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Navigating Skilled Care

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Kathy Waters, a wealth management financial advisor working in CAPTRUST's Lake Success, New York, office, knows the circumstances all too well.

As her own mother's cognitive mobility became impaired, Waters noticed the gas and water were sometimes left running in her home. "It wasn't safe for her to live on her own anymore," says Waters. "She had started to become a danger to herself and possibly to others." The elder Waters was 89 years old when her family made the difficult decision to move her into an assisted living facility.

Choosing Wisely

Most of Waters's clients only start to plan for long-term care once the loved one in question reaches 82 or thereabouts. But Waters says that whether you're considering hiring aides or finding a long-term care facility, it

involves a considerable amount of planning.

Ideally, she says the discussion of whether an individual should go to a facility or stay at home should happen closer to age 60 or 70. “Although it’s hard to face the fact that health problems may someday result in a loss of independence, if you begin planning now, there will be more options open in the future,” says Waters.

Of course, there are several key considerations when selecting a long-term care facility.

Waters suggests starting with recommendations from the hospital or doctor’s office and then from friends, relatives, social workers, and religious groups. Consider what is important to your loved one—nursing care, meals, physical therapy, activities and trips, religious services, location, hospice care, or special care such as for dementia. Once you’ve got your short list of choices established, here is what to consider next.

Quality of care. Waters recommends doing your homework by making sure that the nursing home or assisted living facility is certified by the state and asking to see the inspection report and certification of any safe facility you are considering. Ask about the credentials and training of the staff, including doctors, nurses, and aides. Can residents see their own doctors, or must they see the staff physician? Do they have access to dentists, eye doctors, and other specialists? Does the facility have clear procedures that it follows in medical emergencies?

You can get this and more information through Medicare’s Care Compare site, which uses a five-star rating system to help the public find and compare nursing homes, hospitals, and other providers. The website, [medicare.gov/care-compare](https://www.medicare.gov/care-compare), includes an overall rating for each facility and separate scores based on health inspections, staffing, and quality measures.

Transportation. Arranging transportation for medical services can be a challenging process, especially for someone in a wheelchair or restricted to a bed. Waters says it can get complicated if a resident in assisted living needs to see a specialist, such as a urologist or cardiologist, or even needs to go for routine health checkups and the facility does not have people to escort them.

In fact, Waters tried something new last month when she called the neurologist’s office on behalf of her client. “I wanted to have the doctor go and speak to my client at her facility,” she says. “In this case, it did not work out, unfortunately.” It’s important to make sure you understand how transportation is arranged for nonemergency, routine, or unexpected medical services.

Location. Location is important for myriad reasons. It can affect how often an individual is visited by family and friends, which, in turn, affects the resident’s mental and emotional well-being. The right location can also help ensure quality-of-care issues are more easily addressed as problems arise. Moreover, proximity to things like religious services, shopping, socialization, and opportunities for outdoor activity can be important factors for your loved one.

Waters considered each of these components when choosing living arrangements for her mother. “I was able to join my mother for breakfast and dinner, and my brother came for lunch.”

Location isn’t everything to everyone, however. “Many clients rely on financial advisors to guide them, particularly around understanding what they can afford,” says Waters.

Cost. Waters helps her clients plan accordingly by either looking to purchase long-term care policies, which can be expensive, or doing estate planning and allocating money into Medicaid-protected trusts so they can go to a facility that is paid through Medicaid.

The major advantage to using income, savings, investments, and assets (such as your home) to pay for long-term care is that you have the most control over where and how you receive care.

Long-term care generally ranges between \$6,000 and \$12,000 a month nationwide, says Waters. In New York, Waters's home base, nursing homes run from \$15,000 to \$20,000 a month. Full-time aides in your home can cost about \$12,000 a month. Some facilities also offer a buy-in—where you actually buy the apartment. “It can be rather expensive,” Waters says. “One set of clients paid about \$700,000.”

Safety and security. Ask when the facility was built or updated. In general, the newer the building, the more fire-resistant it will be due to changes in building codes. Look for safety features such as wide hallways, doors that unlock from the inside, handrails, and grab bars.

Healthcare aides and nursing home caregivers are compassionate people, but they are also among the lowest-paid healthcare professionals—and that makes some of them vulnerable to temptation. “You have to be cognizant of valuables,” says Waters. “Unfortunately, my mother’s wedding band was stolen.”

To some degree, Waters says, you can counter this temptation by making healthcare workers feel important and valued. “I tell them they are my eyes and ears; I’m counting on them to communicate to me.” Don’t make them feel like the hired help, she says. “Make them feel like a person who is respected for taking care of a loved one.”

While it can be difficult to take objects of sentimental value like a wedding ring or a special watch, if it’s of any monetary value, Waters recommends replacing it with something comparable but less expensive.

Soft aspects. What kinds of social and entertainment activities are planned for the residents? Is there a library? A place where residents can purchase personal items? Is there a safe place to enjoy the outdoors, such as an enclosed garden? Are meals served in a communal dining room or are residents served in their rooms?

You have to do your research and find the special extras unique to each facility, says Waters. “Some extras, such as medication management, are included in the monthly maintenance and some facilities bill separately for them.”

In Waters’s mother’s case, the family felt fortunate—a good friend’s mother lived at the same facility. “That was part of why I wanted my mother going there—she would know somebody,” says Waters.

“Many clients wish they could bring their parent into their home, but that’s rarely feasible,” says Waters. “So, we are fortunate that these long-term care facilities are available, and, overall, they do a good job providing care and entertainment for people who are very vulnerable.”

Many local and national caregiver support groups and community services are available to help you navigate the process of finding long-term care for yourself or for loved ones. If you don’t know where to find help, contact your state’s department of eldercare services. Or call 800.677.1116 to reach the Eldercare Locator, an information and referral service sponsored by the federal government that can direct you to resources available nationally or in your area.



Have questions? Need help? Call the CAPTRUST Advice Desk at 800.967.9948, or [schedule an appointment](#) with a retirement counselor today.