



# ELDER LAW *Update*

NEWS AND IMPORTANT INFORMATION FOR SENIORS AND THEIR FAMILIES

## IN THIS ISSUE *Spring 2018*

- Medicare, Medi-Cal, And Planning For Long-Term Care .....Page 1
- Caregivers Must Remember To Care For Themselves .....Page 3
- A Personal Note From Jan.....Page 4



## MEDICARE, MEDI-CAL, AND PLANNING FOR LONG-TERM CARE

Many people are confused about the difference between Medicare and Medi-Cal as it pertains to the challenge of paying for expensive long-term care. This is not surprising. The two programs sound similar and both provide for medical care. Let's start with a brief definition of each program.

Medicare is an *entitlement program*. Everyone who reaches the age of 65 and is eligible to receive benefits from Social Security can also receive Medicare. Medi-Cal, on the other hand, is a public assistance program. It is designed to help people with limited income and assets pay for medical care. Recipients of Medi-Cal assistance must meet certain income and asset guidelines.

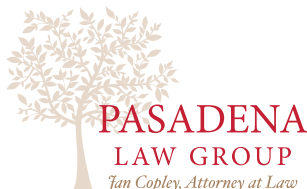
Another fundamental difference between the two programs is that Medicare is run entirely by the federal government, whereas Medi-Cal is a joint federal-state program. Every state has its own Medi-Cal system, which helps explain why eligibility rules differ from one state to the next and why a few states use different names for Medicaid, such as Medi-Cal in California and MassHealth in Massachusetts. Whatever a state's program is called, to receive money from the federal government it must adhere to federal guidelines. Typically, the federal government pays for approximately one half of a state's program, with the state itself paying for the rest.

Now let's look at how the two programs differ with regard to planning for long-term care.

**(CONT.)**



**Jan Copley**  
*Attorney at Law*



155 North Lake Avenue | Suite 800  
Pasadena, CA 91101 | P (626) 696-3145  
[www.PasadenaLawGroup.com](http://www.PasadenaLawGroup.com)



## MEDICARE, MEDICAID, AND PLANNING FOR LONG-TERM CARE (CONT.)

Medicare, by and large, does not cover long-term nursing home care. For example, Medicare Part A will only cover up to 100 days in a skilled nursing facility for a particular illness, and only after the patient has spent at least three days in a hospital. Worse, from day 21 to day 100, the individual in the skilled nursing facility must make a copayment of \$167.50 per day. Few people actually receive Medicare coverage for the full 100 days, in part because of the copay, and in part because restrictions and conditions for coverage are quite stringent.

Medi-Cal, on the other, does cover long-term nursing home care for people who meet its income and asset limits. One hundred days, one year, five years—Medi-Cal will pay for the care as long as the recipient is eligible. Given the high cost of nursing home care, the dearth of affordable alternatives, and the restrictions inherent in Medicare coverage, Medi-Cal is now the single largest payer of nursing home stays in the United States.

So, can you get assistance from Medi-Cal to pay for nursing home care? If your income and assets are less than your state's guidelines, you are already eligible. If your income and assets exceed state limits, you have to take the appropriate steps to become eligible. The sooner you take these steps, the better, and you have to be careful.

For example, you can't simply give your "stuff" away a few weeks before entering a nursing home and expect Medi-Cal to pay for your stay. When you apply for Medi-Cal, any gifts or transfers of assets made within five years of the date of application are subject to penalties. This is known as the look-back period. And what is the "penalty?" It is the amount of time during which the person transferring the assets will be ineligible for Medi-Cal. The penalty period is determined by dividing the amount transferred by what Medi-Cal determines to be the average private pay cost of a nursing home in your state.

The bottom line is this: While Medicare can help pay for a short-term stay in a nursing home, Medi-Cal can pay for long-term care. Through proper planning, you *can* obtain assistance from Medi-Cal to pay for nursing home care, and protect your hard-earned assets in the process. The sooner you start planning, the better your chances of getting the care you need while protecting most, if not all, of your assets.





## CAREGIVERS MUST REMEMBER TO CARE FOR THEMSELVES

According to a report issued by the National Alliance for Caregivers and AARP, approximately 40 million Americans provide unpaid care to another adult. What is more, providing adequate care to a spouse or partner requires, on average, over 44 hours per week. Sadly, caregivers often devote so much time and energy to caring for a loved one that they fail to take adequate care of themselves. This has become so common that there is a term for it, “caregiver burnout.”

Caregiver burnout has been defined as a state of physical, emotional and mental exhaustion that may be accompanied by a change in attitude—from positive and caring to negative and unconcerned. Many caregivers even feel guilty if they spend time on themselves rather than on caring for their elderly or ill loved one.

If you are serving as the caregiver in your family, you need to understand the difficulty of what you are undertaking and recognize the signs that you may be trying to do too much. Are you approaching burnout? Ask yourself the following questions:

- Are you exhausted even after a full night’s sleep?
- Do you seem to catch an unusually large number of colds?
- Do you feel like your whole life revolves around caregiving but you don’t get any satisfaction from it?
- Are you always tense or feel like you’ve lost the ability to simply relax?
- Are you increasingly impatient with the person in your care?
- Do you often feel helpless, sometimes even hopeless?

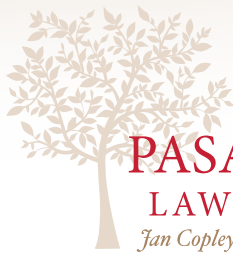
If your answer to some of these questions is yes, and you didn’t feel this way until you began serving as caregiver, you may indeed be approaching burnout. You need to begin the process of caring for yourself.

First, you must understand that what you are feeling is not unusual. Caregiver burnout is much more common than you might think. This should come as no surprise given the number of Americans serving as caregivers and the amount of time and energy required to provide adequate care.

Here are some steps you can take if you believe you might be suffering from caregiver burnout.

- Learn as much as you can about your loved one’s illness and how to care for it. The more you know, the more effective you’ll be and the better you’ll feel about your efforts.
- Recognize your limits. This involves taking a more realistic approach to how much time and effort you can give your loved one. Then, be sure to express those limits to doctors and other family members.
- Learn to accept how you feel about the responsibilities of being a caregiver. Anger, fear, resentment, guilt, helplessness, grief... all of these emotions and more are commonly experienced by caregivers.
- Talk to people about your feelings. Keeping your emotions bottled up doesn’t do you or the person you are caring for any good. Confiding in friends and family members can provide a sense of relief and help you overcome feelings of isolation.

This last step is extremely important. Remember—you are not alone. Support is available from people who understand what you are going through and can help you cope with the stress involved. You must do whatever it takes to avoid a sense of isolation. You’ll find support groups within the community online, in the phone book, through your physician, and from organizations associated with the health problem of the loved one under your care. Your local chapter of AARP, and agencies such as Family Caregiver Alliance, are good places to start.



**PASADENA  
LAW GROUP**

*Jan Copley, Attorney at Law*

155 North Lake Avenue | Suite 800  
Pasadena, CA 91101

## A PERSONAL NOTE FROM JAN

***Welcome to our second newsletter of 2018!  
I hope all my readers have had a good year up to now.***

Most of us, at some point in our lives, will be faced with the issue of providing and paying for long-term care for a loved one. Accordingly, I think our first topic, a discussion of Medicare, Medi-Cal (called “Medicaid” in most of the U.S.) and paying for long-term care is super important.

As you can see from the article, Medicare — universal, single-payer healthcare for nearly everyone in the U.S. who is 65 or older — does NOT cover most long-term care expenses. And, the care is expensive. The average cost of assisted living care in California in 2018 is \$4,050 a month, and the average cost of convalescent home care in California in 2018 is about \$8,500 a month.

Medi-Cal pays for convalescent home care for people of modest means. There are things you can do to qualify for Medi-Cal benefits if it looks as if you or someone you know will need custodial care. However, there is a lot of misinformation about this out there and the Medi-Cal application can be tricky.

Paying someone who understands the rules to do the appropriate planning and to prepare the application may seem expensive, but it can save you a lot of money in the long run.

Because of the financial burden of long-term care, many families choose to provide care for a loved one themselves. It can be hard work, both physically and emotionally! So, the caregiver gets tired and the quality of care he or she provides declines.

The answer is to forgive yourself for being human, to remember to take care of yourself, and to get help, even if it’s only for a short time. I believe sometimes it makes sense to pay for some short-term care so the caregiver doesn’t wind up being disabled as well.

I hope this information is useful to you. I wish all my readers a wonderful summer.