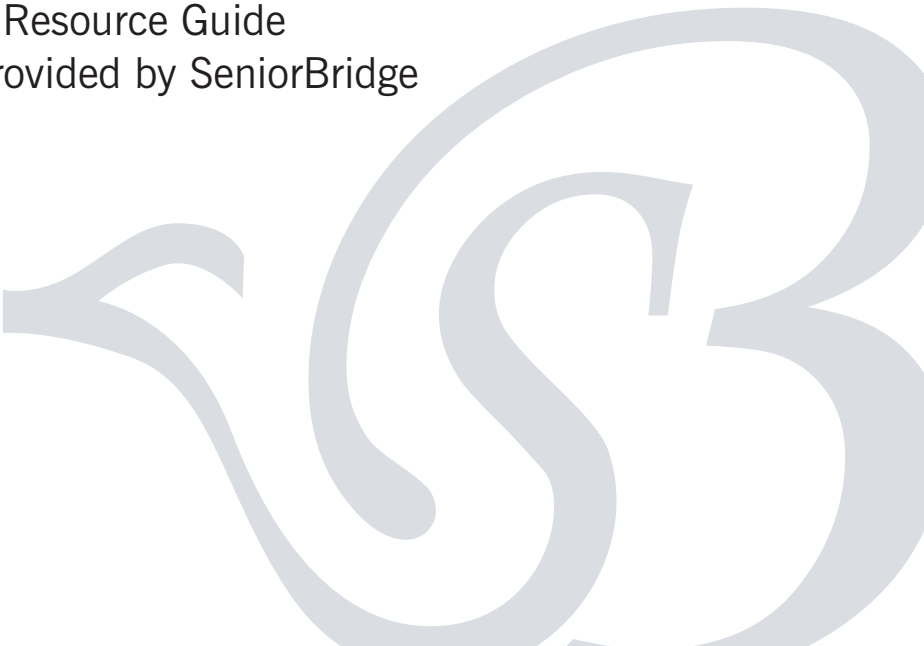




*Care Advisors
Care Managers
Care Providers*

Understanding the Options and Costs of Receiving Care at Home

A Resource Guide
Provided by SeniorBridge





Longer Life, More Choices

Even with the onset of chronic illness and frailty, most people would prefer to remain in the comfort of their own homes if they could do so safely. SeniorBridge has developed this booklet to help families understand options for accessing and paying for reliable, high-quality health care services in the home and make informed decisions.

The Misperception About Medicare

Medicare does not pay for long-term care.

Even with supplemental insurance, Medicare does not pay for custodial care to assist with activities of daily living, even though this type of support might be necessary.

Medicare only provides acute or short-term health care and hospice services.

Medicare Part B covers doctor visits and out-patient services until an individual has rehabilitated to what Medicare deems to be their maximum potential.

Supplemental insurance (Medigap) only considers Medicare-covered services.

Supplemental insurance coverage is limited to co-pays and deductibles for services Medicare deems necessary (but not long-term care).

Only Long-Term Care Insurance provides custodial and supportive care.

How do I pay for Long-Term Care?

There are a variety of ways to pay for long-term care, which can vary with the kind of care you need and other personal circumstances. Below are several resources that may help you pay for care.

Long-Term Care Insurance

This type of private insurance can help pay for many types of care including nursing home, assisted living, and most importantly, care at home. Policies are unique and a Care Manager can help review your policy to see how it can be used to meet your needs.

Reverse Mortgages

Qualified seniors who live at home and have a low or no mortgage balance can convert a portion of the equity in their homes into cash through a federally-insured home loan provided by the U.S. Department of Housing and Urban Development (HUD).

Veteran Benefits

Aid & Attendance, a largely unknown benefit, provides monetary assistance to qualified veterans who have served during times of war and to their surviving spouses. This benefit can be used to fund long-term care.

Life Insurance

Private third-party organizations now allow seniors to use a life insurance policy to help pay for home health by converting a portion of the policy's death benefit into a long-term care benefit paid directly to a care provider.

Additional community-based programs may be available to you. A geriatric Care Manager can help identify resources to meet your unique needs.

How do I find a Caregiver?

The most common approaches to locating private-pay caregiving in the home are:

- Pay an agency to provide you with a caregiver.
- Get a referral from a friend or registry.

This booklet discusses the advantages and benefits of both models.

A geriatric Care Manager can help identify options to meet your unique needs.

Should I contract with an agency or hire privately?

Some people believe that by hiring a caregiver privately they will save money or have greater control over the service. Below are a few considerations.

Time Invested in Screening and Supervising

Bringing a stranger into the home of a vulnerable older person poses emotional, financial and physical risks. When working without an agency, the responsibility of limiting exposure to an unfit caregiver falls on the family. Make sure you are equipped and willing to carry out these important functions:

- | | | |
|------------------------------|---|--|
| • Criminal background check | • Checking references | • Obtaining proof of training as a CNA/HHA |
| • Credit check | • Pre-employment TB screen & physical | • Obtaining proof of citizenship or green card |
| • Pre-employment drug screen | • Interviewing, orienting & introducing | |

Hidden Costs and Legal Obligations

The IRS has clear guidelines for determining the status of a caregiver as an employee or an independent contractor and provides the following guidance:

- Do you determine the caregiver's schedule and tasks?
- Do you provide equipment needed to perform caregiver tasks (including gloves, blood pressure cuff and cleaning supplies)?
- Do you provide instruction on how and when to provide the service (including the routine schedule, tasks to be accomplished such as grocery shopping, doctor visits, food to prepare, etc.)?
- Do you pay the worker more than \$1,500 per year?

If you answered "yes" to these questions, the caregiver is most likely your employee and you have all the responsibilities of an employer—unless you are contracting with an agency.

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Employer Responsibilities

As an employer, you are responsible for:

- Withholding income tax and the employer portion of Social Security and Medicare taxes from the caregiver's pay check.
- Paying Social Security, Medicare and Unemployment (FUTA) taxes.
- Providing the caregiver a W-2 form showing the amount of taxes withheld from the pay (see www.irs.gov/pub/irs-pdf/p1779.pdf).
- Additional state and local regulations such as workers' compensation coverage and local taxes.

Management and Supervisory Responsibilities

Are you prepared to assume the primary responsibility of overseeing caregiving? Ask yourself these questions:

Who will manage and oversee the care on a daily basis?

- Who will manage and oversee the care on a daily basis so that you are confident the care is safe, appropriate and consistent with professional recommendations?
- Who will provide coverage on a 24/7/365 basis for the hands-on caregiver when she gets sick, needs a vacation, has a personal emergency or otherwise needs time off?
- How will you manage medical emergencies and other health care crises that may arise?
- How will managing this care affect you and other members of your family?
- How do you avoid family conflicts about decisions around the best way to provide care?
- How do you cope with the physical and emotional stress of caregiving?
- How will you cope with the losses that occur in the process of living with increasing frailty and/or cognitive changes?
- Recognizing that caregiving often is required for long periods of time, how will you avoid burnout of the primary caregiver?

Serious Liabilities

Most homeowners policies cover injuries sustained by "occasional" workers while on the job, but do not cover a person who is providing care on a regularly scheduled, continuous basis. If you decide to hire privately, check with your insurance agent about your potential liability. Because the homecare industry is noted for work-related injuries, this reality poses a substantial risk for families. Risks associated with caregiving include:

- Injury when lifting, transferring or bathing an individual.
- Communicable diseases if the aide fails to use universal precautions.

How Do I Select the Right Agency?

Agencies vary in scope and culture. When considering homecare services, here are some things to investigate and ask:

- What is included in your caregiver screening process?
- Do you provide documents about financial arrangements before service begins so that there's no misunderstanding about the service and cost to be provided?
- Do you handle payroll, taxes, unemployment insurance, workers' compensation and general liability insurance?
- Are the providers of care insured and bonded?
- Do you guarantee coverage when a caregiver takes vacation, gets ill, has a personal emergency or otherwise needs a day off?
- How often do you supervise your caregivers in the home?
- What procedures does the agency have for client emergencies? Is there a nurse supervisor on-call and available to intervene on the phone or in-person even during off hours and weekends?
- Are you accredited by an independent accreditation body such as CHAP or JCAHO?
- Is it possible to interview several potential aides and make a selection after those interviews?
- Will you develop a written plan of care?
- How do you take into account my needs and preferences?

If you decide to hire privately, check with your insurance agent about your potential liability.

Who Does What?

Homecare professionals have different skills, knowledge and experience that address varying medical and functional capabilities and preferences.

Home Health Aides (HHAs)/ Certified Nursing Assistants (CNAs)

the most commonly needed caregivers, allow elderly, recuperating or chronically disabled people to remain in their homes instead of requiring an institutional setting. CNAs and HHAs usually have completed a 75- to 150-hour training program and often receive classroom and field-based continuing education with their agency.

What they can do:

- Prepare simple meals, laundry and maintain a clean, orderly bedroom, bathroom and kitchen environment.
- Provide personal care such as bathing, dressing and grooming, under nursing or medical supervision.
- Remind clients about taking medications.
- Take vital signs including temperature, blood pressure and pulse and report to a professional.

What they don't do:

- Monitor or assess vital signs.
- Administer medications.
- Heavy-duty housework.

Companions are not trained to provide personal or health-related care. These individuals offer socialization, cognitive stimulation and friendly support when a client does not need assistance with activities of daily living.

What they do:

- Provide shopping, laundry, errands, meal preparation and light housekeeping.
- Engage in mentally stimulating activities such as discussions about current events and cultural topics, music or other common interests.

What they don't do:

- Take vital signs, remind clients to take medications or any other health-related care.
- Help with bathing, dressing, walking, transferring, toileting or other personal care.



Nurses are licensed clinical professionals who assess needs and develop plans with a physician's approval. Licensed Practical Nurses (LPNs) and Vocational Nurses (LVNs) provide skilled nursing care under the supervision of a Registered Nurse or physician.

What they do:

- Physically examine and evaluate vital signs, medical tests and other findings.
- Administer and monitor responses to medications and infusion therapies.
- Wound care, tube feedings, injections and intravenous monitoring.
- Only Registered Nurses can assess findings and develop care plans for physician approval.

What they don't do:

- Diagnose and prescribe treatments or medications.

Social Workers are licensed clinical professionals who help people function in their environments and resolve personal and family problems.

What they do:

- Assess and treat depression, anxiety and emotional, cognitive and behavioral problems.
- Mediate family decision making processes.
- Advise on long-term care planning.
- Help navigate a confusing healthcare and social service system.

What they don't do:

- Prescribe or distribute medications.



Managing Complex Chronic Care Requires Professional Oversight

When you are presented with the reality of needing to care for a family member with chronic health problems, remember that there are resources and services to identify options. It is important to make well-thought-out decisions about how to provide the best quality care in a safe environment.

We hope that this guide has provided you with insight and direction for your own caregiving decision-making process. SeniorBridge is committed to assuring safe and dignified care. If you would like to learn more about SeniorBridge's services, we would be pleased to provide a complimentary consultation at your convenience.

NOTES



*CHAP Accreditation
certifies that SeniorBridge
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