



LIVING AT HOME SENIORCARE Newsletter

Www.lahseniorcare.com

603-546-6060



Living At Home SeniorCare is a NH State Licensed Home Health Care Provider.

Living at Home SeniorCare was established to help the elderly and disabled remain safe and cared for in the comfort of their own homes. We also provide respite for family members faced with the challenge of caring for elderly loved ones. Now in our fifth year, we have delivered home care services to over 500 clients.

Home Care services include personal care, homemaking, dementia care, transportation, meal preparation, medication management, skilled nursing assessments & more.

For more information about how our services can help provide peace of mind to families and their loved ones, please call 603-546-6060 or visit our website at www.lahseniorcare.com

We are a proud member of "The Senior's Choice," The Home Care Association of New Hampshire and S.A.F.E.
www.safenh.org

VA Aid & Attendance Services Grant

A source of help for veterans & surviving spouses

This valuable, but little known entitlement program funded by the Veteran's Administration can help pay for in-home care as well as other routine living expenses.

"Like many in our nation, we have a special place in our hearts for veterans. My father served in the Army in World War II, my sister served in the Women's Army Corps, my niece served in the Air Force, and many of my high school friends served during the Viet Nam era. Even closer to home, we have a son, Tim, who is part of the Army "Future Soldiers Program." "When we learned that there was a way to help our country's veterans and surviving spouses access a federally funded benefit that would pay for home care services, we jumped at the chance to get the news out," states Adele Belfsky, President, Living At Home SeniorCare. "We were extremely surprised to learn that 75% of men over the age of 75 served in World War II or the Korean War and less than 25% are aware of this Aid and Attendance benefit," continued Belfsky.

This program provides qualified veterans with financial assistance of \$1,000 to \$1,843 per month. This money can help cover the cost of care they desperately need to remain living independently. "I think this is the least we can do for our vets, stated Belfsky."

"As we recognize our veterans on Veteran's Day this year, we would like to get the word out to the huge number of veterans who are eligible for this benefit but are not aware that it exists, Belfsky said." We are encouraging veterans who served at least 90 days of active duty with at least 1 day during World War II, Korean War, Vietnam War and Persian Gulf War and were honorably discharged to call the NH State Veterans Council 603-624-9230 and see if they might qualify for help. "We are truly excited about helping veterans in our area access the care they need and deserve, noted LAHSC president."

Living at Home SeniorCare is a provider of home care services to many area Veterans; we feel privileged to be able to serve them.

“Holiday Silent Auction”

At Nashua Crossing on November 19th



Nov. 19, 6-9 PM

Nashua Breakfast Exchange Club Silent Auction Benefit

“Home for the Holidays”

Hosted By: Nashua Crossing, 674 W. Hollis Street, Nashua

Music, Champagne, Wine and Hors d’Oeuvres

The Nashua Breakfast Exchange Club’s “Heat Up/Cool Down” program helps senior citizens afford the cost of home heating fuel. “It’s important for the community to pull together in difficult financial times to help seniors who have given so much to the community....and give back a little,” said Michelle Canto, the outreach and admissions supervisor for St. Joseph Hospital Senior Adult Mental Health Unit and chairwoman of the BXC committee responsible for planning the “Home for the Holidays” silent auction. The Wednesday, November 19th, event will feature wreaths, themed stockings (one featuring Red Sox Tickets donated by Peter Davis of St. Joseph Hospital) several restaurants have donated stockings, and a variety of holiday decorations will be available for bid to benefit the “Heat Up/Cool Down” program. As always, this event promises to be a festive evening to enjoy with family and friends...as you support a great cause!

If you would like to display your talents as a crafter or for more information, please contact Kerri Elliot at 882-2898 or email kelliot@benchmarkquality.com.

“Philips Lifeline Medication Dispenser”

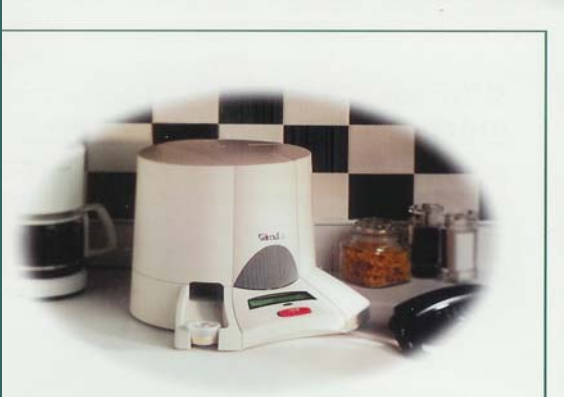
Formerly Known as the “MD.2”

As of July ‘08, Philips Lifeline Systems is the new owner of the MD.2 Medication Management System!

Living at Home SeniorCare has been distributing the MD.2 for nearly 3 years and will continue with the MD2 under a new agreement with Philips Lifeline. According to Vice President, Frank Belfsky, “the purchase of the MD2 medication dispenser by Philips is a strong endorsement of the value of this system. It is very complimentary to the Philips lifeline systems in that they both provide necessary tools to assist seniors remain independent in their own homes.” The MD2 will now be called the “Philips Lifeline Medication Dispenser” and will be available on a rental & monitoring basis only. From our experience, 85% units installed in our patients homes have been on a rental basis as most of the users of the machine are not sure how long it will be needed.

Representatives of Philips Lifeline have expressed support of New Hampshire Medicaid Program for the MD.2 under Pathways For Independence (formerly known as HCBC.) As more and more Case Managers and area nurses learn about the MD.2, demand has dramatically increased. For example; of sixteen Medicaid patients approved, fourteen are currently having their meds dispensed by the MD.2. Case Mangers, Nurses and family caregivers alike have commented on the reliability and the effectiveness of the MD.2 in ensuring medication compliance. Here’s a review for qualifying a patient for the MD.2:

- The patient has memory issues that make it difficult to remember to dispense or take medications
- There is a history of under/over dosing of medications
- A recent hospitalization attributed to medication non compliance
- Patient risk of nursing home admission due to medication issues
- Dexterity issues prevent patient from accessing meds from pillboxes or prescription containers.
- Serious health issues arise when patient does not take medications as prescribed.
- Caregiver is available to receive phone calls if patient does not dispense meds.



In all cases, a Pathways For Independence (HCBC) nurse must authorize the MD.2 on patient’s care plan. Current diagnosis for which the MD.2 has been approved include Alzheimer’s Disease, CHC, MS, Parkinson’s, and Bipolar Disorder.

For more information about the
Phillips Lifeline Medication Dispenser
contact Frank Belfsky at 603-546-6060.

Long Term Care Costs in NH

The MetLife survey results are in.....

MetLife Mature Market Institute provides two annual national surveys on the cost of Long Term Care. One is on Adult Day services and Homecare costs. The other is a survey on Nursing Home and Assisted Living Facility (ALF) Costs. The survey results are the private pay rates reported from licensed agencies and facilities

Here is an extraction of the Private Pay Home Care rates compared to Medicaid rates pertaining to New Hampshire:

	Home Health Aide/per hour			Homemaker/ per hour		
	Low	High	Avg.	Low	High	Avg.
Private Pay	\$19.00	\$39.00	\$26.00	\$12.00	\$39.00	\$22.00
Medicaid Rate			\$23.00			\$18.00

The Home Care data is for the entire state. The national average for a HHA is \$20.00 per hour while homemaker it is \$18.00. It's not surprising the cost of delivering home care on average is about 25% higher in NH than the national average. Home Care companies are highly regulated in NH, while some states do not even require a license to operate a Home Care company. Add to this higher cost of wages paid to direct care workers in NH. Note: Living at Home SeniorCare participates in the Home Care survey and our published rates are similar to the state average.

As for Adult Day, the avg. private pay daily rate for Adult Day services in Southern New Hampshire is \$62.00, and \$54 per day in the rest of NH.

For Assisted Living costs (ALF), the survey distinguishes between the Manchester (MHT) area and "Rest of State". There is a wide range in the MHT monthly cost from a low of \$1500/mos. to a high of \$6720./mos. The MHT avg. is \$3838/ month & with the rest of state at \$3516/month. As always the devil is in the details. Each facility is unique and pricing often includes services as part of the base package in one ALF that you pay extra for in another.

Nursing homes cost are calculated on a per day basis for semi-private and private rooms. For MHT area the average is \$249 for semi private and \$265 for a private room. Per 30 day month this translates to \$7470/mos. & \$7950/mos. respectively. From this survey we see that the avg. private pay, private room, nursing home is twice the cost of the avg. assisted living facility. There was little change in nursing homes costs from 2007.

Since there are many variables involved, it is hard to draw any conclusions about the cost effectiveness of Home Care compared to Assisted Living or Nursing Home care. If 24X7 care is an absolute requirement than Assisted Living or Nursing Home makes sense money wise. Still, many seniors though requiring help with ADL's, are resistant to leave their homes and they (or family members) are often willing to pay more dollars to remain at home. Although not covered by these surveys, hiring a "Live In" can also be an option to reduce the cost of continuous home care.

For the complete MetLife surveys, and a great resource for caregivers please visit : www.maturelifeinstitute.com

News Briefs:

Vivien Green is the new Executive Director of the Nashua Senior Activity Center. She replaces Pat Francis who has retired after 30 years of service. Vivien was mostly recently with the AARP, Divided we Fail Campaign.

Ruth Morgan, of Gateways Community Services, was recognized by the New Hampshire AARP with the Community Partner Leader of the Year Award. This prestigious award acknowledges Morgan's success at building bridges between AARP, the local community, government, faith-based organizations, non-profits, and the private sector.