This guide is for anyone who provides emotional or physical assistance to an older adult.
YOUR LOCAL AREA AGENCY ON AGING AND SERVICE ACCESS POINTS

Central Massachusetts Agency on Aging
360 West Boylston St.
West Boylston, MA 01583
Tel: 800-244-3032, 508-852-5539
Fax: 508-852-5425
www.SeniorConnection.org
Email: info@SeniorConnection.org

Area Served
Includes 61 towns/cities covered by the following agencies:

Montachusett Home Care Corporation
680 Mechanic St.
Leominster, MA 01453
Tel: 800-734-7312, 978-537-7411
TTY: 978-537-7411
Fax: 978-537-9843
www.montachusetthomecare.org
Email: mhcc@mhcc-1.org

Elder Services of Worcester Area, Inc.
67 Millbrook St.
Worcester, MA 01606
Tel: 800-243-5111, 508-756-1545
TTY: 774-312-7291
Fax: 508-754-7771
www.eswa.org
Email: info@eswa.org

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

The Caregiver’s Guide is made available through financial support from the Federal Administration on Aging and the Massachusetts Executive Office of Elder Affairs.
About this Caregiver’s Guide

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

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

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

- **Primary Caregiver:** Provides regular assistance with activities of daily living, assists in making decisions, and may at times act as the care recipients’ representative.

- **Long Distance Caregiver:** Lives too far away to provide regular assistance, possibly out of state, and may depend on others to help with direct caregiving tasks.

- **Grandparent as a Caregiver:** Grandparents or relative caregivers, age 55 and older, raising a grandchild under 18 years of age or a grandchild over 18 years of age with a developmental disability.

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

Planning for the Caregiver Role

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

Consider the following questions:

- Has the individual experienced a sudden crisis (a stroke or fall) or has a medical situation developed gradually (dementia, heart condition, arthritis), or have needs increased due to the natural process of aging?

- Are there physical limitations, memory problems or both?

- Is assistance needed with any of the following:
  - Housework, Laundry, Meals
  - Bathing, Dressing, Toileting
WHO IS A CAREGIVER

○ Shopping, Transportation
○ Bill Paying, Financial Planning, Legal Issues
○ Medication Management, Medical Appointments
○ Home Safety
○ Personal Safety
○ Socialization, Emotional Support

- Would the individual consider help from a homemaker, companion, family member, or personal care worker?
- Is attending a social or adult day health center an option?
- Are services needed on an interim, daily or 24-hour basis?
- What future housing arrangements would be most appropriate, and what would the care recipient prefer?
- Is there sufficient income to meet short and long term needs? Are there insurances or other assets to pay for services?
- Has a Durable Power of Attorney been designated?
- Is there a completed Health Care Proxy?

Helpful guidelines as you begin your caregiver journey:
- Clarify your caregiving role.
- Be wary of taking on the role of “rescuer” or a “dictator”. Encourage the individual to do what they are able to do.
- Involve the individual in decision making when possible.
- Connect with the appropriate community resources including family and friends.
- Learn proper techniques for hands on care such as toileting, dressing, bathing and making transfers by searching online videos or reaching out to in home service providers for training.
- Develop a plan, but keep in mind it may change.
- Set a trial period and monitor the process.
Finding your way through the maze of government agencies and community services can be an overwhelming process.

- Write down your questions.
- Be organized, brief, and to the point.
- Record the name of the agency and contact person with whom you speak and the date.
- Record the responses to your questions.
- Use each contact as a resource: Ask what other services exist and what websites to review. If you have not received satisfactory answers, ask to speak to a supervisor.

**When a Care Recipient Resists Assistance**

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

**Tips that may encourage an individual to accept assistance**

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

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

Don’t Give Up

- Look at services in stages - one service at a time.
- Try less intrusive services first (on a trial basis).
  - Meals on Wheels
  - Personal Emergency Response System
  - Volunteer/Companion
  - Transportation
- An individual may at first refuse, but then over time agree to accept care.
- Keep offering and providing whatever care is acceptable.
- Look for an opportunity. You may be able to provide help during an illness or following a hospitalization.
- Most important: be positive, persistent & patient!

Evaluate when a person can no longer make safe decisions. Some signs of concern include:

- Not eating, bathing, or providing basic self-care.
- Not paying bills or answering mail.
- Giving away money inappropriately.
- Doing dangerous things such as leaving on stove burners.
- Showing symptoms of memory loss or confusion.
Caring for the Caregiver

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

How to Take Care of Yourself

- Prioritize your caregiving responsibilities.
- Be realistic. Don’t feel you have to do everything yourself.
- Keep in touch with friends. Don’t isolate yourself.
- Ask for help. Often friends and relatives need you to identify specific ways they can be helpful.
- Acknowledge your limitations. Know when the stresses are becoming too much to bear, and that you need to get your strength and your objectivity back.
- Educate yourself about the condition of the person for whom you are caring. Expect some decline and do not blame yourself for it.
- Allow yourself to grieve the losses that accompany illness.
- Rest, exercise, learn stress management and relaxation techniques; get enough sleep.
- Attend a caregiver support group, in person or online.
- Keep appointments with your medical providers.
- Do something special for yourself on a regular basis.
- Seek help when needed.
- Don’t lose your sense of humor. Laugh, even if it is while you are alone. Just do it!
The Caregiver’s Emotional Health
Caring for a loved one can bring much joy and satisfaction. It also can be associated with intense feelings of fear, worry, sadness, guilt and grief. It is normal for caregivers to experience such emotions in response to coping with the tasks of caregiving. If feelings of overwhelming anxiety or depression do not go away, speak with your doctor. Whatever the cause, depression and anxiety are both treatable conditions.

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

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

Who attends the family meeting will be different for each family. It is important to include everyone that is or will be involved in the individual’s care including family, friends, neighbors, paid caregivers and professionals. The more people involved in the care the less isolated the caregiver will feel. The individual receiving care should be involved in this meeting unless they have a condition which makes it difficult for them to participate.

Tips to a successful family meeting

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

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

Long distance caregivers are caregivers who live a distance away, such as in another town or state, from the person that requires care. This can create added challenges.

- Stay in touch with the care recipient on a regular basis.
- Maintain an updated list of medical and emergency information.
- Utilize your visits to attend important appointments, run errands and socialize with the individual.
- Identify a trusted friend or neighbor to check in on the individual.
- Arrange for a professional geriatric care manager to set up and monitor services.
- While visiting assess the situation for signs of safety issues, self neglect or elder abuse (i.e. financial exploitation, emotional, verbal, physical or sexual abuse).
- Keep in contact with services and health care providers.
- Utilize technology such as video calling to visit and attend appointments remotely.
- Find a way to help the primary caregiver who is local (i.e. offer emotional support or help manage finances).

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

AARP Caregiver Information
www.aarp.org/families/caregiving

Today’s Caregiver Magazine
www.caregiver.com

Family Caregiver Alliance
www.caregiver.org

Helping You Help Aging Relatives
www.caregiving.com

National Alliance for Caregiving
www.caregiving.org

Caregiver’s Library
www.caregiverslibrary.org

Caregiver Information
www.strengthforcareing.com

MA Executive Office of Elder Affairs Caregiver Resources
www.800ageinfo.com

Caregiver Information
www.aplaceformom.com

Caring for Aging parents
www.agingcare.com

Finding Caregivers
www.Care.com

Caregiver Organizational Tools
www.lotsahelpinghands.com

CareZone
www.carezone.com

Caregiving Services
www.leadingage.org
**Grandparents Raising Grandchildren**

The Massachusetts Family Caregiver Support Program recognizes grandparents raising grandchildren as caregivers. The program can offer support and information to these caregivers. The program serves:

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

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

To find a local support group for grandparents raising grandchildren go to www.massgrg.com.

**A Guide For Relative Caregivers** is a publication that includes legal, financial, health, housing, and childcare information. This guide is available online at: www.mass.gov/courts/docs/courts-and-judges/courts/probate-and-family-court/guide-relative-caregivers-western.pdf

Additional Helpful Websites:

**Massachusetts Grandparents Raising Grandchildren**
www.massgrg.com

**AARP Grandparent Information Center**
www.aarp.org/grandparents
The Central Massachusetts Family Caregiver Support Program

The Family Caregiver Support Program is part of a national program which helps caregivers manage the personal, social and economic challenges of caregiving. The program helps caregivers access information, services, education, respite and support. It recognizes that caregivers need resources that are responsive to their family relationships, culture and language.

Caregivers Served by This Program Include:
- Adult family members or other informal caregivers age 18 and older providing care to individuals 60 years of age and older.
- Adult family members or other informal caregivers age 18 and older providing care to individuals of any age with Alzheimer’s disease and related disorders.
- Grandparents or other relative caregivers (not parents) age 55 or older raising grandchildren.
- Relative caregivers, age 55 years or older, of an adult with a disability aged 19-59.

The Central Massachusetts Family Caregiver Program (comprised of The Central MA Agency on Aging Inc; Elder Services of Worcester Area, Inc.; Montachusett Home Care Corp.; Tri-Valley, Inc.)

The program offers:
- Information, resources, referrals and connections to support groups
- A free session in the home, by phone or through email to assist in assessing options, making decisions and solving problems related to caregiving issues
- Informational caregiver materials
- On-going caregiver support and follow-up
WHO IS A CAREGIVER

- Educational programs on caregiver topics
- A Caregiver’s Scholarship Fund which provides assistance funding short-term respite (a brief period of relief), adaptive equipment and other services to benefit the caregiver (this fund is subject to available funding)
- The Caregiver’s Guide, available in English and Spanish, filled with information related to caregiving
- Powerful Tools for Caregivers, a six week workshop that focuses on caring for the caregiver
- Savvy Caregiver Training, a six week workshop that focuses on caring for someone with Alzheimer’s or related dementia.

Central MA Family Caregiver Program websites:
www.seniorconnection.org
www.eswa.org
www.tves.org
www.montachusetthomecare.com
Technology

Social Media and Apps for Caregiving

Social media and apps offer another avenue for solving problems, learning new skills, managing care and receiving support.

- Social media sites such as Facebook can be used to connect with other caregivers in similar situations. Other sites such as Twitter, Instagram and Pinterest can be used to find helpful information about caregiving and elder care.

- Blogs, which are websites created by individuals telling their own story, can give caregivers an opportunity to realize they are not alone in their journey.

- Forums, which allow for online discussions where people post their thoughts, comments and questions on a specific topic, can be a great place for caregivers to reach out to others in similar situations.

Caregivers can utilize apps to access disease specific information, set up calendars, manage finances, organize care and keep track of medications. Music and relaxation apps can be used by caregivers to reduce stress. Some apps are free while others may charge a onetime fee or have a subscription plan. To find helpful apps search your device’s app store.

Since the world of technology is evolving it is important to realize that there will continually be new devices, apps and websites available to help you as the caregiver.
Technology for the Caregiver

**GPS Technology**
There are devices available to determine a person’s location using GPS technology. Some send an alert to the caregivers’ smartphone when an individual goes outside a certain geographical area. Devices could include a watch or pendant worn by the individual or sensors placed in shoes.

**Video Monitoring**
Video monitoring systems range from baby monitors to WiFi enabled cameras. Baby monitors can be audio only or video and do not require WiFi. Video monitoring systems can involve wireless cameras installed throughout the home. These cameras operate on WiFi and the video feed can be viewed from a smartphone or computer. Some systems have motion detection. These systems are self-installed and easy to find at many local retailers or online.

**Smart Home**
A smart home is a home equipped with technology to remotely control and automate household systems such as lighting, doors thermostats, security alarms, cameras and other connected devices. There are systems to detect motion, which can be helpful to know if an individual living alone has eaten, taken medication or is wandering during the night. The technology that is available is always evolving.

**Comfort Companions**
Comfort companions include dogs, cats and baby dolls. They look, feel and sound real. These life-like companions respond to voice and touch. They can decrease anxiety and agitation and provide a source of security. These products are available online and at some local retailers.

**Grocery and Meal Delivery**
There are a number of options for home delivered meals and grocery services. Many grocery stores offer pick-up or
delivery services. There may be a fee for this service. Check with your local grocery store to find out if they offer pickup or delivery services. There are also multiple smartphone apps for food delivery services. These apps, such as Uber Eats and Grubhub, connect you with local restaurants that do not otherwise offer delivery.

**Meal Kits**
Meal kits provide weekly boxes with ingredients and suggested recipes that must be cooked by the customer using the pre-ordered ingredients. Blue Apron, Hello Fresh, Home Chef, and Amazon Fresh are examples of this service.

**Assistive Technology**
High and low-tech devices to help individuals increase, maintain or improve independence. These can include mobility devices, adaptive telephones, communication devices, and durable medical equipment. The programs listed below can assist in identifying and locating appropriate technology.

**Massachusetts Equipment Distribution Program**
Tel: 1-800-300-5658
www.mass.gov/massachusetts-equipment-distribution-program-massedp
**Services:** Provides individuals with disabilities specialized telephones. A trained professional will meet with the individual to identify the most appropriate technology. Depending on income, the telephones may be provided at no or low cost.

**Caption Call**
Tel: 1-877-557-2227
www.captioncall.com
**Services:** Caption Call provides a free telephone to individuals who have been certified from a medical professional as having hearing loss and needing a captioned telephone. This phone has a screen that
displays in large print what the caller is saying. This telephone is also an amplified phone.

**Easter Seals Massachusetts**  
Tel: 800-244-2756  
Worcester, MA  
www.eastersealsma.org  
Assistive Technology Loan Program  
**Services:** Offers Massachusetts residents with disabilities and their families low interest loans to pay for assistive technology devices and services to assist them to live independently in their home. Devices and services that may be purchased include hearing aids, computers with special programs, electric wheelchairs or scooters or adapted vehicles.

**MassMatch**  
Tel: 877-508-3974  
www.massmatch.org  
**Services:** The Commonwealth of Massachusetts’s initiative to Maximize Assistive Technology (AT) in Consumer’s Hands. It is one of 56 state-level AT Act programs in the United States. Its mission is to promote the use of AT and AT services to enhance the independence of people with disabilities, enabling equal participation in all of life’s activities.

**REquipment**  
Tel: 866-244-6156  
www.dmerequipment.org  
Email: info@dmerequipment.org  
**Services:** Obtain free, gently used, durable medical equipment (DME) for use by individuals and families in Greater Boston and Central Massachusetts. REquipment also accepts donations of DME.

These programs help in locating appropriate technology.
Assistive Technology Exchange
www.getatstuff.com
Services: free “classified ad” type website designed to help people find, buy, sell or give away used AT equipment. Used equipment is posted for sale or donation, and postings may be sorted by geography and/or device category or keyword.

Verizon Center for Customers with Disabilities
Voice or TTY: 1-800-974-6006
Videophone: 508-251-5301
Services: Assistance for customers with telecommunications needs, including phone, Internet and TV service. Staff provides an array of telephones and other equipment, including TTYs, amplified phones and large-button phones. The VCCD also provides large-print bills, bills printed in Braille, and even a talking caller ID service.
In Home and Community Based Care

Many families wish to keep their loved ones living independently in their own home or setting of their choice. The following agencies can provide information, programs and services to do just that.

Area Agency on Aging (AAA)

Every community in the United States is represented by an Area Agency on Aging. These agencies are responsible under the federal Older Americans Act to plan, fund and monitor programs. The agencies provide referrals to local area organizations.

The Central Massachusetts Agency on Aging, Inc.
The Central Massachusetts Agency on Aging, Inc. is a private nonprofit organization, designated by the Massachusetts Executive Office of Elder Affairs to fund services for older adults and their caregivers in the 61 cities and towns in Central Massachusetts.

www.SeniorConnection.org is a website for older adults and caregivers. It includes a searchable database of agencies and programs, links to useful internet resources, community news, and calendar of events.

Outside of the Central Massachusetts region visit www.elderca.re.acl.gov or call 1-800-677-1116 to find your local AAA.
Aging Service Access Points (ASAP)

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

Montachusett Home Care Corporation
680 Mechanic St., Leominster, MA 01453
Tel: 800-734-7312, 978-537-7411
Fax: 978-537-9843 TTY: 978-514-8841
Web: www.montachusetthomecare.org
Email: mhcc@mhcc-1.org or MHCC@MHCC-1.org
Elder Services of Worcester Area, Inc.
67 Millbrook St., Worcester, MA 01606
Tel: 800-243-5111, 508-756-1545
Fax: 508-754-7771 TTY: 774-312-7291
Web: www.eswa.org
Email: irinfo@eswa.org
Area Served: Auburn, Barre, Boylston, Grafton, Hardwick, Holden, Leicester, Millbury, New Braintree, Oakham, Paxton, Rutland, Shrewsbury, West Boylston and Worcester

Tri-Valley, Inc.
10 Mill St., Dudley, MA 01571
Tel: 800-286-6640, 508-949-6640
Fax: 508-949-6651 TTY: 508-949-6654
Web: www.trivalleyinc.org
Email: info@tves.org
Area Served: Bellingham, Blackstone, Brookfield, Charlton, Douglas, Dudley, East Brookfield, Franklin, Hopedale, Medway, Mendon, Milford, Millville, Northbridge, North Brookfield, Oxford, Southbridge, Spencer, Sturbridge, Sutton, Upton, Uxbridge, Warren, Webster, West Brookfield

For a list of all the statewide ASAPs contact 1-800-AGEINFO or visit: www.800ageinfo.com

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

Information & Referral
Information & Referral Specialists offer free resource information by telephone, email or to walks-ins about a variety of topics ranging from public benefits to community services and state and national programs. All requests for information are confidential. Anonymous inquiries are welcome. Translation is available.
**Care Management**
Care Managers conduct in-home assessments, determine eligibility for different programs and develop care plans that promote independent living. Care Managers arrange for appropriate services and manage care plans.

**Home Care**
The State Home Care Program provides in-home services to individuals age 60 and over who need assistance to live independently. Services are also offered to caregivers who need respite from their daily caregiving tasks. People under age 60 with a documented diagnosis of Alzheimer’s disease or related dementia also qualify for respite services for their caregivers. To receive services an individual must need assistance with activities of daily living and meet age and income eligibility.

**Home Care Services that may be offered include:**
- Adult Day Health
- Adaptive Equipment
- Behavioral Health Services
- Chore (heavier house cleaning)
- Companions
- Consumer Directed Care
- Dementia Day Care
- Habilitation Therapy
- Home Health Services (Home Health Aid)
- Home Delivered Meals
- Home Delivered Pre-Packaged Medications
- Homemaking (light housekeeping, laundry and shopping)
- Laundry Service
- Low Vision Rehabilitation Counseling
- Meal Preparation
IN HOME AND COMMUNITY BASED CARE

- Medication Dispensing Systems
- Personal Care
- Personal Emergency Response Systems
- Supportive Day Care
- Supportive Home Care Aid
- Translation/Interpreter
- Transportation to medical appointments
- Wanderer Locator Service

Other programs ASAPS may offer include:

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

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

To make a report contact:

Elder Abuse Central Intake Unit
800-922-2275

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

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

Aging and Disability Resource Consortium (ADRC)
The Massachusetts Aging and Disability Consortiums (ADRCs) are statewide, trusted places in the community that offer consumers a coordinated system of information and access to long term services and supports regardless of age, disability or income. The mission of ADRCs is to provide a No Wrong Door system to deliver unbiased, reliable information regarding long term services and supports (LTSS) addressing each individual’s unique needs, goals and choices to live independent lives and in the setting of their choice regardless of age, disability, or income. The Executive Office of Elder Affairs and the Massachusetts Rehabilitation Commission administer the ADRC model in Massachusetts in partnership...
with 11 Independent Living Centers and 27 Aging Services Access Points and Area Agencies on Aging. There are 11 regionally-based ADRCs in Massachusetts.

All ADRCs offer **Option Counseling.** Options Counselors provide information about public and private long term services and supports to adults of any age, their family members, caregivers and significant others to ensure that individuals are able to make informed decisions about long term support services and settings.

**In-Home/Community Based Services**

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

Professional workers coming into your home through an ASAP, or a licensed agency must have background checks and liability coverage. When researching licensed home health or home care agencies additional questions to ask should include:

- Is the agency bonded and insured?
- Is the agency a member of a professional association?
- Can you meet the worker prior to start of services?
- Does the agency allows for 24/7 communication?
- What training do workers receive?
- What is the ability to offer a back-up worker?
IN HOME AND COMMUNITY BASED CARE

- Are there minimum hours per shift?
- Does the agency have contracts with private insurance companies, non-profits or other organizations?
- Can you obtain copies of customer feedback?

If you privately hire workers without utilizing an ASAP or licensed home health agency, you may want to conduct your own background checks. When hiring privately, it is important to follow state laws about working hours, disability insurance and payroll taxes.

Non-Medical In-Home Services Include:

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

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

- **Adaptive Equipment:** Includes grab bars, transfer benches, walking aids, pill dispensers, transport chairs, etc. Medicare and MassHealth cover some medical equipment with Doctor Authorization. Information is available at physician’s offices, medical supply companies and at www.medicare.gov.

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

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

- **Habilitation Therapy /Dementia Counseling:** Specialists provide expertise in understanding Alzheimer’s and related dementias, as well as techniques of communication, behavior management, structuring the environment, creating activities and planning for future care needs.

- **Hearing Rehabilitation:** Provides adaptive skills and aids for people who are hard of hearing or deaf. The Massachusetts Commission for the Deaf and Hard of Hearing serves as the principal agency in the state on behalf of the deaf, late deafened, and hard of hearing people.
- **Healthy Aging Workshops:** A variety of healthy aging workshops are available in different settings as well as online that teach individuals to take control of their health.

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

- **Nutrition Programs through the Older Americans Act**
  - **Home Delivered Meals:** A meal is brought to an individual’s home who is 60 years of age or older, homebound and unable to prepare meals.
  - **Congregate Meals:** Meals are provided at community sites such as senior centers etc.

- **Money Management:** Trained volunteers help to set-up budgets, pay bills, write checks and monitor accounts. There are two levels of assistance available; Bill Payer Services and Representative Payee Service.

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

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

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

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

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

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

- **Adult Day Health:** Structured, comprehensive community-based group programs designed to meet medical and social needs through individual care plans. Programs provide meals, health and social support services in a protective setting. Some programs specialize in dealing with people experiencing issues with dementia. Hours of operation vary. Transportation may be available.
Program of All-Inclusive Care for the Elderly (PACE): The Program of All-inclusive Care for the Elderly (PACE) is administered by MassHealth and Medicare to provide a wide range of medical, social, recreational, and wellness services to eligible participants. The goal of PACE is to allow participants to live safely in their homes instead of in nursing homes. You do not need to be on MassHealth to enroll in PACE. However, if you qualify for MassHealth it may pay your PACE premium.

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

**Summit ElderCare**
877-837-9009
www.summitelder.org

**Arranging for In-Home/Community-Based Services**
Individuals and caregivers often must identify, coordinate and arrange for services independently. If the individual receives services through an Aging Service Access Point (ASAP) a care manager will coordinate and manage services received through the ASAP agency. If the individual is not eligible for ASAP services and/or is in need of additional care management an Aging Life Care Professional formally known as a private geriatric care manager, can be hired to coordinate all aspects of care.
Aging Life Care Professional (Private Geriatric Care Management)
Aging Life Care Professionals operate independently on a private fee-for-service basis. Services offered may include identifying needs, arranging for and monitoring services, offering referrals to specialists and acting as a liaison to families. You should do your own investigation to determine the professional’s qualifications. Make sure you understand the charges and the services you will receive.

Additional Helpful Website:
Aging Life Care Association
www.aginglifecare.org

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

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

Medicare and private health insurance will not pay for ongoing in home and community based services.
Health Insurance

Medicare, Medigap, Medicare Advantage Plans

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

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

**The Massachusetts Division of Insurance**
Boston Office - 617-521-7777
Springfield Office - 413-785-5526

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

**Medicare Prescription Drug Coverage (Medicare D)**
Medicare Part D is insurance provided by private companies to help cover the costs of prescription drugs. Each plan can vary in cost and specific drugs covered. **Every Medicare beneficiary must have prescription drug coverage.** People with limited income and resources may qualify for “Extra Help” for paying for Medicare drug plan costs. The amount of extra help is based on income and resources.
For more information or to see if you qualify for “Extra Help” contact:

1-800-MEDICARE (1-800-633-4227)
(TTY) 1-877-486-2048
www.medicare.gov

Social Security 1-800-722-1213
www.socialsecurity.gov

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

**Medicare Coverage of Home Health Services**

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

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

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

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

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

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

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

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

Additional Helpful Websites:
www.medicarerights.org

**Medicare Outpatient Observation Notice (MOON)**
Your hospital status, whether you are inpatient or outpatient, determines an individual’s cost sharing for Medicare services during the hospital stay and post hospitalization care in a skilled nursing facility. Even if you are in the hospital, you may be under “observational status” receiving outpatient services. Observation services are commonly ordered for patients who present to the emergency department and who then require a significant period of treatment or monitoring in order to make a decision concerning their admission or discharge. If you are receiving outpatient services under observational status for more than 24 hours during a hospital stay you will receive a MOON. The MOON will explain why the individual is receiving observation services as an outpatient and the implications in regards to Medicare cost sharing.

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

- Arranging necessary post-hospital services and care.
- Educating the patient, family/caregivers and community providers about the patient’s post-hospital care plan.
- Providing a list of Medicare approved home health agencies and skilled nursing facilities.
Notice And Appeal Rights Under Traditional Medicare:
If you feel that you have been discharged too soon or without the necessary post-hospital services having been arranged, contact your local Quality Improvement Organization (QIO)-MassPRO at 1-800-252-5533, (TTY) 781-419-2502, as soon as possible to file a complaint.

You are entitled to notice when your hospital stay is no longer medically necessary and the hospital intends to charge you for continued stay, and that:

- You no longer require inpatient hospital care;
- You will be charged for care beyond the second day following the notice;
- The QIO will make a determination on the validity of the hospital’s finding if you remain in the hospital; and
- The determination of the QIO can be appealed.

An inpatient of a Medicare participating hospital has a right to an appeal to the QIO of a hospital’s notice of non-coverage. If you appeal, the QIO must complete its reconsideration determination and send you a written notice, including relevant time periods for filing appeals.

For information visit:
Center for Medicare Advocacy, Inc.
www.medicareadvocacy.org.
MassHealth (Medicaid)

Medicaid is a state and federal program that purchases medical services for individuals who meet residency, income and asset eligibility requirements. In Massachusetts Medicaid is called MassHealth. MassHealth covers most of the necessary services provided by physicians, hospitals, clinics, medical equipment suppliers, therapists and some in-home services. In some cases, a couple’s income and assets can be looked at separately to determine financial eligibility.

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

MassHealth (Medicaid) Buy-In Programs
MassHealth Buy-In is a program for Medicare beneficiaries with low income. It allows MassHealth to pay all or part of the Medicare Part B premium for residents who are not getting other MassHealth benefits. It can also help obtain Medicare Part B for a person who has only Medicare Part A. Income and assets must fall at or below certain guidelines.

MassHealth (Medicaid) Coverage of Long Term Care Facilities
MassHealth covers long term care costs for individuals residing in long term care facilities, nursing facilities, rehabilitation hospitals and state hospitals. To be eligible, an individual must be age 65 or older, or disabled according to standards set by the Social Security Administration. An applicant must be screened and determined, based on clinical criteria, that a need for skilled nursing care exists that cannot be met in the community. Income and assets must fall at or below certain guidelines.
MassHealth (Medicaid) Coverage of Assisted Living Facilities

MassHealth may provide limited financial assistance to qualified individuals who would like to reside in an assisted living facility.

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

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

For more information about MassHealth programs contact:

**MassHealth Customer Service**
1-800-841-2900
TTY: 1-800-497-4648
www.mass.gov/topics/masshealth

Senior Care Options (SCOs)

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

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

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

Massachusetts Division of Insurance
Consumer Line
Tel: 1-877-563-4467
TTY: 617-521-7490
www.mass.gov/doi
Prescription Drug Assistance/Health Insurance Assistance

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

The Partnership for Prescription Assistance
The Partnership for Prescription Assistance, (PPA) sponsored by America’s pharmaceutical research companies is a private sector effort to help qualifying patients who lack prescription coverage get the medicines they need. The PPA offers a single point of access to public and private patient assistance programs including programs offered by pharmaceutical companies. To access the PPA, call:
   1-888-477-2669 or visit: www.PPARx.org.

Rx Assist
Rx Assist is a website that offers information about free and low cost medicine programs and other ways for individuals to manage their medication costs. Visit:
   www.rxassist.org

Massachusetts College of Pharmacy and Health Sciences (MCPHS) Pharmacy Outreach Program
Pharmacists and Case Managers help individual’s access prescription medications by providing information on assistance programs, and lower cost alternative medications. Pharmacists answer questions about drug interactions, how to take medications, and any other medication-related questions. For more information call 866-633-1617 or visit:
   www.mcphs.edu/impact/community-service-programs/pharmacy-outreach-program
Serving The Health Information Needs Of Everyone (SHINE)
The SHINE Program (Serving Health Information Needs of Everyone) is a state program that provides free health insurance information, counseling and assistance to Massachusetts residents with Medicare and their caregivers. Contact SHINE to locate a trained volunteer counselor near you.

Tel: 1-800-Age-Info (1-800-243-4636) Option 3
TTY: 508-422-9931

The Central Massachusetts SHINE program provides additional information on their website at:
www.shinema.org

The program also hosts a local cable TV show, Medicare and More. Archived episodes can be found on the Central MA SHINE website.

Additional Helpful Websites:

**Needy Meds – Find help with the cost of medicine**
www.needymeds.org

**Website and mobile app that compares prescription drug prices and offers drug coupons.**
www.goodrx.com
Benefits and Community Resources

Veterans Services

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

The VA provides a wide range of benefits including:

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

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

- **Disability Compensation**: A monetary benefit is paid to Veterans who are disabled by an injury or illness that was incurred or aggravated during active military services. These disabilities are considered to be service connected.
**Pension Benefit:** A low-income, war-time Veteran may be eligible for a pension if they meet certain service, income and net worth limits, are age 65 or older and permanently and totally disabled from conditions NOT related to military service. The veteran’s surviving spouse/widow(er) may also be eligible for a pension based on his/her level of income.

**Aid and Attendance and Housebound:** A benefit available for those veterans and their surviving spouses who require the regular aid and attendance of another person. This is a “Pension Benefit” and is not dependent upon service-related injuries for compensation. An aid and attendance or housebound pension provides a direct monthly pension benefit to purchase care in the home including adult day health, or care in a nursing home or assisted-living facility. In order to qualify for benefits, a veteran or surviving spouse must meet certain outlined by the VA including military service history, medical necessity, cost of care compared to income and assets. Details and information about this benefit can be found at www.va.gov and www.veteranaid.org or call 1-866-584-7191.

**Burials & Memorials:** Burial and memorial benefits are available for service members, veterans and family members. Services include internment, headstones and markers and memorial certificates as well as burial in national cemeteries. These benefits are available through the National Cemetery Administration (NCA).

**Caregiver Services:** The VA offers services for families caring for veterans. A caregiver support line is available at 1-855-260-3274 to help connect individuals with VA services as well as offer support. For more information on VA Caregiver services, visit www.caregiver.va.gov. Information about specific benefits is available at www.va.gov.
The website features the Federal Benefits for Veterans, Dependents and Survivors booklet which provides a description of VA Benefits and contact information. For assistance filing the appropriate VA forms, you may contact the nearest VA regional office, medical center, clinic, or Vet center.

**Department of Veterans Affairs (VA)**

www.va.gov  
Benefits 1-800-827-1000  
Health Care 1-877-222-(VETS) 8387  
Crisis Line 1-800-273-8255 Press 1  
Worcester Veterans Clinic 1-800-893-1522  
Worcester Vet Center 1-508-753 7902

**Department of Veterans Affairs (VA)**

Tel: 800-827-1000 TTY: 800-829-4833  
JFK Federal Building  
15 New Sudbury St., Boston, MA 02203

**State Veteran Services**

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

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

**Massachusetts Department of Veterans’ Services**  
(DVS)  
Boston, MA 02111  
Tel: 617-210-5480  
www.mass.gov/veterans
Veterans Inc.
Worcester, MA 01605
Tel: 508-791-1213
Fax: 508-791-5296
www.veteransinc.org

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

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

There are many public benefits that are available for low to moderate income individuals. You can find additional benefit information in Living At Home section of this guide.

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

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

Contact your local transitional assistance office at www.mass.gov/DTA or call:
- DTA-Fitchburg Area Office: 978-665-8700
- DTA-Framingham Area Office: 508-661-6600
- DTA-Southbridge Area Office: 508-765-2400
- DTA-Worcester Area Office: 508-767-3100
Services for Individuals with Specialized Needs

Services for Individuals with Disabilities

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

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

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

**Massachusetts Department of Conservation and Recreation Universal Access Program**
Tel: 617-626-1250
TTY: 413-577-2200
www.mass.gov/eea/agencies/dcr
*Services:* Provides outdoor recreational opportunities in Massachusetts State Parks for visitors of all abilities.
Services for Individuals Who Are Blind or Visually Impaired

MAB Community Services
Tel: 617-738-5110
Tel: 888-613-2777
www.mabcommunity.org
Services: Provides information, and services including vision rehabilitation and transportation.

Massachusetts Commission for the Blind
Tel: 617-727-5550
Tel: 508-754-1148
www.mass.gov/mcb
Services: Provides social, vocational rehabilitation and mobility training, audio books and magazines, other adaptive equipment, resources and information.

Services for Individuals Who Are Deaf or Hard of Hearing

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

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

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

Services for Individuals with Developmental and/or Intellectual Disabilities

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

Seven Hills Adult Day Health  
Tel: 508-983-1336  
www.sevenhills.org  
**Services:** Medically-based adult day program for elders facing declining health, allowing them to live independently in the community.
Seven Hills–Foundation  
Tel: 508-755-2340  
www.sevenhills.org  
**Services:** Vocational evaluation and training, social, recreational, advocacy, information and referral and elderly outreach visits.

Department of Developmental Services (DDS) Services  
Tel: 617-727-5608  
DDS-North Central: 978-342-2140  
DDS-Worcester: 508-792-6200  
DDS-South Valley Area-Milford: 508-634-3345  
DDS-South Valley Area-Southbridge: 508-764-0751  
www.mass.gov/eohhs/gov/departments/dds  
**Services:** Residential services, vocational training, service coordination and respite.

Services for Individuals with Mental Illness

Massachusetts Department of Mental Health (DMH)  
Tel: 800 221-0053  
TTY: 617-727-9842  
DMH North Central Site: 978-353-4400  
DMH South Central Site: 508-887-1100  
DMH Worcester Site: 508-887-1160  
www.mass.gov/dmh  
**Services:** Provides clinical care, supportive services including inpatient services, residential treatment, support, day services, outpatient services, medication management, educational employment, and rehabilitation opportunities.
Illness Specific Organizations

The following agencies promote health education and information on specific illnesses.

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

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

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

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

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

- **American Lung Association of Massachusetts**
  www.lung.org

- **American Parkinson’s Disease Association - MA Chapter**
  www.apdama.org

- **American Stroke Association - A Division of the American Heart Association**

- **Arthritis Foundation**
  www.arthritis.org

- **Brain Injury Association of Massachusetts**
  www.biama.org

- **CancerCare**
  www.cancercare.org

- **National Alliance for the Mentally Ill of Central MA**
  www.namimass.org
Massachusetts Commission for the Blind
www.mass.gov/mcb

National AIDS Hotline
www.cdc.gov/hiv

National Cancer Institute
www.cancer.gov

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

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

National Multiple Sclerosis Society
www.nationalmssociety.org

National Osteoporosis Foundation
www.nof.org

National Stroke Association
www.stroke.org

Additional helpful websites:

Center for Disease Control and Prevention
www.cdc.gov

US Department of Health and Human Services
www.hhs.gov/

National Library of Medicine Consumer Information
www.medlineplus.gov

National Institute of Health
www.nih.gov

Health Information
www.familydoctor.org

Mayo Clinic
www.mayoclinic.com
Conversations on End-of-Life Issues

Discussing health, personal and financial wishes is the most important thing an individual can do to assure that their plans will be followed. The discussion will also help to decrease the stress of those who will be involved in making the decisions.

What to Ask the Individual

- Who do you want to make health care decisions for you, if you are not able to make your own? Do they know what your wishes are?
- Do you have an updated Health Care Proxy?
- Do you want to be hospitalized, stay at home or somewhere else while you are seriously ill?
- What medical treatments and care are acceptable?
- Do you have fears/concerns about any particular medical treatment?
- Do you have religious or spiritual beliefs that affect decisions about your care?
- What health and prescription insurance is in place?
- Where are important medical, financial and legal records kept?
- Do you have an updated Power of Attorney?
- Do you have an updated will?
Be aware that Health Care Proxy laws and protocols, as well as the legal status of Personal Wishes Statements, vary from state-to-state. If you spend time in another state, you should investigate the legal requirements of that state.

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

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

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

**Better Ending Partnership – Personal Wishes Statement/Health Care Proxy**
www.betterending.org

**Hospice and Palliative Care**
www.hospicefed.org

**Online grief support**
www.forums.grieving.com

**Copies of health care planning documents, information on how to appoint a Health Care agent and make a plan.**
www.honoringchoicesmass.com

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**Driving and Transportation**

**Driving Safety**
Discussing an older person’s driving safety can be a very difficult conversation to have. Driving represents freedom and allows an individual to remain independent. It is important to know when an individual is no longer safe to drive.

Risk factors for impaired driving ability include:

- Illness and medications that cause a decline in perception, mobility and understanding
- Poor vision—especially night vision, failing eyesight, depth perception
- Hearing problems
- Slow reflexes
- Memory and/or cognitive problems
- Physical limitations
- Poor concentration, drowsiness or fatigue
- Lack of judgment and awareness
It may be appropriate to ride with the individual to observe if any of the following warning signs appear:

- Incorrect signaling
- Trouble navigating turns
- Moving into a wrong lane
- Confusion at exits
- Parking inappropriately
- Failing to notice traffic signs
- Driving at inappropriate speeds
- Delayed responses
- Scratches or dents on the car, garage, or mailbox
- Getting lost in familiar places
- Ticketed moving violations or warnings
- Car accidents
- Confusing brake and gas pedals

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

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

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

Where to Send Reports:

**Massachusetts Registry of Motor Vehicles**
Director of Medical Affairs
P.O. Box 55889
Boston, MA 02205-5889
Fax: 857-368-0802
Tel: 857-368-8020
www.mass.gov/rmv

**Driving Evaluations**
There are organizations that will conduct a driving evaluation for individuals. These evaluations will assess the driving abilities of the individual who may be at risk for an
accident. They may also provide information on how vehicle adaptations may improve the individuals driving. These evaluations may be conducted by simulations or in a vehicle. The results of the evaluations will not be shared with the Registry of Motor Vehicles. Costs for these evaluations may vary.

There are also online driving evaluations that the individual will be able to perform in their home. For more information visit www.SeniorDriving.AAA.com or www.AARP.org/drive

**Disabled (Handicap) Placard/Plate**

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

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

**Massachusetts Registry of Motor Vehicles**

Attn: Medical Affairs Branch
P.O. Box 5589
Boston, MA, 02205-5889
Community Transportation

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

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

Many transportation providers use wheelchair accessible vans, and some offer escort services to medical appointments. Some medical transportation services will require paperwork to be filled out by the individual’s primary care physician. Most providers require advanced reservations. Some offer services in a limited geographic area while others will travel from Central Massachusetts to Boston medical facilities. Many towns are covered by a Regional Transit Authority. These organizations provide fixed route bus services as well as Americans with Disabilities (ADA) paratransit services. Individuals who are unable to utilize the fixed route service due to a disability may qualify for ADA paratransit service. For more information about ADA
paratransit services contact the Regional Transit Authority in your area. There are two Regional Transit Authorities in Central Massachusetts. For Southern and Central Worcester County, contact Worcester Regional Transit Authority at 508-752-9283 or www.therta.com. For Northern Worcester County contact Montachusett Regional Transit Authority at 1-800-922-5636 or www.mrta.us.

Organizations that deal with specific illnesses, MassHealth, private organizations and volunteer agencies may provide subsidized or free rides or taxi vouchers. The local senior center or council on aging may be a primary source either for transportation or information about local transit services. Non-medical home care agencies may also provide transportation for individuals as part of a package of services.

The transportation services and fee structures that for-profit agencies offer can vary. If the individual is a veteran, you may want to contact the local Veterans Agent for information about transportation within VA medical systems.

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

Other affordable transportation options include ride sharing services such as Uber and Lyft. There are services available such as Go-Go Grandparent that will connect you to ride sharing services without you downloading the app. The services allows you to schedule rides over the phone and will update caregivers of the individuals ride status.

Additional Helpful Websites
www.gogograndparent.com or call 855-464-6872
www.uber.com
www.lyft.com
Community Programs

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

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

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

Lesbian Gay Bisexual and Transgender (LGBT) Aging
There are organizations that provide services and supports for LGBT older adults and caregivers. Services include referrals, support groups, social gatherings and LGBT lunch clubs.
Worcester LGBT Elder Network (WLEN)
Tel: 508-756-1545
WLEN is a collaboration of Elder Services of Worcester Area, Central Massachusetts Agency on Aging and the Worcester Senior Center. The program provides information, support and referrals for LGBT older adults and caregivers. The program also sponsors a lunch club and social opportunities.

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

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

For information on your local senior center/COA contact any of the agencies listed on the inside cover or visit www.mcoaonline.com
Alzheimer’s Disease and Related Dementias

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

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

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

As the disease progresses, people with Alzheimer’s disease and related dementias become unable to care for themselves. Cognitive decline eventually leads to the failure of other systems in the body.

The rate of progression of Alzheimer’s disease and related dementias varies from person to person. Although Alzheimer’s disease is the most talked about form of dementia, other dementias include but are not limited to; Vascular...
Dementia, Dementia with Lewy-Body, Frontotemporal Dementia, Mixed Dementias, Parkinson’s Disease Dementia, Huntington’s Disease, Wernick-Korsakoff Syndrome and Normal Pressure Hydrocephalus. Alzheimer’s is not just a disease of old age. Younger-Onset (also known as early-onset) Alzheimer’s effects people younger than age 65.

**Wandering**

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

**Memory Café**

A memory café is a welcoming place for people with forgetfulness or other changes in their thinking and for their family and friends. The café is open to anyone in the community, at any stage of the disease process. It is a time to socialize, enjoy each other’s company. It is not a support group or drop-off respite option. Memory Cafés meet at a variety of places including senior centers, libraries, and other social settings.

For a list of Cafés in your area visit: Jewish Family & Children’s Service www.Jfscboston.org
For more information on specific dementias contact:

Alzheimer’s Association of Massachusetts/New Hampshire: Alzheimer’s Association 24/7 Helpline: 800-272-3900
www.alz.org/manh

Alzheimer’s Support Network of South Central Massachusetts
800-286-6640 Ext. 3123
info@alzsupportnet.org
www.alzsupportnet.org

National Stroke Association (Vascular Dementia)
www.stroke.org

Lewy Body Dementia Association, Inc.
www.lbda.org

National Parkinson’s Foundation
www.parkinsons.org

The Association for Frontotemporal Degeneration
www.theaftd.org

Creutzfeldt-Jakob Disease Foundation
www.cjdfoundation.org

Hydrocephalus Association
www.hydroassoc.org

Huntington’s Disease Society of America
www.hdsa.org
Dementia Friendly America and Age Friendly Communities

Dementia Friendly Massachusetts is a grassroots movement to make our state “dementia friendly.” In dementia friendly communities, people work together to make their town and city safer, more inclusive, and respectful in order to foster quality of life for those living with dementia and their care partners. Dementia Friendly Communities may include initiatives such as Purple Table dementia friendly restaurants, virtual dementia trainings and community education.

Additional helpful websites:
- Dementia Friendly America
  www.dfamerica.org
- Purple Table
  www.purpletables.com

Age Friendly Communities
Age friendly communities have a commitment to promote health and active aging for older residents. Communities focus on providing services that are inclusive and accessible for all residents.

Some communities in Massachusetts may choose to become Age Friendly, Dementia Friendly or both.

Additional helpful websites:
- Massachusetts Healthy Aging Collaborative
  www.mahealthyagingcollaborative.org
Medical Considerations

Choosing a Medical Provider

A medical provider can be an ally in times of illness and good health. Explore medical professionals who have the medical specialty you are looking for and will accept your payment source. Carefully choose a medical professional who is willing to talk to everyone involved with the individual’s care. In order to communicate with medical providers about the specifics of the individual’s care you may need to have the individual sign a medical release form.

Preparing for a Medical Appointment

- Make a list of concerns
- Make sure the individual can hear and see as well as possible
- Consider going to the appointment with the individual
- Update the provider on any new symptoms or concerns
- Be honest
- Ask questions and stay focused on medical issues
- Take notes or get written or recorded information
- Talk to other members of the health care team
- Share the individual’s medical history and habits
- Bring a list of the individual’s current medications and dosages
- Ask if any practitioners from the practice make home visits
Many times physical changes in an individual are attributed to aging, when they maybe signs of medication interaction or mismanagement, dehydration or an oncoming illness. When significant changes occur, an evaluation may be needed and a referral to a specialist may be necessary.

**Geriatric Medical Specialists**

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

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

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

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

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

Additional Helpful Websites:

- Mass Health Quality Partners-Quality-Medical Review
- www.mhqp.org
Mental Health and Older Adults

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

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

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

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

- Keep an ongoing up to date list of all prescription and over the counter medications
- Bring this list to all medical appointments
- Watch for reactions to medications and report these changes to the doctor
- Utilize a medication reminder system such as a pill box, calendar or medication dispensing unit
- Utilize a smartphone app for keeping an up to date medication list, reminders, tracking possible medication interactions and pricing differences. Check your devices at the app store.

Additional Helpful Websites:
- RX List Drug Name Index
  www.rxlist.com
- Rx Pricing
  www.goodrx.com
Legal and Financial Considerations

Assuming Control of Legal/Financial Matters

Help the individual plan ahead by having a conversation about financial and legal issues.

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

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

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

- **Representative Payee for Social Security**
  The Social Security Administration can work with the individual to appoint a person or an organization as a “payee” to receive and cash the monthly public assistance checks (Supplemental Security Income (SSI), Social Security, Veteran’s Benefits) for a recipient deemed incapable of managing his/her own funds.
- **Power of Attorney**
  Powers of Attorney are legal documents, which give an individual called an Attorney-In-Fact (usually a spouse, other relative or friend) the power to act on behalf of the “principal” (the person appointing the proxy) to manage all or a specific part of his/her financial affairs. The principal must be competent when this appointment is made. Also, the principal does not lose his/her legal right to act on his/her own behalf. The authority given can range from general powers, allowing the Attorney-In-Fact to handle the person’s entire estate, to limited powers such as handling the checking account only. A “Durable Power of Attorney” continues the authority beyond the principal’s incompetence. The principal may choose to execute a Springing Durable Power of Attorney, which becomes effective only when the event described in the document, such as the principal has become incompetent, occurs.

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

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

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

**Living Will**

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

**MOLST (Medical Orders for Life Sustaining Treatment)**

A standardized medical order form for use by clinicians caring for patients with serious advancing illnesses. The form includes the individual’s right to accept or refuse medical treatment, including treatments that might extend life. The signed MOLST form stays with the patient and is to be honored by health professionals in any clinical care situation. For more information visit www.molst-ma.org

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Health care proxy forms and instructions are readily available in hospitals, nursing homes and online.
Trust
A trust is a legal document through which a trustee holds assets for the benefit of another (beneficiary). There are many types of trusts, and legal advice should be sought.

Legal Resources
There are many organizations and private attorneys who specialize in issues related to older adults including public benefits, guardianship, and elder law.

Jewish Family and Children’s Service
Worcester, MA 01609
Tel: 508-755-3101
www.jfcsboston.org
Services: Provides consultation for questions about conservatorship or guardianship.

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

County Bar Associations
Services: Professional associations of lawyers. Services are provided at a reduced rate to those who are deemed financially eligible. They also provide legal referral services.
**Worcester County Bar Association**
Tel: 508-752-1311
Worcester, MA
www.worcestercountybar.org

**Bar Association of Norfolk County**
Tel: 617-471-9693
Quincy, MA
www.norfolkbarassn.org

**Middlesex County Bar Association**
Tel: 781-939-2797
Woburn, MA
www.middlesexbar.org

**Worcester County District Attorney**
Tel: 508-755-8601
www.worcesterda.com

**Services:** Provides outreach and prevention education to seniors and caregivers on a variety of topics such as scam, fraud, identity theft and elder abuse prevention.

**Massachusetts Attorney General Elder Hotline**
Tel: 888-243-5337
www.mass.gov/ago

**Services:** Provides information on a variety of issues including but not limited to debt and debt collection practices, health insurance, home improvement, landlord/tenant issues, long term care insurance, fraud, scam awareness and telemarketing.

**Community Legal Aid Massachusetts**
Tel: 855-252-5342
TTY: 508-755-3260
www.communitylegal.org

**Services:** Provides free legal counseling to those 60 years of age and older in greatest economic and social need.
Counseling is provided in the following areas: public benefits, housing, health care, Medicare, protective services, and nursing home residents’ rights.

Understanding the Older Adult’s Finances

Whether an individual is to be cared for in their home or at a facility it is important to take into account their financial situation, including their expenses, income and assets. Proper financial planning will require you to consider the following questions:

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

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

Social Security Retirement Benefits

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

Supplemental Security Income (SSI)

Supplemental Security Income provides a monthly income for individuals who have low income and limited resources and who are also at least 65 years of age or disabled or blind. Call your local Social Security Administration for more information.
Supplemental Security Disability Income (SSDI)
This federal program provides a monthly income for people who cannot work because of a medical condition that is expected to last at least one year or result in death. Benefits are based on the amount of time an individual worked and how much money they have already paid into the system. Financial situation is not considered in determining benefits.

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

Social Security
Tel: 800-772-1213
TTY: 800-325-0778
www.ssa.gov

The Social Security offices of Central Massachusetts are found at the following locations:

Fitchburg Office
Tel: 877-319-0728 | TTY: 800-325-0778

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

Gardner Office
Tel: 877-628-6580 | TTY: 978-360-2112
Serving: Ashburnham, Baldwinville, Hubbardston, Gardner, Princeton, Templeton, Westminster, Winchendon
Pension Plan Assistance
If you are confused about an elder’s rights with regard to a specific pension plan there are places to turn. Details should first be sought from the individual’s employer who originally offered the pension plan. An agency that you can turn to for clarification is:

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

Whether you are living in your own home or renting an apartment, many benefits exist.

Financial Assistance for Private Home Owners

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

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

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

- **Reverse Mortgage** is a way to convert your home equity into cash. The loan is paid out in monthly installments, in one lump sum, or as a line of credit. The homeowner maintains ownership. To qualify, you must be 62 years of age or older and own your home (or have very little mortgage left). The loan must be repaid when the borrower no longer lives in the home. In the event of death, heirs can choose to repay the loan and keep the house, or sell the house and repay the loan. For more information visit www.hud.gov
• **Sale/Leaseback Plan** provides that the house is sold with the owner receiving from the buyer the rights to a lifetime lease at a reasonable rent.

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

• **Refinancing Options** include long term financing through a first or second mortgage.

• **Equity loans** can be attained where a line of credit is approved for the owner to use as needed with various terms of repayment and application costs.

• **Tax Abatement (Exemption) And Deferral** arrangements vary by city/town. Contact your city/town assessor for local information.
  
  ○ **Tax Abatement (Exemption)** is a reduction of property taxes, which cities/towns offer to individuals under certain circumstances.

  ○ **Tax Deferral** permits homeowners to delay payment on property taxes. As opposed to an exemption, these unpaid taxes must eventually be paid.

**Homestead Act**

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

Utilities
Many gas, electric and telephone companies offer discounted utility rate programs for financially eligible individuals. Call your local vendor and see if they have such a program and their specific eligibility requirements.

Telephone Service
The Lifeline Program provides a monthly discount on one communications service, such as a cell phone or landline, from a certified Lifeline service provider. For more information, visit www.mass.gov/service-details/lifeline-services.

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

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

Fuel Assistance
Low Income Home Energy Assistance Program (LIHEAP), commonly referred to as Fuel Assistance, is a program available to low income individuals and families to help pay their heating bills during the winter. Fuel Assistance is based on the gross household income and the heating costs for a given year. Even those who rent may be eligible for Fuel Assistance if heating costs are not included in monthly rent.
For more information on **weatherization, heating system programs and fuel assistance** contact the agency in your area:

Auburn, Boylston, Brookfield, Charlton, Douglas, Dudley, East Brookfield, Holden, Leicester, Millbury, North Brookfield, Oakham, Oxford, Paxton, Rutland, Southbridge, Spencer, Sturbridge, Sutton, Warren, Webster, West Boylston, West Brookfield, and Worcester contact:  
**Worcester Community Action Council**  
Worcester, MA 01608  
Local: 508-754-1176, Ext. 110  
Toll Free: 800-545-4577

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

Bellingham, Blackstone, Grafton, Hopedale, Medway, Mendon, Milford, Millville, Northbridge, Shrewsbury, Upton, and Uxbridge contact:  
**South Middlesex Opportunity Council (SMOC)**  
Framingham, MA 01702  
Local: 508-620-1230  
Toll Free: 800-286-6776

Groton and Pepperell contact:  
**Community Teamwork, Inc.**  
Lowell, MA 01852 | Tel: 978-459-6161

Franklin contact:  
**Self Help, Inc.**  
Attleboro, MA | Tel: 508-226-4192
Safety in the Home

To help individuals remain safely in their own homes the following items should be addressed:

All Areas of the Home

- Replace all frayed or cracked cords and place them out of the flow of traffic
- Place all heaters where they cannot be knocked over, away from curtains, rugs, furniture or newspaper
- Do not overload extension cords
- Make sure there is a light switch located near the entrance of each room
- Make sure all runners and small rugs are slip-resistant
- Replace any worn or loose carpeting, treads or risers on stairs
- Paint outside steps with rough textured paint or use abrasive strips
- Make sure the stairs and hallways are well lit
- Install handrails on stairs for support
- Keep pathways and stairs clear of clutter
- List, or program into the telephone, emergency numbers
- Consider having an Personal Emergency Response System (PERS)
- Establish an emergency exit plan
Kitchen Area
- Place items used daily within easy reach
- Use a grabber for items placed out of reach
- Use a stable step stool with a handrail
- Make sure that long loose fitting sleeves are not worn while cooking
- Ensure that the gas range or the oven is not used to heat the home

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

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

Smoke and Carbon Monoxide Detectors
- Place at least one smoke and one carbon monoxide detector on each floor
- Check and replace batteries and bulbs regularly
Hoarding
Excessive collection of items along with the inability to discard them can be a symptom of a hoarding problem. Hoarding can result in a diminished quality of life. It can increase the risk of falls due to clutter and lead to the inability to exit quickly in case of an emergency. Hoarding is a mental health issue and needs to be addressed by a professional.

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

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

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

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

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

For more information on Fall Prevention visit: www.mass.gov/older-adult-falls-prevention
Footwear: Purchase nonskid, low-heeled shoes or slippers that fit snugly. Walking around in stocking feet can be dangerous.

Mobility: Encourage the use of canes and walkers when necessary.

Home Repair/Home Adaptations

Programs are available to help elders with home repairs and/or low interest loans or grants for repairs, adaptations and modifications. For more information visit: www.hud.gov/states/massachusetts/homeownership/homerepairs.

Central Mass Housing Alliance
Worcester MA
Tel: 508-752-5519
www.cmhaonline.org
Email: cmha.org@verizon.net
Services: Elder Home Repair Program Staff perform pertinent home repairs and make appropriate referrals when necessary. They may repair such structural or system failures as stairs, doors, windows, ceilings, as well as minor plumbing and electrical faults. Generally the individual must purchase needed materials and labor is provided by the organization.

RCap Solutions, Inc
Tel: 800-488-1969
www.rcapsolutions.org
Services: Provides the Home Modification Loan Program to assist older adults and individuals with disabilities in the area.
**Easter Seals Massachusetts**  
Tel: 800-244-2756  
Worcester, MA  
www.eastersealsma.org  
Assistive Technology Loan Program  
**Services:** Provides Massachusetts residents with disabilities and their families low interest loans to pay for assistive technology devices and services to assist them to live independently in their home. Devices and services that may be purchased include hearing aids, ramps, widening of doorways, or flashing doorbells.

**Habitat for Humanity**  
Global nonprofit housing organization. Habitat for Humanity can assist with critical home repairs such as repairing or replacing roofs, gutters and siding, replacing porches and steps, and upgrading electrical.

**Habitat for Humanity MetroWest/Greater Worcester**  
www.habitatmwgw.org  
508-799-9259

**Habitat for Humanity North Central Massachusetts**  
www.ncmhabitat.org  
978-348-2749
Living Options

Subsidized Housing/Voucher Program

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

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

Additional Helpful Websites:

- US Department of Housing and Urban Development
  www.hud.gov

- Massachusetts Department of Housing and Community Development
  www.mass.gov/dhcd
LIVING OPTIONS

**Congregate Housing**

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

**Supportive Housing**

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

**Adult Family Care**

Adult Family Care sometimes referred to as **Adult Foster Care**, is an alternative to institutional care. Individuals are matched with caregivers who provide 24 hour assistance in the caregiver’s home. The caregiver provides a private room, meals, and assistance with daily personal care. The participant must be a MassHealth recipient or pay privately for this program and qualify medically. Agencies that provide Adult Family Care train the host families, monitor placements and participant’s health, and provide case management. In some cases, certain family members can be paid as the caregiver.

*Must be a MassHealth recipient or pay privately for this program.*
Continuing Care Retirement Communities

Continuing Care Retirement Communities (CCRC’s) accommodate the needs of people as they age and their personal needs change. CCRC’s offer a continuum of care ranging from fully independent units, to assisted living apartments, to long term care in a nursing facility. There are contracts, initial investments and monthly fees.

Assisted Living Residences

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

The majority of ALR residents pay privately on a monthly rental basis. Costs vary with each community depending on size and location of room, whether or not the room is private or shared and individual services needed. There are some financial assistance options available such as Group Adult Foster Care, Supplemental Security Income – Category G (SSI-G), Veterans Aid and Attendance pension and long term care insurance. Refer to the index to find more information. Medicare does not cover the cost of an assisted living residence.

Additional helpful website:
www.massalfa.org
www.mass.gov/elders/docs/assisted-consumer-guide.pdf
Rest Homes

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

Nursing Homes/Skilled Nursing Facility/Long Term Care Facilities

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

Nursing Home Screenings for Long Term Care

Includes an assessment of an individual’s need for 24-hour skilled nursing which is necessary prior to admittance to a skilled nursing facility. Nursing homes provide screening assessment to individuals who will be paying privately. The agencies listed on the inside cover provide screenings for Long Term Care MassHealth eligible individuals.
Assessing Quality of Care
The Massachusetts Department of Public Health (DPH) inspects Massachusetts nursing facilities and hospital-based transitional care units. DPH has a survey performance tool that they use to evaluate every Medicare and MassHealth certified nursing facility in Massachusetts. You are able to review any facility’s most recent annual Massachusetts Department of Public Health (DPH) evaluation (report card) by contacting:

**Massachusetts Department of Public Health (DPH)**
Tel: 617-753-8000

**Division of Health Care Quality**
Tel: 866-627-7968
www.mass.gov/eohhs/gov/departments/dph/programs/hcq

**The Massachusetts Senior Care Association**
Offers consumers information on the continuum of long term care services, which includes listings of Massachusetts Senior Care Association member nursing facilities, assisted living residences, continuing care retirement communities and associate members at 800-227-3367 or visit www.massesniorcare.org

Additional Helpful Websites:
- **Assisted Living Association**
  http://www.mass-ala.org
- **Guide for Senior Living Options**
  www.newlifestyles.com
- **Nursing Home Information**
  www.nursinghomeinfo.com

**Resident’s Rights in a Long Term Care Facility**
When entering any Long Term Care Facility, residents still retain their basic civil rights. The Federal Government
and the Massachusetts Attorney General have developed regulations, which are designed to promote the comfort, health and well being of residents. Residents should request a copy of their rights.

**The Long Term Care (LTC) Ombudsman Program**

Every state is required to have a LTC Ombudsman Program. The program has four main goals:

- The receipt, investigation and resolution of Long Term Care Facility and Rest Home complaints.

- The protection of the benefits, rights and entitlements of residents guaranteed under federal, state and local law.

- The provision of information on long term care issues to residents, families and staff. It is important to note that the Long Term Care Ombudsman Program is not a placement and/or rating service for facilities, nor does it make referrals.

- Advocacy for positive changes to the long term care system that will have an impact on the quality of care, life and environment in all Massachusetts Long Term Care Facilities and Rest Homes.

Ombudsmen receive specialized training and certification. The Ombudsmen mediate, advocate, and investigate complaints on behalf of long term care residents. For more information contact your local ASAP.

Assisted Living Ombudsman provide the same service but to residents in an Assisted Living Facility. For more information call 617-727-7750 or visit www.mass.gov/service-details/assisted-living-ombudsman