WE ARE HERE TO HELP

Central Massachusetts Agency on Aging
360 West Boylston St., West Boylston, MA 01583
Tel: 800-244-3032, 508-852-5539,
Fax: 508-852-5425
WEB: www.SeniorConnection.org
EMAIL: CMAAging@SeniorConnection.org
AREA SERVED: Includes 61 towns/cities covered by the following agencies.

Montachusett Home Care Corporation
680 Mechanic St., Leominster, MA 01453
Tel: 800-734-7312, 978-537-7411
FAX: 978-537-9843, (TTY) 978-514-8841
WEB: www.montachusetthomecare.org
EMAIL: info@montachusetthomecare.com

Elder Services of Worcester Area, Inc.
67 Millbrook St., Worcester, MA 01606
Tel: 800-243-5111, 508-756-1545
Fax: 508-754-7771, TTY: 774-312-7291
WEB: www.eswa.org, EMAIL: irinfo@eswa.org
AREA SERVED: Auburn, Barre, Boylston, Grafton, Hardwick, Holden, Leicester, Millbury, New Braintree, Oakham, Paxton, Rutland, Shrewsbury, West Boylston and Worcester

Tri-Valley, Inc.
10 Mill St., Dudley, MA 01571
Tel: 800-286-6640, 508-949-6640,
Fax: 508-949-6651, TTY: (508)949-6654
WEB: www.trivalleyinc.org, EMAIL: info@tves.org
The Caregiver’s Guide

This is the fourth edition of the Caregiver’s Guide produced by the Central Massachusetts Family Caregiver Support Program. The Caregiver’s Guide is a collaborative effort of Central Massachusetts Agency on Aging, Elder Services of Worcester Area, Inc., Montachusett Home Care Corporation and Tri-Valley, Inc. These agencies are committed to assisting older adults, individuals with disabilities and caregivers in the 61 cities and towns in Central Massachusetts.

Every effort has been made to provide accurate information in this Guide. However, content and contact information is subject to change at any time without notice. Please contact any of the agencies listed on the inside cover if you have any questions. Periodic updates of this guide can be found on any of the agencies websites.

Special thanks to the many community experts and Central Massachusetts Agency on Aging, Elder Services of Worcester Area, Inc., Montachusett Home Care Corporation and Tri-Valley, Inc. personnel and volunteers who gave so generously of their time.

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Who is a Caregiver
A caregiver may be an adult child, relative, spouse, partner, friend, neighbor, or anyone who provides emotional and/or physical assistance.

- **Primary Caregiver**: Provides regular assistance with activities of daily living, assists in making decisions, and may at times act as the care recipients’ representative.
- **Long Distance Caregiver**: Lives too far away to provide regular assistance, possibly out of state, and may depend on others to help with direct caregiving tasks.
- **Grandparent as a Caregiver**: Grandparents or relative caregivers, age 55 and older, raising a grandchild under 18 years of age or a grandchild over 18 years of age with a developmental disability.

Caregiving can be very rewarding, and at times overwhelming. Identifying needs, locating resources, coordinating services and creating supports can be a challenge.

Planning for the Caregiver Role
It is important to begin by first determining the individual’s needs. Many issues can and should be discussed before a crisis occurs but this is not always possible.

Consider the following questions:

- Has the individual experienced a sudden crisis (a stroke or fall) or has a medical situation developed gradually (dementia, heart condition, arthritis), or have needs increased due to the natural process of aging?
- Are there physical limitations, memory problems or both?
- Is assistance needed with any of the following:
  - Housework, Laundry, Meals
  - Bathing, Dressing, Toileting
  - Shopping, Transportation
  - Bill Paying, Financial Planning, Legal Issues
  - Medication Management, Medical Appointments
  - Home Safety
  - Personal Safety
  - Socialization, Emotional Support
- Would the individual consider help from a homemaker, companion, family member, or personal care worker?
- Is attending a social or adult day health center an option?
- Are services needed on an interim, daily or 24-hour basis?
- What future housing arrangements would be most appropriate, and what would the care recipient prefer?
- Is there sufficient income to meet short and long term needs? Are there insurances or other assets to pay for services?
- Has a Durable Power of Attorney been designated?
- Is there a completed Health Care Proxy?

Helpful guidelines as you begin your caregiver journey:
- Clarify your caregiving role.
- Be wary of taking on the role of “rescuer” or a “dictator”. Encourage the individual to do what they are able to do.
- Involve the individual in decision making when possible.
- Connect with the appropriate community resources including family and friends.
- Develop a plan, but keep in mind it may change.
- Set a trial period and monitor the process.

Finding your way through the maze of government agencies and community services can be an overwhelming process.
- Write down your questions.
- Be organized, brief, and to the point.
- Record the name of the contact person with whom you speak and the date.
- Record the responses to your questions.
- Use each contact as a resource; ask what other services exist and what websites to review. If you have not received satisfactory answers, ask to speak to a supervisor.

If you have questions or concerns about an individual’s welfare and you do not know where to turn, contact one of the agencies listed on the inside cover.

When a Care Recipient Resists Assistance
Individuals sometime resist accepting assistance because it often involves losing independence and giving up control over
certain aspects of their lives. Needing help may be perceived as an admission of weakness or failure. An individual may feel that the care would be too expensive, and may have privacy issues regarding financial disclosure. The need for assistance may be seen as one step towards moving to another setting such as a nursing home.

Tips that may encourage an individual to accept assistance
- Involve the person in decision-making.
- Be respectful. If possible, the individual should still be in charge of their own care. Your role may be to facilitate decisions rather than to make them.
- Watch for openings in the conversation. For example, “You mentioned feeling tired. Are you having trouble keeping up with your chores?”
- If the person doesn’t think they need help, give examples of instances that have caused you concern.
- Present the individual with multiple options.

If the person still refuses care
- If this is a health or safety issue, be gentle but firm. For example: “This has to be addressed” or “We can’t put it off any longer”.
- Strategize how to help the individual accept care by calling a family meeting.
- Ask a trusted person, such as a close friend, relative, doctor or clergy, to step in.

Don’t Give Up
- Look at services in stages - one service at a time.
- Try less intrusive services first (on a trial basis).
  - Meals on Wheels
  - Personal Emergency Response System
  - Volunteer/Companion
  - Transportation
- An individual may at first refuse, but then over time agree to accept care.
- Keep offering and providing whatever care is acceptable.
- Look for an opportunity. You may be able to provide help during an illness or following a hospitalization.
- Most important: be positive, persistent & patient!
Evaluate when a person can no longer make safe decisions
Some signs of concern include:
- Not eating, bathing, or providing basic self-care.
- Not paying bills or answering mail.
- Giving away money inappropriately.
- Doing dangerous things such as leaving on stove burners.
- Showing symptoms of memory loss or confusion.

If the individual is exhibiting these signs or if you have any other concerns, contact one of the agencies on the inside cover for assistance.

Caring for the Caregiver
While caregiving offers many rewards it can also be emotionally and physically exhausting. A caregiver can easily neglect their own physical and emotional health putting them at risk and unable to care for another person. Do not judge yourself as a caregiver based on the response of the individual. If you are educating yourself and asking for help when needed, you are doing the best you can. Remember everyone has bad hours, days, and weeks. In order to take care of someone else, it is important to take care of yourself first.

How to Take Care of Yourself
- Prioritize your caregiving responsibilities.
- Be realistic. Don’t feel you have to do everything yourself.
- Keep in touch with friends. Don’t isolate yourself.
- Ask for help. Often friends and relatives need you to identify specific ways they can be helpful.
- Acknowledge your limitations. Know when the stresses are becoming too much to bear, and that you need to get your strength and your objectivity back.
- Educate yourself about the condition of the person for whom you are caring. Expect some decline and do not blame yourself for it.
- Allow yourself to grieve the losses that accompany illness.
• Rest, exercise; learn stress management and relaxation techniques; get enough sleep.
• Attend a caregiver support group, in person or online.
• Keep appointments with your medical providers.
• Do something special for yourself on a regular basis.
• Seek help when needed.

Don’t lose your sense of humor. Laugh, even if it is while you are alone. Just do it!

The Caregivers’ Emotional Health
Caring for a loved one can bring much joy and satisfaction. It also can be associated with intense feelings of fear, worry, sadness, and grief. It is normal for caregivers to experience such emotions in response to coping with the tasks of caregiving. If feelings of overwhelming anxiety or depression do not go away, speak with your doctor. Whatever the cause, depression and anxiety are both treatable conditions.

Caregivers should seek professional help if any of these symptoms interfere with their everyday life:
• Feelings of worthlessness
• Extreme guilt
• Persistent hopelessness
• Noticeable changes in sleep patterns or appetite
• Loss of energy or pleasure in ordinary activities
• Uncharacteristic withdrawal from others
• Thoughts of death or suicide
• Tearfulness or excessive crying

Support Groups
Support groups provide a place to exchange information, share experiences, problem solve and learn about resources. Caregivers report how valuable it is to meet others who are facing similar situations. Although some people do not like to talk about their problems, knowing that others are experiencing the same kinds of frustration and stress can bring great relief. It helps to know you are not alone.

For more information about support groups in your area contact the agencies listed on the inside cover.
Holding a Family Meeting
Who attends the family meeting will be different for each family. It is important to include everyone that is or will be involved in the individual’s care including family, friends, neighbors, paid caregivers and professionals. The more people involved in the care the less isolated the caregiver will feel. The individual receiving care should be involved in this meeting unless they have a condition which makes it difficult for them to participate.

Tips to a successful family meeting
- Prepare an agenda, send it out ahead of time and allow for input from others. Agenda items may include; daily caregiving needs, living arrangements, financial concerns, what support role will each person play.
- Consider arranging for an outside facilitator.
- If an individual cannot attend the meeting use technology to involve them, such as video conference or telephone communication.
- Brainstorm solutions to the current and future issues. Not all issues can be solved; work to find common ground.
- Discuss important decisions that must be made and who will make each of them.
- Be sure to allow everyone at the meeting to communicate their own thoughts, feelings and needs.
- Develop a plan and arrange for follow up meetings.

The goal of a family meeting is to work as a team to provide the best care for the individual, even if there are conflicts among members.

Long Distance Caregiving
Long distance caregivers are caregivers who live a distance away, such as in another town or state, from the person that requires care. This can create added challenges.
- Stay in touch with the care recipient on a regular basis.
- Maintain an updated list of medical and emergency information.
- Utilize your visits to attend important appointments, run errands and socialize with the individual.
- Identify a trusted friend or neighbor to check in on the individual.
- Arrange for a professional geriatric care manager to set up and monitor services.
- While visiting assess the situation for signs of safety issues, self neglect or elder abuse (i.e. financial exploitation, emotional, verbal, physical or sexual abuse).
- Keep in contact with service and health care providers.
- Find a way to help the primary caregiver who is local (i.e. offer emotional support or help manage finances).

**Eldercare Locator:** The Eldercare Locator connects older adults and their caregivers with information about services throughout the United States. The service links those who need assistance with state and local Area Agencies on Aging and community-based organizations. Contact the Eldercare Locator at: 1-800-677-1116 or www.eldercare.gov.

To obtain a **Long Distance Caregiving** booklet and/or to find out about services contact one of the agencies listed on the inside cover.

**Additional Helpful Websites:**

- [www.aarp.org/families/caregiving](http://www.aarp.org/families/caregiving)  AARP Caregiver Information
- [www.caregiver.com](http://www.caregiver.com)  Today’s Caregiver Magazine
- [www.caregiver.org](http://www.caregiver.org)  Family Caregiver Alliance
- [www.caregiving.com](http://www.caregiving.com)  Helping You Help Aging Relatives
- [www.caregiving.org](http://www.caregiving.org)  National Alliance for Caregiving
- [www.caregiverslibrary.org](http://www.caregiverslibrary.org)  Caregiver’s Library
- [www.strengthforcareing.com](http://www.strengthforcareing.com)  Caregiver Information
- [www.800ageinfo.com](http://www.800ageinfo.com)  MA Executive Office of Elder Affairs Caregiver Resources
- [www.aplaceformom.com](http://www.aplaceformom.com)  Caregiver Information
- [www.agingcare.com](http://www.agingcare.com)  Caring for Aging parents
- [www.Care.com](http://www.Care.com)  Finding Caregivers
- [www.lotsahelpinghands.com](http://www.lotsahelpinghands.com)  Caregiver Organizational Tools
- [www.cargiveraction.org](http://www.cargiveraction.org)  Caregiver Action Network
- [www.leadingage.org](http://www.leadingage.org)  Caregiving Services
Grandparents Raising Grandchildren
The Massachusetts Family Caregiver Support Program recognizes grandparents raising grandchildren as caregivers. The program can offer support and information to these caregivers. The program serves:

- Grandparents and relative caregivers (not parents) age 55 years or older, of children no older than age 18.
- Grandparents and relative caregivers (not parents), age 55 or older, of a disabled adult 19-59 years of age.

Finding support as you raise a grandchild is very important to your own well-being. Many grandparents lack information about the range of support services, benefits and policies. Support groups are one way of obtaining information as well as meeting with people who understand what you’re going through.

Resource Guide for Massachusetts Grandparents Raising Grandchildren is a publication that includes legal, financial, health, housing, and childcare information. This guide is available online at: http://www.mass.gov/elders/docs/caregiver/grandparents-raising-grandchildren.pdf

Additional Helpful Websites:
www.aarp.org/grandparents AARP Grandparent Information Center
www.usa.gov/topic/grandparent Grandparent Information
www.mass.gov/elders/caregiver-support/grandparents Grandparent Information

For more information on Grandparents Raising Grandchildren contact one of the agencies listed on the inside cover.

The Central Massachusetts Family Caregiver Support Program
The Family Caregiver Support Program is part of a national program which helps caregivers manage the personal, social and economic challenges of caregiving. The program helps caregivers access information, services, education, respite and support. It recognizes that caregivers need resources that are responsive to their family relationships, culture and language.
Caregivers Served By This Program Include:
- Adult family members or other informal caregivers age 18 and older providing care to individuals 60 years of age and older.
- Adult family members or other informal caregivers age 18 and older providing care to individuals of any age with Alzheimer’s disease and related disorders.
- Grandparents or other relative caregivers (not parents) age 55 or older raising grandchildren.
- Relative caregivers (not parents), age 55 years or older, of an adult with a disability aged 19-59.

The Central Massachusetts Family Caregiver Program Offers:
- Information, resources and referrals and connections to support groups
- A free session in the home, by phone or through email to assist in assessing options, making decisions and solving problems related to caregiving issues
- Educational caregiver materials
- On-going caregiver support and follow-up
- Group training programs on caregiver topics
- A Caregiver’s Scholarship Fund which provides assistance funding short-term respite (a brief period of relief), adaptive equipment and other services to benefit the caregiver (this fund is subject to available funding)
- The Caregiver’s Guide, available in English and Spanish, filled with information related to caregiving
- The Caregiver Organizer, a pocket tool, which can be used for record keeping, available in English and other languages
- A Long Distance Caregiving Booklet which provides help assessing a situation, local resources and websites
- Powerful Tools for Caregivers, a 6 week workshop that focuses on Caring for the Caregiver

The Central Massachusetts Agency on Aging
The Central Massachusetts Agency on Aging is a private nonprofit organization, designated by the Massachusetts Executive Office of Elder Affairs to fund services to older adults and their caregivers in the 61 cities and towns in Central
Massachusetts. The agency is responsible under the Federal Older Americans Act to plan, fund and monitor programs. The agency provides referrals to local area organizations and contact information for other Area Agencies on Aging on a statewide and national level.

**www.SeniorConnection.org** is a website for older adults and caregivers. It includes the Guide to Elder Services, (a searchable database of agencies and programs), links to useful internet resources, community news, a calendar of events and a periodic newsletter. The website has Connection for Caregivers, which offers an informal ongoing peer support group available online at anytime. It also features monthly articles on medical and legislative issues, resources and tips to maintain well-being.

**Aging Service Access Points (ASAPs)**

ASAPs are private nonprofit agencies providing information, referrals, resources, services and care management for in-home and community based services. Services assist adults age 60 and over, individuals under 60 with a documented diagnosis of Alzheimer’s disease or related dementia and younger individuals with disabilities to live independently with dignity and safety in a setting of their choice. ASAPs also provide caregiver support. Agencies receive funding from the Commonwealth of Massachusetts through the Executive Office of Elder Affairs and federal financial support under the Older Americans Act. Funds are also received from other public and private sources. Every city and town in Massachusetts falls within the service area of an Aging Service Access Point (ASAP). In the Central Massachusetts Area there are three ASAPs:

**Montachusett Home Care Corporation**

680 Mechanic St., Leominster, MA 01453

Tel: 800-734-7312, 978-537-7411

Fax: 978-537-9843 TTY: 978-514-8841

Web: [http://www.montachusetthomecare.org](http://www.montachusetthomecare.org)

Email: MHCC@MHCC-1.org

Elder Services of Worcester Area, Inc.
67 Millbrook St., Worcester, MA 01606
Tel: 800-243-5111; 508-756-1545
Fax: 508-754-7771 TTY: 508-792-4541
Web: www.eswa.org
Email: irinfo@eswa.org
AREA SERVED: Auburn, Barre, Boylston, Grafton, Hardwick, Holden, Leicester, Millbury, New Braintree, Oakham, Paxton, Rutland, Shrewsbury, West Boylston and Worcester

Tri-Valley, Inc.
10 Mill St., Dudley, MA 01571
Tel: 800-286-6640, 508-949-6640
Fax: 508-949-6651 TTY: 508-949-6654
Web: www.trivalleyinc.org
Email: info@tves.org

For a list of all the statewide ASAPs contact
1-800-AGEINFO

Services provided by Montachusett Home Care Corporation, Elder Services of Worcester Area Inc. and Tri-Valley, Inc. include the following:

Information & Referral
Information & Referral Specialists offer free resource information by telephone, email or to walks-ins about a variety of topics ranging from public benefits to community services and state and national programs. All requests for information are confidential. Anonymous inquiries are welcome. Translation is available.

Care Management
Care Managers conduct in-home assessments, determine eligibility for different programs and develop care plans that promote independent living. Care Managers arrange for appropriate services and manage care plans.
Home Care
The State Home Care Program provides in-home services to individuals age 60 and over who need assistance to live independently. Services are also offered to caregivers who need respite from their daily caregiving tasks. People under age 60 with a documented diagnosis of Alzheimer’s disease or related dementia also qualify for respite services for their caregivers. To receive services an individual must need assistance with activities of daily living and meet age and income eligibility.

Home Care Services that may be offered include:
- Adult Day Health
- Adaptive Equipment
- Behavioral Health Services
- Chore (heavier house cleaning)
- Companions
- Consumer Directed Care
- Dementia Day Care
- Habilitation Therapy
- Home Health Services (Home Health Aid)
- Home Delivered Meals
- Homemaking (light housekeeping, laundry and shopping)
- Laundry Service
- Low Vision Rehabilitation Counseling
- Meal Preparation
- Medication Dispensing Systems
- Personal Care
- Personal Emergency Response Systems
- Supportive Day Care
- Supportive Home Care Aid
- Transportation to medical appointments
- Wanderer Locator Service

Other programs ASAPS may offer include:
- Adult Family Care
- Caregiver Support
- Congregate Housing
- Consumer Directed Care
• Healthy Aging Workshops
• Long Term Care Ombudsman
• Money Management
• Nursing Clinical Assessment & Eligibility (for skilled nursing home, personal care)
• Nutritional Services
• Options Counseling
• Personal Care Attendant (PCA)
• Protective Services/Crisis Intervention/Elders at Risk
• SHINE
• Volunteer Services

Many of the costs for these services and programs are paid for through the Executive Office of Elder Affairs. Additionally, co-payments for services may be assessed and are determined on a sliding fee scale based on the individual’s income.

For more detailed information about these services and programs contact the agencies on the inside cover.

Helpful Government Websites:
www.aoa.gov Administration on Aging
www.acl.gov Administration on Community Living
www.ncoa.org National Council on Aging
http://www.mass.gov/elders/ Massachusetts Executive Office of Elder Affairs

Protective Services/Elder Abuse and Neglect
Massachusetts Law (M.G.L. Chapter 19A Sections 14-26) defines elder abuse as acts or omission resulting in serious physical, sexual or emotional injury, or financial loss to an elder. Elder abuse includes physical, sexual and emotional abuse, caretaker neglect, and financial exploitation and self-neglect. Self neglect is defined as a failure to care for one’s self in one or more of the necessities essential for well being. These can include issues with housing, medical conditions, nutrition, finances and general safety concerns.

If you suspect an elder you know is suffering from abuse, neglect or exploitation, you may seek the assistance of your area Adult
Protective Service Agency. By filing a report, you are enabling the elder to receive assistance in relieving the abuse. All reporters’ names are, by law, kept confidential.

To make a report contact of the these agencies

**Elder Abuse Hotline**
800-922-2275  
www.800ageinfo.com

**Elder Services of Worcester Area, Inc.**
508-852-3205  
800-243-5111  
TTY: 774-312-7291  
67 Millbrook Street, Worcester MA 01606  
www.eswa.org  
Email: irinfo@eswa.org

**Montachusett Home Care Corporation**
800-734-7312  
978-537-7411  
TTY: 978-514-8841  
680 Mechanic Street, Leominster, MA 01453  
www.montachusetthomecare.org  
Email: MHCC@MHCC-1.org

**Tri-Valley, Inc**
800-286-6640  
508-949-6640  
TTY: 508-949-6654  
10 Mill Street, Dudley, MA 01571  
www.tves.org  
Email: info@tves.org

**Aging and Disability Resource Consortium (ADRC)**
A collaborative effort between aging and disability service providers to offer a single point of access for long term services and supports. In Massachusetts ADRC collaboration is between Area Agencies on Aging (AAA), Aging Service Access Points (ASAP) and Independent Living Centers (ILC). In this area, the following agencies are involved: Central Massachusetts Agency on Aging, Center for Living and Working, Elder Services of Worcester Area Inc., Montachusett Home Care Corporation and Tri-Valley, Inc.
In-Home/Community Based Services

In-home services assist people to live independently at home or in a community setting. There are medical and non-medical in-home services. Medical in-home services require a Doctor's Authorization and are provided by a Medicare certified licensed agency. Medical services included skilled nursing, physical therapy, occupational and speech therapy. Non-medical services include help with daily activities such as light housekeeping, laundry, shopping, bathing, and dressing. Each service performs specific tasks and requires different training, and supervision. The ASAPs offer many of these services and there are also many private pay options available.

Professional workers coming into your home through an ASAP, or a licensed home health agency must have background checks and liability coverage. If you privately hire workers without utilizing an ASAP or licensed Home Health Agency you may want to conduct your own background checks. When hiring privately, it is important to follow state laws about working hours, disability insurance and payroll taxes.

Non-Medical In-Home Services Include:

- **Companion**: Non-personal, non-nursing care including socialization and recreation, assistance with preparation of light snacks, escort to appointments (optional by agency policy)
- **Homemaker**: Shopping, menu planning, meal prep, laundry, light housekeeping
- **Personal Care Homemaker**: Bathing, dressing, foot care, denture care, bedpan routines, eating, assistance with ambulation and transfers, medication reminders
- **Home Health Aid**: Personal care, simple procedures as an extension of nursing or therapy services as delegated by the nurse or therapist (not medical care), assistance in ambulation or exercises, medication reminders
- **Supportive Home Care Aid**: Homemaking, personal care homemaking, escort services, socialization and emotional support to clients with emotional or behavioral problems
• **Personal Care Attendant:**
  o Assistance with activities of daily living and instrumental activities of daily living as instructed by consumer or surrogate
  o No formal training. Training provided by consumer or surrogate
  o No formal supervision. Supervised by consumer or surrogate
  o No background check required
  o Fiscal Intermediary complies with tax regulations

**Additional In-Home Services /Programs include:** (Some of these programs and services are offered through an ASAP as well as privately.)

• **Adaptive Equipment:** Includes transfer benches, walking aids, pill dispensers, transport chairs etc. Medicare and MassHealth cover some medical equipment with Doctor Authorization. Information is available at physician’s offices, medical supply companies and at [www.medicare.gov](http://www.medicare.gov).

• **Adult Family Care:** Also known as Adult Foster Care, provides family living as an alternative to institutional care. Participants are screened and matched with caregivers who provide 24-hour assistance in the caregiver’s home. Participants must have a physician referral for personal care services and be MassHealth eligible. In some cases, certain family members can be paid for caregiving.

• **Chore Service:** Includes vacuuming (including the moving of furniture to vacuum), washing floors and walls, defrosting freezers, cleaning ovens, attics and basements to remove fire and health hazards.

• **GPS Technology:** Devices used to determine a person’s exact location. Some can send an alert when an individual goes outside a certain geographical area.
• **Habilitation Therapy /Dementia Counseling:** Specialists provide expertise in understanding Alzheimer’s and related dementias, as well as techniques of communication, behavior management, structuring the environment, creating activities and planning for future care needs.

• **Hearing Rehabilitation:** Provides adaptive skills and aids for people who are hard of hearing or deaf. The Massachusetts Commission for the Deaf and Hard of Hearing serves as the principal agency in the state on behalf of the deaf, late deafened, and hard of hearing people.

• **Healthy Aging Workshops:** A variety of healthy aging workshops are available in different settings as well as online that teach individuals to take control of their health.

• **Medication Reminder Systems:** There is a wide range of medication reminder systems including pill box organizers, automatic pill dispensers, medical alarm clocks and Personal Emergency Response System (PERS) reminders. Smart phone, tablet and computer applications can also be used to set medication and appointment reminders. Systems are available in drug stores, medical supply businesses and online.

• **Nutrition Programs through the Older Americans Act:**
  - **Home Delivered Meals:** A meal is brought to an individual’s home who is 60 years of age or older, homebound and unable to prepare meals.
  - **Congregate Meals:** Meals are provided at community sites. To arrange for meals contact one of the agencies on the inside cover.

• **Money Management:** Trained volunteers help to set-up budgets, pay bills, write checks and monitor accounts.

• **Ombudsman Programs:** Services are provided in long term care facilities, assisted living facilities and to individuals receiving services in the home. Ombudsman counsel consumers about concerns with their services,
refer consumers to appropriate sources for help, and investigate and resolve complaints through mediation.

- **Personal Care Attendant Program (PCA):** MassHealth eligible consumers, with a physician referral for personal care services, select, train and employ their own caregivers to assist with activities of daily living and household tasks. In some cases, certain family members can be paid for caregiving.

- **Personal Emergency Response System (PERS):** An electronic device, connected through a telephone, is activated by pushing a help button on a pendant, wrist band, or a console unit. A 24-hour a day, seven-day-a-week central monitoring station answers calls, assesses the need for help and takes appropriate action. Some systems are able to detect a fall. There are a wide range of PERS companies. Prices for installation and monthly charges vary.

- **Telephone Reassurance:** Regular phone calls are made to homebound individuals. A prearranged emergency contact person is notified whenever there is no answer at the home. Contact your local police, fire department or senior center for information about your community.

- **Vision Rehabilitation:** Provides training and tools which will enable people who are visually impaired to live safely and independently. This improves the individual’s personal management, communication, travel, low vision utilization and home management skills.

- **Respite Services:** Provides relief to caregivers trying to cope with the stresses of caregiving. Respite services may include: companion, homemaker, personal care, home health aide, social day care or adult day health care. Respite may also be a short-term placement in a facility, such as an assisted living or nursing home.

- **Social Day Care (Supportive Day Programs):** Community-based group programs offer social activities
for individuals who require daytime supervision. Activities and meals are planned according to the needs of participants. Transportation may be available.

- **Adult Day Health:** Structured, comprehensive community-based group programs designed to meet medical and social needs through individual care plans. Programs provide meals, health and social support services in a protective setting. Some programs specialize in dealing with people experiencing issues with dementia. Hours vary. Transportation may be available.

- **Program of All-Inclusive Care for the Elderly (PACE):** Serves adults age 55 and older who have a caregiver. Participants have access to most medical services at a PACE Program site. Services must be administered by PACE providers and include:
  - Primary Care Geriatric Physicians
  - Specialty Care
  - 100% prescription drug and hospitalization coverage
  - Assistance with activities of daily living (ADLs)
  - Adult day health program
  - Medical transportation
  - Family caregiver support
  - Additional services as needed

**Summit ElderCare (SE)** is the only PACE program in Central Massachusetts. Although Fallon Health sponsors SE, participants do not have to be Fallon Health members to enroll.

**Summit ElderCare**
800-698-7566 TDD/TTY 800-899-4196
www.summiteldercare.org

For more information on **In-Home/Community Based Services** contact one of the agencies listed on the inside cover.

**Arranging for In-Home/Community-Based Services**
Individuals and caregivers often must identify, coordinate and arrange for services independently. If the individual receives
services through an Aging Service Access Point (ASAP) a care manager will coordinate and manage services received through the ASAP agency. If the individual is not eligible for ASAP services and/or is in need of additional care management a private geriatric care manager can be hired to coordinate all aspects of care.

**Private Geriatric Care Management**
Private geriatric care managers operate independently on a private fee-for-service basis. Services offered may include identifying needs, arranging for and monitoring services, offering referrals to specialists and acting as a liaison to families. You should do your own investigation to determine the professional’s qualifications. Make sure you understand the charges and the services you will receive. For more information contact one of the agencies listed on the inside cover.

**Additional Helpful Website:**
[www.caremanager.org](http://www.caremanager.org) National Association of Professional Geriatric Care Managers

**Paying for In-Home/ Community Based Services**
Medicare, MassHealth, Health Maintenance Organizations (HMOs), Senior Care Option Plans (SCOs), some insurance plans, long term care insurance, veterans services, ASAPs and other programs pay for limited in-home/community based care for those who are eligible. Some plans or programs may require a doctor’s orders for eligibility.

The majority of non-medical home health care is paid for privately by individuals and their family members. Services may be privately purchased by contacting home care and home health agencies and discussing your specific need(s) and their fee structure. To receive services through an ASAP program that subsidizes all or a percentage of the costs of non-medical services a person must meet the eligibility requirements of the ASAP. For more information contact the agencies listed on the inside cover.

**Tax Deductions and Exemptions**
If you support the individual you are caring for financially you may be able to claim them as a dependent on your tax return or
be eligible to claim the Dependent Care Tax Credit, which allows you to deduct a percentage of the costs of in-home/community based care services for the individual. You may also be able to deduct a percentage of the medical and dental costs you paid for the individual. The amount of the deduction is based on a percentage of your adjusted gross income. For more information consult an accountant or financial advisor.

**Medicare, Medigap, Medicare Advantage Plans**

**Medicare**
Medicare is a federal health insurance program for people age 65 or over, individuals with End Stage Renal Disease (ESRD) and certain people with disabilities. Original Medicare is hospital insurance (Part A) and medical insurance (Part B). Part A helps pay for medically necessary inpatient hospital care, some home health services, hospice and certain short term stays in a skilled nursing facility (nursing home) once Medicare criteria has been met. Part B helps pay services from doctors and other health care professionals, outpatient care, home health care, durable medical equipment and some preventive services. **Medicare does not pay the full cost of all health care needs including long term care.** To help cover the costs Medicare does not cover, you can purchase supplemental insurance.

**Medicare Supplement Insurance - Medigap**
Medicare supplement insurance, also known as Medigap insurance, is a special kind of health insurance coverage sold by private companies that can help pay some of the health care costs that Original Medicare does not cover such as copayments, coinsurance and deductibles. You must have Medicare Part A and Part B to have a Medigap policy. You must also pay the private insurance company a monthly premium for the policy as well as paying your monthly Part B premium. A Medigap policy is different from a Medicare Advantage Plan. A Medigap policy only supplements your Original Medicare benefits. Medigap policies generally do not cover long term care or private duty nursing.
For Medigap insurance information or for information contact:
The Massachusetts Division of Insurance
Boston Office  617-521-7777
Springfield Office  413-785-5526

Medicare Advantage (Part C)
Medicare Advantage Plans, sometimes called "Part C" or "MA Plans," are offered by private companies approved by Medicare. If you join a Medicare Advantage Plan, you still have Medicare. You will get your Medicare Part A (Hospital Insurance) and Medicare Part B (Medical Insurance) coverage from the Medicare Advantage Plan and not Original Medicare. Each Medicare Advantage Plan must follow basic Medicare regulations but may add additional benefits. However, each Medicare Advantage Plan can charge different out-of-pocket costs and have different rules for obtaining services (such as whether you need a referral to see a specialist or if you must utilize only doctors, facilities, or suppliers that are part of the plan’s network). Plans can change each year. You usually receive prescription drug coverage (Part D) through the plan. In plans that do not offer drug coverage, you must join a Medicare Prescription Drug Plan (Part D).

Medicare Prescription Drug Coverage (Medicare D)
Medicare Part D is insurance provided by private companies to help cover the costs of prescription drugs. Each plan can vary in cost and specific drugs covered. Every Medicare beneficiary must have prescription drug coverage. People with limited income and resources may qualify for “Extra Help” for paying for Medicare drug plan costs. The amount of extra help is based on income and resources. For more information or to see if you qualify for “Extra Help”, call Medicare at 1-800-MEDICARE (1-800-633-4227), (TTY) 1-877-486-2048 or visit www.medicare.gov. You may also contact Social Security at 1-800-722-1213 or www.socialsecurity.gov.

A SHINE counselor (Serving Health Information Needs of Everyone) may also assist in identifying plan options. For information on SHINE contact an agency listed on the inside cover.
**Medicare Coverage of Home Health Services**

Medicare covers the full-approved cost of home health services if **all four** of the following conditions exist:

- The individual is under the care of a physician who determines the need for services and establishes a plan of home health care.
- The care needed includes intermittent skilled nursing care, physical therapy, speech therapy, or occupational therapy.
- A physician must certify that the individual is homebound.
- The home health agency providing services participates in Medicare.

Home health services may also include medical social services, part-time or intermittent home health aide services, medical supplies for use at home, durable medical equipment, and injectable osteoporosis drugs. To determine whether services can be received under the Medicare home health benefit, the individual should speak with their physician.

**Medicare Coverage of a Skilled Nursing Facility (SNF)**

Medicare provides full coverage for skilled nursing care or sub-acute care in a facility up to 20 days and partial payment for days 21 to 100. Medicare will provide coverage if:

- The individual was admitted to the skilled nursing facility within 30 days after the individual was admitted as an inpatient to the hospital for at least 3 consecutive days.
- A doctor has decided that the individual needs daily skilled care given by, or under the direct supervision of, skilled or rehabilitation staff.
- The skilled services are in a facility that is certified by Medicare.
- The individual needs these skilled services for a medical condition that was either a hospital related medical condition or a condition that started while receiving care in the facility for a hospital related medical condition.

Your doctor may order observation services to help decide whether you need to be admitted to the hospital or can be discharged. During the time you are getting observation services
in the hospital, you are considered an outpatient – this could impact payment for care as well as post hospitalization services. It is important to find out if you are inpatient or outpatient (observation) status during your hospital visit.

For additional information on Medicare, Medigap and Medicare Advantage Plans:

- **Medicare & You**, the official government handbook, is mailed to all Medicare beneficiaries during October of each year.
- A toll-free helpline is available 24-hours a day, seven days a week to answer your questions. Call: 1-800-MEDICARE (1-800-633-4227) or TTY users call 1-877-486-2048.
- Medicare’s official consumer website: [www.medicare.gov](http://www.medicare.gov)

**Additional Helpful Websites:**
www.medicarerights.org

**Hospital Discharge**
Medicare-participating hospitals must provide discharge planning services to hospital inpatients upon request and to those inpatients who would suffer adverse consequences without discharge planning services. Medicare discharge planning includes:

- Arranging necessary post-hospital services and care.
- Educating the patient, family/caregivers and community providers about the patient’s post-hospital care plan.
- Providing a list of Medicare approved home health agencies and skilled nursing facilities.

**Notice And Appeal Rights Under Traditional Medicare:**
If you feel that you have been discharged too soon or without the necessary post-hospital services having been arranged, contact your local **Quality Improvement Organization (QIO)-MassPRO** at 1-800-252-5533, (TTY) 781-419-2502, as soon as possible to file a complaint.

You are **entitled to notice** when your hospital stay is no longer medically necessary and the hospital intends to charge you for continued stay, and that:
• You no longer require inpatient hospital care;
• You will be charged for care beyond the second day following the notice;
• The QIO will make a determination on the validity of the hospital’s finding if you remain in the hospital; and
• The determination of the QIO can be appealed.

An inpatient of a Medicare participating hospital has a right to an appeal to the QIO of a hospital’s notice of non-coverage. If you appeal, the QIO must complete its reconsideration determination and send you a written notice, including relevant time periods for filing appeals. For information visit: Center for Medicare Advocacy, Inc. www.medicareadvocacy.org.

MassHealth (Medicaid)
Medicaid is a state and federal program that purchases medical services for individuals who meet residency, income and asset eligibility requirements. In Massachusetts Medicaid is called MassHealth. MassHealth covers most of the necessary services provided by physicians, hospitals, clinics, medical equipment suppliers, therapists and some in-home services.

MassHealth (Medicaid) Coverage of In-Home/ Community Based Care
MassHealth is available to those financially and medically eligible individuals living in the community. There are several MassHealth programs which cover in-home services; each of these programs will have different eligibility requirements. An application must be filed with MassHealth.

MassHealth (Medicaid) Buy-In Programs
MassHealth Buy-In is a program for Medicare beneficiaries with low income. It allows MassHealth to pay all or part of the Medicare Part B premium for residents who are not getting other MassHealth benefits. It can also help obtain Medicare Part B for a person who has only Medicare Part A. Income and assets must fall at or below certain guidelines.
MassHealth (Medicaid) Coverage of Long Term Care Facilities
MassHealth covers long term care costs for individuals residing in long term care facilities, nursing facilities, rehabilitation hospitals and state hospitals. To be eligible, an individual must be age 65 or older, or disabled according to standards set by the Social Security Administration. An applicant must be screened and determined, based on clinical criteria, that a need for skilled nursing care exists that cannot be met in the community. Income and assets must fall at or below certain guidelines.

MassHealth (Medicaid) Coverage of Assisted Living Facilities
MassHealth may provide limited financial assistance to qualified individuals who would like to reside in an assisted living facility.

- Group Adult Foster Care program (GAFC) provides medical services for qualifying individuals who may reside in an assisted living facility. To be eligible an individual must meet income and care requirements. Also the facility must participate in the GAFC program.

- Supplemental Security Income – Category G (SSI-G) will help subsidize the rent portion of a stay at an assisted living facility. It is administered through the Social Security Administration. To be eligible an individual must meet income guidelines and be receiving GAFC services. For more information please contact Social Security by calling 1-800-772-1213 (TTY) 1-800-325-0778.

For more information about MassHealth programs contact:
MassHealth Customer Service
1-800-841-2900
TTY: 1-800-497-4648
http://www.mass.gov/eohhs/gov/departments/masshealth

Senior Care Options (SCOs)
SCOs are special insurance programs for low-income individuals over the age of 65 who are eligible for both Medicare and MassHealth. These managed care plans coordinate care between health care providers and community agencies. Services are provided through the plan’s network of providers.
Those older adults who are dual eligible - qualify for both MassHealth and Medicare - are eligible for a SCO plan. Older adults who have MassHealth Standard - but, do not qualify for Medicare - are also eligible. For more information contact a SHINE Counselor and/or visit www.massresources.org/senior-care-options

**Long Term Care Insurance**

These policies provide coverage for long term care needs including some services provided in the home as well as services received in long term care facilities, such as nursing homes, assisted living facilities or adult day centers. These policies should be purchased from a financially stable company. Check ratings of companies to be sure that they are consistently high and ask about their history of premium increases. You can find the ratings on long term care insurance companies on the following websites: www.moodys.com, www.ambest.com or www.standardandpoors.com.

For information regarding the types of long term care plans being sold in Massachusetts, contact:

**Massachusetts Division of Insurance Consumer Line**

(877) 563-4467  
TTY: (617) 521-7490  
[www.mass.gov/doi](http://www.mass.gov/doi)

**Veterans Services**

**Federal Benefits for Veterans, Dependents and Survivors**

Veterans of the United States armed forces may be eligible for a broad range of benefits and services provided by the U.S. Department of Veterans Affairs (VA). Eligibility for most VA benefits is based upon discharge from active military service under other than dishonorable conditions. In order to expedite benefits delivery, Veterans seeking a VA benefit for the first time must submit a copy of their service discharge form which documents service dates and type of discharge.
The VA provides a wide range of benefits including:

- **Health Care:** The Veterans Health Administration (VHA) offers a variety of services, information and benefits. The VHA operates an integrated health care system of hospitals, clinics, community living centers, counseling centers and other facilities. VHA is an entitlement program and is dependent on federal funding.

- **Benefits:** Veterans Benefits Administration (VBA) provides a variety of benefits and services that provide financial and other forms of assistance to Veterans, their dependents and survivors. Major benefits include Veterans Compensation, Veterans Pension, Survivor’s Benefits, health insurance, rehabilitation and employment assistance, education assistance, home loan guarantees and life insurance coverage.

- **Disability Compensation:** A monetary benefit is paid to Veterans who are disabled by an injury or illness that was incurred or aggravated during active military services. These disabilities are considered to be service connected.

- **Pension Benefit:** A low-income war time Veteran may be eligible for a pension if they meet certain service, income and net worth limits, are age 65 or older and permanently and totally disabled from conditions NOT related to military service. The veteran’s surviving spouse/widow(er) may also be eligible for a pension based on his/her level of income.

- **Aid and Attendance and Housebound:** A benefit available for those veterans and their surviving spouses who require the regular aid and attendance of another person. This is a “Pension Benefit” and is not dependent upon service-related injuries for compensation. An aid and attendance or housebound pension provides a direct monthly pension benefit to purchase care in the home including adult day health, or care in a nursing home or assisted-living facility. In order to qualify for benefits, a veteran or surviving spouse must meet certain conditions outlined by the VA including military service history, medical necessity, cost of care compared to income and assets. Details and information about this benefit can be found at www.va.gov and www.veteranaid.org.
• **Burials & Memorials:** Burial and memorial benefits are available for service members, veterans and family members. Services include internment, headstones and markers and memorial certificates as well as burial in national cemeteries. These benefits are available through the National Cemetery Administration (NCA).

• **Caregiver Services:** The VA offers services for families caring for veterans. A caregiver support line is available at 1-855-260-3274 to help connect individuals with VA services as well as offer support. For more information on VA Caregiver services visit [www.caregiver.va.gov](http://www.caregiver.va.gov).

Information about specific benefits is available at [www.va.gov](http://www.va.gov). The website features the **Federal Benefits for Veterans, Dependents and Survivors booklet** which provides a description of VA Benefits and contact information. For assistance filing the appropriate VA forms, you may contact the nearest VA regional office, medical center, clinic, or Vet center.

**Department of Veterans Affairs (VA)**
[www.va.gov](http://www.va.gov)
- Benefits 1-800-827-1000
- Health Care 1-877-222-(VETS) 8387
- Crisis Line 1-800-273-8255 Press 1
- Worcester Veterans Clinic 1-800-893-1522
- Worcester Vet Center 1-508-753 7902

**Department of Veterans Affairs (VA)**
Tel: 800-827-1000 TTY: 800-829-4833
JFK Federal Building, 15 New Sudbury St
Boston, MA 02203

**State Veteran Services**
Massachusetts Department of Veterans’ Service is a Massachusetts state agency that primarily administers MGL Chapter 115, a financial and medical benefit program for indigent veterans and their dependents.

Every city and town in Central Massachusetts has a Veterans’ Agent or is part of a district serviced by one Agent. These
Agents may assist you with both state and federal benefits. For a list of Veteran’s Agents contact your local town hall.

For more information contact any of the agencies listed on the inside cover.

**Massachusetts Department of Veterans’ Services (DVS)**  
Boston, MA 02111  
Tel: 617-210-5480  
www.state.ma.us/veterans

**Veterans Inc.**  
Worcester, MA 01605  
Tel: 508-791-1213  
Fax: 508-791-5296  
www.veteransinc.org

**Hero Homestead**  
Fitchburg, MA 01420  
Tel: 978-353-0234  
Fax: 978-345-0926  
www.veteranhomestead.org

**Montachusett Veterans Outreach Center, Inc.**  
Gardner, MA 01440  
Tel: 978-632-9601  
Fax: 978-632-9476  
http://www.veterans-outreach.org/

**Supplemental Nutrition Assistance Program (SNAP formerly Food Stamps)**  
This program is run by the Massachusetts Department of Transitional Assistance (DTA) and is intended to raise the nutritional level of low-income households. Recipients receive a monthly allowance to purchase food. There are special eligibility guidelines for individuals age 60 and over or who have a disability.

Contact your local transitional assistance office at www.mass.gov/dta or:
- DTA-Fitchburg Area Office - 978-665-8700  
- DTA-Framingham Area Office- 508-661-6600
Services for Individuals with Specialized Needs

Services for Individuals with Disabilities

Massachusetts Office on Disability
Voice/TTY: 800-322-2020
www.mass.gov/mod/
Services: Information & Referral and Client Service Program which assists people with disabilities by advocating for the services they need.

Center For Living and Working
Tel: 508-798-0350
TTY: 508-755-1003
Video Phone 508-762-1164
www.centerlw.org
Services: Personal care attendant services, independent living skills training, advocacy, peer counseling, deaf independent living services, housing services, information and referral, emergency intervention

Easter Seals Massachusetts
Tel: 800-244-2756
TTY: 800-564-9700
www.eastersealsma.org
Services: Equipment Loan Program, information and referral, home health services, Assistive Technology Loan Program.

Massachusetts Department of Conservation and Recreation Universal Access Program
Tel: 413-545-5353
TTY: 413-577-2200
www.mass.gov/eea/agencies/dcr/
Services: Provides outdoor recreational opportunities in Massachusetts State Parks for visitors of all abilities.
Services for Individuals Who Are Blind or Visually Impaired

MAB Community Services  
Tel: 508-854-0700  
Tel: 888-613-2777  
www.mabcommunity.org  
**Services:** Provides information, and services including vision rehabilitation and transportation.

Massachusetts Commission for the Blind  
Tel: 800-263-6944 (MA only)  
Tel: 508-754-1148  
www.mass.gov/mcb  
**Services:** Provides social, vocational rehabilitation and mobility training, audio books and magazines, other adaptive equipment, resources and information.

Services for Individuals Who Are Deaf or Hard of Hearing

Massachusetts Commission for the Deaf and Hard of Hearing  
Voice/TTY: 413-788-6427  
Video Phone: 508-762-1124  
For an interpreter: 800-249-9949  
www.mass.gov/mcdhh  
**Services:** Provides advocacy, information and referral, case management, interpreting services, and educational programs.

Massachusetts Relay Service  
TTY: 711 or 800-439-2370  
Spanish TTY: 866-930-9252  
Voice and Hearing Users: 711 or 800-439-0183  
Speech to Speech: 866-645-9870  
www.mass.gov/eopss/agencies/massrelay/  
**Services:** Provides a 24/7 service enabling hearing people or people who do not use test telephone (TTY) to communicate over regular telephone lines with people who are deaf, hard-of-hearing or speech-disabled. A Relay Operator will complete your call, and will stay on the line to relay messages electronically via a TTY, or verbally to
people who can hear. The caller or recipient must be from Massachusetts.

New England Homes for the Deaf
Tel: 978-774-0445
TTY: 978-739-4010
Video Phone: 978-767-8784
www.nehd.org
Services: Offers a continuum of care to Deaf and Deaf/Blind older adults. Services include independent living, rest home, skilled nursing community, deaf senior centers, inpatient/outpatient rehabilitation and hospice care.

Services for Individuals with Developmental and/or Intellectual Disabilities

ARC Community Services, Inc.
Tel: 978-343-6662
http://www.arcofopportunity.org/
Services: Provides vocational evaluation and training, recreation, advocacy, information and referral, and elderly outreach visits.

Seven Hills Adult Day Health
Tel: 508-983-1336
www.sevenhills.org
Services: Medically-based adult day program for elders facing declining health, allowing them to live independently in the community.

Seven Hills–Foundation
Tel: 508-755-2340
www.sevenhills.org
Services: Vocational evaluation and training, social, recreational, advocacy, information and referral and elderly outreach visits.

Department of Developmental Services (DDS) Services:
Tel: 617-727-5608
DDS-North Central 978-342-2140
DDS-Worcester - 508-792-6200
DDS-South Valley Area-Milford - 508-634-3345
Services for Individuals with Mental Illness

**Massachusetts Department of Mental Health (DMH)**
Tel: 800 221-0053  
TTY: 617-727-9842  
DMH North Central Site - 978-353-4400  
DMH South Central Site - 508-887-1100  
DMH Worcester Site - 508-887-1160  
www.mass.gov/dmh

**Services:** Provides clinical care, supportive services including inpatient services, residential treatment, support, day services, outpatient services, medication management, educational employment, and rehabilitation opportunities.

**Illness Specific Organizations**
The following agencies promote health education and information on specific illnesses.

**AIDSinfo**  
www.aidsinfo.nih.gov

**Amyotrophic Lateral Sclerosis Association of MA (ALS)**  
webma.alsa.org

**American Cancer Society**  
www.cancer.org

**American Diabetes Association**  
www.diabetes.org

**American Heart Association**  
www.heart.org

**American Lung Association of Massachusetts**  
www.lung.org
American Parkinson’s Disease Association - MA Chapter
www.apdama.org

American Stroke Association - A Division of the American Heart Association

Arthritis Foundation
www.arthritis.org

Brain Injury Association of Massachusetts
www.biama.org

CancerCare
www.cancercare.org

National Alliance for the Mentally Ill of Central MA
www.namimass.org

Massachusetts Commission for the Blind
www.mass.gov/mcb

National AIDS Hotline
www.cdc.gov/hiv

National Cancer Institute
www.cancernet.nci.nih.gov

National Council on Alcoholism and Drug Dependence
www.ncadd.org

National Kidney Foundation of MA, RI, NH & VT, Inc
www.kidneyhealth.org

National Multiple Sclerosis Society
www.nationalmssociety.org

National Osteoporosis Foundation
www.nof.org

National Stroke Association
www.stroke.org
Alzheimer’s Disease and Related Dementias

Dementia is a term which describes a range of symptoms which impact an individual’s ability to perform daily tasks due to a decline in memory or other thinking skills. Symptoms may include:

- Memory loss that interferes with daily life
- Decline in the ability to perform routine tasks
- Difficulty in learning new information
- Difficulty communicating and understanding language
- Impairment in judgment
- Loss of ability to focus or pay attention
- Difficulty with visual perception
- Personality and mood changes

It is important to have a full medical examination to determine if any of these symptoms are due to a treatable condition (ex. urinary tract infection, dehydration, B12 deficiency). If a treatable condition has been ruled out, it is important to have the individual evaluated by a specialist, such as a neurologist or geriatric psychologist, to determine an accurate diagnosis and the best course of treatment.

As the disease progresses, people with Alzheimer’s disease and related dementias become unable to care for themselves. Cognitive decline eventually leads to the failure of other systems in the body. The rate of progression of Alzheimer’s disease and related dementias varies from person to person. Although Alzheimer’s disease is the most talked about form of dementia, other dementias include but are not limited to; Vascular Dementia, Dementia with Lewy-Body, Frontotemporal Dementia,
Mixed dementias, Parkinson’s Disease Dementia, Huntington’s Disease, Wernick-Korsakoff Syndrome and Normal Pressure Hydrocephalus.

Wandering
Wandering is one of the most life-threatening behaviors associated with Alzheimer’s disease and related dementias. Several programs and technology solutions exists to help locate someone who may wonder and get lost. In the state of Massachusetts, a Silver Alert can be issued for a missing older adult with dementia. Silver Alerts use a wide array of media outlets to notify the public. When an individual wanders and cannot be located, notify the local police department.

For more information on specific dementias contact:

**Alzheimer’s Association of Massachusetts/New Hampshire**
128 Providence St Worcester, MA
Alzheimer’s Association HelpLine - 800-272-3900
Central Regional Office: 508-799-2386
[www.alzmass.org](http://www.alzmass.org)

**National Stroke Association** (Vascular Dementia)
[www.stroke.org](http://www.stroke.org)

**Lewy Body Dementia Association, Inc.**
[www.lbda.org](http://www.lbda.org)

**National Parkinson’s Foundation**
[www.parkinsons.org](http://www.parkinsons.org)

**The Association for Frontotemporal Degeneration**
[www.theaftd.org](http://www.theaftd.org)

**Creutzfeldt-Jakob Disease Foundation**
[www.cjdfoundation.org](http://www.cjdfoundation.org)

**Hydrocephalus Association**
[www.hydroassoc.org](http://www.hydroassoc.org)

**Huntington’s Disease Society of America**
[www.hdsa.org](http://www.hdsa.org)
Conversations on End-of-Life Issues
Discussing health, personal and financial wishes is the most important thing an individual can do to assure that their plans will be followed. The discussion will also help to decrease the stress of those who will be involved in making the decisions.

What to Ask the Individual
- Who do you want to make health care decisions for you, if you are not able to make your own? Do they know what your wishes are?
- Do you have an updated Health Care Proxy?
- Do you want to be hospitalized, stay at home or somewhere else while you are seriously ill?
- What medical treatments and care are acceptable?
- Do you have fears/concerns about any particular medical treatment?
- Do you have religious or spiritual beliefs that affect decisions about your care?
- What health and prescription insurance is in place?
- Where are important medical, financial and legal records kept?
- Do you have an updated Power of Attorney?
- Do you have an updated will?

Be aware that Health Care Proxy laws and protocols, as well as the legal status of Personal Wishes Statements, vary from state-to-state. If you spend time in another state, you should investigate the legal requirements of that state.

Medical Orders for Life Sustaining Treatment (MOLST)
A MOLST is a medical order form, similar to a prescription, with written instructions about certain life-sustaining medical treatments from a physician, nurse practitioner or physician.
assistant. These forms are used to inform other health professionals - such as emergency responders and nurses - of the individual’s wishes involving life-sustaining treatment. These voluntary MOLST forms are for individuals of any age with an advanced illness. For more information visit www.molst-ma.org

Hospice and Palliative Care
Hospice services address the spiritual, emotional, social and physical needs of patients and their families who are facing a terminal illness. These services are provided regardless of age or illness. It is suggested that services begin when the patient’s life-expectancy is 6 months or less. An individual can receive hospice services in a variety of care settings, including in the home. Hospice care is covered under Medicare (Part A) with a physicians order.

Palliative care is any form of medical care or treatment that aims to improve quality of life, by reducing or eliminating pain and other physical symptoms or slowing the disease process rather than focusing on a cure. It can be used as part of the hospice program and in some circumstances it can be used in conjunction with curative therapy.

Additional Helpful Websites:
www.betterending.org Better Ending Partnership – Personal Wishes Statement/Health Care Proxy
www.hospicefed.org Hospice and Palliative Care
http://forums.grieving.com/ Online grief support

For more information contact any of the agencies listed on the inside cover.

Driving and Transportation

Driving Safety
Discussing an older person’s driving safety can be a very difficult conversation to have. Driving represents freedom and allows an individual to remain independent. It is important to know when an individual is no longer safe to drive.
Risk factors for impaired driving ability include:
- Illness and medications that cause a decline in perception, mobility and understanding
- Poor vision—especially night vision, failing eyesight, depth perception
- Hearing problems
- Slow reflexes
- Memory and/or cognitive problems
- Physical limitations
- Poor concentration, drowsiness or fatigue
- Lack of judgment and awareness

It may be appropriate to ride with the individual to observe if any of the following warning signs appear:
- Incorrect signaling
- Trouble navigating turns
- Moving into a wrong lane
- Confusion at exits
- Parking inappropriately
- Failing to notice traffic signs
- Driving at inappropriate speeds
- Delayed responses
- Scraps or dents on the car, garage, or mailbox
- Getting lost in familiar places
- Ticketed moving violations or warnings
- Car accidents
- Confusing brake and gas pedas

With some situations, small adaptations made to the vehicle, such as extended mirrors, can improve driving ability. In some instances limiting the individuals driving, such as only driving in day-time hours, close-to-home or on off-peak driving times, may allow the individual to continue driving safely. It is important to review the individual’s medications for certain side effects and have up-to-date eye and hearing evaluations. For some individuals, these small changes may not improve the situation. As a caregiver, it may be difficult to acknowledge when an individual is no longer safe to drive and to take the necessary steps to convince the individual to give up the keys.
Some ways to limit or stop a person from driving include:

- Friends, neighbors, relatives or caregivers can offer to drive the individual to appointments and social events.
- Arrange to have prescription medicines, groceries and meals delivered.
- Arrange for social visits from friends or volunteers.
- Research local transportation options in your community.

In situations where the person refuses to give up driving but is becoming a danger, you may have to take more extreme measures. Caregivers often achieve better results by asking for help from professionals outside the family. Having an independent driving evaluation may provide families with additional input and support. Some health care professionals may suggest the person stop driving, write a prescription to stop driving or set up a no driving contract. Family members also have the right to contact the Massachusetts Registry of Motor Vehicles (RMV) and report their concerns, whereupon an assessment will be conducted through their Medical Affairs branch.

Where to Send Reports:

**Massachusetts Registry of Motor Vehicles**

Director of Medical Affairs  
P.O. Box 55889  
Boston, MA 02205-5889  
Attn: Director of Medical Affairs  
Fax: 857-368-0802  
Tel: 857-368-8020  
[www.mass.gov/rmv](http://www.mass.gov/rmv)

**Driving Evaluations**

There are organizations that will conduct a driving evaluation for individuals. These evaluations will assess the driving abilities of the individual who may be at risk for an accident. They may also provide information on how vehicle adaptations may improve the individuals driving. These evaluations may be conducted by simulations or in a vehicle. The results of the evaluations will not be shared with the Registry of Motor Vehicles. Costs for these evaluations may vary.
There are also online driving evaluations that the individual will be able to perform in their home. For more information visit www.SeniorDriving.AAA.com or www.AARP.org/drive

For more information contact the agencies listed on the inside cover.

**Disabled (Handicap) Placard/Plate**
There is one application for disability plates, placards and disability veterans’ plates. The form can be obtained at any full service registry of motor vehicle branch. You may also download the application at: www.massrmv.com. Go to the “Forms and Publications” section.

A portion of this application needs to be completed by a Massachusetts licensed physician, nurse practitioner, or chiropractor. If applying for Disability Veteran Plates, the application must be accompanied by a DV plate letter from the Veteran’s Administration. Take the completed form and supporting documents to the nearest full service RMV branch or mail to:

**Attn: Medical Affairs Branch**
**Massachusetts Registry of Motor Vehicles**
P.O. Box 5589 Boston, MA 02205-5889

**Community Transportation**
Individuals must first identify their transportation needs, whether they are medical or non-medical. Transportation providers may offer varying levels of assistance to the rider including:

- Door-through-door; driver will enter the home to escort the individual into the vehicle
- Door-to-door; driver will assist the individual from outside their door into the vehicle
- Curb-to-curb service; individual must be able to enter and exit vehicle independently

Many transportation providers use wheelchair accessible vans, and some offer escort services to medical appointments. Some medical transportation services will require paperwork to be filled out by the individual’s primary care physician. Most providers
require advanced reservations. Some offer services in a limited geographic area while others will travel from Central Massachusetts to Boston medical facilities.

Many towns are covered by a Regional Transit Authority. These organizations provide fixed route bus services as well as Americans with Disabilities (ADA) paratransit services. Individuals who are unable to utilize the fixed route service due to a disability may qualify for ADA paratransit service. For more information about ADA paratransit services contact the Regional Transit Authority in your area. There are two Regional Transit Authorities in Central Massachusetts. For Southern and Central Worcester County, contact Worcester Regional Transit Authority at 508-752-9283 or www.therta.com. For Northern Worcester County contact Montachusett Regional Transit Authority at 1-800-922-5636 or www.mrta.us.

Organizations that deal with specific illnesses, MassHealth, private organizations and volunteer agencies may provide subsidized or free rides or taxi vouchers. The local senior center or council on aging may be a primary source either for transportation or information about local transit services. Non-medical home care agencies may also provide transportation for individuals as part of a package of services. The transportation services and fee structures that for-profit agencies offer can vary. If the individual is a veteran, you may want to contact the local Veterans Agent for information about transportation within VA medical systems.

An individual, who is too frail to use the standard transportation services, can arrange “medi-van” services through most ambulance companies. The cost would not be covered by insurance.

For more information contact any of the agencies listed on the inside cover.

Community Programs

Are You OK- Telephone Reassurance Program
Are You OK(R U OK) is a telephone calling system for individuals in the community who need to be checked upon daily.
Call your local police department to find out if such a program exists in your community.

**File of Life/Vial of Life**

Some communities offer a File of Life or a Vial of Life program. The file contains your important medical information for Emergency Medical Technicians (EMTs) in case of an emergency. The File of Life is a red plastic magnetic file folder that attaches to your refrigerator. The Vial of Life is a large plastic container with a cover. Also available is a personal size File of Life to carry with you. Contact your local fire, police or sheriff’s department to find out if they are available.

**Multicultural Programs**

Multicultural programs provide specialized referral services for individuals from diverse cultures. Services offered by multicultural programs may include interpretation and translation, social opportunities, refugee resettlement, immigration services, advocacy, outreach and support services. There are multiple programs throughout the area designed to meet the needs of a variety of cultural groups.

For specific information on these programs contact the agencies listed on the inside cover.

**Lesbian Gay Bisexual and Transgender (LGBT) Aging**

There are organizations that provide services and supports for LGBT older adults and caregivers. Services include referrals, support groups, social gatherings and LGBT lunch clubs.

**Worcester LGBT Elder Network (WLEN)**
Tel: 508-756-1545
WLEN is a collaboration of Elder Services of Worcester Area, Central Massachusetts Agency on Aging and the Worcester Senior Center. The program provides information, support and referrals for LGBT older adults and caregivers. The program also sponsors a lunch club and social opportunities.

**LGBT Aging Project**
Tel: 857-313-6590
[www.lgbtagingproject.org](http://www.lgbtagingproject.org)
A non-profit organization dedicated to ensuring that lesbian, gay, bisexual and transgender older adults have equal access to the life-prolonging benefits, protections, services and institutions that their heterosexual neighbors take for granted.

**Councils on Aging/Senior Centers**
Senior Centers are focal points within communities where individuals can meet together, receive services, and participate in activities. Services offered by Senior Centers vary. Some Senior Centers offer a lunch time meal for local residents and some may have outreach workers that provide a vital link to homebound older adults. Some Senior Centers may be located in a Community Center. Not every city/town in Central Massachusetts has an established Senior Center but every town will have a Council on Aging.

For information on your local senior center/COA contact any of the agencies listed on the inside cover.

**Prescription Drug Assistance/ Health Insurance Assistance**

**Prescription Advantage**
Prescription Advantage is a state prescription drug insurance plan for older adults and people with disabilities in Massachusetts. For those with Medicare Prescription Advantage provides supplemental assistance to help pay for copays and out of pocket expenses associated with prescription drugs. For more information call: Prescription Advantage at 1-800-Age-Info (1-800-243-4636), or access information at www.800ageinfo.com.

**The Partnership for Prescription Assistance**
The Partnership for Prescription Assistance, (PPA) sponsored by America’s pharmaceutical research companies is a private sector effort to help qualifying patients who lack prescription coverage get the medicines they need. The PPA offers a single point of access to public and private patient assistance programs including programs offered by pharmaceutical companies. To access the PPA you can call toll-free 1-888-477-2669 or visit www.PPARx.org.
Rx Assist
Rx Assist is a website that offers information about free and low cost medicine programs and other ways for individual’s to manage their medication costs. Visit www.rxassist.org for more information.

Massachusetts College of Pharmacy and Health Sciences (MCPHS) Pharmacy Outreach Program
Pharmacists and Case Managers help individual’s access prescription medications by providing information on assistance programs, and lower cost alternative medications. Pharmacists answer questions about drug interactions, how to take medications, and any other medication-related questions. For more information call 866-633-1617 or visit http://www.mcphs.edu/impact/community-service-programs/pharmacy-outreach-program

Serving The Health Information Needs Of Everyone (SHINE)
The SHINE Program (Serving Health Information Needs of Everyone) is a state program that provides free health insurance information, counseling and assistance to Massachusetts residents with Medicare and their caregivers. Contact SHINE to locate a trained volunteer counselor near you: 1-800-Age-Info (1-800-243-4636) Option 3 for TTY 508-422-9931.

BenefitsCheckUp
Benefits Check up, a program of the National Council on Aging (NCOA), is a web-based service designed to help individuals find the right benefit programs to meet their needs. This site contains a free, confidential screening tool to determine eligibility for state and federal programs. Visit www.benefitscheckup.org

Choosing a Medical Provider
A medical provider can be an ally in times of illness and good health. Carefully choose a medical professional who is willing to talk to everyone involved with the individual’s care. In order to communicate with medical providers about the specifics of the individual’s care you may need to have the individual sign a medical release form.
Building a Partnership with Medical Providers

- Make a list of concerns
- Make sure the individual can hear and see as well as possible
- Consider going to the appointment with the individual
- Update the provider on any new symptoms or concerns
- Be honest
- Ask questions and stay focused on medical issues
- Take notes or get written or recorded information
- Talk to other members of the health care team
- Share the individual’s medical history and habits
- Bring a list of the individual’s current medications and dosages

Many times physical changes in an individual are attributed to aging, when they maybe signs of medication interaction or mismanagement, dehydration or an oncoming illness. When significant changes occur, an evaluation may be needed and a referral to a specialist may be necessary.

Geriatric Medical Specialists

Geriatricians are physicians with expertise in caring for older adults; they are initially trained in family practice or internal medicine and then complete at least one additional year of fellowship training in geriatrics.

Geriatric Neurologists focus on the evaluation and treatment of neurological diseases and disorders.

Geriatric Psychiatrists specialize in the diagnosis and treatment of mental and behavioral health illnesses that may occur in older adults including but not limited to, depression, anxiety, hoarding and behavioral issues related to dementia.

Geropsychologists are clinical psychologists with a specific focus on changes in the personality, cognition, mental health and well-being of older adults.

For more information contact any of the agencies listed on the inside cover.
Mental Health and Older Adults

Older adults, family, friends and health care professionals often fail to recognize the symptoms of treatable mental illness in older people. Mental illness is not a normal aspect of aging. Grieving, loneliness, physical changes, medications, and even poor nutrition can all trigger mental health issues such as anxiety and depression. Warning signs may include:

- Unexplained changes in personality and behavior
- Chronic sleep problems
- Difficulty concentrating
- Changes in appetite
- Excessive worrying
- Withdrawal from family, friends and/or normal activities
- Complaints of fatigue and/or chronic aches or pains
- Agitation

Mental illness can be accurately diagnosed and treated. If you suspect an individual may be suffering from a mental illness, encourage them to seek help, either through their physician or a mental health care center with geriatric professionals. Speak with the individual's primary care physician to locate geriatric mental health services.

Managing Medications

Medication management is critically important in preventing adverse health problems. When you are managing medications for an individual remember the following:

- Keep an ongoing up to date list of all prescription and over the counter medications
- Bring this list to all medical appointments
- Watch for reactions to medications and report these changes to the doctor
Utilize a medication reminder system such as a pill box, calendar or a medication dispensing unit

Additional Helpful Websites:
www.rxlist.com RX List Drug Name Index

Assuming Control of Legal/Financial Matters
Help the individual plan ahead by having a conversation about financial and legal issues.

- Assist the individual in putting his/her affairs in order while they are able to do so.
- Have the individual designate trusted people to manage health, financial and legal affairs if it becomes necessary.
- Know where all important papers and documents such as a will, bankbooks, insurance policies, deeds, titles, passwords, etc. are located.

There are several ways in which another person can legally manage an individual’s affairs:

- **Restricted Bank Accounts**
  Co-signatory accounts require two signatures for withdrawal (unless the individual becomes incompetent and cannot sign). Some restricted accounts have permanent withdrawal orders (the bank issues a monthly allowance to the individual) and/or deposit orders such as direct deposit of benefit checks.

- **Representative Payee For Social Security**
The Social Security Administration can work with the individual to appoint a person or an organization as a “payee” to receive and cash the monthly public assistance checks (Supplemental Security Income (SSI), Social Security, Veteran’s Benefits) for a recipient deemed incapable of managing his/her own funds.

- **Power of Attorney**
Powers of Attorney are legal documents, which give an individual called an Attorney-In-Fact (usually a spouse, other relative or friend) the power to act on behalf of the “principal” (the person appointing the proxy) to manage
all or a specific part of his/her financial affairs. The principal must be competent when this appointment is made. Also, the principal does not lose his/her legal right to act on his/her own behalf. The authority given can range from general powers, allowing the Attorney-In-Fact to handle the person’s entire estate, to limited powers such as handling the checking account only. A “Durable Power of Attorney” continues the authority beyond the principal’s incompetence. The principal may choose to execute a Springing Durable Power of Attorney, which becomes effective only when the event described in the document, such as the principal has become incompetent, occurs.

- **Conservatorship**
  Conservatorship is a legal process by which a person is appointed by the court to handle the real estate/property and financial matters of the ward who has become unable to do so. A petition for conservatorship must be filed in Probate Court.

- **Guardianship**
  Guardianship is a legal process in which the probate court appoints one or more individuals to handle the personal decisions such as living arrangements and medical care of a person determined to be incompetent. The powers delegated to a guardian can vary, so it is advisable to seek professional advice. A petition for guardianship must be filed in Probate Court.

- **Health Care Proxy/Advance Directive**
  An advance directive is a document you prepare to inform others of your wishes should you become medically incompetent to make your own health care decisions. A health care proxy is the only advance directive legally recognized in Massachusetts. Under the Massachusetts Health Care Proxy Law you are able to designate an individual you trust to make medical decisions for you if you become unable to do so. This person is referred to as your agent. Health care providers and facilities must abide by the decisions of your agent as if you were making the decisions yourself.
Although the form is a legal document, you do not need an attorney to complete one. Forms and instructions are readily available in hospitals, nursing homes and online. It is important for everyone to have a copy of the patient’s Health Care Proxy, including his/her doctors and hospital, and that it is in the patient’s chart.

- **Living Will**
  A Living Will is a set of written instructions that outline the patient’s health care wishes at the end of life. While not legally recognized in Massachusetts, it is a useful guide for an individual’s health care provider and agent.

- **Trust**
  A trust is a legal document through which a trustee holds assets for the benefit of another (beneficiary). There are many types of trusts, and legal advice should be sought.

**Legal Resources**
There are many organizations and private attorneys who specialize in issues related to older adults including public benefits, guardianship, home protection, tenant rights, foreclosure, bankruptcy, fraud and scams, and elder law. If you suspect someone is a victim of fraud and/or scams contact your local police department as well as the District Attorney’s Office and the Attorney General.

**Worcester County District Attorney**
Tel: 508-755-8601
[www.worcesterda.com](http://www.worcesterda.com)
**Services:** Provides outreach and prevention education to seniors and caregivers on a variety of topics such as scam, fraud, identity theft and elder abuse prevention. Works with the Protective Services agencies throughout Worcester County to prevent and investigate elder abuse and exploitation.

**Massachusetts Attorney General Elder Hotline**
Tel: 888-243-5337
[www.mass.gov/ago](http://www.mass.gov/ago)
**Services:** Provides information on a variety of issues including but not limited to debt and debt collection practices,
health insurance, home improvement, landlord/tenant issues, long term care insurance, fraud, scam awareness and telemarketing.

**Jewish Family and Children Service**  
Worcester, MA 01609  
Tel: 508-755-3101  
[www.jfcsboston.org](http://www.jfcsboston.org)  
**Services:** Provides consultation for questions about conservatorship or guardianship.

**Community Legal Aid Massachusetts**  
Tel: 855-252-5342  
TTY: 508-755-3260  
[www.communitylegal.org](http://www.communitylegal.org)  
**Services:** Provides free legal counseling to those 60 years of age and older in greatest economic and social need. Counseling is provided in the following areas: public benefits, housing, health care, Medicare, protective services, and nursing home residents’ rights.

**National Academy of Elder Law Attorneys, Inc. (NAELA)**  
Tel: 703-942-5711  
[www.naela.org](http://www.naela.org)  
**Services:** A nonprofit association that assists lawyers, bar organizations and others who work with older clients and their families. Offers referrals to elder law attorneys.

**County Bar Associations**  
**Services:** Professional associations of lawyers that will handle legal issues including bankruptcy, mortgage foreclosures, wills, divorces, custody, and evictions. Services are provided at a reduced rate to those who are deemed financially eligible. Bar Associations also provide legal referral services.

**Worcester County Bar Association**  
Tel: 508-752-1311  
Worcester, MA  
[www.worcestercountybar.org](http://www.worcestercountybar.org)
Understanding the Older Adult’s Finances
Whether an individual is to be cared for in their home or at a facility it is important to take into account their financial situation, including their expenses, income and assets. Proper financial planning will require you to consider the following questions:

- What funds are available to pay for necessary expenses?
- Is the individual eligible for public benefits?
- Are you familiar with the older adult’s financial resources such as personal assets, pensions, annuities, Social Security, SSI, and Veterans’ pensions?

Check with an attorney, accountant, or other qualified professionals regarding financial planning.

Pension Plan Assistance
If you are confused about an elder’s rights with regard to a specific pension plan there are places to turn. Details should first be sought from the individual’s employer who originally offered the pension plan. An agency that you can turn to for clarification is:

N. E. Pension Assistance Project
Tel: 617-287-7307
Tel: 888-425-6067
Fax: 617-287-7080
Boston, MA 02125-3393
www.umb.edu/pensionaction
Email: nepap@umb.edu
Services: Offers free, confidential individual counseling and assistance to help you understand your rights under pension law and claim the benefits you have earned.

Social Security Retirement Benefits
Social Security is a federally mandated program available to most Americans of retirement age who have contributed to the Social Security system. Monthly benefits are paid to workers upon retirement and to their dependents and/or survivors if eligibility requirements have been met.

Supplemental Security Income (SSI)
Supplemental Security Income provides a monthly income for individuals who have low income and limited resources and who are also at least 65 years of age or disabled or blind. Call your local Social Security Administration for more information.

Supplemental Security Disability Income (SSDI)
This federal program provides a monthly income for people who cannot work because of a medical condition that is expected to last at least one year or result in death. Benefits are based on the amount of time an individual worked and how much money they have already paid into the system. Financial situation is not considered in determining benefits.

Social Security Administration Offices
The Social Security Administration has a toll free number to respond to consumer inquiries. Answers to frequently asked questions are available on an automated system 24 hours a day/7 days a week, and a customer representative is available Monday through Friday, 7:00AM-7:00PM. Service is available in multiple languages.

Social Security Teleservice Center
Tel: 800-772-1213
TTY: 800-325-0778
www.socialsecurity.gov
The Social Security offices of Central Massachusetts are found at the following locations:

**Fitchburg Office**  
Tel: 877-319-0728  
TTY: 800-325-0778  
**Serving:** Ashby, Bolton, Fitchburg, Harvard, Lancaster, Leominster, Lunenburg, Sterling, Townsend

**Framingham Office**  
Tel: 866-964-7589  
TTY: 800-325-0778  
**Serving:** Franklin, Hopedale, Medway, Milford

**Gardner Office**  
Tel: 877-628-6580  
TTY: 978-360-2112  
**Serving:** Ashburnham, Baldwinville, Hubbardston, Gardner, Princeton, Templeton, Westminster, Winchendon

**Lowell Office**  
Tel: 1-877-746-9850  
TTY: 978-458-5702  
**Serving:** Ayer, Groton, Pepperell

**Woonsocket Office**  
Tel: 877-229-3542  
TTY: 401-765-1620  
**Serving:** Bellingham, Blackstone, Mendon, Millville

**Worcester**  
Tel: 866-331-9069  
TTY: 800-325-0778  
**Serving:** Greater Worcester County

**Living At Home**  
Whether you are living in your own home or renting an apartment many benefits exist.
Financial Assistance for Private Home Owners

Homeowner Options for Massachusetts Elders (HOME)
Tel: 800-58-ELDER
www.elderhomeowners.org
Boston, MA 02111

Services: A comprehensive housing counseling service for older homeowners dedicated to protecting the equity of low and moderate income elders. Counselors are available to assess the elder's current situation, including foreclosures, and discuss future options. Some financial arrangements may allow an older homeowner to convert some of the value of his/her home into usable income.

Some financial options for home ownership are listed below. Seek assistance from a professional before making any final decisions.

- **Reverse Mortgage** is a way to convert your home equity into cash. The loan is paid out in monthly installments, in one lump sum, or as a line of credit. The homeowner maintains ownership. To qualify, you must be 62 years of age or older and own your home (or have very little mortgage left). The loan must be repaid when the borrower no longer lives in the home. In the event of death, heirs can choose to repay the loan and keep the house, or sell the house and repay the loan. For more information visit [www.hud.gov](http://www.hud.gov).

- **Sale/Leaseback Plan** provides that the house is sold with the owner receiving from the buyer the rights to a lifetime lease at a reasonable rent.

- **Life Estate** refers to when an older adult transfers ownership of their property to another individual but still remains in control of the property until their death.

- **Refinancing Options** include long term financing through a first or second mortgage.
• **Equity loans** can be attained where a line of credit is approved for the owner to use as needed with various terms of repayment and application costs.

• **Tax Abatement (Exemption) And Deferral** arrangements vary by city/town. Contact your city/town assessor for local information.
  
  o **Tax Abatement (Exemption)** is a reduction of property taxes, which cities/towns offer to individuals under certain circumstances.
  
  o **Tax Deferral** permits homeowners to delay payment on property taxes. As opposed to an exemption, these unpaid taxes must eventually be paid.

### Homestead Act

The Massachusetts Homestead Act is a law which provides protection of an individual’s primary residence from unsecured creditors’ claims. There is an automatic homestead protection of one hundred and twenty-five thousand dollars ($125,000) with respect to a home that does not declare a homestead exemption with the Registry of Deeds. In order for homeowners in Massachusetts to protect the value of their property up to five hundred thousand dollars ($500,000) you must file a document called a “Declaration of Homestead”. The form is filed at the Registry of Deeds in the county or district where the property is located, referencing the title/deed to the property.

For more information regarding the Homestead Act or other legal housing issues, please visit [www.sec.state.ma.us](http://www.sec.state.ma.us)

### Subsidized Housing / Voucher Program

There are programs for those individuals who can live independently in an apartment but are financially unable to pay their own rent. Subsidized housing provides assistance for low to moderate income individuals. Programs include private and government owned housing developments or voucher programs. Subsidized housing developments offer rental apartments below market value or at a percentage of the individual’s income. The voucher program allows for an individual to receive a voucher, for a fixed dollar amount, which is then applied toward their
monthly apartment rent. The voucher amount stays the same regardless of the total apartment rental amount.

**If the program is being offered through the federal or state government it must meet the basic housing standards.**

Additional Helpful Websites:
www.hud.gov US Department of Housing and Urban Development
www.mass.gov/dhcd Massachusetts Department of Housing and Community Development

For more information on subsidized housing contact one of the agencies listed on the inside cover.

Energy Services
The following programs provide subsidized or free programs to help meet heating/cooling and utility costs:

Utilities
Many gas, electric and telephone companies offer discounted utility rate programs for financially eligible individuals. Call your local vendor and see if they have such a program and their specific eligibility requirements. Free cell phones and minutes may also be available for income eligible individuals. For more information contact an agency listed on the inside cover.

Weatherization
There are agencies that can assist with the weatherization of homes and apartments. This work includes insulation, weather-stripping and caulking for your doors and windows, hot water pipe insulation and duct wrap.

Heating System Programs
These programs provide assistance to individuals with heating emergencies. Some of these agencies can replace heating systems if they are found to be unsafe or inoperable.

Fuel Assistance
Low Income Home Energy Assistance Program (LIHEAP), commonly referred to as Fuel Assistance, is a program available to low income individuals and families to help pay their heating bills during the winter. Fuel Assistance is based on the gross
household income and the heating costs for a given year. Even those who rent may be eligible for Fuel Assistance if heating costs are not included in monthly rent.

For more information on **weatherization, heating system programs and fuel assistance** contact the agency in your area:

Auburn, Boylston, Brookfield, Charlton, Douglas, Dudley, East Brookfield, Holden, Leicester, Millbury, North Brookfield, Oakham, Oxford, Paxton, Rutland, Southbridge, Spencer, Sturbridge, Sutton, Warren, Webster, West Boylston, West Brookfield, Worcester contact:

**Worcester Community Action Council**
Worcester, MA 01608
(508)754-1176, Ext. 110 Local (800)545-4577 Toll Free


**New England Farm Workers’ Council**
Fitchburg, MA 01420
Tel: 978-342-4520

Bellingham, Blackstone, Grafton, Hopedale, Medway, Mendon, Milford, Millville, Northbridge, Shrewsbury, Upton, Uxbridge contact:

**South Middlesex Opportunity Council (SMOC)**
Framingham, MA 01702
Local: 508-620-1230 Toll Free: 800-286-6776

Groton and Pepperell contact:

**Community Teamwork, Inc.**
Lowell, MA 01852
Tel: 978-459-6161

Franklin contact:

**Self Help, Inc.**
Attleboro, MA
Tel:508-226-4192

**Safety in the Home**
To help individuals remain safely in their own homes the following items should be addressed:
All Areas of the Home

- Replace all frayed or cracked cords and place them out of the flow of traffic
- Place all heaters where they cannot be knocked over, away from curtains, rugs, furniture or newspaper
- Do not overload extension cords
- Make sure there is a light switch located near the entrance of each room
- Make sure all runners and small rugs are slip-resistant
- Replace any worn or loose carpeting, treads or risers on stairs
- Paint outside steps with rough textured paint or use abrasive strips
- Make sure the stairs and hallways are well lit
- Install handrails on stairs for support
- Keep pathways and stairs clear of clutter
- List, or program into the telephone, emergency numbers
- Consider having an Personal Emergency Response System (PERS)
- Establish an emergency exit plan

Kitchen Area

- Place items used daily within easy reach
- Use a grabber for items placed out of reach
- Use a stable step stool with a handrail
- Make sure that long loose fitting sleeves are not worn while cooking
- Ensure that the gas range or the oven is not used to heat the home

Bathrooms

- Equip bathtubs, showers and floors with non-skid surfaces
- Place stable grab bars in the bathtubs and showers
- Install stable shower seats or transfer benches
- Use a raised toilet seat and install grab bars beside the toilet
- Use a nightlight in the bathroom

Bedrooms

- Use a nightlight in the bedroom.
• Remove any fire sources such as smoking materials and heaters
• Place a telephone close to the bed

Smoke and Carbon Monoxide Detectors
• Place at least one smoke and one carbon monoxide detector on each floor
• Check and replace batteries and bulbs regularly

Hoarding
Excessive collection of items along with the inability to discard them can be a symptom of a hoarding problem. Hoarding can result in a diminished quality of life. It can increase the risk of falls due to clutter and lead to the inability to exit quickly in case of an emergency. Hoarding is a mental health issue and needs to be addressed by a professional.

Fall Prevention
Falls are the most common cause of injury and hospital admissions among older adults. Medications, chronic illnesses, vision problems and loss of sensation in the feet can cause dizziness, balance programs and fatigue, all of which can increase risk of falls.

Medications: Some medications, including over-the-counter drugs can make one drowsy, dizzy and unsteady.

Exercise: Daily exercise helps maintain balance, flexibility, and strength.

Alcohol: Alcohol can impair balance and vision. Encourage the individual to limit alcohol consumption.

Vision and Hearing: Have an individual’s hearing and eyesight tested. Inner ear problems can affect balance. Vision problems make it difficult to see potential hazards.

Footwear: Purchase nonskid, low-heeled shoes or slippers that fit snugly. Walking around in stocking feet can be dangerous.

Mobility: Encourage the use of canes and walkers when necessary.
Home Repair/ Home Adaptations
Programs are available to help elders with home repairs and/or low interest loans or grants for repairs, adaptations and modifications.

Elder Home Repair Program
Staff perform pertinent home repairs and make appropriate referrals when necessary. They may repair such structural or system failures as stairs, doors, windows, ceilings, as well as minor plumbing and electrical faults. Generally the individual must purchase needed materials and labor is provided by the organization.

Central Mass Housing Alliance
Worcester MA
Tel: 508-752-5519
www.cmhaonline.org Email: cmha.org@verizon.net

Montachusett Opportunity Council
Fitchburg, MA 01420
Tel: 978*342-7025 ex: 2
www.mocinc.org

RCap Solutions, Inc
Tel: 800-488-1969
www.rcapsolutions.org
Services: Provides the Home Modification Loan Program to assist older adults and individuals with disabilities in the area.

Easter Seals Massachusetts
Tel: 800-244-2756
Worcester, MA
www.eastersealsma.org
Assistive Technology Loan Program
Services: Provides Massachusetts residents with disabilities and their families low interest loans to pay for assistive technology devices and services to assist them to live independently in their home. Devices and services that may be purchased include hearing aids, ramps, widening of doorways, or flashing doorbells.
Verizon Center for Customers with Disabilities
Voice or TTY: 1-800-974-6006
Videophone: 508-251-5301

Services: Assistance for customers with telecommunications needs, including phone, Internet and TV service. Staff provides an array of telephones and other equipment, including TTYs, amplified phones and large-button phones. The VCCD also provides large-print bills, bills printed in Braille, and even a talking caller ID service.

For more information contact any of the agencies listed on the inside cover.

Other Housing Options

Congregate Housing is a shared living arrangement for individuals over the age of 60 or individuals with disabilities who meet public housing eligibility requirements. Each resident has a private bedroom. The shared common spaces (living room, kitchen, dining areas) are furnished by the housing authority and are utilized equally by all tenants.

Supportive Housing is located within select public housing sites and provides residents 60 years of age and older or disabled an opportunity to benefit from the support of personal care homemaking staff. Services may include bathing, dressing, and light housework. Access to support services is available 24 hours a day.

Adult Family Care sometimes referred to as Adult Foster Care, is an alternative to institutional care. Individuals are matched with caregivers who provide 24 hour assistance in the caregiver’s home. The caregiver provides a private room, meals, and assistance with daily personal care. The participant must be a MassHealth recipient or pay privately for this program and qualify medically. Agencies that provide Adult Family Care train the host families, monitor placements and participant’s health, and provide case management. In some cases certain family members can be paid as the caregiver.
Continuing Care Retirement Communities (CCRC’s) accommodate the needs of people as they age and their personal needs change. CCRC’s offer a continuum of care ranging from fully independent units, to assisted living apartments, to long term care in a nursing facility. There are contracts, initial investments and monthly fees.

Assisted Living Residences (ALRs) offer a combination of housing, meals and personal care services to adults on a rental basis. Assisted living residences are not the same as licensed nursing facilities; ALRs do not provide medical or nursing services. Assisted living is intended for adults who may need help with activities such as housecleaning, meals, bathing, dressing and/or medication reminders and who would like the security of having assistance available on a 24 hour basis in a residential and non-institutional environment. Some ALRs have a specialized secure unit set aside for individuals with Alzheimer's and related dementia or behavioral health issues. There are additional fees with some services offered.

The majority of ALR residents pay privately on a monthly rental basis. There are some financial assistance options available such as Group Adult Foster Care, Supplemental Security Income – Category G (SSI-G) and Veterans Aide and Attendance pension. Refer to the index to find for more information.

Rest homes are licensed by the Massachusetts Department of Public Health to provide 24-hour supervision and supportive services for individuals who do not routinely need nursing or medical care. Rest homes provide housing, meals, activities and administration of medications for individuals who need a supportive living arrangement. There are three forms of payment for Rest Homes: Private pay; SSI-E (Supplemental Security Income); or EAEDC (Emergency Aid to Elderly and Dependent Children). EAEDC is not the same as Long Term Care Mass Health.

Nursing Homes or Long Term Care Facilities (LTC) or Skilled Nursing Facilities (SNF), are licensed by the Massachusetts Department of Public Health to provide 24-hour
long term care for frail individuals, short term care for people who have been hospitalized and need rehabilitation before returning home, and specialty care for individuals with physical and neurological disabilities. There are four ways to pay for the cost of a nursing home: private pay, Long Term Care Insurance, Medicare (short term rehabilitation only) and MassHealth.

**Nursing Home Screenings for Long Term Care** includes an assessment of an individual’s need for 24-hour skilled nursing which is necessary prior to admittance to a skilled nursing facility. Nursing homes provide screening assessment to individuals who will be paying privately. The agencies listed on the inside cover provide screenings for Long Term Care MassHealth eligible individuals.

For further information please contact any of the agencies listed on the inside cover.

**Assessing Quality of Care**
The Massachusetts Department of Public Health (DPH) inspects Massachusetts nursing facilities and hospital-based transitional care units. DPH has a survey performance tool that they use to evaluate every Medicare and MassHealth certified nursing facility in Massachusetts. You are able to review any facility’s most recent annual Massachusetts Department of Public Health (DPH) evaluation (report card) by contacting:

**Massachusetts Department of Public Health (DPH)**
Tel: 617-753-8000
**Division of Health Care Quality**
Tel: 866-627-7968

**The Massachusetts Senior Care Association** offers consumers information on the continuum of long term care services, which includes listings of Massachusetts Senior Care Association member nursing facilities, assisted living residences, continuing care retirement communities and associate members at 800-227-3367 or visit [www.massseniorcare.org](http://www.massseniorcare.org)
Resident’s Rights in a Long Term Care Facility
When entering any Long Term Care Facility, residents still retain their basic civil rights. The Federal Government and the Massachusetts Attorney General have developed regulations, which are designed to promote the comfort, health and well being of residents. Residents should request a copy of their rights.

The Long Term Care (LTC) Ombudsman Program
Every state is required to have a LTC Ombudsman Program. The program has four main goals:

- The receipt, investigation and resolution of Long Term Care Facility and Rest Home complaints.
- The protection of the benefits, rights and entitlements of residents guaranteed under federal, state and local law;
- The provision of information on long term care issues to residents, families and staff. It is important to note that the Long Term Care Ombudsman Program is not a placement and/or rating service for facilities, nor does it make referrals.
- Advocacy for positive changes to the long term care system that will have an impact on the quality of care, life and environment in all Massachusetts Long Term Care Facilities and Rest Homes.

Ombudsmen receive specialized training and certification. The Ombudsmen mediate, advocate, and investigate complaints on behalf of long term care residents.

For More information contact any of the agencies listed on the inside cover.
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