://www.longtermcareliving.com/assess/al/assisted8.cfm>.
- ⁱⁱ NYS Office for the Aging (2004). *Housing Definitions*. Retrieved January 10, 2008 from <http://seniorhousing.state.ny.us/definitions/index.htm>
- ⁱⁱⁱ New York State Department of Health. *About the Adult Care Facility Directory*. Retrieved from http://www.health.state.ny.us/facilities/adult_care/about.htm on December 2, 2010.
- ^{iv} New York State Department of Health. *About the Adult Care Facility Directory*. Retrieved from http://www.health.state.ny.us/facilities/adult_care/about.htm on December 2, 2010.
- ^v New York State Department of Health. *About the Adult Care Facility Directory*. Retrieved from http://www.health.state.ny.us/facilities/adult_care/about.htm on December 2, 2010.
- ^{vi} New York State Department of Health. *About the Adult Care Facility Directory*. Retrieved from http://www.health.state.ny.us/facilities/adult_care/about.htm on December 2, 2010.
- ^{vii} New York State Law. *Article 46-B, Assisted Living, Title 1, Section 4651*. Retrieved from http://www.health.state.ny.us/facilities/assisted_living/docs/article-46.pdf on December 2, 2010.
- ^{viii} New York State Department of Health. *Enhanced Assisted Living Residence Overview*. Retrieved from http://www.health.state.ny.us/facilities/assisted_living/docs/enhanced_assisted_living_residence_overview.pdf on December 2, 2010.
- ^{ix} New York State Department of Health. *Special Needs Assisted Living Plan Overview and Requirements*. Retrieved from http://www.health.state.ny.us/facilities/assisted_living/docs/special_needs_overview_and_requirements.pdf on December 2, 2010.
- ^x New York State Department of Health. *Special Needs Assisted Living Plan Overview and Requirements*. Retrieved from http://www.health.state.ny.us/facilities/assisted_living/docs/special_needs_overview_and_requirements.pdf on December 2, 2010.

NOTES

Chapter 10: Skilled Nursing Facilities

Goals for this chapter:

1. To define and understand Skilled Nursing Facility / Nursing Home
2. To learn what to look for in these facilities
3. To understand Long-Term Care Financing
4. To learn about Transitional (Short-term) Rehabilitation

I. Placement in a Skilled Nursing Facility or Program	202
A. How do you know if your elder relative needs placement?	202
B. What the facility or program can provide for the resident	202
C. What the facility or program can offer families	202
D. Steps to take for placement	202
E. What to look for on a tour	204
F. How to choose the best skilled facility or program	206
G. How to deal with feelings	206
II. Quality of Care	207
A. Guidelines	207
B. Ways to assure continuing quality of care	207
C. Residents' rights	207
D. Understanding the Admissions Agreement	208
E. Oversight	208
F. Addressing Problems with Resident Care	209
III. Payment Mechanisms	209
A. Medicare	209
B. Private	210
C. Medicaid	210
D. General points on financing care	210
IV. List of Skilled Nursing Facilities	211
V. Transitional Care (short term)	214

I. Placement in a Skilled Nursing Facility or Programⁱ

A. How do you know if your elder relative needs placement?

1. The person is no longer happy, content, or safe.
2. The person must have actual nursing needs, such as help with:
 - a. Oxygen therapy
 - b. Transferring from bed to chair
 - c. Eating
 - d. Toileting or incontinence
3. You can no longer provide quality care; your health is significantly impacted.

B. What the facility or program provides for the resident

1. All necessary care that a resident needs to reach and maintain his or her highest practicable level of functioning (required by federal law).
2. Person-centered activities conducted for each resident (also required by federal law).
3. Reasonable adjustments to honor resident needs and preferences.
4. Medical oversight and twenty-four-hour skilled nursing care.
5. Personal care.
6. Room, board, housekeeping.
7. Monitoring of eating patterns and medications.
8. Supervision and a safe environment to prevent problems with wandering.
9. Socialization with other persons with similar needs.
10. End-of-life care.

C. What the skilled nursing facility or program can offer families

1. Partnership with staff and resident in developing and revising plans of care.
2. Opportunity for partnership in planning care.
3. Support in coping with the illness of a relative or friend.
4. Support groups are offered in many facilities.
5. Safe care for an older relative to prevent "caregiver's burnout."
6. Education about illness and treatment.
7. Opportunities to help others with similar problems.

D. Steps to Take for Placement

1. A **PRI (Patient Review Instrument) and screen** is a professional assessment and screening of all skilled nursing facility applicants. It is required by the New York State Health Department before admission to any residential facility, in order to determine the appropriate level of care.

If the applicant is in a hospital, the hospital personnel will do the P.R.I. at no additional charge. If the applicant is not in a hospital, a medical summary must be obtained from the applicant's physician. If the applicant is at home, the PRI can be done by a nurse from a certified home health agency on a fee-for-service basis (\$75 - \$100). If the applicant is eligible for Medicaid, the cost is covered.

A new PRI should be done every 30 days for those waiting for placement or sooner if the individual's needs have changed.

I. Placement (Steps for Placement, continued)

Resources for PRI Screen if the Individual is at Home

CareGivers

(585) 458-2150
www.caregivershomecare.com

Home Care of Rochester

(585) 272-1930
www.homecareofrochester.com

Interim Healthcare

(585) 454-4930
www.interimhealthcare.com

Lifetime Care

(585) 214-1000
www.lifetimecare.org

Unity at Home

(585) 368-3440
www.unityhealth.org

Unlimited Care

(585) 272-8800

Visiting Nurse Service

(585) 787-2233
www.vnsnet.com

We Care Home Nursing Service

(585) 671-1920

2. Select facilities where you wish to make application, based on the level of care indicated by the PRI. It is recommended that you tour each of the selected facilities. Call their admissions department to arrange for this.
3. Requests for information or application can be done on-line through:
 - New York State Health Facilities Association www.nyshfa.org
 - Rochester Area Homes and Services for the Aging www.rahsa.org
4. Complete your application for the facilities you choose plus any other paperwork requested by them. If the applicant is hospitalized, the hospital social worker will send the PRI and medical summary to the facilities selected.
5. After making an initial application, contact the nursing home every other week for follow-up. When a patient is in the hospital, this follow-up will be done by hospital personnel. When applying from home, the family or applicant needs to make follow-up calls.
6. When a room becomes available, admission will generally occur very soon. The family will need to ensure completion of all the admission paperwork. The patient must be informed and aware of the plan.
7. When an applicant is hospitalized and a nursing home bed is offered but refused, financial penalties may be incurred. If this situation occurs, hospital personnel will provide you with information on your rights and the appeal process (see Chapter 11, "Hospital Care," Section VI about "Discharge Planning").
8. For hospitalized applicants, the hospital social worker is available to offer assistance and guidance. For those applying from home, geriatric care managers are available on a fee-for-service basis to help with the placement process. The care manager's role is to assess the level of care, arrange for completion of the necessary paperwork, provide referral and follow-up with the various facilities, and offer information and supportive counseling throughout the process.

I. Placement (Steps for Placement, continued)

Various community agencies are also available to help and act as advocates through this sometimes complicated process.

9. For assistance with any financial concerns about long-term care, or about Medicaid in particular, counsel independent of the care provider should be sought from a financial planner or elder law attorney. Information is also available by contacting the HIICAP program through County Offices for the Aging:

In Monroe County: Lifespan HIICAP

(585) 244-8400 x113

E. What to look for on a tour of a skilled nursing facility or program

1. Does this facility have a good reputation in the community? Also, consult with current residents and family members to see if they are satisfied.
2. Is the most recent inspection by the State Health Department posted? Have many complaints been filed by residents or families?
3. What is the mission statement or philosophy of care of the facility?
4. Is there a written statement of the residents' rights clearly posted?
5. What is the attitude of the staff? Observe the way they interact with the residents: are they cheerful, courteous, and enthusiastic, or do they appear angry or intimidating? Does the administrator know many residents by name? Is visiting encouraged? Are relatives known to the staff?
6. How does the facility promote person-centered care?
7. Has the facility implemented resident-directed care? The facility must make reasonable adjustments to honor resident needs and preferences
8. Have the resident and the family been able to review the written care plan (a map of what care is provided and by whom)? A plan for each resident is developed during the first two weeks and a meeting with the family scheduled by day 21. Is there a regular schedule for sharing the resident's care plan with the family?
9. Have the staff members of the facility had training in the field of gerontology and dementia care? Are there regular in-service courses being offered?
10. What is the ratio of staff to residents on each unit? How many residents requiring heavy-duty care are currently there? Experience of the staff and skill level is as important as just looking at numbers. Is there significant staff turnover?
11. Is privacy provided and encouraged? Are there curtains between sections of shared rooms? Are residents allowed to decorate their rooms, keep a few prized possessions?
12. Do the residents look well cared for (wearing own clothes, hair brushed, dentures in)? Are dental care, podiatry, and hairdressing available?
13. Are there hand-rails in the halls? Are nurse and emergency call buttons located at each resident's bed, toilet, and bathing facility? Does the toilet have a raised seat? Does it have grab bars for safer use?

I. Placement (Steps for Placement, continued)

14. What does the facility look and smell like? Is it clean? Free from a strong smell of urine throughout?
15. How is incontinence managed? If residents want a better or different incontinence product, do they have to pay for it? What if they are on Medicaid? Does it come out of their spending account?
16. Is there a medical director or a physician on staff? (Not all facilities have one.) How often does the doctor make rounds? Does the facility allow residents to be treated by a physician of their own choice? Is the nursing staff adequate to meet residents' needs? Does a qualified pharmacist maintain and monitor a record of each resident's drug therapy?
17. Does the facility offer physical and occupational therapy? Are the therapists full-time or part-time, contracted or employed? What types of programs are actually offered?
18. What kind of social work staff does the facility have? Do they do clinical work? Group work? Family groups? Do their social workers have the MSW degree (Masters in Social Work), BSW, or some other degree?
19. If the resident is hospitalized after admission, for how many days will the person be able to keep the placement?
20. Does the facility have a full-time or part-time dietitian? Is there a menu selection? Does the food look appetizing? Are special meals prepared for patients who prefer or need vegetarian, kosher, or therapeutic diets? Is the dining room attractive and comfortable? Do residents who need it get help in eating, whether in the dining room or in their own rooms?
21. What types of recreational activities are provided (ask to see a monthly calendar)? Is there a lounge where residents can chat, read, play games, watch television, or just relax away from their rooms? Is there an outdoor area where residents can get fresh air and sunshine?
22. Do residents have an opportunity to attend religious services and talk with clergy both in and outside the facility?
23. How dependable is the laundry service? Is missing clothing a problem?
24. What are the costs of the type of care needed? What services are included? Does the contract clearly state costs, date of admission, services to be provided, discharge and transfer conditions? Does the facility accept Medicaid residents? What percentage of admissions were Medicaid-eligible applicants last year?
25. How are residents involved in decision-making with the facility? Is there a residents' council or another mechanism to allow resident input into those decisions which impact their quality of life or activities? Is there an active family council where concerns and suggestions for change can be discussed?
26. Is the staff sensitive to cultural differences? Does the facility accommodate ethnic dietary preferences, speakers of other languages?

I. Placement (Steps for Placement, continued)

F. How to choose the best facility or program for your situation

1. Bottom line: it must meet the needs of both the older person and the family.
2. Be honest with yourself and the staff about the needs of your relative or friend.
3. Be honest about the client's financial situation.
4. Ask for copies of the facility's mission statement, philosophy, and residents' rights.
5. Ask questions, be assertive. It is your right to know about the facility and its programs. Look beyond what you see on the surface: observe people and programs.
6. Find out the attitude of staff -- including night staff -- observe or inquire about how they treat people, especially those with dementia:
 - Is it OK to be up at night (some individuals have always been "night people")?
 - What special things are done to aid them?
 - Are snacks available around the clock?
 - Is there a safe place for such persons to wander: a courtyard or other attractive, enclosed place?
7. Ask other families who are acquainted with a particular facility or program what they have observed and what their experience has been. Network!

Resource for Choosing a Nursing Home

American Health Care Association
 Planning Ahead—A Consumer's
 Guide to Nursing and Assisted Living
 Facilities
www.ahcanal.org or
www.longtermcareliving.com

Medicare (Nursing Home info section)
www.medicare.gov/Nursing/Overview.asp
Note: Includes information on comparing nursing homes, Medicaid and Medicare certified nursing homes throughout the U.S., and payment and patient rights

G. How to deal with feelingsⁱⁱ

1. The decision to seek placement in a skilled nursing facility brings out many feelings. Consider both yours and those of the person being placed, and seek help to deal with them.
2. Negative feelings are common: grief, guilt, fear, anxiety, sadness. These can be worked through by talking to a counselor, social worker, nurse, or member of the clergy. Let the person being placed grieve openly, feel the pain, and deal with it. Consider joining a grief group for yourself.
3. Do not try to solve all the problems by yourself. They can overwhelm you and hinder you in caring for your relative or friend.
4. Help the new resident to focus on what is going well and to make friends with the staff and other residents.
5. Encourage the person to attend recreational events or parties.

I. Placement (Steps for Placement, continued)

6. Help the person focus on self-care practices: “Are you drinking plenty of water every day?” or “Do you need a new shirt or blouse?”
7. If possible, pamper the person with a hair appointment or a professional shave.
8. Give the person something to look forward to: a phone call at a specific time, flowers or candy, a calendar of family events.
9. Provide addressed postcards to family members (including youngsters), and encourage them to send photos.

II. Quality of Care

A. Guidelines

Federal law establishes guidelines regarding minimum standards for quality of care and residents' rights. Skilled nursing facilities have a focus on individualized care and better assessment of the individual's needs. In the past, a resident had to fit into the structure and environment of the care facility; now, the care facility must adapt the environment to meet the needs of the resident. Many nursing homes are implementing resident-directed care and redesigning the environment to reflect a more home-style atmosphere.

B. Ways to assure continuing quality of care

1. Visit as often as you are comfortable.
2. Drop by at various times.
3. Ask questions.
4. Be assertive in expressing your concerns and needs to the staff, but always be respectful of staff.
5. Keep a log of contacts and events. A good record can be helpful in documenting satisfaction, complaints, concerns, and suggestions.

C. Residents' Rights

1. **Residents' Councils:** These are established in most facilities to monitor and advise about residents' rights.
2. **Advocacy:** Copies of residents' rights are required to be posted in prominent places in the skilled nursing facility, and relatives should be alert to protect these rights.
3. **Ombudsman Programs:** These programs train volunteers from the community to respond to complaints from residents in a skilled nursing facility, or their relatives. The Ombudsman volunteers assist residents to obtain their rights or solve problems.

If problems or concerns develop, residents and family members should discuss them with:

- a. the nurse manager or social worker of the unit or floor
- b. the administrator of the facility
- c. a person from the Ombudsman Program, Lifespan (585) 244-8400

II. Quality of Care (continued)

4. If problems are not resolved, discuss them with the **New York State Department of Health's Centralized Intake for Complaints** regarding nursing homes: Toll-free (888) 201-4563

Resource for Resolving Problems

"20 Common Nursing Home Problems – and How to Resolve Them," National Senior Citizens Law Center, December 2005 www.nslc.org

D. Understanding the Admissions Agreementⁱⁱⁱ

The admissions agreement (also called the financial agreement, admission contract, entrance contract or some other term) is a legal agreement between the nursing home and the resident to spell out conditions for admission. The contract should state the costs, services included, and all legal responsibilities of the resident. Ideally, it should also include care (in accordance with intensity of need), emergency procedures and standards of food service (e.g. availability of therapeutic diets, kosher diets, etc.).

Ask questions about the contract. Ask your attorney, the nursing home administrator or admissions director to explain anything that is not clear.

E. Oversight

Skilled nursing facilities are monitored by the New York State Department of Health, which, in order to promote safety and security, requires FBI background checks for all applicants who are to be hired to work directly with residents. The department can issue citations or, in extreme cases, revoke the facility's eligibility to receive Medicare and Medicaid reimbursement. This department can also provide general information.

Resources of the New York State Department of Health

Monroe County Dept. of Public Health
(585) 423-8020

New York State Hotline
(866) 881-2809

www.nursinghomes.nyhealth.gov

Note: This web site includes profiles for hospitals, nursing homes, and doctors.

Nursing Home Patient Care Complaints
(888) 201-4563

II. Quality of Care (Addressing Problems, continued)

F. Addressing Problems with Resident Care^{iv}

Discuss problems first with the persons directly responsible for giving care. If you are not satisfied, approach the appropriate supervisors and then the administrators. As a last resort, contact the state department of health for investigation of complaints about resident care or trouble getting medical records. See chapters in this guide as listed in the box above for more information.

Example: Concern that a loved one may be over-medicated

During the first care conference at the nursing home, express your concerns that you do not want your loved one over medicated. Then ask:

- How are residents treated who "act out"?
- If medication is indicated, who makes that decision? Is it only the physician, or does it come from a clinical team approach?
- If a prescription is given, who determines (and how) if it is increased or stopped?
- How will the family member be notified when -- and if -- prescriptions and/or dosages are changed?

These questions should be answered without defensiveness.

Of course the best way to "monitor" is to visit often and observe changes in your loved one's persona. Being lethargic, continually sleeping, etc., may indicate a change in prescriptions, or over-medication, or it could be something else; but always question the prescription. Even "good" homes may forget to call a family member when prescription changes are made.

III. Payment Mechanisms

Average Costs of Care for Local Area (Rochester Region)^v

In a Facility	Local Average Medians		National Average Medians	
	Rate/Day	Rate/Year	Rate/Day	Rate/Year
Nursing Home Private Room	\$325.00	\$118,625	\$206	\$75,190
Nursing Home, Semi-Private	\$305.00	\$111,325	\$185	\$67,525
	Rate/Month	Rate/Year	Rate/Month	Rate/Year
Assisted Living: Private 1-bedroom	\$3,788	\$45,450	\$3,185	\$38,220

A. Medicare: With other supplementary health insurances such as Blue Cross, limits nursing home coverage to 100 days. The first 20 days are covered in full; the remaining 80 days are covered at 80%.

Note: *In order for Medicare to pay, the person has to meet medical qualifiers. When the person no longer does, then Medicare can terminate before the 100 days.*

III. Payment Mechanisms (Financing Care, continued)

B. Private: Self-paid funds, if available, can assist persons to have more choice in applying for skilled nursing facility care. Such funds may include long-term care insurance.

C. Medicaid: A health care entitlement program, financed by federal, state, and local governments, for those persons who qualify because of low income and few resources. Beginning 2009 in NYS, nursing homes will get paid based on a RUG system. RUG is the Resource Utilization Group; there are 53 unique RUGs. Medicaid documentation must support the delivery of services reported on the MDS (Minimum Data Set) comprehensive assessment.

The assessment is coded and the results of the coding yields a RUG score. The score for each resident (referred to as "case") is averaged to come up with a case mix for the facility.

The Dept. of Health uses the case mix to determine the facility's daily Medicaid reimbursement rate. There will be two snapshot days in the year (January and July) that the Department of Health will use to calculate this score. The January snapshot will determine payment for January through June.

D. General Points on Financing Care

1. Individuals wishing to be admitted with Medicaid payments should call the facility every two weeks to check on the availability of a bed.
2. Medicaid pays for placement in a semi-private room. Ask about facility practices regarding room assignments.
3. It is legal for a skilled nursing facility to give preference to individuals who can pay privately over those who are on Medicaid.
4. Hospital patients waiting for Medicaid placement in a skilled nursing facility should know that the search done by the social worker for the next available bed covers all facilities within a 50-mile radius.
5. Waiting Pools: These replace the waiting list for skilled nursing facility placement. The skilled nursing facility fills vacancies to complement their current case-load. Specialty units have specific criteria for placement, such as lighter care skilled, memory care, rehabilitation, etc. Private-pay individuals can be asked for only three months' upfront money during the application process.
6. Skilled nursing facilities and programs are required to retain residents after they spend down their assets and qualify for Medicaid.

III. Payment Mechanisms (Financing Care, continued)

Resources for Information and Counseling

Affordable Health Line

(585) 328-7000

Note: For persons who are uninsured or have low income.

Monroe County: Lifespan's Health Insurance Information, Counseling & Assistance Program (HIICAP)

1900 S. Clinton Ave., Rochester 14618
Ron Brandwein, HIICAP Counselor
(585) 244-8400 x113

Note: To make sure that all possibilities for coverage have been explored, consult a financial planner.

IV. List of Skilled Nursing Facilities

Nursing care is provided on a 24-hour basis by registered nurses assisted by licensed practical nurses, certified nursing assistants (CNAs), and support staff. This level offers the most comprehensive level of care.

Multi-level facilities can include priority (but not guaranteed) access to higher levels of care when needed.

Aaron Manor

100 St. Camillus Way, Fairport 14450
(585) 377-4000
www.aaronmanor.com

Baird Nursing Home

2150 St. Paul Street, Rochester 14621
(585) 342-5540
www.bairdnursinghome.com

Blossom Health Care Center

989 Blossom Road, Rochester 14610
(585) 482-3500
www.centralhealthcareservices.net

Blossom North LLC

1335 Portland Avenue, Rochester 14621
(585) 544-4000
www.blossomnorth.com

Blossom South LLC

1175 Monroe Avenue, Rochester 14620
(585) 442-0450
www.compccarenet.com

Brightonian Nursing Home

1919 Elmwood Avenue, Rochester 14620
(585) 271-8700
www.thebrightonian.com

Crest Manor

6745 Pittsford-Palmyra Road
Fairport 14450
(585) 223-3633
www.bhcg.com

Edna Tina Wilson Living Center

700 Island Cottage Road
Rochester 14612
(585) 368-6100
www.unityhealth.org

Episcopal Church Home

505 Mt. Hope Avenue, Rochester 14620
(585) 546-8400
www.episcopalseniorlife.org

Fairport Baptist Homes

4646 Nine Mile Point Road
Fairport 14450
(585) 377-0350
www.fairportbaptisthomes.org

The Friendly Home

3156 East Avenue, Rochester 14618
(585) 381-1600
www.friendlyhome.org

IV. List of Skilled Nursing Facilities (continued)**Hamilton Manor Nursing Home**

1172 Long Pond Road, Rochester 14626
 (585) 225-0450
www.lattaroadnh.com

The Highlands at Brighton

5901 Lac de Ville Boulevard
 Rochester 14618
 (585) 442-7960
www.stronghealth.com

The Highlands Living Center

500 Hahnemann Trail, Pittsford 14534
 (585) 383-1700
www.highlandsatpittsford.org

Hill Haven

1550 Empire Boulevard, Webster 14580
 (585) 671-4300
www.rochestergeneral.org

The Hurlbut

1177 East Henrietta Road
 Rochester 14623
 (585) 424-4770
www.thehurlbut.com

The Jewish Home of Rochester

2021 South Winton Road
 Rochester 14618
 (585) 427-7760
www.jewishseniorlife.org

Kirkhaven

254 Alexander Street, Rochester 14607
 (585) 461-1991
www.seniorsfirst.com

Lakeside-Beikirch Care Center

170 West Avenue, Brockport 14420
 (585) 395-6052
www.lakesidehealth.org

Latta Road Nursing Home

2100 Latta Road, Rochester 14612
 (585) 225-0910
www.lattaroadnh.com

Latta Road Nursing Home A

2102 Latta Road, Rochester 14612
 (585) 225-0920
www.lattaroadnh.com

Maplewood Nursing Home

100 Daniel Drive, Webster 14580
 (585) 872-1800
www.maplewoodnursinghome.com

Monroe Community Hospital

435 E. Henrietta Rd., Rochester 14620
 (585) 760-6325
www.monroehosp.org

Park Ridge Living Center

1555 Long Pond Road
 Rochester 14626
 (585) 723-7688
www.unityhealth.org

Penfield Place

1700 Penfield Road, Penfield 14526
 (585) 586-7433

Shore Winds Nursing Home

425 Beach Avenue, Rochester 14612
 (585) 663-0930
www.theshorewinds.com

St. Ann's Home

1500 Portland Avenue, Rochester 14621
 (585) 697-6000
www.stannscommunity.com

St. John's Home

150 Highland Avenue, Rochester 14620
 (585) 271-5413
www.stjohnsliving.org

Unity Living Center at St. Mary's

89 Genesee Street, Rochester 14611
 (585) 368-3411
www.unityhealth.org

IV. List of Skilled Nursing Facilities (continued)

Wedgewood Nursing Home

5 Church Street, Spencerport 14559
(585) 352-4810
www.wedgewoodnursingfacility.com

Wesley Gardens

3 Upton Park, Rochester 14607
(585) 241-2111
www.wesleygardens.org

Westgate Nursing Home

525 Beahan Road, Rochester 14624
(585) 247-7880
www.westgatenursing.com

Woodside Manor

2425 S. Clinton Ave., Rochester 14618
(585) 461-0370
www.woodsidemanornursinghome.com

V. Transitional Care (Short-Term)

Many skilled nursing facilities offer some type of transitional care, which can allow the patient to leave the hospital when they no longer require acute care, but before they are ready to go home. Transitional care provides rehabilitation to prepare patients to return home by helping them gain independence or by helping them to feel better. It provides comprehensive services provided by skilled professionals, such as physical therapy, occupational therapy, speech therapy, or other needed care such as I.V. or wound care (some facilities do not manage I.V.). Payment is similar to the client's home-care coverage under Medicare/Medicaid/other insurances; there is a private-pay fee for room and board.

ⁱ Materials adapted from St. Ann's Community.

ⁱⁱ Adapted from Hagen, T., Hopson, J.L., & Hopson, E. in the Rochester *Democrat & Chronicle* (2001, July).

ⁱⁱⁱ New York State Department of Health. *Selecting a Nursing Home in New York State*. Retrieved from http://www.nyhealth.gov/facilities/nursing/select_nh/select_nh.htm#medicalneed on November 11, 2008.

^{iv} Information provided by Sharon Boyd, Senior VP of the Alzheimer's Association, Rochester, NY Chapter.

^v Genworth Financial (2010, April). 2010 Cost of Care Survey. Retrieved September 8, 2010 from http://www.genworth.com/content/etc/medialib/genworth_v2/pdf/ltc_cost_of_care.Par.3361.File.dat/New%20York_gnw.pdf

NOTES

Chapter 11: Hospital and Urgent Care

Goals for this chapter:

1. Understand how to advocate for a loved one
2. Learn what questions to ask a physician about hospital stay
3. Learn and understand the hospital admission process
4. Understand the discharge process and follow-up care

I. Hospital Choice and Quality of Care	219
II. Planning Ahead	219
III. Before A Hospital Stay	219
IV. During Your Hospital Stay	220
A. Hospital Personnel	220
B. Patients' Bill of Rights	221
V. Discharge Planning	222
A. Discussion	222
B. Planning	222
C. Training	222
D. Referrals	223
E. Resources	223
VI. Hospital Discharge to Home Care	223
A. Choosing a Certified Agency	223
B. Resources	224
VII. Hospital Discharge to Rehabilitation	224
A. Short-Term Intensive Rehabilitation in a Hospital	224
B. Skilled Nursing Rehabilitation	225
VIII. Diagnostic Related Groups (DRGs)	225
IX. Utilization Review	225
X. Payment Mechanisms	225
XI. Acute-Care Hospitals in Monroe County	225

(over)

XII. After-Hours and Urgent Care Facilities	226
A. Hospital-based Urgent Care Centers	226
B. Lifetime Health Medical Group	226
C. Orthopedic Services	227
D. Other After-Hours and Urgent Care Centers	227

I. Hospital Choice and Quality of Care

Your primary care physician and your specialists are usually affiliated with at least one local hospital. This often affects your choice of where you receive hospital care. Hospitals should be accredited; that is, voluntarily meet national health and safety standards set by organizations such as the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) or the American Osteopathic Association (AOA).

For additional information about evaluating hospitals in Monroe County and across the country, visit the United States Department of Health and Human Services website at www.hospitalcompare.hhs.gov. This website contains information about hospital location, the quality of the hospital, checklists of important questions, and patient rights.

Hospital stays may be planned (as for elective surgery) or may result from an unplanned crisis. In any case, an emergency room visit or admission to the hospital can be a bewildering experience for the older person and for care partners.

Resources to Report Complaints about Quality of Care

Joint Commission on Accreditation of Healthcare Organizations:

Consumer Complaints Line
(800) 994-6610
www.jointcommission.org

New York State Department of Health

(585) 423-8042 Rochester
(866) 881-2809 State
www.nyhealth.gov

II. Planning Aheadⁱ

In the event of an unexpected trip to the hospital or emergency room, planning ahead can help ease the stress that can often result. It is important to know who you can depend on (you should have at least two dependable family members, friends, or neighbors) at a moment's notice. Also, you should pack an "emergency bag" that contains the following:

- A document containing your care partner's preferred name and language, contact information for doctors, key family members, and helpful friends, medical conditions, current medications (including over the counter), and assistive devices
- Copies of insurance cards and advance directives (e.g. health care proxy, power of attorney)
- A small amount of cash
- A pad of paper and pen to write down information
- A change of clothing

III. Before a Hospital Stayⁱⁱ

Before admission to the hospital, be sure to understand the following questions. If you are unsure about a particular issue, discuss it with your doctor.

- What is the reason for the hospitalization?
- What are the benefits and risks of the procedure being performed?
- Ask if tests can be done before going to the hospital to shorten the hospital stay.

III. Before a Hospital Stayⁱⁱⁱ (continued)

- Ask if your doctor will be talking with other doctors; if so, find out if you can see these specialists beforehand.
- Ask questions regarding anesthesia, catheters, medications and IV's.
- How long will the hospital stay be?
- What level of functioning will you have upon discharge?
- Will you be able to return home? Ask about home care, rehabilitation, respite care, adult day services, nursing home care, etc.

IV. During Your Hospital Stay

A. Hospital Personnel (in addition to primary care physician)

1. **Geriatric Psychiatrist:** Trained to diagnose and treat mental disorders in older adults (e.g. dementia, depression, anxiety, and late-life schizophrenia).
2. **Head Nurse:** Oversees the department as an administrator. Takes complaints about care to this person for effective action or explanation. May also be known as a nurse manager, unit manager, or clinical supervisor.
3. **Nursing Assistant or Aide:** Provides basic personal care.
4. **Nurse Practitioners and Physician Assistants:** May help oversee patients' care. In many states, doctor-supervised NP's and PA's write orders for treatment and medication.
5. **Primary Care Nurse:** Takes responsibility for your care throughout your stay unless the hospital uses a different approach. You have a right to request a change in nurses.
6. **Resident:** A physician who has completed medical school and an internship, and is now receiving hospital training in a medical or surgical specialty. Performs all physician functions and can make minor modifications in your treatment. It is your right to refuse treatment by a resident.
7. **Social Worker:** Offers patient and family therapy, support services and planning for discharge. Social workers may also teach and counsel the interdisciplinary team.
8. **Specialists:**
 - a. **Internist:** Diagnoses and treats non-surgical conditions.
 - b. **Anesthesiologist:** Delivers medication to relieve pain or produce unconsciousness before surgery, often provides counseling during surgery, monitors and dispenses blood; keeps complete records of the procedure.
9. **Therapists:**
 - a. **Occupational Therapist:** May use work, self-care, and recreational activities to increase independent function.
 - b. **Physical Therapist:** May treat physical disabilities and work with patients to improve general fitness. May also teach a patient how to use a walker, artificial limb, or wheelchair.
 - c. **Speech-Language Pathologist:** May test, diagnose and treat patients with speech and swallowing problems.

IV. During Your Hospital Stay (continued)

B. Patients' Bill of Rights^{iv}

As a patient in a hospital in NYS, you have the right, consistent with law, to:

1. Understand and use these rights. If for any reason you do not understand or you need help, the hospital MUST provide assistance, including an interpreter.
2. Receive treatment without discrimination as to race, color, religion, sex, national origin, disability, sexual orientation, source of payment, or age.
3. Receive considerate and respectful care in a clean and safe environment free of unnecessary restraints.
4. Receive emergency care if you need it.
5. Be informed of the name and position of the doctor who will be in charge of your care in the hospital.
6. Know the names, positions and functions of any hospital staff involved in your care and refuse their treatment, examination or observation.
7. A no smoking room.
8. Receive complete information about your diagnosis, treatment and prognosis.
9. Receive all the information that you need to give informed consent for any proposed procedure or treatment. This information shall include the possible risks and benefits of the procedure or treatment.
10. Receive all the information you need to give informed consent for an order not to resuscitate. You also have the right to designate an individual to give this consent for you if you are too ill to do so. If you would like additional information, please ask for a copy of the pamphlet "Do Not Resuscitate Orders -- A Guide for Patients and Families."
11. Refuse treatment and be told what effect this may have on your health.
12. Refuse to take part in research. In deciding whether or not to participate, you have the right to a full explanation.
13. Privacy while in the hospital and confidentiality of all information and records regarding your care.
14. Participate in all decisions about your treatment and discharge from the hospital.
The hospital must provide you with a written discharge plan and written description of how you can appeal your discharge.
15. Review your medical record without charge. Obtain a copy of your medical record for which the hospital can charge a reasonable fee. You cannot be denied a copy solely because you cannot afford to pay.
16. Receive an itemized bill and explanation of all charges.
17. Complain without fear of reprisals about the care and services you are receiving and to have the hospital respond with a written response if you request it. If you are not satisfied with the hospital's response, you can complain to the NYS Department of Health. The hospital must provide you with their telephone number.

IV. During Your Hospital Stay (continued)

18. Authorize those family members and other adults who will be given priority to visit consistent with your ability to receive visitors.
19. Make known your wishes in regard to anatomical gifts. You may document your wishes in your health care proxy or on a donor card, available from the hospital.

V. Discharge Planning^v

The discharge planner (e.g. nurse, social worker) is responsible for making sure that the plan for your discharge is, to use Medicare's language, "safe and adequate." This means that you should be going to a place that does not present immediate dangers to your health and well-being, and that realistic plans have been made for appropriate follow-up care. Medicare does not specifically define "safe" and "adequate," so you and the discharge planner have to interpret what it means in your case.

A. Discussion

At the very outset of discharge planning, health care professionals, family care partners, and the patient (if appropriate) should discuss the following:

- The patient's condition, and any changes that may have occurred as a result of treatment at the facility;
- Any likely symptoms, problems, or changes that may occur when the patient is at home;
- The patient's care plan, the care partner's needs, and any adjustments that must be made to meet these needs;
- The potential impact of caregiving on the care partner; warning signs of stress; techniques for reducing stress.

B. Planning

Prior to discharge, health care professionals should work with family care partners – with patient consent, if appropriate – to:

- Arrange for an in-hospital assessment to determine Medicare or insurance eligibility for home care services, such as visiting nurses and home care aides;
- Set up home care services for which the patient is eligible and others for which the patient/family will pay;
- Get the home ready by arranging for equipment rental and home modification;
- Provide a 24-hour phone number the care partner can call to speak with a health care professional;
- Organize transportation home for the patient;
- Schedule a follow-up appointment.

C. Training

Before discharge, health care professionals should provide family care partners with applicable training, including:

- A written medication list with specific instructions on medication dosages and how long they should be taken, and information about possible side effects; teaching and practice of techniques such as bed-to-chair transfers, care procedures, use and monitoring of equipment, recognition of symptoms, and other elements of patient care.

V. Discharge Planning (continued)

D. Referrals

Before discharge, health care professionals, care partners, and patients should explore available support services, including:

- Community sources of social support for care partners and patients;
- Community-based agencies that provide services such as transportation, equipment maintenance, respite care, home care, and volunteer services;
- Information resources such as books, pamphlets, videos, and websites.

E. Resources

A Family Caregiver's Guide to Hospital Discharge Planning written by Gail Gibson Hunt, Executive Director of the National Alliance for Caregiving and Carol Levine, Director of the United Hospital Fund's Families and Health Care Project. This brochure is available online at www.caregiving.org and www.uhfnyc.org.

Hospital Patients' Rights

(800) 446-2447

IPRO

1979 Marcus Avenue, Lake Success, New York 11042

Quality improvement organization contracted by the federal and state government to review the hospital's care provided to Medicare and Medicaid patients in NYS.^{vi}

Call IPRO if:

- You are being denied admission to a hospital.
- You believe you are being discharged from a hospital too soon. **Medicare patients** should call toll-free at (800) 446-2447 or (516) 326-6131 and **Medicaid patients** call toll-free at (800) 648-4776 or (516) 326-6131.
- You have not received a discharge plan in writing.
- If needed post-hospital care is not available, not adequate, or not affordable.
- You want more information about your rights.

VI. Hospital Discharge to Home Care

A. Choosing a Certified Agency

If you live in Monroe County and your discharge plan determines that you need help in your home after leaving the hospital, you will have a choice of one of the **three certified home care agencies** listed below.

All three certified agencies offer the following:

- Community health nursing visits
- Therapy (speech, occupational, physical)
- Aides to assist with personal care
- Medical social work

These agencies also coordinate the following services:

- Lab tests
- Home-Delivered Meals
- Medical supplies and equipment
- Medical transportation

VI. Hospital Discharge to Home Care (continued)

B. Resources

Home Care of Rochester (HCR)

85 Metro Park, Rochester 14623
(585) 272-1930
www.homecarerochester.com

Note: Services provided include: Cardiopulmonary Program, Medical/Surgical Nursing, Rehabilitative Services, Infusion Therapy, Pediatrics (Maternal/Child Health), Mental Health Wellness Program, Orthopedics

Lifetime Care

3111 Winton Road S., Rochester 14623
(585) 214-1000
www.lifetimecare.org

Note: Services provided include: Medical/Surgical Nursing, Ostomy/Wound Care Program, Cardiopulmonary Team, Infusion Therapy, Rehabilitative Services, Certified Home Hospice (in the home, hospital, or nursing home), Palliative Care (comfort care), Pediatrics (chronic and acute), Maternal/Child Health, Obstetric Nursing (including high-risk pregnancies), Diabetes home management, Home Care for those with developmental disabilities. Arranges home care services using Blue Choice. They can bill other insurances.

Visiting Nurse Service (VNS)

2180 Empire Boulevard, Webster 14580
(585) 787-2233
www.vnsnet.com

Note: Services provided include: Behavioral Health, Cardiac & Pulmonary Care, Diabetes, Falls Prevention, Geriatrics, HIV, Hospice, Infusion Therapy, Long Term Home Health Care, Pediatric & Maternal Care, Post-surgical, Social Work, Telehealth, Wound/Ostomy/Continence Care, Companions and Home Health Aide Care, Meals On Wheels and Nutrition Evaluation & Counseling, Personal Emergency Response System, Visiting Nurse Signature Care (private duty)

VII. Hospital Discharge to Rehabilitation

(For conditions such as stroke, hip/knee fracture or replacement, brain injury.)

A. Short-term Intensive Rehabilitation in a Hospital

1. Scope of Services

Daily 3–4 hour intensive therapy sessions of at least 2 therapies: physical therapy and either speech therapy or occupational therapy

2. Requirements (clients must be):

- Assessed as needing skilled care prescribed by doctor
- Hospitalized at least 3 acute-care days
- Able to do 3-4-hour intensive sessions daily as described above

3. Primary Payer

- Medicare
- Medicaid

VII. Hospital Discharge to Rehabilitation (continued)

4. Provider Resources

Rochester General Health System
(585) 922-4000
www.rochestergeneral.org

Strong Health System
at Strong Memorial Hospital
(585) 275-2838 (for referral)
www.stronghealth.com

**Unity Acute Rehabilitation and
Brain Injury Program**
at St. Mary's Campus
(585) 368-3222
www.unityhealth.org

B. Skilled Nursing Rehabilitation

1. Scope of Services

A minimum of 150 minutes over 5 out of 7 days per week of at least 2 therapies: physical therapy and either speech therapy or occupational therapy

2. Requirements (clients must be):

- Assessed as needing skilled care prescribed by doctor
- Hospitalized at least 3 acute-care days within the last 30 days, or discharged directly to rehabilitation facility
- Able to do the minimum as described above

3. Primary Payer

- Medicare
- Medicaid (*if eligible upon review*)
- HMO

Note: For a complete listing of skilled nursing facilities that offer rehabilitation, see Chapter 10, "Skilled Nursing Facilities"

VIII. Diagnostic Related Groups (DRGs)

As a system of determining payment for hospital care under Medicare, "DRGs" are various categories, depending on the patient's diagnosis, which are set up by Medicare to determine the payment to the hospital.

IX. Utilization Review

A system of checking whether each patient's medical condition necessitates acute hospital care. It also checks whether services and procedures are necessary, appropriate, and efficient in regard to each patient's care.

X. Payment Mechanisms

See Chapter 3, "Insurance Coverage" for more information.

XI. Listing of Acute-Care Hospitals in Monroe County

Highland Hospital
1000 South Avenue, Rochester 14620
(585) 473-2200
www.stronghealth.com

XI. Acute-Care Hospitals in Monroe County (continued)**Lakeside Memorial Hospital**

156 West Avenue, Brockport 14420
 (585) 395-6095 Automated Operator
 (585) 637-3131 Information/Emergency
 www.lakesidehealth.com

Rochester General Hospital

1425 Portland Avenue, Rochester 14621
 (585) 922-4000
 www.rochestergeneral.org

Strong Memorial Hospital

601 Elmwood Avenue, Rochester 14642
 (585) 275-2100
 www.stronghealth.com

Unity Hospital

1555 Long Pond Road, Rochester 14626
 (585) 723-7000
 www.unityhealth.org

VI. After-Hours and Urgent Care Facilities^{vii}

These providers offer care for minor emergencies: fever, ear aches, sore throats, flu, mono, coughs, colds, asthma attacks, rashes, painful urination, minor injuries, cuts, animal and insect bites, sprains, fractures.

A. Hospital-based Urgent Care Centers**Highland Hospital Urgent Care Service**

1000 South Avenue, Rochester 14620
 (585) 341-6880
 Hours: 12pm-10pm, 7 days/week

Rochester General Hospital Fast Track

1425 Portland Avenue, Rochester 14621
 (585) 922-2300
 Hours: 24 hours/day, 7 days/week

Strong Memorial Urgent Care Service

601 Elmwood Avenue, Rochester 14642
 (585) 275-4551
 Hours: 24 hours/day, 7 days/week

Unity Health System Walk-In Care Center

89 Genesee Street, Rochester 14611
 (585) 368-3050
 Hours: 24 hours/day, 7 days/week

Unity Hospital Quick Care Service

1555 Long Pond Road, Rochester 14626
 (585) 723-7070
 Hours: 8am-midnight, 7 days/week

B. Lifetime Health Medical Group

Appointment Line: 338-1200
 336-4894 TTY

Hours: Monday-Friday: 11am - 11pm
 Saturday: 8am - 11pm
 Sunday: 9am - 11pm

VI. After-Hours and Urgent Care Facilities^{viii} (continued)

Greece Health Center

470 Long Pond Road, Rochester 14612

Joseph C. Wilson Center

800 Carter Street, Rochester 14621

Marion B. Folsom Health Center

1850 Brighton-Henrietta Townline Road, Rochester 14623

C. Orthopedic Services

Greater Rochester Orthopedics

Linden Oaks Medical Campus

30 Hagen Drive, #220, Rochester 14625

(585) 295-5350

Hours: Monday-Thursday: 8:30am-4:30pm

Saturday: 10am-2pm, by appointment only

Joint Replacement Center at Unity Hospital

(585) 368-3000

www.unityhealth.org/joint_replacement/

University Orthopedic Associates

4901 Lac de Ville Boulevard, Clinton Crossings Building D, Rochester 14618

(585) 275-5321 8am–4:30pm

(585) 341-9252 4:30pm–7:30pm

D. Other After-Hours and Urgent Care Centers

Eastside Medical Urgent Care, LLC

2226 Penfield Road, Penfield 14526

(585) 388-5280

Hours: Monday-Friday: 11am-

11pm Weekends/Holidays:

9am-6pm

ExcelCare

3400 Monroe Avenue, Pittsford 14618

(585) 203-1056

Hours: Monday-Friday: 11am-9pm

Saturday-Sunday: 11am-8pm

Extended Medical Services

811 Ridge Road, #101, Webster 14580

(585) 671-4660

Hours: Monday-Friday: 12pm–9:45pm

Weekends: 8am -6pm

Holidays: 12pm–6pm

Note: Medicaid not accepted

-
- ⁱ Alzheimer's Disease Education and Referral Center (2008). *Hospitalization happens: A guide to hospital visits for individuals with memory loss.*
- ⁱⁱ Alzheimer's Disease Education and Referral Center (2008). *Hospitalization happens: A guide to hospital visits for individuals with memory loss.*
- ⁱⁱⁱ Alzheimer's Disease Education and Referral Center (2008). *Hospitalization happens: A guide to hospital visits for individuals with memory loss.*
- ^{iv} New York State Department of Health. *Patient's Rights.* Retrieved from <http://www.health.state.ny.us/nysdoh/hospital/english2.htm> on June 24, 2010.
- ^v Gibson, G. & Levine, C. (A Publication of the National Alliance for Caregiving and the United Hospital Fund of New York) *A Family Caregiver's Guide to Hospital Discharge Planning.* Retrieved from <http://www.caregiving.org/pubs/brochures/familydischargeplanning.pdf> on June 24, 2010
- ^{vi} New York State Department of Health. *Patient's Rights.* Retrieved from <http://www.health.state.ny.us/nysdoh/hospital/english2.htm> on June 24, 2010.
- ^{vii} Monroe County Medical Society (2007). *After Hours Resource Guide.* Retrieved January 10, 2008 from <http://mcms.org/>.
- ^{viii} Monroe County Medical Society (2007). *After Hours Resource Guide.* Retrieved January 10, 2008 from <http://mcms.org/>.

Chapter 12: End of Life Issues

Goals for this chapter:

1. To learn information about hospice and palliative care.
2. To learn information regarding end-of-life issues.

I. Advance Care Planning	230
A. Health Care Proxy	230
B. Living Will	230
C. Do Not Resuscitate Order (DNR)	231
D. Medical Orders for Life-Sustaining Treatment (MOLST)	231
E. Additional Consideration Regarding Health Care and Treatment Choices	232
F. Advance Directive Booklets for Other States	232
II. Hospice Care and Palliative Care	232
A. Hospice Care	232
B. Palliative Care	233
III. Care for the Dying	234
A. Hospice Care in the Home	234
B. In-Patient Hospice Care	235
C. Hospice Care in a Skilled Nursing Facility	235
D. Care for the Dying in Private Two-Bed Facilities	236
IV. Resources for Making End-of-Life Decisions	237
V. Organ and Tissue Donation	238
VI. Funeral Arrangements	238
A. Services Provided by a Funeral Director	238
B. Cost of a Funeral	238
C. Notifications	239
D. Arrangements for a Memorial or Religious Service if Desired	239

Note: Please refer to Chapter 2 "Financial and Legal Issues" for information on Legal and Financial Directives (i.e. Living Will, Power of Attorney)

I. Advance Care Planning

Advance Care Planning assists you in preparing for a sudden unexpected illness, from which you expect to recover, as well as the dying process and ultimately death in case you are unable to make your own decisions. It allows you to maintain control over how you are treated and ensures you receive the type of care and death you desire. It is a continual process and not merely a document or isolated event.i

A. Health Care Proxyii

A Health Care Proxy is someone you appoint that you trust (i.e. a family member or close friend) that will make health care decisions for you if you lose the ability to make decisions yourself. By appointing a health care agent, you can make sure that health care providers follow your wishes. Your agent can decide how your wishes apply as your medical condition changes. Hospitals, doctors and other health care providers must follow your agent's decisions as if they were your own. You may give the person you select as your health care agent as little or as much authority as you want. You may allow your agent to make all health care decisions or only certain ones. You may also give your agent instructions that he or she must follow. The Health Care Proxy Form may also be used to document your wishes or instructions with regard to organ and/or tissue donation.

Resources

Compassion and Support at the End of Life www.compassionandsupport.org

NYS Department of Health www.health.state.ny.us

www.doyourproxy.org *Note: Website to help you complete the forms to designate a health care proxy and create a living will.*

B. LivingWill

Allows you to state your wishes about medical care in the event that you develop an irreversible condition that prevents you from making your own medical decisions.

This becomes effective if you become terminally ill, permanently unconscious or minimally conscious due to brain damage and will never regain the ability to make decisions. Persons who want to indicate under what set of circumstances they favor or object to receiving any specific treatments using the New York LivingWill.iii

Please Note: You do not need to notarize your NY Health Care Proxy form or NY Living Will. You do not need a lawyer to fill out these forms. These documents will be legally binding only if the person completing them is a competent adult (at least 18 years or age); the documents are properly signed, witnessed and dated; and the documents are available when needed.

© 2011 Alzheimer's Association

All rights reserved.

I. Advance Care Planning (continued)

C. Do Not Resuscitate Order (DNR)

A DNR order means that if cardiac arrest occurs (if your heart stops beating and you stop breathing), cardiopulmonary resuscitation (CPR) will not be performed to revive you.^{iv}

There are two (2) types of DNR orders:

1. Out of Hospital DNR

Note: This form is intended for patients not originating from a hospital or nursing home. If you are being cared for in your own home and call 911 or call an ambulance, the responding Emergency Medical Team is required to give all necessary medical treatment to the patient both in the home and en route to a hospital. However, if a signed copy of the DNR is presented to the Emergency Medical Team, they can honor this request, in accordance with the regulations of the NYSDepartment of Health.

2. Hospital & Nursing Home DNR

Note: If included in your hospital or nursing home chart, these orders instruct the medical staff not to try to revive you if your breathing or heartbeat has stopped.

D. Medical Orders for Life-Sustaining Treatment (MOLST)^v

Designed to improve the quality of care people receive at the end of life. This program is based on effective communication of patient wishes, documentation of medical orders on a brightly colored form, and a promise by health care professionals to honor these wishes.

MOLST is generally for patients with serious health conditions. Physicians should consider consulting with the patient about completing a MOLST form if the patients:

- Wants to avoid or receive life-sustaining treatment.
- Resides in a long-term care facility or requires long-term care services.
- Might die within the next year

NOTICE: As of June 1, 2010, a patient's family member (including his or her domestic partner) will be able to make health care decision when the patient is not able to do so under the newly enacted Family Health Care Decisions Act (FHCDA). **The NYS Department of Health updated the MOLST form in June of 2010** to make it more user-friendly and to align the form with this newly enacted law. Under the FHCDA, **the rules concerning medical orders issued based on the consent of surrogates have changed.** Professionals should consult with legal counsel or the appropriate official in your health care facility prior to using this form to record orders issued based on the consent of a surrogate. **Note that the rules for decisions by health care agents based on health care proxies have not changed.** The newly approved MOLST form can be found online at www.nyhealth.gov/professionals/patients/patient_rights/molst/index.htm. Complete information on the FHCDA and MOLST updates can be found online at www.CompassionandSupport.org.^{vi}

I. Advance Care Planning (continued)

E. Additional Consideration Regarding Health Care and Treatment Choices

Do NOT place original documents in a safe deposit box but in a secure place in your home.

F. Advance Directive Booklets for Other States

Booklets in several languages, giving updated directives for each U.S. state, are available from Professional Media Resources.

To order 100 or more copies, write to: PO Box 460380, St. Louis MO 63146
or call (314) 428-6294.

To order an individual copy for any state, use the web site advdir.com

Sample of a booklet cover:



II. Hospice and Palliative Care

A. Hospice Care^{vii}

Hospice care focuses on alleviating symptoms and supporting patients with a life expectancy of six months or less. The individual's emotional, physical, and/or spiritual needs are attended to by a hospice team that utilizes a family-centered approach.

The hospice team (which includes doctors, nurses, home health aides, social workers, chaplains, counselors, and trained volunteers):

- provides emotional support
- manages the person's pain and symptoms
- provides needed medications, medical supplies, and equipment
- coaches loved ones on how to care for the person
- delivers special services like speech and physical therapy when needed
- makes short-term inpatient care available when pain or symptoms become too difficult to manage at home, or the care partner needs respite time
- provides grief support to surviving loved ones and friends

Hospice can begin as soon as a 'referral' is made by the person's doctor. An initial meeting is scheduled to review the services that hospice will offer as well as to sign the necessary consent forms in order for care to begin. Care usually begins within a day or two of a referral; however, in urgent situations, services may begin sooner.

II. Hospice and Palliative Care (continued)

Hospice care is given in 90-day or 60-day periods of care. You can get hospice care for up to two 90-day periods followed by an unlimited number of 60-day periods as long as you continue to meet the eligibility criteria.

Questions to Ask When Choosing a Hospice Program

- What services are provided?
- What kind of support is available to the family/care partner?
- What roles do the attending physician and hospice play?
- What does the hospice volunteer do?
- How does hospice work to keep the patient comfortable?
- How are services provided after hours?
- How long does it typically take hospice providers to enroll someone once the request for services is made?

In most cases, hospice care is provided in the person's home. It can also be provided in freestanding hospice centers, hospitals, nursing homes, and other long-term care facilities. Hospice care is covered under Medicare, Medicaid, most private insurance plans, HMOs, and other managed care organizations.

Eligibility^{viii}

You can get Medicare hospice benefits when you meet all of the following conditions:

- You are eligible for Medicare Part A (Hospital Insurance).
- Your doctor and the hospice medical director certify that you are terminally ill and have 6 months or less to live if your illness runs its normal course.
- You sign a statement choosing hospice care instead of other Medicare-covered benefits to treat your terminal illness.
- You get care from a Medicare-approved hospice program.

B. Palliative Care^{ix}

Rather than seeking a cure or trying to prolong life, palliative care focuses on dignity and quality of life. It aims to keep the person comfortable and pain-free until life ends naturally. A person may continue to receive any necessary medications (e.g. for chronic conditions such as diabetes or high blood pressure), as well as those that prevent pain or discomfort. Medical treatments are avoided as are tests and procedures that may do more harm than good as it focuses on the quality of remaining life.

Palliative care involves a team-oriented approach to medical care (similar to that of a hospice team), pain management, and emotional and spiritual support tailored to the person's needs and wishes.

Five Principles of Palliative Care^x

- Respects the goals, likes, and choices of the dying person.
- Looks after the medical, emotional, social, and spiritual needs of the dying person.
- Supports the needs of the family members.
- Helps gain access to needed health care providers and appropriate care settings.

II. Hospice and Palliative Care (continued)

- Builds ways to provide excellent care at the end of life.

Palliative care services may be provided in the home, assisted living facility, nursing facility, or hospital. Medicaid, Medicare, and private insurance companies may pay for some treatments and medications.

Eligibility

Palliative care may be given at any time during a person's illness, regardless of life expectancy.

What You Can Do^{xi}

You can improve the likelihood that you and your family will get the care you want if you:

- discuss the care you want with your family, friends, physician, and other care professionals, and spiritual advisor
- make a list of questions to ask your doctor to find out whether he/she can provide the care you want at the end of life and other available options
- check with your local hospitals, nursing homes, and home health agencies about the special services they offer for dying patients
- prepare a living will and appoint someone to make decisions for you if you are not able (health care proxy)
- look into support groups and educational programs for seriously ill individuals and their families

Resource

National Hospice and Palliative Care Organization (NHPCO)

www.nhpco.org

Note: Provides information on advance care planning, hospice, and palliative care. Search for a care provider, members of NHPCO, and vendors that specialize in the hospice and palliative care field.

III. Care for the Dying

A. Hospice Care in the Home

Persons can be eligible who are declared by their physician to be terminally ill (within six months or less). Hospice care at home requires a primary caregiver.

1. Scope of Services

- Nursing care visits
- Medication
- Personal care (usually 2 hours/day)
- Medical supplies and equipment
- Pastoral care
- Palliative (comfort) care for control of pain/symptoms

III. Care for the Dying (continued)

2. Primary Payer

- Medicaid
- Medicare

3. Resources

Lifetime Care

(585) 214-1000
www.lifetimecare.org

Visiting Nurse Service (VNS)

(585) 787-2233
www.vnsnet.com

Note: Some licensed home care agencies provide privately-paid hospice services

B. In-Patient Hospice Care

1. Scope of Services

- In-patient short-term stays for pain/symptom management and family respite

2. Primary Payer

- Medicare
- Medicaid

3. Resources

Elizabeth G. and Jennifer J.

Hildebrandt Hospice Care Center

2652 Ridgeway Ave., Rochester 14626
(585) 436-3462
www.lifetimecare.org

"Scatter" beds in other hospitals:

Lifetime Care

(585) 214-1000
www.lifetimecare.org

The Palliative Center for Caring

1450 Portland Avenue, Rochester 14621
(585) 787-8315
www.stannscommunity.com or
www.vnsnet.com

Visiting Nurse Service

(585) 787-2233
www.vnsnet.com

Note: End-of-life services addressing pain, symptom, and crisis management. Psychosocial and spiritual issues also addressed. Five-bed inpatient unit located on private floor in The Heritage on St. Ann's Irondequoit campus.

C. Hospice Care in a Skilled Nursing Facility

1. Scope of Services

- Nursing care visits
- Personal care
- Medication
- Pastoral care
- Palliative care for control of pain/symptoms
- Medical supplies and equipment

III. Care for the Dying (Hospice Care in a Skilled Nursing Facility, continued)

2. Primary Payer

- Medicare
- Medicaid (for some services)

3. Resources

Lifetime Care

(585) 214-1000

www.lifetimecare.org

Visiting Nurse Service (VNS)

(585) 787-2233

www.vnsnet.com

D. Care for the Dying in Private Two-Bed Facilities

1. Scope of Services

- Nursing care
- Personal care
- Medication
- Pastoral care
- Palliative (comfort) care
- Medical supplies and equipment

2. Primary Payer

- No charge; donations welcome
- For some services, residents are covered by Medicare/Medicaid/other insurances as they would be in their home

3. Resources

Advent House

1010 Moseley Road, Fairport 14450

(585) 223-6112

www.theadventhouse.org

Aurora House of Western Monroe County

2495 S. Union St., Spencerport 14559

(585) 313-9553

Benincasa

3880 Rush-Mendon Road

Mendon 14506

(585) 624-8070

www.benincasainc.org

Isaiah House

71 Prince Street, Rochester 14605

(585) 232-5221

www.theisaiahhouse.org

Journey Home

994 Long Pond Rd., Rochester 14626

(585) 225-1240

www.journeyhomegreece.org

Mt. Carmel House

4 Planet Street, Rochester 14606

(585) 458-6508

Shepherd Home

1959 Five Mile Line Rd., Penfield 14526

(585) 381-0890

www.shepherdhome.org

Sunset House

3746 St. Paul Blvd., Rochester 14617

(585) 467-3524

www.sunsethouse.info

Webster Comfort Care Home

700 Holt Road, Webster 14580

(585) 872-5290

www.webstercomfortcare.org

IV. Resources for Making End-of-Life Decisions

Ethical Will

www.ethicalwill.com

Note: A love letter to your family and friends, containing personal beliefs, values (such as love, beauty, truth, justice), what you learned from loved ones, what you are grateful for, your hopes for the future, important events in your life, instructions, blessings.

Family Love Letter: Information in a Time of Confusion

(866) 770-4FLL (4355)

www.familyloveletter.com

Note: A booklet of documents to help reduce the stress which almost always accompanies the death or disability of a loved one. This book allows your loved one to inform family members of instructions regarding their plans and wishes.

Five Wishes Before You Die, by Jim Towey

Aging With Dignity, PO Box 1661

Tallahassee FL 32302-1661

(888) 594-7437

www.agingwithdignity.org

Note: A 12-page document legal in 40 states, and usable in all 50 by attaching it to required state forms; cost: \$5; also Five Wishes video.

The Five Wishes

- The person I want to make care decisions for me when I can't.
- The kind of medical treatment I do or don't want.
- How comfortable I want to be.
- How I want people to treat me.
- What I want my loved ones to know.

Hard Choices for Loving People, by Hank Dunn

401 Bowling Avenue, Suite 51

Nashville, TN 37205

www.hospicenet.org/html/choices.html

Last Acts

Robert Wood Johnson Foundation

www.rwjf.org/pr/product.jsp?id=20938

Note: This website is dedicated to improving end-of-life care

V. Organ and Tissue Donation

Neither age nor medical history should keep you from being a donor. There is no cost to the family or disruption of funeral arrangements.

New York State drivers: check off the donor box in renewing your driver's license.

Resources for More Information on Organ and Tissue Donation

Finger Lakes Donor Recovery Network

30 Corporate Woods of Brighton
Suite #220, Rochester 14623
(585) 272-4930
www.donorrecovery.org

Rochester/Finger Lakes

Eye and Tissue Bank

524 White Spruce Blvd, Rochester 14623
(585) 272-7890; (800) 568-4321
www.rehpb.org

VI. Funeral Arrangements

Planning ahead for one's funeral, cremation, or other arrangements is a wonderful gift to one's family. It relieves them of responsibility for many details at a time of great stress.

A. Services Provided by a Funeral Director

- Preparing the deceased for burial or cremation.
- In case of death far from home, arranging with a funeral director at the scene for the necessary documents and the transfer of the deceased.
- Seeing that all required statistical information about the deceased, as well as the place of interment or cremation, is placed on the original death certificate.
- Referring this official death certificate to the deceased's attending physician for his or her certification.
- Obtaining certified copies of the death certificate needed for estate settlement purposes.
- Providing guidance in selecting a cemetery plot or mausoleum, memorials or monuments.

B. Cost of a Funeral

It is wise to determine the approximate cost ahead of time, when the details are easier for family members to understand and address.

Resource for Funeral Information

For an informational brochure, a comparison list of local Funeral costs, assistance with funeral planning, or other Helpful information, contact:

Funeral Consumers' Alliance of Greater Rochester

220 Winton Road South, Rochester 14610 (mailing address)

(585) 461-1620

www.fcagr.com

VI. Funeral Arrangements (continued)

C. Notifications

An attorney or financial planner can be of great help in identifying those who should be notified of the person's death, such as Social Security, insurance providers, and financial institutions.

D. Arrangements for a Memorial or Religious Service if Desired

- Who is to conduct the service
- Where the service is to be held
- Who is to give a eulogy or reflection
- Who is to serve in other roles such as pall-bearers, readers, ushers
- What music, readings, and other elements of the service are desired
- Which friends or neighbors could stay at the houses of family members (or police protection agency), in order to provide security during their absence

"What we have once enjoyed and deeply loved we can never lose, for all that we love deeply becomes a part of us." - Helen Keller

-
- ⁱ Compassion and Support at the End of Life. Retrieved on August 13, 2010 from http://www.compassionandsupport.org/index.php/for_patients_families/advance_care_planning
- ⁱⁱ NYS Department of Health. *Who Will Speak for You?* Retrieved on August 13, 2010 from http://www.health.state.ny.us/professionals/patients/health_care_proxy/
- ⁱⁱⁱ Excellus BlueCross BlueShield (2009). Community-wide End-of-life/Palliative Care Initiative. Advance Care Planning. *Information about the Forms* (page 4).
- ^{iv} NYS Department of Health (2008). *Nonhospital DNR*. Retrieved on August 13, 2010 from
- ^v Excellus BlueCross Blue Shield. Compassion and Support at the End of Life. Retrieved on August 13, 2010 from http://www.compassionandsupport.org/index.php/for_professionals/molst
- ^{vi} Compassion and Support at the End of Life. Retrieved on August 13, 2010 from http://www.compassionandsupport.org/pdfs/homepage/MOLST_Update_June_2010.pdf
- ^{vii} The National Hospice and Palliative Care Organization. *Hospice Information*. Retrieved on January 6, 2010 from <http://www.nhpco.org/i4a/pages/Index.cfm?pageID=3254>
- ^{viii} Centers for Medicare and Medicaid Services. *Medicare and Hospice Benefits*. Retrieved on February 18, 2010 from <http://www.medicare.gov/Publications/Pubs/pdf/11361.pdf>
- ^{ix} The National Hospice and Palliative Care Organization. *Palliative Care*. Retrieved on January 6, 2010 from <http://www.nhpco.org/i4a/pages/Index.cfm?pageID=3254>
- ^x Last Acts. Five Principles of Palliative Care.
- ^{xi} Last Acts. What You Can Do.

Chapter 13: Nurturing the Human Spirit

Goals for this chapter:

1. To understand the process of aging as a life-long spiritual journey
2. To recognize how our faith in God or a Higher Power can nurture spiritual vitality and give meaning to our relationships and life experiences
3. To learn how to nurture the spirit and offer ways to reduce stress

I. The Process of Aging as a Life-Long Spiritual Journey	242
A. The Three Life Cycles	242
B. Aging as a Spiritual Activity	242
C. Principles of Later-Life Spiritual Development	242
II. Nurturing Spiritual Vitality	243
A. Reflection on My Particular Faith Journey	243
B. Basic Emotional Needs Related to Spiritual Needs	243
C. Reflection Questions on Spiritual Health	244
D. Strategies for Spiritual Growth	244
E. Questions that Care Partners and Care Receivers Can Use to Open the Door to Spiritual Care	245
III. Means of Spiritual Self-Care	246
A. Some Pointers on Personal Reflection or Prayer	246
B. Various Forms of Personal Reflection and Stress Reduction	247
C. Material for Reflection	251
D. Resources for Spiritual Growth	252

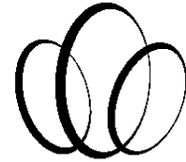
Note: The word "God" is frequently used in these materials. Use whatever terms or images of a Higher Power are familiar and helpful to you.

Spirituality can be described as our relationships with God or a Higher Power, with others, and with nature, that foster a sense of meaning, purpose, and mission in life.

I. The Process of Aging as a Life-Long Spiritual Journey

A. The Three Life Cycles and How They Intertwine

1. The "First Age" of learning and exploring our world.
2. The "Second Age" of taking on social responsibilities for family, work, and community.
3. The "Third Age" of new opportunities, freedoms, challenges, and burdens in older years.



B. Aging as a Spiritual Activity

1. Conscious acceptance of oneself.
2. Recognizing our dependence on God and interdependence on others.
3. Bringing integration to our experiences, beliefs, relationships, and expressions as part of our call to be whole and holy.
4. Being able to let go is a part of aging, and so is learning to reclaim. We can commit to learning from past relationships, establish new ones, re-establish old ones.
5. Understanding and seeking to express our spiritual needs. Many individuals tend not to articulate their experiences and needs.

C. Principles of Later-Life Spiritual Development

1. Older persons need to be needed, to feel useful. Find creative ways to use their talents and experiences. What skills and interests did they have?
2. Older persons may tend to go inward.
 - a. Negative tendencies: Isolation, depression, anxiety (sometimes one might mourn so much about the past or worry so much about the future that one misses the present!)
 - b. Positive tendencies: Growing desire for reflection and contemplation in order to find a deeper meaning and purpose in life; reminiscing, story telling.
3. The importance of experiencing loss, rather than negating it. Learn the process of how to grieve and mourn losses (see also the section on grief, Chapter 6, page 133).
 - a. Encourage talking about the person or situation.
 - b. Look for meaningful ways to memorialize the person.
 - c. Explore comforting or pleasurable activities, including prayer.
 - d. Seek support from others, including one's faith community, which has a responsibility for pastoral care for those in need.

I. The Process of Aging as a Life-Long Spiritual Journey (Later-Life Development, continued)

4. Dealing with difficult relationships:
 - a. Unresolved issues: Without an effort to address such issues, we pile up guilt for ourselves especially after the other person has died.
 - b. Forgiveness: This is something that heals not only the other person but also ourselves. It is possible to learn to forgive and be forgiven. If we do not forgive, we imprison the other person in our heart. Prisons require brick and stone, so lack of forgiveness leads to a hardened heart.

“My research has shown that learning to forgive helps people hurt less, experience less anger, feel less stress and suffer less depression. ...They become more hopeful, optimistic, and compassionate because they become more forgiving ...”ⁱ

II. Nurturing Spiritual Vitality

A. Reflection on My Particular Faith Journey

1. Who first shaped and molded my faith? Who influenced me along my journey? What events? What behaviors and attitudes?
2. How do I appreciate my faith as it unfolds each day?
3. Religious faith can enlighten and sustain us as we journey through life. Recent studies are showing that people who regularly participate in religious practices, whatever their faith tradition may be, tend to maintain better health as they age.
4. Faith development is a life-long process, and can be a primary source to challenge and nurture our growth:
 - In mind: A deeper understanding of ourselves, of others, of our faith tradition, of the Word of God in our holy books
 - In heart: To learn to choose and decide more wisely, to care for the common good of all as well as of ourselves
5. As we journey through life, we struggle:
 - To hold our negative and positive experiences in a creative tension
 - To grow through sadness as well as joy, darkness as well as light
 - To maintain control of our own life and yet trust God
6. Throughout our life we develop patterns of behavior that organize our human experience: how to grieve, how to compensate, how to adjust, how to rebuild.

Examples: • Widowhood • Loss of physical strength
 • Financial concerns • Relocation of one’s home

B. Basic Emotional Needs Related to Spiritual Needs

To be loved	To find meaning, purpose, and hope
To make a significant difference	To learn to transcend circumstances
To be admired	To maintain identity, integrity, and self-esteem
To be recognized for who you are as a person	To sense continuity
To be appreciated	To participate in religious activities
	To express anger and doubt

II. Nurturing Spiritual Vitality (Faith Journey, continued)

To be secure
To be respected
To be accepted

To love and serve others
To cultivate thankfulness
To forgive and be forgiven
To prepare for death and dying

C. Reflection Questions on Spiritual Health

1. I know that I am spiritually healthy when:
2. Five things I do to nurture my own spiritual health are:
3. Five things I do or could do to nurture the spiritual health of my care receiver are:
4. My spiritual health suffers when:
5. Caregiving nurtures my spirit when:
6. Caregiving wounds my spirit when:
7. I would like to know how others handle:

D. Strategies for Spiritual Growth

1. Live in the present. Look forward to the future, plan ahead, but remember that life is lived in the here and now.
2. Cultivate gratefulness. Seek to be satisfied with what is, where you have been, where you are now.
3. Treasure good memories which provide a sense of well-being and validate your life. Let painful memories remind you that there is still work to do.
4. Look for affirming beliefs. Seek out places and relationships that encourage positive self-esteem. Reach out to others, enter into community with others. This involves serving others and striving to be comfortable being served by others.
5. Examine what you know to be true and start there. Ask questions about how that fits your life now.

II. Nurturing Spiritual Vitality (continued)

6. Accept your doubts and confusion – use them as growing points. Remind yourself that some periods of time are for questions, not answers. Live the questions and the answers may suddenly appear.
7. Be aware of opportunities when you can encourage others on this journey. Join others in their quest. Examine and recommit to relationships with family, marriage partners, friends, neighborhood, faith community.
8. Allow time and space for inner work: meditate, pray, be silent, read, examine your dreams, worship, use rituals. Are you a human being or a human doing?
9. Be realistic about your abilities and needs. Do as Steven Covey suggests: don't prioritize your schedule, schedule your priorities.
10. Do something different from your regular work. Go new places, do new things. Serve others in ways that are different from what you do at work.
11. Nurture your creative side. Cultivate the ability to see things in new ways; express your own personal view of the world. Do not restrict yourself to the arts: creativity is a way of seeing. Try keeping a journal, writing down your prayers, telling your life story (see the section on "Journaling" pg. 251).

"Wrinkles show where the
smiles have been."

- Mark Twain

It takes 17 muscles to laugh,
and 41 to frown ...

E. Questions that Care Partners and Care Receivers Can Use to Open the Door to Spiritual Care

1. What brings you comfort?
2. How have you coped in the past through difficult times?
3. Do you have any unfinished business, such as things you want to do? People you need to speak with?
4. Do you want or need to forgive anyone or seek forgiveness from someone?
5. Do you have any particular hopes or fears?
6. What helps you most when you feel afraid?

II. Nurturing Spiritual Vitality (continued)

7. Who or what is most helpful to you when you need hope?
8. What has bothered or upset you most about your present situation?
9. How has this situation affected your feelings about your faith and yourself? How has it affected the practice of your faith?
10. Are there any particular religious practices or rituals that are helpful to you?
11. Does prayer, reading your scriptures or inspirational writings, or music help?
12. What might be of help as you face the reality of death and dying?

III. Means of Spiritual Self-Careⁱⁱ

A. Some Pointers on Personal Reflection or Prayer

Reflection or prayer can be our personal response to the presence of God or a Higher Power. We approach reverently with a listening heart. God speaks first; we acknowledge this, and in gratitude respond in love. The focus is mainly on God and what God does. The following suggestions are offered as ways of supporting and enabling attentiveness to God's word and our unique response.

1. Building reflectiveness or prayerfulness in daily life:
 - a. Pray as you can, and do not try to pray as you can not. Take yourself as you find yourself.
 - b. Begin wherever you find yourself. Make any acts you want to make and feel you ought to make, but do not force yourself into feelings of any kind.
 - c. Use a short passage from your scriptures to get started. Ask God to show you what meaning it has for your life and for others in our society.
 - d. Pray with the intention of putting yourself, your loved ones, your world, and all the things on your mind in the loving hands of God. Then, let them go...
 - e. If you do not know what to do when you have a quarter of an hour alone or in a place of worship, then shut out everything else and just give yourself to God.
 - f. Hand over your distractions and give praise to God.
 - g. If you must put up with the fact that when you do try to pray, you cannot seem to get into it, then let your prayer consist of telling this to God.

III. Means of Spiritual Self-Careⁱⁱⁱ (continued)

- h. You may not be able to get rid of the worries of everyday life or the questionings of the intellect, but you can laugh at them. Laugh at yourself and then think of God. Think of being at the center of a wheel where the noise of the revolving edge does not matter. Center yourself in God.
- i. Stimulate your faith community to gather a small group together to share their faith, prayer, and concerns. When one person has difficulty in prayer, the prayer of others can be a real support and encouragement.
- j. Through reflection, prayer and a good spiritual advisor, seek to find the direction God wants for your life, and how God is moving in your life. A life-review can be most helpful in this.
- k. Seek an adult understanding of your faith through exploring your scriptures, the teachings and celebrations of your tradition, and the ministries in your local faith community.



2. Preparation for Reflection or Prayer:

Plan to spend fifteen minutes or more in reflection or prayer daily or as often as possible. While you pray:

- a. Quiet yourself; be still inside and out. Relax. Breathe in deeply, hold your breath to the count of four, then exhale slowly through your mouth. Repeat several times.
- b. Declare your complete dependency on God/Higher Power.
- c. Ask for the gift you want and need.
- d. Ask yourself what difference does it make for your life, for your family, for society, if you hear the message?
- e. Use a form of prayer such as those described below.
- f. Close your prayer with a time of conversation with God; speak and listen; conclude with a favorite prayer.

B. Various Forms of Personal Reflection and Stress Reduction

1. Breathing Exercise

One of the simplest and most effective means of reducing stress and relaxing the body.

Method

- a. Preparation:
 - Sit up straight, letting your spine – your tree of life – be very straight.
 - Place feet flat on the floor.
 - Roll and relax your shoulders. Shake out your hands.
 - Close your eyes (or lower your gaze if you do not like closing your eyes).

III. Means of Spiritual Self-Care (Forms of Personal Reflection, continued)

b. Breathing Exercise:

- Take a nice long breath: inhale deeply, and as you inhale remember to fill up your abdomen. Imagine that you have a balloon in your abdominal area and as you inhale you are filling the balloon up.
- Now exhale slowly, and as you do this, pull in your stomach and abdomen as you release all the carbon dioxide. Imagining the balloon deflating itself as you exhale.
- Repeat inhaling and exhaling.
- When you exhale more slowly than you inhale, you relax your body even more.
- Inhale to the count of 3 or 4. Exhale to the count of 6 or 8.
- Repeat several times.

2. Meditation

In meditation, one approaches the scripture like a love letter; this approach is especially helpful in praying poetic passages.

Method

- a. Read the passage slowly, aloud or in a whisper, letting the words wash over you, savoring them.
- b. Stay with the words that especially catch your attention; absorb them the way the thirsty earth receives the rain.
- c. Keep repeating a word or phrase, aware of the feelings that are awakened.

3. Contemplation

In contemplation, we enter into a life event or story passage of scripture. We enter into the passage by way of imagination, making use of all our senses. Through contemplation, we are able to recall and be present at the events described there.

Method

- a. Enter the story as if you were there. Watch what happens; listen to what is being said.
- b. Become part of the story; assume the role of one of the persons.
- c. Look at each of the individuals; what does each experience? With whom does each speak?
- d. Enter into dialogue with God:
 - Be there with and for God.
 - Listen to God.
 - Desire to love God more.
 - Let God be for you what God wants to be.
 - Respond to God.

4. Centering Exercise

In this practice, we go beyond thought and image, beyond the senses and the rational mind, to that center of our being where God is doing a wonderful work. It is the point of stillness within us where we most experience being created by a loving God who is breathing us into life.

III. Means of Spiritual Self-Care (Forms of Personal Reflection, continued)

Method

- a. Sit quietly, comfortable and relaxed.
- b. Rest within your longing and desire for God.
- c. Move to the center within your deepest self. This movement can be helped by imagining yourself slowly descending in an elevator, or walking down flights of stairs, or descending a mountain, or going down into the water, as in a deep pool. In the stillness, become aware of the presence of God; peacefully absorb the love offered.

5. **Mantra**

One means of centering prayer is the use of the "mantra" or repeated prayer word. The mantra can be a single word or a phrase. It may be a word from scripture or one that arises spontaneously from your heart. The word or phrase represents for you the presence and fullness of God.

Method

Repeat the word or phrase within yourself in harmony with your breathing. With a phrase, part could be said while inhaling, part while exhaling.

6. **Meditative Reading**

One approach to prayer is a reflective reading of scripture or other spiritual writings, which are always enriching for our spirit. The method described below is especially supportive in times when prayer is difficult or dry.

Method

Read slowly; pause to allow the words and phrases to enter within you. When a thought resonates deeply, stay with it. Allow the fullness of it to penetrate your being. Savor the word, respond spontaneously as in a dialogue.

7. **Journaling**

A form of meditative writing: as we place pen on paper, spirit and body cooperate to reveal our deeper self. There is a difference between journaling and keeping a journal. In journaling, we put aside preconceived ideas and control in order to experience ourselves in a new light as we find fresh images emerging from our unconscious. Meditative writing is like writing a letter to one we love. Memories are recalled, convictions are clarified, feelings well up within us. We may discover that emotions are intensified and prolonged, and this can serve in identifying and healing hidden, suppressed emotions such as anger, fear, resentment. Finally, journaling can give us deeper appreciation for the written word as we encounter it in our scriptures.

Method

There are many variations for our use:

- a. Write a letter addressed to God.
- b. Write a conversation between yourself and a significant person. The dialogue can also be with an event, an experience or a value. For example: death, separation, joy, or wisdom is imaged as having personal attributes and as a person with whom one enters into conversation.

III. Means of Spiritual Self-Care (Forms of Personal Reflection, continued)

- c. Write an answer to a question, such as "What do you want me to do for you?" or "Why are you weeping?"
- d. Allow God or another scripture person to "speak" to us through the pen.

8. Repetition

This is a return to a previous period of prayer for the purpose of allowing the action of God to deepen within our heart. Repetitions are a way of honoring the word of God to us in the earlier prayer time, recalling and pondering a conversation with one we love. It is as if we say, "Tell me that again; what did I hear you saying?"

In this follow-up conversation or repetition, we open ourselves to a healing presence that often transforms whatever sadness or confusion may have been experienced in the first prayer. In repetitions, not only is the consolation (joy, warmth, peace) deepened, but the desolation (pain, sadness, confusion) is frequently brought to a new level of understanding and acceptance within the plan of God for us. We may also choose to repeat a period of prayer when nothing seemed to happen, perhaps due to our own lack of readiness at the time.

Method

- a. Recall your feelings of the first period of prayer.
- b. Use as a point of entry a scene, word, or feeling that was previously most significant.
- c. Allow the Spirit to direct the inner movements of your heart during this time of prayer.



III. Means of Spiritual Self-Care (continued)

C. Material for Reflection (In addition to your own scriptures or tradition):

United Nations Principles for Older Persons

Independence: Older persons should:

- Have access to adequate food, water, shelter, clothing and health care through the provision of income, family and community support and self-help.
- Have the opportunity to work or to have access to other income-generating opportunities.
- Be able to participate in determining when and at what pace withdrawal from the labor force takes place.
- Have access to appropriate educational and training programs.
- Be able to live in environments that are safe and adaptable to personal preferences and changing capacities.
- Be able to reside at home for as long as possible.

Participation: Older persons should:

- Remain integrated in society, participate actively in the formulation and implementation of policies that directly affect their well-being and share their knowledge and skills with younger generations.
- Be able to seek and develop opportunities for service to the community and to serve as volunteers in positions appropriate to their interests and capabilities.
- Be able to form movements or associations of older persons.

Care: Older persons should:

- Benefit from family and community care and protection in accordance with each society's system of cultural values.
- Have access to health care to help them to maintain or regain the optimum level of physical, mental and emotional well-being and to prevent or delay the onset of illness.
- Have access to social and legal services to enhance their autonomy, protection and care.
- Be able to utilize appropriate levels of institutional care providing protection, rehabilitation and social and mental stimulation in a humane and secure environment.
- Be able to enjoy human rights and fundamental freedoms when residing in any shelter, care or treatment facility, including full respect for their dignity, beliefs, needs and privacy and for the right to make decisions about their care and the quality of their lives.

Self-fulfillment: Older persons should:

- Be able to pursue opportunities for the full development of their potential.
- Have access to the educational, cultural, spiritual and recreational resources of society.
- Be able to live in dignity and security and be free of exploitation and physical or mental abuse.
- Be treated fairly regardless of age, gender, racial or ethnic background, disability or other status, and be valued independently of their economic contribution.

III. Means of Spiritual Self-Care (Materials for Reflection, continued)

Spiritual well-being has to do in part with being well, but has more to do with existing well in the midst of whatever life brings. Thus there can be well-being in the midst of suffering.

D. Resources for Spiritual Growth

Mercy Prayer Center

65 Highland Avenue, Rochester 14620
(585) 473-6893
www.mercyprayercenter.org

Notre Dame Retreat House

5151 Foster Road, Canandaigua 14424
(585) 394-5700
www.ndretreat.org

Open Sky Yoga

19 Birch Crescent., Rochester 14607
(mailing address)
(585) 244-0782
www.openskyyoga.com

Note: Other yoga centers listed in yellow pages

Pastoral Counseling and Family Therapy Group

301 Exchange Boulevard., #201
Rochester 14608
(585) 473-2671
www.pcftgroup.com

Rochester Zen Center

7 Arnold Park, Rochester 14607
(585) 473-9180
www.rzc.org

Note: See also Yellow Pages listing for "Holistic Health Services"

Interfaith Organizations

Greater Rochester Community of Churches

2 Riverside Street, Rochester, 14613
(585) 254-2570
www.grcc.org

Note: The core of GRCC's mission is to bring together all faith communities for worship, dialogue, community ministry, advocacy and service.

The Interfaith Alliance of Rochester

PO Box 25245, Rochester 14625
www.tia-roch.org

Note: People of faith working together for justice in public policy and respect for the First Amendment.

Interfaith Forum of Greater Rochester

PO Box 18164, Rochester 14613
(585) 254-2570

Note: Focuses on deepening awareness and appreciation for diverse religious traditions.

NOTES

ⁱ Luskin, F. (2002). *Forgive for Good: A Proven Prescription for Health and Happiness*. New York, NY: HarperCollins Publishers Inc.

ⁱⁱ Materials adapted from Toby Gold, MSED, NCGC, Anne Maloy, RSM, M.S.W., Barbara A. Moore, RSM, D.Min., Rosalie Muschal-Reinhardt, M. Div., Therese Richardson, RSM, B.S., Kathleen Rimlinger, B.A., and Cindy Steltz, B.A., M.P.A.

ⁱⁱⁱ Materials adapted from Toby Gold, MSED, NCGC, Anne Maloy, RSM, M.S.W., Barbara A. Moore, RSM, D.Min., Rosalie Muschal-Reinhardt, M. Div., Therese Richardson, RSM, B.S., Kathleen Rimlinger, B.A., and Cindy Steltz, B.A., M.P.A.

Page Number(s)	Agency
	A
82	A-1 Transportation
136	"After Suicide" Support Group
126	"At the Crossroads: A Guide to Alzheimer's Disease, Dementia, and Driving"
15, 91, 127, 182	AARP - American Association of Retired Persons
126	AARP - Driving Safety Programs
114	AARP - Grandparent Information Center
15	AARP - Reverse Mortgage Education Program
211	Aaron Manor
83, 84	Able Medical Transportation Inc.
187	Abraham Lincoln Apartments
74, 83, 85, 125	ABVI [Association for the Blind and Visually Impaired]
179	Access Lifts and Ramps, Inc.
179	Accessibility Solutions, Inc.
147	Action Towards Employment
189	Ada Ridge Court Apartments
89	Administration on Aging
236	Advent House
85	The Advocacy Center
49, 60, 69, 211	Affordable HealthLine
89	Agency for Healthcare Research and Quality [AHRQ]
123	Agency for Healthcare Research and Quality - Healthy Aging
189	Ahepa 67 Apartments
85	AIDS Care
85	Al-Anon/Ala-Teen
176	Alarm Systems
85, 135	Alcoholics Anonymous
85	Alcoholism and Substance Abuse Services - Finger Lakes Regional Office
70	Algase, Leslie F.
176	AliMed
176	All-Metro Lifeline
168, 169, 172	All Metro Health Care
118	Alternatives for Battered Women
194, 197	Alterra Clare Bridge of Perinton
152	Alvin C. Foster Residential Health Facility
4, 91, 130, 182	Alzheimer's Association
3, 74, 85, 112	Alzheimer's Association - Rochester Chapter
112, 129	Alzheimer's Disease Care, Research, and Education Program [AD-CARE]
90	Alzheimer's Disease Education and Referral [ADEAR]
85, 173	Alzheimer's Disease Outreach Program
176, 182	The Alzheimer's Store
91	American Association of Homes and Services for the Aging
85	American Cancer Society - Finger Lakes Region
85	American Diabetes Association - Rochester Regional Chapter
136	American Foundation for Suicide Prevention
174	American Health Care Apparel
206	American Health Care Association
85	American Heart (and Stroke) Association
178	American Home Care
168, 178	American HomePatient/PrimaCare

Page Number(s)	Agency
85	American Liver Foundation of NYS
85	American Lung Association - Finger Lakes Region
90	American Parkinson Disease Association [APDA]
182	American Red Cross - National
182	American Red Cross - Rochester Chapter
91	American Society on Aging
179	AmRamp
189	Andrews Terrace Apartments
78	Angel Food Ministries
168	Angels in Your Home (Hilton East)
18	Annual Credit Report Request Service
69, 72	Anthony L. Jordan Health Center
75	Antioch Baptist Church
189	Antoinette Brown Blackwell Estates
133	Anxiety Disorders Association of America
83	Apple Transportation
178	Apria Healthcare
85	The Arc of Monroe County
85	Arthritis Foundation - Rochester Office
180	Assisted Home Performance with Energy Star
155	Assisted Living Center at Valley Manor
169	Assisting Angels Senior Care
75, 83, 85, 124	Association for the Blind and Visually Impaired [ABVI]
189	Atlantic Townhouses
194	Atria, Greece
194	Atria, Penfield
189	Atwood Park Apartments
236	Aurora House of Western Monroe County
177	Automated Medication Systems
	B
69	Baden Street Settlement
75	Baden Street Settlement Food Cupboard
211	Baird Nursing Home
81	Bally Total Fitness - Henrietta
81	Bally Total Fitness - Greece
179	Barrier-Free Living
70	Bayer, William H.
144	Behavioral Health Network
14, 60	Benefitcheckup.org
236	Benincasa
189	Bennington Hills Apartments
75	Bethany House
75	Bethesda Church of God in Christ
17	Better Business Bureau/Fair Business Council
19	Bill Paying Services
179	Bishop Sheen Ecumenical Housing Foundation
75	Blessed Sacrament
211	Blossom Health Care Center
211	Blossom North LLC
211	Blossom South LLC

Page Number(s)	Agency
150	Brain Injury Rehabilitation Program at St. Mary's
70	Brandon, Robert
151, 195	Brentland Woods
211	Brightonian Nursing Home
75	Brockport Food Cupboard
114	The Brookdale Foundation Group
72	Brown Square
189	Brown's Memorial Manor
174	Buck and Buck
	C
76	Caledonia Parish Pantry
76	Calvary St. Andrew's Food Cupboard
2, 112	Caregiver Support Services
168, 169, 203	CareGivers
179	The Caregivers Marketplace [TCM]
80, 198	Caring House at Grand Vie
19, 66, 164, 169	Catholic Family Center
66, 74	Catholic Family Center - Aging and Adult Services
164, 167, 169	Catholic Family Center - EISEP
76	Catholic Family Center - Food Cupboard
180	Catholic Family Center - HomeWorks
74	Catholic Family Center - Older Adult Resource Center
83, 169	Catholic Family Center - STAR
189	Cedarwood Towers
112	The Center for Compassion and Healing at Lifetime Care
85	Center for Disability Rights
151	The Center for Rehabilitation
89	Centers for Disease Control and Prevention
143	Centers for Medicare and Medicaid Services
74	Centro de Oro Senior Center
154, 187	Chapel Oaks
76	Charles Settlement House
189	Charlotte Harbortown
65	Chemung County Office for the Aging
154, 197, 198	Cherry Ridge
114	Child Welfare Information Gateway
114	Child Welfare League of America
91	Children of Aging Parents
147	Children's Clothes Closet
114	Children's Defense Fund
74	Chili Senior Center
76	Church of Love Food Pantry
83	City East Senior Transportation Ministry
179	City of Rochester - Business and Housing Development Bureau
74	City of Rochester - Referral Sources for Counseling
194	Clancey Residence at The Linden House
86	CLIC-on-Health Program
69	Clinton Family Health Center
71	Clinton Pharmacy
153	Cloverwood

Page Number(s)	Agency
189	Cobbs Hill Village
187	College Greene Senior Apartments
169, 177	Comfort Keepers - Eastside
169, 177	Comfort Keepers - Westside
76	Community Place of Greater Rochester - Food Cupboard
74	Community Place of Greater Rochester - Senior Center
83, 168, 169	Companion Care of Rochester
230	Compassion and Support at the End of Life
171	Consumer Directed Personal Assistance Program [CDPAP]
86	Continuing Developmental Services [CDS]
146, 187	The Cottages at the Highlands at Pittsford
74	Counseling - Referral Sources
86	CP Rochester [Cerebral Palsy]
18	Credit Reports
189	Creek House Commons
211	Crest Manor
194, 197	Crimson Ridge Gardens
194	Crimson Ridge Meadows
189	The Crosman
70	Cuyler, Gina
D	
189, 195	Danforth Towers, East and West
78, 79, 80	Day Programs
79, 153	DayTimers
152	Deland Acres Independent Living Community
169	Deliver-Ease
144	DeMay Living Center
130	Dementia Advocacy and Support Network
72	Dental Health
132	Depression and Bipolar Support Alliance
76	Dimitri House
222	Discharge Planning
231	Do Not Resuscitate Order
83	DOVE
175	Doyle Medical Alarm
230	Doyourproxy.org
127	DriveOn
127	Driver Evaluation and Training Program at the Rochester Rehabilitation Center
127	"Driving Decisions" Workbook
70	Dumitrescu, Emily
75, 189	Dunn Towers Apartments
190	Dunn Towers Apartments II
177, 178	Durable Medical Equipment and Supplies
E	
76	East Rochester Food Shelf
72	Eastman Dental Center
72	Eastman Dental Center - Sibley Tower Building
145	Eastman Institute for Oral Health
227	Eastside Medical Urgent Care, LLC
190	Edison Senior Apartments

Page Number(s)	Agency
148, 211	Edna Tina Wilson Living Center
145	Edward G. Miner Medical Library
190	Ehr-Dale Heights
163, 167	EISEP
118	Elder Abuse Prevention Program through Lifespan
19	Elder Law
83	Elderberry Express
90	Eldercare Locator
169	Eldergard Services
20, 66, 165, 169	Eldersource
66, 166	Eldersource - NORCs
195, 196	Elderwood Assisted Living at Penfield
235	Elizabeth G. and Jennifer J. Hildebrandt Hospice Care Center
152	ElizAI Court Apartments
190	Elliot's Landing
190	Elmdorf Apartments
183	Emeritus Senior Living Adult Care Communities
20	Empire Justice Center
174	Employee Assistance Program
180	EmPower New York
49, 71, 88	EPIC - New York State's Senior Prescription Plan
86	Epilepsy Foundation of Rochester
151, 211	Episcopal Church Home
151	Episcopal SeniorLife Communities
18	Equifax Security Freeze
237	Ethical Will
181	Everything has a Place, LLC
227	ExcelCare
39	Excellus BlueCross BlueShield Medicare Division
18	Experian Security Freeze
227	Extended Medical Services
	F
152, 190	Fairport Apartments
152, 196, 211	Fairport Baptist Homes
76	Fairport/Perinton Food Cupboard
91	Family Caregiver Alliance
223	"A Family Caregiver's Guide to Hospital Discharge Planning"
49	Family Health Plus Program
237	Family Love Letter: Information in a Time of Confusion
76	Family Restoration Center
71	Faris Pharmacy
190	Ferncliff Gardens Apartments
190	Fernwood Park Apartments
86	Fibromyalgia Association of Rochester NY
187	Fielding Garden Apartments
12	Financial Planning
140	Find A Doctor
80	Finer Day at Atria of Greece
86	Finger Lakes Developmental Disabilities Services Office - FLDDSO
89, 238	Finger Lakes Donor Recovery Network

Page Number(s)	Agency
179	First Choice Home Health Care
76, 83	FISH [Friends in Service Here]
81	Fitness Opportunities
237	Five Wishes Before You Die
178	Fonte Surgical Supply, Inc.
75	Food Cupboards
78	Foodlink
153, 211	The Friendly Home
153	Friendly Senior Services
75	Friendly's Breakfast Club
75	Friendly's Breakfast Club - Greece
180	Functional Interiors
238	Funeral Consumer's Alliance of Greater Rochester
102	Future Care Planning Services
	G
187	The Gables at Brighton
45	General US Government benefits
80	Generations Elder Care
114	Generations United
144	Genesee Health Service
147	Genesee Specialty Care
83, 84	Genesee Transportation, Inc.
190	Genesee West Apartments
187	Georgetown Park Apartments
135	Geriatric Additions Program [GAP] through Lifespan
67	Geriatric Assessment Clinic
146	Geriatric Associates Practice at Laurelwood
68, 146	Geriatric Consultative Services
69, 70	Geriatricians
68, 146	Geriatrics and Medicine Associates at Highland Hospital
91	The Gerontological Society of America
86	Gilda's Club
153, 195	Glenmere at Cloverwood
190	Glenwood Gardens Apartments
190	Glide Court
70	Golden, Reynold
83	Good Samaritan Transportation
14, 60	Govbenefits.gov
76	Grace Covenant Church
181	Grandma's Helpers, LLC
113	Grandparents for Grandparents Support Group
80, 199	Caring House at Grand Vie
197	GrandVie Senior Living Community
194, 197	GrandVille Senior Living Community
252	Greater Rochester Community of Churches
227	Greater Rochester Orthopedics
74	Greece Community and Senior Center
76	Greece Ecumenical Food Shelf
76	Greece Food Shelf
227	Greece Health Center

Page Number(s)	Agency
	H
146	Hahnemann Square Apartments
212	Hamilton Manor Nursing Home
147, 195	The Hamlet at Park Ridge
76	Hamlin Community Bread and Thread
170	Happier at Home
237	Hard Choices for Loving People
147	Health Care for the Homeless
230	Health Care Proxy
90	Healthcare 411
14, 60	Healthcare.gov
90	Healthfinder.gov
59, 60, 88, 204, 211	Health Insurance Information, Counseling, and Assistance Program [HIICAP]
147	Healthy Start
125	Hearing Loss Association of America, Rochester Chapter
194, 198	Heather Heights of Pittsford
180	Heating and Energy
91	H.E.L.P. for Seniors
74	Henrietta Senior Center
70	Hepperd, Brian L.
154	The Heritage
86	Heritage Christian Services
187	Hickory Hollow Town Homes
73	Highland Dental Care
146, 225	Highland Hospital
226	Highland Hospital - Urgent Care Service
71	Highland South Wedge Pharmacy
146, 212	The Highlands at Brighton
146, 187	The Highlands at Pittsford
146, 212	The Highlands Living Center
60	HIICAP Toll Free Hotline
144, 212	Hill Haven Nursing Home
194, 196	Hilton East Assisted Living Community
71	Hilton Family Pharmacy
190	Hilton Manor
147, 190	Hilton Park
74	Hilton-Parma Senior Center
190	Hobie Creek Apartments
80, 154	Home & Heart at the Cathedral
80, 154	Home & Heart of Penfield
167, 203, 224	Home Care of Rochester
79, 154	Home Connection at St. Ann's Community
175	Home Delivered Meals
181	Home Energy Assistance Program
175	Home Helpers
170	Home Instead Senior Care
179	Home Maintenance and Accessibility
180	Home-Safe-Home Program through Lifespan
15	HomeChex
170	Homestay Companion Care

Page Number(s)	Agency
180	HomeWorks
232	Hospice Care
223	Hospital Patients' Rights
217	Hospital Care
76	House of Mercy
15	The Housing Council
68	How's Your Health?
191	Hudson Housing - Rochester General
190, 195	Hudson-Ridge Towers
78	Humane Society at Lollypop Farm
212	The Hurlbut
	I
70	Iannucci, Brenda J.
76, 86	Ibero-American Action League
176	In-Home Monitoring Services
79, 144, 173	Independent Living for Seniors - Hudson Center
172	Innovative Care, LLC
48	Inspector General's Hotline for Medicare Fraud
252	Interfaith Alliance of Rochester
252	Interfaith Forum of Greater Rochester
168, 203	Interim Healthcare
140	Internal Medicine Group
90	Internal Revenue Service
89	International Hearing Society - Hearing Aid Helpline
4	International Society to Advance Alzheimer Research and Treatment [ISTAART]
223	IPRO
76	Irondequoit Community Cupboard
83	Irondequoit FaithLink
166	Irondequoit NORC
74	Irondequoit Senior Center
155	Irondequoit Senior Ministries
236	Isaiah House
74	Italian American Community Center
	J
190	Jack Kenny Memorial Apartments
187, 190	Jefferson Park Apartments
81, 123	Jewish Community Center of Greater Rochester
20, 74, 76, 132, 165	Jewish Family Service
166	Jewish Family Service - Home Base NORC
83	Jewish Family Service - JFS Express
153, 212	The Jewish Home of Rochester
153, 175	Jewish Senior Life
183	Jewish Senior Life - Physician House Calls Program
219	Joint Commission on Accreditation of Healthcare Organizations
227	Joint Replacement Center at Unity Hospital
190, 195, 196	Jonathan Child Apartments
227	Joseph C. Wilson Center
236	Journey Home
	K
70	Karlic, Alexander

Page Number(s)	Agency
190	Kennedy Tower
170	Kindred Senior Care
113	Kinship Care Resource Network
113	Kinship Navigator
156, 212	Kirkhaven Nursing Home
175	Kosher2Go Meal Service
	L
190	Lake Tower
143, 212	Lakeside Beikirch Care Center
69	Lakeside Child and Family Center
123, 143	Lakeside Family Wellness Center
141, 143	Lakeside Health System
140	Lakeside Health System - Physician Referral Line
144, 226	Lakeside Memorial Hospital
144	Lakeside Physical Therapy & Comprehensive Rehabilitation Services
183, 187, 195, 198	Emeritus at Landing at Brockport
237	Last Acts
212	Latta Road Nursing Home
212	Latta Road Nursing Home A
146, 195	Laurelwood at the Highlands
20	LawHelp.org
86	LDA Life and Learning Services
187	Legacy at Clover Blossom
188	Legacy at Cranberry Landing
188	Legacy at Erie Station
188	Legacy at Park Crescent
188	Legacy at Parklands
188	Legacy at Willow Pond
20	Legal Aid Society
21	Legal and Financial Directives
191	Lena Gantt Estates
191	Lexington Court Apartments
67, 135, 136	Life Line and Community Mobile Crisis Team
76	Life Solutions of Hamlin
53, 66, 112	Lifespan of Greater Rochester, Inc.
80	Lifespan - Adult Day Services
74	Lifespan - Downtown Senior Center
118	Lifespan - Elder Abuse Prevention Program
19	Lifespan - Financial Management
135	Lifespan - Geriatric Addictions Program [GAP]
83	Lifespan - Give a Lift
60, 204, 211	Lifespan - HIIICAP
180	Lifespan - Home-Safe-Home Program
67, 125	Lifespan - Interpreting Services
207	Lifespan - Ombudsman Program
170	Lifespan - Partners in Caring
110	Lifespan - Peace of Mind Planning
175	Lifespan - Safety Alert For Emergency Response
17	Lifespan - Scam Prevention/Consumer Fraud
86	Lifetime Assistance, Inc.

Page Number(s)	Agency
167, 177, 203, 224, 235, 236	Lifetime Care
134	Lifetime Care - Bereavement Groups
226	Lifetime Health Medical Group
79, 152	LifeTimes Adult Day Health Care at Plymouth Gardens
82	Lift Line
76	Light House Assembly of God
71	Lilly Medicare Answers
194	Linden House Senior Care Home
153, 188	Linden Knoll
176	Link to Life
69	LinkLine
145	Lipson Cancer Center
147	The Living Center at The Highlands at Pittsford
230	Living Will
65	Livingston County Office for the Aging
178	Loan Closets
188	Long Pond Garden Senior Apartments
50, 163	Long-Term Care Insurance
170	Long-Term Home Health Care Program
175	Lorraine's Food Factory
99	"Lotsa Helping Hands"
86	Lupus Foundation of America - Genesee Valley Chapter
	M
188	Madison Place Community, LLC
191	Manhattan Square Apartments
76	Maplewood-Edgerton Emergency Cupboard [Meek]
188	Maplewood Estates
212	Maplewood Nursing Home
42	Maprx.info
74	MARC of Baden Street
227	Marion B. Folsom Health Center
198	Mary Regina Special Care
67	MAS Translation
178	Masonic Service Bureau
168, 172	Maxim Healthcare Services
91	Mayo Clinic Website
70	McCormick, Kevin
67	ME Services Communication
147	Meadowbrook at The Highlands
79, 146	Meadowbrook Day Program at The Highlands
175	Meals on Wheels [VNS]
83, 84	Medicab
163, 210, 223	Medicaid
58	Medicaid - Applications
57	Medicaid Fraud Control Office of the Special Prosecutor
78	Medical Model Day Health Services
82	Medical Motor Service
78	Medical Nutrition Therapy - Jewish Senior Life
231	Medical Orders for Life-Sustaining Treatment [MOLST]
172	Medical Solutions, Inc.

Page Number(s)	Agency
	82 Medical Transportation for Medicaid Recipients
37, 42, 47, 90, 163, 206, 209, 223	Medicare
	42 Medicareinteractive.org
	42 Mymedicarematters.org
	175 Medi-Mate
	177 Medication Systems - Automated
	71 Medicine Shoppe
	90 Medline Plus
	177 MedReady
	76 Meek [Maplewood-Edgerton Emergency Cupboard]
	70 Mehta, Jagat S.
	76 Memorial AME Zion Church
68, 130	Memory Care Program
197, 198	Memory Care Residences at Cottage Grove
68, 130	Memory Disorders Clinic
	86 Mended Hearts - Greater Rochester Chapter
	72 Mendon Pharmacy
74, 112, 133, 136	Mental Health Association
	69 Mercy Outreach Center
	252 Mercy Prayer Center
	72 Metro Health East Pharmacy
	91 Michael J. Fox Foundation [MJFF]
	191 Midtown Manor
	188 Mill Landing
	72 Miller's Pharmacy
	70 Mittereder, Richard
	231 MOLST [Medical Orders for Life-Sustaining Treatment]
	73 Monroe Community College Dental Hygiene Clinic
	212 Monroe Community Hospital
	20 Monroe County Bar Association
	73 Monroe County Dental Society
37, 58	Monroe County Department of Human Services
	136 Monroe County Department of Mental Health
	208 Monroe County Department of Public Health
	20 Monroe County Legal Assistance Corp.
20, 65, 75	Monroe County Office for the Aging
48, 71	Monroe County Prescription Discount Plan
	150 Monroe County Veterans' Service Agency
	83 Monroe Medi-Trans
	178 Monroe Oxygen and Medical Equipment
	72 Monroe Pharmacy LLC
178, 180	Monroe Wheelchair
148, 191	Moore Park Apartments
	181 Moving
	181 Moving Memories
	180 Mr. Grab Bar, LLC
79, 148	MS Achievement Center at Unity
	236 Mt. Carmel House
	77 Mt. Vernon Church
	86 Multiple Sclerosis Center

Page Number(s)	Agency
87	Muscular Dystrophy Association
39	MVP
	N
87	Narcotics Anonymous - Rochester
20	National Academy of Elder Law Attorneys, Inc.
90	National Adult Day Services Association
86	National Alliance for the Mentally Ill - Rochester Chapter
132, 137	National Alliance on Mental Illness
87, 136	National Alliance on Mental Illness - Rochester Chapter
90	National Association for Home Care and Hospice
53	National Association of Insurance Commissioners
90, 165	National Association of Professional Geriatric Care Managers
90, 119	National Center on Elder Abuse
114	National Committee of Grandparents for Children's Rights
90	National Council on Aging
87, 135	National Council on Alcoholism and Drug Dependence - Rochester Area
137	National Depression Screening Day
17	National Do Not Call Registry
90	National Family Caregivers Association
90	National Health Information Center
90, 134	National Hospice and Palliative Care Organization
90	National Institute of Health - Senior Health
90, 137	National Institute of Mental Health
87	National Kidney Foundation of Upstate NY
87	National Multiple Sclerosis Society - Upstate NY Chapter
87	National Parkinson Foundation Center of Excellence
90	National Parkinson Foundation, Inc.
15	National Reverse Mortgage Lenders' Association
127	National Safety Council Defensive Driving Course
91, 208	National Senior Citizen's Law Center
91	National Stroke Association
136	National Suicide Hotline
136	National Suicide Prevention Lifeline
77	Neighbor to Neighbor
77	New Bethel CME Church
77	New Life Presbyterian Church
145	Newark Wayne Community Hospital
152, 195	The Northfield
74	Northwest Rochester Senior Center
191	Norton Village
252	Notre Dame Retreat House
172	NurseCore of Rochester
172	Nursing Home Transition and Diversion Medicaid Waiver
74	Nutrition Sites - Senior
66	NY Connects - Monroe County
89	NY Online Access to Health
49	NY Prescription Saver Card
89	NY Statewide Senior Action Council, Inc.
17, 88	NYS Attorney General
17, 88	NYS Attorney General - Rochester

Page Number(s)	Agency
143, 208	NYS Centralized Complaint Nursing Home Intake Program
124	NYS Commission for the Blind and Visually Impaired
88	NYS Commission on Quality of Care and Advocacy for Persons with Disabilities
17, 88	NYS Consumer Protection Board
88	NYS Crime Victims Board
49, 88, 144, 219, 230	NYS Department of Health
88, 143	NYS Department of Health - Adult Home Complaints
88, 143	NYS Department of Health - Home Health Care Agency Complaints
88, 143	NYS Department of Health - Hospital Complaints
88, 143, 208	NYS Department of Health - Nursing Home Complaints
71, 89	NYS Department of Health - Prescription Drug Prices
88	NYS Division of Human Rights
88, 150	NYS Division of Veteran Affairs
88	NYS Domestic Abuse Violence Hotline
88	NYS Guide to Senior Housing
89, 203	NYS Health Facilities Association, Inc.
89	NYS Insurance Department
89	NYS Office for the Aging
89	NYS Office of Mental Health
53	NYS Partnership for Long-Term Care
89	NYS Physician Profile Website
49	NYS Prescription Saver Card
89, 181	NYS Public Service Commission
	O
73	Oak Orchard Community Health Center
81	OASIS
60	Oasis Volunteers Medicare Counseling Program
75	Ogden Senior Center
91	Older Women's League [OWL]
208	Ombudsman Program through Lifespan
65	Ontario County Office for the Aging
252	Open Sky Yoga
239	Organ and Tissue Donation
182	Organized Solutions, LLC
227	Orthopedic Services
77	Our Lady of Perpetual Help
	P
233	Palliative Care
155, 235	Palliative Center for Caring
188	The Park at Hickory Commons Apartment Homes
178	Park Ridge Apothecary
148	Park Ridge at Home
148, 191	Park Ridge Commons
148, 212	Park Ridge Living Center
91	Parkinson's Action Network [PAN]
91	Parkinson's Disease Foundation [PDF]
87	Parkinson's Support Group of Upstate NY, Inc.
191	Parliament Arms Apartments
142	Partnering with your Doctor - A Guide
71	Partnership for Prescription Assistance

Page Number(s)	Agency
66	Passport Senior Services
252	Pastoral Counseling and Family Group Therapy
74	PATHS Program
180	PathStone
143	Patient's Rights Hotline
77	Penfield Ecumenical Food Shelf
212	Penfield Place
91	People Living with Parkinson's
77	Perinton Food Shelf
183, 194	Emeritus at Perinton Park Manor
175	Personal Emergency Response Systems
176	Personal Safety Corporation
78	Pet Assistance Program
71	Pharmacies that Deliver
176	Philips Lifeline Systems
183	Physician House Calls
140	Physician Referral Lines
20	The Piede Law Firm
188	Pinehurst Senior Living
191	Pinnacle Place
77	Pittsford Food Cupboard
75	Pittsford Senior Center
81	Planet Fitness - Gates
81	Planet Fitness - Greece
81	Planet Fitness - Henrietta
81	Planet Fitness - Irondequoit
72	Pleasant Street Apothecary
73	Pluta Dental Service at Rochester General Hospital
191	Plymouth Gardens
70	Ponnuri, Jyothsna
70	Postigo, Luis G.
70	Potter, Douglas H.
176	Powderhorn Industries, Inc.
87	PRALID, Inc.
71	Prescription Assistance
170	Pride in Caring
45, 173	Programs of All-Inclusive Care for the Elderly [PACE]
89	Promoting Respect, Integrity, and Dignity in Elders
67, 118	Protective Services for Adults
67, 118	Protective Services for Adults - Afterhours/Emergency
150	Psychiatric Inpatient Unity at St. Mary's
181	Public Utility Law Project of New York, Inc. [PULP]
	Q
73	Q Dental Group PC - Gates
73	Q Dental Group PC - Greece
73	Q Dental Group PC - Irondequoit
73	Q Dental Group PC - Penfield
191	Quinby Park Apartments
	R
72	R Drugs Etc.

Page Number(s)	Agency
197, 198	Rainier Grove at Cherry Ridge
191	Ramona Park Apartments
181	Red Cross/RG&E Heating Fund
191	Red Maple Apartments
77	Reformation Lutheran Church
178	Regional Center for Independent Living
82	Regional Transit Services Buses
148, 191	Resch Commons
174	Resident Shoppers Service
84	Respite Care - Out of Home
15	Reversemortgage.org
176	RF Technologies
77	RHAFT
151, 188	River Edge Manor
187	Rivers Run
189	Riverview Manor
191	RL Edwards Manor
87, 203	Rochester Area Association of Homes & Services for the Aging
81	Rochester Athletic Club - Brighton/Henrietta
81	Rochester Athletic Club - Greece
81	Rochester Athletic Club - Greece
81	Rochester Athletic Club - Perinton
81	Rochester Athletic Club - Pittsford
82	Rochester City Clerk - Handicapped Parking Permits
77	Rochester Family Mission
87, 238	Rochester/Finger Lakes Eye & Tissue Bank
144, 225	Rochester General Health System
145, 226	Rochester General Hospital
226	Rochester General Hospital Fast Track
191	Rochester General - Hudson Housing
87, 125	Rochester Hearing and Speech Center
87, 125	Rochester Hearing and Speech Center - Greece
87, 125	Rochester Hearing and Speech Center - Mobile Services Division
87, 125	Rochester Hearing and Speech Center - Webster
145	Rochester Heart Institute
166	Rochester Highlands
83, 84	Rochester Medical Transportation, Inc.
132, 136	Rochester Mental Health Center
178	Rochester Oxygen
194, 198, 199	Rochester Presbyterian Home
88, 136	Rochester Rehabilitation Center
150	Rochester Vet Center
252	Rochester Zen Center
152, 192	Rose Hollow Apartments
152, 193	Roselawn Shared Living Residences
192	Royal Gardens Apartments
168	Rural/Metro Inc.
71	Rx Outreach Program
71	RxAssist Patient Assistance Program Center

Page Number(s)	Agency
S	
176	Safe Alert
182	Safe Assured ID
119	Safe Journey
180	Safety and Access Co.
195	Sage Harbor at Baywinde
198	Sage Harbor Memory Care
77	Salvation Army
88	Samaritan Women, Inc.
179	Sammons Preston Rolyan Online Catalogue
72	Saratoga Pharmacy
191	Savannah Apartments
65	Schuyler County Office for the Aging
76	SEA-FISH
163	“Second Opinion: Caregiver’s Diary and Resource Guide”
77	SEM/SeaFish - Food Cupboard
83	SEM/SeaFish - Transportation
151, 187, 195	Seabury Woods
151, 198	Seabury Woods Memory Care
125	Self-Help for Hard of Hearing People [SHHH]
65	Seneca County Office for the Aging
192	Seneca Towers
74	Senior Centers
91	Senior Citizens' Resources
183	Senior Medical Care, LLC
74	Senior Nutrition Sites
152	Senior Options for Independence [SOFI]
182	Senior Safety Net
155	Seniorsfirst
156	Seniorsfirst 1570 Gallery
80, 156	Seniorsfirst Adult Day Program
156	Seniorsfirst At Home Services
156	Seniorsfirst Health and Fitness Programs
168	Serenity Homecare, Inc.
84, 170, 174	Services for Seniors, LLC
236	Shepherd Home
194, 196	The Shire at Culverton
212	Shore Winds Nursing Home
168	Sibley Nursing Service
88	Sickle Cell Disease Association
67	Sign Language Connection
174	Silverts
83, 170	Sisters Care
79, 155	Skalny Day Break at St. John's Home
113	Skip Generations Grandparents Who Are Raising Grandchildren Group
79	Social Model Day Health Services
91	Social Security Administration
83, 153	SOFI Elderbus Transportation
192	South Village Apartments
69	Southeast Ecumenical Ministry [SEM]

Page Number(s)	Agency
191	Southeast Towers II
178	Southside Medical Supply
192	Southview Towers
75	Southwest Senior Center at Montgomery Neighborhood Center
77	Spencerport Ecumenical Food Shelf
148	The Spine Center at Unity Hospital
192	Springside Meadows
77	St. Andrew's
192	St. Andrew's Apartments
154	St. Ann's Community
155, 212	St. Ann's Home
192	St. Bernard's Park
155, 212	St. John's Home
155, 187	St. John's Meadows
155	St. John's Senior Communities
69	St. Joseph's Neighborhood Center
192	St. Jude's Apartments
192	St. Jude's II Apartments
77	St. Mark's and St. John's Episcopal Church
188, 193	St. Michael's Senior Apartments
188	St. Michael's Senior Apartments II
77	St. Theodore's Social Ministries
145	Stabins Wellness Information Center
83	STAR - Catholic Family Center
53	State of New York Insurance Department
163	"Steps for Success: Decisions about Help at Home for Alzheimer's Caregivers"
65	Steuben County Office for the Aging
192	Stonewood Village Apartments
132, 136	Strong Behavioral Health - Older Adults Service
145, 225	Strong Health System
141, 147, 226	Strong Memorial Hospital
73	Strong Memorial Hospital Dental Clinic
140	Strong Memorial Hospital - Physician Referral Line
226	Strong Memorial Hospital - Urgent Care Service
181	Structured Style
153, 188	The Summit at Brighton
187	Sunflower Landing
236	Sunset House
91	Supportive Care Coalition
179	SureHands Lift and Care Systems
136	Survivors of Suicide
75	Sweden Senior Center
77	SWEM [Southwest Ecumenical Ministry]
	T
142	Talking with your Doctor - A Guide
177	Telehealth Monitoring System
83, 170	Tender Loving Family Care, Inc.
70	Tetreault, Dolores
77	Third Presbyterian Church
192	Tokiakton Manor

Page Number(s)	Agency
	170 Touching Hearts at Home
151, 168, 170	Traditions in Caring
	82 TRansportation Access [TRAC]
	82 Transportation Services
	18 TransUnion Fraud Assistance Department
	45 TRICARE for Life [TFL]
	U
	192 Union Park
	225 Unity Acute Rehabilitation and Brain Injury Program
80, 149	Unity Adult Day Services at Cornerstone
79, 149	Unity Adult Day Services at Park Ridge
79, 149	Unity Adult Day Services at Parkway
80, 149	Unity Adult Day Services at St. Bernard's
80, 149	Unity Adult Day Services at St. Mary's
149, 169, 203	Unity at Home
132, 137	Unity Behavioral Health - Pinewild Drive
132, 137	Unity Behavioral Health - West Main Street
132, 137	Unity Behavioral Health - Lake Avenue
149, 165, 168, 170, 175, 180	Unity Care at Home
	150 Unity Center for Aging
	135 Unity Chemical Dependency - Inpatient Unit
	135 Unity Chemical Dependency - Older Adult Program
	130 Unity Dementia Care Program
	73 Unity Dental Group - Greece
	73 Unity Dental Group - Penfield
	73 Unity Dental Group - Rochester
140, 149	Unity Geriatric Associates
147, 173, 174	Unity Health System
	140 Unity Health System - OnCall
	226 Unity Health System - Walk-In Care Center
149, 176	Unity HealthCall - 24 Hour Emergency Response System
	149 Unity Home Care Services for the Deaf
150, 226	Unity Hospital
	226 Unity Hospital Quick Care Service
148, 212	Unity Living Center
	177 Unity MedSmart
	171 Unity Park Ridge at Home
	180 Unity Safe at Home
	150 Unity St. Mary's Campus
150, 226	Unity Walk-In Urgent Care Center
	227 University Orthopedic Associates
	140 University of Rochester Medical Center
	192 University Tower
168, 203	Unlimited Care, Inc.
	178 Upstate Home Care
	226 Urgent Care Facilities
	88 URMovement & Inherited Neurological Disorders Unit
	91 US Census Bureau
	91 US Department of Health and Human Services
45, 91	US Department of Veterans Affairs

Page Number(s)	Agency
174	User-Friendly Clothing
	V
151	VA Canandaigua Medical Center
151	VA Healthcare Network Upstate NY
155, 156, 188	Valley Manor
70	Ver, Eugene L.
45, 135, 150, 163	Veterans Administration
132	ViaHealth Behavioral Health Network
140	ViaHealth System
180	Victory Lifts, Inc.
150, 188	The Village at Unity
187	The Villas
147, 167, 171, 203, 224, 235, 236	Visiting Nurse Service
147, 168, 170, 176	Visiting Nurse Signature Care
70	Vivencio, Rocco M.
20	Volunteer Legal Services Project
77	Volunteers of America
	W
72	W A B Pharmacy
72	Warrens Pharmacy, Inc.
65	Wayne County Office for the Aging
203	We Care Home Nursing Service
181	Weatherization Referral and Packaging [WRAP]
236	Webster Comfort Care Home
77	Webster Community Chest
75	Webster Senior Center
213	Wedgewood Nursing Home
75	Wegman's Chili-Paul Market Café
154	Weinberg-Manson Rehabilitation Center
91	Well Spouse Association
192	Wellington Woods
213	Wesley Gardens
183, 194	Emeritus at West Side Rochester
192	West Town Village
192	Westfall Heights
213	Westgate Nursing Home
168	Westside Home Care Agency
178	Westside Medical Supply
194	Westwood Commons Adult Home
74	Wheatland Senior Center
127	"When You Are Concerned: A Guide for Families Concerned about the Safety of an Older Driver"
72	Wilson Center Pharmacy
154, 195, 198	Wolk Manor
155	Wolk Rehabilitation Center
69	Women's Health Partnership
179	Woodbury Products, Inc.
194, 196	Woodcrest Commons
150, 188	Woodland Village at Park Ridge
213	Woodside Manor
69, 73	Woodward Health Center

Page Number(s)	Agency
81	World Gym - Brighton
81	World Gym - Webster
124	WXXI Reachout Radio
	Y
65	Yates County Office for the Aging
81	YMCA of Greater Rochester
81	YMCA - Bayview Family
81	YMCA - Chester F. Carlson Metro Center
81	YMCA - Eastside Family
82	YMCA - Maplewood Family
82	YMCA - Monroe Family
82	YMCA - Northwest Family
82	YMCA - Southeast Family
82	YMCA - Southwest Family
82	YMCA - Westside Family
	Z
70	Zatreanu, Daniel