



# Guide to Senior Care Resources



Brought to you by  
AA HealthSystem  
(720) 893-8858

## Alzheimer's Resources in Aurora

### Greater Denver Alzheimer's Association

Serving residents in Adams, Arapahoe, Boulder, Clear Creek, Denver, Douglas, Eagle, Gilpin, Jefferson, and Summit Counties

For more than 25 years, the Alzheimer's Association of Colorado has led the fight against Alzheimer's disease and related disorders by increasing the understanding of dementia and its impact on family and community, providing information and support for those affected, and promoting the advancement of research.

The Alzheimer's Association of Colorado is the premier source of information and support for the more than 71,000 people living with Alzheimer's in Colorado, their families and caregivers. Through its statewide network of offices, the Alzheimer's Association offers a broad range of programs and services, including a 24-hour Helpline, at no cost to families, and funds advancements in research to prevent, treat and eventually conquer this disease. The Alzheimer's Association advocates for those living with Alzheimer's and their families on related legislative issues, and with health and long-term care providers. Families throughout the state have access to support services through regional offices in Boulder County, Colorado Springs, Denver, Pueblo, Durango, Grand Junction, Fort Collins and Greeley.

## MISSION

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

## VISION

A world without Alzheimer's disease.

## FINANCIAL INFORMATION

The Alzheimer's Association of Colorado is a tax-exempt, 501(c)(3) nonprofit, donor-supported organization. Programs and services are made possible through contributions from individuals, corporations and foundations. The chapter uses more than 75% of all funds raised for programs, services and research efforts.

**For more information, or to talk with aging experts in the Aurora Area, talk to AA HealthSystem Staff Today: 720-893-8858**

## Aurora Area Agency on Aging

### Who is eligible to receive services funded by DRCOG?

For programs funded through the Older Americans Act, the only eligibility requirement is that individuals be 60 years of age or older to receive services. However, through the ARCH program, Information & Assistance and Options Counseling Services are provided to anyone 18 and older living with a disability as well as adults age 60 and older. DRCOG targets services to those who are frail, live in rural areas, are minorities and meet the definition of low-income individuals. A low-

income single adult is currently (2013) defined by the Federal Government as having an annual income less than \$11,490.

### **Are there prescription drug assistance programs for seniors?**

A number of major pharmaceutical companies participate in a national program to provide prescription assistance to low-income individuals. First, determine the manufacturer of your medication from your pharmacist or physician and then contact Centura LINKS at (720) 321-8850 to see if you qualify for assistance.

### **How can I find transportation to and from appointments?**

The Regional Transportation District (RTD) ([link is external](#)) provides transit service throughout the metropolitan area. RTD also provides door-to-door service through the access-a-Ride program. A resource guide to transit services is now available to older adults and people with disabilities through the Denver Regional Mobility and Access Center (DRMAC). Call 303-480-6733 to request your copy of the Getting There Guide.

### **I'm confused about the differences between supplemental and long-term care or I have no insurance at this time – who do I call?**

Contact the Centura Senior Health Insurance Information Program (SHIP) at (720) 321-8850 or the Colorado Insurance Commissioner at 1-888-696-7213.

### **Is there anyone who provides income tax preparation assistance to seniors?**

Several senior services agencies have sites set up throughout the region from January to April. Contact us at 303-480-6700 to locate the site nearest you. Some sites are walk-in and others are by appointment only.

### **Does DRCOG offer seniors assistance with housing?**

Housing assistance programs vary in their requirements. Call 303-480-6700. If you are looking for assisted living or nursing homes, DRCOG provides a good nursing home or assisted living facility brochure to assist you in choosing a good nursing home. You may also contact a DRCOG Ombudsman (303-455-1000) for information about specific homes or check the latest nursing home survey from the Colorado Department of Public Health and Environment.

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## **Meals on Wheels Aurora**

Volunteers of America's Meals on Wheels Program serves Adams, Arapahoe, Clear Creek, Denver, Douglas, Gilpin, Jefferson and Larimer counties. Each meal consists of an entrée and accompaniments such as vegetables, fruits, breads, milk, etc. that are needed to provide at least one-third of the recommended daily nutrients for older adults.

The meals are low in fat and cholesterol and provide the valuable nutrients older adults need without the additional calories. Program services also include nutrition education, information and assistance in accessing other services available to the homebound elderly.

## ELIGIBILITY

An individual must be 60 years of age or older and assessed as homebound to receive Meals on Wheels. Other criteria for eligibility apply in specific limited circumstances.

- To determine if you or someone you know is eligible for Meals on Wheels in Adams, Arapahoe, Denver, Douglas, Jefferson, Gilpin or Clear Creek County call: **303-294-0111**.
- If you are in Larimer County call: **970-472-9630** or
- E-mail: [larimer@voacolorado.org](mailto:larimer@voacolorado.org).

## CONTRIBUTION REQUESTED

There is no charge for the meals, but individuals who receive Meals on Wheels are asked to contribute what they can afford toward the cost of the meals. However, no one is denied service because of an inability to make a contribution.

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## Transportation for Seniors in Aurora

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## Nursing Home Ombudsman

The Long-Term Care Ombudsman Program assists residents of licensed long-term care facilities in protecting their health, safety, welfare and rights.

In Colorado, long-term care ombudsmen are advocates for residents of nursing homes, assisted living residences and similar licensed adult long-term care facilities. They work to resolve individual resident issues and to bring about changes at the local, state and national level to improve long-term care. While most residents receive good care in long-term care facilities, far too many are neglected and others are victims of psychological, physical and other kinds of abuse. Trained ombudsmen, paid and volunteer, regularly visit long-term care facilities, monitor conditions and care, and provide a voice for those unable to speak for themselves.

Each Ombudsman Program throughout the state is required to visit each nursing home in their area at least once per month. Assisted living residences in their area must be visited at least once per quarter. Licensed facilities are required to allow ombudsmen to enter the facility and visit with residents without interference from facility staff. Routine visits involve a general overview of the

facility to ensure that common areas are clean, required notices are posted, and meals and activities are being provided as posted, among other requirements.

The Long-Term Care Ombudsman receives complaints from residents, family members and others and, with the resident's consent, investigates the complaints. Complaints range from simple quality of care issues, such as a resident's preferred time for breakfast, to very serious, sometimes life-threatening concerns involving abuse and neglect. When necessary, the ombudsman will work cooperatively with other agencies such as the Colorado Department of Public Health & Environment, local law enforcement and Adult Protective Services to resolve concerns identified during a complaint investigation.

Local ombudsmen can assist prospective residents in locating a facility that best meets their needs.

The ombudsman is able to provide guidance to residents, family members or friends who would like to resolve an issue without ombudsman intervention.

Other services include attending family and resident council meetings at a licensed facility, providing community education, and providing training to facility staff and other professional agencies that work with at-risk adults and residents of long-term care facilities.

## Colorado Area Agencies on Aging

Need information for an aging relative or yourself but don't know where to start? DRCOG's Aging and Disability Resource Center has experts in the field of aging and disability. We can provide information, assistance and advocacy over the phone, by email and in person to help you understand your benefits and connect you with local providers for a wide range of services. Some of the topics people call us about include:

- What kind of in-home services are available to help care for your parents, friends or spouse
- Explanation of housing options including independent living, assisted living, nursing facilities and home sharing
- Options for legal assistance
- Help understanding Medicare, Medicaid and Social Security
- Resources when you don't have enough to eat
- Education on end-of-life options and services
- Referrals to disease-specific resources and support groups
- Transportation options

### **Aging and Disability Resource Center (ADRC)**

Information and Assistance

Options Counseling

**303-480-6700**

Toll-free outside Denver

**1(866) 959-3017**

Opción disponible en Español

Long-term Care Ombudsman

**303-480-6734**

Case Management

**303-480-6704**

Opción disponible en Español  
State Health Insurance Assistance Program (SHIP)  
**303-480-6835**

Choice Transitions Options Counseling  
**303-480-6838**

Veteran Directed Care Program  
**303-480-6755**

Elder Refugee Program  
**303-480-6786**

DRCOG Main Office  
**303-455-1000**

## Senior Driving Laws in Colorado

### **LICENSING REQUIREMENTS**

Individuals Over the Age of 65 Colorado residents may hold a Colorado driver's license OR Colorado ID card - not both.

#### **Driver licenses:**

- May not renew their driver's license online (C.R.S. 42-2-118 (1.5) (a) (I)).
- May renew their driver's license in an office.
- May renew-by-mail every other renewal cycle (licenses or ID cards that were valid for 10 years are not eligible to renew by mail)

#### **Identification Cards:**

First-time applicants or those wishing to step down from a driver's license to an identification card must visit an office.

- Individuals over the age of 60 wishing to obtain an identification card in lieu of a driver's license may do so at no charge (over 60 years old FREE).
- 65 years of age and older: may either visit an office or renew online/by mail every time (ID cards that were valid for 10 years are not eligible to renew online or renew-by-mail)
- You must provide enough documentation to prove your name, date of birth, identity and lawful presence in the United States
- You must provide your Social Security number or show your original, non-laminated Social Security card
- You must provide proof of address. Proof of address is anything that shows your name and current residential address such as vehicle registration, check book, bank statement, utility bill, rent agreement, pay stub, school record, medical record, etc.

#### **Renew Your ID Card:**

Reduce your wait time and schedule an appointment online.

You may renew your adult ID card any time prior to the expiration date - you shouldn't wait until it expires.

**For additional information please call 303-205-5694.**

## **RE-EXAMINATION**

Re-Examination Of Driving Skills:

### **Why do I have to take a re-exam when my license hasn't expired yet?**

There are several reasons that the State may require you to come in and take a re-examination. When you have two accidents on your record within three years of each other, we will ask you to take a re-examination. You may also be asked to take a re-examination if a family member or doctor feels, for medical reasons, you should take a re-examination. A law enforcement officer may also file an incident report requesting that you take a re-examination.

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## **Medicaid Program in Colorado**

Health First Colorado (**Colorado's Medicaid Program**) is public health insurance for Coloradans who qualify. Health First Colorado is funded jointly by a federal-state partnership and is administered by the Department of Health Care Policy & Financing.

### **Who Qualifies?**

The Affordable Care Act provides a simplified method for calculating income eligibility for Health First Colorado and Child Health Plan Plus (CHP+) based on what is called Modified Adjusted Gross Income (MAGI). The MAGI rules apply to eligibility determinations for CHP+ and most Health First Colorado programs, except for those programs for individuals over **65 years old and/or for people who have a disability**. The use of MAGI standardizes income eligibility rules across all states.

### **What Does Health First Colorado Cost?**

You might have to pay a small co-pay to receive some services, unless you fall into one of the categories below. Co-pays vary depending on the service.

### **What Information Do I Need When Applying For Health First Colorado?**

The name, address and contact information of each person applying;

Social Security numbers of each member of your household seeking medical assistance (or document numbers for lawfully present individuals);

The birth dates of each person applying;

Employer information for each member of your household;

Income information for each member of your household (for example, wage and tax statements such as pay stubs or W2 forms);

Information about any other income you receive;



Information and policy numbers for health insurance plans currently covering members of your household; and

Citizenship and identity documentation

**If you are applying for Health First Colorado programs for individuals over the age of 65 or for individuals with disabilities, you might also be asked to provide additional information including:**

Whether you have a medical condition that has seriously limited your ability to do daily activities for at least a year

Whether you need help with daily activities, such as dressing, eating, and bathing

Any health care coverage received through Medicare

Unearned income, such as Social Security Administration (SSA) or Supplemental Security Income (SSI) payments and pensions

You might be asked to provide more information if we are unable to verify what you told us through our electronic data sources.

### **How To Apply**

There are several ways you can apply:

Online at [Colorado.gov/PEAK](https://colorado.gov/PEAK) -- this is the fastest way to apply

In person at your local county office or an Application Assistance Site

By phone at 1-800-221-3943 / State Relay: 711

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# How Much Does In-Home Care Cost and How Do People Pay for Private Duty Home Care?

By **Melanie Haiken**, Health Journalist, [Caring.com](https://www.caring.com)

## 1. A Reverse Mortgage

Reverse mortgages were developed by the government specifically for the purpose of helping seniors (originally widows) stay in their homes until the end of their lives.

With a reverse mortgage, seniors can use the value of the equity in their home to get cash now, either all at once or in monthly payments. But instead of borrowing a set sum, the loan balance increases over time. A reverse mortgage allows your loved one to stay in the home until she dies, even if by that time the loan balance exceeds the home's worth. But at that point, the home must be sold to repay the loan balance.

Reverse mortgages do have limitations: Your loved one has to be 62 or older, and she has to own her home, either outright or with little debt left on the original loan. (The bank that holds the original loan must be paid back before payments are made on the reverse mortgage.) The bank decides on a value based on the home's worth and also based on your loved one's age, since that affects the length of time the payouts must cover.

While a reverse mortgage may be the perfect solution to your in-home care dilemma, it also comes with strict rules regarding homeowners' insurance, mortgage insurance, and home maintenance, making it easy to default. Choose a reputable mortgage broker or bank and read the entire contract carefully. (According to the Consumer Financial Protection Bureau, reverse mortgage scams and foreclosures are on the rise, often because of high fees or clauses that make it easy to lose the home.)

## 2. Veterans Benefits

If your senior loved one was a veteran, you may be in luck when it comes to financial assistance -- but you'll have to be assertive and persistent to get it. Veterans who served more than 90 days of active duty, with at least one day during a wartime period, with an honorable discharge, may be eligible for the Veterans Pension. Veterans who need long-

term help with the activities of daily living -- or whose spouses need such help -- may be entitled to monthly disability payments known as "aid and attendance" by the VA.

This type of veterans benefit requires documentation from a doctor and is calculated using a complex rating system based on how disabled your loved one is. Many people become daunted by the complexity of the qualification process, but once veterans benefits are established they can be extensive and continue until the end of life. According to the Senior Veterans Service Alliance, only 5.4 percent of veterans who are eligible for these benefits actually receive them, because so few veterans know about the benefits and how to qualify. Help is available from Veterans Service Organizations (VSOs), a list of which is available in a PDF that can be downloaded from the Department of Veterans Affairs website. Legally, VSOs are not allowed to charge for help with veterans benefits applications. If a service requests payment for this help, look for another organization. If you're having trouble finding a VSO, there are financial concierge services that can help. Elderlife Financial is one such service with a network of VSOs.

### 3. Life Insurance

If your loved one has a life insurance policy that's no longer needed to provide for others, your family may want to tap into that money now, using accelerated or living benefits. The way this works is that your loved one sells the policy back to the issuing agency for 50 to 75 percent of its face value, an amount determined based on the amount of the policy, the monthly premiums, and the policy holder's age and health.

There may be restrictions; some policies can only be cashed in if the policyholder is terminally ill. But many are quite flexible. And if yours isn't, there are settlement companies that will buy the policy -- also at 50 to 75 percent of face value -- then pay the premiums until the policyholder's death, when the company will collect the benefits.

If the company that issued the policy won't cash it in, don't worry. Your loved one may be able to sell the policy for a "life settlement" or "senior settlement." In this case the settlement company pays the premiums until the policyholder dies, then receives the benefits that would originally have gone to the policy's original beneficiaries.

### 4. Long-Term Care Insurance

This seems like a no-brainer, but unfortunately it's not. Some long-term care insurance policies pay for in-home care, but many cover only nursing home care. And some policies that do cover in-home care require that the home health care agency be certified and

that your loved one's health needs be serious enough to require a nurse practitioner or home nursing aide.

If your loved one is lucky and her policy is one of the more flexible ones, then it should designate a certain amount per day for home care to be spent on the type of aide you choose.

One more thing: It may be too late for your aging loved ones to purchase a long-term care insurance policy, but you might want to consider this option for yourself.

## 5. An Annuity

Annuities are designed to help seniors turn retirement savings or a pension into a steady, guaranteed income stream that pays out until death or for a set number of years. The money can be used to pay for in-home care or, eventually, for assisted living if necessary. An annuity is like a cross between an investment fund and an insurance policy; the money is invested at a fixed or variable interest rate, and then, after an agreed-upon maturation date, you can begin making withdrawals.

Annuities have become controversial because of unscrupulous representatives who take advantage of vulnerable seniors. So help your loved one find a reputable financial institution and representative to consult regarding an annuity purchase.

Another benefit of an annuity is that the sum invested isn't considered an asset when applying for Medicaid. The government counts the income paid out from the annuity, but not the amount originally invested.

## 6. Medicare

It's not easy to get Medicare coverage for in-home care, and when you do it's strictly limited. That said, it can be a godsend when you're faced with a sudden medical crisis or downturn in your loved one's condition. Medicare coverage is most common when your loved one is being discharged from the hospital or a rehabilitation facility. You'll contract through a Medicare-certified agency for a period of skilled nursing care and therapy that's tied to a certain period of expected recovery.

The good news is that Medicare coverage is easier to get than it used to be, and sometime in 2013 it should become easier still. Thanks to the settlement of a lawsuit, Medicare coverage for skilled nursing care and occupational and rehabilitative therapy -- either at home or in a nursing home -- can't be limited by whether or not the patient's

condition is improving. Prior to the lawsuit, Medicare criteria would cover treatment only if the patient's condition showed improvement, which meant that people with chronic conditions like COPD, heart failure, Parkinson's, and Alzheimer's lost coverage after a certain period of time.

## 7. Medicaid

If your loved one's income is low and she has very little in the way of savings or other financial resources, she may qualify for Medicaid-covered in-home care, at least on a limited basis. Medicaid rules vary by state, but all programs cover short-term in-home care for acute conditions.

It's important to note that even in those states that provide long-term home care coverage, Medicaid rules often limit it to people whose physical or mental condition is severe enough that it would qualify them for Medicaid nursing home coverage. Also, Medicaid will only pay for in-home care if provided by a Medicaid-certified home care agency, not by an independent paid caregiver or loved one.

Longer-term care for chronic conditions is covered for those who are ill or incapacitated enough that they would otherwise require nursing home care. These programs are known as Home and Community-Based Services (HCBS) "waiver" programs, because they're funded by Medicaid through waivers of normal Medicaid rules. For help finding out more about government assistance, call your local Area Agency on Aging.

**Warning** : It would be a mistake to try to qualify for Medicaid by hiding money and other assets by "gifting" them to adult children or other family members. The government is extremely strict about Medicaid qualification and will do a "look-back," examining your financial transactions over the past five years. Any gifts of money or assets made during this time are counted as assets, and the penalties if you're caught are very steep.

## 8. A Collective Sibling Agreement

If you're worried about Mom or Dad living alone, other family members may be worried, too. Working together, families can come up with a plan in which those who can't help out because of geography or work demands pay siblings who do have that availability and flexibility to be with their parents on a daily basis.

In another strategy, siblings who have available funds can pay in-home caregivers or senior home care agencies now with the understanding that they'll be paid back for their

contribution from the siblings' collective inheritance or the proceeds of the house after the parents' death.

Either of these agreements needs to be spelled out very clearly to avoid tension, resentment, or dissension down the line. If a sibling acts as caregiver, she should have a set hourly wage and should keep close track of hours and any expenses incurred, such as gas or groceries, just as an employee would do. If a sibling pays for in-home care with the expectation of reimbursement, she should keep clear records in the form of invoices and receipts or canceled checks. It's also a good idea to have something in writing to show the executor of the will, or even to put a clause in the will explaining the plan.



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