

connect

YOUR **FREE** GUIDE TO INFORMATION AND
RESOURCES FOR OLDER ADULTS AND CAREGIVERS



*"NO ONE IS USELESS IN THIS WORLD WHO LIGHTENS THE
BURDENS OF ANOTHER."* - CHARLES DICKENS



Michael Karson

Welcome to connect

Over the next few decades, the growth of the 65+ population will outpace every other age category in Michigan.

The Area Agency on Aging 1-B will continue to be there every step of the way.

Since 1974, we have been a front-line resource for all things related to at-home care for seniors and adults with disabilities and support for family caregivers. Our mission has always been to enable the people we serve in Livingston, Macomb, Monroe, Oakland, St. Clair and Washtenaw counties to live independently and safely.

We're proud of our track record: Annually, we connect about 40,000 callers to programs and services through our Information & Assistance Telephone Line. We assist approximately 3,000 seniors and adults with disabilities in finding affordable, appropriate transportation. We provide nearly 20,000 Medicare beneficiaries with free one-on-one counseling. We fund home-delivered meals for nearly 11,000 seniors. All told, AAA 1-B serves more 120,000 people each year with key services, utilizing federal funding through the Older Americans Act and state funding through the Michigan Aging and Adult Services Agency and Michigan Department of Health and Human Services.

You are holding a copy of **connect**, our first-ever guide to aging services in our six-county region and beyond. You'll find useful articles about caregiving from a distance, figuring out how to get around if you're no longer driving, making your home injury-proof, finding the right in-home aide and much more. You'll also find key resources unique to your county.

You can find connect on our website, too.

I hope that **connect** will be your go-to guide, whether you are a senior looking for services for yourself, a family caregiver in search of support, a health professional or anyone else planning for a healthy future!

Best,

Michael

PRESIDENT AND CEO



Inside

The paintings on the cover of **connect** and throughout this guide were created by participants of the Dorothy & Peter Brown Jewish Community Adult Day Program.



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connect is published by the Area Agency on Aging I-B. Questions and comments may be directed to Julie Edgar, communications and media relations specialist, at 248-262-9966 or jedgar@aaa1b.org

AAA 1-B'S PROGRAMS AND SERVICES



Since 1974, the Area Agency on Aging 1-B has been serving seniors, adults with disabilities and family caregivers in a six-county region of southeast Michigan, including Livingston, Macomb, Monroe, Oakland, St. Clair and Washtenaw counties. Our focus is on enabling people to live independently – and to support caregivers. We connect older adults and their families to services like Meals on Wheels, transportation, in-home care, adult day services and caregiver respite; we lobby our lawmakers on behalf of seniors; and we offer free health and wellness classes for seniors, workshops for caregivers, a Medicare and Medicaid Assistance Program and a toll-free Information & Assistance Telephone Line to connect you to the services and information you need.

Let us be your first stop when you need services for yourself or a loved one. You can reach us at 800-852-7795 Monday-Friday, from 8 a.m.-5 p.m., or visit us at aaa1b.org.

Information & Assistance Telephone Line (I&A)

I&A is the first call you should make when you're looking for services or information for yourself or a loved one. Our team of resource specialists will answer your questions and draw on an extensive database of senior-focused programs, benefits, organizations and services to connect you with the right resources in our six-county area and beyond. The call is free - 800-852-7795 - and specialists are available from 8 a.m. to 5 p.m. Monday through Friday.

Community Living Program

The Community Living Program (CLP) is a cornerstone of our offerings. It is a government-funded program for people 60 and older who need in-home assistance with one or more basic activities, like bathing or dressing.

We'll evaluate your needs, develop care strategies and arrange, purchase and monitor in-home services like housekeeping, respite and personal care. We may also help with adult day care, medication management, a personal emergency response system or transportation. **See page 15** for more information.

The MI Choice Medicaid Waiver Program

The MI Choice program enables Medicaid-eligible adults who need nursing home-level care to receive long-term care services in their home. Those include help with activities of daily living such as bathing, dressing, feeding, chore services, counseling, home modifications, transportation, nursing care and specialized medical equipment and supplies. Eligibility is based on medical and financial need. **See page 13** for more information.

Adult Day Services

The adult day service programs we support in our six counties have a dual purpose: They provide our loved ones with social, physical, emotional and creative stimulation and provide caregivers with peace of mind and time to work or otherwise take care of their own needs. The programs, typically open on weekdays, are generally for people with memory loss. Lunch is available for a nominal donation, and some of our programs offer transportation to and from the center, medication reminders, help with personal care and hygiene, and extended hours. **See page 41** for more information.

Meals on Wheels

We support daily meal delivery to homebound seniors in the six counties we serve, or approximately 11,000 people. We work with 12 local Meals on Wheels providers that coordinate the preparation and packing of meals. Deliveries are typically made by volunteers who may be the only friendly face a senior sees each day – and many friendships have been formed. Meals on Wheels is available to people 60 and over who are homebound. We welcome voluntary donations from recipients.

Transportation

myride2 helps older and disabled adults find transportation options. With an advance phone call to 855-697-4332 or by going to myride2.com, we'll help you get to where you need to go. Our program also offers mobility counseling for those who can no longer drive, and Travel Training so that you or a loved one can learn how to use public transportation safely and affordably. myride2 serves Macomb, Oakland, Washtenaw and Wayne counties. **See page 33** for more information.

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AAA 1-B programs are funded primarily through the federal Older Americans Act, the State of Michigan, county governments and grants and fundraising.



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Help for LGBT Older Adults

AAA 1-B staff has received training from SAGE Metro Detroit to expand our cultural competency and to enable us to provide LGBT-friendly resources to the lesbian, gay, bisexual and/or transgender community.

Health and Wellness

Our Health and Wellness classes offer a great way for seniors to get out of the house and meet other people while sharpening their balance skills, managing chronic pain and diabetes, and mastering the art of aging. We hold classes throughout our six counties year-round. To learn more, call 833-262-2200 or go to aaa1b.org.

Powerful Tools for Caregivers

Our caregivers who've been through the six-week Powerful Tools for Caregivers workshop say they picked up valuable knowledge. The workshop covers everything from self-care to communicating in challenging situations, to mastering caregiving decisions. We offer the class about eight times a year throughout the six counties we serve.

Medicare Medicaid Assistance Program (MMAP)

Our Medicare Medicaid Assistance Program (MMAP) provides unbiased help with Medicare and Medicaid – at no charge. Our team of certified counselors answers questions, troubleshoots problems and helps you understand your Medicare plan choices. Government funding allows us to offer this valuable, impartial assistance for free. MMAP counselors can help you over the phone or in person by calling 800-833-7174. **See page 16** for more information.

Other programs we support include:

- **Grandparents raising grandchildren** support groups, activities for kinship caregivers and resources such as clothing and food assistance. **See page 36** for more information.
- **Chore services provides assistance** with lawncutting, snow removal and other small chores such as gutter cleaning and minor interior maintenance that will make the home safer.
- **Home injury control** can help make your environment safer by installing grab bars, shower chairs, non-slip mats and other assistive devices to reduce the risk of falling.
- **Elder abuse awareness and education.** ■



***"If you want
others to be
happy, practice
compassion.
If you want to be
happy, practice
compassion."***

– DALAI LAMA

Hiring a Caregiver:

SHOULD YOU GO IT ALONE OR HIRE THROUGH AN AGENCY?

If you or a loved one needs some help in the home, you can hire an aide yourself or go through an agency. Here's a look at the pros and cons of each approach:

Advantages of Direct Hiring

If you hire a caregiver directly, it may be less expensive, but you'll have to do a lot of the legwork yourself. Here are recommendations from the U.S. Administration on Aging:

Ask for the prospective aide's:

- Full name, address and phone number
- Date of birth
- Social Security number
- Driver's license and proof of insurance
- Educational background
- Work history
- References (including dates of service and contact information for employers; make sure you contact them.)
- Certifications (CPR)
- Proof of personal insurance/bonding and health status (vaccines, TB test)



- Documentation related to additional training (CPR, dementia care, etc.)

You can ask the applicant to go through a background check, which requires fingerprinting. You might also want the person to submit to a drug screening. While you may be uncomfortable asking, keep in mind that most home health caregivers are required to go through the process if they are connected to an agency.

You should also make sure the aide understands the tasks you need her/him to perform; your loved one's medical, mobility and behavioral needs; signs of an emergency; dentures,

eyeglasses or other needs; dietary requirements and likes and dislikes.

In addition to pay and benefits, you should discuss expectations for:

- Reimbursement for things the caregiver may buy for the job
- Providing transportation for the care recipient
- Vacation and holiday time off
- Lateness and absences
- Notice of lateness/absence/termination of job
- Work environment, such as whether food is available for the aide

- Clothing – do you require that they wear a uniform?
- How taxes will be handled (You can use a payroll service to manage tax withholdings from the employee’s salary.)

If you decide to go forward with an employment arrangement, provide information in writing and talk to the aide about:

- How you can be contacted and other emergency contacts
- Security precautions and keys to home and car
- Medical supplies/medicine (when they are taken, dosage, reordering)
- Location of household appliances, washing and cleaning supplies/flashlights/lightbulbs/fuse box
- Other details specific to your loved one’s situation

Advantages of Hiring Through an Agency

You may pay more by going through an agency, but it will save you time and often money in the long run.

Keep in mind that Michigan does not require home health care agencies to be licensed (unless they are Medicare-certified).

Home care agencies:

- Recruit, train and pay staff
- Carry liability insurance that covers injury, theft and assault
- Perform background checks on caregivers and possibly screen for drug use
- May require certification in CPR and a valid driver’s license and active auto insurance
- Will send out a back-up aide if the caregiver is ill or does not show up
- May provide caregiver training and more oversight of the caregiver/care recipient arrangement

Hiring an independent caregiver may be less expensive, but “nothing is foolproof,” says Shawna Graca, owner and president of Hearts and Hands Home Health Care LLC in Milford. If you haven’t fully vetted the caregiver, you may not have peace of mind your loved one is in truly good hands.

Whichever route you choose when hiring a caregiver, look for someone who seems to care about others.

“Compassion drives this industry,” says Graca. “I want people who are compassionate and personable and would treat somebody like they’d like a family member to be treated — or themselves to be treated.” ■

Caregiver Shortage May Become a Crisis

- While 1.4 million new jobs in direct care are expected by 2026—34,060 in Michigan—there will be fewer people to fill them.
- The shortage of paid caregivers will reach crisis proportions in the coming decades, experts say. Low pay, marginal benefits, little training, little room for advancement and a good economy that offers higher-paying jobs with less strain are all factors affecting the shortage.
- By 2040, there will be a national shortage of at least 350,000 paid caregivers – or far more, according to MIT economist Paul Osterman, author of “Who Will Care for Us?”

QUESTIONS TO ASK WHEN HIRING A HOME HEALTH CARE AGENCY

First, assess your needs.

- What will you need the caregiver to do every day?
- Will her/his duties include meal preparation or light housekeeping?
- Do you or your loved one need personal care such as grooming, dressing, bathing or toileting assistance?
- Is there any equipment that the caregiver will need to use?
- Will the caregiver need specialized training or certifications?

Gather your thoughts and jot some notes. Make a “needs list” and use your notes to create a short job description.

Agencies differ in their services, policies and procedures and their approach to care. So it's important to ask questions to make sure they will be a good fit for your loved one:

- How long has the agency been in business/providing care? Some home care agencies are part of a national franchise. Make sure you understand how long this particular office has been in business, and not just when the national franchise was established.

FAMILY CAREGIVING

The number of family members who become caregivers is also declining. Factors include a lower fertility rate and an increased geographic distance between children and their elderly parents.

AAA 1-B released a report late last year which looked at family caregiver-to-care recipient numbers for the years 2015 to 2040. For example, in Oakland County in 2015, there were 7.3 caregivers for every care recipient. That number is expected to fall to 2.3 caregivers per recipient by 2040. Here's what we found in each of the six counties we serve:

	2015	2020	2025	2040
Oakland	7.3	6.7	5.2	2.3
Macomb	6.3	5.9	4.7	2.3
Washtenaw	8.2	6.9	5.0	2.3
St. Clair	7.3	5.6	3.9	2.4
Monroe	7.6	6.5	4.9	2.4
Livingston	9.7	7.7	5.0	2.1

In Michigan as a whole, there were 12.9 family caregivers to every care recipient between 2015 and 2020; by 2025, the number will drop to about 10.5, and by 2040, to 5.5 caregivers for every care recipient.

- Does the agency have references or satisfaction reports from authorizing agencies and/or clients?
- Does the agency have experience caring for people with your or your loved one's condition?
- Does its staff have the training/experience needed?

Staff can have varying levels of training and licensing. **See next page** for more information.

- Does the staff receive ongoing training?
- Does the agency provide a written plan of care for clients, and does it review the plan regularly?

- Does the agency require a minimum number of hours per visit? Home care agencies usually bill by the hour, but many home care agencies have a minimum block of time for which they will come out.
- What is the cost for care, and how often does the agency bill for services?
- What forms of payment and insurance does it accept?
- What happens if the regular worker is sick or cannot make it? Does the agency have other staff it can send out?
- How will the agency handle problems with a worker? Will you have the option of requesting someone else?
- Is the caregiver who will be in your home bonded and insured?
- How often does the agency perform background checks and drug testing on employees? For some agencies, it's only at hire.
- Does the agency have different types of aides on staff, including those with medical training?
- How often will the agency communicate with you? How will you communicate with the agency after hours, if need be? Will a staff member be able to address your after-hours questions? ■



DIFFERENT TYPES OF HOME HEALTH AIDES

Home care agencies provide a wide variety of staff that vary according to their training, licensing (if any), and the kind of care they can provide. Rates typically follow the level of training an aide has.

Below are descriptions of aides who provide skilled and unskilled care in the home:

Home Health Aides/ Personal Care Workers

This type of aide is unlicensed, not formally trained, and performs non-medical care such as:

- Housekeeping
- Meal preparation
- Medication reminders
- Companionship
- Transportation
- Nutrition support

Certified Home Health Aide

This type of aide has received some sort of formal training (20 to 90 hours) required for certification. There are no licensing requirements. Certified home health aides provide the same non-medical care as a home health aide.

This type of aide may help with:

- Bathing
- Toileting
- Transfers
- Walking and exercise
- Assistance with medication

Certified Nursing Assistant (CNA)

Certified nursing assistants work under the supervision of a registered nurse, and they require licensing. That entails a 75-hour state-approved training program and a written and

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clinical test. CNAs are required to renew their certification every two years and are expected to complete 12 hours of continuing education each year. Duties typically include the same duties as a home health aide or a patient care technician:

- Bathing
- Toileting
- Transfers
- Walking and exercise
- Checking vital signs
- Assistance with medication

Licensed Practical Nurse (LPN)

LPNs are authorized to perform more medical procedures and must be licensed. LPNs usually complete a year of full-time work at a community college, and must pass a comprehensive nursing exam, submit a fingerprint and pass a criminal background check in order to be licensed. LPNs must renew their license every two years, during which time they must complete 25 hours of board-approved continuing education.

Under the supervision of an RN, LPNs can:

- Draw blood
- Catheterize
- Provide tube-feedings
- Dispense medications, including those delivered intravenously
- Change wound dressings

Registered Nurse (RN)

A registered nurse has the strongest training and licensing requirement of all the nursing classifications. RNs must have graduated from a board-approved school of nursing, and most RNs have at least a bachelor's degree. In order to be licensed, RNs must also take and pass a comprehensive nursing exam, submit to a fingerprint check and pass a criminal background check. Like LPNs, RNs must renew their license every two years and must complete 25 hours of board-approved continuing education during that two-year period.

RNs can complete many medical procedures ordered by a physician, including:

- Wound care
- IV care and medication management/administration
- Feeding tube/catheter/ventilator/ostomy care

Physical Therapist (PT)

A physical therapist specializes in restoring mobility and function and reducing pain through a series of stretches or exercises. A treating physician must provide a prescription for a physical therapist.

The PT works with patients in their homes, in the hospital and in a rehabilitation setting.

PTs must be licensed in Michigan. Most PTs have a

bachelor's degree, while some may have master's or doctoral degrees. After completion of training, PTs must also pass a comprehensive national test in order to be licensed. They must also submit a fingerprint and undergo a criminal background check.

Physical Therapy Assistant

A physical therapy assistant works under the direct supervision of a physical therapist to deliver physical therapy services. Physical therapy assistants usually have obtained an associate's degree. Michigan requires testing, fingerprinting and a background check as part of the licensing process.

Occupational Therapist (OT)

Occupational therapists work with patients to help them regain their skills of daily living, including eating, cooking and dressing. Like physical therapists, occupational therapists are highly trained and must be licensed. Most have bachelor's degrees, while some may have master's or doctoral degrees. OTs must pass a comprehensive exam, submit to fingerprinting and undergo a criminal background check. ■

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If you think you or your loved one may qualify for the program, call our Information and Assistance Line (**800-852-7795**) to get started. Expect to spend about 20-30 minutes on the phone, and have information ready on income, assets, type of assistance needed and any medical conditions. Participation is limited, which means there may be a waiting list for benefits.

PACE (Program of All-Inclusive Care for the Elderly)

This program is similar to MI Choice, except that it is funded through both **Medicaid** and **Medicare** and is designed for people age 55 years and older who are medically eligible for nursing home-level care but are able to live independently.

The financial eligibility requirements for PACE are the same as for the MI Choice program (\$2,313/month gross in 2019, with assets of \$2,000 or less). Spousal impoverishment applies to this program, as well.

If you are not Medicaid-eligible, you can pay for part of the program Medicaid would have paid, and Medicare pays for the rest.

Other requirements include:

- You must live within a PACE-approved geographic area (designated by zip code).
- You must be able to live



safely in the community (not in a nursing facility) at the time of enrollment.

Participants' social, medical and physical needs are coordinated by a team. PACE focuses on preventive care in a person's home. People who join a PACE program must receive their primary medical care through PACE, and will need to see a PACE doctor.

Michigan has 16 PACE centers. The program covers many Michigan communities, including parts of Livingston, Macomb, Monroe Oakland, Washtenaw and Wayne counties. A person with MI Choice cannot also be enrolled in PACE.

To find a PACE program near you, see the county resource listings on pages 62-79.

MICHIGAN HOME HELP PROGRAM

This is a program which helps people who need hands-on assistance with activities of daily living (ADL) such as bathing, transferring and meal preparation. The state's Department of Health and Human Services will do an

assessment to determine need and must approve providers who want to participate in the program.

To qualify, a person must be Medicaid-eligible and require physical assistance with at least one ADL.

For information, see your county pages (**64-79**) to find your local DHHS office.

NURSING HOME CARE

If you are in a nursing care facility, Medicare, the health insurance program for people ages 65 and older, and other insurance providers may not cover all the costs of your care. Medicaid will cover the cost of care if you meet financial and medical eligibility requirements.

To apply for Medicaid, you need to contact the Michigan Department of Health and Human Services office in your area and ask for a Medicaid Application Patient of Nursing Home. You can pick it up at your local MDHHS office, call the office to request that it be sent by mail, or download it online at: newmbridges.michigan.gov. **See your county pages (64-79)** to find your local DHHS office. We can also send you an application.

The nursing facility must be certified by Medicaid to provide the medical care you need. Financial and medical eligibility are determined via the Michigan

Medicaid Nursing Facility Level of Care Determination requirements.

Keep in mind there is a patient pay amount that is based on assets and income, other insurance you may have and other factors. The portion of the bill you aren't expected to pay is picked up by Medicaid.

To determine if you are eligible for Medicaid, you will be asked about your assets and income, medical expenses, marital status, other health insurance, your spouse's assets and income and income of dependents in your home.

To prevent people from transferring their assets to other family members in order to meet Medicaid financial eligibility requirements, Medicaid looks at your financial statements going back up to five years.

Medicaid will cover nursing home care as long as you meet eligibility requirements.

NON-MEDICAID LONG-TERM CARE OPTIONS

Community Living Program (CLP)

AAA 1-B's Community Living Program offers in-home assistance to residents ages 60 years and older in our six counties. The program emphasizes self-directed care, providing consultation and resources designed to help

participants live independently and meet personal goals.

While there are no strict financial eligibility requirements, CLP is meant for people with the highest financial need, which is determined through screening. Services could include:

- Homemaking
- Personal care assistance
- Adult day services
- Respite care
- Emergency medical response system
- Meals on Wheels
- Assistive technology
- Safeguards for people with memory loss

Veterans

There are a few good options for veterans needing long-term care:

Wartime veterans and surviving spouses who are eligible for a VA pension and require the assistance of another person, or are disabled and housebound, may be eligible for additional monthly payments that are added to their pension.

They include:

Aid and Attendance Allowance

Veterans who receive a VA pension may qualify for additional monthly payments called an Aid and Attendance Allowance if they:

- Require physical help with everyday needs like bathing, dressing and toileting, or are bedridden
- Live in a nursing home and are physically or mentally incapacitated
- Have poor eyesight

Veterans who are permanently disabled and live in their own home may be entitled to monthly increases in their pension, called a **Housebound Allowance**. The money may be used to pay for services in the home.

Typically, the Aid and Attendance benefit is not counted when applying for Medicaid. However, if a single person who receives Aid and Attendance enters a nursing home, the VA may reduce the monthly benefit.

Veterans who receive a pension may not be eligible for Medicaid.

Veterans Directed Home- and Community-Based Services

Provides a budget for certain veterans to buy services in their homes or an independent living facility. Veterans who qualify must be eligible for nursing home care. In some cases, they can pay family members to care for them.

For more information on eligibility criteria and coverage, contact your local VA office. ■



Medicare and Long-Term Care:

WHAT TO EXPECT

Medicare is the health care insurance program for Americans who are 65 and older. It's not entirely free – most participants pay premiums and copays – but it covers hospitalization, doctor visits, medical equipment and supplies, prescription drugs and more.

However, many people assume Medicare will also cover long-term care, like an in-home aide or unskilled care in a nursing home.

It won't.

Because of the complexity of the program, you may not know exactly what Medicare will or won't cover.

We can help.

Our Medicare Medicaid Assistance Program (MMAP)

provides unbiased help with Medicare and Medicaid at no charge. Our team of counselors answers questions, troubleshoots problems and helps people understand their Medicare plan choices. Government funding allows us to offer this valuable, impartial assistance for free.

“Medicare can be very complicated. We encourage everyone who is about to go on Medicare to give us a call and have an unbiased counselor explain the program and the different options. This way, you can plan ahead and know what your monthly costs will be,” says Shari Smith, manager of AAA 1-B’s Medicare Medicaid Assistance Program (MMAP).

Following is a breakdown of the program – what it will and won’t provide in the short- and long-term:

Medicare covers health care for people 65 and older and people who have been on disability for at least 24 months.

Part A covers hospital, hospice care and some nursing home care. There is no monthly premium for people who’ve worked at least 10 years and paid Medicare taxes. You’re automatically enrolled in Part A when you turn 65.

Part B covers doctor visits, medical equipment, lab tests, ambulance services, mental health services, preventive care and more, and it comes with a small monthly premium (around \$135). If you don’t have health coverage through an employer, you must enroll during the period that spans three months before and after your 65th birthday or pay a late enrollment penalty. If you meet financial eligibility requirements, you can get help paying your premium with the Medicare

Savings Program (**see page 19** for more information).

Part D covers prescription drugs. It also requires that you pay a premium – which varies according to the plan you choose, unless you qualify for **Extra Help** (**see page 19**). If you don’t sign up when you turn 65, you may pay a permanent late enrollment penalty.

You can also opt for a Part C (Medicare Advantage) Plan which combines Parts A and B coverage into a private insurance plan that is structured as an HMO or PPO. These plans, which vary in cost and scope, provide all hospital and outpatient care (Parts A and B). Some plans will include prescription drug coverage (Part D). Medicare Advantage plans may require you to get referrals before you see specialists or choose doctors from a specific network, but they often offer additional coverage like dental, vision and hearing, and most include prescription drug coverage. As of 2019, some Medicare Advantage plans began to cover the cost of home modifications to accommodate walkers and wheelchairs and home-delivered meals nutritionally tailored to customers with diabetes or chronic heart failure.

Medigap plans, which are sold by insurance companies and require a monthly premium, are designed to fill in Parts A and Part B coverage gaps, including hospital stays.

Medicare won’t cover:

- Most dental care*
- Eye exams related to prescribing glasses*
- Dentures

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- Cosmetic surgery
- Acupuncture
- Hearing aids and exams for fitting them
- Routine foot care

**Some Medicare Advantage plans may offer this coverage.*

LONG-TERM CARE COVERAGE

Here's what you can expect from Medicare when it comes to long-term care:

Medicare and Nursing Home Care

- Medicare will NOT cover long-term nursing home care. Medicare will only cover a nursing home stay following a hospital admission when a doctor has ordered skilled nursing and therapy services. The needed care must be related to the condition for which you were treated in the hospital.
- Medicare Parts A and B will cover the cost of a nursing home stay for up to 100 days following hospital admission of three or more days and with a doctor's order. The following services will be covered:
 - Semi-private room (a room you share with other patients)
 - Meals

- Skilled nursing care
- Physical and occupational therapy (if they're needed to meet your health goal)
- Speech-language pathology services (if they're needed to meet your health goal)
- Medical social services
- Medications
- Medical supplies and equipment used in the facility
- Ambulance transportation (when other transportation endangers health) to the nearest supplier of needed services that aren't available at the skilled nursing facility
- Dietary counseling
- Swing bed services

After day 20 in a skilled nursing facility, you will have to pay \$170.50 per day (2019 rate), unless you have a Medigap policy that provides coverage for the copay.

MEDICARE AND HOSPICE CARE

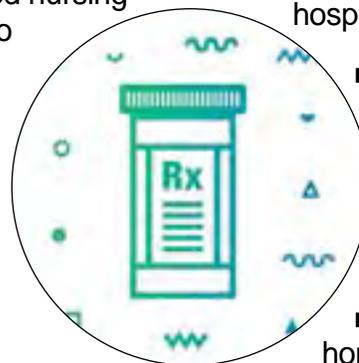
The goal of hospice care is to maintain or improve the quality of life for someone who is not expected to live beyond six months. Depending on the nature of the illness or disease, hospice care involves a team that may include a doctor, nurse,

social worker, nutritionist, and various therapists to address end-of-life issues — physical, emotional and spiritual.

Medicare Part A will cover most of the costs of hospice care in the home or in a facility if the person's hospice or regular doctor certifies that the person has a terminal illness with a life expectancy of six months or less. The person must sign a statement that he or she is choosing hospice over Medicare-covered treatments for the illness. In that case, Medicare won't cover any treatment, including prescription drugs, intended to cure the illness or related conditions.

Medicare will cover:

- Doctor, nurse and social work services set up by the hospice care team
- Prescription drugs for symptom and pain control (there may be a \$5 charge for medications)
- Hospice aide and homemaker services
- Medical supplies and equipment (bandages and catheters, wheelchairs and walkers, e.g.)
- Physical, occupational and speech therapy
- Dietary counseling





- Grief and loss counseling
- Short-term inpatient care for pain and symptom management
- Short-term respite care in a Medicare-approved facility (nursing home, hospital)
- Other Medicare-covered services needed to manage your pain and other symptoms related to your terminal illness and related conditions, as recommended by your hospice team
- If the person lives beyond six months, Medicare will continue to cover hospice care, as long as the hospice medical director or hospice doctor recertifies (at a face-to-face meeting) that the person is terminally ill. The patient can get hospice care for two 90-day benefit periods, followed by an unlimited number of 60-day benefit periods.

A person has the right to change his/her hospice provider once during each benefit period.

Contact your hospice team before you get any of these services or you might have to pay the entire hospice care cost.

AFFORDING MEDICARE

Extra Help

This is a Medicare program that

helps people with limited financial resources pay Part D prescription drug premiums, co-insurance and deductibles. You automatically qualify for Extra Help if you:

- Have full Medicaid coverage
- Are enrolled in a Medicare Savings Program
- Get Supplemental Security Income benefits

If you receive a purple notice, it means you automatically qualify for Extra Help. A yellow or green notice means you have automatically been enrolled in a specific prescription drug plan, which you can change during a Special Enrollment Period. You may qualify for Extra Help if you have a higher income or have dependents in the home.

Medicare Savings Programs

If you meet income and asset eligibility requirements, you can apply for help from the State of Michigan to help pay your Medicare premiums, deductibles, co-insurance and co-payments for Medicare Parts A and B.

There are four Medicare Savings programs. If you qualify for the any of the first three listed, you automatically qualify for Extra

Help. Keep in mind that you can be getting an income from work and still qualify:

- **Qualified Medicare Beneficiary (QMB):** QMB helps offset premiums, deductibles, coinsurance and copayments for Parts A and B.
- **Specified Low-Income Medicare Beneficiary (SLMB) Program:** SLMB helps cover Part B premiums.
- **Qualifying Individual (QI) Program:** This is a program which requires you to apply every year, and is on a first come-first served basis. QI helps cover Part B premiums. To qualify, you can't be eligible for Medicaid.
- **Qualified Disabled and Working Individuals (QDWI) Program:** QDWI helps pay the Part A premium if you are a working, disabled person under age 65 and lost Social Security Disability benefits (which entitled you to premium-free Part A Medicare) when you returned to work.

The Area Agency on Aging 1-B's Medicare Medicaid Assistance Program (MMAP) can help you understand your options and help you enroll in a plan that works for you, either over the phone or in person – free of charge. Call us at 800-803-7174. ■

KAREN JONES was diagnosed with advanced-stage lung cancer in her 40s. She elected to undergo chemotherapy, and did so for a few years, watching her two young sons grow up. When she had reached the end of treatment options and became too fatigued to get out of bed, Karen and her husband explored the idea of hospice care in their home. The program they chose provided a team that included a hospice doctor, the family's pastor, a social worker, nurse aides and other helpers who made sure Karen was comfortable. The doctor treated her for swelling and other symptoms which had kept her bedridden, enabling her to get up and around. A former marathon runner, she eagerly participated in races, but as a walker. Using an oxygen tank, Karen was able to drive short distances, attend her son's football games and go to the market. She was able to live out the remainder of her days at home, surrounded by her loving family.

End-of-Life Approaches: PALLIATIVE CARE VERSUS HOSPICE CARE



Palliative and hospice care are rooted in the belief that a person has the right to die pain-free and with dignity. Both offer holistic approaches to end-of-life care, bringing in a care team to manage the medical, emotional and spiritual needs of the individual and his/her family.

However, there are big differences between palliative and hospice care.

What is Hospice Care?

- Hospice care focuses on comfort and the relief of symptoms – not treatment. It is for people with a terminal prognosis, whether from an illness or injury, whom doctors believe have less than six months to live. The person may have cancer, heart disease, dementia, kidney failure or COPD, among other diagnoses. The goal is to maintain or improve the quality of life for someone whose condition is unlikely to be cured.
- Hospice care may be provided in a person's home, a hospital, nursing home or

freestanding hospice center. The hospice team will coach family and friends on caring for the dying person in his/her home and provide respite care when caregivers need a break.

- Hospice care is available for patients of any age.
- Hospice care is mostly covered by Medicare Part A if the person's regular doctor certifies that the person has a terminal illness with a life expectancy of six months or less. The person must sign a statement that he or she is choosing hospice over Medicare-covered treatments for the illness. In that case, Medicare won't cover any treatment, including prescription drugs, intended to cure the illness or related conditions. If the person lives beyond six months, Medicare will continue to cover hospice care, as long as the hospice medical director or hospice doctor recertifies (at a face-to-face meeting) that the person is terminally ill.

Medicaid recipients (children and adults) do not have to waive treatment for their illness in order to get coverage for hospice services, with the exception of some medicines and treatments. However, they must file a statement electing a particular hospice. They can revoke the statement at any time. A hospice plan of care must be established

before services are provided.

If the person's symptoms become too difficult to manage at home, the hospice team will make short-term inpatient care available.

The hospice will provide grief counseling for surviving family and friends.

You may check agencylocator.nahc.org to find a hospice program near you.

What is Palliative Care?

- Palliative care is a holistic approach to illness. Like hospice care, it focuses on pain and symptom relief, a person's spiritual needs and the needs of caregivers. But palliative care is available while a person is being treated for an illness, such as cancer, heart failure or Parkinson's disease. A person in palliative care can transfer to hospice care.
- Palliative care is available for anybody, including those with a terminal prognosis.
- Unlike hospice patients, people who are getting palliative care usually are receiving curative treatment for their illness.
- Palliative care is not time-limited.
- Palliative care can be provided in any care setting (including home), typically by

ADRIANA developed anemia while she was being treated for breast cancer. A palliative care specialist suggested she get a blood transfusion to manage the anemia and relieve some of the fatigue she was experiencing. Controlling her symptoms helped Adriana to continue her curative chemotherapy treatment. Treating her anemia was part of her palliative care.

a doctor, nurse practitioner or nurse, in consultation with a social worker and chaplaincy services.

- Services provided include in-person and telephone visits, help navigating treatment options, care planning and referrals.
- Palliative care is covered by Medicare Part B and Medicaid, with some treatment and medications exceptions. Most private insurers cover this service, but check with your insurance carrier if you are unsure. Veterans may be eligible for palliative care benefits through Veterans Affairs. ■

CHOOSING A HOSPICE

Here are questions you might ask of a hospice organization:

- Is the hospice Medicare-certified?
- How long has the hospice been operating in the community?
- Has the hospice been surveyed by the state or a federal oversight agency in the last five years?
- Is the hospice accredited by a national organization? Is it a member of the National Hospice and Palliative Care Organization?

- Does the hospice conduct a family evaluation survey after a loved one has died so you can see other consumers' ratings?
- Does the hospice own or operate a home-like facility in case you can't take care of the loved one at home?
- Is the clinical staff of the hospice credentialed in hospice and palliative care?
- How many patients are assigned to each hospice staff at any given time?
- Does the hospice have a trained volunteer force, and

what services do volunteers provide?

- Are hospice staff available to come to the home if there is a crisis any time?
- What is the intake process, and is it available nights or weekends?
- Is the hospice part of a healthcare, non-profit, for-profit faith-based organization? ■

**COURTESY OF HOSPICE FOUNDATION OF AMERICA.*

***COURTESY OF NATIONAL HOSPICE AND PALLIATIVE CARE ORGANIZATION.*

Health and Wellness Classes to Keep You Healthy, Happy and In-the-Know

Our classes help family caregivers and people 60 and older stay well and live their best life. Classes are FREE (donations appreciated) and are held throughout southeast Michigan. Call us and we'll connect you to a class in your neighborhood!

Chronic Pain Management: Learn coping techniques (6 weeks)

Matter of Balance: Prevent falls and be more active (8 weeks)

Diabetes PATH: Find tools that work for you (6 weeks)

Powerful Tools for Caregivers: Take care of yourself while caring for someone else (6 weeks)

Ageing Mastery: Focus on physical, emotional and financial health (10 weeks)

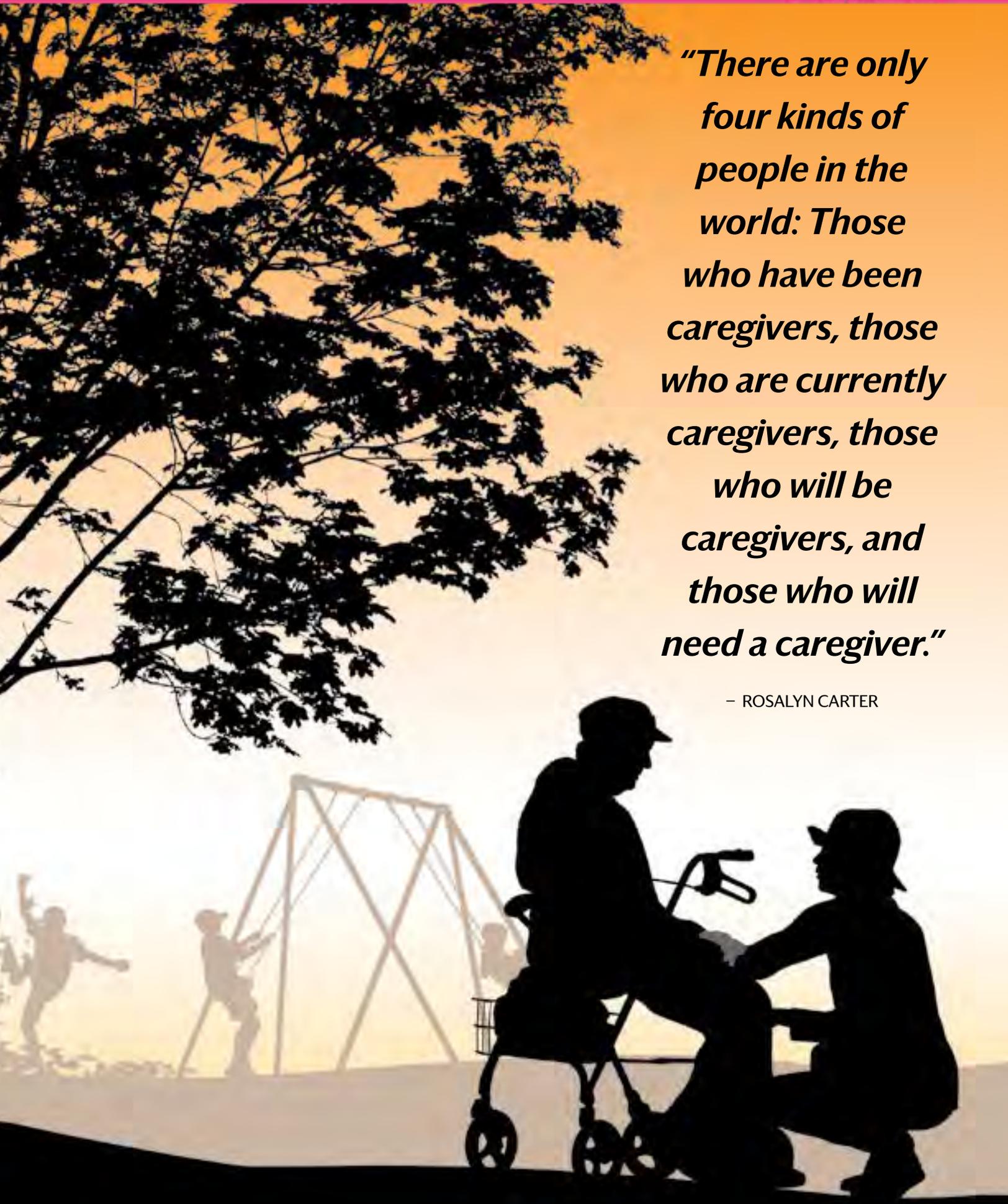


Serving Livingston, Macomb, Monroe, Oakland, St. Clair and Washtenaw counties.

(833) 262-2200 (toll-free)
aaa1b.org

“There are only four kinds of people in the world: Those who have been caregivers, those who are currently caregivers, those who will be caregivers, and those who will need a caregiver.”

– ROSALYN CARTER





SIGNS YOUR LOVED ONE NEEDS HELP – AND WHEN YOU MIGHT STEP IN

Aging brings new physical, psychological, emotional and social challenges for your loved one – and for you, the caregiver.

Some changes are a normal part of aging, and, with a few modifications, your loved one can live safely and independently. Other changes may signal a health problem that needs further investigation.

Whatever the case, your approach is important. You want to frame your concern as a suggestion rather than a demand – and let your loved one arrive at a decision himself, if possible.

If you are concerned about a parent's well-being, don't be afraid to tell her/him. In your discussion express how you are feeling using "I." For example, "I am concerned about your diet, you've lost weight." Or "I

noticed Dad's clothes are not clean today. Are you having trouble doing the laundry? What can I do to help?" Or "I noticed you call me often and forget that we talked. Are you concerned about your memory? I am."

Here are signs your loved one needs help – and suggestions for how to offer help.

■ **UNPAID BILLS.** This could be a sign that your loved one has become disorganized due to other life changes, or it may be a sign of dementia. Check to see if bills are being paid, and whether there are checks written out to people or organizations you don't recognize.

You might also want to check credit card statements to see if your loved one is charging purchases from a TV-based shopping network – a particular lure for older adults. Your dad might also be

entering contests which have fees attached.

Setting up automatic payments so household bills are automatically paid through your loved one's bank account may be a good idea.

"You'd have more buy-in" from your loved one for autopay than for setting up a joint account that would give you the power to write checks, says Kristy Mattingly, co-manager of AAA 1-B's Community Living Programs.

"It affords him independence, and at least those bills that are fairly regular are getting paid," she says.

If a loved one is writing checks to strange organizations or people, get him caller ID added to his phone service and suggest to him to answer the phone only if he recognizes the caller. You can also easily register your loved one's phone number on the national Do Not Call Registry (donotcall.gov).

If you are concerned about money management, consider getting power of attorney which will enable you to make legal decisions when your loved one can't. In Michigan, a person can designate a Patient Advocate to make health care decisions as well. **See page 45** for a fuller explanation.

■ **MESSY HOUSE AND YARD.** The loss of mobility and vision can lead to a neglect of the house – and create obstacles to getting around. Remove throw rugs and move furniture that might be in the way. Make sure your loved one is wearing safe footwear.

"If mom has never been messy and suddenly she is, maybe it's time to

investigate further," says Mattingly. "Go to the doctor to find out what's causing the change. Maybe your mom just can't [clean the house] anymore."

If you think she needs a housekeeper, give her the option of finding someone on her own or have you look for her.

"The fear is we're taking over. We're not trying to take over," Mattingly says. "Give them options and choices to meet their needs, or have them come up with a plan."

■ **SLOPPY APPEARANCE.** If a loved one is neglecting his appearance, it could be a sign he isn't keeping up with laundry. Offer to wash his clothes or hire an "assistant." Avoid using the word "aide." You could also send the clothes out to be laundered.

■ **BODY ODOR.** This may be a sign your loved one isn't bathing or showering. She may fear falling in the tub or shower.

Offer to install grab bars, a shower stool and grips for the bottom surfaces of the shower or tub. If there is a smell of urine, she may be having urinary tract infections or incontinence. Make an appointment with your loved one's doctor which you can attend.

■ **WEIGHT LOSS.** This could be a sign of malnutrition or illness – or a lack of food in the house. Make sure there is nutritious food within reach. Make an appointment with your loved one's doctor when you can go along and listen.

If your loved one is having trouble getting to the grocery store, ask if he would be willing to have meals delivered every day. Meals on Wheels is available to people age 60 and older who are homebound.

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Continued from SIGNS page 25

■ **UNSTEADINESS/UNEXPLAINED BRUISING ON ARMS AND LEGS.**

Could be a sign of falling and an indication your loved one may need a cane or walker.

■ **MISSED MEDICATION.** A simple medication box may do the trick if your loved one has several medicines to take. But if he/she is missing doses, or taking too much at one time, consider using alarms or a smartphone app such as MediSafe, which notifies the person when to take medications, what the pill looks like, what it is used for, rescheduling in case of a missed dose, and allows family and caregivers to track compliance. Another option is automated pill dispensers such as MedMinder Jon (medminder.com), which organizes, reminds, dispenses and notifies the person or family caregiver if a medication reminder is unanswered. Most pharmacists offer free blister packs, like Dispill, which organize your pills by dose, by day, by week. These products are recommended by Senior Safety Reviews.*

If you are worried, make an appointment with your loved one's doctor. Forgetting to take medicine, even with reminders, may be a sign that your loved one should not be at home, says Mattingly.

■ **UNEXPLAINED DENTS/DINGS ON CAR.** Could be a sign of failing eyesight, slower reaction time or dementia. AAA 1-B offers transportation coordination for seniors who are giving up their car keys, and organizations like AARP offer safe driving courses. (See page 32 for more information)

■ **REPETITION.** Asking the same question repeatedly could be a sign of more than just normal memory loss that comes with age. It may be a sign of dementia.

Getting lost in familiar places, not being able to follow instructions and becoming confused about time and people are also signs that your loved one may need medical attention.

■ **CHANGES IN MOOD/ALERTNESS.** Changes in their mood or mental alertness may be signs of depression, dementia or a declining health condition. Look for signs such as irritability and inappropriate crying or laughing, not engaging in conversation and withdrawing from activities such as going to church or going out with friends. Make an appointment with your loved one's doctor when you can go along and listen.

■ **COMPLAINTS ABOUT VAGUE SYMPTOMS.** When older adults complain about vague symptoms, they may be telling you that they are scared or lonely. "If they're suddenly guarded, not wanting to answer questions, they may be trying to hide things. They may not want family members to know there's a problem," says Emily DeMeester, co-manager of AAA 1-B's Community Living Programs. "Or, to avoid questioning, they'll start a fight just to get people off the subject."

If your loved one is resistant to help, ask them why and try to come up with solutions together. Remind them that you are a partner in their care and want them to remain independent.

■ **WHERE TO TURN FOR MORE RESOURCES AND INFORMATION**

We can help you find resources and options. Call us at 800-852-7795 or visit aaa1b.org.

Thanks to AARP, Mayo Clinic, Next Avenue and Senior Safety Reviews for their contributions.

*AAA 1-B does not test or endorse products. ■

Stay Healthy:

MANAGING CAREGIVER STRESS



Listening to music. Imagining a walk in the soft sand of a tropical beach. Hitting a yoga class. Cleaning the bathroom. Those are a few of the de-stressing strategies caregivers discussed in a “Powerful Tools for Caregivers” workshop, a six-week program offered by Area Agency on Aging 1-B (AAA 1-B) to help family caregivers navigate the job of taking care of a loved one.

Indeed, caregivers are prone to burnout, depression and poor health, mainly because they tend to neglect their own needs. But think about it: Without your health, you won't be an effective caregiver. You certainly will be less able to cope with the stress of caregiving.

Healthy caregivers:

- Eat right — Reach for nutritious foods rather than stress-snacking. Limit alcohol and other drugs.
- Exercise — Moving is the best mood lifter. It increases your endorphins (“good” coping hormones). Set a goal of walking fast or dancing (or both) for 2 ½ hours each week.
- Sleep — Try for 7-8 hours a night.
- Prevent back pain — Practice straightening your back. Lift heavier objects by bending the knees and bearing most of the weight on your legs rather than your back.
- Stay in bed when you feel sick — Have backup help to take your place if necessary. Make and keep medical appointments.

Ask For Help

Asking for and accepting help can be difficult for some caregivers, and it's often neglected—to the detriment of the caregiver and the loved one. “People think they can take it on all by themselves,” says Kristin Wilson, AAA 1-B's program manager of Wellness Services. “So until they're so overwhelmed, they don't seek other assistance. In Powerful Tools, we talk about the ‘line of resentment.’ You don't want to get so stressed out that you resent the person you're caring for.”

Some of the red flags indicating you may be heading for a stress-fest include a stiff neck, overeating, feeling anxious, etc.

“Take it as a cue to allow time for yourself,” Wilson says. “If you're eating a lot of chocolate, take a

Continues on page 28

Cost of Care

Annual Cost	Michigan - State Median		USA - National Median	
	2018	2028	2018	2028
Home Health Care				
Homemaker Services	\$50,336	\$67,647	\$48,048	\$64,572
Homemaker Health Aide	\$52,624	\$70,722	\$50,336	\$67,647
<i>Based 44 hours per week by 52 weeks.</i>				
Adult Day Health Care				
Adult Day Health Care	\$20,800	\$27,953	\$18,720	\$25,158
<i>Based on 5 days per week by 52 weeks.</i>				
Assisted Living Facility				
Private, One Bedroom	\$46,200	\$62,089	\$48,000	\$64,508
<i>Based on 12 months of care, private, one bedroom.</i>				
Nursing Home Care				
Semi-Private Room	\$102,748	\$138,085	\$89,297	\$120,008
Private Room	\$109,500	\$147,159	\$100,375	\$134,896
<i>Based on 365 days of care.</i>				

Cost of Care Survey 2018, conducted by CareScout®, June 2018.

Continued from STRESS page 27

break for 10 minutes.” If your loved one is cognitively able to have a conversation, talk to him or her about what is causing you stress and ways you can work together to make sure you’re caring for that person adequately, without resentment, she says.

So, ask for and accept help. Make a list of ways others could help you so when they ask, you have ideas. For example, a friend could pick up a few things for you at the grocery store or provide a meal or two. Someone may be able to visit your loved one for an hour a week.

You may want to look into a local adult day program, especially if your loved one has memory issues. They help engage participants in social, physical

and intellectual activities, provide a meal, and might offer personal services like showering and medication dispensing. While your loved one is at the center, you can run errands or just take time for yourself. AAA 1-B helps to fund more than a dozen in the six counties we serve. (See the resource listings at the back of this guide to find a center near you.)

Healthy caregivers manage their stress. How you do it is up to you.

“It’s individual. It could be calling a friend, or cleaning or shopping,” says Wilson “Find whatever works for you.”

In “Powerful Tools for Caregivers,” a workshop the AAA 1-B offers at least six times during the year, facilitators use “relaxation scripts” to help participants imagine being

in a happy place. Sharing their own and others’ experiences as caregivers helps lighten the load, too.

A few other ideas for reducing stress include:

- Engage in prayer and meditation.
- Do yoga, tai chi, or some other form of exercise.
- Read a good book.
- Take a bath.
- Try to change negative thinking to positive thinking.
- Find a support group – or supportive counseling.
- Set realistic goals.
- Cross off something on your to-do list. ■

MICHIGAN CAREGIVING



2017 Behavioral Risk Factor Surveillance System (BRFSS) Data



1 in 5 adults are caregivers

CAREGIVERS provide regular care or assistance to a FRIEND or FAMILY member with a health problem or disability

CAREGIVING CAN BE

LENGTHY
Nearly half

have provided care for at least two years



INTENSE

A fourth have provided care for at least 20 hours per week



HOW DO CAREGIVERS HELP?



80% manage household tasks

Nearly 50% assist with personal care



WHO ARE CAREGIVERS?

54% are women

21% are 65 years old or older

36% are caring for a parent or parent-in-law

12% of caregivers are providing care to someone with dementia



FUTURE CAREGIVERS

1 in 7 NON-CAREGIVERS expect to **BECOME CAREGIVERS** within 2 years



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

[cdc.gov/aging](https://www.cdc.gov/aging)

Caring for a Loved One with Alzheimer's: **YOUR CHANGING ROLE**

Knowing what to expect if you are a care partner with someone who has an Alzheimer's diagnosis – whether you are family or a friend -- may help ease your fears about the future, along with the stress, anxiety, anger, frustration, grief and depression that you might experience through the stages of the disease.

The Alzheimer's Association has broken down the different stages of the disease and what kind of care that may be required for each:

Early-Stage Caregiving

Early stage refers to people who are in the beginning stage of Alzheimer's disease. It is an optimal time to partner with your loved one to make important decisions about the future, including legal, financial and long-term care planning. You can begin to research available treatments, clinical trials, resources and support services for you and your loved one.

Because the person who has just been diagnosed is primarily independent, you, the care partner, may want to help manage a daily schedule or household budget. Assisting with everyday tasks can help your loved one develop new coping strategies.



Tips:

- Ask your loved one how and when to provide support. Check in regularly to see if he/she needs more or less assistance from you. Talk about your expectations, questions and concerns.
- Create a help signal, whether it's a phrase or other cue you can both use to signal that it's okay to help. For example, if the person needs help remembering a word or name, he/she can use the cue.
- Make sure there are no immediate safety risks for the person with dementia. If not,

provide encouragement and continue to supervise as necessary.

- Try to ease your loved one's anxiety or stress by asking if he/she needs help with tasks like keeping appointments, making shopping lists, managing money, keeping track of medications and driving.
- If you sense frustration, try to identify the cause of frustration before stepping in.
- Encourage your loved one to share his/her personal feelings in a journal, and spend time doing activities that are meaningful for both of you.
- Attend early-stage support group meetings. Find out by calling your local Alzheimer's Association (**see page 61** for more information).

Middle-Stage Caregiving

You might notice that your loved one is jumbling words, having trouble getting dressed, getting frustrated or angry, or is acting in unexpected ways. He or she may be wandering, so taking safety precautions is critical. You will need to be patient and flexible.

You might also build in breaks for yourself, if only for a few minutes. Accept offers of help from family and friends. Take advantage of adult day service and other respite services in your community (**see page 41** for

more information about Adult Day Services).

Tips:

Learn what to expect in the middle stage of Alzheimer's so you can be prepared.

- Use a calm voice when responding to repeated questions. Respond to the emotion rather than the question; the person may simply need reassurance.
- Use simple, written reminders if your loved one is able to read.
- If you notice changes, check with your loved one's doctor to rule out other physical problems or the side effects of medication.

Late-Stage Caregiving

As the disease progresses, the needs of your loved one will change and deepen. He/she may have trouble eating, swallowing and walking. Infections like pneumonia are more common. He/she may need full-time help with personal care, or need to move into a facility that can accommodate people with late-stage Alzheimer's. At the end of life, hospice care is a possibility if your loved one's doctor has diagnosed the person as having less than six months to live (**see page 18** for more information about Medicare hospice coverage).

Your role at this stage of the

disease is to preserve your loved one's quality of life and dignity. Although he/she may not be able to talk or express needs, research shows that the core of the person's self may remain, and there is a possibility of genuine communication.

Tips:

- Play his/her favorite music; read portions of books the person loves; look at old photos together; rub lotion with a favorite scent into his/her skin; brush his/her hair; sit outside together on a nice day.
- If your loved one isn't eating, talk to his/her doctor about stimulating his/her appetite or suggestions for supplements; choose soft foods that can be chewed/swallowed easily; encourage the person to eat on his/her own, if possible; encourage him/her to drink fluids or swallow sherbet, soup, fruit juice.
- Make sure your loved one is in a comfortable, upright position for 30 minutes after eating.
- Set a toileting schedule (keep track of when the person goes and how much she or he eats or drinks); use a bedside commode if the person can't get to the bathroom in time; limit liquids before bedtime; use absorbent briefs and bed pads.

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Continued from ROLE page 31

- Relieve body pressure by changing the person's position. Use pillows and pads to support arms and legs and protect bony areas like elbows, heels and hips.
- Learn how to lift the person; try not to lift by the arms or shoulders.
- Prevent "freezing" of joints, which happens when a person is confined for long periods in a chair or bed: Help your loved one with range-of-motion exercising such as carefully moving the arms and legs 2-3 times a day, preferably when muscles are warm after a bath or shower.
- Keep your loved one's skin clean and dry. Check daily for rashes, sores or breakdowns. Treat cuts with an antibiotic ointment, or call the doctor if the cut is deep.
- To help prevent infections, help your loved one brush his/her teeth to reduce the risk of bacteria in the mouth, which can lead to pneumonia. Make sure he/her has his flu shot every year.

If you suspect your loved one is in pain, check for physical signs and nonverbal signs, along with anxiety, trembling, shouting and sleep problems. ■

Content courtesy of the Alzheimer's Association®.



Steering the Driving Conversation: SHOULD YOU GIVE UP THE WHEEL?

Many seniors are very good drivers, and if they live in southeast Michigan, they've had plenty of practice.

But aging can bring on new obstacles to remaining a safe driver. Weakening eyesight, less flexibility in the neck to check for blind spots, medications that might cause drowsiness or dizziness and loss of height are among the factors that compromise how well you or a loved one navigates the road.

In many cases, an older driver will make adjustments such as giving up driving at night or using surface roads rather than the highway. Others might not recognize that their reflexes are not as sharp as they once were.

Some things to look out for if you are worried about yourself or someone you love:

- Repeated fender benders, or near misses
- Being honked at often
- Counseling sessions with police, family or friends about driving

- Getting lost on familiar routes
- Feeling overly stressed when driving
- Impaired driving due to medical conditions
- Reacting slowly to driving situations
- Making poor driving decisions

If you notice dents and dings in your loved one's car, or they mention how bad traffic is, you may want to take a ride with them.

There are adjustments that can be made to a car, like a larger rearview mirror that goes over the one in the car or a handle you can put inside the car to make it

easier to get in and out.

If you are raising the subject with a loved one, keep in mind that giving up driving may be traumatic.

"When someone retires from driving they can go through the same process as when a death occurs," says Roberta Habowski, mobility project manager at AAA 1-B. "There can be denial, anger, bargaining and, finally, acceptance. Understand that this is a major life transition, and there may be pushback."

Having the driving conversation with a loved one whose driving ability has diminished requires sensitivity and compassion.

There's no ideal way to bring it up, says Habowski, "but there are ways to make it less combative, a little less accusatory, and to help them make decisions on their own."

Her advice:

- "First, you don't want it to be intimidating – like have an intervention," says Habowski.
- "Always use 'I' sentences, not 'you.' For example, 'Dad, I noticed that the car got stuck in the ditch two times, and I just wanted to talk to you about your driving and safety. I know you've been driving for many years, but a lot of things change as we age, and

Continues on page 35

myride2

Helping You Get Where You Need To Go

Need to get somewhere? If you're a senior or an adult with disabilities, call us and we'll coordinate your ride in Macomb, Oakland, Washtenaw and Wayne counties free of charge. Our mobility management team focuses on your needs, including affordability, wheelchair accessibility and assistance getting into your building. We'll also teach you how to use public transportation with our Travel Training program.

CALL US TODAY!

www.myride2.com

855-697-4332

TIPS FOR AN OLDER DRIVER

An older driver isn't necessarily an unsafe driver. Many older drivers compensate for declining abilities and continue to educate themselves on driving and traffic issues. The following offers tips and resources for older drivers. Please call myride2 at 855-697-4332 with any questions.

Avoid:

- Stressful driving situations
- Rush hours
- Backing up
- Distractions
- Bad-weather driving

Cognition

- The brain does 80% of the driving
- Decision-making may take longer
- Leave more distance between cars
- Take alternate routes

- Do mental exercises

Vision

- Have your eyes examined regularly
- Wear your prescription lenses when driving
- Avoid night driving, if possible
- Keep headlights, taillights and windshield clean

Medications

Consult with a doctor about driving if:

- A new medication is prescribed
- Tranquilizers, cough medication, antihistamines or decongestants are prescribed
- Over-the-counter medications are being taken
- Dizziness, drowsiness or an "out of sorts" feeling is present.



If you are unable to convince a loved one to give up his/her license but you feel strongly that he/she should, you may fill out a Request for Driver Evaluation form (OC-88) on the Michigan Secretary of State website (michigan.gov/sos) or at your local Secretary of State branch office. The form will request an on-the-road driving evaluation and evaluations of a person's cognitive and physical faculties that may affect driving ability. The Secretary of State's office will send a letter to the driver to say he or she has been called in for re-evaluation. The state can revoke a license or place a designation on the driver's license, such as no night driving or may only drive 20 miles from home.

You may also request an evaluation by writing to:

**Traffic Safety Division
Michigan Department of State
P.O. Box 30810
Lansing, MI 48909-9832**

Your letter must include the name, birth date, driver license number (if known), and current address of the driver being referred. In addition, the letter must describe an incident or pattern of behavior or other evidence that justifies an evaluation. The request must also include your name, address, telephone number and signature.

The Michigan Secretary of State's website has a host of resources for older drivers and their families at michigan.gov/agingdriver. ■

Continued from STEERING page 33

it might be good to chat about it. I want to make sure you're safe, and I know you want to make sure everyone on the road is safe.' It's easy for us to say someone shouldn't be driving, but the reality is they need to get places and maintain their independence so they can stay in their home. I'd approach it from a safety aspect."

- Another way to open a conversation, says Habowski, is to say that 'So and so's mom decided to retire from driving. She didn't want to worry about the traffic on the road and worry about parking.' Many times, seniors will notice other peers whose driving skill has diminished, but they don't realize it might apply to them."
- It helps to have a plan in place so your loved one

doesn't anticipate being stranded, says Habowski.

AAA 1-B offers myride2, a program which helps coordinate transportation for older adults and adults with disabilities in most of southeast Michigan. Just call and, with a few days' notice, we'll help you find transportation options that will fit your individual needs. We also offer Travel Training, an on-the-road clinic to help the same population use public transportation. SMART, metro Detroit's bus system, offers fixed-route and small bus service that includes limited curb-to-curb, paratransit and community transit options in Macomb, Oakland and Wayne counties (although not in all cities). All fixed-route buses have wheelchair ramps and all Connector buses are equipped with wheelchair lifts. Call myride2 at 855-697-4332 or go to myride2.com to get you moving in the right direction. ■



Some older drivers may need to make adjustments so they can continue to drive, such as using a seat cushion and newer assistive devices in the car, going to dinner while it's still light outside, or getting their eyesight examined. Also, AARP offers programs such as driver safety courses at local senior centers (these include learning about new car technologies and newer features of the road, such as roundabouts). Another resource is AARP's Carfit, a program that hosts events where seniors bring their vehicles to get an evaluation by an occupational therapist to see how well their car "fits" them. Carfit includes seat and mirror adjustments to maximize safety. Go to the driver safety section of aarp.org for more information. ■

Where to find help on the Internet:

- michigan.gov/agingdriver
- thehartford.com/Alzheimers
- seniordriving.aaa.com
- um-saferdriving.org
- aarp.org/auto/driver-safety/
- roadwiserox.com
- keepingussafe.org



The New Family Tree: **GRANDPARENTS RAISING GRANDCHILDREN**

Diane and Mark of Novi were looking forward to a comfortable retirement. She had practiced as a registered nurse, he had been an iron worker. They had some savings they planned to use to travel the country.

And then their middle child Amy died, leaving them with four children to raise – and a fifth that Amy had brought into the family's life.

Today, the couple are doing what they did when their own children were young –carpooling, meeting with teachers, packing lunches, making dinner and filling out forms. Their grandchildren, including the fifth girl who is biologically unrelated, range in age from 7 to 19.

Those travel plans? They'll take them up again eventually, says Diane.

Like other grandparents – and even great-grandparents – who find themselves as “kinship caregivers,” some days are better than others. The couple have two other grown children who live nearby and help by taking the younger kids overnight on occasion. The couple rely on their respective pensions and the children's Social Security benefits to get by, along with regular trips to the food bank.

All told, Diane says, her family is better off than many others who attend the monthly support group meetings of Grandparents Raising

Grandchildren (GRG). The program is run by the Oakland Livingston Human Service Agency (OLHSA). Catholic Social Services of Washtenaw runs the Grandparents as Parents (GAP) program. Both are funded by the Area Agency on Aging 1-B and are for people age 55 and older who live in Macomb, Oakland and Washtenaw counties. Kinship caregivers who live in the other counties we serve may call for information and inquire about attending support groups.

GRG's meetings, held in various locations in the three counties, are designed to provide education, training and support. Diane learned about the group five years ago – not long after Amy died from cervical cancer – and she has been a devoted member and volunteer ever since.

"I have learned so much in the way of resources," she says. "At the support meetings, you realize you're not the only one out there. New people come to the meetings all the time, and you're able to support them.

"My husband always says, 'How did you find out about that? How did you learn about that?' So many people bring so many things to the table."

The needs of kinship caregivers are significant, says Lisa Grodsky, coordinator of the GRG program. There are the complex legal challenges of adopting, the need for more financial resources to put food on the table, the struggle for acceptance at their grandchildren's schools and so much more.

The support group is a safe space to share their burdens, Grodsky says.

"It is really a scene of community. They want to help each other. There have been tears, there have been hugs. It's an

incredible community they've created for themselves," she says.

Since Grodsky started in 2013, the number of support group participants has grown from 40 to 101. Outside of the support groups, there are sessions with experts who talk on topics ranging from kinship caregiver rights to Internet safety. GRG offers a Youth Mental Health First Aid program broken into four two-hour segments.

Grodsky also arranges intergenerational events for grandparents and their grandchildren, such as visiting county parks to swim and boat, a six-week cooking program, art-making at the DIA and others. She does what she can to cover other needs, such as finding funding for school supplies and finding advocates to accompany a grandparent to a school Individualized Education Program (IEP) meeting. She helps with getting adoption fee waivers and financial discounts on orthodontic braces and summer camp. Community partners have donated Easter baskets and Passover food, Tigers tickets, Halloween costumes and prom dresses. "Let's face it: grandparents and relatives raising children is nothing new. It takes a village to raise a child. But the numbers are bigger," Grodsky says.

Lisa Gdaniec runs GAP, which is growing but far smaller than GRG. She organizes intergenerational events, as well, and helps grandparents find the resources they need. Monthly support groups are held throughout Washtenaw County.

GAP, says Gdaniec, is growing "because there are more kinship caregivers, and the stress they are under is causing them to seek out more resources. It's a growing need." ■

■ For information about Grandparents Raising Grandchildren in Macomb and Oakland counties, call 248-209-2721.

■ On the web, you'll find the GRG group at olhsa.org/grandparents-raising-grandchildren. Events are listed at olhsa.org/events. GRG has a Facebook page, too. Go to facebook.com/OLHSA/.

■ For information on the Grandparents as Parents program in Washtenaw county, call 734-712-7262, or contact Lisa Gdaniec at lgdaniec@csswashtenaw.org.



Long-Distance Caregiving – **BRIDGING THE DIVIDE**

The last time you were in town to visit your parents, you noticed a few changes in them and in the state of their house – nothing that caused too much alarm but enough to get you thinking:

How can you keep an eye on them whether you're 1 hour or 1,000 miles away?

You're facing a dilemma that is becoming increasingly common. Some 15% of family caregivers in the U.S. – about 5-7 million – are long-distance caregivers. That number is expected to double by 2020, according to the National Council on Aging.

Long-distance caregiving can come in several forms. You may be the sole caregiver, or you may have a sibling or other relative who lives closer to your loved one and has most of the responsibility for care. In the former case, you'll want to pay a long enough visit to assess the situation, and maybe go to a doctor's visit with your loved one. In the latter case, you may want to help with important tasks that you can do at a distance.

Wherever you are, here are some questions to consider during your next visit:

- Is there nutritious food in the house?
- Are pills organized in a way that makes sense to your loved one?
- Are your loved one's clothes clean?
- Is the house clean?
- How is your loved one's health?
- How is your loved one's mood? Does she seem depressed or anxious?
- Are bills being paid? Is mail piling up?
- Is he is still driving? If so, you may want to assess his road skills by driving with him.
- Are grab bars, ramps or other assistive devices needed to climb steps or to be safer in the shower or tub?
- Are there area rugs, clutter or other tripping hazards around?

What if you live far away and don't have a family member who can help your loved one?

- Arrange to have a friend or trusted neighbor drop by periodically.
- Consider hiring a professional

geriatric care manager, usually a social worker or licensed nurse, who can assess your loved one's needs and help coordinate care. The care manager can be that "professional relative" who can also help lead family discussions about sensitive subjects.

- If your mother is the primary caregiver for your father, or visa versa, consider arranging respite care so he/she can have an occasional break. You also can have someone who your loved one knows come to the house, or find an adult day center where he/she can go for activities.
- If your loved one is a member of a religious congregation, arrange to have members provide meals a few days a week.
- If your parent is unable to cook a meal or shop by himself/herself, consider Meals on Wheels.
- If you feel your loved one needs help with cooking or shopping, ask her if she'd consider help from an in-home aide for a few hours a day or week (**see page 8** for more information).
- If you feel your loved one is unsafe by herself, discuss moving into a senior living facility, or help adapt the

- More males than females are long-distance caregivers (58% to 42%).
- Long-distance caregivers live an average of 450 miles from their care recipients.
- Those who provide care at a distance are likelier to feel stressed out about it than those closer to the care recipient.

environment to her safety needs.

- If a normally tidy house has become cluttered or unclean, ask your loved one about hiring a cleaning service.
- If your loved one is not ready to move out of the house, implement safety measures. For example, remove area rugs and create clear pathways. Look into our Home Injury Control program (**see page 51** for more information).
- Ask your loved one to complete a privacy release form so you can speak to

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his doctor to get more information. Ask if the doctor will provide email or phone updates.

- If your parent is a veteran, check the VA to tap benefits available to seniors. For contact information for the local VA in your area, visit the resource listings at the back of this guide.

If you can afford it, hire a private care manager to coordinate services in the home.

If you have a sibling who lives closer to your loved one, you still can play an important role in caregiving. A few ideas:

- Arrange for professional caregivers, including home health and nursing aides, if that is what is needed. Do your research so you know you're dealing with a reputable agency. Remember to get references.
- Check into assisted living or independent living communities, if necessary.
- Research your loved one's health problems and medicines she is taking.
- Pay bills, track and review bank statements and other documents such as insurance policies.
- Organize paperwork such as legal documentation (advance directives, wills, insurance policies), and make sure someone close to your loved one has a patient advocate designation so that person can make important healthcare decisions on behalf of your loved one. Along with this, make sure you have your loved one's birth certificate, Social

Security and Medicare numbers, military records, a recent tax return, credit card account names and numbers and other information that will be important in the future.

- Offer words of appreciation, reassurance and positive feedback to the primary family caregiver.

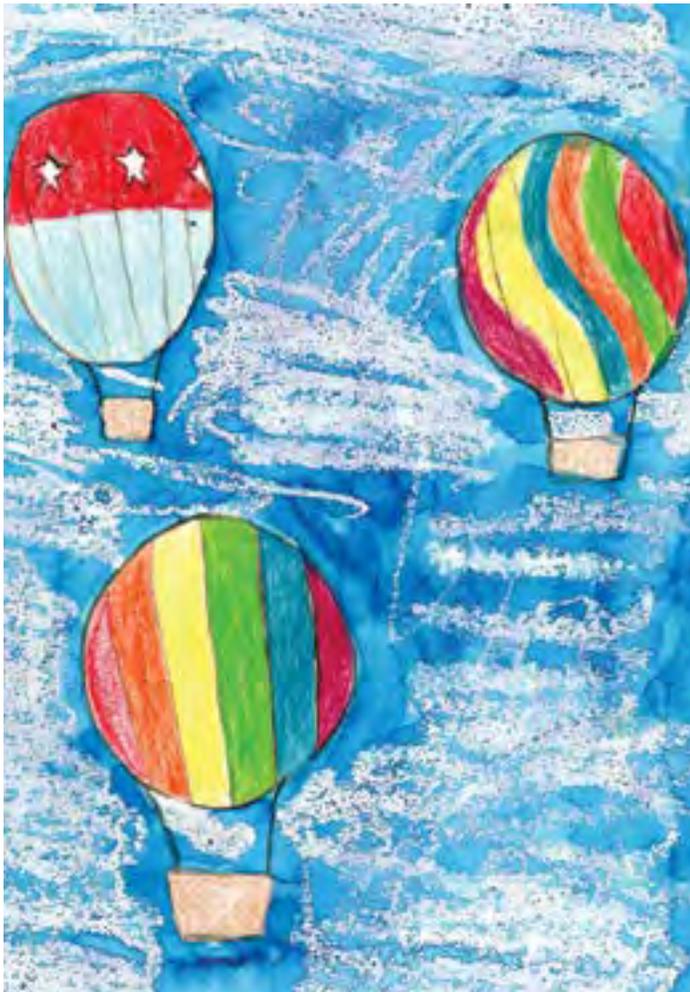
How do you have a conversation with your loved one about making big life changes?

Remember, your loved one is a unique person who wants to retain his/her dignity.

"It's important to take a step-by-step approach rather than jumping in and trying to take over, unless this person is suffering," says Leah Eskanazi, director of operations and planning at the San Francisco-based Family Caregiver Alliance. "If safety is a primary issue, jump in. Otherwise, I encourage families to step back. It's not only the respectful thing to do, it's also the best way to start gathering information and try to find out what's really happening."

For example, you might be alarmed by the empty shelves in the refrigerator. However, that doesn't necessarily mean your loved one is going hungry or can't shop on her own. A spare bedroom might be piled high with stuff you consider junk, but maybe that provides a level of comfort to a parent who doesn't like the empty space.

"Try to take more time. If you're visiting from afar, consider staying longer to assess the situation. It may take time to get a full picture of your loved one's needs, Eskanazi says. "If there are changes you want to introduce, do it slowly – unless there's a security issue." ■



Adult Day Services:

A WIN-WIN FOR CAREGIVERS AND THEIR LOVED ONES

What if mom could spend a few days a week in a friendly, supervised environment, painting, exercising and eating lunch with familiar people, and you could take the time to work or chip away at your to-do list?

An Adult Day Service (ADS) program might be right for her – and for you.

The AAA 1-B helps to fund ADS programs across our six-county coverage area. They offer social and intellectual stimulation, especially for those with memory loss issues who can't be left unsupervised and need help with everyday activities. Some offer transportation to and from the center, medication reminders, help with personal care and hygiene and extended hours.

“They're engaged in meaningful activities like music, art and exercise that are especially tailored to those with Alzheimer's disease or other

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types of dementia and physical limitations,” says Cathy Backos, AAA 1-B’s program manager for caregiver services. “If you have the person engaged in enjoyable and meaningful activities during the day, they come home, have dinner and sleep better at night.”

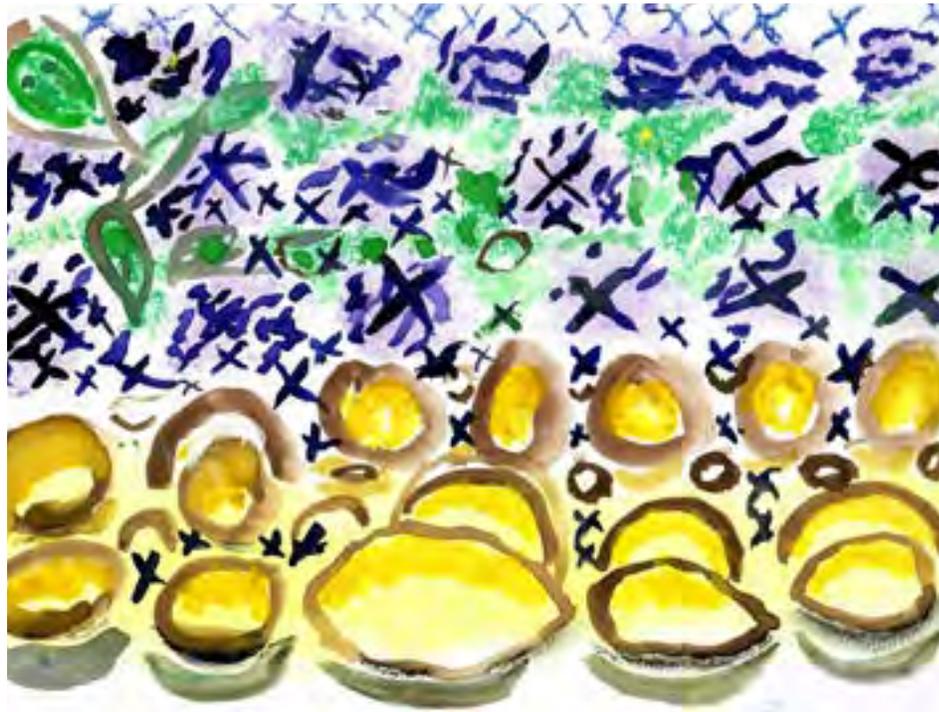
The ADS program staff are trained - especially those who serve people with dementia. Snacks and lunch are included (a donation of a few dollars is suggested). Participants usually come on regular days during the week (drop-in services are not available).

For those with a limited income, the cost may be on a sliding scale.

Backos points out that adult day programs can delay or even keep people from going into an assisted living situation or nursing care.

Another benefit of using a day program is that it offers another “set of eyes” on a loved one. Staff may notice changes in the participant’s health or behavior, which they will report to the caregiver. And some ADS programs may have a nurse and social worker who can connect the caregiver to other needed services in the community.

ADS programs can also be a godsend for caregivers, whether or not they have a job outside of the home.



“If they work, they can work and keep their job. If they are older and caring for a spouse, it gives them a break from being a caregiver to get errands done, take care of their own health needs, or just relax or socialize with their friends and family,” says Backos.

“Across the board we see a

decrease in caregiver stress when they’re using the program. It’s just that peace of mind they get knowing their family member is well cared for and enjoying interacting with others,” she says.

Carolyn Ward says she got her life back when she began taking her late husband Charles to the Dorothy & Peter Brown Jewish Community Adult Day Care Program in Southfield. Charles had Alzheimer’s disease and cancer, and caring for him meant retiring early from her job as a nurse. As the sole caregiver, she took Charles to his doctor appointments, occasionally relying on extended family to help.

After a day at the center, Carolyn saw her husband’s spirits were

“They’re engaged in meaningful activities like music, art and exercise that are especially tailored to those with Alzheimer’s disease or other types of dementia and physical limitations.”

CATHY BACKOS, AAA 1-B
PROGRAM MANAGER FOR
CAREGIVER SERVICES

high, and he was calmer. He liked talking to people, painting and listening to music. She saw him grow intellectually through the programming.

“Some days he’d be nervous and jittery, and there was probably some anxiety. He had to have chemo. He was dealing with a lot of things,” she says. “Each time he went to the center he came back better than he was when he went. And I wasn’t alone; I was with another group that understood what we were going through.”

The days Charles spent at the center allowed Carolyn the space – and peace of mind - to take care of herself.

“For four days, I had the freedom to take care of business. If I wanted to get my hair done or go out and do something else, I was able to do it,” she says. Carolyn



The art in this section was created by participants of the Dorothy and Peter Brown Jewish Community Adult Day Program.

also attended monthly support groups for caregivers at Brown, meetings that “kept me going on days when I was depressed and sad.

“I went to the first meeting and from there I was hooked. Not only did they provide information about medical conditions, but they talked about how caregivers need help,” she says. “I got the mental support I needed to share ideas and learned new ways of doing things.”

To learn more about ADS programs, schedule a tour to

see how participants and staff interact. Make sure you ask about transportation, personal care services provided, and whether there are residency requirements.

ADS programs are designed for people who require continuous supervision. That could mean someone with dementia or someone who is frail enough to require help with activities of daily living. ■

For more information, go to Caregiver Resources at aaa1b.org or call us at 800-852-7795.



“When the evening comes, prepare yourself for the morrow.”

– DONALD PILLAI

Legal and Financial Curves Ahead:

CONSIDERATIONS FOR CAREGIVERS AND THEIR FAMILIES

It is important to stay ahead of the legal and financial curves that will likely face us as we age into becoming caregivers and possibly into needing care ourselves. Here are some of the designations and documents you may need to avoid problems and confusion in the future:

DURABLE FINANCIAL POWER OF ATTORNEY: A person may grant power of attorney to someone who can handle legal and financial matters for her/him. This kind of power of attorney can stay in effect even if the person becomes incapacitated.

PATIENT ADVOCATE DESIGNATION: A person may designate a patient advocate to make medical, mental health and personal care treatment decisions for when he/she is unable to participate in treatment decisions. A patient advocate must be an adult (over 18) and can be a spouse, friend or another trusted person who is willing to serve in the role. The advocate performs the same role as an advance directive. He/she may also make the

decision to withhold or withdraw life-saving treatment. You must name your patient advocate in writing and be of sound mind when you do so. You must sign the designation, and there must be two adult witnesses when you sign (not family members, your doctor, an employee of a health facility or program where you are a patient or client, a person named in your will or an employee of your health or life insurance provider). You can change the patient advocate at any time.

For more information and a sample Patient Advocate form, go to michigan.gov/mdhhs/.

DO NOT RESUSCITATE ORDER (DNR)/PRE-HOSPITAL MEDICAL CARE DIRECTIVE: These are for people whose poor health gives them little chance of benefiting from CPR. If you have a DNR, ambulance and hospital emergency personnel won't perform CPR if your heart or breathing should stop. A Do Not Resuscitate Order must be signed in consultation with your doctor. A specific bracelet may be worn to signal that an order has been signed. When the order is present or the bracelet is worn,

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emergency responders cannot start resuscitation.

GUARDIANSHIP: The court will appoint a guardian to manage an incapacitated person's general welfare, including living arrangements and health and end-of-life decisions. The guardian can be a spouse, an adult child, a parent or the person with whom the person lived – or anyone willing to abide by court rules.

CONSERVATORSHIP: The court will appoint a conservator to manage an incapacitated person's assets, such as real estate, investments and cash. The person must be deemed a ward of the court. The court outlines the responsibilities of the conservator.

MEDICAID SPEND-DOWN:

In order to qualify for Medicaid long-term care services, which may cover in-home or nursing home care, you must meet financial eligibility requirements. Generally, a single person can have no more than \$2,000 in assets (not including a house, one car, a television, clothing, burial plot and money for funeral expenses) and no more than \$2,313 in monthly income. Assets include a second car, a bank account of more than \$2,000, IRAs valued at more than \$2,000, or 401ks, stocks, bonds and mutual funds. The amounts may change each year, so please check for exact figures. Our resource specialists can help: 800-852-7795.

See page 13 to learn more about Medicaid benefits for long-term care.

SPOUSAL

IMPOVERISHMENT: This law is intended to protect the assets and income of the healthy spouse of a Medicaid applicant who needs coverage for long-term care either at home, in a nursing home or another community setting. It is designed so that the “community spouse” isn't driven into poverty by the health care costs of the ill/disabled spouse.

Under the spousal impoverishment law, you can keep half of the total countable assets of your household up to around \$126,000 (2019 figure). The minimum protected asset amount is around \$26,000 (2019), so if a couple has less than that in assets, the community spouse is allowed to keep all the assets. The amounts increase year to year, so please check for exact figures.

Spousal impoverishment can be complicated, so it is best to check with an elder care law attorney.

ESTATE RECOVERY: The State of Michigan is entitled to recover a person's assets – those that were exempted originally, like the house and car – to cover the benefits paid out if the person received Medicaid to pay for long-term care. The state may only recover the amount it paid out in Medicaid.

There are temporary exceptions: The state will hold off on recovery if the spouse or children under 21 is still living and:

- If there's a child with blindness or a permanent disability
- If the caregiver is still living in the home where the Medicaid recipient lived, and provided care for two years before the recipient was admitted into the hospital or nursing home
- A sibling with equity in the home who also lived in the home for at least one year before the Medicaid recipient was admitted to the hospital or nursing home
- If recovering the estate will cause "undue hardship," which must be proven, the state will defer recovery.

LADYBIRD DEED: This type of deed can protect a house from estate recovery by the state.

PERSONAL CARE

CONTRACTS: These agreements, also referred to as caregiver contracts, enable family caregivers to be paid by their loved ones for care they are providing -- without jeopardizing their loved one's ability to qualify for long-term care services through Medicaid at a later date. The contract needs to be put in place before any payment has been made for caregiving, because the state's "look back" rule means that any "gift" made in the previous five years will count as a transfer of assets if your loved one applies for Medicaid. So, if you've been paid anything in the last five years to care for dad – whether he's at home or in a facility -- the state may deny him benefits.

Caregiver contracts are typically scrutinized by the Michigan Department of Health and Human Services when an application is submitted for Medicaid to pay for long-term care.

The requirements of a proper caregiver contract are exacting:

- The caregiver contract must be put in writing and notarized before services are provided.
- The contract must detail all the services that are going to be provided and a contract date. The services must have been recommended in writing by the care recipient's doctor.

- The care recipient cannot be living in a nursing home, adult foster care home, a hospital or an intermediate care facility for people with cognitive disabilities.
- The contract must be signed by the caregiver and care recipient (or a legally authorized representative such as a guardian), and the signatures must be notarized at the time of signing.
- The contract must specify the charge for services and it should be on par with those provided by commercial care providers.
- The Michigan Department of Health and Human Services must verify the contract before caregiving services can start.

For more information on personal care contracts, call us. We can refer you to an elder care law firm.

Visit michigan.gov/mdhhs for more information and sample forms.

Attorney Howard Collens of Galloway and Collens in Huntington Woods kindly provided his expertise for this article. Collens serves on the AAA 1-B Board of Directors. ■

CHECKLIST

PERSONAL PAPERS YOU SHOULD HAVE IN ORDER

You may have a really good system for organizing your personal papers, such as birth certificates, insurance policies, bank statements and military records. But does a loved one know how to find this information if something happens to you? Have you saved data like login passwords and bank PIN numbers which can be accessed by a trusted caregiver like a spouse?

To spare him or her the trouble of tracking down personal papers needed to take care of you or your estate, use the checklist below as a guide. Make sure the documents are stored in one place.

Personal

- Birth certificate
- Driver's license
- Health insurance identification numbers (Medicaid/Medicare/private)
- Social Security card
- Marriage certificate/divorce decree
- Military records
- Burial instructions/cemetery information
- Phone numbers/email addresses of important contacts such as doctor, lawyer, financial manager, stockbroker, etc.
- If there is a pet, the name and phone number of the veterinarian

- Education information, group memberships, awards and certificates

Legal & Financial Documents

- Patient advocate designation
- Location of will with an original signature
- Power of attorney designation
- Emergency directives (a DNR order, for example)
- Insurance policies (auto, homeowners, life, long-term)
- Pension information
- Jewelry receipts and appraisals
- Tax returns (keep at least the last seven years' worth)
- Loan documents (mortgage statements, car loans, home equity loans, etc.)
- Vehicle title (keep until the vehicle is sold)
- Bank information, including credit and debit card account and PIN numbers
- Stocks, bonds, real estate, investments and mutual funds' account numbers along with online login information
- Safe deposit box key/account number, or combination to a safe deposit box with a list of its contents ■

Getting Help

You may want to talk with a lawyer about setting up a general power of attorney, durable power of attorney, joint account, trust or an advance directive. Be sure to ask about the lawyer's fees before you make an appointment.

You should be able to find a directory of local lawyers on the Internet or at your local library, or you can contact your local bar association for lawyers in your area. Your local bar association (Irs.michbar.org) can also help you find free legal aid options in your county. An informed family member may be able to help you manage some of these issues.

Other Resources

- Eldercare Locator
800-677-1116
eldercare.acl.gov
- National Academy of Elder Law Attorneys
703-942-5711
naela.org
- National Elder Law Foundation
520-881-1076
nelf.org
- Elderlaw of Michigan
866-400-9164
elderlawofmi.org



Advocacy • Action • Answers on Aging

A photograph of two women embracing warmly. The woman on the left is younger, with dark hair, wearing a pink jacket. The woman on the right is older, with grey hair, wearing a grey sweater and a watch. Both are smiling broadly.

Helping Seniors and Their Families for Over 45 Years

Whether you are looking for help for yourself or help caring for a family member, the Area Agency on Aging 1-B is the first call you should make. We are a nonprofit focused on helping older adults live independently and safely in whatever setting they call home.

Connecting You to Services, Programs and Support

- Free help and referral telephone line
- In-home care services
- Meals on Wheels
- Help finding housing
- Help finding transportation
- Health and wellness classes
- Support for family caregivers

Serving Livingston, Macomb, Monroe, Oakland, St. Clair and Washtenaw counties.

Answers You Can Trust • 800-852-7795 • aaa1b.org

“The ache for home lives in all of us, the safe place where we can go as we are and not be questioned.”

– MAYA ANGELOU



MAKING YOUR HOME SAFER WITH HOME INJURY CONTROL

Clearing away the area rugs and trailing cords, installing grab bars, using brighter lightbulbs and wearing shoes in the house are a few ways to minimize the risk of injuring yourself in your home.

In fact, a few easy and relatively low-cost modifications may make the difference between living independently and safely or ending up in an emergency room for a fall-related injury and, perhaps, having to move out of your home.

AAA 1-B can steer you to a home injury control program in your county which will help you tweak your living space to make it friendlier. You must be age 60 years and older, and determined by a home assessment to have a need for an assistive device. Participants may be asked to pay part of the cost if they are financially able.

Steve Schuster, program manager of Macomb Community Action's Community Development program, says interior grab bars are the most popular request his department gets from county seniors and their caregivers.

"They're easily attained, easy to install, and make the biggest improvement for people when they become unstable on their feet," he says. His department, which contracts with AAA 1-B, does not provide exterior handrails, which are costlier.

The program will send out a licensed contractor to assess your needs, make recommendations, and install safety devices that may include:

- Shower and bath chairs
- Bathtub rails
- Toilet seat risers and rails
- Smoke alarms
- Hand-held showers

- Safe lighting
- Non-skid surfacing

Other measures that can help reduce your risk of falling inside your home include:

- Making sure banisters on stairways are secure
- Placing handrails on both sides of all stairways
- Securing rugs with double-sided tape or non-skid pads
- Removing soap buildup on bathtub and shower floor
- Using non-slip strips in the tub or shower
- Ensuring step stools throughout the home are stable and have handles for easy use
- Keeping items you use frequently – including cooking ingredients, clothing and other household items – in places that are easy to reach
- Placing nightlights in hallways, bedrooms, bathrooms and stairways and ensuring all rooms and hallways are properly lit
- Removing newspapers, boxes, plants and furniture and other obstacles from high-traffic areas

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Outside the House

- Repair defects on walkways, such as uneven pavement and holes.
- Make sure lighting works at entryways, garages and other areas where you walk.
- Check that handrails on both sides of steps are secure.
- Remove leaves, snow and ice from walkways; use salt or sand in the winter.

Other fall-prevention measures you can take:

- If your medication makes you dizzy, talk to your doctor.
- Get annual vision exams.
- Wear shoes with non-slip soles.
- Stay physically active and participate in programs that work on balance and coordination. AAA 1-B offers “A Matter of Balance,” a six-week class held throughout our six-county region. ■

WHERE SHOULD I LIVE?

A GUIDE TO HOUSING OPTIONS FOR SENIORS

Seniors have choices when it comes to where they want to live. They may prefer to stay in their own home or they may want a setting with more opportunities to socialize and/or one that offers meals and personal care assistance.

A look at typical senior housing options:

Independent living communities are designed for seniors who are generally healthy and able to care for themselves. In most cases, residents can communicate with doctors and caregivers by themselves, prefer to live among their peers and no longer want to maintain a house.

Independent living options range from villas to one- and two-bedroom apartment homes to smaller, studio apartments. Some independent living communities offer the following amenities (some may be at an additional cost):

- Housekeeping and maintenance services

- Community activities
- Full kitchens
- 24-hour emergency response
- Transportation services

Some independent living communities have an onsite home health care company that will charge for its services.

Assisted living is designed for people who do not require daily skilled medical care but may need help with activities such as bathing, medication management, dressing, personal care, cooking, eating and housekeeping. Many communities offer a variety of assisted living apartment floor plans – private or shared rooms or studio apartments. Under the state’s Assisted Living license, sites are required to provide the following services (some may be at additional cost):

- Housekeeping and laundry services
- Community dining
- Transportation
- Social and recreational activities



- Coordinated trips and tours
- Health assessments
- 24-hour emergency care
- Supervision
- Medication Management

Assisted living facilities are licensed by the state of Michigan as adult foster care or home for the aged.

Memory care units may be part of an assisted living building but typically are found in nursing homes.

People with progressive dementia such as Alzheimer’s and Parkinson’s disease will eventually require round-the-clock supervision. They will need help with personal care and medication management and monitoring to ensure they don’t wander away.

Other services typically offered in these specialized units include:

- A private or semi-private room

- Three daily meals
- Cognitive and physical therapies
- Exercise activities
- Social activities
- Housekeeping and laundry

Continuing care retirement communities provide a spectrum of care in one location – from independent living and assisted living options to skilled nursing and memory care.

A senior moves to a continuing care community when he/she is still able to live independently. If additional services are required, the person can easily move within the same community to receive a different level of care. Because of the range of living options under one “roof,” continuing care residents remain part of a single community, often among longtime friends, as they age and require additional levels of care.

Some communities may also

offer additional levels of care, such as rehabilitation services and memory care or dementia care services.

Licensed Senior Living

Michigan requires a license for two different kinds of housing for seniors and adults with disabilities. They are considered assisted living:

Adult foster homes provide a supervised home environment for adults with special needs. This can include disabilities, mental health issues and aging-related conditions, such as dementia and Alzheimer’s disease. An adult foster home generally houses no more than six people and provides round-the-clock help with daily activities such as transportation and cooking. Residents may have the option of hiring a skilled nurse, but most adult foster homes require residents to transition to a place where they can receive a higher level of medical care when they need it.

Nursing homes, also called skilled nursing facilities, provide medical and personal care services such as nursing care, 24-hour supervision, three meals a day and assistance with everyday activities. Rehabilitation services, such as physical, occupational and speech therapy, are also available for people who are transitioning from the hospital. ■

“We don’t stop playing because we grow old; we grow old because we stop playing.” – GEORGE BERNARD SHAW



10 Early Signs and Symptoms of Alzheimer's Disease (And 10 Signs of Normal Aging)

1 Forgetting information you recently learned, including important dates and events; asking for the same information repeatedly; needing to rely on memory aids or family members.

Typical age-related change: *Sometimes forgetting names or appointments, but remembering them later.*

2 Having trouble developing and following a plan; difficulty following a familiar recipe or keeping track of monthly bills; taking much longer to do things than before.

Typical age-related change: *Making occasional errors when balancing a checkbook.*

3 Finding it difficult to complete daily tasks, such as driving to a familiar location, managing a budget at work or remembering rules of a favorite game.

Typical age-related change: *Occasionally needing help to use the settings on the microwave or recording a TV show.*

4 Losing track of dates, seasons and the passage of time; having trouble understanding something that isn't happening immediately; at times, forgetting where you are or how you got there.

Typical age-related change: *Being momentarily confused about the day of the week.*

5 For some people, having vision problems; having difficulty reading, judging distance and determining color or contrast, which may cause problems with driving.

Typical age-related change: *Having vision changes related to cataracts.*

6 Having trouble following or joining a conversation; struggling with vocabulary.

Typical age-related change: *Sometimes having trouble finding the right word.*

7 Putting things in unusual places; misplacing things and having trouble finding them, which may lead to accusing others of stealing.

Typical age-related change: *Losing things from time to time, but being able to retrace your steps to find them.*

8 Using poor judgment, such as giving large amounts of money to telemarketers; paying less attention to grooming and keeping oneself clean.

Typical age-related change: *Occasionally making bad decisions.*

9 Withdrawing from hobbies, social activities, work projects or sports; having trouble keeping up with a favorite sports team or remembering how to complete a hobby; avoiding social activities because of these changes.

Typical age-related change: *Occasionally feeling weary of work, family and social obligations.*

10 Experiencing mood and personality changes; becoming confused, suspicious, depressed, fearful or anxious; getting easily upset.

Typical age-related change: *Developing specific ways of doing things and becoming irritable when a routine is disrupted.*

To help you navigate the issues facing you or a loved one with an Alzheimer's disease diagnosis, go to alzheimersnavigator.org. It will guide you in creating a personalized action plan, which includes caregiving options, working with your doctor, legal and financial considerations and finding community resources. ■

This content was provided by the Alzheimer's Association®.

HOW DOES OUR BRAIN AGE?

Like our bodies, brains age differently depending on who we are and, to a degree, how we live.

The bad news is once our brain cells die, they don't get replaced. The good news is that even with the losses that come with age, you *can* teach an old dog new tricks.

We asked Jessica Damoiseaux, PhD, a researcher and assistant professor at Wayne State University, to talk about the aging brain. Dr. Damoiseaux researches changes in brain function and cognition which accompany normal and abnormal aging, with a focus on early detection of neurodegenerative diseases like Alzheimer's.



Q. What are basic changes in the brain that happen with aging?

A. One of the most consistent findings in the literature is a loss of neurons/brain cells (gray matter) in the hippocampus, an area of the brain most associated with memory. It's the most important region of episodic memory, an example being personal experiences like a vacation, not the memory of facts. You see that decline with age.

Q. When does the decline start to happen?

A. The age at which it declines varies. As a researcher, we study adults from young adulthood to older adulthood, and performance on cognitive tests gradually decreases over time. Older adults may perform well, but not as well as they used to. A lot of older adults realize they aren't as sharp but aren't concerned that they aren't functioning well.

Q. Describe the cognitive tests.

A. For example, we read a list of words out loud, and then ask the participant to repeat them back. We do that five times and find out how many words are retained. About 30 minutes later, we ask how many words they

remember. Overall, younger adults retain more of these words and more of these words after a delay. This is general—not all young adults are better at this than older adults. With aging, it's not only memory which declines—it's not even the most salient decline. Processing speed, how quickly you respond to a stimulus like pressing a button, declines as well. For example, there's a connect-the-dots test to see how fast you finish. With older age, you get slower. There's no cutoff date; it's a gradual decline from young adulthood (ages 18 to 25).

Q. Why does brain power decline?

A. Most of the neurons/brain cells we have are those we are born with. It's unlike skin cells, which continuously get replaced. As we age, some neurons don't function as well and some die off. With aging, there seems to be specific brain areas affected more than others, such as the hippocampus and the frontal lobe (processing speed, planning and working memory, such as recalling a shopping list). However, the brain is a network, and multiple brain regions work together. We know the hippocampus is part of a memory network which facilitates episodic memory performance. However, the hippocampus is

also connected to other regions which support semantic memory (e.g., recalling the capital of France), which we think is located in the anterior temporal lobe. How strong these network connections are determines how well we can perform.

Q. We know that the brain is "elastic," so why is it **more difficult to retain information as we age?**

A. Our brain forms new connections among cells, and that is the way we learn new information. It happens a lot in early childhood—the brain is very plastic at the time—and we see that after young adulthood, plasticity decreases a little bit. The cells that have been with us our entire lives become less efficient.

Q. Do brain changes associated with aging affect mood?

A. We know there is an association between older age, mood, memory function and cognitive abilities. People with more depressive symptoms have more trouble with memory and other tasks. This could be related to attention—if you don't pay attention, you can't remember it later, but it could also be specific to brain changes due to aging and/or depression.

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Q. But research doesn't yet understand if mood affects cognitive function or vice versa?

A. It's really challenging to understand the direction of the effects. We do see [mood changes] with older age. We also see more depression in people with neurodegenerative diseases like Alzheimer's. There are for sure relationships between older age and mood. We see depression in older age which might be different than major depression across the age range. There is research trying to disentangle this, but as far as I know, there's no clarity on direction of effects yet. With older age, you get more social isolation and loneliness which can be related to depression or mood disorders. Those things are intertwined.

Q. How can we compensate for the loss of gray matter as we age?

A. There's a lot of research into what keeps us healthy longer. The most compelling evidence is physical activity. It's important for cognitive performance. Physical activity can range from going out and exercising or walking around the block. The worst thing is sitting a lot.



You keep your brain cells healthier by moving more and getting more oxygen and nutrients to your brain cells. That will help with being cognitively better because you have healthier brain cells to form new connections to help you learn new things.

Q. What about diet? Does that help your brain?

A. Diet is a factor, too, but I wouldn't say there's a specific diet or foods that would be beneficial to cognitive performance. What we do see is that an overall healthy diet-including vegetables, whole grains etc.-is beneficial for brain health.

Q. What about the effect of sleep on brain health?

A. Sleep is important for cognitive function, even in younger people. With older age, sleep patterns change. People don't sleep well or wake up a lot or sleep for shorter periods, and that can affect cognitive function.

Q. How do you know if changes in your cognitive function are normal?

A. If you've noticed your memory has declined over the last couple of years and you feel it's worse than some of your peers, go to a doctor and talk about it. It's also important to ask people close to you if they've noticed things. If you're worried, let your primary care doctor know. ■

Local GENERAL AND COUNTY-SPECIFIC RESOURCE LISTINGS Resources



ALL-COUNTY RESOURCES

The following are general resources available to seniors, adults with disabilities and family caregivers in the six counties we serve.

Space won't permit us to list every resource available to consumers, so if you can't find what you need, please call the Area Agency on Aging 1-B's Information & Assistance Telephone Line at **800-852-7795**. We can help.

Elder Law of Michigan, Inc.

Phone: 866-400-9164

Website: elderlawofmi.org

Information, advocacy, legal advice and professional services for older adults and people with disabilities.

Food Bank Council of Michigan

Phone: 800-552-4483

Website: fbcnich.org

SNAP helpline provides assistance in applying for SNAP benefits.

Macomb-Oakland Regional Center

Phone: 866-593-7413

Website: morcinc.org

Medicare Medicaid Assistance Program

Phone: 800-803-7174

Website: aaa1b.org/medicare-medicaid-help

Statewide. Free and unbiased help with Medicare and Medicaid. **See page 6** for a program description.

MiCafe

Phone: 877-664-2233

Website: elderlawofmi.org/micafe

Assists in applying for SNAP benefits.

Michigan Aging & Adult Services Agency

Phone: 517-241-4100

Website: michigan.gov/osa

Michigan Department of Human Services/Adult Protection Intervention

Phone: 855-444-3911

Website: michigan.gov/mdhhs/

Anyone who suspects an adult 18 years or older of being abused, neglected or exploited can call to report. Caller can remain anonymous.

Michigan State Housing Development Authority – Detroit Office

Phone: 313-456-3540

Website: michigan.gov/mshda

Section 8 Housing Choice Vouchers

Michigan Veterans Affairs Agency

Phone: 800-642-4838

Website: michiganveterans.com

National Council on Aging

Phone: 571-527-3900

Website: ncoa.org

ADAPTIVE EQUIPMENT/ ASSISTIVE TECHNOLOGY

Assistive Technology of Michigan

Phone: 248-348-7161

Website: atofmich.com

CAREGIVER SUPPORT GROUPS

The AAA 1-B maintains a list of caregiver support groups on its website: aaa1b.org. Please visit the site for the most up-to-date information.

The Caregiver Action Network

Phone: 202-454-3970

Website: caregiveraction.org

Provides education, information, support and validation, public awareness and advocacy for caregivers.

Well Spouse Association

Phone: 800-838-0879

Website: wellspouse.org

Emotional support and comfort to spousal caregivers. Offers in-person support groups, telephone support groups, mentor programs, online chat forum, respite weekends and national conference.

COMMUNITY DINING SITES

AAA 1-B funds congregate meals at community venues throughout our six-county region. Lunches available to those age 60 and older and their spouse. Voluntary donations accepted. Call 800-852-7795 for a site near you.

CONDITION-SPECIFIC ORGANIZATIONS

Alzheimer's Association

Phone: 800-272-3900

Website: alz.org

Education and resources, adult day services, support groups for caregivers and social groups for those living with Alzheimer's disease and dementia.

Alzheimer's Association—Greater Michigan Chapter

Phone: 248-351-0280

Website: alz.org/gmc

Metro Detroit office serves Huron, Macomb, Oakland, Saint Clair, Sanilac and Wayne counties.

Alzheimer's Association Michigan—Great Lakes Chapter

Phone: 734-369-2716

Website: alz.org/mglc

Ann Arbor office serves Branch, Hillsdale, Lenawee, Livingston, Monroe and Washtenaw counties.

American Cancer Society

Phone: 248-663-3401

Website: cancer.org



American Diabetes Association - Michigan

Phone: 248-433-3830

Website: diabetes.org

American Heart Association of Michigan/American Stroke Association of Michigan

Phone: 248-936-5800

Website: americanheart.org

Arthritis Foundation of Michigan

Phone: 248-649-2891

Website: arthritis.org/Michigan

Association for Frontotemporal Degeneration

Phone: 866-507-7222

Website: theaftd.org

Huntington's Disease Society of America—Michigan Chapter

Phone: 800-909-0073

Website: michigan.hdsa.org

Lewy Body Dementia Association

Phone: 800-539-9767

Website: lbda.org

Michigan Parkinson Foundation

Phone: 248-433-1011

Website: parkinsonsmi.org

National Kidney Foundation of Michigan

Phone: 734-222-9800

Website: nkfm.org

National Multiple Sclerosis Association—Michigan Chapter

Phone: 800-344-4867

Website: nationalmssociety.org

National Osteoporosis Foundation

Phone: 202-223-2226

Website: nof.org

LGBT OLDER ADULT RESOURCES

SAGE Metro Detroit

Phone: 734-681-0854

Website: sagemetrodetroit.org

Advocacy, information and resources for lesbian, gay, bisexual or transgender older adults. Friendly caller program matches volunteers with LGBT older adults for weekly phone calls.

MEALS ON WHEELS

The AAA 1-B works with 13 local community partners to

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help bring Meals on Wheels to homebound seniors in our six-county region. To connect with the Meals on Wheels provider serving your neighborhood, call our Information & Assistance Telephone Line (800-852-7795) or visit aaa1b.org.

SENIOR CENTERS

Some senior centers offer help finding local programs and resources, help with transportation, adaptive equipment for loan (wheelchairs, shower chairs or walkers) and community meals. There are over 90 senior centers in the AAA 1-B region. For a full list, call our Information & Assistance Telephone Line (800-852-7795) or visit aaa1b.org.

SOCIAL/ENGAGEMENT SUPPORT

Well Connected/Senior Center Without Walls

Phone: 877-797-7299

Website: covia.org/services/well-connected/

Free telephone-based program offering over 70 phone-based activities to adults age 60 and older anywhere in the U.S.

LIVINGSTON COUNTY RESOURCES

Huron Valley PACE

Phone: 734-572-5777

Website: huronvalleypace.org

See page 14 for more information on the Program for All-Inclusive Care for the Elderly (PACE).

Livingston County Department of Health and Human Services

Phone: 517-548-0200

Website: michigan.gov/mdhhs

Livingston County Catholic Charities

Phone: 517-545-5944

Website: livingstoncatholiccharities.org
Adult day, transportation and volunteer caregiver respite program

LOVE Inc

Phone: 517-552-3620

Website: livingstonloveinc.org

Network of churches that provides assistance with a variety of needs.

Livingston County Health Department

Phone: 517-546-9850

Website: lchd.org

OLHSA - Oakland Livingston Human Service Agency

Phone: 517-546-8500

Website: olhsa.org
Food assistance, chore assistance, home injury control and help accessing benefits

ADULT DAY SERVICES

For more information on Adult Day Services, see page 41.

Be Our Guest Adult Day Center

Phone: 517-546-9910

Website: livingstoncatholiccharities.org/be-our-guest-adult-day-service/

CAREGIVER RESPITE

Livingston County Catholic Charities

Phone: 517-545-5944

Website: livingstoncatholiccharities.org

CHORE/HOME MAINTENANCE SERVICES

Assistance with lawn mowing, yard work and snow shoveling

OLHSA - Oakland Livingston Human Service Agency

Phone: 517-546-8500

Website: olhsa.org

DISABILITY SERVICES

Livingston Center for Independent Living

Phone: 517-225-2870

Website: livingstoncil.org
Offers assessments of independent living skills, evaluations of adaptive equipment, counseling, information and referral for housing and other services.

FOOD ASSISTANCE

To find food pantries near you, contact the Food Bank Council of Michigan or visit pantry.net.

Food Bank Council of Michigan

Phone: 888-544-8773

Website: fbcnich.org

SNAP helpline provides assistance in applying for SNAP benefits.

Gleaners Shared Harvest Pantry

Phone: 517-548-3710

Website: gcfb.org

MiCafe

Phone: 877-664-2233

Website: elderlawofmi.org/micafe

Assists in applying for SNAP benefits.

Senior Project Market Fresh OLHSA

Phone: 517-546- 8500

Website: olhsa.org

Free nutrition counseling and \$20 in coupons that can be exchanged for fresh fruits and vegetables sold at local farmers markets and roadside stands. Financial eligibility requirements.

HOME SAFETY/HOME INJURY CONTROL

Assistance with installation of handrails and grab bars

OLHSA - Oakland Livingston Human Service Agency

Phone: 517-546-8500

Website: olhsa.org

IN-HOME ASSISTANCE

Area Agency on Aging 1-B

Phone: 800-852-7795

Website: aaa1b.org

LEGAL SERVICES

Elder Law of Michigan, Inc.

Phone: 866-400-9164

Website: elderlawofmi.org

Information, advocacy, legal advice and professional services for older adults and people with disabilities

Michigan Advocacy Program

Phone: 734-665-6181

Website: lsscm.org

Provides free legal advice and representation to low-income individuals, families and older adults.

MEALS ON WHEELS

Livingston County Senior Nutrition Program

Phone: 888-886-8971/810-632-2155

MEDICAL/ADAPTIVE EQUIPMENT LOAN CLOSET

Wheelchairs, walkers and other assistive devices

Brighton Senior Center

Phone: 810-299-3817

Hartland Senior Activity Center

Phone: 810-626-2135

Website:

hartlandseniorcenter.org

Putnam Township Senior Center

Phone: 734-878-1810

Website: putnamtwp.us

MENTAL HEALTH RESOURCES

Community Mental Health Services of Livingston County

Phone: 517-546-4126

Website: cmhliv.org

Offers home-based mental health services to Livingston County residents who are age 50 and older.

National Alliance on Mental Illness of Livingston County

Phone: 810-231-6011; ask for Barb

Website: namilivingston.org

TAX PREPARATION

AARP Foundation Tax Aide

Website: aarp.org/money/taxes/aarp_taxaide

Free tax preparation for people 50 and older through trained volunteers.

Accounting Aid Society

Phone: 866-673-0873

Website: accountingaidsociety.org

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TRANSPORTATION

Brighton Senior Center
Phone: 810-299-3817

Hartland Senior Activity Center
Phone: 810-626-2135
Website:
hartlandseniorcenter.org

Livingston County Catholic Charities
Phone: 810-626-2135
Website:
livingstoncatholiccharities.org

Livingston Essential Transportation Services (L.E.T.S.)
Phone: 517-546-6600
Website: livgov.com/lets

VETERANS SERVICES

Livingston County Veterans Affairs
Phone: 517-546-6338
Website: co.livingston.mi.us/veterans

MACOMB COUNTY RESOURCES

Catholic Charities of Southeast Michigan
Phone: 586-416-2300 (Clinton Township)/ 586-412-8494 (St. Clair Shores)
Website: ccsem.org
Adult day services, friendly visitors, housekeeping assistance and shopping/errand assistance

Jewish Family Services of Metro Detroit
Phone: 248-592-2313 Website: jfsdetroit.org
Geriatric care management, friendly visitors, home care and transportation services

Macomb County Crisis Center
Phone: 586-307-9100

Macomb County Health Department
Phone: 586-469-5235

Website: health.macombgov.org

Macomb Community Action/ Macomb County Office of Senior Services
Phone: 586-469-6999

Website: mca.macombgov.org/
Adult Day programs, Meals on Wheels, community dining sites, medical equipment loan closet, home safety programs and chore assistance programs

Michigan Department of Health and Human Services—District 12
Clinton Township
Phone: 586-412-6100 Website: michigan.gov/mdhhs

Michigan Department of Health and Human Services—District 20

Warren

Phone: 586-427-0600 Website: michigan.gov/mdhhs

Michigan Department of Health and Human Services—District 36

Sterling Heights

Phone: 586-254-1500 Website: michigan.gov/mdhhs

PACE Southeast Michigan

Phone: 855-445-4554 Website: pacesemi.org
See page 14 for more information on the Program of All-Inclusive Care for the Elderly (PACE).

ADULT DAY SERVICES

For more information on Adult Day Services, see page 41.

Catholic Charities of Southeast Michigan
Phone: 586-412-8494, ext. 4014
Website: ccsem.org

Goldenberry Adult Day Caring Center
Clinton Township
Phone: 586-469-5580 Website: mca.macombgov.org/

SarahCare—Lakeside (Sterling Heights)
Phone: 586-731-2273
Website: sarahcare.com/lakeside/

CAREGIVER RESPITE

Interfaith Volunteer Caregivers
Phone: 586-757-5551
Website: ivcinfo.org

CHORE/HOME MAINTENANCE SERVICES

Assistance with lawn mowing, yard work and snow shoveling

Macomb Community Action/ Macomb County Office of Senior Services
Phone: 586-469-6999/586-469-5228
Website: mca.macombgov.org/MCA-Home

DISABILITY SERVICES

Disability Network of Oakland & Macomb
Phone: 586-268-4160
Website: dnom.org

FOOD ASSISTANCE

To find food pantries near you, contact the Food Bank Council of Michigan or visit pantrynet.org.

Food Bank Council of Michigan
Phone: 888-544-8773
Website: fbcnich.org
SNAP helpline provides assistance in applying for SNAP benefits. Will also provide referrals to other resources.

MiCafe
Phone: 877-664-2233
Website: elderlawofmi.org/micafe
Assists in applying for SNAP and other benefits.

Senior Project Market Fresh Macomb Community Action/ Macomb County Office of Senior Services
Phone: 586-469-6999/586-469-5228
Website: mca.macombgov.org/MCA-Home
Free nutrition counseling and \$20 in coupons that can be exchanged for fresh fruits and vegetables sold at local farmers markets and roadside stands. Financial eligibility requirements.

FRIENDLY VISITORS/CALLER PROGRAMS

Catholic Charities of Southeast Michigan
Phone: 586-416-2300
Website: ccsem.org

Interfaith Volunteer Caregivers
Phone: 586-757-5551
Website: ivcinfo.org

Jewish Family Services of Metro Detroit
Phone: 248-592-2313
Website: jfsdetroit.org
Companionship and support for homebound older adults with weekly or biweekly visits, either at the client's home or destinations such as lunch, shopping or other activities

GRANDPARENTS RAISING GRANDCHILDREN SUPPORT

OLHSA - Oakland Livingston Human Service Agency
Phone: 248-209-2721
Website: olhsa.org/grandparents-raising-grandchildren

HOME SAFETY/HOME INJURY CONTROL

Installations of grab bars, railings and other home safety equipment

Macomb Community Action/ Macomb County Office of Senior Services
Phone: 586-469-5228
Website: mca.macombgov.org/MCA-Home

HOUSING

Community Housing Network
Phone: 586-221-5900
Website: communityhousingnetwork.org
Most programs serve Macomb, Oakland and Wayne counties.

St. Clair Shores Housing Commission
Phone: 586-773-9200
Website: ci.saint-clair-shores.mi.us

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IN-HOME ASSISTANCE

Area Agency on Aging 1-B

Phone: 800-852-7795

Website: aaa1b.org

Catholic Charities of Southeast Michigan

Phone: 586-416-2300

Website: ccsem.org

Macomb-Oakland Regional Center

Phone: 866-593-7413

Website: morcinc.org

LEGAL SERVICES

Elder Law of Michigan, Inc.

Phone: 866-400-9164

Website: elderlawofmi.org

Information, advocacy, legal advice and professional services for older adults and people with disabilities

Lakeshore Legal Aid

Phone: 888-783-8190

Website: lakeshorelegalaid.org

MEALS ON WHEELS

Macomb Community Action/ Macomb County Office of Senior Services

Phone: 586-469-5228

Website: mca.macombgov.org/MCA-Home

MEDICAL/ ADAPTIVE EQUIPMENT LOAN CLOSET

Wheelchairs, walkers and other assistive devices

Armada Township Senior Center

Phone: 586-784-8050

Website: armadatwp.org/senior-center

Chesterfield Fire Department

Phone: 586-725-2233

Website: chesterfieldfire.org

City of Roseville

Phone: 586-445-5423

Website: roseville-mi.gov

Clinton Township Fire Department

Phone: 586-263-8437

Website: clintontownship.com

Disability Network of Oakland & Macomb

Phone: 586-268-4160

Website: dnom.org

Fraser Department of Public Safety-Fire Division

Phone: 586-293-2000

Website: micityoffraser.com

Macomb Community Action/ Macomb County Office of Senior Services

Phone: 586-469-6999

Website: mca.macombgov.org/MCA-Home

Romeo, Washington, Bruce Parks & Recreation

Phone: 586-752-9601

Website: rwbparksrec.org



Roseville Parks & Recreation Center

Phone: 586-777-7177

Website: recreationalauthority.com

Shelby Fire Department

Phone: 586-731-3476

Website: shelbytwp.org

Shelby Senior Center

Phone: 586-739-7540

Website: shelbytwp.org

World Medical Relief

Phone: 313-866-5333

Website: worldmedicalrelief.org

MENTAL HEALTH RESOURCES

Macomb County Community Mental Health

Phone: 586-948-0222

Website: mccmh.net

**National Alliance for Mental
Illness**

**Metro-Oakland, Wayne &
Macomb Counties**

Phone: 248-348-7197

Website: namimetro.org

RAMP CONSTRUCTION

Macomb Community Action

Phone: 586-469-6999

Website: mca.macombgov.org/
MCA-Home

Home injury control has a temporary modular ramp program for handicapped individuals in need of a ramp on a short-term or temporary basis.

**Macomb County Habitat for
Humanity**

Phone: 586-263-1540

Website: macombhabitat.org

TAX PREPARATION

AARP Foundation Tax Aide

Website: aarp.org/money/
taxes/aarp_taxaide

Free tax preparation for 50 and older through trained volunteers. More than 5,000 locations nationwide in neighborhood libraries, malls, banks, community centers and senior centers. AARP membership not required.

Accounting Aid Society

Phone: 866-673-0873

Website: Accountingaidsociety.
org

**Macomb Community Action/
Macomb County Office of
Senior Services**

Phone: 586-469-6999

Website: mca.macombgov.org/
MCA-Home

TRANSPORTATION

City of Fraser

Phone: 586-294-4611

**Chesterfield Township
Senior Center**

Phone: 586-749-7713

Website: chesterfieldtwp.
org/212/Senior-Transportation

**Clinton Township Senior
Adult Life Center**

Phone: 586-286-9476

Website: clintontownship.com/
senior-center

**Jewish Family Services of
Metro Detroit**

Phone: 248-592-2313

Website: jfsdetroit.org

Myride2

Phone: 855-697-4332 (toll-
free)

Website: myride2.com

A program of the AAA 1-B that helps seniors and people with disabilities in Oakland, Macomb, Wayne and Washtenaw counties find transportation and learn about transportation options.

**Romeo, Washington and
Bruce Parks and Recreation**

Phone: (586) 752-9010

**Shelby Township Senior
Center**

Phone: 586-739-7540

SMART

Phone: 866-962-5515

Website: smartbus.org

**St. Clair Shores Senior
Activities Center**

Phone: 586-498-2331

Website: scsmi.net/286/
Senior-Activity-Center

**Sterling Heights Senior
Center Transportation**

Phone: 586-446-2757

UTILITY ASSISTANCE

**Macomb County Community
Services Agency –**

**Community Action Center
North**

Phone: 586-749-5146

Website: mca.macombgov.org/
MCA-Home

VETERANS SERVICES

**Macomb County Veterans
Service Office**

Phone: 586-469-5315

Website: vets.macombgov.org
Assists Macomb County veterans and their dependents in obtaining federal and state benefits.

MONROE COUNTY RESOURCES

Michigan Department of Health and Human Services—District 58

Phone: 734-243-7200

Website: michigan.gov/mdhhs

Monroe County Commission on Aging

Phone: 734-240-3290

Website: co.monroe.mi.us

Monroe County Health Department

Phone: 734-240-7800

Website: healthymonroecounty.org

Monroe County Opportunity Program

Phone: 734-241-2775

Website: monroecountyop.org
Finds resources for older adults, in-home care, food assistance, chore assistance, utility assistance and transportation

ADULT DAY SERVICES

For more information on Adult Day Services, see page 41.

Frenchtown Senior Services, Inc.

Frenchtown Adult Day Services

Phone: 734-243-6210

Website: frenchtownsenior.com

CHORE/HOME MAINTENANCE SERVICES

Assistance with lawn mowing, yard work and snow shoveling.

Monroe County Opportunity Program

Phone: 734-241-2775

Website: monroecountyop.org

DISABILITY SERVICES

Monroe Center for Independent Living

Phone: 734-682-5271

Website: annarborcil.org

Offers an independent living assessment, independent living skills development, adaptive equipment evaluations, counseling, information and referral on housing and other services for people with disabilities.

FOOD ASSISTANCE

To find food pantries near you, contact the Food Bank Council of Michigan or visit pantry.net.org.

Food Bank Council of Michigan

Phone: 888-544-8773

Website: fbcnich.org

SNAP helpline provides assistance in applying for SNAP benefits. Also provides referrals to other resources

MiCafe

Phone: 877-664-2233

Website: elderlawofmi.org/micafe
Assists in applying for SNAP and other benefits.

Senior Project Market Fresh Monroe County Opportunity Program

Phone: 734-241-2775

Website: monroecountyop.org

Free nutrition counseling and \$20 in coupons that can be exchanged for fresh fruits and vegetables sold at local farmers markets and roadside stands. Financial eligibility requirements. MOCP offers additional food resources.

FRIENDLY VISITOR/CALLER PROGRAM

Monroe County Opportunity Program

Phone: 734-241-2775

Website: monroecountyop.org

Monroe Center for Healthy Aging

Phone: 734-241-0404

Website: monroectr.org

HOME SAFETY/HOME INJURY CONTROL

Assistance with installation of handrails and grab bars

Monroe County Opportunity Program

Phone: 734-241-2775

Website: monroecountyop.org

IN-HOME ASSISTANCE

Area Agency on Aging 1-B

Phone: 800-852-7795

Website: aaa1b.org



Monroe County Opportunity Program

Phone: 734-241-2775

Website: monroecountyop.org
Serves qualified Monroe County seniors, age 60 and older, and disabled residents.

LEGAL SERVICES

Elder Law of Michigan, Inc.

Phone: 866-400-9164

Website: elderlawofmi.org
Information, advocacy, legal advice and professional services for older adults and people with disabilities

Michigan Advocacy Program

Phone: 734-241-8310

Website: lsscm.org

Monroe County Senior Legal Services

Phone: 734-241-7644

Website: mcsls.org
Makes visits to bedridden, older adults residing in their own homes, assisted living facilities, nursing homes and hospitals.

MEALS ON WHEELS

LIFE: Living Independence for Everyone

Phone: 734-242-6800

Website: lifeindependence.org

MEDICAL/ADAPTIVE EQUIPMENT LOAN CLOSET

Wheelchairs, walkers and other assistive devices

Bedford Senior Center

Phone: 734-856-3330

Website: bedfordseniorcenter.com

ProMedica Cancer Center

Phone: 734-240-5400

Website: promedica.org/
monroe-regional-hospital
Serves Monroe County residents diagnosed with cancer.

MENTAL HEALTH RESOURCES

Monroe Community Mental Health Authority

Phone: 734-243-7340

Website: monroecmha.org

Self & Family Behavioral Health Care

Phone: 734-586-0031

Website: selfandfamily.com

TAX PREPARATION

AARP Foundation Tax Aide

Website: aarp.org/money/
taxes/aarp_taxaide

Free tax preparation for 50 and older through trained volunteers.

TRANSPORTATION

Milan Seniors for Healthy Living

Phone: 734-508-6229

Website: milanseniors.org

Monroe County Opportunity Program

Phone: 734-241-2775

Website: monroecountyop.org
Transportation to non-emergency medical appointments and treatments for senior and non-senior Monroe County residents with disability with a chronic medical condition

Monroe Center for Healthy Aging

Phone: 734- 241-0404

Website: monroectr.org

Volunteers provide escorted transportation to medical appointments and treatments.

VETERANS SERVICES

Michigan Veterans Trust Fund

Phone: 800-642-4838

Website: michiganveterans.com
Provides a limited amount of financial assistance for temporary emergency needs such as eviction, mortgage foreclosure, utility shut-offs, etc.

Monroe County Veteran's Bureau

Phone: 734-240-3287

Website: co.monroe.mi.us

OAKLAND COUNTY RESOURCES

Arab-American And Chaldean Council (ACC)

Phone: 248-559-1990

Website: myacc.org

Association of Chinese Americans

Phone: 248-585-9343

Website: acadetroit.org

Helps non-English speaking Chinese seniors in Oakland County access community resources.

Catholic Charities of Southeast Michigan

Phone: 248-559-1147

Website: ccsem.org

Jewish Family Services of Metro Detroit

Phone: 248-592-2313

Website: jfsdetroit.org

Geriatric care management, friendly visitors, home care and transportation services

Michigan Department of Health and Human Services—District 02

Madison Heights

Phone: 248-583-8700

Website: michigan.gov/mdhhs

Michigan Department of Health and Human Services—District 03

Southfield

Phone: 248-262-6400

Website: michigan.gov/mdhhs

Michigan Department of Health and Human Services—District 04

Pontiac

Phone: 248-975-5200

Website: michigan.gov/mdhhs

Oakland County Health Division-Southfield

Phone: 248-858-1280

Website: oakgov.com/health

PACE Southeast Michigan

Phone: 855-445-4554

Website: pacesemi.org

See page 14 for more information on the Program of All-Inclusive Care for the Elderly (PACE).

ADULT DAY SERVICES

For more information on Adult Day Services, see page 41.

Alzheimer's Association—Greater Michigan Chapter - Southfield

Phone: 800-272-3900

Website: alz.org/gmc

Catholic Charities of Southeast Michigan – Auburn Hills

Phone: 248-537-3300 x3803

Website: ccsem.org/senior-citizen-services/adult-day-health-services

City of Farmington Hills/ Costick Activities Center Senex Adult Day Services

Phone: 248-473-1872

Website: fhgov.com

Bloomfield Township Senior Center

The Friendship Club

Phone: 248-723-3530

Website: bloomfieldtwp.org/Government/Services/Senior-Services

Jewish Senior Life/Brown Adult Day Services – West Bloomfield

Phone: 248-592-5032

Website: jslmi.org

JVS Human Services/ Brown Adult Day Services - Southfield

Phone: 248-223-4000

Website: jvshumanservices.org/who-we-serve/seniors

Older Persons Commission - Rochester

Phone: 248-608-0261

Website: opcseniorcenter.org

Waterford Senior Center/ Encore Adult Day Service

Phone: 248-682-9450

Website: waterford.k12.mi.us/seniorcenter

CAREGIVER RESPITE

Interfaith Volunteer Caregivers

Phone: 586-757-5551

Website: ivcinfo.org

CHORE/HOME MAINTENANCE SERVICES

Assistance with lawn mowing, yard work and snow shoveling. Residency requirements may apply.

Birmingham NEXT

Phone: 248-203-5270

Website: BirminghamNext.org

Oak Park Senior Center

Phone: 248-691-7577

Website: ci.oak-park.mi.us

Older Persons Commission-Rochester

Phone: 248-656-1403

Website: opcseniorcenter.org

OLHSA - Oakland Livingston Human Service Agency

Phone: 248-209-2600

Website: olhsa.org

DISABILITY SERVICES

Disability Network of Oakland & Macomb

Phone: 586-268-4160

Website: dnom.org

FOOD ASSISTANCE

To find food pantries near you, contact the Food Bank Council of Michigan or visit pantrynet.org.

Food Bank Council of Michigan

Phone: 888-544-8773

Website: fbcmich.org

SNAP helpline provides assistance in applying for SNAP benefits and referrals for food resources.

Senior Project Market Fresh MSU Extension-Oakland County

Phone: 248-858-0904

Website: Msue.msu.edu

Free nutrition counseling and \$20 in coupons that can be exchanged for fresh fruits and vegetables sold at local farmers markets and roadside stands. Financial eligibility requirements.

FRIENDLY VISITOR/CALLER PROGRAMS

Berkley Recreation Department

Phone: 248-658-3470

Website: berkleymich.org

Open to Berkley residents.

Bloomfield Township Senior Services

Phone: 734-723-3500

Website: bloomfieldtwp.org/
seniors

Catholic Charities of Southeast Michigan

Phone: 248-559-1147

Website: ccsem.org

Screened and trained volunteers provide friendly phone calls to older adults who are homebound, isolated or lonely.

Faith in Action Oakland County

Phone: 248-820-3767

Website: faithinactionoakland.org

Interfaith Volunteer Caregivers

Phone: 586-757-5551

Website: ivcinfo.org

Volunteers provide one-time or ongoing visits/companionship.

Waterford Senior Center

Phone: 248-682-9450

Website: waterford.k12.mi.us/
seniorcenter

GRANDPARENTS RAISING GRANDCHILDREN SUPPORT

OLHSA - Oakland Livingston Human Service Agency

Phone: 248-209-2721

Website: olhsa.org/
grandparents-raising-
grandchildren

HOME REPAIR

Bloomfield Township Senior Services

Phone: 734-723-3500

Website: bloomfieldtwp.org/
seniors

Must be a resident of Bloomfield Township age 60 and older with low income.

Faith in Action Oakland County

Phone: 248-820-3767

Website: faithinactionoakland.org

Volunteers provide minor home maintenance.

LOVE Inc of North Oakland County

Phone: 248-693-4357

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Website: lakeorion.loveincfnoc.org
Network of churches that provides assistance with a variety of needs, including home, appliance and auto repairs. Must be a resident of northern Oakland County.

Older Persons Commission - Rochester
Phone: 248-656-1403
Website: opcseniorcenter.org

Rebuilding Together Southeast Michigan
Phone: 248-482-8061
Website: rebuildingtogethersem.org
Assisting low-income homeowners in Oakland County on the last Saturday in April every year. Assistance at other times of the year based on volunteer availability.

HOME SAFETY/HOME INJURY CONTROL

Assistance with installation of handrails and grab bars

Birmingham NEXT
Phone: 248-203-5270
Website: BirminghamNext.org
Must be the owner/occupant of a home in Birmingham or Beverly Hills. Income eligibility requirements.

OLHSA - Oakland Livingston Human Service Agency
Phone: 248-209-2600
Website: olhsa.org

HOUSING

Community Housing Network
Phone: 248-928-0111
Website: communityhousingnetwork.org

IN-HOME ASSISTANCE

Area Agency on Aging 1-B
Phone: 800-852-7795
Website: aaa1b.org

Jewish Family Services of Metro Detroit
Phone: 248-592-2313
Website: jfsdetroit.org

Macomb-Oakland Regional Center
Phone: 866-593-7413
Website: morcinc.org

LEGAL SERVICES

Elder Law of Michigan, Inc.
Phone: 866-400-9164
Website: elderlawofmi.org
Information, advocacy, legal advice and professional services for older adults and people with disabilities

Lakeshore Legal Aid
Phone: 888-783-8190
Website: lakeshorelegalaids.org

MEALS ON WHEELS

City of Farmington Hills
Phone: 248-473-1825
Website: fhgov.com
Serves Farmington and City of Farmington Hills

Oakland Meals on Wheels
Phone: 248-689-0001
Website: oaklandmow.org
Serves Berkley, Beverly Hills, Birmingham, Clawson, Ferndale, Franklin, Hazel Park, Huntington Woods, Lathrup Village, Madison Heights, Oak Park, Pleasant Ridge, Royal Oak Township, Southfield, and Troy

National Council of Jewish Women—Kosher Meals on Wheels
Phone: 248-592-2313
Website: ncjwmi.org/mealsonwheels

Older Persons' Commission -Rochester
Phone: 248-608-0264
Website: opcseniorcenter.org
Serves Addison Township, Auburn Hills, Brandon Township, Clarkston, Independence Township, Lake Angelus, Leonard, Oakland Township, Orion Township, Oxford Township, Rochester and Rochester Hills

Pontiac Meals on Wheels
Phone: 248-738-9393
Website: pontiacmealsonwheels.net
Serves Pontiac, Bloomfield Hills, Keego Harbor, Orchard Lake and Sylvan Lake

Waterford Senior Center
Phone: 248-682-9450
Website: waterford.k12.mi.us/seniorcenter
Serves Waterford Township

Western Oakland County Meals On Wheels
Phone: 810-632-2755

Website: mealsonwheelsmi.org
Serves: Commerce Township, Highland Township, Holly, Lyon, Milford, New Hudson, Northville, Novi, South Lyon, Springfield Township, Union Lake, Walled Lake, White Lake and Wixom

MEDICAL/ ADAPTIVE EQUIPMENT LOAN CLOSET

Wheelchairs, walkers and other assistive devices. Several Oakland County senior centers offer a loan closet. For a list of loan closets, visit aaa1b.org.

Church of The Holy Family
Phone: 248-349-8553
Website: holymfamilynovi.org

Disability Network of Oakland & Macomb
Phone: 586-268-4160
Website: dnom.org

World Medical Relief
Phone: 313-866-5333
Website: worldmedicalrelief.org

MENTAL HEALTH RESOURCES

National Alliance for Mental Illness
Phone: 248-348-7197
Website: namimetro.org
Serves Oakland, Wayne & Macomb counties

Oakland Community Health Network
Phone: 800-341-2003
Website: occmha.org

Oakland County Senior Reach
Phone: 248-475-2150
Website: eastersealsmichigan.com
Provides individual counseling in the home for those age 60 and older.

RAMP CONSTRUCTION

Faith in Action Oakland County
Phone: 248- 820-3767
Website: faithinactionoakland.org
Volunteers may be able to help with ramp construction, depending on availability.

Rebuilding Together Southeast Michigan
Phone: 248-482-8061
Website: rebuildingtogethersem.org
Assisting low-income homeowners in Oakland County on the last Saturday in April every year. Assistance at other times of the year based on volunteer availability.

RESPIRE (CAREGIVER RELIEF)

Catholic Charities of Southeast Michigan
Phone: 248-559-1147
Website: ccsem.org

Oakland County Interfaith Volunteer Caregivers
Phone: 586-757-5551

Website: www.ivcinfo.org
Volunteers provide one-time or ongoing assistance. No toileting, bathing or other personal care available.

TAX PREPARATION

AARP Foundation Tax Aide
Website: aarp.org/money/taxes/aarp_taxaide
Free tax preparation for people 50 and older by trained volunteers.

Accounting Aid Society
Phone: 866-673-0873
Website: Accountingaidsociety.org

OLHSA - Oakland Livingston Human Service Agency
Phone: 248-209-2600
Website: olhsa.org

TRANSPORTATION

Many senior centers in Oakland County offer transportation services. For a full list of Oakland County Senior Centers, visit the Area Agency on Aging 1-B website at aaa1b.org.

Community Transportation (Highland/ Milford)
Phone: 248-887-4979

Jewish Family Services of Metro Detroit
Phone: 248-592-2313
Website: jfsdetroit.org

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Myride2

Phone: 855-697-4332

Website: myride2.com

Helps seniors and adults with disabilities in Oakland, Macomb, Wayne and Washtenaw counties in Michigan find transportation and navigate public transportation options. See page 32.

North Oakland Transportation Authority

Phone: 248-693-7100

Website: notaride.org

Serving Orion, Oxford and Addison Townships and the Villages of Lake Orion, Oxford and Leonard

SMART

Phone: 866-962-5515

Website: smartbus.org

UTILITY ASSISTANCE

OLHSA - Oakland Livingston Human Service Agency

Phone: 248-209-2600

Website: olhsa.org

Administers the State Emergency Fund (SEF). Accepts applications for The Heat and Warmth Fund (THAW).

VETERANS SERVICES

Oakland County Veterans Services

Phone: 248-655-1250

Website: oakgov.com/veterans

Assists Oakland County veterans and their dependents in obtaining federal and state benefits.

ST. CLAIR COUNTY RESOURCES

Catholic Charities of Southeast Michigan

Phone: 810-987-9100

Website: ccsem.org

Council on Aging, Inc., Serving St. Clair County

Phone: 810-987-8811

Transportation: 844-289-7784

Website: thecouncilonaging.org

Countywide senior centers adult day, community meal sites, Meals on Wheels, home care, transportation, medical equipment loan closet, home safety program and chore services program

Michigan Department of Health and Human Services—District 74

Port Huron

Phone: 810-966-2000

Website: michigan.gov/mdhhs

St. Clair County Health Department

Phone: 810-987-5300

Website: stclaircounty.org/offices/health

St. Clair County Housing Commission

Phone: 810-329-9141

Website:

stclairhousingcommission.org

United Way of St. Clair County

Phone: 810-985-8169

Website: uwstclair.org

ADULT DAY SERVICES

For more information on Adult Day Services, see page 41.

Council on Aging, Inc., Serving St. Clair County Starpath Adult Day program

Phone: 810-984-8970

Website: thecouncilonaging.org

CHORE/HOME MAINTENANCE SERVICES

Assistance with lawn mowing, yard work and snow shoveling

Council on Aging, Inc., Serving St. Clair County

Phone: 810-987-8811

Website: thecouncilonaging.org

DEMENTIA SUPPORT

Dementia & Alzheimer's Resource Committee

Phone: 810-990-9558

Website: darcsc.org

DISABILITY SERVICES

Blue Water Center for Independent Living

Phone: 810-987-9337

Information and assistance, support groups, ramp assistance, advocacy and independent living skills instruction

FOOD ASSISTANCE

To find food pantries near you, contact the Food Bank Council of Michigan or visit pantrynet.org.

Food Bank Council of Michigan

Phone: 888-544-8773

Website: fbcmich.org

SNAP helpline provides assistance in applying for SNAP benefits. Also provides referrals to other resources.

MiCafe

Phone: 877-664-2233

Website: elderlawofmi.org/micafe
Assists in applying for SNAP and other benefits.

Senior Project Market Fresh Council On Aging, Inc., Serving St. Clair County

Phone: 810-987-8811

Website: thecouncilonaging.org
Provides participants free nutrition counseling and \$20 in coupons that can be exchanged for fresh fruits, vegetables and other healthy foods sold at local farmers markets and roadside stands.

FRIENDLY VISITOR/CALLER PROGRAMS

Council on Aging, Inc., Serving St. Clair County

Phone: 810-987-8811

Website: thecouncilonaging.org

HOME SAFETY/HOME INJURY CONTROL

Assistance with installation of handrails and grab bars

Council on Aging, Inc., Serving St. Clair County

Phone: 810-987-8811

Website: thecouncilonaging.org

IN-HOME ASSISTANCE

Council on Aging, Inc., Serving St. Clair County

Phone: 810-987-8811

Website: thecouncilonaging.org

LEGAL SERVICES

Elder Law of Michigan, Inc.

Phone: 866-400-9164

Website: elderlawofmi.org
Information, advocacy, legal advice and professional services for older adults and people with disabilities

Lakeshore Legal Aid

Phone: 888-783-8190

Website: lakeshorelegallaid.org

MEALS ON WHEELS

Council on Aging, Inc., Serving St. Clair County

Phone: 810-982-4400

Website: thecouncilonaging.org/senior-nutrition

MEDICAL/ADAPTIVE EQUIPMENT LOAN CLOSET

Wheelchairs, walkers and other assistive devices

Council on Aging, Inc., Serving St. Clair County

Phone: 810-987-8811

Website: thecouncilonaging.org

United Way of St. Clair County

Phone: 810-985-8169

Website: uwstclair.org

MENTAL HEALTH RESOURCES

St. Clair County Community Mental Health Authority

Phone: 810-985-8900

Website: scccmh.org

RAMP CONSTRUCTION

Council on Aging, Inc., Serving St. Clair County

Phone: 810-987-8811

Website: thecouncilonaging.org

TAX PREPARATION

AARP Foundation Tax Aide

Website: aarp.org/money/taxes/aarp_taxaide

Free tax preparation for people age 50 and older through trained volunteers. More than 5,000 locations nationwide in neighborhood libraries, malls, banks, community centers and senior centers. AARP membership not required.

Council on Aging, Inc., Serving St. Clair County

Phone: 810-987-8811

Website: thecouncilonaging.org

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TRANSPORTATION

Council on Aging, Inc., Serving St. Clair County
Phone: 844-289-7784
Offers countywide transportation.

VETERANS SERVICES

St. Clair County Department of Veterans Affairs
Phone: 810-989-6945
Website: sccvet.us

WASHTENAW COUNTY RESOURCES

Catholic Social Services of Washtenaw-Older Adult Services Unit

Phone: 734-712-7774

Website: csswashtenaw.org/seniors

Information and referral, volunteer caregivers, adult day services, friendly visitors and support for grandparents raising grandchildren

Huron Valley PACE

Phone: 734-572-5777

Website: huronvalleypace.org

See page 14 for more information on the Program of All-Inclusive Care for the Elderly (PACE).

Jewish Family Services of Washtenaw County

Phone: 734-769-0209

Website: jfsannarbor.org

Help finding resources, case management, friendly visitor program, transportation, caregiver support, help with Medicare and Medicaid

Michigan Department of Health and Human Services—District 81

Ypsilanti

Phone: 734-481-2000

Website: michigan.gov/mdhhs

Washtenaw County Office of Community & Economic Development

Phone: 734-544-6748

Website: washtenaw.org/569/Community-Economic-

Development

Affordable housing support, home rehabilitation loans, Meals on Wheels and foster grandparent program

Washtenaw County Department of Veterans Affairs

Phone: 734-973-4540

Website: washtenaw.org/959/Veterans-Affairs

Washtenaw County Community Health

Phone: 734-544-6700

Website: washtenaw.org/1129/Health-Department

ADULT DAY SERVICES

For more information on Adult Day Services, see page 41.

Catholic Social Services of Washtenaw-Older Adult Services Unit

The Oaks

Ann Arbor

Phone: 734-662-4001

Website: csswashtenaw.org

Turner Resource Center The Silver Club

Ann Arbor

Phone: 734-998-9352

Website: med.umich.edu/geriatrics/community/silverclub.htm

CARE/CASE MANAGEMENT

Jewish Family Services of Washtenaw County

Phone: 734-769-0209

Website: jfsannarbor.org



Case management services for older adults. Help identifying and accessing available community resources, including healthcare, financial and legal resources and emotional support.

CAREGIVER RESPITE PROGRAM

Catholic Social Services of Washtenaw-Older Adult Services Unit

Phone: 734-712-7774

Website: csswashtenaw.org
Interfaith volunteer caregiving program. Trained volunteers provide respite 2-4 hours/week.

CHORE/HOME MAINTENANCE SERVICES

Assistance with home maintenance

Ann Arbor Community Center

Phone: 734-662-3128

Website: annarbor-communitycenter.org

Catholic Social Services of Washtenaw-Older Adult Services Unit Neighborhood Senior Services

Phone: 734-712-7774

Website: csswashtenaw.org

DEMENTIA SUPPORT

Michigan Alzheimer's Disease Center

Phone: 734-936-8803

Website: alzheimers.med.umich.edu

Turner Resource Center

Phone: 734-764-2556

Website: med.umich.edu/geriatrics/

DISABILITY SERVICES

Ann Arbor Center for Independent Living

Phone: 734-971-0277

Website: annarborcil.org

FOOD ASSISTANCE

To find food pantries near you, contact the Food Bank Council of Michigan or visit pantrynet.org.

Food Bank Council of Michigan

Phone: 888-544-8773

Website: fbcnich.org

SNAP helpline provides assistance in applying for SNAP benefits. Also provides referrals to other resources.

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MiCafe

Phone: 877-664-2233

Website: elderlawofmi.org/micafe

Assists in applying for SNAP and other benefits.

Senior Project Market Fresh Washtenaw County Public Health

Phone: 734-544-2973

Website: washtenaw.org/1129/Health-Department

Provides participants free nutrition counseling and \$20 in coupons that can be exchanged for fresh fruits and vegetables at local farmers markets and roadside stands. Financial eligibility requirements.

FRIENDLY VISITOR/CALLER PROGRAMS

Catholic Social Services of Washtenaw-Older Adult Services Unit

Phone: 734-712-7774

Website: csswashtenaw.org

Jewish Family Services of Washtenaw County

Phone: 734-769-0209

Website: jfsannarbor.org

GRANDPARENTS RAISING GRANDCHILDREN SUPPORT

Catholic Social Services of Washtenaw-Older Adult Services Unit

Phone: 734-712-7774

Website: csswashtenaw.org

HOME SAFETY/HOME INJURY CONTROL

Assistance with installation of handrails and grab bars

Catholic Social Services of Washtenaw-Older Adult Services Unit

Neighborhood Senior Services

Phone: 734-712-7774

Website: csswashtenaw.org

HOUSING

Ann Arbor Housing Commission

Phone: 734-794-6720

Website: a2gov.org/housing

Housing Bureau for Seniors

Phone: 734-998-9339

Website: med.umich.edu/seniors

IN-HOME ASSISTANCE

Area Agency on Aging 1-B

Phone: 800-852-7795

Website: aaa1b.org

LEGAL SERVICES

Elder Law of Michigan, Inc.

Phone: 866-400-9164

Website: elderlawofmi.org
Information, advocacy, legal advice and professional services for older adults and people with disabilities

Michigan Advocacy Program

Phone: 734-665-6181

Website: lsscm.org

LGBT RESOURCES

Jim Toy Community Center

Phone: 734-995-9867

Website: jimtoycenter.org

MEALS ON WHEELS

Washtenaw County Office of Community and Economic Development

Washtenaw County Meals on

Wheels and Senior Cafe**Phone:** 734-544-6748**Website:** washtenaw.org/796/
Senior-Nutrition-Program
Serves Chelsea, Dexter,
Manchester, Milan and
Whitmore Lake**Ann Arbor Meals on Wheels****Phone:** 734-998-6686**Website:** med.umich.edu/
aamealsonwheelsServes City of Ann Arbor, Ann
Arbor Township, Pittsfield
Township, and Scio Township**Ypsilanti Meals on Wheels****Phone:** 734-487-9669**Website:** ymow.orgServes City of Ann Arbor, Ann
Arbor Township, Pittsfield
Township, and Scio Township**MEDICAL/ADAPTIVE
EQUIPMENT LOAN CLOSET***Wheelchairs, walkers and other
assistive devices***Ann Arbor Center for
Independent Living****Phone:** 734-971-0277**Website:** annarborcil.org**Aid in Milan****Phone:** 734-439-8420**Website:** aidinmilan.org**Emmanuel Lutheran Church****Phone:** 734-482-7121**Website:** emmanuelypsi.org/
medical-loan-closet**Faith in Action****Phone:** 734-475-3305**Website:** faithinaction1.org**Northfield Township Senior
Center****Phone:** 734-449-2295**Website:** twp.northfield.mi.us/
community_visitors/
senior_center**Ypsilanti Township Senior
Center****Phone:** 734-544-3838**Website:** ytown.org**MENTAL HEALTH RESOURCES****National Alliance On Mental
Illness of Washtenaw County****Phone:** 734-994-6611**Website:** namiwc.org**Washtenaw County
Community Mental Health****Phone:** 734-544-3050**Website:** washtenaw.org/1129/
Health-Department**TAX PREPARATION****AARP Foundation Tax Aide****Website:** aarp.org/money/
taxes/aarp_taxaideFree tax preparation for those
age 50 and older through
trained volunteers.**United Way of Washtenaw
County****Phone:** 734-971-8200**Website:** uwwashtenaw.org/
freetaxhelp**TRANSPORTATION**Many senior centers offer
transportation services. For a
full list of Washtenaw County
Senior Centers, visit the Area
Agency on Aging 1-B website
at aaa1b.org.**Ann Arbor Area
Transportation Authority
(AATA/The Ride)****Phone:** 734-996-0400**Website:** theride.org/Services/
Senior-Services**Ann Arbor Community
Center****Phone:** 734-662-3128**Website:** annarbor-
communitycenter.orgOffers transportation to St.
Joseph Hospital.**Myride2****Phone:** 855-697-4332**Website:** myride2.comA program of the AAA 1-B
that helps seniors and adults
with disabilities in Oakland,
Macomb and Wayne counties
find transportation and
understand their transportation
options.**Jewish Family Services of
Washtenaw County****Phone:** 734-769-0209**Website:** jfsannarbor.orgWheelchair accessible
transportation for shopping,
medical appointments and
errands in the Ann Arbor/
Ypsilanti area. Call for
information.

Helping you navigate your Medicare options – Call us at 800-803-7174



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The Michigan Medicare Medicaid Assistance Program (MMAP) is a free health-benefit counseling service, delivered by your local Area Agency on Aging, that can help you with your Medicare choices including:

- Understanding your Medicare insurance needs
- Comparing Medicare Drug Plans
- Explaining Medicare Advantage Plans
- Reviewing Medigap coverage choices
- Applying for help to pay for Medicare coverage including Extra Help for Medicare Part D, Medicare Savings Plan and the Michigan Medigap Subsidy Program to help pay for Medigap plan costs.