KNOW YOUR OPTIONS
DECIDE YOUR FUTURE

Long-Term Care Planning Guide

THE DISTRICT OF COLUMBIA
OFFICE ON AGING

Age-Friendly DC
District of Columbia
Office on Aging
Long-Term Care Planning Guide

• Understanding Long-Term Care
• Resources Available in the District
• Options Counseling for District Residents

To learn more about long-term care planning, visit www.dcoa.dc.gov
Introduction

The District of Columbia Office on Aging (DCOA) is committed to assisting members of the community to age in place. An important component in ensuring that individuals remain in the community is to proactively plan for their long-term care (LTC) needs. DCOA understands that LTC planning can be viewed as a complicated process. To assist older adults, persons living with disabilities and caregivers, DCOA has partnered with the U.S. Administration for Community Living to offer options counseling to help community members make informed LTC decisions.

Options Counseling provides individuals, family members, and significant others with the support necessary to evaluate options that increase long-term stability and safety. During this process, counselors will assist in developing a written action plan for receiving community resources based on an individual’s needs, preferences, values, and circumstances. DCOA’s options counseling has had great success in preparing individuals for LTC and connecting those in need to services. We are committed to educating the public and continue to integrate options counseling into all of our services.

This guide is intended to help you understand LTC and what resources are available in the District. You will find a number of tools that will assist you in analyzing your current situation and help you to start thinking about future needs. We suggest that you use these tools now as a resource to begin planning for your future LTC regardless of age. Please feel free to contact DCOA’s staff regarding any questions you may have. We can be reached at 202-724-5622, 202-724-5626 or visit www.dcoa.dc.gov.
# Table of Contents

1. Understanding the Need for Long-Term Care ................................. 1
   What Is Long-Term Care? ................................................................. 1
   How Likely Are You or a Loved One to Need Long-Term Care? ........ 1

2. Understanding the Costs of Long-Term Care ................................. 3
   Test Your Knowledge About Long-Term Care Costs ......................... 4
   Long-Term Care Insurance Personal Worksheet ................................. 6
   Long-Term Care Costs Vary According to the Services ....................... 9

3. Paying for Long-Term Care .......................................................... 10
   Government Programs ................................................................. 10
   Medicare ....................................................................................... 11
   Medicaid ...................................................................................... 11
   Private and Personal Funding Alternatives ...................................... 13
   Private Health Insurance ............................................................... 13
   Medicare Supplemental Insurance (Medigap) .................................... 13
   Long-Term Care Insurance ........................................................... 14
   Short and Long-Term Disability Insurance ....................................... 15

4. Options for Long-Term Care and Independent Living .................... 16
   Get Started with a Visit to the DC Aging and Disability Resource Center...... 16
   How Should You or Your Loved One Be Cared For? .......................... 16
   Personal Care and Home Health Services ....................................... 17
   Where Can I Receive Personal Care and Home Health Services? ........ 17
   Adult Day Care Services ............................................................... 18
   Community Supports and Services ............................................... 18
   Institutional Alternatives ............................................................. 23
   Nursing Facilities ......................................................................... 24
   Community Residential Facilities (CRFs) ....................................... 24
   Intermediate Care Facilities for People with Developmental Disabilities (ICFs/DD) ................................................................. 24
Hospice Care ....................................................................................................... 25
Respite Care........................................................................................................ 28
LTC Transitional Programs.................................................................................. 28
Hospital Discharge Planning............................................................................ 29
Money Follows the Person Initiative................................................................. 29
Olmstead Community Integration Plan............................................................. 29
Housing Choices in the Community................................................................. 30
Transportation................................................................................................... 33
Meal and Nutrition Programs ......................................................................... 35
Legal Services.................................................................................................... 37
Elder Abuse Prevention..................................................................................... 40
Wills and Estate Planning................................................................................. 41

5. Next Steps.................................................................................................. 43
   Steps You Can Take Now.............................................................................. 43
   Helpful LTC Websites.................................................................................. 43
   Long-Term Care Directory........................................................................... 45
1. Understanding the Need for Long-Term Care

What is Long-Term Care?

Long-Term Care (LTC) is a range of services and supports to meet the personal care needs of individuals. LTC is provided when a person requires someone else to help with their services and supports over an extended period of time. Most LTC is not medical care, but rather assistance with basic personal tasks of everyday life. LTC may be needed due to a terminal condition, disability, illness, or injury. Medical care services aim to improve or correct certain medical conditions, while LTC services and supports help a person maintain as much independence as possible by assisting individuals with daily activities. These include:

- Walking
- Bathing
- Dressing
- Driving
- Eating
- Getting to and from medical appointments
- Maintaining and repairing the home
- Shopping and running errands
- Managing money and paying bills
- Washing clothes and other household chores

Nearly two out of every three Americans will need help in one or more of these areas during their lifetime, and their need may be temporary or permanent. The need for LTC often comes on suddenly, without an opportunity for preparation. Unfortunately, most of us learn about LTC the hard way – right at the moment when the care is needed.

How Likely Are You or a Loved One to Need Long-Term Care?

Most people do not know if or when they will need LTC assistance. However, there are several important factors that will help you determine how likely you are to need LTC at some point in your life.
Your personal risk of needing LTC depends on a few of the following factors:

**Life Expectancy** – Do people in your family live long lives? The longer you live, the more likely it is that you will need LTC assistance.

**Support System** – Are you married? If you have a spouse, friends, a partner, family, and/or friends nearby, you are more likely to have informal care available at home if it becomes necessary. If family members cannot provide care and you cannot stay home alone, community support options like personal care assistance, assisted living or a nursing home are alternative options.

**Gender** – Women are more likely to provide LTC assistance for their spouses, friends, or other family members, and are also more likely to be single and living alone by the time they require LTC assistance. The duration and level of LTC will vary from person to person and often changes over time. Here are some statistics to consider:

- Someone turning age 65 today has almost a 70 percent chance of needing some type of LTC services and supports in their remaining years;

- Women need LTC assistance longer (3.7 years) than men (2.2 years); and

- 20 percent of today’s 65 year old consumers will need LTC assistance for longer than 5 years.

**Health** – Do chronic illnesses run in your family? If you have been diagnosed with or treated for certain chronic illnesses (e.g.: heart disease, cancer, and/or diabetes), you may be at greater risk of needing LTC services than another person of the same age and gender without a chronic illness. Chronic illness increases one’s chances of needing LTC assistance.
2. Understanding the Costs of Long-Term Care

Knowing how you are going to pay for future care is one of the most important aspects of LTC planning. There are many ways to pay for care, and you should decide what financial plan works best for you. How much do you know about the different sources of financing? And, how prepared are you for the costs that may be involved? Take the following short quiz to find out!

In the District of Columbia, a typical older adult is a 73 year old African American woman living at home in a single-family home and on a retirement income (mainly Social Security and/or a pension). She is most likely to live in a family setting (with a husband or other relatives) and may use or require LTC services and supports in order to maintain her independence as she ages. Her major asset is her home.

The longer her life expectancy, the greater the chances that she may spend some of her remaining years alone and with a chronic disability that limits the daily activities she can do without help.
Test Your Knowledge

1. A person needs long-term care when they require:
   - Medical treatment for a chronic condition
   - Medical treatment for an emergency condition
   - Ongoing help with day-to-day activities like bathing, dressing or eating
   - Chemotherapy

Answer:

A person needs LTC when they require ongoing help with day-to-day activities such as bathing, dressing, transferring from chair to bed, toileting, medication management, or eating. These are called Activities of Daily Living (ADLs) and as we age or have chronic health conditions, the ability to do these tasks without help from another person may become limited.

2. Where do most people receive long-term care?
   - At home
   - In a rehabilitation hospital
   - In a nursing home
   - In an assisted living facility

Answer:

Most people receive LTC at home. This might be provided by family or friends, called informal caregivers, or from paid care providers such as a home health aide, hired homemaker, or a combination of these resources.

3. Approximately, how much does it cost to receive a year of care in a semi-private room in a nursing home in the D.C. area?

   - $35,00
   - $50,000
   - $75,000
   - $107,128

Answer:

On average, a semi-private room in a nursing home in the District of Columbia area costs approximately $107,128.
4. If you need help at home with personal care like bathing or dressing, how much would it cost you to receive a 4-hour visit from a home health aide in the District of Columbia?

☐ $20 ☐ $40 ☐ $60 ☐ $80

Answer:

A 4-hour visit from a home health aide in the D.C. area costs approximately $20 per hour, which is $80 per visiting day. A home health aide would provide help with personal care activities, managing medications, and some meal preparation or other homemaking tasks.

5. What is the likelihood of a 65 year old needing some type of LTC assistance in his/her lifetime?

☐ 10% ☐ 30% ☐ 50% ☐ 70%

Answer:

For someone turning 65 years old today, the chance that they will need LTC assistance at some point in their lifetime is 70 percent. Some people may need care only for a short time, but roughly 20 percent of people who need care will need it for 5 years or longer.

6. What is the most likely source of payment for the typical middle-income family when someone in the family needs LTC services and supports?

☐ Medicare  ☐ Medicaid  ☐ Members of the family  ☐ Health Maintenance Organization (HMO), private health insurance or health plan

Answer:

Most of the LTC costs for the typical middle-income family are paid for by the families themselves. Medicare only pays for short-term, skilled recuperative care and Medicaid only pays for LTC when the beneficiary has limited income and assets.
LTC Insurance Personal Worksheet

Please select “Yes” or “No” for the following questions and conditions, or choose your answer from selections under each question:

Is it important to you to be able to leave your estate to your spouse or children when you die?
☐ Yes  ☐ No

Do you have assets (investments or savings) that you would not want to use to pay for long-term care?
☐ Yes  ☐ No

Do you have $20,800 to $60,000 to pay for your own LTC bills for one year?
☐ Yes  ☐ No

Are protecting your assets worth the LTC premiums you would pay to protect them?
☐ Yes  ☐ No

If you had to go into a nursing facility, would you want to rely upon Medicaid to pay the bills?
☐ Yes  ☐ No

If you need LTC, would you want to choose the specific nursing home or home health agency that you would use?
☐ Yes  ☐ No

Are you willing to ask your children or other family members to pay for my long-term care?
☐ Yes  ☐ No

You should only purchase LTC insurance if you can afford it. If you are over 65, premiums may range from $300 to $700 a month, depending on the coverage. Does this fit into your budget?
☐ Yes  ☐ No
**Income**

Where will you get the money to pay each year’s premium?

- □ Monthly Income
- □ Savings
- □ Family Members
- □ Others

What is your annual income?

- □ Under $10,000
- □ $10,000-20,000
- □ $21,000-30,000
- □ $31,000-50,000
- □ More than $51,000

How do you expect your income to change over the next ten years?

- □ No Change
- □ Increase
- □ Decrease
- □ Not Sure

A rule of thumb is that LTC insurance policy premiums should be 7 percent or less of your income.

**Savings and Investments**

If you buy a LTC policy, you will probably have to pay increasing premiums for many years. Think about how changes in your financial situation (for example, retirement, changing interest rates, death of a partner) can affect your ability to pay premiums for insurance.

Not counting the value of your home, what is the approximate value of your assets (savings and investments)?

- □ Under $20,000
- □ $21,000-30,000
- □ $31,000-50,000
- □ More than $51,000

How do you expect your assets to change over the next ten years?

- □ Stay about the same
- □ Increase
- □ Decrease
- □ Not Sure
If you are thinking of buying a LTC policy to protect your assets, and your assets are less than $50,000, you may wish to consider other options for financing LTC.

**Risk Assessment**

No one can predict the future. You could live to be 100 and never need a day of LTC services and supports. However, a sudden stroke could cause you to need nursing home care for the rest of your life. Your chances of needing LTC assistance increases if you answer yes to the following questions below. Please answer “Yes” or “No” to the following questions:

1. My blood relatives tend to live into their eighties or older.  
   - Yes  
   - No

2. I have heart problems, high blood pressure, diabetes or another chronic health problem, OR these problems run in my family.  
   - Yes  
   - No

3. I am female. Women tend to live longer and use more LTC than men.  
   - Yes  
   - No

4. I live alone and have no one who could help take care of me at home.  
   - Yes  
   - No

**Congratulations! You have completed the quiz.**

The cost of assisted living nationwide continues to be highest in the Washington, D.C., area at $5,933 a month (up from $5,757 a month in 2011), and lowest in Arkansas (except for Little Rock) at $2,355 a month (up from $2,156 a month in 2011). (2012 Metlife Market Survey of Nursing Home, Assisted Living, Adult Day Services and Home Care Costs).
Long-Term Care Costs Vary According to the Services

As you can see from the quiz, the costs of LTC outside one’s own home can be extremely high. Costs can be even higher than the average costs given in the quiz, if skilled nursing (example e.g. wound care) or various therapies (e.g. speech, occupational or physical) are needed in addition to LTC support services.

LTC services and supports provided in the home are less expensive than nursing facility care because family members provide much of the needed services for free. This “free” care is not really free, of course. Caregiving can take a great deal of time and put considerable emotional and physical strain on the family member(s).

Providing LTC assistance for family members at home over an extended period has been shown to harm the health of the primary caregiver. The growing stress over time can even shorten the caregiver’s life. Since there are so many kinds of LTC services and supports and the cost of different services vary, it is necessary to look carefully at all the services offered and the expense of each as you plan for future care needs. You must also keep in mind that the prices you are quoted when you plan will probably increase due to inflation by the time you actually need the services. Buying LTC insurance can be expensive, and choosing a policy can be difficult, so we advise you to consult with a financial advisor, health insurance counselor, and/or attorney.
Health Insurance Counseling Project

The Health Insurance Counseling Project (HICP) provides free help for D.C. residents with Medicare and/or Medicaid coverage. The Health Insurance Counseling Project (HICP) of the George Washington University Law School helps District of Columbia residents over age 60, as well as people on Medicare, by offering counseling, advocacy regarding health insurance, public and private access to medical care, and resolving medical bills.

HICP serves as the State Health Insurance Assistance Program in the District of Columbia. Through HICP, attorneys, law students, and community volunteers provide confidential counseling to help Medicare eligible individuals make informed insurance choices and understand their rights and protections. The main number is: (202) 994-6272.

3. Paying for Long-Term Care

LTC can be a great financial burden on your family, particularly if a family member has to leave his or her job to provide care. Knowing the range of possible financing arrangements for LTC ahead of time allows you avoid the stress of having to make critical life-changing decisions suddenly, with possibly disastrous consequences for both you and your family.

Financial planning for LTC involves knowing the kind of coverage that is provided through government programs and what costs you will have to pay for yourself. It also involves understanding the range of strategies that can help you afford the costs that are not covered by government programs.

This section describes the coverage and limitations of the major government programs, as well as some private and personal funding alternatives for long-term care.

Government Programs

The major government programs that provide LTC services and supports are Medicare and Medicaid. Many states, including the District of Columbia, have additional programs that may help if you qualify.
Medicare

Medicare is a federal program that pays for hospital treatment, limited home health care, and some hospice services for individuals who are at least 65 years of age or have a permanent disability.

What Does Medicare Cover?

Medicare has a limited LTC benefit for people who meet specific criteria. Medicare Part A helps pay for short-term skilled care and rehabilitation at home or in a nursing facility following a hospital stay of at least 3 days. Medicare does not pay for personal care assistance or custodial care (non-skilled service or care, such as help with bathing, dressing, eating, getting in and out of bed or chair, moving around, and using the bathroom).

For example, if you break your hip or have a stroke, your doctor may refer you to a nursing facility to receive physical therapy or some other intensive medical care. Medicare will pay a portion of your nursing facility stay while you recover.

- For the first 20 days, Medicare pays for all of your care;
- For days 21 through 100, you pay a copayment of $148 per day; and
- After day 100, Medicare coverage in a nursing facility ends.

Medicaid

Medicaid is a joint state and federal program that pays for long-term nursing facility and home care for people who cannot afford to pay for their own care. It also protects spouses who would otherwise become

According to a survey conducted by Metlife, the average cost of a homemaker/companion increased 5.3 percent to $20 per hour. The cost of adult day care remained the same in 2011 and 2012 at the rate of $70 per day, and the average costs of home health aides remained at $21 per hour. The survey also reports the cost of a semi-private room in a nursing home, which increased 3.7 percent to $222 a day or $81,030 a year.

(2012 Metlife Survey of Nursing Home, Assisted Living, Adult Day Services and Home Care Costs)
impoverished because of the cost of long-term care. It does this by safeguarding a significant part of the couple’s combined income and assets. But even with these special rules for couples known as Medicaid’s spousal impoverishment protection the amount of assets and income a couple is allowed to keep while one of them is receiving Medicaid is limited.

- You cannot rely solely on Medicare if you have to go to a nursing facility for a long stay.

- Medicaid will cover qualified applicants who would otherwise be unable to afford nursing facility or home care.

What Does Medicaid Cover?

Medicaid covers LTC services and supports for people with limited income who meet specific eligibility requirements. These services cover a wide range of assistance, from skilled nursing care in a nursing facility, group home or other home and community-based settings, to personal care services that assist people at home with basic activities of daily living.

To be eligible for Medicaid, you must meet strict guidelines for income and assets, and you may have to use up most of your assets on health care before you become eligible for Medicaid. The term “spend down” is a process of using up your assets on health care costs in order to qualify for Medicaid. Some assets, like your home, are not counted. Many people begin paying for nursing facility care out of their own pockets until they spend down enough to become eligible for Medicaid.

Medicaid might cover you if you meet the District’s criteria for eligibility. To learn more about Medicaid eligibility, contact the ADRC at (202) 724-5626 or the George Washington Health Insurance Counseling Project at (202) 994-6272.

Good News! Call the ADRC for person-centered counseling to assist you with LTC Planning at no cost. Find out more about the types of services that might be available to you, by calling (202) 724-5626 (TTY users should call 711) or visiting our website at www.dcoa.dc.gov.
Private and Personal Funding Alternatives

Private Health Insurance

Private health insurance plans typically only cover conditions that require skilled medical care on a temporary basis. This includes health insurance coverage that many people have through their employer, the state or federal government (for instance the Federal Employees Health Benefits Program). These are not designed for extensive LTC stays in a facility or LTC needs associated with chronic diseases such as Alzheimer’s or Parkinson’s disease. However, some health insurance plans may cover nursing facility care if the facility has a contract with that plan.

Medicare Supplemental Insurance (Medigap)

Medicare Supplemental Insurance is a form of private insurance, which individuals and families pay an annual premium. It is often called “Medigap” because it helps pay for gaps in Medicare coverage, such as deductibles and co-insurances. Most Medigap plans help pay for skilled nursing care, but only as long as that care is covered by Medicare (see Medicare’s coverage limitations on page 11).
Long-Term Care Insurance

LTC insurance pays for your long-term care. A good LTC policy provides a fixed daily or weekly amount of money to help pay for necessary care in a variety of settings.

People often think LTC insurance will only cover the costs of care in a nursing facility. This is not correct. It covers a variety of private and semi-private services, including home health care, homemaker services, adult day care, and assisted living.

Is LTC Insurance Right For You?

Once you decide that you may need LTC assistance, you may want to consider buying a LTC policy and ways to pay for it. Individuals purchase LTC insurance for a variety of reasons:

• To avoid spending assets for long-term care;
• To decrease the chances of necessary enrollment in Medicaid;
• To have more choices regarding the type of care received;
• To protect family members from having to pay for or provide care; and
• Because of the extremely high likelihood that LTC will be needed.

Whether you need or can afford LTC insurance depends on your income, assets, family situation, and your personal risk factors. A LTC insurance policy is not for everyone. For some, it is an affordable and attractive form of insurance. For others, either the coverage is too expensive, or the benefits included are not worth the cost of the policy. Use the LTC Insurance Personal Worksheet to help assess your needs.

You should not buy a LTC insurance policy if you have few assets to protect, or have trouble paying for utilities, food, or medicine after you pay the premiums. For more information on LTC insurance policies, please contact:

• The Health Insurance Counseling Project (HICP) through George Washington University Law School provides free help for District residents over the age of 60 with Medicare and Medicaid coverage by offering counseling, advocacy regarding health insurance, public and private access to medical care, and resolving medical bills. For more information call (202) 994-6272.
The National Association of Insurance Commissioners (NAIC) represents state health insurance regulators and has a free publication called “A Shopper’s Guide to LTC Insurance.” You can visit http://www.naic.org/store_pub_consumer.htm guide or call the NAIC Toll-Free Consumer Hotline at (866) 470-NAIC (6242).

The D.C. Department of Insurance, Securities, and Banking (DISB), a regulatory agency for the District of Columbia’s financial services industries, issues consumer guides to provide information on financial services and insurance topics. The DISB consumer guide includes information to help consumers avoid being victims of fraud or unfair and fraudulent business practices. For more information call (202) 727-8000 or visit their website at www.disb.dc.gov.

Short-Term and Long-Term Disability Insurance

District of Columbia nursing home residents are among the youngest in the country. If you are currently employed, you should inquire about whether short-term and long-term disability insurance is provided by your employer. Some companies offer this coverage to their employees at a very low monthly premium, which can often be deducted from your paycheck. This is a way to protect your income in the event you become disabled, while separately funding your LTC needs. Disability insurance is purely an income replacement mechanism. If your employer does not offer this benefit, there are many private insurance companies that offer it to the general public.

Enhanced Consumer Awareness and Assistance

Older adults, persons living with disabilities, their families, friends, and neighbors are all essential stakeholders to consider when ensuring the quality of care in any health care system. The availability of relevant and timely information can significantly enable individuals to be active and informed participants in their care. Such information also can enable those individuals to hold the health care system accountable for the quality of services and support that should be provided. To that end, the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid (CMS) seeks to provide an increasing amount of understandable information. The CMS website, www.Medicare.gov, features the Nursing Home Compare website.
(http://www.medicare.gov/nursinghomecompare/search.html) as well as other important information for consumers, families, and friends seeking information regarding needs and wishes as you plan. The ADRC is here to help you because planning for your LTC needs can sometimes seem complex and overwhelming. You can call the ADRC by simply dialing 311 or (202) 724-5626 for assistance.

4. Options Available for Your Long-Term Care

Many people will face tough circumstances and must make difficult decisions regarding LTC for family members or for themselves. This is where planning for your LTC needs can pay off for you and your family! With an aging population, the Government of District of Columbia realizes the importance of planning ahead for LTC. Planning can reduce stress and ensure that resources are put to best use.

Get Started with a Visit to the D.C. Aging and Disability Resource Center (ADRC)

D.C. Office on Aging established the Aging and Disability Resource Center (ADRC) to better assist the District of Columbia’s older adults, people living with disabilities and caregivers in accessing LTC resources.

The ADRC is available to you to discuss your current and future options. A consultant will explain services available, discuss eligibility requirements and financial resources required, and help determine your needs and preferences as you plan. The ADRC is here to help you with decision making for your LTC needs. Please call the ADRC by dialing (202) 724-5626 for assistance.

How Should You or Your Loved One Be Cared For?

Most people who need help with daily activities do not have to be admitted to a nursing facility to receive the appropriate care. There are a wide range of LTC services and supports available to older adults and people living with disabilities to enable such persons to remain in the community. The following services are examples of alternatives to institutional settings:
Personal Care and Home Health Services

Personal care allows people to receive paid help with basic daily tasks in their home. These include assistance with bathing, personal hygiene, dressing, meal preparation, grocery shopping, cleaning, laundry, physical exercise, transportation, doctors’ appointments, and social activities.

Home health care allows people to receive certain types of skilled care in their home. These services typically involve care performed by a nurse, including wound care, oxygen therapy, and medication administration.

Where Can I Receive Home Health or Personal Care Services?

Family & Friends

Depending on your needs, you may be able to get help with personal activities at home from family members, public agencies, or volunteer groups. Several agencies and programs can help you arrange and/or help pay family and friends for personal care and home health services.
**Home Health Care**

If you think you need home care and your family cannot provide all of the care you need on their own, perhaps you or they can contact a home health care agency to arrange for aides to provide nursing or attendant care in your home. You can call the ADRC at (202) 724-5626 to learn more about home health care agencies that provide services in D.C. areas.

**Adult Day Care Services**

Adult day care is a service provided for older adults and persons living with disabilities who have chronic health care needs and require assistance during the day in order to avoid or delay nursing facility placement. Many adult day care participants suffer from physical or cognitive impairments related to heart disease, dementia, stroke, diabetes, or hypertension. Medical, social, nutritional, and recreational services are provided that may include: art and music therapy, meals and nutrition counseling, social services, transportation, medication management, physical, occupational, and speech therapy, podiatry, and coordination of care with physicians.

This service allows caregivers to attend to other responsibilities and personal needs knowing that their loved ones are in a caring environment. Caregivers can also take advantage of the educational opportunities, counseling, and caregiver support groups provided by the adult day care centers. For more information on adult day care centers in the District of Columbia, please call the ADRC at (202) 724-5626.

**Community Services and Supports**

**Senior Villages**

Organizations have developed in neighborhoods throughout the country to support the decisions of older adults that want to stay in their own homes throughout their lives, and who do not want to move to retirement communities, assisted living communities, or a nursing facility.
Villages are nonprofit organizations devoted to linking older residents to neighborhood social/cultural activities and health-related and reliable home-maintenance services, all with the intention of encouraging and assisting residents to remain in their homes. Neighborhood volunteers of all ages provide a large proportion of the services and activities. The Village typically hires an Administrator and is overseen by a board comprised of local residents. Its operations are funded by donations and membership dues. Examples of senior villages operating in the District of Columbia include:

**Capitol Hill Village**

Capitol Hill Village can help to arrange assistance with home and community-based supports including participation in activities. Capitol Hill Village is a “Volunteer First” organization, which means that 80% of service requests are fulfilled by volunteers. The remainder of the service requests for which the member pays are arranged with preferred vendors. Activities are mainly free of charge, except for group theater and musical events. Capitol Hill Village offers deeply discounted annual membership dues to those with low incomes, thanks to the generosity of private contributors, foundations, and the government of District of Columbia. For more information, please call (202) 543-1778.

**Dupont Circle Village**

Dupont Circle Village connects members to services and cultural/social activities. Membership enables participants to maintain their health and home as they age. Dupont Circle Village helps Dupont Circle residents retain their independence by providing help, primarily through volunteers but also through access to vetted vendors, as needs arise related to illness, disability, temporary hardship, and the maintenance of their homes. The Dupont Circle Village encourages cultural and social events to promote enjoyment and neighborhood connectedness. Discounted dues are available to residents with low income. For more information, please call (202) 436-5252.
Northwest Neighbors Village

Northwest Neighbors Village (NNV) is a membership-based nonprofit organization created to help the citizens of Chevy Chase D.C. live comfortably and safely in their homes as they age. With one phone call to a member hotline, NNV members have access to a centrally coordinated local network of screened volunteers and vetted professional service providers. The majority of service requests are filled at no charge by NNV’s dedicated volunteer corps. Other requests are handled by professionals who are paid directly by members. Services include transportation to medical appointments, the grocery store, and the pharmacy; assistance with technology; referrals to professional providers; and invitations to social and cultural activities. Chevy Chase residents of modest means may apply for a reduced membership rate. For more information, please call (202) 777-3435.

Palisades Village

Palisades Village is a nonprofit membership organization dedicated to providing neighbors age 50 and over residing in the Palisades and Foxhall communities with the support they need to live at home as they age. Primarily through an active corps of neighborhood volunteers, Palisades Village offers transportation and shopping assistance, access
to social and cultural activities, home maintenance support, and many other services that help keep members at home safely and comfortably, and connected actively with the life of their communities. For more information, please call (202) 244-3310.

**Pennsylvania Avenue Village East**

Village East is a community-based nonprofit organization designed to provide support services and programs to help residents age 50 and over who live along Pennsylvania Avenue, east of the Anacostia River, maintain a healthy, independent lifestyle in their own homes as long as they can. The goal of Pennsylvania Avenue Village East is to help older residents maintain a well-balanced, healthy lifestyle through a variety of services and programs. For more information, please call (202) 657-6160 or for information on senior villages in the District of Columbia, please call the ADRC at (202) 724-5626.

**The Keys to Canaan Senior Village**

The Keys to Canaan is a 501(c)(3) nonprofit organization and their mission is to enlighten parents to nurture healthy families. In 2013, The Keys to Canaan started the Ward 7 Senior Village to help senior citizens 55 years of age and older, who live in this community with maintaining their quality of life by providing support with the meals, exercise, transportation, fellowship, minor home improvement projects, computer access, copying/printing, and faxing. For more information, please call (202) 253-9780.

**Angels of Hope Ministries**

Angels of Hope Ministries is located in Southeast Washington, D.C. This is the area of the Hillsdale Community where Rev. Claudia H. Harrison was inspired to develop a senior village in collaboration with DCOA. Rev. Harrison stated that the senior village was formed to provide a community of neighbors encouraging fellowship. The Angels of Hope Ministries senior village also provides enriching programs and resources to assist seniors as they age in place. For more information, please call (202) 344-6656.
**Assisted Living Facilities**

Assisted living facilities are for people who need help with some of their daily activities but do not require constant care. It can be one way to bridge the gap between living at home and living in a nursing facility. The term “assisted living” may mean different things in different facilities. Not all assisted living facilities provide the same services.

Assisted living facilities provide help with daily activities such as bathing, dressing, and using the bathroom. It may also help with care most people provide themselves, including taking medicine or using eye drops and getting to appointments or preparing meals. Residents often live in their own room or apartment within a building and eat some or all of their meals together. Social and recreational activities are usually provided. Some of these facilities have health services on site. In most cases, assisted living residents pay a regular monthly rent, and pay additional fees for the services they get. It is important that you contact the facility and make sure it can meet your needs.

**Continuing Care Retirement Communities (CCRCs)**

Continuing Care Retirement Communities are retirement communities that offer more than one kind of housing and different levels of care. In the same community, there will be individual homes or apartments for residents who continue to live independently. The CCRC will also have an assisted living facility for people who need some help with daily care, and a nursing facility for those who require more care.

Residents move from one level to another based on their needs, but usually stay within the CCRC. If you are considering a CCRC, be sure to learn more about the nursing facility at the CCRC. The nursing facility’s quality information is on the Nursing Home Compare website ([www.medicare.gov](http://www.medicare.gov)) and the nursing facility’s inspection report should be posted in the facility.

Your CCRC contract usually requires you to use the CCRC’s nursing facility if you need nursing facility care. Some CCRCs will only admit people into their nursing facility if they have previously lived in another section of the retirement community, such as their assisted living facility or an independent apartment/home.
CCRCs generally require a large entry fee payment before you move in, then they charge monthly fees. If you are considering a CCRC, be sure to find out if it is accredited, and get advice on selecting this type of community from the Commission on Accreditation of Rehabilitation Facilities and the Continuing Care Accreditation Commission (CARF-CCAC) by calling (202) 587-5001 or visiting www.carf.org.

Institutional Alternatives

There may come a time when you or a family member can no longer be cared for adequately in an independent living environment. This may happen because there is no family member available to help with needed care. It may also happen through the increasing frailty of old age or through mental incapacity (such as Alzheimer’s disease) or physical incapacity (for example, a severe stroke or debilitating injury). For those conditions, it may be necessary for LTC needs to be met in an institutionalized environment. In such an environment, there is care available around the clock and all seven days of the week.
Nursing Facilities

Paying for LTC services and supports, especially nursing facility care, on your own is expensive. The national average annual cost of nursing facility care, which is also the average for the District, is approximately $107,128. LTC provided at home by aides costs on average about $40,000 a year.

If you believe that nursing facility care is better than home care for you or your loved one, you can learn more about the facilities in your local area and compare them to others nationwide. The Centers for Medicare and Medicaid Services (CMS) provides this information to educate consumers about nursing facilities throughout the country. You can review details on a particular facility at www.medicare.gov. The ADRC can also help provide information about District nursing facilities.

Community Residential Facilities (CRFs)

Community Residential Facilities typically house from four to fourteen residents in a supervised setting licensed by the D.C. Department of Health. CRFs are a more home-like environment than a nursing home and promote the skills necessary for successful re-integration into one’s community, such as employment training and placement, substance abuse treatment, and moral support services. The ADRC can help provide information about District community residential facilities.

Intermediate Care Facilities for People with Developmental Disabilities (ICFs/DD)

Intermediate Care Facilities for People with Developmental Disabilities provide Medicaid benefits to individuals with specific disabilities who meet the financial eligibility requirements of the Medicaid program. Services are provided in institutional settings with four or more beds for people with intellectual disabilities and other related conditions. Many of the individuals are unable to walk; have seizure disorders, behavioral health needs, mental illness, visual or hearing impairments, or have some combination of the above.
These LTC institutions have a much-needed purpose for District residents, especially for those with complex care needs. The Department on Disability Services can provide information about intermediate care facilities specifically for people with intellectual disabilities in the District of Columbia. For more information, please contact the Department on Disability Services at (202) 730-1700.

**Hospice Care**

Hospice is a special way of caring for people who are terminally ill (medically determined to have six months or less to live) and for their families. Hospice care includes physical care and counseling. The goal of hospice is not to cure illness when the end of a person’s life is inevitable, but to provide comfort for terminally ill patients and their families.

If you qualify for hospice care, the benefit is a comprehensive set of services delivered by a team of providers. You can get medical and support services to cover your needs (for example, nursing, medical, social, counseling, and homemaker). As part of hospice care, you will have a team of doctors, nurses, home health aides, social workers, counselors and trained volunteers to help you and your family cope with
a family member’s illness. Depending on your condition, you may get hospice care in a hospice facility, hospital, or nursing facility. You can also receive hospice care at home and you do not need to be home bound to qualify. For more information about hospice services offered in the District, please call the ADRC at (202) 724-5626 for assistance.

**Does Medicare Cover Hospice Services?**

Medicare covers hospice care for people who are terminally ill and elect palliative care over continued medical treatment. Medicare helps pay for hospice care if the following criteria are met:

- You are eligible for Medicare Part A;
- Your doctor and the hospice medical director certify that your life expectancy, even with treatment, is six months or less;
- You sign a statement electing to have Medicare pay for palliative care, such as pain management, rather than treatment to try to help your condition;
- Your terminal condition is documented in your medical record; and
- You receive care from a Medicare-approved hospice agency.

For more information about Medicare coverage of hospice care and who qualifies, get a free copy of the booklet “*Medicare Hospice Benefits*”. To order a copy please call (800) MEDICARE (1-800-633-4227). TTY users should call (877) 486-2048.

**How Long Can I Receive Hospice Services?**

Hospice care is intended for people with an expected six months or less to live if the disease runs its normal course. If the individual lives longer than six months, they can still get hospice care, as long as the hospice medical director or other hospice doctor recertifies that they are terminally ill. It is important to note that hospice care is given in benefit periods. A care recipient can get hospice care for two 90-day periods followed by an unlimited number of 60-day periods. At the start of each period, the hospice medical director or other hospice doctor must recertify that the care recipient is terminally ill, so they can continue to receive hospice care. A benefit period starts the day the recipient begins to get hospice care, and it ends when the 90-day or 60-day period ends.
Terminating Hospice Care

If the health of the person receiving hospice improves, or their illness goes into remission, he or she no longer needs hospice care. Also, a hospice recipient always has the right to terminate hospice care at any time for any reason. If the recipient chooses to stop hospice care, they will revert to the type of Medicare coverage received prior to choosing hospice program (such as treatment to cure the terminal illness). As long as the beneficiary is eligible, they can return to hospice care at any time.

Medicare covers the following hospice services when they’re needed to care for your terminal illness and related condition(s):

- Doctor services;
- Nursing care;
- Medical equipment (such as wheelchairs or walkers);
- Medical supplies (such as bandages and catheters);
- Drugs for symptom control or pain relief (Some hospices may require copayment for certain drugs);
- Hospice aide and homemaker services;
- Physical and occupational therapy;
- Speech-language pathology services;
- Social worker services;
- Dietary counseling;
- Grief and loss counseling for you and your family;
- Short-term inpatient care (for pain and symptom management);
- Short-term respite care (Some hospices may require small copayment); and
- Any other Medicare-covered services needed to manage your pain and other symptoms related to your terminal illness, as recommended by your hospice team.
**Respite Care and Caregiver Support**

Respite care is short-term or temporary relief for unpaid caregivers, usually family members. Some respite care involves professional caregivers coming to the home. Respite care may also be provided in adult day care facilities for daytime care, in nursing facilities, and in hospice facilities for overnight care.

DCOA supports the caregivers of District seniors by providing caregiver education, spring cleaning and reimbursement for caregiving expenses. The agency also works with the D.C. Caregiver Institute to advocate for training, education, research and support services for caregivers of District seniors. This service is free of charge to District residents. For more information on caregiver support and respite care, please contact the ADRC at (202) 724-5626.

**LTC Transitional Programs**

Institutional care has an important part to play in caring for persons who need long-term care. However, most people would prefer to receive care in their own home, if possible, and many people who must spend some time in an institution are able, after a period, to return to living on their own with the proper supports and services. The Government of the District of Columbia has implemented a range of programs to help residents (1) remain in the community as long as possible, and (2) return to living in the community, after a period of time in a facility.

**D.C. Programs to Help Residents Transition Out of LTC Facilities**

DCOA offers a range of programs that can help with housing, transportation, home-delivered meals, caregiver support, and respite care, which can help residents move out of a LTC facility and back into the community. There are also services that provide ongoing supports for individuals who choose to move out of intermediate care facilities for persons living with intellectual disabilities.
Hospital Discharge Planning

The ADRC’s Hospital Discharge Planning Team provides assistance to hospitals in the District of Columbia during the discharge planning process by offering support and resources to patients 60 years of age and older, and to persons living with disabilities ages 18-59. This assistance will enable these residents to live independently in the community versus going into a LTC facility.

Money Follows the Person Initiative

The Money Follows the Person (MFP) Initiative specializes in moving Medicaid eligible older adults and persons living with disabilities out of institutions and back into their communities. MFP has 24/7 on call availability and Certified Emergency Responders on staff, and coordinates with partners with AARP’s Ombudsman Team, ADRC’s Transition and Hospital Discharge Planning Teams to provide services for those who are MFP eligible. To learn more about this initiative, contact the ADRC at (202) 724-5626 or visit our website at www.dcoa.dc.gov.

D.C. Olmstead Community Integration Plan

The D.C. Olmstead Community Integration Plan is a program designed to assist persons living with disabilities to transfer from institutions to live in the community. In 1999, the U.S. Supreme Court, in Olmstead, U.S., ruled that everyone has a right to live in the community if they choose to do so. You can discuss your desires and wishes with your family, caregivers, and medical team about appropriate resources for living in the community. The District’s Olmstead Plan (D.C.: One Community for All) focuses on transitioning and diverting individuals with disabilities from institutional settings into community settings with the proper supports. To learn more about the Olmstead Plan, please contact the Office of Disability Rights at (202) 724-5055 or TTY: (202) 727-3363.
Housing Choices in the Community

Some District residents living in a LTC institution may want to return to the community, but may not have a home or apartment of their own. Others may already live in the community and need assistance with the high cost of housing in the District of Columbia. The Government of District of Columbia continuously strives to increase the number of affordable housing units throughout the city, especially recognizing that older adults and people living with disabilities (most of whom are living on a fixed income) are two of the groups that are hit the hardest by the lack of affordable housing.

Affordable Rental Housing

The D.C. Housing Authority (DCHA) provides assistance for people with low income to obtain safe, quality and affordable housing through three types of programs:

- DCHA owns and manages 56 public housing properties located throughout the District of Columbia that provide homes at reduced rents for very low-income families, seniors and persons with disabilities. Tenants pay up to 30 percent of their income as rent.

- The Housing Choice Voucher Program (formerly known as Section 8), the federal government’s major rental assistance program, gives participants the option to live in the community of their choice. Once qualified participants obtain a voucher, they may find a rental unit in any privately owned property in the city, as long as it meets Fair Market Rent standards established by the U.S. Department of Housing and Urban Development (HUD).

- The Moderate Rehabilitation Program includes apartment communities throughout Washington, D.C., that are owned by individual landlords or companies. The assistance provided is called “project-based” or “unit-based.” This means that tenants who move cannot take the subsidy with them. For further information on housing programs or whether you qualify for housing assistance, please contact DCHA’s call center at (202) 535-1000.
**Assistance with Home Improvements**

If you already have a home and need to make home improvements, several other programs are available that might help you.

**Handicapped Accessibility Improvement Program**

The Handicapped Accessibility Improvement Program (HAIP) program provides grants of up to $30,000 for improvements that remove physical barriers within a home for persons with mobility or other physical impairments. Allowed improvements include wheelchair ramps, chair lifts, widening of doorways, and bathroom modifications. To qualify, your household income must be at or below guidelines established by HUD. These guidelines are based on household size and change annually.

For additional information on this program, please contact the D.C. Department of Housing and Community Development (DHCD) at **(202) 442-7200** or visit [www.dhcd.dc.gov](http://www.dhcd.dc.gov) for the current income limits.

**Single-Family Residential Rehabilitation Program**

Single-Family Residential Rehabilitation Program (SFRRP) is designed to help households finance home repairs that will address the District’s housing code violations. Funding may be used for activities that include repairing walls and floors, replacing windows, and repairing plumbing, electrical, and heating systems. Up to $75,000 in loan financing is available for each project. The program also offers a separate grant of up to $15,000 for roof replacement.

To be eligible applicants must:

- Own and live in their homes as their primary residence;
- Be current on all District and Federal taxes;
- Have an acceptable credit record; and
- Meet household income eligibility requirements.

Older adults who are eligible for the program will have the first $10,000 of loan financing deferred for as long as they own and live in the home. The Single-Family Rehabilitation Program also offers grant funding for lead-based paint hazard control as part of each rehabilitation project that disturbs lead-based paint.
The SFRRP program is also administered by DHCD. For additional information, please contact the D.C. Department of Housing and Community Development at (202) 442-7200 or visit www.dhcd.dc.gov for the current income limits.

**Adding an Accessory Dwelling Unit**

If you or a loved one owns a single-family home, adding an Accessory Dwelling Unit (ADU) (sometimes called an “in-law apartment,” an “accessory apartment,” or a “second unit”) may help you keep your independence or that of a family member as you age or if you become disabled. An ADU is a second living space within a home or on the same lot as a home. It has separate living and sleeping areas, a place to cook, and a bathroom.

Space such as an upper floor, basement, attic, or space over a garage may be turned into an ADU. Family members might be interested in living in an ADU in your home, or, you may want to build a separate living space at your family members’ home.

The cost for an ADU can vary widely depending on how big it is and how much it costs for building materials and workers. Note that you are required by law to obtain a construction permit in the District of Columbia for most new construction or improvements to existing buildings.

For questions concerning an ADU, potentially illegal construction, certificates of occupancy, or code enforcement, please call the Zoning Administrator at the Department of Consumer and Regulatory Affairs (DCRA) at (202) 442-4400 or visit www.dcra.dc.gov.
Transportation Services

The District of Columbia offers a variety of transportation options to help older residents who are elderly or disabled get around the community.

Medical Transportation Management

Medical Transportation Management (MTM) provides non-emergency transportation to eligible Medicaid beneficiaries who have appointments with Medicaid providers. To use this service, Medicaid beneficiaries must make reserva this serve three days before their scheduled appointment at (866) 796-0601 or (202) 263-1681.

Metro Access

MetroAccess is a shared-ride, door-to-door, paratransit service for people whose disability prevents them from using bus or rail. If you think you may need paratransit service, please visit the web site at www.wmata.com/accessibility/metroaccess_service/ to view eligibility requirements. You may also call to apply at (301) 562-5360 (TYY users call (301) 588-7535).

Seabury Connector

Seabury Connector takes Washington, DC residents age 60 years and older where they need to go, such as:

- Medical appointments, including dialysis and cancer treatment;

- Social service agencies that can assist with gaining access to public benefits such as Social Security, housing assistance and the Supplement Nutrition Assistance Program (SNAP); and

- Group shopping trips for 10 or more persons departing from one site, on Tuesdays and Thursdays between the hours of 10:00 AM and 1:00 PM.

Seabury Connector also offers Call ‘N’ Ride, an alternative transportation service that provides taxicab vouchers at discounted rates depending upon one’s income. Vouchers may be used for taxi transportation at any time.
By no later than 1:00 PM the day before a ride is needed, and preferably at least three days before a trip, customers should call the Seabury Connector Service Center at (202) 727-7771 to make a reservation. To learn more, visit the website http://seaburyresources.org/community_services/transportation/index.html

**D.C. Taxicab Commission Wheelchair Accessible Taxi Service Program**

The Wheelchair Accessible Taxicab Program provides taxicab rides for persons living with disabilities at a discounted rate. The following recipients (providers) of the District of Columbia program receive grant funds and funding provided by the Metropolitan Washington Council of Governments (COG):

Liberty Transportation Management, LLC
3399 Benning Road, NE
Washington, DC 20002
(202) 398-0500

Yellow Paratransit, LLC
1636 Bladensburg Road, NE Washington, DC 20019
(202) 544-1213
**Nutrition Programs**

DCOA provides healthy and nutritious food for eligible residents aged 60 and older. For more information on each of the nutrition options listed below, please contact DCOA at **(202) 724-5626**.

**Congregate Meals**

For older adults looking to meet and socialize with other District seniors, DCOA offers delicious and healthy lunches at congregate meal sites.

**Home-Delivered Meals**

For older adults that have difficulty shopping, cooking, and preparing meals on their own and have limitations that make it difficult to attend a congregate meal site, DCOA offers home-delivered meals. These meals are delivered right to your front door and are available every day of the week.

**Nutrition Supplements**

DCOA offers free nutrition supplements, available to older adults at a high nutritional risk. They are delivered once a month based on need.
Commodity Supplemental Food Program*

Through the Capital Area Food Bank, older adults may receive a free monthly bag of healthy foods, such as rice, pasta, canned fruits, and peanut butter. For more information, please contact DCOA at (202) 724-5626.

Senior Farmers Market Program*

Older adults enrolled in the Commodity Supplemental Food Program are eligible to receive vouchers to use at participating farmers markets across the city to help purchase more fresh fruits and vegetables. For more information, please visit our website at www.dcoa.dc.gov or call us at (202) 724-5626.

*There is a federal income requirement to qualify for these programs.

AARP’s Caregiving and LTC Resources

AARP has tools, information, and experts to address many of the issues faced by caregivers each day. Whether you are caring for someone in your own home or helping someone who lives miles away, the Caregiver’s Handbook at www.aarp.org/caregivers gives easy-to-read tips on providing care at home, hiring help, choosing an alternative living arrangement, and much more. You can also join an active online community of caregivers to exchange insights and information at www.aarp.org/community.

For terminally ill patients who are receiving hospice care through Medicare (see further details on page 28), respite care is offered for up to 5 days. Room and board are covered under this benefit for inpatient respite care and during short-term hospital stays.

If you are among the 44 million Americans currently caring for an older relative or friend, it is important that you take care of yourself, involve others, seek out assistance, and prepare for your future needs.
Legal Services

Two major types of assistance fall under this heading. The first is legal advice with respect to elder rights (about such issues as housing rights, elder abuse complaints, insurance problems, and consumer safety). The second type of assistance concerns estate planning.

AARP Legal Counsel for the Elderly

For over 30 years, Legal Counsel for the Elderly (LCE), a member of DCOA’s Senior Service Network, has been making a difference in the District as the leading provider of free legal services for District residents age 60 and older. LCE champions the dignity and rights of the District’s elderly and assists nearly 5,000 people each year. LCE advocates, empowers, defends, and protects vulnerable older adults in the District through its free legal assistance and social work services. Various issues of elder abuse are addressed through defending seniors on protective services issues which include guardianships, conservatorships, powers of attorney; housing advocacy cases; direct consumer protection in identify theft, fraud, predatory lending, scams, and other practices that target vulnerable elderly. Services and assistance provided by LCE include:

- **Alternatives to Landlord/Tenant Court for the Elderly Project:** encourages property managers to refer tenants to the project when problems are first identified (e.g., changes in patterns of rental payments for long-term tenants, decline in housekeeping, accumulation of personal possessions, and behavioral changes) in lieu of suing for eviction.

- **District Homebound Elderly Project—aka “Project HELP”:** serves District seniors having acute physical or mental disabilities that make it virtually impossible for them to leave their homes even for medical care. District residents who are in need of legal assistance or consumer protections can seek legal assistance through Project HELP by scheduling a visiting attorney to come to them.

- **Consumer & Financial Abuse Division:** provides extended representation to victims of fraud and financial abuse. These cases usually include complaints about real property title fraud, predatory lending, or foreclosure rescue schemes.
• **Real Property Tax Foreclosure Prevention Project:** assists homeowners with lawsuit defense, counseling, and outreach programs to preserve affordable housing opportunities throughout the District of Columbia, as well as protecting private homes from tax lien sales.

• **Senior Medicare Patrol (SMP) Project:** SMP recruits and trains retired professionals to serve as volunteers for the program to assist in educating Medicare beneficiaries, their families, the community, and caregivers on how to identify, prevent, and report Medicare fraud, waste, and abuse.

• **Pro Bono Project & Active Intake Project:** resolves legal problems confronting older residents of the District of Columbia. The staff refers the cases to private sector and government attorneys who handle them on a pro bono basis or reduced fee. The project monitors all cases, such as housing, public benefits, power of attorney, among others, until they close.

• **Outreach and Self-Help Programs:** allows older residents, with the help of non-attorney volunteers, to obtain self-help guides, public benefit checkups, draft consumer complaint letters, and obtain vital records and services.

• **Brief Services Unit:** handles a wide array of issues, including grandparent subsidy and custody work; debt collection defense; identity theft; procurement of benefits (e.g., food stamps, Medicaid, Temporary Assistance for Needy Families (TANF), Supplemental Security Income (SSI), Social Security, Veterans’ pensions, rental and utility assistance); security deposits; repair issues for tenants; deed transfer and probate matters; traffic ticket and license revocation defense; and contracts and warranties cases.

If you are a District of Columbia resident, age 60 or older, and you have a legal problem or question, please call the Legal Counsel for the Elderly (LCE) Hotline at (202) 434-2170. LCE’s legal staff will work with you directly, or they will find a private attorney who will handle your case without charge if you meet certain income and asset guidelines.
D.C. Long-Term Care Ombudsman Program

Legal Counsel for the Elderly also hosts the D.C. LTC Ombudsman Program (D.C. LTCOP), an advocate for people receiving LTC services in nursing facilities, assisted living residences (ALRS), community residential facilities (CRFs), and for residents living in their private homes in the community that receive services through the Elderly and Persons with Physical Disabilities (EPD) Waiver. The D.C. LTCOP works with residents, families, providers, and other stakeholders to resolve complaints pertaining to quality of care and quality of life. The D.C. LTCOP also links residents with services, provides information on LTC facilities and planning, informs residents about their rights, and provides information and legal assistance as warranted.

The D.C. LTCOP advocates for residents receiving LTC supports and services in nursing facilities, assisted living facilities, community residence facilities, and in their private homes. A key advocacy function of the Ombudsman Program is to receive, handle, and resolve complaints including, but not limited to, abuse, gross neglect, and exploitation.

To reach a LTC Ombudsman or staff members contact the D.C. Long Term Care Ombudsman Program at (202) 434-2190 for LTC facilities, and (202) 434-2160 for residents living in the community receiving services through the EPD Waiver. For assistance, please contact the Ombudsman at www.aarp.org.
Elder Abuse Prevention

What is elder abuse? The National Center on Elder Abuse defines elder mistreatment (i.e., “abuse and neglect”) as “intentional actions that cause harm or create a serious risk of harm (whether or not harm is intended) to a vulnerable elder by a caregiver or other person who stands in a trust relationship to the elder. This includes failure by a caregiver to satisfy the elder’s basic needs or to protect the elder from harm.” Most disappointingly, in the only national study that attempted to define the scope of elder abuse, the vast majority of abusers were family members (approximately 90 percent), most often adult children, spouses, partners, and others.

Elder abuse is a growing national problem. The statistics on elder abuse are startling and alarming. According to the National Center on Elder Abuse, the most major recent studies on incidence reported that 7.6 percent to 10 percent of study participants experienced abuse in the prior year, and an overwhelming number of cases of abuse, neglect, and exploitation of seniors go undetected each year. In addition, the increasing incidence of financial exploitation of seniors is particularly troubling. Recent studies report that major financial exploitation was self-reported at a rate of 41 per 1000 surveyed, which was higher than self-reported rates of emotional, physical, and sexual abuse or neglect.

In the District of Columbia, there are many government and community resources that are available to combat and prevent elder abuse. Adult Protective Services (APS), an agency of the Government of the District of Columbia, investigates reports of alleged cases of abuse, neglect, and exploitation by third parties, and self-neglect of vulnerable adults 18 years of age or older. APS provides protective services to reduce or eliminate the risk of abuse, neglect, self-neglect, and exploitation.

In addition, DCOA has established programs focused on elder abuse prevention. DCOA’s Elder Abuse Prevention Committee consists of key government and community stakeholders focused on elder abuse prevention issues. The Elder Abuse Prevention Committee provides assistance and implements community education awareness initiatives for seniors, caregivers, and professionals on elder abuse prevention issues, including financial exploitation. DCOA also provides funding to Legal Counsel for the Elderly which hosts the D.C. Long-Term Care
Ombudsman Program which promotes elder abuse prevention by legal representation, advocacy for seniors on consumer protection issues and prevention of financial exploitation of seniors.

If you believe that you, a family member, neighbor, or another person may be the victim of elder abuse, please contact APS (202) 541-3950. In addition, DCOA’s ADRC is available to assist with referrals to appropriate government and community resources to address and prevent elder abuse, including the financial exploitation of seniors. For additional assistance, please contact the ADRC at (202) 724-5626.

**Wills and Estate Planning**

**Everyone Needs a Will!**

If you die, a will can ensure that your assets are distributed to the people and in the amounts that you wish. A will also allows you to name who you wish to be the guardian(s) of minor children you may have. Preparing a will (and estate planning more generally) is a complex task. To do it right, you will likely need to seek the advice of more than one expert.

Your estate planning team should include the following:

Estate Planning Attorney: Only attorneys are licensed to write legal documents. If you want to draft a will, create a trust, or draft a Power of Attorney, you will need an attorney on your team. Remember that no single attorney is an authority on every aspect of the law. Be sure to find an attorney who specializes in estate planning.

The following suggestions may help you find the right attorney:

- Ask people you know if they can refer you to a good attorney. Friends, business associates, or other professionals (like your financial planner or accountant) may be able to recommend someone.

- Contact the D.C. Bar Association and ask for estate planners or fiscal advisors. You can visit or call them at: District of Columbia Bar Association, 1101 K Street, NW, Suite 200, Washington, DC 20005; (202) 737-4700 or toll free: (877) 333-2227.
Interview one or more attorneys to be sure you feel comfortable with and have confidence in the person you select. Check first to see if the attorney offers a free initial consultation. During this first meeting, you should find out the attorney’s fee schedule and payment expectations. In addition, use this time to discuss what you want to accomplish with your estate plan: this should help you determine if the attorney can meet your needs.

**Tax Accountant:** Are you concerned about the amount of taxes that your heirs could owe to the government after you die? If so, make sure a tax expert is on your estate planning team. This person can help you figure out what your estate’s tax bill will be. He or she can also explore with you the advantages of tax-deferred investments.

**Financial Planner:** A financial planner recommends investments that are best suited to your estate plan. This planner should also be able to estimate your pension income and tell you how that income will be distributed after you die. For more information about choosing a financial planner, call AARP toll-free at (888) OUR-AARP (888-687-2277).

**Insurance Agent:** A qualified insurance agent can help you in matters involving life insurance, LTC insurance, disability coverage, and other concerns. Be sure to choose an agent who is familiar with estate-planning concepts. Before choosing your agent, check with the D.C. Department of Insurance, Securities, and Banking to be sure that the agent is licensed in D.C. Agents who sell variable products must also be registered with the National Association of Securities Dealers. In addition, life insurance agents may have professional designations that show they have a certain level of expertise. Look for an agent who is a Chartered Life Underwriter (CLU) or Life Underwriting Training Council Fellow (LUTCF). You can reach the D.C. Department of Insurance, Securities, and Banking at (202) 727-8000 for assistance. If you have further questions or need to contact a planner, please contact AARP at (800) 687-2277 or www.aarp.org/money/estate planning/.
5. Next Steps

Steps You Can Take Now

» Assess your personal risk of needing LTC based on the factors listed on pages 2-8 (age, heredity, health, and gender) and other information provided in this guide.

» Talk with your family and friends about how you want to be cared for and determine whether you are prepared for your potential long-term care needs.

» Research to find more detail about LTC services – how much they cost, what resources are available, and what the benefits are.

» Get started planning for your own future care, which is an important part of maintaining an independent lifestyle as you age, with AARP’s LTC tools and resources at www.aarp.org.

» Based on your individual needs and wishes, put a plan in place.

» Consult with an attorney to draft your will and estate plan.

Helpful LTC Websites

» Planning for your own future care is an important part of maintaining an independent lifestyle as you age. Use AARP’s LTC tools and resources to get started at www.aarp.org.

» Calculate the costs of LTC services in your area at www.aarp.org/longtermcarecosts.

» Use a map to locate resources for District residents at www.aarp.org/home-family/caregiving.

» Check to see if you or a loved one is eligible for benefits including help for grandparents raising grandchildren at www.aarp.org.

» You can find a detailed overview of reverse mortgage loans,
including a guide on how to compare your options and a calculator to estimate the amount of the loan at www.aarp.org

» Locate benefits for yourself at benefitscheckup.org

» Calculate your life expectancy at http://gosset.wharton.upenn.edu/mortality/perl/CalcForm.html

» Contact the U.S. Department of Housing and Urban Development (HUD) for local contacts who can tell you about the FHA 203K program for home repairs for low-income families at www.hud.gov

» Social Security Resources at www.ssa.gov
## LTC Directory

<table>
<thead>
<tr>
<th>Organization</th>
<th>Phone No.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AARP</strong></td>
<td>(202) 434-2120</td>
</tr>
<tr>
<td>A nonprofit, nonpartisan membership organization that helps people age 50 and older have independence, choice and control in ways that are beneficial and affordable to them and society as a whole.</td>
<td>(800) 424-3410</td>
</tr>
<tr>
<td><a href="http://www.aarp.org/aarp/lce">www.aarp.org/aarp/lce</a></td>
<td></td>
</tr>
<tr>
<td><strong>ADRC’s Hospital Discharge Planning Program</strong></td>
<td>(202) 724-5626</td>
</tr>
<tr>
<td>Nursing home placement often times can be avoided if consumers are provided hospital discharge planning support.</td>
<td></td>
</tr>
<tr>
<td><a href="http://www.dcoa.dc.gov">www.dcoa.dc.gov</a></td>
<td></td>
</tr>
<tr>
<td><strong>Adult Protective Services (APS)</strong></td>
<td>(202) 541-3950</td>
</tr>
<tr>
<td>For case management, counseling, and support services for frail older adults and persons living with disabilities in the District of Columbia who have been abused, neglected, or exploited.</td>
<td></td>
</tr>
<tr>
<td><a href="http://www.dhs.dc.gov/service/adult-protective-services">www.dhs.dc.gov/service/adult-protective-services</a></td>
<td></td>
</tr>
<tr>
<td><strong>American Disabled for Attendant Programs Today (ADAPT)</strong></td>
<td>(512) 442-0252</td>
</tr>
<tr>
<td>A national grass-roots community that organizes disability rights activists to engage in nonviolent direct action, including civil disobedience, to assure the civil and human rights of persons living with disabilities to live in freedom.</td>
<td></td>
</tr>
<tr>
<td><a href="http://www.adapt.org">www.adapt.org</a></td>
<td></td>
</tr>
<tr>
<td><strong>The Beacon Newspaper</strong></td>
<td>(301) 949-9766</td>
</tr>
<tr>
<td>A monthly family-owned business dedicated to providing information and services to active seniors and their families living in – or moving to – the greater Washington, D.C. and greater Baltimore areas.</td>
<td></td>
</tr>
<tr>
<td><a href="http://www.thebeaconnewspapers.com">www.thebeaconnewspapers.com</a></td>
<td></td>
</tr>
<tr>
<td>Organization</td>
<td>Phone No.</td>
</tr>
<tr>
<td>------------------------------------</td>
<td>----------------</td>
</tr>
<tr>
<td>Capitol Caring</td>
<td>(855) 571-5700</td>
</tr>
<tr>
<td>Offers a comprehensive set of end of life services. Hospice services are provided in the patient’s home setting, whether that is a private residence, apartment, LTC facility, assisted living or nursing home. They also provide your caregivers with education and support.</td>
<td><a href="http://www.capitalcaring.org">www.capitalcaring.org</a></td>
</tr>
<tr>
<td>Caring From a Distance (CFAD)</td>
<td>(202) 895-9465</td>
</tr>
<tr>
<td>A web-based service that provides long-distance caregivers and others with information on assisted living, finding adult day care facilities, housing and home care services.</td>
<td><a href="http://www.cfad.org">www.cfad.org</a></td>
</tr>
<tr>
<td>Caregiver Action Network</td>
<td>(202) 772-5050</td>
</tr>
<tr>
<td>“The Caregiver Action Network is the nation’s leading family caregiver organization working to improve the quality of life for caregivers who care for loved ones”</td>
<td><a href="http://www.caregiveraction.org">www.caregiveraction.org</a></td>
</tr>
<tr>
<td>D.C. Caregivers’ Institute (DCCI)</td>
<td>(202) 464-1513</td>
</tr>
<tr>
<td>Provides support to unpaid caregivers residing in the District of Columbia who have primary responsibility for older, vulnerable D.C. residents.</td>
<td><a href="http://www.dccaregivers.org">www.dccaregivers.org</a></td>
</tr>
<tr>
<td>D.C. Center for Independent Living (DCCIL)</td>
<td>(202) 889-5802</td>
</tr>
<tr>
<td>For training in skills that enable individuals to live independently such as personal care, coping, social skills, household management, education, and community living.</td>
<td><a href="http://www.dccil.org">www.dccil.org</a></td>
</tr>
<tr>
<td>Organization</td>
<td>Phone No.</td>
</tr>
<tr>
<td>-----------------------------------------------------------</td>
<td>----------------</td>
</tr>
<tr>
<td><strong>D.C. Coalition on Long-Term Care</strong></td>
<td>(202) 895-9448</td>
</tr>
<tr>
<td>Brings together consumers, advocates and health care providers to work with the District government to create a range of quality LTC services available to low-income District adults with chronic care needs through Medicaid.</td>
<td></td>
</tr>
<tr>
<td><a href="http://www.iona.org">www.iona.org</a></td>
<td></td>
</tr>
<tr>
<td><strong>D.C. Department of Health Care Finance (DHCF)</strong></td>
<td>(202) 442-5988</td>
</tr>
<tr>
<td>Administers D.C. Medicaid, a health care program that covers medical services for qualified older adults and people living with disabilities, based on income and level of need for assistance with daily tasks.</td>
<td></td>
</tr>
<tr>
<td><a href="http://www.dchousing.org">www.dchousing.org</a></td>
<td></td>
</tr>
<tr>
<td><strong>D.C. Housing Authority (DCHA)</strong></td>
<td>(202) 535-1000</td>
</tr>
<tr>
<td>For affordable housing for low-income families, seniors and people living with disabilities in Washington, DC.</td>
<td></td>
</tr>
<tr>
<td><a href="http://www.dchousing.org">www.dchousing.org</a></td>
<td></td>
</tr>
<tr>
<td><strong>D.C. Libraries</strong></td>
<td>(202) 727-1186</td>
</tr>
<tr>
<td>There are a number of libraries where you can find information in the city and have computer access.</td>
<td>(202) 727-0321</td>
</tr>
<tr>
<td><a href="http://www.dclibrary.org/hours/location">www.dclibrary.org/hours/location</a></td>
<td></td>
</tr>
<tr>
<td><strong>D.C. Office on Aging/Aging and Disability Resource Center (DCOA/ADRC)</strong></td>
<td>(202) 724-5626</td>
</tr>
<tr>
<td>To coordinate and connect older adults, persons living with disabilities, and caregivers with the highest quality of long-term service and support options that promote healthy and independent living in the community.</td>
<td>TTY: (202) 724-8925</td>
</tr>
<tr>
<td><a href="http://www.dcoa.dc.gov">www.dcoa.dc.gov</a></td>
<td></td>
</tr>
<tr>
<td>Organization</td>
<td>Phone No.</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>-------------</td>
</tr>
<tr>
<td>Department of Behavioral Services</td>
<td>(202) 673-9319</td>
</tr>
<tr>
<td>DBH contracts with community based providers to provide mental health services and supports. <a href="http://www.dbh.dc.gov">www.dbh.dc.gov</a></td>
<td></td>
</tr>
<tr>
<td>Department on Disability Services (DDS)</td>
<td>(202) 730-1700</td>
</tr>
<tr>
<td>Training and support for people with developmental disabilities so they can gain employment, start a business, volunteer, attend senior citizen programs or receive support throughout the day. <a href="http://www.dds.dc.gov">www.dds.dc.gov</a></td>
<td></td>
</tr>
<tr>
<td>Department of Housing and Community Development (DHCD)</td>
<td>(202) 442-7200</td>
</tr>
<tr>
<td>Creates and preserves opportunities for affordable housing and economic development and revitalizes underserved communities in the District of Columbia. <a href="http://www.dhcd.dc.gov">www.dhcd.dc.gov</a></td>
<td></td>
</tr>
<tr>
<td>Department of Veteran Affairs (VA)</td>
<td>(800) 827-1000</td>
</tr>
<tr>
<td>Disability compensation, pension, education, home loans, life insurance, vocational rehabilitation, survivors’ benefits, medical benefits and burial benefits for veterans, their families, and survivors. <a href="http://www.va.gov">www.va.gov</a></td>
<td></td>
</tr>
<tr>
<td>Eldercare Locator</td>
<td>(800) 677-1116</td>
</tr>
<tr>
<td>Toll-free information and assistance hotline that helps older adults and their caregivers find local support services. <a href="http://www.eldercare.gov">www.eldercare.gov</a></td>
<td></td>
</tr>
<tr>
<td><strong>Organization</strong></td>
<td><strong>Phone No.</strong></td>
</tr>
<tr>
<td>---------------------------------------------------</td>
<td>---------------</td>
</tr>
<tr>
<td><em>Guide to Retirement Living Magazine</em></td>
<td><em>(800) 394-9990</em></td>
</tr>
</tbody>
</table>
| Quarterly publication for housing and other services for seniors and their families in the Washington Metropolitan Area. This publication has information on retirement housing, personal care management services, and socialization.  
www.retirement-living.com |               |
| **GW Health Insurance Counseling Project (HICP)**  | *(202) 994-6272* |
| For District of Columbia residents with Medicare, or who are 60 years or older, HICP provides legal representation and information to help with understanding Medicare, Medicaid, and private health insurance.  
www.law.gwu.edu/Academics/EL/clinics/insurance/Pages/About.aspx |               |
| **Hospice Foundation**                            | *(202) 457-5811* |
| Hospice offers medical care toward a different goal: maintaining or improving quality of life for someone whose illness, disease or condition is unlikely to be cured.  
www.hospicefoundation.org |               |
| **Invest In Safe Technology**                      | *(844) 562-9929*  
*or*  
*(800) 992-0616* |
| There are a wide range of new technology to promote safety and well-being whether you are at-home monitoring or services to keep you safer when you are out of the home.  
www.lifelinesys.com or www.mobilehelpnow.com |               |
| **Medicaid Health Care Ombudsman**                | *(202) 724-7491*  
*or*  
*(877) 685-6391* |
| Counsels and provides assistance to both uninsured and insured District of Columbia residents regarding matters pertaining to their health care coverage.  
www.ombudsman.dc.gov |               |
<table>
<thead>
<tr>
<th>Organization</th>
<th>Phone No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Association of Home Builders (NAHB)</td>
<td>(800) 368-5242</td>
</tr>
<tr>
<td>For help in finding a local contractor trained in counseling seniors about home modification. <a href="http://www.nahb.org">www.nahb.org</a></td>
<td></td>
</tr>
<tr>
<td>“New Lifestyles” Guide</td>
<td>(877) 881-7907</td>
</tr>
<tr>
<td>Biannual guide to senior residences and care options in D.C., Maryland, and Virginia. This includes community residential facilities, retirement and assisted living homes, etc. <a href="http://www.newlifestyles.com">www.newlifestyles.com</a></td>
<td></td>
</tr>
<tr>
<td>Office of Disability Rights (ODR)</td>
<td>(202) 724-5055</td>
</tr>
<tr>
<td>For investigation into and resolution of disability access problems and disability discrimination issues in the District of Columbia. <a href="http://www.odr.dc.gov">www.odr.dc.gov</a></td>
<td></td>
</tr>
<tr>
<td>Office of the Ombudsman Health Care Hotline Home and Community-Based Services</td>
<td>(202) 434-2160</td>
</tr>
<tr>
<td>The D.C. LTC Ombudsman Program advocates for residents receiving LTC supports and services. <a href="http://www.aarp.org">www.aarp.org</a></td>
<td></td>
</tr>
<tr>
<td>Paralyzed Veterans of America</td>
<td>(800) 424-8200</td>
</tr>
<tr>
<td>TTY: (800) 795-4327</td>
<td></td>
</tr>
<tr>
<td>Our veterans are heroes for life. After serving our country, serious injury shouldn’t stop them from living the full, rewarding lives they deserve. <a href="http://www.pva.org">www.pva.org</a></td>
<td></td>
</tr>
<tr>
<td>State Health Insurance Assistance Program (SHIP)/ Health Insurance Counseling Project</td>
<td>(202) 994-6272</td>
</tr>
<tr>
<td>For help with one-on-one counseling on health insurance coverage. <a href="http://www.law.gwu.edu/academics/elclinics/insurance">www.law.gwu.edu/academics/elclinics/insurance</a></td>
<td></td>
</tr>
</tbody>
</table>
Supplemental Nutrition Assistance Program

Supplemental Nutrition Assistance Program (SNAP) is the new name for the federal Food Stamp Program. www.dhs.dc.gov

<table>
<thead>
<tr>
<th>Organization</th>
<th>Phone No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supplemental Nutrition Assistance Program</td>
<td>(202) 671-4200</td>
</tr>
</tbody>
</table>

University Legal Services (ULS)

A protection and advocacy agency for the District of Columbia for persons with disabilities. They provide legal counseling for entitlement services, housing counseling, etc. www.uls-dc.org

<table>
<thead>
<tr>
<th>Organization</th>
<th>Phone No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>University Legal Services (ULS)</td>
<td>(202) 547-4747</td>
</tr>
</tbody>
</table>

Be prepared to live a long, healthy life in the District of Columbia.