

# MILLER, MONSON, PESHEL, POLACEK & HOSHAW

A PARTNERSHIP OF PROFESSIONAL LAW CORPORATIONS

## NEWSLETTER

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DeEtte L. Loeffler

### **Filing Deadline Looms**

Estates of individuals who died between January 1 and December 16, 2010 have until November 15, 2011 to make an election to adopt the pre-December 2010 modified basis carryover rules. Normally estates have nine months from the date of death to file an estate tax return (and on extension can have up to 15 months to file - although tax must be paid at the 9<sup>th</sup> month). For 2010, no extension will be allowed. Estates valued at under \$5 million are not required to file a federal estate tax return for 2010.

### **Current Options for Seniors**

Seniors have a number of options for assistance as they age. In addition to the traditional "old folks home" of bygone years, in-home care and senior living centers abound. The level of assistance or care depends on the wishes of the senior, his or her personal needs and limitations, and of course on personal finances and available insurance.

#### **Senior Living Facilities**

San Diego has a large number of senior living facilities offering independent living, assisted living and Alzheimer's care.

Independent Living is available for seniors who wish to increase their social interactions while maintaining their independence. Senior living facilities offer community living to seniors with minor to moderate limitations who wish to continue to live as independently as possible. Each resident (or couple) generally has a separate apartment with the ability to cook meals in that apartment or to take their meals in a community dining room. Many facilities include a library and community social areas such as a game or TV room. Larger facilities may offer walking paths, group outings and other fun activities. Most do not offer any level of medical care, but will maintain and dispense resident medications for self-administration. Residents may be required to purchase their apartments, but some facilities offer rental on an annual or even a month-to-month basis. Such facilities are beneficial to those with adequate resources, a willingness to move, and a desire to maintain their independence.



#### **Choosing the Right Level of Care**

DeEtte L. Loeffler

The U.S. Department of Health and Human Services estimates that by the year 2030 approximately 19% of the U.S. population will be aged 65 or older (some 72 million people).<sup>1</sup> Chances are you, or someone you love, will be part of this age group. With the increase in the senior population comes a greater need for personal and medical care. This article provides an overview of a few of the options available to older adults and their families to permit them to continue to live enjoyable and fulfilling lives. Understanding your options now will assist you to better plan for the future.

Assisted Living is care provided to seniors who need assistance with the activities of daily life, such as dressing, bathing, eating, and use of bathroom facilities. Similar services are available to seniors who choose to remain in their own homes. Assisted living facilities encourage seniors to maintain their independence to the extent possible while providing an environment that encourages social interaction with other seniors.

Alzheimer Units generally offer some level of medical care along with personal care services. These units are often co-located with independent or assisted living facilities to ease the transition as a senior's condition deteriorates.

## In-Home Care

Increasingly popular, many seniors are choosing to remain in their own homes with the assistance of a spouse, other family members, or friends. Other seniors choose to move in with their children or other family members. In addition to the care offered by these family members, other care and programs are available to improve the lives of the senior and the care giver.

Assisted living services are provided by professionals to assist seniors with the activities of daily life. A number of local companies provide these services. Individual care givers can also be hired, but you should obtain a background check and references before hiring one.

Skilled nursing care is often available to provide medical assistance, such as monitoring blood pressure and providing medications. Insurance and/or Medicare may be available to pay for this care. Such services are often less expensive than those provided in a care facility and permit the senior to remain at home for a longer period of time.

Respite Care is care provided by third parties to give the care giver, and the senior, a break from each other. Caring for a disabled spouse or parent is time consuming and often physically demanding. Family care givers can become isolated, fatigued, depressed or even ill. Respite care provides a short-term, temporary break to the care giver, allowing him or her to rest, reconnect with friends, and take time for him/herself. This type of care can take many

forms, depending on the needs of the disabled person, the availability of friends and family to help, and the resources available for this purpose.

Respite care can be provided by family, friends, volunteers or even professionals. Having another family member or friend take the senior to a social event or medical appointment can give both parties a needed break. Volunteer or paid assistance for a few hours a week, or for an occasional weekend, can offer tremendous relief to the care giver and can provide the senior with variety.

Adult day centers are another option, and are especially helpful where the primary care giver must continue to work outside the home. They are generally open during the work day, Monday through Friday, for seniors who can no longer manage without assistance, or who are lonely or isolated. These centers provide activities and companionship for seniors, as well as a safe, supportive, and positive environment with nutritious meals and snacks.

## Nursing Homes

Nursing homes provide medical care not generally available in Senior Living Facilities or at home. There are three (3) different types of nursing homes in California, providing differing levels of care for their residents.

"Intermediate Care Facilities" (ICFs) provide the least medical care of the three types. ICFs provide inpatient care to persons who do not require continuous nursing care, but do need nursing supervision and supportive care. There are many Medi-Cal certified ICFs which qualify for payments under that program, but at a lower rate than other nursing homes as they provide less skilled care. Medicare beneficiaries can use Medicare for health services.

The most common type of nursing home is a "Skilled Nursing Facility (SNF)", which provides 24-hour long term skilled nursing and supportive care. There are many licensed SNFs in California certified to participate in both Medicare and Medi-Cal.

Finally, "Distinct Part/Skilled Nursing Facilities (DP/SNF)" provide more extensive care for seniors with greater medical needs. These

facilities are generally located within a hospital. Medi-Cal pays higher rates for these services than for other types of nursing homes.

## **Hospice and Palliative Care**

Hospice and palliative care focus on prevention and relief of pain, as well as quality of life issues. They can help to maintain the dignity of the individual during a difficult time of life. San Diego has a number of state of the art hospice facilities.

Hospice care is usually available to persons with terminal conditions who are in the last stages of a disease or illness. Hospice provides care that focuses on comfort, quality of life, pain and symptom relief. Depending on a senior's insurance and finances, hospice care may be limited to a few weeks, or can be available for several months. Medicare is available to cover some, and possibly all, of these expenses.

In contrast, palliative care is available for those with pain management issues, regardless of diagnosis, and can be provided for seniors living at home as well as those in various types of care facilities.

## **California Veteran's Homes**

California veterans may be eligible for care in a facility operated by the California Department of Veteran's Affairs. To be admitted, the senior must be over the age of 62 or disabled, have served on active duty in the military, have received an honorable or under honorable conditions discharge, and be a California resident. These facilities provide full medical and dental care, and various levels of care, from independent living through 24-hour skilled nursing services. There are currently six (6) such facilities in California (Chula Vista, Yountville, Barstow, Lancaster, Ventura, and West Los Angeles) and two (2) additional facilities (Redding and Fresno) are under construction. More information regarding each facility and the services offered at each can be obtained on the California Veteran Affairs website at <http://www.calvet.ca.gov/VetHomes/Admissions.aspx>.

## **Armed Forces Retirement Homes**

Veterans are also eligible to live in the Armed Forces Retirement Homes located in Gulfport, Mississippi, and Washington, D.C., if their active duty military service is at least 50% enlisted, warrant officer, or limited duty officer, and if they qualify under one (1) of the following categories: 1) Are 60 years of age or older; and were discharged or released under honorable conditions after 20 or more years of active service; 2) Are determined to be incapable of earning a livelihood because of a service-connected disability incurred in the line of duty; 3) Served in a war theater during a time of war declared by Congress or were eligible for hostile-fire special pay and were discharged or released under honorable conditions; and are determined to be incapable of earning a livelihood because of injuries, disease or disability; or 4) Served in a women's component of the armed forces before June 12, 1948; and are determined to be eligible for admission due to compelling personal circumstances. Veterans are not eligible if they have been convicted of a felony or are not free from alcohol, drug or psychiatric problems. Married couples are welcome, but both must be eligible in their own right. At the time of admission, applicants must be capable of living independently.

Currently there is a waiting list for both facilities. After the application process and approval, the veteran's name is placed on the waiting list. The waiting time may be in excess of two (2) years. More information can be obtained by calling (800) 332-3527 or (800) 422-9988, or visiting the website at: [www.afrh.gov/](http://www.afrh.gov/).

## **Conclusion**

Determining the best options for yourself or your loved ones can be a complicated task. Knowing more about what options exist can help to ease this process. We hope that this article has been helpful to you.

<sup>1</sup> [http://www.aoa.gov/aoaroot/aging\\_statistics/index.aspx](http://www.aoa.gov/aoaroot/aging_statistics/index.aspx)

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