



ELDER CARE RESOURCE TEAM

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Health Care Reform and Long-Term Care

By Richard Scott Stewart

Although Long-Term Care is not the principal focus of any of the Health Care Reform bills currently being debated, there are some important provisions in each bill that focus on Long-Term Care. Some of these proposals include attempts to make long-term care more affordable and others designed to help seniors and the disabled stay home.

The proposed bill establishes a new national long-term care insurance program. This program is the Community Living Assistance Services and Supports Act (CLASS Act for short). This program would offer basic help for seniors and disabled people. To qualify for this program, one would have to pay modest monthly premiums for five years. Once those premiums have been paid that person would qualify for benefits averaging \$50.00 per day for services to help them stay at home. Although this is a great start, the low daily benefit amount is simply insufficient to significantly help someone stay home.

The proposed bill also will expand Medicaid (Medi-Cal, here in California) to cover more community based services. One such proposed change is the Community First Choice Option, contained in the Senate Bill, which provides

additional Medicaid funds to states that establish community services and supports for Medicaid recipients. The Senate Bill also provides increased Medicaid funding to states that can keep seniors using community or home based services rather than nursing home care. Finally, the Senate Bill also expands the spousal impoverishment laws to all married couples regardless of where care is being provided. Under current law, spouses are entitled to keep substantially larger amounts of assets and income if their spouse is receiving care in a nursing home.

The proposed bill also provides additional protections to nursing home residents. This is done by

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be disclosed on the Medicare web page. These new disclosure requirements will include: national background checks for all Long-Term Care employees who have contact with a patient, information about staffing levels, and additional information about the ownership and management of long-term care facilities. This information can be found at this web page: <http://www.medicare.gov/NHCompare/Include/DataSection/Questions/SearchCriteriaNEW.asp>.

These additions to the proposed health care bills are a good start to help our aging population meet the high cost of health care. Hopefully, as the debate continues in Washington these important issues will get further notice from our representatives.

Richard Scott Stewart has concentrated his law practice on solving the legal problems affecting the California senior population. These problems include Medi-Cal benefit law, estate planning and asset protection and retention. For additional information, he can be reached at 619-282-1194 or www.sandiegoelderlaw.net

What Happened To Grandma's Pearls?

By Julia Fagin

The fear of having a precious piece of jewelry or other valuable items stolen or inappropriately given away can be devastating to your family. These items are sentimental, valuable but can be irreplaceable. Yet, the need for many seniors to be surrounded by their lifelong personal possessions makes them feel more "at home" while they reside in an assisted living care facility or strang-

ers in their home. Unfortunately, these personal affects can be stolen or inappropriately "gifted" to staff members or strangers who promise to help them in some way.

Here's a common story:

Grandma Smith is a charming lady of 87 years old who lives in an assisted living facility. She's a little forgetful and very trusting of people. Her children don't live in the same town so they only make it to visit her a few times a month. At last visit, Grandma Smith's daughter noticed her mother wasn't wearing her precious pearl necklace. She always wore her pearls. When the daughter asked her mother, "What happened to your pearls?" Grandma said she let a nurse wear the necklace for "a little while." The nurse may legitimately only be wearing it for a little while, but most likely Grandma Smith inappropriately "gave" the pearls away because of her kindness. Grandma doesn't seem to remember which nurse is borrowing the pearls. Now the daughter is faced with the problem of finding out who has the pearls and to get them back. Sadly, the pearls were never recovered, leaving Grandma Smith even more emotional about her memory loss and the family mourning the loss of a precious family heirloom.

To protect the family from this type of loss, Grandma Smith's family can take advantage of personal property protection provided by the family's homeowner's insurance policy. Many insurance carriers have endorsements that extend personal property and liability coverage to an elderly person regularly residing in an assisted living care facility. These endorsements give the elderly person and the family peace of mind that the belongings are insured against theft and

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mysterious disappearance. There may be policy limits on certain types of personal property such as hearing aids, eyeglasses, false teeth, walkers and wheel chairs. Make sure to ask about your specific situation.

To reduce the risk of stolen or inappropriately “given” valuable items, the family should have an inventory of all items. Jewelry is the number one stolen item. It should be kept in a locked drawer and the family should keep photographs of the jewelry and any other rare, valuable or sentimental items in a separate location. These photos will be useful in tracking down missing items at pawn shops.

Grandma’s missing pearls is just one scenario. Families should be aware of other common situations that may occur either in the assisted living facility or in the elderly person’s private residence such as cleaning personnel, gardeners, mail men, and other delivery type service people who befriend the aged and coax him or her into giving away actually money, valuables or access to money (credit cards, check books, etc...).

Elder fraud is on the rise. Every situation is different and based on the capacity of the elderly person. Seek the counseling of a licensed, independent insurance agent who can help the family develop a strategic plan as to how to best take care of the elderly person’s needs. The agent can work with the family and care providers to protect our most cherish items.

Julia Fagin is an independent, licensed Property Casualty Insurance Agent working at a top independent brokerage, Konecki Insurance, in the San Diego area. Julia finds the best and most

appropriate coverage for the best price for her clients. Protecting her clients’ families, homes, belongs and assets is Julia’s top priority. For additional information, she can be reached at 858-751-5888 or Julia@koneckiins.com.

Aging Without Vitamin D

By Elizabeth Wagner

As we age Vitamin D becomes a valuable commodity. Our skin becomes more sensitive and the damage from the sun begins to show in age spots and decreased production of Vitamin D. Skin cancer might be a threat and so sunscreen becomes a must when we venture outside. Unfortunately, outdoor adventures may begin to dwindle over time creating an even greater deficit in Vitamin D production. Studies have shown a minimum of 58% of people above 55 years old have Vitamin D deficiency.

Vitamin D deficiency has routinely been found when you experience at least two or more of the following medical issues – osteoporosis, heart disease, hypertension, diabetes, kidney problems, certain cancers, depression, memory loss, an autoimmune disease, chronic fatigue, chronic pain. This sounds like many of the issues faced during the aging process. Although, Vitamin D cannot treat the medical condition, if you have these medical conditions it may mean that you should have your Vitamin D level checked.

Good food sources of Vitamin D are: wild caught sockeye salmon, sardines, shrimp, eggs and 2% milk. With heart disease consuming enough 2% milk, eggs and shrimp to meet your basic requirement of 1000-2000 IU/day is not possible because

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Who We Are

The Elder Care Resource Team is a group of unaffiliated, independent professionals who are dedicated to educating and assisting the senior community concerning the complicated issues facing the aging population. These issues range from managing assets and investments to planning for long-term care costs to locating and selecting the appropriate care giving resources.

This group of professionals meets monthly to discuss and solve many of the unique issues that our aging population faces. These monthly meetings are a valuable tool that allows the respective members to have the ability to present a global approach to solve these challenges.

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Daily Money Manager	Lauren Derstine, JD
Dietitian/Nutritionist	Elizabeth Wagner, RD CCN
Nurse Practitioner	Joan Kallin, MSN, RN, GN
Insurance	Julia Fagin
Therapist	Debra Lobatz, MA, MFT

More information about our members can be found at our website: www.ElderCareResourceTeam.com.

of the effects on cholesterol levels. Wild caught sockeye salmon has an average of 600 IU per 4oz serving and Cod has 65 IU per 4oz serving. It is very difficult to obtain the necessary amount of Vitamin D through food sources.

Repletion of Vitamin D is based on the initial level in your body. It is important to balance the amount taken in a supplemental dose as extra Vitamin D is stored in the fat cells. The most beneficial Vitamin D on the market right now is D3. Vitamin D3 is the active version therefore your body can use it without any work.

Elizabeth Wagner is a Nutritionist with 10 years professional experience and 6 years in Functional Medical Nutrition Therapy. She optimizes your nutritional status by first conducting an individual nutritional analysis. Using nutritional testing, diet and supplements a person's body is then able to start the process of re-balancing to improve health and energy. This assessment then guides the practitioner to help rebalance the underlying nutritional issues in a client's health & reduce health-care costs. Functional Nutrition Therapy includes developing an individually tailored plan to allow the body to receive the proper nutrients necessary for optimal health and function.

Keep Your Daily Finances Clean and Simple

The mental disorder called hoarding has recently come to the attention of the mainstream in the popular A&E series called "Hoarders." This show depicts horrific examples of people living in chaos and filth due to their inability to stop or reduce over-consumption and/or to release things that no longer serve them. In contrast, most Americans view stockpiling, aggressive saving, and investing of money as a laudable pursuit.

People who accumulate considerable or vast amounts of wealth are revered and regarded as mysterious heroes by many. Arguably, financial hoarding can bog people down mentally, emotionally, physically and/or spiritually just as much as the irrational hoarding of material things. A wise person, who was considered a spiritual leader and also the heir to a great fortune, once told me that, "it's fine to have money and own things so long as your money and things don't end up owning you." Regardless of your financial situation, it is helpful and almost essential to prolonged happiness and well being to cultivate an attitude and approach toward money that is in synch with your core beliefs.

Sometimes speaking to a trusted third-party can provide perspective, clarity and result in a more organized, simplified and systematic approach toward alleviating circular thinking and daily worry.

Lauren Derstine is a Daily Money Manager and licensed attorney in California, New York and New Jersey, who founded and heads Senior Support. Senior Support's mission is to help seniors retain their independence and maintain their peace of mind by ensuring their bills are paid on time, checkbooks balanced, records organized, and paperwork is handled in an efficient timely manner. Lauren meets personally with all of her clients. (619) 303-2558.

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