Section 1

Caregiving for an Aging Loved One
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1. Introduction to Pathways for Caregivers of a Loved One With Issues of Aging

We are glad that Pathways for Caregivers has found its way to you and hope you find it a helpful tool.

Pathways is intended to be a source of information, advice, and ideas about how to get the support you need on your caregiving journey.

Whether you are planning ahead for an aging loved one, or find yourself in the middle of a crisis with decisions that need to be made quickly, information and resources can often be confusing and difficult to access.

While you will find some organizations and agencies referenced, Pathways is not meant to be a complete list of all the County agencies and services that are available.

2-1-1 First Call for Help and the Morris County Division on Aging, Disabilities, and Veterans/NJ EASE are your best bets for that. You will find them referenced throughout this guide.

Rather, Pathways IS designed as a “roadmap” to help put you on the right track for your caregiving situation, and to support you along the way.

Pathways for Caregivers was created by members of the Caregivers Coalition of Morris County. This means it was created BY caregivers FOR caregivers - created by caregivers, for you.

As you read this guide, please keep in mind that it is intended to help caregivers who may be facing a wide range of situations. While planning ahead is important, we recommend that you try to focus on the caregiving stage that you are currently in, and not look too far into the future, as sometimes trying to look too far down the road can be a bit overwhelming.

The most important thing to know is that, as you take on caregiving responsibilities, you need not care give in isolation. Reach out. Ask for help. There are resources, organizations, and fellow caregivers who can provide you with the support you need.
2.

Becoming a Caregiver for a Loved One
With Issues of Aging

If you support your aging loved one in any way on a regular basis, from driving to appointments or shopping, to managing his or her finances, to discussing medical issues with his or her doctor, to providing emotional support, you are considered a caregiver.

The following is a list of activities that, if done on behalf of another, are traditionally considered “caregiving”:

- Occasional or daily help at home (chores, meals, transportation, etc.)
- Financial and/or business assistance (balancing checkbooks, paying bills, etc.)
- Emotional support
- Daily supervision and/or personal care
- Arrangements for doctors’ appointments (making calls, transportation, explanations, or translations, etc.)
- Medication management

Whether your aging loved one lives with you, in their own home, in a facility, or even a long distance away, if you do any of these things on a regular basis, YOU are a caregiver...and we hope this guide will be of help to you.

While you may do just a few things for your aging loved one at the moment, it is a good idea to be aware of, and even track, changes that may occur. With an aging loved one, there are warning signs to watch for that signal an increasing need for support.

**Warning signs to watch for:**

- Difficulty walking or unsteady when standing
- Poor grooming or personal hygiene
- Loss of appetite or changes in eating
- Spoiled food and/or little nutritious food in home
- Loss of interest in activities once enjoyed
- Difficulty concentrating
- Memory loss, confusion, abnormal conversation
- Personality changes
- Unsafe conditions in home
- Difficulty managing medications, finances, etc.

The emergence of, or an increase in, any of the above, may signal that it is time to begin providing additional support for your loved one.
**Stages of Caregiving**

In caring for your loved one you may, over time, experience different stages of caregiving. Coping with these changing stages will require you to manage stress, perhaps develop new skills, all while maintaining a level of flexibility as you adapt to your loved one’s changing needs.

But, in reality, how many caregivers are given the opportunity to fully prepare?

Realistically, most caregivers climb a steep learning curve, as they become a medical connoisseur, system navigator extraordinaire, assertive advocate, financial guru, and legal expert all in one. For many, this must be done while balancing a full or part-time job, children, grandchildren, spouse, and other relationships and responsibilities, while trying to maintain their own physical health, mental health, social life, and overall well-being.

Life is a journey – each of us can only take one step at a time. Caregiving for an aging loved one is no different.

Caregiving for an aging parent, spouse, domestic partner, relative, or close friend presents a variety of difficult challenges. These challenges can arrive in an instant, as with a sudden crisis, or can develop over time, through a series of small, but sometimes disconcerting, mishaps and warning signs. You may be the only person to step in, or you may be part of a larger network of family and friends willing to share caregiving duties.

Whatever the caregiving situation, you may find yourself unsure of which steps to take. And, of course, throughout any caregiving journey, those steps will change.

**You Are Not Alone**

We don’t need to tell you that caregiving can be exhausting, even frustrating at times. For any caregiver, the stress of providing care can generate a range of emotions on any given day - frustration, sadness, worry, even anger. So, do not try to do the entire job all alone! A strong network of friends, family, and service providers can help you, and keep emotions and exhaustion from becoming overwhelming. Ask for help, whenever you need it.

Again, remember, it is important that you do not take on all your caregiving responsibilities in isolation. Through organizations noted in this support guide, you can find the resources and people you need to take care of yourself – taking care of yourself means that you will be better able to take care of your family member or friend.

No matter what each stage of caregiving brings, it will always help to reach out to find the information and support you need to provide the best care possible, for your loved and for YOU.

**Your Changing Role**

Throughout your caregiving journey, you may notice that your loved one requires different levels of care. Having to assume responsibilities that your loved one was used to doing independently can generate a range of emotions for you both. Accepting the deterioration and identifying the issues that are associated with the illness will help you cope with the role transition that you are experiencing, as well as the changing nature of your relationship with your family member or friend.
During this time, flexibility is the key. You will need to develop stress and time management skills that are necessary to cope with changes and increased demands that will occur over time.

When you start to take on more and more daily tasks related to caregiving, it will become increasingly important to take advantage of resources in the community and whatever services you and/or your loved one are eligible for.

If and when you are called upon to take on a new level of care, give yourself time to adjust. Do not expect your life to return to normal right away. The social structure you knew, the friends you had, and activities you did may have to change as you take on your caregiving role. Give yourself time to develop and establish new daily routines.

And, remember that each caregiving situation is unique – no two caregivers will experience the same circumstances or transitions. There is no single way of caring. With the right information, resources, and support you will be able to care for your loved one and yourself in the best way possible.

*Based on material from CHATS - Community Home Assistance to Seniors, Ontario, and Aetna Intelihealth*
Your first call is an important one.

Whether you are just beginning to provide care for a loved one who is aging, or have been a caregiver for some time but without any real support, here are some helpful first calls to consider:

**Morris County Division on Aging, Disabilities and Veterans**

The County provides information, referrals, and direct client assistance for older adults, adults with disabilities, veterans, and caregivers.

The Morris County NJ EASE office is a great place to start when seeking information on a variety of services. NJ EASE, which stands for Easy Access, Single Entry, is a statewide program that provides easy, local access to a coordinated system of responsive services.

- **NJ EASE:** 1-800-564-4656
  - [www.morrishumanservices.org/dvs/](http://www.morrishumanservices.org/dvs/)

**2-1-1 First Call for Help**

2-1-1 First Call for Help offers both confidential telephone support to people in crisis and personalized information and referrals to those needing assistance. 2-1-1 now operates statewide, connecting people with the resources they need to solve common life problems. It is staffed 24 hours/7 days per week and can be accessed by dialing 2-1-1.

- **Dial 2-1-1, or 1-800-435-7555**
  - [www.NJ211.org](http://www.NJ211.org)

Additional websites of national organizations with information on caregiving can be found in **Appendix A**.
4. Caregiver Education Programs

There are a variety of caregiver education programs available throughout Morris County, ranging from in-home instruction to public seminars. These programs are designed to educate caregivers in assessing care needs and in developing the skills necessary to provide care. Programs address issues such as personal care, (e.g. bathing, lifting, transferring), disease education, medication management, legal issues, self-care, and more.

Morris County Division on Aging, Disabilities and Veterans

- **NJ EASE**
  1-800-564-4656
  www.morrishumanservices.org/dvs/

Caregivers Coalition of Morris County, a United Way of Morris County Initiative

The Coalition’s *Lunch & Learn Education Series* offers a series of free caregiving workshops by professionals in the field. These highly rated programs may be scheduled by any local group, including corporations, faith based organizations, civic groups, etc. Contact the Coalition Coordinator for an updated list of topics, or to schedule a workshop.

- **973-993-1160, ext. 139**
  www.LiveUnitedMorris.org

Caregiver Outreach in the Workplace, a program of Family Service of Morris County

Family Service of Morris County provides working caregivers in the Morris County community with a variety of free elder caregiving workshops on-site at business locations throughout the County. Programs are presented by a professional geriatric care manager and change seasonally. Call for a complete list of topics.

- **973-538-5260**
  www.fsmc.org

Educating yourself about the disease or disability affecting your loved one is important. There are many disease/disability-specific websites available. Make sure the information you access is from a recognized and trustworthy organization. Some recommended websites can be found in Appendix B.

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United Way of Morris County

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Aging
**DOROT’s Caregivers’ Connections - Programs by Telephone**

The Caregivers’ Connections is a telephone conference call program with informational workshops for those who care for older adults. Through these sessions, caregivers are able to share mutual concerns, exchange ideas, and get much needed information without leaving their homes or workplaces. There is a minimal registration fee; scholarships are available.

- 1-877-819-9147
  www.dorotusa.org

**Visiting Nurse Association of Northern NJ (VNANNJ)**

The VNANNJ In-Home Caregiver Education and Support Program provides FREE in-home education and support to unpaid caregivers so they may improve their ability and effectiveness as caregivers. The care recipient must be over age 18 and functionally impaired with a chronic disease or disability. There are no income or asset eligibility requirements for this program.

Specifically, the program will provide:

- A registered nurse to meet with the caregiver at their home to conduct an initial assessment and to set up a teaching plan that will help to relieve caregiver stress and increase caregiver effectiveness.
- In-home instruction to enable caregivers to identify the skills needed to provide proper care, including lifting and transferring, bathing, personal care, nutrition, disease education, stress management, and accessing community resources.
- Up to five professional home visits by a registered nurse, physical, speech or occupational therapist, social worker, or nutritionist to provide educational and support services, including stress management.

- 1-800-938-4748
  www.hometeam.org/index.asp

Medicare will pay for certain types of family caregiver education when it is provided as part of a patient’s medically-necessary face-to-face visit. A physician may be able to bill for family caregiver education as part of the counseling and coordination of care services provided during a patient visit, as long as the patient is on Medicare, the caregiver education directly involves the patient and is medically necessary. This education can take place in a doctor’s office or other outpatient facility, a patient’s home or private residence, or an assisted living facility or other domicile. See “Tip Sheet for Providers: Caregiving Education” at www.cms.hhs.gov/Partnerships/downloads/ProviderBillingforCaregiverEducation.pdf
5. Caregiver Support

It is important for caregivers to recognize that they are not alone, to learn that caregiving is more than a one person job, and to see that taking care of themselves is vital to their loved one’s wellbeing.

- The National Family Caregivers Association

Taking care of yourself. Scheduling (and keeping!) your own doctors’ appointments. Asking for help. Taking a break. These are vital steps you can take as a caregiver to keep yourself healthy. Studies show that caregivers are at a greater risk for health problems. As a caregiver, your health - both physical and emotional - is as important as the health of the loved one for whom you provide care.

STOP!

Self-Care

Sometimes, as caregivers, we are so busy giving care that we forget or neglect to take care of ourselves. As caregivers, it is important to acknowledge that stress is a normal, sometimes difficult but definitely manageable, part of our caregiving. Stress can manifest itself in both a physical and emotional way; it is vital to find an outlet to relieve it! You may even need to give yourself permission to take care of yourself. That is fine, and good, and necessary!

Self-care/stress management can be achieved in many ways. General attention to daily activities like healthy eating, exercising, sleeping, and talking with friends, is vital.

Even for the busiest of caregivers, mini-breaks can be lifesavers. Go to a quiet room or step outdoors and just breathe for ten minutes; clear your mind and focus only on your breath. Write in a journal. Say a positive affirmation. Light a candle. Listen to music. Call a good friend.

You might consider attending a support group. Support groups are organized groups of individuals who share a common experience and provide each other with various types of help, i.e., information, resources, and emotional support. Support groups can be led by a professional facilitator or be self-help groups.
Other ideas may be helpful. These require a range of time and/or cost. Sometimes referred to as complementary or alternative therapies, there are options for everyone:

- **Aromatherapy** uses liquid plant oils and other aromatic compounds to improve one’s mood and health.
- **Art therapy** is based on the belief that the creative process is both healing and life enhancing. It uses art materials and projects as therapeutic tools.
- **Chiropractic** is a health care discipline that believes that re-alignment of the spine will alleviate any nerve interference that directly affects how stress manifests itself in the body. This can be especially helpful if you are physically moving your loved one from place to place, which takes a toll on your body; a chiropractor can teach proper lifting techniques that best protect your back.
- **Massage therapy** encompasses several disciplines that utilize body techniques to promote healing and health.
- **Music therapy** is the systematic use of music to maintain and improve one’s emotional stability.
- **Reiki** is a system of subtle energy healing using the laying on of hands and distinct healing techniques, designed to relax, de-stress, and heal.
- **T’ai Chi** is a slow gentle body movement, while breathing deeply and meditating, that helps the flow of body energy. The gentle flowing motion reduces stress and improves health.
- **Yoga** is a physical and mental discipline. While it includes physical exercise, it is also a lifestyle practice, the goal of which is the union of the mind, body and spirit. There are many different styles of yoga. You may need to explore a number of styles before finding the one that is right for you.

These are examples of some types of therapies that can help you manage your stress, as well as reduce pain, anger, anxiety, and even depression. There are others. Choose one or more that is right for you. Whether relaxing muscles and reducing inflammations, or improving strength, balance and mobility, or getting a more restful sleep...these are all critical ingredients of self care that will help you protect your own emotional and physical health as you continue your caregiving journey.

### Respite Support

Respite literally means a period of rest or relief. Respite care gives a caregiver temporary relief from the responsibilities of caring for a loved one with chronic illness, physical, cognitive or psychiatric disabilities. Respite is important for any and all caregivers, and is a key component to maintaining caregiver health. And caregiver health is, ultimately, vital for the loved one requiring care. Caregivers should take respite breaks regularly, **without guilt**.

The length of respite care can be anywhere from a few hours to several weeks. Services that provide respite may be used for a variety of reasons, ranging from emergencies to vacation, and with a range of frequency, from a few hours per week or month, to weekends, even to everyday respite. Respite can be in-home or at respite centers.
In-home Respite

In-home respite services consist of a worker who comes to the family home so that the caregiver can leave the house for a period of time. These services are usually provided by agencies that recruit, screen, and train workers. This type of respite is usually less disruptive to the individual needing care, provided there is a good match between the worker and the individual. Caregivers looking for this type of respite support would contact Home Health Care agencies.

Respite Centers

Respite centers are facilities specifically designed for respite care. Adult day care programs and respite camps also fall into this category. This type of respite often offers more peace of mind to the caregiver, while providing a stimulating environment for the aging individual. However, centers usually restrict the length of stay and may exclude individuals based on severity of disability. Caregivers looking for this type of respite would contact Adult Day Care Centers, Nursing Home Facilities, and Rehab Centers.

One good local starting point for lists of in-home respite agencies and respite centers is:

- Morris County Division on Aging, Disabilities and Veterans
  NJ EASE
  1-800-564-4656
  www.morrishumanservices.org/dvs/

The Morris County Division on Aging, Disabilities and Veterans (1-800-564-4656) has a Caregiver Guide with additional local resources that can be accessed online:
www.morrishumanservices.org/dvs/publications.asp
Click on Caregiver Guide

Statewide Respite Care & Morris County Respite Care Programs

These programs provide respite care services for older adults, and for functionally impaired persons age 18 and older, to relieve their unpaid caregivers of stress arising from the responsibility of providing daily care. You must meet specific income requirements to be eligible. In Morris County, the County and State programs run side by side and can be accessed through:

- Visiting Nurse Association of Northern NJ
  1-800-938-4748
  www.hometeam.org/index.asp
General Caregiver Support

Morris County Caregiver Support Program

The Caregiver Support Program is designed to help caregivers access the services needed for their loved ones and themselves. The Project goes beyond information and referral to help with problem solving, advocacy, and support to sustain caregivers in their role. This is a new resource offered by the Morris County Division on Aging, Disabilities & Veterans created in partnership with the Caregivers Coalition of Morris County and United Way of Morris County. Visit the Resource Center at the County’s offices located at 340 West Hanover Ave, Morris Township, or call for information:

- **Morris County Division on Aging, Disabilities & Veterans**
  - NJ EASE
  - 1-800-564-4656
  - www.morrishumanservices.org/dvs/

Caregivers Coalition of Morris County, a United Way of Morris County Initiative

Open to the public, and free to join, the Caregivers Coalition, a United Way of Morris County initiative, was founded to respond to the increasing needs of caregivers in the community. The goals of the Coalition are to strengthen services and resources to caregivers; improve access to information about caregiving and available services, and to identify and respond to gaps in services to caregivers. The Coalition also advocates for policies and legislation to improve the quality of life for caregivers, and provides educational programs to human service and health care providers, family caregivers, corporations, businesses, and the community. All are welcome.

The Coalition’s **Caregiver Advisory Panel** (CAP) is a group of caregivers who are connected via phone and email; they share ideas, discuss issues, and support one another while advising the Coalition. These caregivers manage a range of caregiving situations. All caregivers are invited to join the CAP.

- **Caregivers Coalition Coordinator**
  - 973-993-1160, ex 139
  - www.LiveUnitedMorris.org

Caregiver Counseling/Psychotherapy

There are many counseling and support services available in the County through local hospitals, human service agencies, and private practitioners. In some instances, counselors may make home visits or will arrange to meet with, and support, those who are providing care to aging family members and/or friends.

Mental Health Association of Morris County

The Mental Health Association maintains a database of private practitioners and other mental health related resources.

- **973-334-3496**
  - www.mhamorris.org
**Morris County Division on Aging, Disabilities & Veterans**

The Morris County Division on Aging, Disabilities & Veterans offers listings of caregiver counseling programs and support groups.

- **NJ EASE**
  1-800-564-4656
  [www.morrishumanservices.org/dvs/](http://www.morrishumanservices.org/dvs/)

**Other Supports for Caregivers**

**Self-Help Groups**

Self-help groups can be of great help to those trying to cope with the demands of caregiving. There are many local, state, and national groups that can be found by contacting the NJ Self-Help Group Clearinghouse. If the Clearinghouse cannot direct you to an appropriate group that is already set up, they will be able to help you to join with others to start one.

- **NJ Self-Help Group Clearinghouse**
  1-800-367-6274

**Internet Support**

If you are unable to attend support groups in your community, these websites may offer support:

- **CaringRoad.com**
  [www.caringroad.org](http://www.caringroad.org)

- **Johnson & Johnson, The Caregiver Initiative**
  [www.strengthforcaring.com](http://www.strengthforcaring.com)

- **National Family Caregiving Association**
  [www.nfcacares.org](http://www.nfcacares.org)

- **NJ Department of Health and Senior Services – Caregiver NJ**
  [www.state.nj.us/caregivernj/search/index.shtml](http://www.state.nj.us/caregivernj/search/index.shtml)

**Telephone Support**

DOROT’s Caregivers’ Connections, a telephone conference call program, offers support groups to those who care for older adults. Through weekly telephone support groups facilitated by geriatric social workers and care managers, caregivers receive emotional support and have an opportunity to ask questions, get answers, and end the isolation that plagues so many caregivers. There is a minimal fee; scholarships are available.

- **DOROT’s Caregivers’ Connections**
  1-877-819-9147
  [www.dorotusa.org](http://www.dorotusa.org)
6. Care/Case Management for Aging Loved Ones

Care/case managers work individually with older adults and their caregivers to create a plan of care that meets the needs of the older adult. Case managers do a comprehensive assessment, and then, in collaboration with the older adult and caregiver, develop a care plan. The case manager is an expert on available resources and helps the older adult and/or caregiver arrange for and coordinate necessary services. The case manager acts as an advocate for the older adult, and ensures that services continue to meet the older adult’s needs over a period of time and reassesses changes that may require additional services or readjustments in the care plan.

Public Case/Care Managers

Public Case/Care Managers are funded through various Federal, State, and county tax dollars and are provided free of charge to the older adult. In Morris County, case management is available through the Morris County Office on Aging and other local agencies. For information:

- Morris County Division on Aging, Disabilities & Veterans
  NJ EASE - 1-800-564-4656
  www.morrishumanservices.org/dvs/

Private Case/Care Managers

Private Case/Care Managers may be either private consultants or someone who works for a for-profit or not-for-profit organization. Private case/care managers usually work for a fee and can therefore provide more extensive and personalized services.

This organization can help you find a local Professional Geriatric Care Manager.

- National Association of Professional Geriatric Care Managers
  520-881-8008
  www.caremanager.org

Remember, working with a Case/Care Manager is a partnership – the Care Manager knows the community resources – and you know your loved one – don’t be afraid to voice your concerns or preferences in services to be provided.

Other Care Issues

Safety Issues

As the caregiver, you should notify your local police if you think that they should be aware of your loved one’s disability for any reason. For example, the person may be a wanderer or might have difficulty leaving the house in an emergency. Once on record with the police department, this information will be accessible to fire and emergency health workers as well.

- Project Lifesaver: This Morris County program will provide a person who wanders with a tracking device. For information:

  Morris County Sheriff’s Office
  973-285-6675
  www.mcsheriff.org/main/cp-lifesaver/
Abuse

There are different kinds of abuse to consider when talking about older adults: elder mistreatment and neglect. Elder mistreatment refers to any harmful conduct that is willfully inflicted on an older person. This includes physical, sexual, emotional, or financial abuse and exploitation. Signs of maltreatment and abuse include, but are not limited to, frequent visits to the emergency room, unexplained bruises or wounds, and depression, fear, or anxiety on the part of the person receiving care.

Neglect can either be inflicted by another or self-imposed. Behavior is considered neglect when the responsible individual (i.e. caregiver, guardian, etc.) confines, isolates, or fails to provide essential services to prevent or lessen physical harm or mental anguish. Behaviors are considered self-neglect when an individual makes unnecessary or unsafe decisions or is taking part in unsafe activities. Signs and symptoms of neglect include things like malnutrition or dehydration, unsafe or unsanitary living conditions, missing or broken eyeglasses, hearing aids or dentures, and withholding of medical care, among others.

Adult Protective Services

Adult Protective Services (APS) investigates reports of suspected abuse, neglect, and exploitation of “vulnerable” adults age 18 or older living in the community. A person is considered vulnerable if they are unable to act on their own behalf. Reports may be made by anyone. When a report is received, APS investigates. If the report is confirmed and the person is willing to accept help, APS will identify, and put in place, services that can help the vulnerable person. If you suspect a vulnerable older adult is being abused or neglected, call:

- Morris County Division on Aging, Disabilities and Veterans
  973-326-7282
  www.morrishumanservices.org/dvs/

- After Business Hours: Call 911, or
  Sheriff’s Community Center: 973-285-2900

The Prevention of Domestic Violence Act

This Act provides protection from abuse to older adults and people with disabilities. The Act authorizes the issuance of a restraining order using the criminal code to define abuse. A caregiver or any person who has reasonable cause to believe that an older adult or person with a disability is subject to abuse, neglect, or exploitation should report such information to the local police.

Identification

Having an official photo I.D. is a good idea for everyone. A non-driver photo ID can be acquired at age 17; six points of identification are required, just as for a driver’s license. For information:

- NJ Motor Vehicle Commission
  609-292-6500 or 1-888-486-3339
  www.state.nj.us/mvc

At any age, a photo ID can be acquired at the Morris County Clerk’s Office. This ID can include medical alert information. For information:

- Morris County Clerk
  973-285-6120
  www.morriscountyclerk.org
7. Benefit Programs & Financial Matters for Aging Loved Ones

Key Benefit Programs

There are a wide range of programs directed toward older adults. There are public programs on the National, State, and local levels. There are programs for which everyone over a specific age is eligible. There are programs for which a person must meet specific criteria, or live in a particular county. It is important for aging adults to be connected to the programs for which they are eligible so that they have the assistance to meet their needs.

We will begin at the Federal level with the programs most important to the majority of older adults and people with disabilities.

Social Security Programs

Social Security

“Social Security” is the short name for the Title II Old Age, Survivors and Disability Insurance programs. It insures individuals and family members when the working family member retires, dies or becomes disabled. Workers qualify for benefits by paying Social Security taxes. As you work and pay taxes, you earn “credits” that count toward eligibility for future Social Security benefits.

The major categories of benefits paid for through your Social Security taxes are:

1. Social Security Retirement Benefits

Social Security is a federal program providing retirement income for those who have paid into the Social Security system. Note that the “normal” retirement age is being gradually increased from age 65 to age 67. You can get Social Security retirement benefits as early as age 62, but if you retire before your full retirement age, your benefits will be permanently reduced, based on your age. For example, if you retire at age 62 your benefit would be about 25 percent lower than what it would be if you waited until you reach full retirement age. NOTE: Sometimes health problems force people to retire early. If you cannot work because of health problems, you should consider applying for Social Security disability benefits. The amount of the disability benefit is the same as a full, unreduced retirement benefit. If you are receiving Social Security disability benefits when you reach full retirement age, those benefits will be converted to retirement benefits.

For caregivers, the important aspects of Social Security involve the application process, taxation, and appeals. Upon application, Social Security will check their records to determine the exact benefit rate. This rate is a function of age and amount of reportable earnings. Once receiving a benefit, the checks increase automatically with the cost of living. Benefit payments are made for the prior month on the second, third or fourth Wednesday, depending on your date of birth.
If your loved one is not able to manage his or her own financial affairs, you, or another trusted individual, can be appointed as a “representative payee” to handle Social Security matters. The benefits are then made payable to you, the representative payee, who must use the funds for the personal care and well-being of the beneficiary. Records and receipts must be kept to show how the money was spent or saved. This must be reported to the Social Security Administration.

NOTE: Some people have to pay federal income taxes on their Social Security benefits. This only happens if the beneficiary has other substantial income such as wages, interest, dividends and other taxable income that must be reported on the tax return in addition to Social Security benefits.

2. Social Security Disability Insurance (SSDI)

The loved one you care for may have developed issues along the way that qualify as a disability. The definition of disability under Social Security is different than other programs. Social Security pays only for total disability. No benefits are payable for partial disability or for short-term disability. Disability under Social Security is based on a person’s inability to work. An individual is considered disabled under Social Security rules if he/she cannot do work that he/she did before, and the individual cannot adjust to other work because of his/her medical condition(s). Benefits can be paid to people at any age who have enough Social Security credits and who have a severe physical or mental impairment that is expected to prevent them from doing “substantial” work for a year or more.

3. Social Security Family Benefits

It is important for families to know that if their family member is eligible for retirement or disability benefits, other members of the family might receive benefits, too. If the spouse is at least 62 years of age, or under 62 but caring for a child under age 16, he or she may also be eligible for benefits. Unmarried children under age 18, or under age 19 but still in school, or 18 or older with a disability, may also be eligible.

4. Social Security Survivor Benefits

Certain members of your family may be eligible for benefits if their eligible family member dies. The family members who may be eligible include: a widow(er) age 60 or over, 50 or older if disabled or any age if caring for a child under age 16, unmarried children under age 18, under 19 but still in school or 18 or older with a disability. Parents may also be eligible if the deceased was their primary means of support. A special one-time payment of $255 may be made to the spouse or minor children. If divorced, an ex-spouse could be eligible for a widow(er)’s benefit.

Supplemental Security Income Benefits (SSI)

Supplemental Security Income (“SSI”), often also referred to as “Social Security”, is a Federal income supplement program funded by general tax revenues and not Social Security taxes. It provides a minimum income to low income people who are 65 or older, blind, or disabled. Where Social Security is an insurance program requiring “paying into system,” SSI is a needs based program. The basic SSI benefit is a monthly cash payment. Living arrangements or monetary assistance from friends or family may reduce benefits. The monthly benefit rate varies depending on the state you live in. Most people who get SSI also qualify for Medicaid, food stamps, and other assistance.

For more information about any of the above Social Security benefits:

- Social Security Administration
  1-800-772-1213
  www.ssa.gov
Medicare & Medicaid Programs

Medicare

Medicare is a federal program of health insurance. It pays for acute illness situations. It is not designed to provide benefits for long term or custodial care. To be eligible, one must be 65 years of age and have paid into the Social Security system. If the person you care for is 65 or older and is already receiving Social Security benefits, he or she will be enrolled automatically in Medicare. Individuals receiving Social Security Disability benefits will get Medicare coverage automatically after they have received disability benefits for two years. If he or she is not already receiving Social Security, you will need to call the Social Security Administration.

Medicare Part A

Part A is primarily hospital insurance. Following payment of a deductible, Medicare Part A will pay patient expenses for 60 days of hospitalization. After 60 days, the patient is required to pay a greater amount of the hospitalization cost. Part A will help pay, in certain circumstances, for limited stays in skilled nursing facilities, home health care, and hospice care. Most people do not have to pay a monthly premium for Part A.

Medicare Part B

Part B pays for doctors' services, outpatient care, outpatient physical and speech therapy, some home health care, ambulance services, and some medical equipment and supplies. Part B is optional and requires a monthly premium. There is also an annual deductible that must be met before Medicare starts to pay its share.

Medicare Part C

Medicare Part C offers Medicare Advantage Plans that combine your Medicare Part A (Hospital) and Part B (Medical). Private insurance companies approved by Medicare provide this coverage. In some cases the premiums and/or co-pays can be lower than in the original Medicare plans. Medicare Advantage Plans offer a number of types of plans including Preferred Provider Organization (PPO) Plans or Health Maintenance Organization (HMO) Plans. These plans coordinate your loved one’s medical care with some plans having stricter network and referral requirements than others. Many of the plans include Medicare Part D (Prescription Drug coverage). It is important that you read the plan information carefully to ensure you are selecting the right plan for you or your loved one.

Medicare Prescription Drug Plan Part D

Medicare offers prescription drug coverage for everyone with Medicare. This is called “Part D.” This coverage may help lower prescription drug costs and help protect against higher costs in the future. It can give you greater access to drugs that you can use to prevent complications of diseases and stay well. These plans are run by insurance companies and other private companies approved by Medicare. Part D is optional.

Cost: If you join a Medicare drug plan, you usually pay a monthly premium. If you decide not to enroll in a Medicare drug plan when you are first eligible, you may pay a penalty if you choose to join later. If you have limited income and resources, you might qualify for extra help paying your Part D costs.

This is only a general overview of the system. Individual circumstances and situations will vary. For more information, or a comprehensive look at the details of this program:

- Centers for Medicare & Medicaid Services (CMS)
  1-800-MEDICARE
  www.medicare.gov
**Medigap**

Medigap is also called “supplemental insurance.” Generally, a person must have Medicare Part A and Part B to buy a Medigap policy. There is a monthly premium for Medicare Part B. In addition, a premium must be paid to the Medigap insurance company. A Medigap policy is health insurance sold by private insurance companies to fill the “gaps” in original Medicare Plan coverage. Medigap policies help pay some of the health care costs that the original Medicare Plan doesn’t cover. If your loved one is in the original Medicare Plan and has a Medigap policy, then Medicare and your Medigap policy will both pay their share of covered health care costs.

- [www.medicare.gov/medigap/default.asp](http://www.medicare.gov/medigap/default.asp)

**The State Health Insurance Assistance Program (SHIP)**

SHIP is a statewide program that provides free, objective information and assistance about Medicare, Medigap, and other Medicare insurance plans. Trained volunteer counselors are available to help you make informed choices. To contact counselors:

- **State Health Insurance Program (SHIP)**
  1-800-792-8820
  [www.state.nj.us/health/senior/ship.shtml](http://www.state.nj.us/health/senior/ship.shtml)
- **NORWESCAP (Local Office for SHIP)**
  973-989-5773

**Medicaid**

Medicaid is a needs-based health insurance available through Social Security Income (SSI), Division of Youth & Family Services (DYFS), Department of Developmental Disabilities (DDD), municipal welfare and the Office of Temporary Assistance (OTA).

**Medicaid Home & Community-Based Waivers**

The loved one you care for may be over age 65 or have developed medical conditions that qualify as a disability. In addition to health insurance, Medicaid provides unique services to persons with a variety of disabilities through home and community-based waiver programs. The following is a list of some of the waiver programs available. You will need to contact each individual program to determine eligibility. As there are a number of waiver programs available in addition to the ones listed here, you should contact the Office of Temporary Assistance to determine if your loved one’s situation qualifies for a Medicaid waiver program.

- **Morris County Office of Temporary Assistance (Medicaid Unit)**
  973-326-7878
  [www.morrishumanservices.org/hs/](http://www.morrishumanservices.org/hs/)

**AIDS Community Care Alternatives Program (“ACCAP”)**

This waiver is for those of any age with AIDS (Acquired Immunodeficiency Syndrome) and children up to age 13 who are HIV positive who are in need of institutional care and meet, at a minimum, the nursing facility level of care criteria. It provides full Medicaid benefits plus case management, private-duty nursing, medical day care, personal care assistant services, and hospice care. The purpose of the waiver is to help eligible individuals to remain in the community.
or to return to the community, rather than be cared for in a nursing facility or a hospital setting.

- **Morris County Office of Temporary Assistance (Medicaid Unit)**  
  973-326-7878  
  www.morrishumanservices.org/hs/

**Community Resources for People with Disabilities (CRPD) Medicaid Waiver**

This waiver is for children and adults with disabilities and/or visual impairments. It provides all Medicaid State Plan services, as well as case management services. Services include personal care assistant, home health, medications, durable medical equipment, and physician services. New Jersey has recently requested adding new services to this waiver, including environmental modifications and personal emergency response systems. For information:

- **NJ Division of Disability Services**  
  1-888-285-3036, or 609-588-2620  
  www.state.nj.us/humanservices/dds/

**Traumatic Brain Injury (TBI) Medicaid Waiver**

This waiver is for people ages 18 to 65 with an acquired brain injury. It provides case management, counseling, community residential services, therapies, behavioral programs, environmental modifications, day programming, personal care assistant, transportation, respite care, night supervision, chore services, and companion services for those who qualify. For information:

- **Morris County Office of Temporary Assistance (Medicaid Unit)**  
  973-326-7878  
  www.morrishumanservices.org/hs/

**Community Care Medicaid Waiver (CCW)**

This waiver is for individuals registered with the NJ Division of Developmental Disabilities (the disability had to have manifested before the age of 22), and provides case management, rehabilitation, individual supports, environmental and vehicle accessibility adaptation, personal emergency response system, and respite care. For more information:

- **NJ Division of Developmental Disabilities, regional office**  
  973-927-2600  
  www.state.nj.us/humanservices/ddd/index.html

**Global Options Medicaid Waiver**

On June 21, 2006 Governor Corzine signed the Independence, Dignity, and Choice in Long Term Care bill. This program was designed to enable Medicaid nursing home residents, who are medically appropriate, to return to the community by establishing a funding balance between nursing home care and community based care. New Jersey was a pilot state for this program, known as Global Options.

Effective January 1, 2009, the following three Medicaid Waiver programs: Assisted Living, Caregiver Assistance Program (CAP) and Community Care Program for the Elderly & Disabled (CCPED), were consolidated into a single program now known as Global Options (GO) for Long Term Care.
Who is Eligible for GO?

An applicant must be 65 years or older or between the ages of 21 and 64 who shall be determined disabled * by Social Security Administration (SSA) or be determined disabled * by the Division of Medical Assistance and Health Services, Disability Review Section.

Additionally, eligibility depends on whether there is an indication that the participant will need the level of care provided in a hospital, a nursing facility or an intermediate care facility in the near future (i.e, a month or less) unless he or she receives home and community-based services.

* Individuals between the ages of 21 and 64 who are chronically mentally ill or developmentally disabled may be eligible after a service needs review by the DHSS/DHS Service Review Team.

Are There Limits to GO Services? -- Yes. The service package is based on an assessment of the individual’s level of care needs and is developed in collaboration with a case/care manager. The service package builds on available supports, and takes into consideration the individual’s functional abilities, personal goals and preferences, risk factors, and availability of services.

Who Provides these Services? -- Services may be provided by traditional Medicaid community agencies or new qualified non-traditional entities. All service providers must demonstrate competence in the service to be provided and must meet qualification requirements, which have been approved by the federal government.

What Services May be Provided? -- GO participants are eligible for all New Jersey Title XIX Medicaid State Plan services authorized in a Plan of Care

Community choice counseling is available for nursing home residents. If an individual would like information or to be considered for Global Options, he or she and family members should speak with their nursing home’s social worker or discharge planner to determine if they are eligible and if this alternative is appropriate for them.

- Morris County Office of Temporary Assistance (Medicaid Unit)  
  973-326-7878  
  www.morrishumanservices.org/hs/

Medicaid’s Personal Preference:  
Cash & Counseling Demonstration Project

This is a national research and demonstration project sponsored by the Robert Wood Johnson Foundation to study the effects of allowing Medicaid recipients with disabilities who are eligible for Personal Care Assistance services to direct their own care. Through a monthly cash allowance, participants work with a consultant to develop a cash management plan by which they decide the services they need and the individuals and/or agencies they wish to hire to provide the identified services. The program requires greater consumer responsibility, but also offers participants greater control, flexibility, and choice. For more information:

- NJ Division of Disability Services  
  1-888-285-3036  
  www.state.nj.us/humanservices/dds/
General Financial Planning

Financial Planners

Professional financial planners look at a person’s long-term financial goals, and analyze assets, income, investments, and personal concerns. From there, the financial planner will provide advice and plans on how to maximize returns and minimize expenses through investments and reinvestments. To find a planner:

- Financial Planning Association
  1-800-647-6340
  www.plannersearch.org

- National Association of Personal Financial Advisors
  1-800-366-2732
  www.napfa.org

- AARP
  www.aarp.org

Bill-Paying Services

If your loved one is no longer capable of handling his or her own finances, sometimes an option is to hire an individual to pay all of the bills. These professionals will ensure that anything that is billed to your loved one is taken care of. A bill paying service will submit a report to the power of attorney. This report will include all of the money necessary to pay the bills for that month as well as the service fee.

- Senior Cents
  Family Service of Morris County
  This Family Service of Morris County program is a money management and advocacy program for older adults and/or people with disabilities in Morris County. The program uses trained volunteers to enable older adults to control their finances and maintain their independence.
  973-538-5260
  www.fsmc.org

- American Association of Daily Money Managers (AADMM)
  AADMM is a membership organization comprised of individuals who provide money management services. AADMM provides a listing of money managers by geographic area.
  1-877-326-5991
  www.aadmm.com

Financial & Tax Assistance/Savings Programs

Temporary Assistance/General Assistance/Food Stamps

This program provides a variety of financial, medical, and social services to persons/families who meet certain criteria, depending on family size, monthly income, and assets and resources.
For eligibility and benefits information, call your town’s Municipal Welfare Office, or:

- **Morris County Office of Temporary Assistance**  
  973-326-7800  
  www.morrishumanservices.org/hs/

**New Jersey’s Homestead Property Relief Program**

The Homestead Credit/Rebate Program provides credits or rebates for homeowners and tenants who occupied their principal residence in New Jersey on October 1 of the year for which the credit applies, paid property taxes on that dwelling either directly or through rent, and whose gross income for the entire year does not exceed certain limits.

- **Taxpayer Customer Service Center**  
  609-292-6400  
  www.state.nj.us/treasury/taxation/

**New Jersey’s Property Tax Reimbursement Program**  
also known as the “Senior Freeze”

This program reimburses eligible senior citizens and people with disabilities for property tax increases. The amount of the reimbursement is the difference between the amount of property taxes that were due and paid in the "base year" (the first year that all the eligibility requirements are met) and the amount due and paid in the current year for which the reimbursement is being claimed, provided the amount paid in the current year was greater.

The applicant must meet all the eligibility requirements for the base year and for each succeeding year, up to and including the current year to qualify for the reimbursement.

- **Taxpayer Customer Service Center**  
  609-292-6400  
  www.state.nj.us/treasury/taxation/

**Prescription Assistance/Savings Programs**

**Pharmaceutical Assistance to the Aging and Disabled (PAAD)**

New Jersey’s PAAD program provides pharmaceutical assistance to residents 65 years of age or older or 18 years of age and older if receiving Social Security Disability benefits. This is a means-based program. Single adults with annual income of less than $24,432 and married couples with annual income less than $29,956 in 2009 are eligible. Income eligibility changes annually. PAAD beneficiaries are also required to enroll in a Medicare Part D Prescription Drug Plan. They do not pay premiums, deductibles, or any out-of-pocket costs beyond the regular PAAD co-payment of $6.00 for generic drugs or $7.00 for brand name drugs. People eligible for PAAD are usually eligible for the Lifeline Program and the Hearing Aid Assistance to the Aging and Disabled Program (HAAAD).

- **NJ Department of Health and Senior Services**  
  1-800-792-9745  
  www.state.nj.us/health/seniorbenefits/services.shtml
**Senior Gold**

Another program of the New Jersey State Department of Health and Senior Services, this State-funded prescription program has a different co-payment structure and higher income eligibility requirements than PAAD. Members pay a co-payment of $15 plus 50% of the remaining cost of each covered prescription until they reach annual out-of-pocket expenses exceeding $2,000 for single persons or $3,000 for married couples. When they have exceeded their annual out-of-pocket expense, they pay only the flat $15 co-payment per prescription for the remainder of the year. There are other restrictions and coordination with other insurance benefits or Medicare Part D.

- NJ Department of Health and Senior Services  
  1-800-792-9745  
  www.state.nj.us/health/seniorbenefits/seniorgolddetail.shtml

**FamilyWize Prescription Drug Discount Card**

FamilyWize, in partnership with United Way, offers a free Prescription Drug Discount Card that can offer immediate savings on prescription drugs at participating pharmacies for people that have no health insurance, during deductible periods and for prescription medicine not covered by health insurance, Medicare or other benefit plans. It is not insurance, nor is it intended to replace insurance. It can save an average of up to 30% or more off the pharmacy's usual and customary retail price of prescription drugs, with the highest savings on generic drugs. The cost will be the discount price with the FamilyWize card or the pharmacy's usual and customary retail price, whichever is lower. For more information or to receive a card:

- United Way of Morris County  
  973-993-1160, ext 108  
  or  
  www.familywize.com

**Pharmacy Owners Providers Services (POPS)**

Provides all residents of Morris County and dependents in the same house, not currently covered through any government sponsored or employer-based prescription insurance program, with savings of up to 50% on prescription medications.

An annual, non-refundable membership fee of $20.00, or a 3-year fee of $40.00, is required. You may use POPS at any participating Morris County pharmacy. There are no age, income, or pre-existing condition exclusions, no deductibles, no limits on quantities, and no forms to complete, except the initial application, along with proof of Morris County residency. For more information:

- Morris County Division on Aging, Disabilities & Veterans  
  NJ EASE  
  1-800-564-4656  
  www.morrishumanservices.org/dvs/
**RX4NJ**

Rx4NJ is a website designed to help low-income, uninsured New Jersey residents get free or discounted brand-name medicines. State agencies and community organizations worked together with America's pharmaceutical companies to develop Rx4NJ.

If you have a hard time paying for your medications, you may be eligible for help in paying for your prescriptions. Rx4NJ makes it very easy to find out if you or a loved one qualify for assistance. Follow the on-screen step-by-step directions. Once you provide the website with some basic information related to prescription medicines, income, and current prescription medicine coverage, Rx4NJ will be able to tell you what patient assistance programs you may be eligible for. If you are eligible, you will receive an application that can be printed out and returned directly to the drug manufacturer for final approval, after your doctor has approved and signed it. For information:

- [www.rx4nj.org](http://www.rx4nj.org)
  1-888-793-6765

**Other Assistance/Savings Programs**

**Hearing Aid Assistance to the Aged and Disabled (HAAAD)**

HAAAD provides a $100 reimbursement to eligible persons who purchase a hearing aid. Persons must meet the PAAD eligibility requirements.

- [NJ Department of Health and Senior Services](http://www.state.nj.us/health/seniorbenefits/seniorgolddetail.shtml)
  1-800-792-9745

**Personal Assistance Services Program (PASP)**

Provides non-medical, consumer-directed home health care for persons with disabilities between the ages of 18 and 66 who are either in school, working, or volunteering in the community. To determine eligibility, or for more information:

- [Morris County Office for the Disabled](http://www.morrishumanservices.org/dvs/disabled.asp)
  973-285-6865

**Telephone**

Verizon offers two assistance programs for phone service for people who are low income. Through *Link Up America*, eligible new customers receive a 50% discount on the initial phone connection charge, with the remaining 50% paid in 12 monthly installments.

Through *Communications Lifeline*, existing Verizon residential customers may be eligible to receive discounted local telephone service. *Communications Lifeline* makes local telephone service available to people who might not be able to afford phone service.

To see if your loved one is eligible for *Link Up America* or *Communications Lifeline*:

- 1-888-337-3339
Utilities

Low Income Home Energy Assistance Program (LIHEAP) and Universal Service Fund (USF)

The Low Income Home Energy Assistance Program (LIHEAP) is designed to help low-income families and individuals meet home heating and medically necessary cooling costs. Applications are usually accepted between November 1 and April 30. To apply for LIHEAP, you will need to contact the authorized local community action agency or community based organization in your area. To be eligible for LIHEAP benefits, the applicant household must be responsible for home heating or cooling costs, either directly or included in the rent; and have gross income at or below 225% of the federal poverty level. Persons who live in public housing and/or receive rental assistance are not eligible unless they pay for their own heating/cooling costs directly to the fuel supplier. The amount of the LIHEAP heating benefit is determined by income, household size, fuel type, and heating region.

See website noted below to find LIHEAP income eligibility levels.

Please Note: The LIHEAP application is also an application for the Universal Service Fund Program (USF). You apply for two benefit programs at the same time using one application.

USF is a program created by the State of New Jersey to help make natural gas and electric bills more affordable for low-income households. If you are eligible, USF can lower the amount you pay for gas and electricity. To be eligible, a household gross income must be at or below 175% of the Federal Poverty Level and pay more than 3% of its annual income for electric, or more than 3% for natural gas. If a household has electric heat, it must spend more than 6% of its annual income on electricity to be eligible.

For more information about USF:
- 1-866-240-1347

For further information on LIHEAP or to locate the nearest application agency:
- 1-800-510-3102
  www.energyassistance.nj.gov

Lifeline Utility Assistance

Lifeline is a utility assistance program that offers a $225 credit on electric and gas utility bills for persons who meet the PAAD eligibility requirements or who receive SSI.

- NJ Department of Health and Senior Services
  1-800-792-9745
  www.state.nj.us/health/seniorbenefits/lifeline.shtml
New Jersey SHARES

A statewide, nonprofit 501(c)(3) organization which provides grants to pay the utility bills of households in need through a statewide network of more than 100 community-based social service agencies. For information on applying for assistance:

- **1-866-NJSHARES**
  - www.njshares.org/

NJ Hospital Care Payment Assistance Program (Charity Care Assistance)

This program offers free or reduced charge care to patients who receive inpatient and outpatient services at acute care hospitals throughout the State of New Jersey. Hospital assistance and reduced charge care are available only for necessary hospital care. Some services such as physician fees, anesthesiology fees, radiology interpretation, and outpatient prescriptions are separate from hospital charges and may not be eligible for reduction.

Hospital care payment assistance is available to residents who:

- Have no health coverage or have coverage that pays only part of the bill; and
- Are ineligible for any private or government sponsored coverage (such as Medicaid); and
- Meet both income and assets eligibility criteria.

For information on eligibility and on how to apply:

- **NJ Department of Health & Human Services**
  - 1-866-588-5696
  - www.state.nj.us/health/cc/

Veterans

An individual with a disability who is a veteran or whose parent or spouse is or was a veteran, may be eligible for monthly cash payments, assistance with educational costs, medical care, vocational assistance, rehabilitation, or other benefits. In addition, a veteran who is disabled may be eligible for grants for specifically adapted housing. For more information:

- **Morris County Veteran’s Services Office**
  - 1-800-564-4656 or 973-285-6866
  - www.morrishumanservices.org/dvs/

- **Veterans’ Affairs Hotline**
  - 1-800-624-0508
  - www.va.gov
Long Term Care Insurance

About 44% of all people age 65 and older will need nursing home care at some point in their lives. The average age for entering a nursing home is 83. One-third of those who enter a nursing home will stay three months or less, and 20% will stay about a year. The balance of older adults, or about one half, will remain in a nursing home more than a year, at a current cost of about $100,000 per year.

Private insurance can play a vital role in protecting against what, for some, can become an economic catastrophe. Often, at the point when caregiving is necessary, the opportunity to insure for long term coverage to help cover nursing home costs has passed, and the person needing care is deemed “uninsurable.”

As a caregiver, you should become aware of the conditions of coverage of the insurance carried by the person you care for. Key things to watch for include:

- waiting periods,
- policy requirements for Medicare approval,
- what, if any, limits exist on daily medical benefits,
- what are benefit coverages for:
  - Alzheimer’s,
  - respite care,
  - skilled, intermediate or custodial care,
- types of care facilities covered or not covered,
- are in-home services covered,
- coverages for assisted living or community senior center,
- ability to use benefit for care within a nursing home or facility,
- benefits for personal grooming,
- ability to upgrade to higher benefits or less restrictive coverage, protection against inflation.

A periodic review of all insurance coverages is always recommended.

As a caregiver, it is a good idea to be familiar with all your loved one’s key financial and insurance information, and to keep copies of important documents, including those submitted to assistance programs.

Take time to review insurance coverages, including home, auto, health, disability, and life, and keep records that include location where actual policies are kept, and current contact information for each applicable agent.

Keep all records in an easily accessible place, and be sure to share with another family member where this important information can be found.
8. Legal Matters Relating to Aging Loved Ones

A list of key legal terms relating to caring for an aging loved one can be found in Appendix C.

The following is intended as a general informational overview of legal issues that caregivers should consider as they care for their loved one, and does not constitute legal advice. For specific legal advice, always seek professional counsel.

It is important that the person for whom you provide care understands his or her legal rights, and that they take the necessary steps to protect themselves and their interests. Depending on circumstances, it may be important for you as the caregiver to be involved as well in legal matters. Of course, the depth of your involvement may change as care needs increase.

Legal Services

Some free civil legal services are available to low-income seniors through:

- Legal Services of Northwest Jersey (LSNWJ)
  Morris County Office
  973-285-6911
  www.lsnj.org/lsnwj/index.htm

Elder Law

Elder law is a new and fast growing area of the law, and deals with the varied legal issues faced by the aging population and their caregivers. It combines elements of estate planning, trusts, wills, guardianship, power of attorney, advanced medical directives, eligibility for government programs and benefits, housing, finance, rights of the aging, and other issues which confront all of us as we age. A good first step in locating an elder law attorney in your area would be to contact:

- National Academy of Elder Law Attorneys

The National Academy of Elder Law Attorneys (NAELA) is an organization of attorneys in the private and public sectors who deal with legal issues affecting older adults and people with disabilities. Their website includes a section to help locate an elder law attorney in your area.

- http://naela.org/Applications/ConsumerDirectory/index.cfm

Legal Capacity

A starting point for legal documents is having the mental capability to understand the meaning and importance of these documents. Stated differently, legal capacity is the level of judgment and decision-making needed to create legally binding wills, trusts, and powers of attorney.
Key Legal Documents & Issues

Power of Attorney

A power of attorney is a legal document transferring decision-making authority to a person designated by your loved one in advance. The power can be related to the management of your loved one's property or related to decisions about medical treatment. The power can be a “durable power,” meaning that it continues in the event of disability, or a “springing power,” meaning it takes legal effect only after disability.

Unlike many other uses of the term “disability” - which might refer to a physical handicap, when the term is used within a Power of Attorney, “disability” means lacking mental capability to manage property or make decisions about medical treatment. A person in a coma would be a clear example of someone who is disabled and unable to make a decision independently.

Caregivers should be aware of what, who, and where powers of attorney have been provided. These documents should be current, accessible, and understood by the caregiver.

Power of Attorney over Medical Decisions

The Power of Attorney over Medical Decisions appoints a person to represent your loved one in making his or her medical decisions. It defines the limits and extent of such power.

Other terms used to describe a power of attorney over medical decisions are “power of attorney for health decisions”, “health care proxy”, “medical directive”, and “advanced directive for health care”.

Caregivers should also be aware of some key laws governing medical directives. The Patient Self Determination Act ensures that all adult patients know the extent of their right to control health care decisions, particularly through the use of health care directives.

A living will is a type of advanced directive related to medical decisions for the terminally ill. The living will comes into play when a person’s condition is terminal with no expectation of recovery. The living will sets forth the type of medical care, the extent of life support, the possible removal of life support and instructions as to how and where your loved one would like to be cared in the final stage of life.

The New Jersey Advance Directives for Health Care Act requires a doctor or hospital to make an affirmative inquiry to find out if your loved one has any advanced directives.

Finally, make sure that all those named in your loved one’s power of attorney are aware, have a copy of the document and have access to the original should they need to act for your loved one under that power. Also, make sure to have one or two back-ups named on these documents.

Living Will

A living will, as mentioned above, is a type of directive providing comprehensive instruction as to the medical situations where a patient would want to be kept alive and what measures should or should not be used to prolong life or delay death.

A living will is a critical legal document for you, the caregiver, as it clearly articulates the wishes of your loved one. Without such instruction, you could be left speculating as to how, when and to what extent your loved one wants medical means to continue or not continue his or her life. Your loved one’s guidance is most instructive and important. His or her directions go a long way to help ease your burden in carrying out decisions that your loved one may not be able to make independently.
Will

Elder planning often starts with a will, an important document in any elder plan. Caregivers should be familiar with the uses of a will.

A will is the written statement of a person’s wishes as to the disposition of his or her property following death. It takes effect upon death. Up until death (providing mental capacity as discussed above), a will can be amended or revoked.

The person executing the will is known as the “testator.”

To make a valid will, the person must possess the mental capacity to know what he or she is doing. It is not an excessively high standard of “awareness” but does require awareness of some essential facts. For example, does the person know if they are married and if their spouse is alive? If they have children, can they name them, know approximately how old they are and where they live? Do they know, roughly, what they own, such as houses and bank accounts, and do they understand that the purpose of a will is to leave the things they own to the person whom they name in the will? If the person cannot be conversant about such basic facts, more than likely they do not have the mental capacity to execute, modify, or rescind a will.

Capacity is measured at the time a person makes and signs his or her will. This is important as many elders, who may be beginning to lose mental capacity, may have good days and bad days. So long as the person makes the will or changes to the will on a day in which they had mental capacity to understand what they were generally doing, and this can be later proven, then the legal system will uphold the wishes of the “testator.”

A will accomplishes a number of important issues.

A will allows for the nomination of an executor; without a will, the state would determine who is to serve as executor of your loved one’s estate.

A will avoids “intestacy.” Intestacy is where, in the absence of a will, state law dictates who inherits a person’s probate assets.

A will allows a person to define who gets what property. Often a person wants to provide a specific person with a specific item of property. A will allows for such special bequests. A person may want to distribute property unequally to children, as children often have different needs; a will allows for such unequal distributions. A person may want to disinherit a natural heir; a will allows for disinherition.

A will allows for the nomination of a guardian or trustee, if the person dies with minor children.

As stated above, a will dictates who inherits your loved one’s “probate assets.” Not all assets are “probate assets.” That depends upon how the assets are owned. Assets which are “not” probate assets pass directly to the person named as “beneficiary” or co-owner of the asset. Examples of assets which could pass directly and avoid probate would be joint accounts, assets in a revocable living trust, pay-on-death accounts, transfer-on-death accounts, annuities with a named beneficiary, life insurance with a named beneficiary, certificates of deposits with a named beneficiary, individual retirement accounts with a named beneficiary, and assets owned “tenancy by entireties.”

It is important to note that many of these assets have a “named beneficiary,” which should be reviewed annually as life changes.
**Trusts**

A trust is a contractual three party arrangement where one person transfers property to another person to hold in trust for the benefit of a third person. While that may sound confusing, a properly designed trust accomplishes as much as a will, while providing a greater flexibility for life and estate planning. A trust may be “revocable” or “irrevocable.” A trust may exist while you are alive (living trust) or created via a will (testamentary trust).

**Irrevocable Trust**

An irrevocable trust cannot be amended or changed. The person transferring the property (the “trustor”) cannot later change his or her mind. There are many tax and planning reasons why a person would transfer property through an irrevocable trust.

**Revocable Trust**

A “revocable” trust can, by its definition, be amended or changed. Like a will, the person transferring the property can change his or her mind or change the terms of the trust. It is completely flexible. As such, a revocable trust serves a wide variety of needs related to lifetime planning, extending control over your estate following death and minimizing succession transfer costs, such as probate avoidance and reduction of estate taxes.

For a trust to be “living,” it must be what is called “funded.” This simply means that the “grantor” has transferred assets currently owned into the trust. It makes little sense to create a “living trust” and then not transfer or convey the ownership of property into the trust. Examples of property to be placed or funded into a living trust would be real estate, annuities, stocks, bonds, and bank accounts. Vehicles can be owned by the trust depending on the situation. Special tax deferred investment accounts such as IRAs and pension rights are usually not owned by a revocable living trust.

A revocable living trust does all that a will does, plus more. It allows for the continued management of your loved one’s assets should he or she become disabled. A trust avoids the need, delay, and cost of probate. A will becomes a public document; a trust does not and, thus, is a great way to keep your affairs private.

**Guardianship**

When no advance directive exists and a person becomes unable to manage his or her personal or property affairs – life’s decisions, including medical decisions, come to a halt. In that situation, the caregiver, or other involved individuals/organizations, must go to the Court and petition for a Letter of Guardianship. Guardianship is basically Court supervised decision-making by another person.

Guardianship takes two forms. A guardian of the property has authority to manage the financial affairs for the older adult or person with a disability. A guardian of the person has authority to make health care decisions for the older adult or person with a disability. New Jersey sets forth a priority of persons who may serve as guardian, with the spouse or next of kin first in line for consideration.

Appointment of a guardian is a Court process governed by statute. It requires a Complaint often filed by a family member (“petitioner”), two doctors stating the person is mentally unable to handle his or her own affairs, a court appointed attorney to represent the elder, and the petitioner’s attorney. Then a hearing will be scheduled. Following the hearing, a judge will rule on the Complaint and if appropriate, issue a judgment appointing guardianship. If at some later time, the person gains the capacity to manage his or her affairs, the guardianship can and should be terminated.
**Burial Fund**

A burial fund is money set aside to pay for burial expenses. This money can be in a bank account, other financial instrument, or a prepaid burial arrangement. This can be helpful to eliminate emotional stress and financial burden on a caregiver, or other family member at the time of a person’s death. The maximum dollar amount allowed in a burial account is $1500 per person.

A resource for information on funeral arrangements is [www.aarp.org/families/grief-loss/](http://www.aarp.org/families/grief-loss/)

**Probate: Made Simple**

The following section is intended to provide a broad overview of the necessary steps you would need to take following the death of a family member. The section is written from the perspective of the person named as Executor. The Executor is the person named in a will who is responsible for ensuring the wishes of the deceased are followed, debts and taxes are paid, and the estate is distributed to the proper beneficiaries.

Perhaps a starting point is “ownership.” Everyone owns something. As an owner of property, real or personal, you have what lawyers call an “estate.” Real property is land and buildings. Personal property is everything else such as bank accounts, stocks, bonds furniture, money, life insurance, automobiles, jewelry, and all other personal effects.

It is your right, as an owner of property, to select whom this should be given to upon your death. There are several ways to make such selection. You can write a will, you can create a trust, you can jointly own property, or you can name a beneficiary for each asset. If you do none of the above, upon your death no one knows what property you would want to go to whom. At that point, state law enters the picture and, using the County Surrogate’s office, an administrator is appointed and property is distributed according to state law.

**How to Probate a Will:**

Probate is the process that permits the transfer of your assets as directed by your will. Under New Jersey law, a will may be admitted to probate ten days after the date of death. To submit a will to probate, one goes to the County Surrogate with the original will, a raised seal copy of the death certificate, contact information for the executor, and contact information for the next of kin and each named beneficiary. It is best to call ahead to find out the specific procedure as process varies county by county.

A will is a legal document. Upon death, the will directs how and to whom your property should be given. A will must name an executor. An executor is legally empowered to manage another person’s money, therefore, the law requires the executor to accept a “fiduciary” duty to both the estate and the beneficiaries of the estate. This is a high legal standard of care and thus the executor should always take great care and maintain detailed records.

There are three types of wills: standard, self-proving, and holographic. Most wills today are self-proving wills, meaning two witnesses watched the will signing and then in front of each other and in front of a notary, they also signed the will. The advantage of a ‘self-proving will’ is at time of probate the witnesses do not have to physically appear before the surrogate court. With a standard will, state law requires witnesses to appear before the surrogate in order to have the will admitted to probate. This can cause much delay in the probate process. A holographic will has no witnesses, is written by hand, and is most subject to being contested and time delayed.
Whatever type of will is executed, it should be kept in a safe place accessible upon the testator’s death. Family members, those close to the testator and most importantly, the person named as executor should be aware of the will and where it is kept.

It is important to be aware that unless it is properly prepared, a will is not effective. Individuals should not write their own will unless they are knowledgeable about the legal requirements for an enforceable will.

Upon death, there are certain basic steps which need to be taken by the executor:

- Locate the original will.
- Present a raised seal death certificate, names and addresses of all persons named in the will, and names and address of next of kin to the Surrogate. If the will is self-proving, it can be probated in a very short time. If the will is not self-proving, one of the witnesses to the will must come in to the Surrogate’s office or present proof of their signature.
- The Court will issue the Executor’s Certificate and Letters Testamentary. These documents legally appoint the executor as administrator for the estate.
- Within sixty days of the will’s probation, the executor must notify all heirs and beneficiaries named in the will with proof sent to the Surrogate’s Court of the testator’s death.

**Executor Duties:**

After the will is probated and the Surrogate has issued both the Executor’s Certificate and Letters Testamentary, the executor is ready to begin carrying out his or her responsibility of safeguarding the property, paying expenses and taxes, and distributing the remainder of the estate to named beneficiaries. Here are some simple suggested steps:

- Set up a system to keep track of all the paperwork which will shortly come your way.
- Find records such as annuity policies, bank statements, birth certificates, account statements, checkbooks, credit card statements, health insurance policies, investment records, life insurance policies, marriage license, military service records, pension records, real estate deeds, registration for cars and boats, retirements account statements, social security records, tax returns, W-2 forms, and other such documents.
- Order copies of the death certificate – the funeral home will be helpful. A death certificate will be required as official evidence of death when closing down financial accounts, filing claim benefits, life insurance claims and settling real estate.
- Follow the will’s instructions – a typical will doesn’t contain many specific directions. Rather, most wills set forth a broad list of powers. However, carefully read the will and if it contains specific instructions, you must follow them.
- Set up an Estate or Trust Bank Account – once you have been appointed executor, you will want to open a bank account in the name of the estate. This account will need its own taxpayer ID number for the IRS. Once opened, you can transfer the decedent’s bank accounts into it. You may have to secure certain tax waivers from the State of New Jersey. You can use this account to pay debts, taxes and expenses of administration. Keep good records of all transactions.
- Don’t take risks – when it comes to managing property and investments, you must act with prudence which means reasonable skill and caution. Your goal is to safeguard the property until it can be distributed to the name beneficiary. That is part of your fiduciary responsibility. Put the estate first and be fair to all beneficiaries.
• Keep estate assets separate from your own. It is never acceptable for you to mix estate assets with your own assets. All income generated by the estate must go into the estate checking account. Estate assets can never be used personally by you even if you intend to pay them back.

• Send notifications of death. Check the decedent’s calendar and cancel appointments. Draft a form letter and notify banks, charities, credit card companies, health care providers, former employers, insurance companies, landlords, membership organizations, subscriptions, pension payers, post office, social groups, state government, veteran groups, and volunteer organizations.

• Call Social Security as soon as practical (1-800-772-1213) and return the Social Security payment for the month of death.

• Keep property secure. The executor is responsible for making sure that the deceased person’s property remains safe until it can be transferred to the people who will inherit it. Real estate and automobiles should be of particular attention.

Taxes:

1. **State Inheritance Tax:** The New Jersey Transfer Inheritance Tax has four classifications of beneficiaries. Spouse, children, step-children, grandchildren, parents and grandparents are Class A beneficiaries not subject to state inheritance tax. Charities and not-for-profits are Class E beneficiaries not subject to state inheritance tax. Siblings and sibling in-laws are exempt for the first $25,000 and others are subject to inheritance tax for amounts over $500.

2. **Estate Tax:** Estates subject to estate tax should seek professional tax and accounting advice. Estates valued at over $675,000 are subject to New Jersey Estate Tax and estates valued at over $2,000,000 are subject to Federal Estate Tax.

3. **Income Tax:** The executor is required to file a final income tax return for the deceased. The deceased’s estate may also be responsible for filing an estate trust tax return. The executor is responsible for ensuring all income is reported, taxes paid, and appropriate returns filed on a timely basis.

Conclusion:

This overview is very general, and many items of estate administration have not been covered. For example, individual situations may include other issues like administration of a trust, children under 18 years of age, property that does not go through probate, transferring joint tenancy and other survivorship property, claiming monies from retirement plans, special procedures for small estates, and handling bypass trusts. For these and other issues, professional advice is strongly recommended.
9.
Day & Home Care Programs for Aging Loved Ones

The following is an overview of Adult Day Care, Home Care, and Hospice programs. There are a variety of resources available, including private pay services and services that are subsidized for those who qualify. Again, good places to start when looking for resources in Morris County are:

- **Morris County Division on Aging, Disabilities & Veterans/NJ EASE**
  1-800-564-4656 (Ask for free copy of their Morris County Caregiver Guide)
  www.morrishumanservices.org/dvs/

- **2-1-1 First Call for Help**
  Dial 2-1-1, or 1-800-435-7555
  www.NJ211.org

**Adult Day Programs**

Adult Day Programs are also known as “adult day services.” There are three types of day programs: Medical Day Care, Social Day Care, and Gero-Psychiatric Care.

Each type of service provides care with a planned program of activities designed to promote well-being through social activities and/or health related services for adults who are isolated or need assistance in activities of daily living. These services operate during the day. Lunch is usually provided. In some cases, transportation to and from the facility is also available. Payment for services includes private payment and, in some instances, Medicaid.

**Medical Day Care**

These programs provide medical services ranging from preventative and therapeutic to diagnostic and rehabilitative. Medical day care facilities for older adults are licensed and regulated by the New Jersey State Department of Health and Senior Services.

**Social Day Care**

These programs are centered on the goal of independence for your loved one. Social activities such as exercise, arts and crafts, and lectures are aimed at improving the participant’s social, physical, and emotional well-being.

**Gero-psychiatric Care**

Some adult day care programs are specifically designed for aging individuals diagnosed with Alzheimer’s disease or dementia, and have specially trained staff.

**Home Care Options**

Home care allows older people to remain in their own homes while receiving the assistance they need to help them remain independent. Services are delivered at home to people who are recovering, disabled, chronically or terminally ill and in need of medical, nursing, social, or therapeutic treatment and/or assistance with the essential activities of daily living. Generally, home care is appropriate whenever a person prefers to stay at home but needs ongoing care that cannot easily or effectively be provided solely by the caregiver and circle of friends. Services may be provided as frequently as needed, ranging from weekly visits to 24-hour stays. Accepted payment methods include private pay, commercial insurance and Medicare or Medicaid.
**Home Care Agencies**

These agencies provide personal care (bathing, dressing, toileting,) meal preparation, household chores and supervision. These services are available by a certified home health aide on an hourly basis or as a 24 hour live-in and are generally paid privately.

**Home Health Care Coverage**

Home health care may be covered under Medicare, Medicaid, private pay, or insurance. A person qualifies for these services if they have a “skilled need” for a nurse or rehab therapist (physical, occupational, speech therapist). These skilled services generally last a short time (6-8 weeks). A home health aide may also come for a short visit to provide personal care during this time. Often these services are ordered when your loved one comes home from the hospital, but they can also be ordered by your loved one’s doctor in order to prevent a hospitalization.

**Hospice**

Hospice is a program of care for terminally ill patients and their families that takes place in the home, a nursing home, or dedicated hospice unit. The goal is to provide physical, emotional, and spiritual support with a dignified, peaceful approach to comfort in the final months of life, regardless of disease. Hospice care is covered under Medicare, Medicaid, and most private insurance. No one is denied hospice care because of an inability to pay. For information:

- **New Jersey Hospice & Palliative Care Organization**
  908-233-0060
  www.njhospice.org/

- **2-1-1 First Call for Help**
  Dial 2-1-1, or 1-800-435-7555
  www.NJ211.org

- **National Hospice and Palliative Care Organization**
  Information on end-of-life issues and state-specific advance directives.
  703-837-1500
  www.nhpco.org

**Non-Medical Companion Agencies**

These agencies are designed for individuals who need minimal care. These services will typically provide personal services in the home, relating to daily activities such as dressing, cooking, medication supervision, cleaning and transportation. These services are paid privately.

**Nutrition Programs**

There are 15 “Midday Friendship Centers” located throughout Morris County, providing a hot mid-day meal and the opportunity to socialize with others. For those who are homebound, meals can be delivered.

- **Morris County Nutrition Project**
  973-285-6856
  www.morrishumanservices.org/dvs/
10.

Employment & Volunteering
for Aging Loved Ones

Studies show that remaining active and engaged in a variety of activities has a positive impact on physical and mental health. Your aging loved one may find that volunteering or working, even for relatively small amounts of time each week, provides a sense of independence and an uplifting change of pace.

**Senior Community Service Employment Program (SCSEP)**

The Senior Community Service Employment Program (SCSEP) is administered under New Jersey’s One Stop Programs and Services known as WorkForce 55+.

The main objective of the Workforce 55+ SCSEP is to bring together the talents of older workers and the unmet needs of communities by providing income and gainful part-time subsidized work activities for low income, older persons. For more information:

- New Jersey Department of Labor and Workforce Development
  Division of One Stop Programs and Services
  609-943-5107
  http://lwd.state.nj.us/labor/wnjpin/findjob/onestop/OlderWorker.html

**Volunteering**

Morris County offers various volunteering opportunities through local senior centers, Volunteer Management Center, Inc. (VMC) and the NORWESCAP RSVP program. These provide opportunities for older adults to connect with other members of the community and share their skills and experiences. For more information:

- Volunteer Management Center, Inc. (VMC)
  973-538-7200
  www.vmcnj.org

- NORWESCAP
  973-989-5773
  www.norwescap.org/
11. Housing for Aging Loved Ones

Types of Housing

**Independent Full-Service Communities**

Also known as retirement living, independent living or congregate care. Independent living communities feature private apartments with 24-hour supervision, and are designed specifically for independent senior adults with few medical problems. Services may include meals, laundry, housekeeping, and social activities. Only private pay is accepted in these communities.

**Assisted Living**

Assisted Living provides a combination of residential housing, personalized supportive services, and health care designed for the individual needs of those requiring help with activities of daily living, but who do NOT require the medical attention offered at a nursing home. Assisted living generally offers the resident more autonomy, privacy, and participation in care decisions than do nursing homes. Most communities provide daily activities, meals, laundry, housekeeping services, and 24-hour staff. Units are offered in various sizes and prices to meet individual budgets and needs. Methods of payment include private pay, and, in limited instances, Medicaid.

**Continuing Care Retirement Communities**

Continuing Care Retirement Communities, also known as Life Care Communities, are residential campuses that provide a continuum of care from independent units to assisted living to full nursing care, all in one location. They guarantee the senior lifelong residence, allowing him or her to progress through the stages of care as needed.

**Nursing Homes**

Nursing homes are also known as convalescent care, nursing centers, and long term care facilities. They provide room and board, protection, supervision, and 24-hour medical care.

There are three types of nursing care; basic care, skilled care, and sub-acute care (after hospitalization, short term medical care.) Facilities are licensed and regulated by the State Department of Public Health, and accept a variety of payment options including Medicare, Medicaid, private insurance, and private funds.

Legal Services of Northwest Jersey provides a comprehensive guide addressing landlord and tenants rights. To receive a copy: 973-285-6911
**Public Housing**

The largest group of affordable units is public housing. Housing authorities administer this federal program. New Jersey has about 100 housing authorities.

Housing authorities get federal funds to build and run public housing developments. Most have rental units, but some have houses for sale. Rents and sale prices depend on household income and can be no more than 30% of adjusted earnings. People who live in public housing earn less than 80% of median family income. Federal rules require housing authorities to keep a certain percentage of these units for very low-income households, earning 50% or less than median family income. Some housing authorities must reserve units for extremely low-income households with earnings at or below 30% of median. Use federal income standards to determine eligibility. All rental units must be within Fair Market Rent.

Housing authorities often have waiting lists, depending on local conditions. Public housing authorities may give priority to people who live or work in the communities they serve. The people who operate these authorities are an excellent resource. They know the local housing market and are aware of other programs and opportunities that might be available.

The following are County and Municipal Housing Authorities in Morris County:

- **Boonton Housing Authority:** 973-335-0846
- **Dover Housing Authority:** 973-361-9444
- **Madison Housing Authority:** 973-377-0258
- **Morris County Housing Authority:** 973-540-0389
- **Morristown Housing Authority:** 973-538-6343

**Rental Vouchers**

Rental vouchers are available to individuals and families who are low- or very low-income. To determine whether your loved one meets these income criteria, consult the HUD published “Income Limits” page on the HUD website: [www.huduser.org/datasets/il.html](http://www.huduser.org/datasets/il.html) The income limits change every year. Some New Jersey programs use income limits published by the Council on Affordable Housing (COAH) – these numbers are similar to HUD’s, but slightly different: [www.state.nj.us/dca/affiliates/coah/reports/incomelimits.pdf](http://www.state.nj.us/dca/affiliates/coah/reports/incomelimits.pdf)

Some voucher programs have “set-asides” for those who are considered low or moderate income (below 80% of the Area Median Income), those who have special needs (such as a mental illness) and those over age 62. If your loved one falls into any of these categories, ask for information on programs specific to that group(s).

There are two types of rental vouchers – those that are tenant based and those that are project based:

**Tenant based** vouchers are provided directly to the tenant, and allow the tenant to pay a portion of their income toward rent. The amounts vary by program, but typically, the tenant pays 30% - 40% of the monthly household income toward rent and utilities – the remaining rent is paid directly to the landlord from the subsidy provider. When the tenant moves, the voucher can be transferred to another rental unit.
Agencies often have waiting lists for vouchers. Depending on the length of the lists, the agency may “close” the list until the number falls beneath a certain threshold. Assuming that you will be placed on a waiting list, it is advised that you contact as many of the agencies that you can. There is no penalty for being on more than one list (but ultimately, you can only accept one voucher). Each agency may represent a different geography and/or type of housing. The following agencies offer tenant based vouchers:

- Boonton Housing Authority: 973-335-0846
- Dover Housing Authority: 973-361-9444
- Madison Housing Authority: 973-377-0258
- Morris County Housing Authority: 973-540-0389
- Morristown Housing Authority: 973-538-6343
- NJ Dept. of Community Affairs 609-292-4080
  www.state.nj.us/dca/divisions/dhcr/offices/srap.html

**Project based** vouchers are attached to the property, which means a tenant is entitled to the rental subsidy for as long as they live in that unit. When a tenant moves, the voucher is given to the next tenant in that unit. Tenants pay 25% - 40% of monthly household income toward rent and utilities, depending on the subsidy program attached to the project.

Be prepared that most have waiting lists, and consider having your loved one place his or her name on as many agency lists as appropriate, based on geography and housing type desired.

**Senior Apartments**

Senior apartments are generally rental units in the form of garden apartments, attached housing, or apartments in high-rise or mid-rise buildings. In some buildings, recreational activities, meals, housekeeping, and transportation may be provided.

For more information on the various types of facilities in Morris County:

- **Morris County Division on Aging, Disabilities & Veterans**
  - NJ EASE
  - 1-800-564-4656
Other Housing Programs

**Homelessness Prevention Program**

Provides limited financial assistance to low- and moderate-income tenants and homeowners in imminent danger of eviction or foreclosure due to temporary financial problems beyond their control. Funds are used to disburse payments in the forms of loans and grants to landlords and mortgage companies on behalf of eligible households in danger of homelessness.

- NJ Department of Community Affairs
  609-633-0973 or 1-866-889-6270
  [www.state.nj.us/dca/divisions/dhcr/offices/ha.html](http://www.state.nj.us/dca/divisions/dhcr/offices/ha.html)

**Homelessness Prevention and Rapid Re-Housing Program**

This new program, part of the American Recovery and Reinvestment Act of 2009, is a three year program, offering assistance to individuals and families who are either at risk of becoming homeless or are homeless but are likely to achieve stable housing with this assistance.

- Morris County Office of Temporary Assistance
  973-829-8176
  [www.MorrisCommunityDevelopment.org](http://www.MorrisCommunityDevelopment.org)

**Morris County Housing Rehab Program**

This homeowner rehab program serves to maintain affordable housing by enabling homeowners, experiencing major systems’ failures, e.g., failing septic, furnace, inferior roof, to remain in their homes.

- Morris County Division of Community Development
  973-285-6060
  [www.MorrisCommunityDevelopment.org](http://www.MorrisCommunityDevelopment.org)

**New Jersey Housing and Mortgage Finance Agency**

The New Jersey Housing and Mortgage Finance Agency (HMFA) has many housing programs funded from the sale of bonds. Some provide mortgage assistance and closing costs to homebuyers. Others help homeowners repair the houses they already own.

Those looking to buy a house or condominium should consider calling HMFA to see about the availability of homebuyer assistance programs. For information on HMFA’s programs:

- HMFA
  609-278-7400
- HMFA Mortgage Hotline
  1-800-NJ-HOUSE
  1-800-654-6873
12.
Transportation Information for Aging Loved Ones

For many individuals transportation is a vital link to independence, services, and socialization. There are a variety of options for your aging loved one.

2-1-1 First Call for Help

2-1-1 First Call for Help now operates statewide, connecting people with the resources they need to solve common life problems, including transportation. It is staffed 24/7 and can be accessed by dialing 2-1-1.

- Dial 2-1-1, or 1-800-435-7555
  www.NJ211.org

Morris County Public Transportation

The Morris County Department of Transportation can provide you with a free Transit Guide of the Morris County public transportation system. Their website offers you with transportation information and alternatives, including rail, bus, paratransit, park-and-rides, bicycle and pedestrian travel, and ridesharing. Numerous links to other transportation resources are available on this website.

- 973-829-8101
  www.morrisdot.org

NJ Transit

NJ Transit provides reduced fares for senior citizens and those with a permanent disability. Senior citizens and passengers with disabilities can travel on-board NJ TRANSIT trains, buses, and light rail vehicles at a reduced fare of one-half the regular one-way fare or lower.

Seniors and passengers with disabilities must present a NJ TRANSIT Reduced Fare ID or Medicare Card to obtain the reduced fare ticket.

To receive discounted fares, a NJ TRANSIT Reduced Fare Card/Reduced Fare ID application must be submitted. A Social Security Card and proof of age (a birth certificate or a driver’s license) must be presented when applying.

Applications can be found at most local banks, savings and loan associations, or county Offices on Aging. Applications are also available at the NJ TRANSIT Customer Service offices at Newark Penn Station, New York Penn Station, Hoboken Terminal, and the Port Authority Bus Terminal. An application can also be mailed to you. For more information:

- NJ TRANSIT Reduced Fare Office
  973-378-6401
  www.njtransit.com/sf/sf_servlet.srv?hdnPageAction=ReducedFareTo
**Access Link**

NJ Transit also provides paratransit services for those people who have a disability that prevents them from using the local fixed route bus service. This service is called *Access Link* and eligibility is determined using the three categories provided in the ADA.

Your loved one may be eligible for Access Link if:
1. If he or she cannot get on or off a bus or ride in an accessible bus due to a disability
2. If his or her disability prevents him/her from getting to a bus stop
3. If accessible bus service is not available in his or her area

The cost of this service is the cost of the usual bus fare to your destination.

To apply for *Access Link* an assessment is necessary. Transportation can be provided for the assessment appointment. To arrange for an assessment:

- NJ Transit  
  800-955-2321  
  TTY 800-955-6765  

**Handicapped Parking Passes**

Handicapped parking passes are available for drivers who have lost the use of one or more limbs or are permanently disabled and cannot move without an assisting device or those who transport individuals with such disabilities on a regular basis. For more information:

- NJ Motor Vehicle Commission  
  609-292-6500  
  [http://www.state.nj.us/mvc/Vehicle/HandicappedPlates.htm](http://www.state.nj.us/mvc/Vehicle/HandicappedPlates.htm)

**MAPS**

MAPS (Morris Area Paratransit Services) is administered by the Morris County Division on Seniors, Disabilities and Veterans, and provides transportation to medical appointments, education or employment sites, adult day care centers, and other locations. Most MAPS vehicles are able to accommodate wheelchairs. Your loved one may use MAPS if he or she is a Morris County resident and is age 60 or above, OR if he or she has a physical or mental disability that includes functional limitations. MAPS must be notified in advance if a caregiver will be traveling with the resident. For more information:

- 1-888-282-MAPS (6277)  
  [www.morrishumanservices.org/dvs/](www.morrishumanservices.org/dvs/)

**TransOptions**

As the Transportation Management Association (TMA) for northwest New Jersey, TransOptions assists commuters, businesses, and local municipalities in Morris, Sussex and Warren Counties, as well as towns in suburban Essex, Passaic, and Union Counties with multiple commute options. TransOptions is available to assist your loved one with transportation issues or questions regarding services in his or her area.

- 973-267-7600  
  [www.transoptions.org](www.transoptions.org)
American Red Cross of Northwest, NJ
Provides transportation for veterans to medical appointments and VA hospitals. For more information:

- 973-538-2160

Daughters of Israel, West Orange, NJ
Provides limited fee for service transportation through their Metro Transport Program for eligible seniors and people with disabilities. In Morris County, service is only available to Parsippany, East Hanover, Florham Park, Morristown, and Whippany. For information:

- 973-325-1359

Dial-A-Ride
Dial-A-Ride is municipally-sponsored local transportation for senior citizens and persons with disabilities. Many towns in Morris County offer Dial-A-Ride service. For a list of municipalities with phone numbers, visit:

- www.co.morris.nj.us/transportation/spectrans/spectrans-dialaride.asp

FISH (Friends in Service to Humanity)
Volunteers provide rides, primarily to and from medical appointments.

- For Mendham Borough and Township residents only: 973-543-4574

Morris on the Move (M.O.M.)
M.O.M. can provide transportation for up to 18 passengers and two wheelchairs. Priority is given to public assistance and other low income residents commuting to or from work or work related activities. M.O.M. operates a shuttle service from Dover to Mt. Olive. Service is limited. For more information:

- 973-829-8501

Morris County Organization for Hispanic Affairs
Transportation is available for individuals in need. For more information:

- 973-366-4770
13. Advocacy for Aging Loved Ones

Self-Advocacy

Self-advocacy is when an individual knows his or her rights and responsibilities, stands up for them, and makes choices about his or her life. As a caregiver of a loved one with issues of aging, you may be, in many instances, your loved one’s best advocate. However, it is also important to encourage your loved one to learn how to advocate on his or her behalf whenever possible. Self-advocacy is promoted when, as a caregiver, you ensure your loved one is made aware of and informed about available services, and is involved in any planning processes.

Keys to Successful Advocacy on Behalf of Your Loved One

Communicating effectively with professionals and learning how to navigate the system are important skills for the caregiver to learn and develop. These can be acquired through help from other caregivers or caregiver coalitions or other advocacy groups.

Be patient

Most government and private agencies are not able to offer enough services to help everyone needing assistance, so people usually have to apply for services. This is sometimes referred to as an eligibility-based system. Depending on the organization, services or other assistance could be distributed on a first-come, first-served basis, or to those who need the service the most or to those who meet the financial eligibility requirements. It is up to you to know how the organization you are trying to work with makes these decisions and plan accordingly. Sometimes, there may even be long waiting lists for services. You may not know how long it takes to get to the top of the waiting list and get what you need, but one certainty is that if you do not apply and get on the list, you will not get the needed services.

Stay on people’s good side

Find the line between advocacy and aggression.

A successful advocate lets the system work for them. You want to stay on top of things, but don’t turn into a pest and make it harder for the professionals to do their jobs. Smile when you are talking to people…even if you are on the phone, your smile will come through in your tone of voice. Professionals are people too, and words like “please” and “thank you” will go a long way toward developing a strong working relationship.

You just might be the expert in the room

Be prepared to assist professionals who may have limited experience with your loved one’s exact needs.

Your family doctor may be wonderful, but he or she may have little or no experience writing prescriptions for wheelchairs or accessibility devices. Share your expertise by discussing your loved one’s needs, giving as much detail as possible about what you are looking for. You may want to speak with agencies about equipment and service evaluations before approaching a doctor for authorization.
Keep accurate notes
Record keeping may seem like a hassle at first, but saves a great deal of time down the road. Whenever you have a conversation with any professional, it’s a good idea to write it down. Some caregivers keep a notebook just for this purpose. Include all contact names, phone numbers, dates of calls, and a quick summary of the discussion.

Know what you need; do your research
When advocating for equipment or services, make sure to collect all the details and product information ahead of time. If insurance is being used for payment, ask both the insurance company and the equipment provider if there are pre-set guidelines or other information that will be needed. This will save a lot of time later on in the process.

Understand your insurance benefits.
Do not be afraid to ask questions when you are unsure of something about your insurance. Review the terms of each program and policy. Know when referrals or pre-certifications are necessary. Pay careful attention to co-pays, service limits, and equipment ownership and replacement responsibilities. These issues are especially important for those whose functional abilities may change with time. Remember, you can always appeal an insurance company’s decision in the event of a denial, no matter what type of plan you are on.

Systems Advocacy
Systems Advocacy is a process by which organized groups or individuals come together to advocate for positive change to programs, services, and legislation. Advocacy for changes in policy or service delivery may be most effective when there is a united voice that speaks on behalf of the issue. There are numerous organizations that advocate regarding specific issues, policies, disabilities and diseases on local, state and national levels.

AARP (formerly known as American Association of Retired Persons)
AARP’s mission is to enhance the quality of life for all as we age. AARP works on issues that are important to American’s age 50 and over, including health and financial security.

- AARP - Washington, D.C.
  1-888-687-2277
  www.aarp.org

- AARP - New Jersey
  1-866-542-8165
  www.aarp.org/states/nj/

Caregivers Coalition of Morris County
A United Way of Morris County Initiative
The Coalition’s work on behalf of caregivers includes advocacy at the local, state, and national level. It is an advocate voice on your behalf. Your ideas and experiences could help direct the Coalition’s advocacy efforts. Please contact the Coalition if you are interested in joining its advocacy efforts.

- Caregivers Coalition of Morris County
  973-993-1160, x139
  www.LiveUnitedMorris.org
14.
Life Transitions for Caregivers of Aging Loved Ones

Your Changing Role

Throughout your caregiving journey, you may notice that your loved one requires different levels of care. Having to assume responsibilities that your loved one was used to doing independently can generate a range of emotions for you both, from frustration to sadness, even anger and grief. Accepting the deterioration and identifying the issues that are associated with the illness, disease or disability will help you cope with the role transition that you are experiencing, as well as the changing nature of your relationship with your family member or friend.

During this time, flexibility is the key. You will need to develop stress and time management skills that are necessary to cope with changes and increased demands that will occur over time.

When you start to take on more and more daily tasks related to caregiving, it will become increasingly important to take advantage of resources in the community and whatever services you and/or your loved one are eligible for.

If and when you are called upon to take on a new level of care, give yourself time to adjust. Do not expect your life to return to normal right away. The social structure you knew, the friends you had, and activities you did may have to change as you take on your caregiving role. Give yourself time to develop and establish new daily routines.

And, remember that each caregiving situation is unique – no two caregivers will experience the same circumstances or transitions. There is no single way of caring. With the right information, resources, and support you will be able to care in the appropriate and positive way that is best for your loved one…and for yourself.

The Reality of Loss

As the person you care for becomes increasingly dependent, losing more and more of their abilities, this loss is a death of sorts, and a natural reaction to loss is to grieve – for both the caregiver and the care recipient. For caregivers, whose losses are sustained over a long period of time, grieving itself can become a long-term process. Illnesses that keep changing can bring grieving and re-grieving. You may be caregiving through the various stages of an illness with your loved one, and you may experience a variety of emotions at different times: sadness, anger, depression, even despair.

Experts tell us that there are many stages of grief and they can recur, or even appear simultaneously. However the grieving process occurs, it is normal, and unavoidable.

There is a natural sense of loss when the need for our caregiving is over. We must often face the double sorrow of losing a loved one and losing our purpose or role in his or her life.
After losing our loved one, it is a natural experience that the aftermath can be a difficult time that leaves any caregiver feeling lost, lonely, and useless. We may not feel grounded without that important function of taking care of another in our lives. Caregiving responsibilities gave each day a direction, a purpose. We may have forgotten how to take care of ourselves or even what our interests are. If our self-confidence was based on the caregiving job we were doing, we may experience a shift in self-esteem. It may be hard to pick ourselves up and start over again. The future may look bleak or even empty.

You may have been a caregiver for what felt like a long time. While it may have been consuming and stressful, caregiving had a sense of reward and, in any case, it was what you did. That role is now lost. Remember, the loss of a meaningful role - such as caregiver - also is a cause of grief.

Also note that we never really go back to the old "normal." Each of us must find a new sense of routine in this new phase of life – a new "normal."

Begin by asking yourself what activities and interests sustained you before you took on a caregiving role. Have you developed any new interests? What of friends and family -- what possibilities exist there? Were you active in any faith-based communities or organizations? Would you like to return to activities with those groups? Most importantly -- what do you wish to do and what do you want your life to be?

There are no easy answers, so give yourself time to rediscover, and even reinvent yourself. This takes time and courage. Use resources -- caregiver support groups and counselors may be helpful as you explore new opportunities.

This stage of transition, while difficult, promises new things for you. Your local hospital, place of worship, hospice, or behavioral health center may have a grief support program that can help you meet the challenges of loss and life transitions.

Importantly, always remember that your caregiving has been a gift – one of the greatest gifts you could have ever given to the one you cared for; a gift to be proud of and to cherish.

The Caregivers Coalition of Morris County offers a free 8-week Bereavement Support Group for bereaved caregivers, addressing the loss of the caregiver role in addition to the grief associated with the loss of a loved one. For information, call the Coalition Coordinator at 973-993-1160, x139.

Based on material from CHATS - Community Home Assistance to Seniors, Ontario, and Aetna Intilihealth