

PACKET III: ASSISTED LIVING

Your care-giving journey for a loved one in assisted living	2
Types of assisted living	5
Alaska has three types of licenses for assisted living facilities	
There are two types of assisted living facilities	
The following online companies check out and represent assisted living homes	
Alaska Home and Community Based Medicaid waivers	7
Miller’s Trust	11
Assisted living checklist	14
Facility	
Staff	
General policy	
Services and activities	
Surroundings	
Physical layout	
Food	
Medical and medication policies	
Special questions	
Questions you should be prepared to answer	
Additional resources	20

Your caregiving journey for a loved one in assisted living:

1. **Acknowledge your own feelings of loss.** Whether your loved ones need for more caregiver services has come on gradually and is minimal, or has developed suddenly and requires extensive changes, you are likely to experience unsettling emotions. Take the time to pray, meditate, exercise, start a journal—whatever helps you to center and find the inner peacefulness to continue.
2. **Complete or update the *Packet I: Personal Information* including:**
 1. Who to call for help

2. Personal
3. Medical
4. Insurance
5. Banking and financial
6. Legal
7. Location of important papers

3. **If your loved one has not already done so, complete the legal forms** for a durable financial power of attorney (required by most assisted living facilities). Have your senior sign all paperwork required by doctors and hospitals for doctors and hospitals to discuss your loved one’s medical condition with you. Discuss signing the forms for the durable health power of attorney, health directives or living will and will. Explain the importance of doing this before they become too ill or mentally incompetent to do so.

4. **Meet with the doctor** and find out what your elders’ short-term and most likely long-term treatment and care giving needs will be.

5. **Learn about your loved-one’s medical condition** by checking WebMD, books in the library, related organizations and associations. To prepare for what will come next, learn the symptoms and normal progression of the disease. Find out about available treatments, experimental treatments and clinical research — do they interest your loved one? Are they eligible?

6. **Preparing to move to an assisted living home temporarily:** Currently, there is only one assisted living facility in Valdez. Some people manage to stay in their own homes or with relatives or friends by hiring more caregivers, such as for 24 hours a day, especially if the senior is recovering from surgery and the need for extra care is only temporary.

However, if you cannot care for your senior in your own home during their recovery, your senior may need to move to an assisted living home temporarily after a brief hospital stay before going home. Since you will have very little time to find a suitable assisted living facility in Valdez, Anchorage, Wasilla or Palmer while your loved one is in the hospital, it is best to check out assisted living facilities when there is no current need.

7. **Preparing to move to an assisted living home permanently:** You may also need to move your loved one to an assisted living facility because living at home isn’t working out. There may be no relatives living in Valdez to help. They may need nursing services that professional caregivers are not trained to give.

Before moving your loved one to an assisted living home—check it out, check it out, check it out. Visit the home and use the check list in this section.

It is best to have a list of several homes that you have found suitable, as your first choices may not have space available on short notice. You can call the state-licensing agency to see if the homes you are considering have had any complaints or have been cited for problems, 907-269-3640.

The average price for assisted living care providers in Anchorage is \$14,280 a month. It may be more or less depending upon the services provided. If this is a permanent move, would it be financially better or more convenient for a family member to visit your senior if they moved to another state near a relative? What is the quality and cost of care there?

8. How is your loved one going to pay the bills? Take a realistic look at your financial situation and the amount of time family or friends can reasonably aid in your loved one's care. Check your elder's financial resources in their *Packet I: Personal Information*. Are they eligible for Medicare benefits or Medicaid? Are they properly enrolled? Do they have insurance? How much can the family pay? Are they eligible for Alaska's Senior Benefits program? What would be the advantages of moving to another state where assisted living is less expensive?

9. Call a family meeting. If your family is scattered, use Skype or some other means of keeping everyone informed, hearing their concerns, sharing financial and other responsibilities and preparing for decisions that may need to be made down the line. Encourage everyone to listen carefully to each other and to assume responsibility for various tasks.

Develop a care plan based on anticipated family care giving and your monthly ability to pay other caregivers, or for other facilities from your private resources.

10. If possible, talk to your senior. Keep them as much involved in considering options and making decisions as possible. The goal is to gather the information to help them make an informed decision and to be comfortable with it. This will make any changes in living arrangements much easier to accept. Ideally, they will see changes in their living arrangements as solving a problem and making life easier for them. Often the transition to an assisted living home is easier if there are some familiar items available such as pictures on a wall. Check to see if this is possible.

11. Keep good notes. Whenever you talk to a doctor, caregiver, lawyer, insurance agent, government agency, housing representative, etc, write down the name of the person you spoke with, contact information, date and important points discussed. Start a file for different areas of concern—medical, financial, assisted living homes, insurance agent, etc. and keep the

information in *Packet I: Personal Information*. If the person was going to do something, follow up to make sure it was done.

Types of assisted living:

Alaska has three types of licenses for assisted living facilities:

1. Licensed for individuals 18 years and older with a physical disability, are elderly or suffer from dementia, but who are not chronically mentally ill
2. Licensed for individuals 18 years or older with developmental disabilities or mental health issues
3. Licensed to serve both population types listed above

There are two types of assisted living facilities:

1. Large facilities such as:
 - Providence Horizon House in Anchorage, <http://alaska.providence.org/locations/horizon>
 - Marlow Manor Assisted Living (Anchorage), <http://www.marlowmanor.com>
 - Pioneer Homes (seven locations) <http://hss.state.ak.us/dalp/>. These state sponsored homes are the least expensive. You may wish to apply at age 65.
 - Alaska Veterans and Pioneers Home in Palmer. Seventy-five percent of the 79 beds in the home are designated for veterans and 25 percent are available for non-veterans.
2. Adult family homes which are usually for four to eight residents. Adult family living homes have specialties. Some will be able to provide you with limited care giving assistance, such as laundry, meals, and cleaning rooms. Others will be able to help with medications or dementia. Others will be able to provide hospice care and respect your end-of-life decisions. If you do not want to move at the end of life, it is important to find out their policies.

The State has a list of all licensed assisted living homes at Assisted Living Licensing. dhss.alaska.gov/dhcs/pages/cl/all/default.aspx

The site contains extensive information on community resources, how to make the right choice and a list of all licensed assisted living homes.

The following online companies check out and represent assisted living homes:

A Place for Mom provides free advice at no obligation. They have 17,000 adult family homes nationwide and 300 advisors around the country

including some in Alaska. They routinely check out small adult assisted living homes. After a detailed interview with the applicant regarding their special health needs (diabetic, Alzheimer's, stroke, etc.) and financial status, they make recommendations. Contact them through their website, <http://www.aplaceformom.com>

Our Parents Place, <http://ourparentsplace.com>
 Similar configuration to A Place for Mom. Also free services.

Best Senior Care, http://bestseniorcareonline.com/fastfind/info_short
 Similar configuration to A Place for Mom. Also free services.

Alaska's Home and Community Based Medicaid waivers:

Home and Community Based Services (HCBS) waivers allow people who would otherwise need an institutional level of care to live in their home or community and receive the care they need. Waivers are approved by the federal government and allow Alaska Medicaid to provide expanded services to people who meet the eligibility criteria for the specific waiver.

1. How do I find out if I am eligible for a waiver? First, contact a care coordinator who will help you apply. The care coordinator will arrange for a state nurse to come to your home to do an assessment. To be eligible for PCA services an individual must meet financial eligibility criteria and, through a functional assessment, be found to need physical assistance with either one Activity of Daily Living (ADL) or one IADL. Activities of daily living include bathing, toileting, dressing and grooming.

You will get a letter that tells you if you are approved for services or not.

2. Do I have to have a care coordinator? Yes. Care coordinators assist individuals who apply for an HCB Waiver gain access to needed waiver and other state plan services, as well as needed medical, social and other services. Once a person is approved for a waiver, the care coordinator writes the Plan of Care, monitors to ensure the scope, amount, frequency and duration of services are provided as established in your Plan of Care. Your Care Coordinator will contact you at least twice each month. One contact must be

in person to make sure your services are working for you. You may contact your Care Coordinator at any time to discuss your services and any concerns you may have. They will make revisions in your Plan of Care as necessary.

3. How do I find a care coordinator? Contact Aging and Disability Resource Center, 1-877-6AK-ADRC (1-877-625-2372), or Senior and Disabilities Services, 907-269-3666.

4. How do I know what services I can get? Once you are found eligible for a waiver your care coordinator will help you to develop a Plan of Care that is based on the assessment of your functional or medical needs. Sometimes there are rules that might limit what service(s) you can have. To find out what services are available in your area, visit <http://www.partners.hss.state.ak.us/dsds/ds3/fx/pub/ProviderList.aspx>

5. Can you tell me more about the consumer-directed PCA program? The recipient is responsible for managing their own care, which includes recruiting, hiring, firing, scheduling their PCA, and specifying training requirements for their PCA and assuring that the specified training has been received. The recipient is responsible for participating in the functional assessment, developing a back-up plan about how PCA services are provided if the regularly scheduled PCA is unavailable, and developing a contingency plan to ensure the health and welfare if PCA Services are unable to be provided. Additionally they must notify the provider agency of any service needs, address, contact number, or legal representative changes within five days. As well as working with their chosen provider agency to submit complete application documentation timely.

If the recipient is not capable of managing their own care they must formally choose a legal representative who is involved in their day-to-day care to manage and evaluate the PCA service as it occurs in the home for them. PCAs working in this program must pass the criminal history background check have current CPR/FA and be enrolled with Alaska Medicaid as a renderer.

The CDPCA agency provides administrative support to the recipient and the PCA. This includes payroll and Medicaid billing support for the PCA and Recipient or legal representative training in managing the PCA service.

The recipient may hire a friend, neighbor or other non-related person, or family member (excluding parents of a minor child, spouse, legal guardian, or sole Power of Attorney or a joint/dual Power of Attorney who also is a paid caregiver) to work as their PCA.

The recipient decides what training they will require for their PCA. There is no RN supervision of the PCA service plan provided by the CDPCA agency.

6. If a person is unable to perform the tasks required under the CDPCA program is there another option? Yes. The Agency-Based PXA Program (ABPCA) is responsible for managing and overseeing all the care for the consumer, which includes hiring, scheduling, developing a backup plan to provide PCA services if the regularly scheduled PCA is unavailable, and developing a contingency plan to ensure the health and welfare if PCA services are unable to be provided and dispatching PCAs.

The ABPCA agency provides administrative support to the recipient and the PCA, including payroll, Medicaid billing, ensuring that PCAs have met training requirements and background check requirements.

PCAs working in this program must successfully complete the approved PCA training program, have current CPR/FA, be enrolled with Alaska Medicaid as a renderer and pass the criminal history background check. RN supervision of the PCA service plan is provided by the ABPCA agency.

There is no Agency-Based PCA agency in Valdez but they are available in Wasilla and Anchorage. For name and location see:
http://www.hss.state.ak.us/dsds/Grantservices/PDFs/AB_and_CD_PCA_Agencies.pdf

7. How do I get help with chores? If your Plan of Care includes help with chores the same agencies can help you find someone. Examples of chores include laundry and keeping the living quarters clean and safe.

8. Do I have to get all my services from the same agency? No. You may choose to get approved services from any certified provider in your area. For example, you may get personal care services from one agency and chore and transportation from another.

9. There are a lot of people involved. What does each person do?

- a) The State nurse determines if you are eligible for a Medicaid waiver.
- b) The care coordinator writes a Plan of Care based on the nurse's findings. She visits twice a month and is your representative if problems should arise.
- c) The administrating agency provides you with a list of qualified caregivers and handles payments.
- d) You hire/fire a caregiver and work out a schedule for the delivery of authorized services or, if you are not mentally capable of doing this, then the agency does it.
- e) Your caregiver provides the authorized services and turns in the hours worked to the agency administrator who pays her.

Contact information:

Alaska’s Home and Community Based Medicaid waivers

http://hss.state.ak.us/dsds/pdfs/SDS_MedWaiverBrochure.pdf

Division of Senior and Disabilities Services, 550 W. 8th St. Anchorage, AK 995011

907-269-3666, 1-800-478-9996, <http://hss.state.ak.us/dsds>

Aging and Disability Resource Centers, 1-877-6AK-ADRC, (1-877-625-2372)

<http://hss.state.ak.us/dsds/grantservices/adrc.htm>

SDS service and provider search tool,

<http://www.partners.hss.state.ak.us/dsds/ds3/fx/pub/ProviderList.aspx>

Miller’s Trust (Qualifying Income Trust)

http://dpaweb.hss.state.ak.us/e-forms/pdf/med23_1208.pdf

Miller’s Trust (Qualifying Income Trust)

dhss.alaska.gov/dsds/Documents/02-Internal/med23_1208pdf

1. What is a qualifying income trust?

- Qualifying Income Trusts (QIT) are often referred to as Miller Trusts.
- QITs are typically used when an elderly, disabled, or blind person is not eligible for Medicaid, yet he or she has a high cost for medical or prescription needs that are not covered by Medicare or private health insurance.
- Many people use QITs to access nursing home Medicaid or Home and Community Based (HCB) waiver services. However, a QIT may also be used to qualify for any Medicaid eligibility category.
- When considering using a QIT always consult an attorney specializing in elder or Medicaid law. It is important that Medicaid applicants and recipients know that the establishment of a QIT requires that a qualified trustee be appointed to assume responsibility for their finances.

2. When is a QIT used?

A QIT could be used in the following situations:

- To qualify for Medicaid and his or her monthly income is over the relevant monthly eligibility standard
- To access nursing home Medicaid or HCB waiver services and the monthly income is over the allowable gross income per month

A public assistance caseworker can provide the current standards.

3. Qualifying Income Trust requirements:

A QIT must have the following conditions:

- It must consist only of income of the applicant or recipient and the accrued earnings of the trust. It cannot contain any other assets.
- It must be irrevocable, meaning once established it cannot be cancelled or withdrawn by the beneficiary.
- It must name a trustee. The trustee becomes responsible for the Medicaid recipient's financial affairs and controls the trust.
- It must terminate only upon a court order or the death of the beneficiary, whichever is earlier.
- It must stipulate that upon death of the individual, the state receives all amounts remaining in the trust up to an amount equal to the total Medicaid benefits paid on behalf of the recipient.

4. How much money can I keep from the trust to live on?

- If you are in a Nursing Home you may keep \$200 for your Personal Needs Allowance.
This amount may change.
- If you are receiving home and community based waiver services, you may keep up to \$1,656 per month if living in a private home, or \$1,396 if living in assisted living facility.
This amount may change.
- If you receive regular Medicaid coverage, you may keep the Adult Public Assistance need standard as your monthly living allowance.
- If payments from the trust are used for food, or shelter, this will reduce the amount you may receive from the trust.

5. How will I receive my living allowance?

- Your trustee will need to issue you a check.

6. Can my spouse or children receive money from the trust for living?

- Spouses of Nursing Home Medicaid or home and community based waiver service recipients may receive a spousal allowance and a dependent allowance for minor children. Any spousal income is considered when determining the amount of spousal allowance.

7. What are allowable uses from the trust?

- Some allowable uses are personal needs or living allowance, cost-of-care payments for Nursing Home Medicaid or home and community-based waiver service recipients, uncovered Medical expenses, taxes, or child support. It is important to refer to the trust document for specific guidelines.

Steps to use a QIT:

If you decide to use a QIT to qualify for Medicaid, please take the following steps:

1. Find an attorney who is knowledgeable about trusts. You can contact Alaska Legal Services or the Alaska Bar Association and request referrals to attorneys specializing in Medicaid or elder law (See *Packet I: Personal Information*).
2. Find a willing person or agency that is qualified to be your trustee.
3. Open a separate bank account for your trust account. For ease in accounting, have all money deposited directly in the account.
4. Provide a copy of the trust bank statement to your Division of Public Assistance (DPA) caseworker showing deposits going into the Trust account. You may be required to provide an accounting of all trust expenditures and use.
5. After the attorney has written the trust, provide a complete copy to your DPA caseworker. The trust must then be approved by a Medicaid policy specialist.
6. Once Medicaid policy specialist approves your trust, record trust with court system.
7. Give a copy of the recording document to your DPA caseworker.
8. Keep a copy of your trust for reference.
9. If your trustee changes, be sure to give your DPA caseworker the Successor Trustee Appointment document.

Division of Public Assistance (DPA) contacts:

Home and Community Based Waiver Medicaid, Nursing Home Medicaid, and TEFRA Medicaid contacts:

- Coastal Field Office Specialized Medicaid Office (for Southcentral, Northwestern, Southwestern, and Southeastern Alaska), 907-269-8950 or 1-800-478-4364 or 1-800-478-4372
- Fairbanks Public Assistance office, 907-451-2850 or 1-800-478-2850
- Medicaid for the disabled, blind or elderly, 907-465-3347
- Anchorage Adult Public Assistance office, 907-269-6000
- Mat-Su Adult Public Assistance office, 907-376-3903 or 1-800-478-7778
- Senior Benefits Office 1-888-352-4150

General trust questions:

General trust questions may be directed to the DPA long-term care coordinator at 907-269-7880.

Assisted living checklist:

Some questions may best be answered through written materials, others in conversations with appropriate authorities and still others by your on-site observations.

Facility:

1. What types of apartments or rooms are available?
2. Are there emergency call devices in the room?
3. What is the monthly cost per apartment or room type?
4. What services are covered by this rate?
5. Are there other services available and how much do they cost?
6. What are the payment policies?
7. Do you require a copy of the financial durable power of attorney?
8. What is the refund policy if someone leaves before the end of a month?
9. What is the policy for rate increases?
10. If there is a wait list, how many are on it and what is the policy?
11. Is there an active and inactive wait list? How do they work?
12. Do you do an initial assessment prior to admission?
13. What is your discharge policy?
14. What is the policy for accepting Medicaid or for transferring to Medicaid at a later date?
15. Will you give me a copy of your last state inspection?
16. Can you provide me with references from families of former residents?
17. Where would one go to find out if complaints have been lodged against a facility?
18. Do you have all the appropriate licenses required by the State of Alaska to provide maintenance and/or personal care?

Staff:

1. What is your staff-to-resident ratio? Daytime? Nighttime?
2. Do you have trained and awake staff 24 hours a day?
3. How long has the current administration been in place?
4. How frequent is staff turnover?
5. Are the aides trained or certified to provide maintenance or personal care in accordance with any laws which apply to the provision of such care?
6. What is the level of nursing care provided (RN, LPN, nursing assistant)? How often is it available?
7. Do you have any experience with my issues or diagnosis?
8. Will you please send me your "disclosure of services" statement?
9. Do staff members treat residents with respect and dignity? Even those with dementia?
10. Do staff members treat each other in a professional and caring manner?
11. Does the staff introduce visitors to other staff and residents?
12. Do the residents appear engaged and happy?

13. What language does most of the staff speak?

General policy:

1. Is an individual plan of care maintained on each resident?
2. Are the residents and families included in the preparation of the plan of care?
3. Are there resources available to assist residents in handling their finances?
4. When do residents need to have a financial durable power of attorney?
5. Are residents required to carry renter's insurance?
6. Will the manager and staff respect my end-of-life decisions as expressed in my medical power of attorney?
7. Is there an appeals process for dissatisfied residents?
8. How many residents are there?

Services and activities:

1. Is someone available 24 hours a day to provide maintenance or personal care services sufficient to assist me with needs which result from the inability to perform activities of daily living or from severe cognitive impairment?
2. How flexible is the schedule for receiving help with personal care?
3. Can staff administer my medications? Help me with my medication?
4. Is someone available to help 24 hours a day for extra services such as caring for a wound, cleaning up from the flu?
5. What are the formal arrangements for emergency care? Can I get help right away?
6. Can you provide palliative, end-of-life care according to my health directives and person with my health care power of attorney? Hospice care?
7. What, if any, transportation services are available (e.g. medical appointments, shopping, religious services, etc.)?
8. Will staff arrange for activities (e.g. hair appointment, movie)?
9. How does the home support and accommodate personal hobbies?
10. Are there regularly planned activities I will enjoy?
11. Will I be able to attend religious services of my choice?
12. Is smoking permitted?
13. Can one have a cocktail before or glass of wine with dinner?
14. When can I have visitors?
15. Are pets allowed? What if I am allergic to cats? Dogs?
16. Do you maintain written records of services furnished to each client?

Surroundings:

1. Is it in an attractive location?
2. Is the facility on a quiet street?

3. Are residents who are physically capable and who don't wander allowed to go for a walk by themselves?
4. If not, are daily walks led by staff?
5. Are there shops, library, park or other attractions within easy walking distance? If not, is transportation available?
6. Is there a good view out the windows?
7. Is there an indoor garden area with seating or that is easily visible?
8. Is there an outdoor garden or park area where I can sit?
9. Are there bird feeders? Where?

Physical layout:

1. Does the layout and floor plan make rooms and community space easy to find?
2. Does the layout and floor plan make rooms and community space easy for staff to see residents?
3. Do public restrooms have grab bars?
4. Are handrails available throughout hallways?
5. Are doorways, hallways, and rooms accommodating to wheelchairs and walkers?
6. Are cupboards and shelves easy to reach?
7. Are there nonskid floors and firm carpets to assist walking?
8. Are the exits clearly marked?
9. Is the route to the exit clearly visible at night?
10. Is there a safe place outside for an emergency evacuation?
11. Do the rooms and common areas have good natural and artificial lighting?
12. Is the building clean, free of odors and well heated and cooled?
13. Are the rooms clean, safe and adequate for my needs?
14. Is there a smoke detector and sprinkler system?
15. Is the route to an emergency exit posted in the room?
16. Is there a fire extinguisher in the room?
17. Can I have a computer and internet connection in my room?
18. Can I have a telephone in my room?
19. Can I have a TV in my room?
20. Can I hang pictures on the wall?
21. What furniture is provided?
22. Can I bring my own furniture?
23. Can I have a microwave?
24. Is there a sit-down shower?
25. Can I adjust the temperature of my room?
26. Can I open a window?
27. Can I have a bird feeder near my window?
28. Is there a bug screen on my window?

29. Am I able to lock my room and/or are there locked areas in each room for personal valuables?

Food:

1. How many meals do you serve a day?
2. Where are the meals served?
3. Does everyone eat together?
4. Are the meals nutritious and appealing?
5. Can meals be adapted to special diets (diabetic, heart, allergies, vegetarian, etc.)?
6. Is there a place where I can prepare a meal or snack?

Medical and medication policies:

1. Is self-administration of medications allowed?
2. Can staff explain policies about medications including storage, administration and record keeping?
3. Can residents with dementia receive the oversight they may need?
4. Is there a physician who visits the facility regularly?
5. What medical services are available?
6. Who coordinates outside care provider visits?
7. Do any of the other residents have a history of violent or other behavior problems?
8. If I should suffer from dementia, how would the staff handle behavior problems (e.g. wandering, disturbance, etc.)?

Special questions:

1. Is qualified staff available at night to do a blood test for a diabetic? To give food or medication?
2. Is qualified staff available at night to provide pain medication? Sleeping pills?
3. Who checks to see that patients are not being over medicated?

Questions you should be prepared to answer:

1. What is your health condition? Do you have dementia? Diabetes, kidney failure, etc?
2. What services do you need now?
3. What services do you expect to need in the future?
4. Are you looking for a place where you can remain while gradually requiring more and more care? Or do you plan to move to a long-term care facility if necessary?
5. What do you expect to pay?
6. What is your net worth?
7. What is your monthly income?

8. Have you formally given someone durable financial power of attorney?
9. Do you have an advance health care directive?
10. Do you have a long-term care insurance policy? When does it become effective? What does it cover?
11. Who is your doctor?

Additional resources:

1. Adult Protective Services:

dhss.alaska.gov/dsds/Pages/aps/default.aspx

Senior and Disabilities Services: We are here to help you. Our services are voluntary. We will not force you to move or do anything against your own will. We are here to help you live in a safe and healthy environment and receive the services you need. Please contact our office if you need help or have any questions. Call toll free: 1-800-478-9996 or 907-269-3666

File a report of harm or ask for help:

- Adult Protective Services helps to prevent or stop harm from occurring to vulnerable adults. Alaska law requires that protective services not interfere with the elderly or disabled adults who are capable of caring for themselves.
- Vulnerable adults have:
 - a physical or mental impairment
 - a condition or situation that prevents them from protecting themselves or from seeking help from someone else.

Below are examples of things to report:

- *Abandonment* is the desertion of a vulnerable adult by a caregiver.
- *Abuse* is the intentional or reckless non-accidental, non-therapeutic infliction of pain, injury, mental distress, or sexual assault.
- *Exploitation* is the unjust or improper use of another person or their resources for one's own benefit.
- *Neglect* is the intentional failure of a caregiver to provide essential services.
- *Self-neglect* is the act or omission by a vulnerable adult that results, or could result, in the deprivation of essential services necessary to maintain minimal mental, emotional, or physical health and safety.

How to make a report of suspected abuse:

Call: 1-800-478-9996 Print the report form from the Adult Protective Services site and fax to: 1-907-269-3648 or mail to: Adult Protective Services, 550 West 8th Ave., Anchorage, AK 99501

2. Alaska Brain Injury Network:

<http://www.alaskabraininjury.net/>

Our resource navigators provide information/referral and more.

- Respond to requests for assistance, information, resources, and referral.
- Maintains a brain injury resource directory with statewide and local resources and supports available to individuals, families, friends, professionals, caregivers and the general public.
- Provides technical assistance to communities interested in developing brain injury support groups.
- Distribute educational and informational resources to the public.
- Most of all, our resource navigators listen. They will listen to your unique story and help identify services and supports. They will help you make the necessary phone calls if needed. They will also help brainstorm compensatory strategies or strategies you can use at home if services are not available in your area.

Resource navigators also help providers. If you have a client that you are serving with brain injury, please call us and let us know how we can help you. Call us at 907-274-2824 or toll free (in Alaska) 888-574-2824.

3. Alaska Department of Health and Social Services (*information and assistance*):

150 Third Street

103 P.O. Box 110693

Juneau, AK 99811

Website: <http://www.alaskaaging.org>

Office phone: 907-465-4890

Information phone: 907-465-3250

4. Alaska Law Help:

<http://www.alaskalawhelp.org>

Alaska Law Help provides information on many topics including those relating to seniors such as Elder Abuse, Rights of People with Disabilities, Health, Wills & Estates, Caregiver Information, Medicaid, Medicare, Other Medical Benefits, Social Security/Supplemental Security Income (SSI), Social Security Disability Income, and Veterans' Benefits. This is a self-help site.

5. Alaska Legal Services Corporation:

<http://www.alsc-law.org/>

Alaska Legal Services Corporation (ALSC) is a private, nonprofit law firm established in 1967 that provides free civil legal assistance to low-income Alaskans to:

- Help resolve serious legal problems of low-income Alaskans

- Promote family, social and economic stability by upholding the rule of law
- Reduce the legal consequences of poverty
- Improve the quality of life for our children, our families, the elderly and disadvantaged, and our community.

Anchorage law office: 1016 W. 6th Ave., Suite 200 Anchorage, AK, 99501; 907-272-9431, toll-free outside Anchorage, 1-888-478-2572. Fax: 907-279-7417
E-mail: anchorage@alsc-law.org

6. Alzheimer's Resource of Alaska:

<http://www.alzalaska.org>

As Alaska's leading resource on Alzheimer's disease, Alzheimer's Resource of Alaska is committed to providing information, education and services to Alaska's frail elders and individuals with Alzheimer's disease and related disorders (ADRD).

The agency has three departments. One is the Education Department. Another is the In-Home Department which helps families find respite and chore workers to assist their loved one in the home. The agency can provide these services to people with or without Medicaid or the waiver. The agency has also received a state grant that allows it to provide the same service on a sliding scale using a state grant. Unfortunately, for some regions, those funds are not covering the need.

The last one is Care Coordination. This program is limited to the Anchorage area but informal care coordination is provided by either the education specialist or the In-Home specialist assigned to the region. When there is a need for a more formal care coordinator (manager) then this service is provided through partnership with other agencies that do provide that service. In Valdez we partner with Connecting Ties to provide that service for those who choose to use our agency using Medicaid or the Medicaid waiver.

The best number for any of these departments is the 1-800-478-1080 number for the main office in Anchorage. For the Glennallen and the Copper River Basin office, call 1-800-478-1080, ext. 6.

7. **Eldercare** is a public service of the U.S. Administration on Aging connecting people to services for older adults and their families. They can be reached at 1-800-677-1116. Their website has extensive information on Alzheimer's disease, caregiver, elder abuse prevention, financial assistance, food and nutrition, health insurance, healthy aging, home repair and modification, housing options, in-home services, legal assistance, long-term

care, nursing home and LTC facilities, transportation and volunteerism.
<http://www.eldercare.gov/eldercare.NET/Public/index.aspx>

Eldercare has a number of pdf booklets that can be easily downloaded including:

- *Preventing Falls at Home*: This brochure describes safety checks older adults can do in and around the house or assisted living residence to reduce their risk of falling and help enhance their independent living.
- *Housing Options for older Adults*: This booklet provides an overview of the types of housing available to older adults and highlights some personal and legal issues to consider in making housing decisions.
- *Hospital to Home, Plan for a Smooth Transition*
- *Staying "IN TOUCH" in Crisis Situations*. This brochure outlines how families can stay in touch with older loved ones and be prepared when a crisis situation occurs.
- Other eldercare brochures are available at
<http://www.eldercare.gov/Eldercare.NET/Public/Resources/Brochures/Index.aspx>

Eldercare has direct links to national senior living organizations, government pages, etc. http://www.aging-parents-and-eldercare.com/Pages/Assisted_Living_and_Other.html

8. Kenai Peninsula Independent Living Center (an aging and disability resource center):

47255 Princeton Ave., Soldotna, AK 99669

Website: <http://peninsulailc.org>

E-mail: ilc@xyz.net

Office Phone: 907-262-6333

Information Phone: 1-800-770-7911

Services: Alaska's ADRCs connect seniors, people with disabilities, and caregivers with long-term supports of their choice. We can assist you in the following ways:

- By exploring your options for long-term services.
- By providing you with unbiased, appropriate resources and contacts.
- By assisting you with locating and coordinating services.
- By offering personal and confidential one-on-one guidance/ Options Counseling.
- By following up with you to ensure your needs are met.

Alaska's ADRCs are part of a federal effort to help people more easily access the long-term supports available in their communities. The ADRC network serves Alaskans statewide, regardless of age or income level, through regional sites. Independent Living Center has responsibility for Region V of

Alaska, which includes the Kenai Peninsula, Valdez/Cordova Census Area and the Matanuska Susitna Borough.

Contact information:

Central Peninsula- 907-262-6333
 Homer- 907-235-7911 or 1-800-770-7911
 Seward- 907-224-8711

9. Medicare information office:

800-478-6065, or 269-3680 in Anchorage.

Centers for Medicare and Medicaid services: *“Your Guide to Choosing a Nursing Home.”* This is an valuable 72 page booklet covering options to nursing home care, selecting a nursing home, paying for a nursing home, living in a nursing home, your rights, and free booklets on this and related topics. <http://www.medicare.gov/Pubs/pdf/02174.pdf>

10. Native Village of Eyak (Indian Tribes and Tribal Organizations):

PO Box 1388, 509 1st Street,
 Cordova, AK 99574
 Serves Valdez and Cordova
 Website: <http://www.nveyak.org>
 E-mail: Gloria@nveyak.org
 Office Phone: (907) 424-7738

Services: case management, emergency response system, financial assistance, legal assistance, home repair, home modification, information and referral, home-delivered meals, personal care, respite care, nursing facilities, government assisted housing

12. Nursing Facility Transition Program:

dhss.alask.gov/dsds/pages/nursing/default.aspx

The funds from the Nursing Facility Transition Program can be used to help an elderly person or individual with a disability transition from a nursing facility back into the community. We can provide one-time funds for:

- Home or environmental modifications
- Travel/room/board to bring caregivers in from a rural community to receive training
- Trial trips to home or an assisted living home
- Payment for an appropriate worker for skill level needed
- Security deposits
- One-time initial cleaning of home
- Basic furnishings necessary to set up a livable home
- Transportation to the new home
- Other needed items or services may be approved by program coordinators

An eligible person is one who qualifies both medically and financially for the Medicaid Home and Community Based Services waiver (HCBS) program. The grant is used only for one-time costs associated with the transition; thereafter, the Medicaid program will pay for all services when the HCBS waiver is approved.

Who Qualifies?

- Age 65 or older
- Age 21-65 with physical disability
- Want to be transitioned
- Services/supports available and in place for client to live in community
- Have, or anticipated to have, Medicaid waiver eligibility within six months.

Keep in mind that this entire process, depending on how many services must be set up to make your transition successful, may take one to three months.

Nursing Facility Transition Project Coordinator

550 W. 8th St.

Anchorage, AK 99503

907-269-5025

13. Office of Long-Term Care Ombudsman

Website: akoltco.org 800-730-6393

What is the long-term care ombudsman?

The Office of the Long-Term Care Ombudsman promotes and protects the health, safety, welfare and rights of older Alaskans in long-term care facilities.

In Alaska, these are Assisted Living Homes (ALHs), and Skilled Nursing Facilities (SNFs), generally referred to as nursing homes. As one way of achieving this, the OLTCO investigates and resolves complaints made by, or on behalf of, Alaskan seniors regarding problems they may experience with the care or services they receive in ALHs or SNFs. Such investigations may be conducted solely by the OLTCO, or jointly with other agencies which have joint jurisdiction and/or authority. The OLTCO is also designated to investigate complaints under its Adult Protective Services responsibilities and authority.

The OLTCO also investigates complaints made by or on behalf of Alaskan seniors which involve public or private agencies or individuals such as guardians, conservators, public housing, public assistance, grant programs, home health agencies, and public utilities. Such investigations are rare, and often require interventions which do not include an investigation as such, to resolve the problem to the satisfaction of the complainant.

In addition to its other activities, the OLTCO participates in the development or review of legislation and regulations which directly or indirectly impacts older Alaskans. The OLTCO then seeks to educate and empower elders to weigh-in on such issues, and works with other agencies to provide advocacy. The OLTCO is a member of numerous advocacy groups, committees, and task forces in order to develop cooperative relationships and serve as the voice for older Alaskans in shaping public policy, service delivery, and problem-solving. Participation in such activities also serves as a way for the OLTCO to become better informed of other individual agencies which provide services to older Alaskans, and to inform other participants of the services offered by the OLTCO.

The OLTCO provides information and referrals, and maintains a listing of Statewide and community resources. It also maintains a resource library which is available to the public and providers. Additional education to older Alaskans and their loved ones takes place in various speaking engagements, especially Resident and Family Councils. At every opportunity, education concerning residents' rights is emphasized.

The OLTCO has begun to recruit and train a volunteer program. These volunteers, under the direction and training of the Long-Term Care Ombudsman or his designee, will provide education and advocacy to seniors who reside in long-term care, and their loved ones.

The ombudsman can:

- Investigate and resolve complaints
- Visit facilities to meet with residents and evaluate conditions
- Ensure that residents are receiving legal, financial, social, medical, rehabilitative and other services to which they are entitled
- Act as mediator between residents, family members, facility staff, and long-term care service providers
- Provide information to the public about long-term care facilities and programs
- Assist with the establishment of resident and family councils
- Represent residents' interests before local, state, and federal government by working to change laws, regulations and policies that affect those who live in long term care settings.

How do I file a complaint? You may file a complaint in writing, by telephone, or in person. The complaint may be about suspected abuse, neglect, financial exploitation, violations of residents' rights or any other concern about a person age 60 or older. The ombudsman will take appropriate action to investigate and resolve the problem. The ombudsman may issue reports of investigation concerning matters of concern to the general public. The complaint form is on the long-term care ombudsman website, <http://www.akoltco.org/index.cfm>

Do I have to give my name? No. The name of the resident and the person making the complaint will be kept confidential, unless the resident or the complainant gives us permission to disclose the information or in very rare cases when the court orders a disclosure.

How do I contact the office?

Telephone, 907-334-4480

Toll Free, 800-730-6393

Fax, 907-334-4486

14. Senior benefits:

<http://www.hss.state.ak.us/dpa/programs/seniorbenefits/default.htm>

The Senior Benefits Program was established on August 1, 2007. It pays cash benefits to Alaska seniors who are age 65 or older and have low to moderate income. Cash payments are \$125, \$175, or \$250 each month, depending on income. The income limits for each payment level are tied to the Alaska Federal Poverty Guidelines and change each year as the poverty level changes.

To be eligible you must:

- Be age 65 or older
- Live in Alaska voluntarily
- Not be in Alaska for a temporary purpose such as a vacation or business trip
- Intend to make Alaska your home
- Have a social security number or show that one has been applied for
- Have countable income that does not exceed the income limits for senior benefits.

Resources, such as savings, do not count for Senior benefits.

Payment amounts:

- Eligibility and payment amounts are based on gross annual income. This is established by your preceding year tax records.
- There are three levels of payments depending upon gross annual income:
 - \$250 monthly payment: gross annual income = \$11,040 or \$920 per month
 - \$175 monthly payment: gross annual income = \$14,720 or \$1,227 per month
 - \$125 monthly payment: gross annual income = \$25,760 or \$2,905 per month

14. Senior and Disabilities Division:

800-478-9996, or 269-3666 in Anchorage.
dhss.alaska.gov/dsds/Pages/default.aspx This website has a list of services with links to this website.

15. Other assisted living resources:

Marquez, David (Alaska Attorney General). *Making the Right Choice on an Assisted Living Home*. Alaska Department of Law & Social Services Section., 17 pp.

dhss.alaska.gov/dhcs/Documents/cl/PFDs/ALHChoices.pdf

State of Alaska Department of Administration & Department of Health and Social Services, *Guide to Assisted Living Home Regulations and Statutes*. 115 pp.

dhss.alaska.gov/dhcs/Documents/cl/all/assets/ALHSStatutesRegulationsGuide.pdf