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# INTRODUCTION

The Education Committee of the Coalition for Long Term Care is pleased to offer this guide to assist in community education regarding long term care services. Most people are active, contributing members of their families and communities. Some, however, become increasingly frail and dependent on others for assistance. This dependency may be the result of chronic illness, hospitalization, or simply the gradual and progressive loss of physical and/or mental abilities. These individuals need help on a regular, ongoing basis in order to cope with the tasks of daily living. This spectrum of services provided in or out of home is called "long term care." However, it is increasingly referred to as "continuing care." Long-term care can range from a daily home delivered meal, to round-the-clock medical care.

Although it is difficult to measure functional disability, long term care is the ongoing need for help with activities of daily living (ADLs) and instrumental activities of daily living (IADLs). These are defined as follows:

- **ACTIVITIES OF DAILY LIVING (ADLs):** These activities include bathing, maintaining personal hygiene, dressing, mobility, transferring (moving from bed to chair), toileting, self-administration of medications and eating.
- **INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADLs):** These activities include housework/cleaning, shopping, laundry, getting to places out of walking distance, preparing and cooking meals, reheating meals, handling personal business/finances and using the telephone.

Faced with changing conditions, infirm persons and their families are often bewildered by the array of long term care services and agencies and are overwhelmed by the task of selecting and obtaining the most appropriate type of care. It is hoped that this guide will assist in answering questions and providing access to services.

As a way of protecting the privacy of health information, HIPAA (the Health Insurance Portability and Accountability Act) became effective nationwide in April of 2003. If you wish to have your doctor, dentist, medical care nurse, hospital staff, etc. discuss your medical care and issues with anyone besides yourself you must take the responsibility of signing a release of information form specifying to whom your health care provider can disclose information.

The Cortland County Coalition for Long Term Care, established in 1982, is a community coalition which represents all of the providers of long term care. The Coalition is committed to helping individuals gain access to appropriate care services, assessing changing needs in the system, identifying and developing new services to accommodate unmet needs, addressing policy issues, and educating the community regarding long term care services.

# I. ASSESSMENT & CASE MANAGEMENT SERVICES

## WHAT IS AN ASSESSMENT?

"My 85-year-old widowed mother lives alone and has become increasingly forgetful, to the point of endangering herself. Her vision and hearing seem to be getting worse, and it has become very difficult for her to shop for groceries and prepare meals. She wants to stay at home. Is this possible? Is her physical condition going to get worse? Is her safety in greater jeopardy?"

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"My widowed father is being discharged from the hospital after a stroke. The doctor says he can't manage alone and must go to a nursing home. I work all day. Must he go to a nursing home? What care does he need and am I responsible for paying for it?"

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I am a 78-year-old widow living alone and feeling sad. I have no children and my close friend died eight months ago. My money doesn't go very far. It's almost impossible to keep up my apartment and take care of myself. What is wrong with me? Is there someone I can talk to?"

---

"I've lived with my husband for 58 years. Since his heart attacks 12 years ago, I've cared for him. I'm weary from arthritis, hardly able to get up and down the stairs. Can I get a housekeeper and someone to go to the stores for me? What happens to us when our money runs out?"

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"My sister and I are in our eighties and live together in an apartment. We have always been close friends as well as sisters, and I am terribly worried that she is showing signs of Alzheimer's disease or possible dementia. Her personality seems to have changed, she is not eating well and she becomes easily confused. She refuses to see her physician, and I know she needs to be evaluated for proper care. I am frightened for both of us. What can I do?"

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My husband and I both work full time. We have three children, the youngest being two and one-half years old with multiple medical problems and needs since birth. Is there assistance to help manage our son's needs at home so we can continue to work and support our family?

---

I am a forty-five year old man who had a major stroke three years ago. I rely totally on my wife for all of my care. Is there some assistance available in the home so she can have time for the rest of our family and household needs, and also have some time for herself?

---

The point has come in the lives of these people when physical or emotional decline interferes with comfortable living. They can no longer care for themselves or manage their affairs without help. In order to help them, it is necessary to understand how their mental and physical impairments affect their daily living. This understanding comes as a result of an assessment (or evaluation) of the person's needs, weaknesses and strengths. An assessment determines a person's capacity for self care and takes into consideration available support from relatives and friends. In short, an assessment explores the physical, mental, emotional, social and economic aspects of the person's life to help determine a plan of care.

## **WHAT FACTORS ARE CONSIDERED IN AN ASSESSMENT?**

- What is the chronic condition or illness for which the person needs help? What is the current and recommended treatment?
- What tasks can the person perform independently (e.g. shopping, cooking, grooming, toileting, moving about, house-keeping)?
- Can the person follow directions, direct helpers, manage his/her own affairs?
- Is the person affected by memory loss or impaired judgment?
- What support is available from relatives, neighbors, friends, or clergy to give care or monitor care at home?
- In what ways does the physical layout of the person's home help or hinder independent living? Can it be adapted, if necessary?
- What services are available in the community to meet the person's needs? Does he/she meet medical, financial, and geographical criteria for these services?
- Given realistic choices, what are the person's preferences for care?
- What is the person's ability to pay for necessary services? If finances are limited, what financial assistance is available?

## **WHO DOES AN ASSESSMENT? WHERE IS IT DONE?**

Currently, there are two basic types of assessments:

### **1. Medical Assessment:**

A medical assessment is completed by a professional medical person who is responsible for filling out required evaluation forms.

When the person is living at home, the assessment can be made by the family physician, a community health nurse, or a physician specializing in geriatric medicine. Contact your physician, public health department, or local hospital for information or referral.

When the person is in the hospital, a discharge planner or social worker will assist in securing needed services based on medical and social evaluations. It is useful to request this service as soon after admission to the hospital as possible.

On the basis of this evaluation, a plan of care is developed. Recommendations are then matched with appropriate and available services and programs in the community or in an institutional setting. In both cases, input from the older person himself, his family and other knowledgeable people such as social workers, speech, physical and occupational therapists is needed to make an accurate evaluation. Many services and programs require specific assessment forms. (For example, see page 38 for explanation of the assessment forms required for nursing home admission.)

## **2. Social Worker or Case Manager's Assessment:**

This type of assessment is geared to persons who require non-medical, in-home or community-based services.

To help these individuals, case management services have been developed and are available through community agencies and social workers. The case manager assists in solving problems, coordinating supportive services and obtaining benefits and entitlements. Referrals for case management can be made by family, neighbors, business organizations, hospitals, etc. to the [Department of Social Services](#), the [Health Department](#), and the [Area Agency on Aging](#).

## II. DISCHARGE PLANNING

Individuals who have been hospitalized often require some special planning for care after they are discharged. This care can range from assistance at home with the daily activities of living such as bathing, dressing, toileting, etc. to care in a rehabilitation facility or a nursing home. It is important for the patient and/or family to make early contact with the hospital's Discharge Planner who has the responsibility to provide a plan for post-hospital care. Discharge planning in many hospitals is coordinated through the Social Work Department.

The [New York State Department of Health](#) regulations under Article 28, Part 405.9 include the following Discharge Planning Guidelines:

- Hospitals are required to have a coordinated discharge planning program to ensure continuity of care and the most effective utilization of hospital and community-based health and social services.
- Hospitals are required to have written criteria for a high-risk screening system at time of admission to promptly identify patients who may need post-hospital care and planning.
- All health care professionals play a role in assessing a patient's post-hospital needs and developing individualized comprehensive discharge plans consistent with the physician's orders and patient's needs.
- Physicians have a key role in determining medical readiness for discharge and communicating this information to patients, families and other staff.
- Discharge planning shall include patient and family participation in the decision-making process regarding post-hospital care and the selection of specific services.
- Patients and family representatives shall be provided with information regarding the range of community services available.

Post-hospital care planning shall include consideration of the following types of services:

- 1. Home care**
- 2. Residential health care facilities**
- 3. Hospice**
- 4. Adult Day Services**
  - Social Model Adult Day Services
  - Medical Model Adult Day Services
- 5. Respite Care**
- 6. Community health, mental health and social agencies**
- 7. Information and referral regarding entitlements such as Medicaid, food stamps, prescription subsidies, Social Security Disability, public assistance**

Hospitals must provide patients with a written discharge notice and a written discharge plan, which includes a written list of medications that the patient is to take at home following hospitalization. Patients seen in the Emergency Room but not admitted shall also be provided with discharge planning instructions/services.

The Peer Review Organization (PRO) is a nonprofit, physician sponsored, medical review organization under contract with the federal government to evaluate care provided to Medicare beneficiaries in New York State. Patients covered by Medicare who feel that they are being discharged too soon, or that their discharge plan does not meet their health care needs, or that services are not in place for post-hospital care, should call the PRO at 1-800-331-7767. This should be done as quickly as possible.

**For information on how to pay for LTC services, see Part V, page 21.**

### III. HOME CARE

#### WHAT IS HOME CARE?

Home care services are a range of health and related support services available to the person who prefers to remain at home but cannot live alone without assistance. Home care may help some people achieve and sustain an optimum level of health and independence. For others, it may retard further deterioration or sustain the person for an interim period while institutional alternatives are being explored or awaited.

Home is more than physical space or shelter. It implies security, privacy, independence and comfort, a world of family interactions and activities, pleasurable memories, and valued possessions. Understandably then, most people and their families prefer home care if they can also manage the costs, monitor services and locate appropriate services.

#### WHAT ARE THE TYPES OF HOME CARE?

The spectrum of home care services falls into two general categories: skilled care and supportive services.

**Skilled Care** is given under the direction of a physician and consists of health services provided by professionals such as nurses and therapists. Services include nursing care, physical therapy, speech and hearing therapy, occupational therapy, social services, etc.

**Supportive Services** are used alone or in combination with skilled health services. They include assistance with personal needs (walking, bathing, dressing), chore services (shopping, meal preparation, light housekeeping), home delivered meals, telephone reassurance, etc.

#### WHAT AGENCIES PROVIDE HOME CARE SERVICES? WHAT KEY TERMS SHOULD BE UNDERSTOOD?

An agency committed to quality care carefully evaluates the home situation and develops a plan of service with the individual and his family that meets health, social and financial needs. The terms LICENSED and CERTIFIED describe agencies and their personnel:

- **Licensed Agencies:** In New York State, agencies that provide hands on care must be licensed in order to operate. [The State Department of Health](#) oversees these licenses. An agency has to meet basic legal and operating requirements as well as basic standards of care.
- **Licensed health personnel** pass a state test and are issued a license by the N.Y. State Department of Health or Education which permits them to work. Homemakers/home health aides are not generally licensed by states but often must meet special certification requirements.

- **Certified Home Health Agencies:** The State Health Department certifies home health agencies to ensure that these agencies meet the Medicare Conditions of Participation. Certified agencies are the only ones that are eligible for payment from Medicare. The agencies also may provide Medicaid and other home health services. To become certified, an agency must meet basic federal and state standards in relation to standards of patient care and standards of organizational competence.
- **Certified health personnel** must meet the specific standards set by the national or state organizations representing their profession. The standards usually require passing a standardized test and/or providing proof of work experience.

## WHAT PERSONNEL PROVIDE HOME CARE SERVICES?

- **Public/Community Health Nurse**

A professional registered nurse makes an initial assessment in the home of the patient/person and, together with the Physician, patient and family, designs a plan of care which requires physician approval. Specific services include the following:

- assessing patient's needs;
- providing nursing care such as giving injections, changing dressings, and colostomy, catheter and tracheotomy care;
- teaching and providing guidance to patient and family about managing care;
- interpreting physician's orders for treatment, special diets and medicines;
- reporting back to doctor as needed.

- **Physical Therapist**

Provides therapy needed by a patient who has lost some use of limbs or muscles or who has become debilitated due to illness or hospitalization

- **Speech/Language Therapist**

Helps patient whose speaking or hearing ability is impaired to relearn and practice language/communication skills

- **Medical Social Worker**

Provides counseling to assist patient and/or caregiver in adjusting to his disease and/or disability.

- **Occupational Therapist**

Evaluates patient's ability to perform the tasks of daily living (dressing, washing, walking) and retrains patient in these activities

- **Home Health Aide/Personal Care Aide**

Provides personal care services under supervision of nurse:

- prepares and serves diets;
- assists with grooming, bathing, toileting, walking, eating, dressing;
- assists patient to follow medical recommendations such as increased physical activity and reminding patient to take medications;
- performs incidental household tasks essential to the patient's health needs.

- **Housekeeper/Chore**

For the person who can care for personal needs (toileting, dressing, walking), the housekeeper provides assistance with routine household tasks, such as housecleaning, laundering, grocery shopping and routine noncomplex meal preparation.

- **Respite Volunteer**

Offers companionship. The companion does not perform household tasks, personal care or nursing services.

<p style="text-align: center;"><b>WHAT QUESTIONS SHOULD BE ASKED BEFORE SELECTING A HOME CARE AGENCY?</b></p>
---------------------------------------------------------------------------------------------------------------

The following list of questions can help a person select a home health agency:

- What is the availability of aides in my geographical area?
- Is the agency currently accredited, certified and/or licensed for home care?
- Does it have written statements outlining its services, eligibility, cost and payment procedures, employee job descriptions, malpractice and liability insurance?
- Can it provide references from professionals, such as hospital or community agency social workers, who have used its services?
- Is the plan of care carefully and professionally developed with the individual, the family, and the physician?
- Is the plan of care written out? Are copies given to the workers in the home and to the older person and/or responsible family member?
- Are references on personnel required by the agency and on file?
- Are homemaker-home health aides adequately trained?
- Are homemaker-home health aides supervised in the home? How often? By whom?
- What arrangements are made for emergency situations?
- What is the minimum number of hours per day that an aide can be hired?

**It is essential to develop and maintain clear communication with the health care agency and the workers coming into the home to insure that the consumer receives needed services and to handle problems as soon as they arise.**

## **WHAT IS THE COST OF HOME CARE?**

While home care services may cost less than hospital or nursing home care, the actual cost depends on such factors as type of service, number of hours of service per day, the level of personnel giving care and the length of time services are needed. In addition, regular ongoing expenses such as housing, utilities, food, medical care, etc., must be included when comparing the cost of home care services to the cost of institutional care. Medicare and Medicaid pay for some home health services as do some group health programs, private insurance, Veterans Administration programs, and county and philanthropic organizations. However, it is essential to check carefully, since benefits, limits and eligibility requirements change. For those with adequate financial resources, many services can be paid for privately.

**Before making arrangements for home care, it is important to understand clearly which services are covered through Medicare and Medicaid. An explanation of these programs follows in Section V, page 21.**

## **CERTIFIED HOME HEALTH AGENCIES**

Part-time professional health and supportive services are brought into the home of the individual to prevent further illness and restore or improve functioning. A professional registered nurse makes an initial assessment in the home and designs a plan of care with the patient and family to carry out a physician's medical treatment plan. Services may include teaching the patient self-care and instructing family members, skilled nursing, physical therapy, occupational therapy, medical social work, speech therapy, and home health aide services.

Services are provided based on a written and physician signed treatment plan after an assessment in the home by the Public/Community/Home Health Nurse. Payment may come from fees paid by the patient or family (determined by the ability to pay), Medicare and Medicaid reimbursement for eligible patients, or insurance plan payments.

[Cortland County Health Department - Nursing Division](#)  
Cortland County Office Building  
60 Central Avenue  
Cortland, New York 13045  
(607) 753-5028

## **SERVICES FOR THE TERMINALLY ILL**

Hospice is a program of care for terminally ill people of all ages when the patient's disease can no longer be reversed or cured. To be eligible for service, patients must have a physician certifying that the patient has a limited life expectancy of less than six months if the disease follows usual progression (but patients can and will be served beyond six months if they continue to remain medically appropriate for care). Patients and their loved ones are considered the "unit of care" for services. The patient receives medical care, pain and symptom relief, necessary medical supplies and equipment, and medications related to the terminal illness. Both patient and their loved ones receive psychological, social, and spiritual counseling/support as they desire. Bereavement

services in the form of individual counseling, a grief support group, “Pathways” bereavement mailings, and an annual memorial service are available for loved ones after their loss.

Hospice patients in Cortland County are served in a variety of settings -- private homes, senior apartment buildings, adult care homes, disability homes, and all three-area nursing homes. Wherever patients need to live for 24-hour safety and assistance, that is where professional hospice visitation services can be provided. Anyone can make a referral for services -- physicians, family members, friends, other agencies, clergy, even the prospective patient themselves.

Caring Community Hospice of Cortland is a Medicare-certified hospice and a division of the Cortland County Health Department. Fees are covered by Medicare (Part A), Medicaid, and most other insurances. Sliding fee is available for any patient not covered by insurance. No eligible patient is denied service due to inability to pay. Services available to provide care to patients and families include: nursing, social work, aide assistance, clergy, volunteer, specialty therapies, nutrition, medical supplies and equipment, medications related to the terminal illness, inpatient care, respite care, and bereavements services.

[Caring Community Hospice of Cortland](#)  
14 Kennedy Parkway  
Cortland, New York 13045  
(607) 753-9105  
[www.odyssey.net](http://www.odyssey.net)

**NOTE: Also see Section VII, page 39, Mental Health Services for Grief and Bereavement Services.**

<p><b>LONG TERM HOME HEALTH CARE PROGRAM</b> (Nursing Home Without Walls)</p>
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[Long Term Home Health Care Program \(LTHHCP\)](#) is designed to help persons stay at home as an alternative to nursing home placement. Services may include: nursing, physical therapy, occupational therapy, home health aide service, personal care service housekeeper, speech therapy, social work counseling, respiratory therapy, nutrition, respite care, social day care and a personal emergency alert system. Similar to a certified home health agency, the LTHHCP nurse assesses the patient for needs and together with the patient, family and physician designs a treatment plan which must be approved by the physician prior to implementing patient care.

To enter the program, individuals must be eligible for nursing home care or health related facility care, have a physician's order and a nursing and social assessment that indicates they can be safely cared for in the home. Payment may come from fees paid by patient or family, Medicare and Medicaid reimbursement for eligible patients, or insurance plan payments. The primary payer of LTHHCP services is usually Medicaid but based on Medicare guidelines patients may also have some of their care covered by Medicare or other insurances. If Medicaid is the primary

payer, the local department of social services must approve the planned services and there are specific guidelines for cost of services that must be evaluated before services are approved.

[Cortland Regional Medical Center](#)  
134 Homer Avenue  
Cortland, New York 13045  
(607) 756-3646

**DEPARTMENT OF SOCIAL SERVICES PERSONAL CARE SERVICE**

Personal Care Services may be provided to Medicaid eligible individuals requiring some or total assistance with personal hygiene, dressing, feeding, nutritional and environmental support functions, and health-related tasks. Case managers are available to coordinate needed services and to authorize service in the least restrictive environment that reasonably assures recipient safety. A nursing and social assessment is prompted by a physician's recommendation for personal care service.

[Department of Social Services](#)  
Cortland County Office Building  
60 Central Avenue  
Cortland, New York 13045  
(607) 753-5248

**EISEP IN-HOME SERVICES PROGRAM**

EISEP (Expanded In-Home Services for the Elderly Program) is a state-wide program that provides case management, personal care, housekeeper/chore, a personal emergency response system, and home modifications to individuals who are age 60 and over and who are not eligible for Medicaid. Depending on the applicant's financial status, care is provided at either no cost or a percentage of the cost.

Service recipients must have an unmet need requiring the assistance of another person in specific tasks of daily living, must be able to be maintained safely at home and must not be eligible to receive the necessary assistance from any other source, including home care programs offered by the Department of Social Services and the [Veterans Services Department](#). Eligibility for the EISEP In-Home Services Program is determined by a full assessment of financial status and functional needs. Upon acceptance into the program, the client and the case manager agree upon a care plan.

[EISEP-In-Home Services Program](#)  
Cortland County Area Agency on Aging  
60 Central Avenue  
Cortland, New York 13045  
(607) 753-5060

## **CONSUMER DIRECTED PERSONAL CARE**

Consumer Directed Personal Assistance Program is a collaborative effort between the Cortland County Department of Social Services and Cortland County Community Action Program (CAPCO). The program provides eligible individuals the opportunity to take an active and responsible role in the management of their home care. An eligible individual who receives Consumer Directed Personal Care shall be permitted to recruit, select, train, supervise and terminate the Consumer's Personal Assistant who provides the care. The consumer, pursuant to a physician's order, nursing, and social assessments could substitute Consumer Directed Personal Care Aide for services provided by a certified home health agency, the long term home health care program, the AIDS home care program or personal care services.

- [Cortland County Community Action Program](#)  
(607) 753-6781
- [Cortland County DSS, Adult Services](#)  
(607) 753-5265

## **LICENSED HOME CARE AGENCIES**

Provide trained personal care aides, home health aides, and nurses on a private pay basis and under contract to other community agencies.

- [Home Care for Cortland County, Inc.](#)  
111 Port Watson Street  
Cortland, NY 13045  
753-9326
- [All Metro Healthcare](#)  
Old Liverpool Road  
Liverpool, NY 13088  
758-8776 / 315-453-5537
- Staff Kings  
222 South Fulton Street  
Ithaca, New York 14850  
273-5335

Some individuals choose to hire self-employed caregivers for in-home services. While these arrangements, on a private pay basis, may prove satisfactory for some individuals, it is also an option to hiring a licensed home care agency to provide the needed in home aide service. Licensed agencies must screen, train and supervise their aides. Under the NYS licensing rules, they must be immunized for Hepatitis B, measles, mumps, rubella, and tested for TB. Additionally, training in infection control techniques is provided.

The aides are the employees of the agency and the agency is responsible for Social Security taxes, Workers Compensation, unemployment tax, etc. If there is a problem with an aide, the agency must take action or provide another aide. A nurse, from the licensed agency, must also supervise the work that the aides perform in the home.

Individuals who hire private self-employed caregivers instead of contracting with licensed agencies should be aware that there may be tax and insurance ramifications on this arrangement. A person should contact the Internal Revenue Service, Department of Labor and your insurance company to determine your obligation as an employer.

An employer is one who employs a domestic worker to perform household services. Some examples of domestic workers are: babysitters, caretakers, cooks, drivers, gardeners, housekeepers and shoppers. If you, the employer, make decisions regarding **what** work must be done and **how** the work must be done, that domestic worker is your employee.

## **IV. HOME CARE SUPPORT SERVICES**

### **MEALS TO THE HOMEBOUND**

The Meals on Wheels program delivers hot noontime meals to the homes of frail/impaired individuals who are 60 and over. Frozen meals for weekends and cold meals for evenings are also available. A comprehensive needs assessment and referral process is also provided. Meals are provided on a donation basis.

The Mealtime Express Program is available for frail/impaired individuals under the age of 60. Mealtime Express is a fee-for-service program.

[Area Agency on Aging](#)  
Cortland County Office Building  
60 Central Avenue  
Cortland, New York 13045  
(607) 753-5060

### **PROTECTIVE SERVICES FOR ADULTS**

Protective Services for Adults (PSA) is a system of services aimed at maintaining individuals in the community as long as possible rather than institutionalizing them. Services are aimed at preventing or remedying the neglect, exploitation or abuse of adults by strengthening, to the extent possible, their capacity to function and their ability to be self-directing.

Protective Services for Adults is provided to adults age 18 or older who, because of mental or physical impairments, can no longer provide for their basic needs for food, clothing, shelter or medical care, or protect themselves from neglect, abuse or hazardous situations, and who have no one willing and able to help in a responsible manner. Services are provided without regard to income.

[Department of Social Services](#)  
Adult Services Unit  
60 Central Avenue  
Cortland, New York 13045  
(607) 753-5265

### **HOMEBOUND SERVICES**

The purpose of Homebound Services is to provide a coordinated system of services and/or linkages to services to the homes of individuals who have become homebound due to illness, handicap, frailty, inability to prepare meals or attend congregate meal sites. Services may include home delivered meals, nutrition education, friendly visiting, telephone reassurance, shopping assistance, information and referral, legal services, chore/respite service, health education, and volunteer opportunities. Assessment of needs is provided without regard to income.

[Cortland County Area Agency on Aging](#)  
Cortland County Office Building  
60 Central Avenue  
Cortland, New York 13045  
(607) 753-5060

## **RESPITE SERVICES**

Respite is defined as a "rest" and is especially valuable to caregivers who need a brief, regular interval of time off to rest, shop or take care of other responsibilities.

The RSVP Respite Program provides trained volunteers who go into the home and spend time with the care recipient while allowing the caregiver an opportunity to attend to matters outside the home. Referrals must be made by a county agency for care recipients age 60 and over. Volunteers are companions only and do not provide nursing care.

- [RSVP Respite Program](#)  
Cortland County Area Agency on Aging  
60 Central Avenue  
Cortland, New York 13045  
(607) 753-5057

The Caregivers Resource Center provides funding for limited respite for family caregivers through the services of a home care aide, time at a local adult day care program, or a brief stay at a 24-hour respite care bed for the care receiver. Applications for respite services are available at the Caregivers Resource Center.

- [Caregivers Resource Center](#) Cortland County Area Agency on Aging  
60 Central Avenue  
Cortland, New York 13045  
(607) 753-5060

Walden Place Assisted Living Community provides short-term, respite services. Short-term stay guests take advantage of a furnished apartment including utilities, all meals served, housekeeping & laundry services, recreational, spiritual and educational activities daily, medication assistance, assistance with personal care, dressing and bathing. The lease agreement length is a minimum of three days or a maximum of six weeks. Rates are based on a daily fee.

- [Walden Place Assisted Living Community](#)  
839 Bennie Road (off Route 13)  
Cortland, NY 13045  
607-756-8101  
FAX: 607-756-2357  
www.waldenplace.net

Short-term stay agreements are also available for those who have Alzheimer's disease or other related types of dementia at Walden Place's Memory Care Community. Cortland Regional Nursing and Rehabilitation Center provides 24-hour respite care for a person

who needs the services of skilled nursing care. A private room and bath are provided with access to all services of Cortland Memorial Nursing Facility. A maximum one-time stay is 30 days. Respite can be provided for a total of 45 days per year. Reservation for the respite room must be pre-arranged. A daily fee is charged.

-Cortland Regional Nursing and Rehabilitation Center  
134 Homer Avenue  
Cortland, NY 13045  
607-756-3909

## **PERSONAL EMERGENCY RESPONSE SYSTEMS**

Personal Emergency Response Systems (PERS) is the provision and maintenance of electronic communication equipment in the home. The equipment signals a monitoring agency for help when activated by the individual or after a period of time if a timer mechanism has not been reset. PERS also includes the continuous monitoring of such signals by a trained operator and, in case of receipt of such signal, the immediate notification of the emergency response organizations and of designated individuals.

There are many electronic emergency response systems available. It should be clearly understood if the unit must be purchased or if it can be rented, and what is included in the installation costs and monthly operating fees. For additional sources look in the Yellow Pages under "Alarms" or "Medical Alarms".

- Cortland County Area Agency on Aging  
(607) 753-5060

- Cortland County Department of Social Services  
(607) 753-5265

- Cortland Regional Medical Center - Health Watch  
Long Term Home Health Care Program  
134 Homer Avenue  
Cortland, New York 13045  
(607) 756-3646/3648

- Life Safety Consultants  
(607) 756-4996

- LIFENET 1-888-424-8164

- Lifeline P. O. Box 256  
Boston, MA 14025-0256  
1-800-368-2925

- Link to Life  
297 North Street  
Pittsfield, MA 10201  
1-800-848-9399

## **MEDIC ALERT**

This emergency medical protection system includes a recognized medic alert bracelet or necklace. Engraved on one side is the person's medical condition, his/her membership number, and a 24-hour emergency answering service number. For further information call or write:

[Medic Alert Foundation](#)

475 Fifth Avenue  
New York, New York 10017  
800-432-5278

## **LIFETAG**

A program administered by [TLC Emergency Medical Services](#) and the Caring Community Hospice of Cortland. Membership in the program ensures that your pertinent medical information is immediately relayed to responders when they are called to assist you. Strictly confidential. Call 756-8650 for more information.

## **MAKE-A-RAMP®**

The Make-A-Ramp® Program is sponsored by the Cortland County Area Agency on Aging to assist individuals age 60 and over who have mobility problems. Modular aluminum ramp systems are purchased, and owned, by the Agency and are installed for short-term or long-term use. When the ramp is no longer needed by the individual, it is taken down, re-configured, and installed for the use of another person. The ramp systems meet standards set by ADA regulations and are installed in compliance with local code specifications. Site work is completed under a contract with the Cortland Housing Assistance Council.

Individuals who are interested in more information about the Make-A-Ramp® Program should contact the Cortland County Area Agency on Aging at 753-5060.

[Make-A-Ramp®](#)

Area Agency on Aging  
60 Central Avenue  
Cortland, NY 13045

Ramps may also be available from:

[Access to Independence](#)

26 North Main Street  
Cortland, NY  
607-753-7363

## **FRIENDLY VISITING**

Volunteers visit elderly (age 60 and over) homebound people in their homes and provide companionship and informal conversation. These visits help dispel feelings of loneliness and isolation. Referrals to this program can be made by any county agency.

### [Cortland County Retired and Senior Volunteer Program \(RSVP\)](#)

Cortland County Office Building  
60 Central Avenue  
Cortland, NY 13045  
(607) 753-5057

## **TELEPHONE REASSURANCE**

This program makes regular calls to homebound individuals who live alone to make sure they are safe and well. This regular telephone contact helps to dispel loneliness and provides a sense of reassurance that someone will be in touch daily.

### [- Cortland County Retired and Senior Volunteer Program \(RSVP\)](#)

Cortland County Office Building  
60 Central Avenue  
Cortland, NY 13045  
(607) 753-5057

### [- "I am O.K. Today"](#)

### [Cortland County Sheriff's Department](#)

54 Greenbush St.  
Cortland, NY 13045  
(607) 753-3311

## **MEDICAL EQUIPMENT: ASSISTIVE/ADAPTIVE DEVICES**

Some people must use equipment such as wheelchairs, commodes, hospital beds, walkers or canes. For rental or purchase of equipment, a person can refer to the Yellow Pages under "Hospital Equipment and Supplies", and visit surgical supply stores, department stores and pharmacies. The Caregivers Resource Center, pharmacists, hospital social workers and physicians can also assist in locating proper equipment.

When renting or purchasing special equipment, the following should be considered:

- Will someone come to the home to evaluate what equipment is needed?
- Is there a charge for delivery and/or installation?
- Can equipment be rented with an option to purchase at a later date?
- What service is available to maintain and repair the equipment?
- Does the provider accept Medicare assignment?
- Is the provider available after hours?

Obtain physician's order before renting or purchasing special equipment.



## V. ENTITLEMENT PROGRAMS AND FINANCIAL ASSISTANCE

### Health Insurance Information, Counseling & Assistance Program

The Health Insurance Information, Counseling and Assistance Program, (HIICAP), will work with senior citizens/their designated representatives to:

- answer questions regarding Medicare, Medicaid and Medigap insurance coverage;
- assist seniors to obtain benefits and file claims;
- provide information on long term care insurance, health insurance benefits and coordinated care plans;
- provide education and assistance regarding Medicare and Medigap appeals, etc.;
- refer seniors to other programs and services that may assist in meeting other identified needs.

For information contact: [Cortland County Area Agency on Aging](#) - (607) 753-5060

### MEDICARE AND MEDICAID

Medicare and Medicaid are two programs that people often confuse because of the similarity in name and the fact that they both help people pay for health and medical expenses. **MEDICARE** is an **INSURANCE** program for people 65 and older, and for some people under 65 who are disabled. **MEDICAID** is an **ASSISTANCE** program that pays medical bills for those people who cannot afford the cost of necessary health care, and whose assets and income are within specific limits.

### MEDICARE

Medicare is a health insurance program for people 65 and older who qualify for Social Security benefits, and for some people under 65 who are disabled. Medicare helps pay for many health care expenses but not all of them. Medicare has four parts: hospital insurance (referred to as Part A), medical insurance (referred to as Part B), private Medicare Advantage plans (referred to as Part C), and outpatient prescription drug benefits (referred to as Part D).

Application for Medicare should be made three months prior to recipient's 65th birthday by calling 1-800-772-1213. A telephone representative will ask for some information and answer any questions. Free publications describing Medicare are also available. It is important to secure updated copies every year because Medicare rules and benefits change.

[Social Security Administration](#)  
Federal Building 4th Floor  
100 South Clinton Street  
Syracuse, New York 13260  
Teleservice Number: 1-800-772-1213

**NOTE:** The Social Security field office in Cortland is open on Thursdays 9:30 - 1:30 at the County Office Building, Room 200.

**Medicare hospital insurance (Part A)** is available free to anyone who is at least 65 and is entitled to Social Security or Railroad Retirement benefits. Older persons not eligible for one of these benefits can purchase Medicare hospitalization insurance. It helps pay for four kinds of care:

- inpatient hospital care;
- medically necessary inpatient care in a skilled nursing facility after a hospital stay;
- home health care;
- hospice care.

Certain conditions must be met to entitle the person to covered care. At the present time they are:

### **1. Inpatient hospital care**

Medicare hospital insurance can help pay for inpatient hospital care if **all** four conditions are met:

- a doctor prescribes inpatient hospital care for treatment of patient's illness or injury;
- patient requires care that can only be provided in a hospital;
- the hospital is participating in Medicare;
- the Utilization Review Committee of the hospital or a peer review organization does not disapprove a patient's stay.

Medicare now pays hospitals based on average costs for a particular diagnosis. This Prospective Payment System is based on diagnostic categories, or DRGs.

The In-patient Deductible for Part A is \$952 per benefit period (2006). For many people this is covered by their private Medicare supplement plan.

Medicare patients remain entitled to all the hospital care necessary for the proper diagnosis and treatment of their illness or injury. The discharge date should be determined by the physician, based on medical needs, not by DRGs or by Medicare payments.

Concerns regarding hospital discharge date, quality of treatment and/or denial of admission should quickly be brought to the attention of the local Peer Review Organization (PRO):

[Island Peer Review Org. Inc.](#)  
1979 Marcas Avenue 1st Floor  
Lake Success, New York 11042  
1-800-331-7767 or 1-516-326-7767

### **2. Medically necessary inpatient care in a nursing facility after a hospital stay**

Medicare hospital insurance can help pay for skilled nursing care in a nursing facility if **all** four conditions are met:

- patient has had an acute hospitalization of at least 3 days in a row (counting the day of discharge) before transfer to a participating nursing facility;

- patient is transferred to the nursing facility because skilled nursing care or rehabilitation services are required for a condition which was treated in the hospital;
- patient is admitted to the facility within a short time (generally within 30 days) after leaving the hospital;
- a doctor certifies that the patient needs and actually receives skilled nursing or skilled rehabilitation services on a daily basis.

**\*NOTE: This is a limited benefit. Medicare reimbursement is limited to 100 days of "Skilled Nursing Care." "Custodial Care," which is the type of care most patients receive, is not covered.**

### 3. Home Health Care

Medicare may help pay for home health visits only if **all** four conditions are met:

- the care needed includes part-time skilled nursing care, physical therapy or speech therapy;
- patient is confined to his/her home;
- a doctor determines that patient needs home health care and sets up a home health plan for him/her, and
- the home health agency providing services is participating in Medicare.

(If these conditions are met, either hospital insurance or medical insurance can pay for the care.)

4. **Hospice Care** - Medicare has a hospice benefit which provides coverage for Hospice home care services.

**Medicare Medical Insurance (Part B)** is available but optional to all people who qualify for Part A (hospitalization insurance). The monthly premium may be deducted from the Social Security check. Most older Americans purchase this medical insurance since it covers many items Part A does not cover. It can help pay for (1) doctors' services, (2) outpatient hospital care, (3) outpatient physical therapy and speech pathology services, (4) home health care, and (5) many other health services and supplies which are not covered by Medicare hospital insurance. When seeking services, ask the providers if they are approved for Medicare payments. If they are not covered, the you will be responsible for the bill.

In 2006, the monthly Part B premium is \$88.50 for most beneficiaries. The premium may be higher if you enroll late. Medicare Part B has a \$124.00 deductible for the year, plus a co-payment of 20% of the approved amount. Premium and deductible may change from year to year.

**Medicare Advantage (Part C)** if enrolled in Part A and B a person can join a Medicare Advantage plan. Medicare Advantage plans include:

- Medicare managed care plans;
- Medicare preferred provider organization (PPO) plans;
- Medicare private fee for services plans; and
- Medicare specialty plans.

**Medicare Prescription Drug Coverage (Part D)** helps pay for medication prescribed by a physician. Anyone who has Part A and/or Part B is eligible to join a Part D plan.

## **MEDICARE CLAIMS**

### **Part A Claims**

**Intermediaries** handle inpatient and outpatient claims submitted on the patient's behalf by hospitals, skilled nursing facilities, home health agencies, hospices and certain other providers of Part A services. Staff at the hospital or other facility where treatment is obtained can provide the telephone number and address of their **intermediary**.

### **Part B Claims**

The federal government contracts with private insurance organizations called **carriers** to process claims and make payments for services provided by doctors and suppliers under Medicare's Part B program. Addresses and telephone numbers for New York State's carriers are as follows:

Counties of Bronx, Columbia, Delaware, Dutchess, Greene, Kings, Nassau, New York, Orange, Putnam, Richmond, Rockland, Suffolk, Sullivan, Ulster, Westchester

[Medicare B/Empire Blue Cross and Blue Shield](#)

P.O. Box 2280  
Peekskill, New York 10566  
1-800-442-8430  
516-244-5100

County of Queens

[Medicare/Group Health, Inc.](#)

P.O. Box 1608, Ansonia Station  
New York, New York 10023  
212-721-1770

Cortland County and all other New York State Counties not included above

[Blue Shield of Western New York](#)

Upstate Medicare Division-Part B  
Box 600, 33 Lewis Road  
Binghamton, New York 13905  
1-800-252-6550

**Please Note: Claims are sent to the carrier or region where the service was provided, not where the patient resides.**

## **DURABLE MEDICAL EQUIPMENT REGIONAL CARRIERS**

Claims for durable medical equipment, oxygen and some other supplies are handled by special carriers called Durable Medical Equipment Regional Carriers (DMERC's).

In New York State, the Durable Medical Equipment Regional Carrier is:

[United Health Care](#)  
Region A; DMERC  
P. O. Box 6800  
Wilkes-Barre, PA 18773-6800  
1-800-MEDICARE

## **MEDICAID ASSISTANCE PROGRAMS**

Buy-In Program - For certain individuals, the Medicaid program will not provide complete benefits, but will pay either the monthly Medicare premium (\$88.50) and/or the Medicare deductibles and co-payments. Certain income and eligibility guidelines must be met and a Medicaid application must be filed.

The guidelines are as follows:

QMB-Qualified Medicare Beneficiary - For these individuals, the Medicaid Program will pay Medicare's deductibles and co-payments, and the Medicare Part B Premium of \$88.50.

Family Size	Income	Resources
1	\$ 837	\$4,000
2	1,120	5,400

SLIMB-Specified Low Income Medicare Beneficiary Program - For these individuals, the Medicaid Program will pay the Medicare Part B premium,\$88.50 only.

Family Size	Income	Resources
1	\$ 1,000	\$ 4,000
2	1,340	6,000

A \$1,500 burial allowance for each individual is permitted in addition to the resource level listed. A pre-paid burial plan, set up as an Irrevocable Pre-Need Trust, can be set up in any amount.

The Medicaid application process is extensive and lengthy, in most cases. Assistance is available through the Health Insurance Information Counseling & Assistance Program (HIICAP) at the Area Agency on Aging. HIICAP can help to explain the whole process. It can also assist you through the process, from step one of placing the pre-screening phone call, to accompanying or representing the applicant at the appointment held with the Medicaid Caseworker. The Cortland County [Area Agency on Aging](#) phone number is 753-5060. The [Cortland County Medicaid](#) Office phone number is 753-5133.

Qualified Individuals 1 (QI-1) - Medicaid pays full Medicare Part B premium of \$88.50

Family Size	Income
1	\$ 1,123
2	1,505

No resource test. Use shortened application DSS-4328.

## **MEDICARE SUPPLEMENT INSURANCE**

Medicare Supplement Insurance (Medigap Insurance) is designed to help cover the deductible and co-payment gaps in Medicare coverage. Federal and State regulations have established minimum standards for insurance companies offering Medigap insurance. The U.S. Department of [Health and Human Services](#) has published a "Guide to Health Insurance for People with Medicare." Medicare Beneficiaries may obtain a copy by contacting:

- [Cortland County Area Agency on Aging](#)  
County Office Building  
60 Central Avenue  
Cortland, New York 13045  
Phone No.: (607) 753-5060
- [New York State Office for the Aging](#)  
Hotline: 1-800-701-0501

### **Medicare Advantage**

Medicare Advantage Plans are offered in many areas of the country by private companies that sign a contract with Medicare. Medicare pays a set amount of money to these private health care plans for your health care.

You must have Medicare Part A and Part B to join a Medicare Advantage Plan. Medicare Advantage Plans provide Medicare-covered benefits to Medicare members through the plan, and may offer extra benefits that Medicare doesn't cover, such as vision or dental services. You may have to pay an additional monthly premium for the extra benefits. The plan may have special rules that you need to follow.

To learn more about current Medicare Advantage Plans available in Cortland County contact:

[Cortland County Area Agency on Aging](#)  
County Office Building  
60 Central Avenue  
Cortland, New York 13045  
Phone No.: (607) 753-5060

## **MEDICAID**

Medicaid pays for medical care and services for individuals and families with very limited assets and income who cannot afford to pay all of their medical bills. It is especially valuable to older people with serious, recurring health problems because they usually cannot meet all of their medical expenses from Medicare alone. A person may be eligible for partial assistance or for complete medical coverage depending upon his/her monthly income and assets. Some Medicaid recipients pay a co-payment for some services. When seeking services, it is important to find out if the provider accepts Medicaid payments. If not, you will be responsible for the bill. Medicaid payment is made directly to the doctor or other health care provider. No money is paid to the client.

At the present time, Medicaid **may** pay for the following:

- hospital inpatient and outpatient services
- laboratory and X-ray services
- care in a residential health care facility
- care through home health agencies
- treatment by physicians, dentists and podiatrists
- eye care
- hearing aids
- treatment in psychiatric hospitals and mental health facilities
- drugs, supplies, equipment
- clinic services
- physical, occupational and speech therapy
- private duty nursing
- home health personal care services
- transportation to Medicaid-covered medical services
- personal emergency response units
- Consumer Directed Home Care
- Spousal Impoverishment
- Medical Model Adult Day Program

To receive Medicaid assistance for residential health care facility payments, persons must first spend their own assets until they have been reduced to the Medicaid eligibility level. At this point, if placement is medically approved, the person may apply for Medicaid assistance to meet the monthly cost of care. Since application can be a lengthy and involved procedure, it should be started two months prior to meeting financial eligibility requirements.

Married couples should be aware that New York State has enacted "**spousal impoverishment**" legislation which enables the spouse of the institutionalized elderly person to retain additional assets and income to prevent the community spouse from becoming impoverished by the high cost of nursing home care.

To apply for Medicaid, a person or his/her representative must apply in person at the Department of [Social Services](#) to determine eligibility. Call first for a list of items needed when making application and request current free publications describing Medicaid eligibility and services. For information about Medicaid eligibility and application procedure, contact:

Department of Social Services  
Medicaid Unit  
Cortland County Office Building  
60 Central Avenue  
Cortland, New York 13045  
(607) 753-5248

The Area Agency on Aging can also assist elderly persons with Medicaid applications. Call (607) 753-5060.

## **LONG TERM CARE INSURANCE**

Insurance covering long-term care services is sold by a number of private insurance companies in New York State. It is available both on an individual and a group basis. Before purchasing Long Term Care insurance it is very important to determine exactly what services are covered and under which situations the benefits can be used. Benefits may or may not include services in a home care situation, with hospice, at adult homes or in a skilled nursing facility.

The Area Agency on Aging provides assistance in understanding long term care insurance through the Long Term Care Insurance Education and Outreach Program. Counselors can assist individuals in determining if long-term care insurance is a product they need and then provide guidance in choosing a policy to meet that need. Contact the Area Agency on Aging at (607) 753-5060 to speak with a counselor.

Federal and state laws require that insurance agents provide a copy of a long term care policy to consumers once the consumer has filed an application and their eligibility has been determined. The policy should be carefully read prior to signing. Counselors at the Area Agency on Aging can assist with that review.

The information provided by the Long Term Care Education and Outreach Program is intended for the sole purpose of educating consumers in regard to the choices available for financing their long-term care needs. Particular emphasis is place on understanding long-term care insurance. Nothing herein is intended nor should it be construed as an endorsement by the State of New York or Cortland County Area Agency on Aging of any specific insurance product or of any insurer.

For additional information on long term care insurance contact:

- [Area Agency on Aging](#)  
Long term Care Insurance Education and Outreach Program  
(607) 753-5060
- New York State Department of Health  
1866-850-PLAN  
<http://www.nyhealth.gov/>  
<http://www.planaheadny.com/>
- [New York State Insurance Department](#)  
1-800-342-3736

## **NEW YORK STATE PARTNERSHIP FOR LONG TERM CARE**

New York State has established a Partnership for Long Term Care designed to assist residents of New York in planning for the possibility of needing to pay for long term care in the future. The Partnership is between participating private insurance companies and New York State Medicaid Extended Coverage. Partnership policies contain unique features that will allow New Yorkers to protect some or all of their assets, depending on the insurance plan purchased. If the beneficiary's long-term care needs extend beyond the period covered by the private long-term care insurance policy, Medicaid Extended Coverage may assist in paying for on-going care without requiring a "spend down" of assets. However, Medicaid Extended Coverage does require that you contribute to the cost of your care with you income according to Medicaid rules.

More detailed information about the NYS Partnership, including a list of participating insurer's offering individual policies, is available by visiting the Partnership website at [www.nyspltc.org](http://www.nyspltc.org).

For further information contact:

[Area Agency on Aging](#)

Long term Care Insurance Education and Outreach Program  
(607) 753-5060

[New York State Partnership for Long Term Care](#)

1-888-697-7582 (1 888-NYSPLTC) in New York

1-518-473-8083 from anywhere

[www.nyspltc.org](http://www.nyspltc.org)

## **PRESCRIPTION DRUG COVERAGE**

**EPIC** – New York State program helps eligible elderly cope with the high cost of prescription drugs. EPIC is intended for seniors who do not have insurance coverage for prescription drug expenses. It is a cost sharing plan for persons 65 or older who are legal residents of New York State and who meet specific income guidelines. For more information, call:

- [Cortland County Area Agency on Aging](#)

(607) 753-5060

- [New York State EPIC Hotline](#)

1-800-332-EPIC

## **VETERANS BENEFITS**

The local Veterans Services Office advocates for veterans rights, and informs veterans about programs and services available to them and their families.

[Cortland County Veterans Services Office](#)

60 Central Avenue

Cortland, NY 13045

(607) 753-5014

The local Veteran's clinic, [Cortland Convenient Care](#), is located at 1129 Commons Avenue, West Road in Cortland. The phone number is 662-1517.

## **LEGAL SERVICES FOR THE ELDERLY PROGRAM**

The Cortland County Area Agency on Aging, with funds provided through the Older Americans Act, contracts to provide legal services in civil matters to Cortland County residents age 60 and older. The Legal Services program concentrates on problems relating to public benefits, family concerns, personal autonomy, consumer concerns and landlord/tenant difficulties. Clients must call the Area Agency on Aging for screening for an appointment.

[Cortland County Area Agency on Aging](#)  
County Office Building  
60 Central Avenue  
Cortland, NY 13045  
(607) 753-5060

## **LEGAL SERVICES OF CENTRAL NEW YORK**

Free legal services for low-income individuals.

[Legal Services of Central New York](#)  
111 Port Watson Street  
Cortland, NY 13045  
(607) 753-1134

## **FINANCIAL COUNSELING PROGRAMS**

Free one-to-one budget counseling:

- budgeting;
- financial planning;
- using credit and managing debt.

[Cornell Cooperative Extension of Cortland County](#)  
Family Budget Counseling Program  
60 Central Avenue  
Cortland, New York 13045  
(607) 753-5077

Certified Reverse Mortgage Counseling:

[Cortland Housing Assistance Council](#)  
159 South Main Street  
Cortland, New York 13045  
(607) 753-8271

## **VI. SPECIAL PROGRAMS AND SERVICES**

### **ADULT DAY PROGRAMS**

Adult day programs are a community-based program of day care, conducted in a supervised social setting for disabled people to enable them to continue to live independently and at home. Such individuals may be socially isolated, mentally, physically and/or emotionally frail and require the services of a specialized staff. Without participation in an Adult Day Program, some individuals might require entry into a long-term care nursing facility.

Adult day programs are usually described as either social or medical (health) model programs. Social model programs offer socialization, cultural, educational and recreational activities as well as a nutritious hot noontime meal and transportation services. Medical (health) model programs offer the same services as social models yet may encompass such additional services as medical supervision, nursing care, nutritional, personal and family counseling as well as such rehabilitative services as physical, speech and occupational therapies.

Adult day programs are designed to enhance one's quality of life as well as to delay or prevent continued deterioration or nursing home placement. These programs offer families daytime respite and in some instances assist caregiving family members to continue to be gainfully employed outside the home.

Persons who may benefit from an adult day program are those who have:

- a medical illness or disability requiring care after its acute phase;
- a chronic disease with increasing limitations;
- an emotional crisis associated with unresolved family conflict, loss of spouse, friend, adult child, etc.;
- changes in mental functioning such as confusion, significant memory loss, loss of orientation to time and place.

Interested persons should call any of the listed Adult Day Programs area to discuss eligibility requirements and admission procedures. A visit to the program will provide the best information about its services, level of individual care and methods of payment. Some programs may accept Medicaid reimbursement. Others may charge on a sliding scale based on income.

Social Model Adult Day Program:

[James L. Seward Heritage House](#)  
3 Kennedy Parkway  
Cortland, NY 13045  
(607) 753-9668  
Monday through Friday  
Transportation may be provided.

## Medical Model Adult Day Program:

Cortland Regional Nursing and Rehabilitation Center  
Cortland Regional Medical Center  
Adult Day Health Care  
134 Homer Avenue  
Cortland, NY 13045  
(607) 756-3900  
Monday through Saturday available  
7:30am-4:00pm  
Transportation can be provided.  
Minimum of one scheduled day per week.

## **UNIVERSITY GERIATRICIANS:**

90 Presidential Plaza  
Syracuse, NY 13202  
(315) 464-6100  
M-F 8:30am-5:00pm

## **WHAT SERVICES DOES UNIVERSITY GERIATRICIANS PROVIDE?**

- complete evaluations of the medical, functional, cognitive and psychosocial problems and abilities of the older adult;
- promotion of an active, anticipatory preventive approach;
- help in coping with the health problems and social needs associated with old age;
- ongoing medical follow-up and case management for persons with dementia;
- education, counseling and guidance for families, caregivers and other professionals;
- collaboration with the primary care physician and/or other health care providers.

## **WHO SHOULD BE CONSIDERED FOR AN ASSESSMENT?**

Individuals who have the following:

- problems with falling, balance, mobility, or dizziness;
- incontinence of bowel or bladder;
- increasing memory loss, confusion or disorientation;
- multiple chronic illness, especially if there are multiple medications and/or doctors;
- persistent problems with mood, motivation or sleeping;
- chronic pain or discomfort, including arthritis;
- increasing problems caring for self, especially poor nutrition.
- general frailty

## **WHO WILL MAKE THE ASSESSMENT?**

The staff of the program includes geriatricians (physicians specializing in the care of elders), fellows in geriatric medicine (internists learning the specialty of geriatrics), a gerontological social worker, and a nurse practitioner. The staff are knowledgeable about the needs and particular concerns of older adults. Most assessments require two visits with a short interval between.

## WHAT FOLLOWS THE ASSESSMENT?

- In general, the Clinic works in collaboration with a patient's existing personal physician.
- The Clinic will follow a patient along with their physician on short-term or long-term basis, depending on the complexity and nature of the problems.
- The Clinic will provide ongoing health maintenance if a patient does not have a personal physician to provide such care.
- The Clinic will help a patient locate programs and/or community services that may be needed, and will remain available should future problems arise.

## WHO CAN MAKE A REFERRAL?

A personal physician can submit a request for a consultation. However, referrals are also accepted from:

- family, friends or the patient;
- social service and home care agencies;
- residential facilities.

Call (315) 464-6100 between 8:30 - 5:00 Monday through Friday to make an appointment.

The majority of the cost is covered by Medicare. Medicare assignment is accepted and secondary insurance is billed.

## **ALZHEIMER'S ASSOCIATION - CENTRAL NEW YORK CHAPTER**

441 West Kirkpatrick Street  
Syracuse, New York 13204  
(315) 472-4201  
Toll Free Number - 1-800-272-3900

Southern Tier Chapter (Serves Cortland County)  
401 Hayes Avenue  
Endicott, NY 13760  
(607)785-7852

The Alzheimer's Association is a national voluntary health agency whose purpose is to provide leadership to eliminate Alzheimer's disease through the advancement of research while enhancing care and support services for individuals and families. Services include:

- Caregiver Consultation
- Safe Return Program – a nationwide identification, support & registration program provides assistance if person becomes lost. Safe Return can fax person's information and photo to local law enforcement. For the one time registration fee of \$40, person receives an engraved identification bracelet or necklace with the Alzheimer's Association 800 number on it.
- Alzheimer's disease information 24 hour telephone helpline
- Education programs, workshops and videos
- Informational books and brochures
- Support groups
- Social adult day program (Syracuse)

## **CAREGIVERS RESOURCE CENTER - AREA AGENCY ON AGING**

The Caregivers Resource Center is a one stop service point offered to provide support and information to families and individuals as they care for their elderly and handicapped who live in the community. Services include:

- caregiver counseling
- workshops and seminars on topics related to caregiving
- caregiver support groups
- assistance with family meetings
- a caregivers newsletter
- respite program for caregivers caring for a person who is 60 or older and requires assistance with 2 or more activities of daily living
- a resource library of books and videos available for loan
- personal emergency response systems (limited)
- escort aide transportation program
- services to grandparents/relatives raising children
- a vision support group.

For more information contact:

[Caregivers Resource Center](#)  
Area Agency on Aging  
Cortland County Office Building  
60 Central Avenue  
Cortland, NY 13045  
607) 753-5060

## **SERVICES FOR PEOPLE AFFECTED BY AIDS/HIV**

Persons with AIDS or HIV infection, as well as their families and loved ones, are eligible for free and confidential:

- advocacy and referral;
- case management;
- crisis intervention;
- buddy program;
- support groups;
- inmate services;
- education.

- [Cortland County Health Department](#)

60 Central Avenue  
Cortland, New York 13045  
753-5088

- [Southern Tier AIDS Program, Inc.](#)

122 Baldwin Street  
Johnson City, New York 13790  
1-800-333-0892  
607-798-1706

[Cortland Regional Medical Center](#)

LTHHCP, 134 Homer Avenue  
Cortland, NY 13045  
756-3646

[Aids Work Inc. of Tompkins County](#)

215 S. Cayuga St. North  
Ithaca, NY 14850  
(607) 272-4098

## **NYS Aids Institute Home Health Care Program for Persons with HIV Infection**

Confidential HIV Antibody Testing Program - HIV testing, counseling, support and referral.

[Cortland County Health Department - Division of Nursing](#)

Certified Home Health Agency  
60 Central Avenue  
Cortland, New York 13045  
753-5028

IV Clinic/Infectious Disease Clinic

[Arnot Ogden Medical Center](#)

600 Roe Avenue  
Elmira, NY 14901  
607-737-8188

This clinic provides confidential testing and counseling. Medical case management, nutritional assessment and monitoring of health related HIV issues.

## **Aids Counseling & Testing Program - [NYS Department of Health](#)**

Anonymous HIV Antibody Testing Program - Free HIV testing, counseling, support and referral.

1-800-562-9423

## **ADULT ABUSE**

Adult Abuse is defined as the physical, sexual, emotional or financial abuse and/or neglect of a physically or mentally impaired adult 18 years of age or older when the impaired adult is unable to provide for his/her own health, welfare and safety. Protective Services for Adults is a system of services designed to assess adult abuse referral and to address the endangering condition.

[Protective Services for Adults](#)

Cortland County Department of Social Services  
60 Central Avenue  
Cortland, NY 13045  
(607) 753-5265

## **ADVOCATE FOR PEOPLE WITH DISABILITIES**

[Access to Independence of Cortland County, Inc.](#)

26 N. Main Street  
Cortland, NY 13045  
(607) 753-7363  
www.CILCORTLAND.ORG

ACCESS serves as a resource and advocacy center for people with disabilities and their families. Services include:

- Information and referral
- Community education and training
- Personal and systems advocacy
- Peer counseling
- Ramp programs
- Equipment loans
- Support groups
- Social activities
- Health and wellness programs
- Adaptive equipment
- Resource library
- SHAPE (Sheriff's Accessible Parking Enforcement) program
- Consultation regarding the Americans with Disabilities Act, universal design and architectural barrier removal

## **SERVICES FOR THE BLIND AND VISUALLY IMPAIRED**

Legally blind individuals are provided with information, assessment and training to help them care for themselves at home. The program also provides low vision glasses and adaptive equipment to enhance a person's ability to function. Home visits are made in Cortland County.

[Association for Vision Rehabilitation and Employment, Inc.](#)  
55 Washington Street  
Binghamton, NY 13901  
(607) 724-2428

Eye Care Vision Support Group sponsored by Cortland County Area Agency on Aging meets monthly. Services people with vision impairment and their caregivers.

[Cortland County Area Agency on Aging](#)  
Caregivers Resource Center  
753-5060

## **SERVICES FOR THE DEVELOPMENTALLY DISABLED**

The Central New York Developmental Services Office provides individualized services for people of all ages who are developmentally disabled and their families. Services include case management, residential, individual and family support, clinical services, advocacy, and planning.

[Madison Cortland ARC](#)  
34 Owego Street  
Cortland, NY 13045  
(607) 756-5637

The Special Children's Center provides individualized services for people of all ages with developmental disabilities. They offer case management, residential, individual and family support services, early intervention, pre-school and day care programs, clinical services, the Inclusion Network and the Father's Network programs.

[Franziska Racker Center](#)

882 NYS Route 13  
Cortland, NY 13045  
(607) 753-9375

The Cortland County Chapter of NYSARC provides services for people of all ages with developmental disabilities. Services include residential, individual and family support services, case management, recreation, and advocacy services.

[Madison Cortland ARC](#)

16 Crawford Street  
Cortland, NY 13045  
(607) 756-2015

**SERVICES FOR THE SPEECH AND/OR HEARING IMPAIRED**

Evaluation and diagnostic screening services:

- [Communications Disorder Unit \(Upstate Medical University\)](#)
- Jacobsen Hall, 175 Elizabeth Blackwell St., Syracuse, NY 13210  
(315) 464-4806
- Ithaca College Ewing Speech and Hearing Clinic - (607) 274-3714
- SUCC Speech and Hearing Clinic - (607) 756-5423

**SUBSTANCE ABUSE SERVICES**

[Seven Valleys Council on Alcoholism and Substance Abuse, Inc.](#) 29 Central Avenue  
Cortland, New York 13045  
756-8970

Services offered include education, information and referral. A lending library of books, videos and other reference materials is available. The Council can provide referrals to area counselors.

- [Family Counseling Services of Cortland County](#)

10 North Main Street  
Cortland, New York 13045  
753-0234

Offers outpatient alcohol and drug treatment. Services include: Individual counseling; basic education and recovery groups; intensive services program; teen recovery groups and family services.

- **Addiction Solutions for Individuals & Families**

ASI of Cortland, LCC)  
17 Main Street  
Cortland, New York 13045  
756-4167 P / (607) 753-0608 F  
staff@asiofcortland.com

- Private out-patient alcohol and drug care

## **VII. MENTAL HEALTH SERVICES**

Most people live independently and cope effectively with the stresses of later life. However, as problems such as inadequate income and inflationary costs, deteriorating health or loss of spouse and friends multiply, some individuals become vulnerable to emotional disorders. Some mental and emotional impairments with observable changes in behavior, such as depression, agitation, and anxiety, are treatable and reversible. Many times emotional problems manifest themselves as physical ailments such as headaches, back pain, or constipation. Reaching out and receiving help from the right professionals at the right time can make the difference. There are many agencies and private practitioners providing mental health services and psychological treatment.

Programs combine early detection of problems with treatment by trained, sensitive professionals to prevent, delay or reverse mental health problems. The following agencies offer assistance and referrals to local community services and a variety of counseling or therapy programs to meet the needs of individuals and families.

### **SERVICE PROVIDERS:**

#### Cortland County Mental Health Clinic

7 Clayton Avenue  
Cortland, NY 13045  
(607) 758-6100

- group and family therapy
- individual psychotherapy
- screening and testing for emotional, behavioral and cognitive problems

#### ▪ Family Counseling Services

10 North Main Street  
Cortland, NY 13045  
(607) 753-0234

- family and individual counseling
- substance abuse counseling
- mentoring program for youth ages 9-16
- free onsite child care services available while parent or guardian is in counseling
- evening hours

#### ▪ Council of Churches

“Support for the Grieving Groups”  
Interfaith Center  
7 Calvert Street  
Cortland, New York 13045  
(607) 753-1002

- Horizon House  
 49 Grant Street  
 Cortland, New York 13045  
 (607) 753-6751
  - Provides continuing day treatment center for the mentally ill who have chronic problems
  
- Catholic Charities  
 32-35 Central Avenue  
 Cortland, New York 13045  
 (607) 756-5992
  - Case management
  
- Mental Health Association for Cortland County  
 25 Clinton Avenue  
 Cortland, NY 13045  
 (607) 758-3107
  - Education, information, and advocacy for families and individuals.
  
- Caring Community Hospice of Cortland County  
 Bereavement Support Group  
 11 Kennedy Parkway  
 Cortland, New York 13045  
 (607) 753-9105
  
- Cortland Regional Medical Center Grief and Loss Support Group  
 134 Homer Avenue  
 Cortland, New York 13045  
 (607) 753-3500
  - Meets monthly
  
- Family Counseling Ministry  
 25 Church Street  
 Cortland, New York 13045  
 (607) 758-3339
  - Counseling for depression, grief and loss, adolescent through adult
  - Sliding fee scale
  - Does not accept insurance

**\*NOTE: Also consult yellow pages for a variety of private practitioners who offer mental health services.**

## **EMERGENCY PSYCHIATRIC SERVICE**

Cortland Regional Medical Center  
Psychiatric Services Crisis Line  
134 Homer Avenue  
Cortland, New York 13045  
(607) 756-3771  
24 hours, 7 days a week

The Hospital Emergency Room conducts psychiatric evaluations of emergency cases.

## **VIII. RESIDENTIAL CARE**

As older people become less able to live independently, they need to consider living alternatives that ensure their health and safety. Among their options are living with a relative; having someone move in with them; having someone *come* in to assist with household tasks or personal care; or moving into an adult home, an assisted living facility, or a residential health care facility (nursing home).

Some people find it too difficult to manage in their own homes or in the homes of relatives or friends, and yet their physical, mental or social needs are such that they do not require placement in a residential health care facility (nursing home). To help these people remain in the community, supportive living arrangements such as adult homes or assisted living facilities are available in Cortland County.

Before making a decision about a facility, it is critical that you obtain a copy of the admission agreement. Do not sign the admission agreement until you have reviewed it thoroughly, preferably with a lawyer and family members. The admission agreement is the legal document that states what arrangements you and the facility have agreed to. The admission agreement should clearly explain all charges and fees, levels of care, nursing supervision, discharge policies, resident care, resident rights, and additional services extended. The more specific the contract, the greater your legal protections will be regarding promised services. The importance of a contract cannot be overemphasized.

### **FAMILY-TYPE ADULT HOME**

A family-type adult home provides care to individuals who for health or social reasons can no longer live alone or with their families. Family-type homes for Adults are operated by people who have room in their homes and a desire to help others. Residents receive room, board, laundry and housekeeping services. In addition, limited care is provided for residents who need supervision and personal care to help with everyday tasks, such as assistance in grooming or keeping track of medications. Referrals are made by hospital personnel, doctors, friends or the older person himself. Family-type homes are supervised by the Department of Social Services.

For information:

[Department of Social Services](#)  
Cortland County Office Building  
60 Central Avenue  
Cortland, NY 13045  
Phone: (607) 753-5265

## **ADULT CARE FACILITIES**

Approved adult homes provide 24-hour services for individuals who have physical or mental limitations which prevent them from maintaining their own homes or apartments. In addition to room, board, congregate meals and housekeeping, services may include supervision or assistance with dressing, walking, bathing, personal hygiene and grooming. Some social and recreational activities are provided and case management services may also be provided.

Adult homes are licensed and supervised by the New York State Department of Health. Depending upon assets and income, financial assistance to cover the cost of placement may be available through either the Supplemental Security Income (SSI) Program or the Public Assistance Program.

It is important to visit and tour an adult home to evaluate if it is a setting that can meet your needs. It is important, too, to know what services are provided, the level of staffing, if you can afford the monthly rate, and if there is financial assistance through either Supplemental Security Income or the Public Assistance program available to pay for care, depending on your assets and income.

### [Cortland County Department of Social Services](#)

Cortland County Office Building  
60 Central Avenue  
Cortland, NY 13045  
(607) 753-5265

### **Adult Homes in Cortland County**

- Elizabeth Brewster House  
41 South Main Street  
Homer, NY 13077  
(607) 749-2442
- Greenbriar Home for Adults  
46 Cortland Street  
Homer, NY 13077  
(607)749-7287
- Rosewood Home for Adults  
South Main Street  
Cincinnatus, NY 13040  
(607) 863-3833

## **ASSISTED LIVING**

Assisted living facilities provide an option for older people who cannot function independently enough to live at home but do not need to move to a nursing home.

Assisted living facilities typically provide a combination of housing, meals, personal care and support services, social activities, supervision, and, in some cases, health-related services. There is no standard model for these facilities; the physical design, as well as the level and combination

of services, varies. Some facilities provide only meals, basic housekeeping, and help with activities of daily living such as bathing, dressing, and grooming. Others go beyond these services, offering or arranging for transportation and certain health services. Living arrangements vary from a single room to a full apartment which may or may not include a kitchenette. Meals are generally served in a common dining area.

The best way to learn about an assisted living community is to tour the assisted living facility and talk with the residents and staff before considering a move. If you are pleased with the layout and accommodations of the facility, verify that it is properly licensed by the state. (Note: The federal government neither defines nor regulates assisted living facilities.)

Questions you should be sure to ask of the facility administration include the following:

- Is there a written plan of care for each resident, and are additional services available if a resident's needs change?
- What role does the resident have in developing the plan of care?
- Can residents choose their own doctors, therapists, and pharmacies?
- How does the facility bill for services?
- What happens if a resident exhausts their funds and can no longer afford the monthly rate?
- Under what conditions would a resident have to leave the facility?

All costs and fees in an assisted living facility are paid by the resident; neither Medicare nor Medicaid assist with these payments. Some private long-term care insurance policies cover assisted living. Before signing an admission agreement you must determine whether you can afford the monthly payments of the facility you have chosen and whether you can continue to pay them over an extended period of time, recognizing that there will most likely be annual cost-of-living increases. Also, if additional services are necessary to meet a resident's changing needs over time, monthly costs will rise. Be sure to have the assisted living community representative explain the application process and the resident agreement. The resident agreement should clearly explain charges, levels of care and discharge policy.

Cortland County currently has one assisted living facility: It is licensed by New York State DOH as Enriched Housing.

[Walden Place](#)  
839 Bennie Road (off Route 13)  
Cortland, NY 13045  
607-756-8101  
Fax: 607-756-2357

## **RESIDENTIAL HEALTH CARE FACILITIES**

For some individuals, a residential health care facility is the best living arrangement to meet their physical, emotional and social needs and to provide security and protection.

Residential Health Care Facilities are primarily designed for people with long term mental or physical conditions that require a 24-hour protective environment with medical and health care services. Nursing home care may be necessary for the person with multiple health problems that cannot be treated at home. It is also common today to find patients from hospitals being transferred

to nursing homes for temporary stays immediately after an acute illness for a period of convalescence/rehabilitation. (For information on paying for nursing home care, see below.)

**It is essential that the individual have a complete assessment and that all services and programs available in home and out of home be thoroughly investigated before a decision is made (See Section I, "Assessment.")**

### **CHOOSING A HEALTH CARE FACILITY**

Individuals who require twenty-four hour skilled nursing care receive relatively complete assistance in activities of daily living as well as necessary skilled twenty-four hour nursing care, rehabilitative services, and medical supervision. This is particularly useful for those patients discharged from hospitals who need care which cannot be provided at home. Patients with long term chronic illnesses or patients who are not improving or are slowly deteriorating can be permanently placed in a residential health care facility. These patients require periodic review of their medical status by physicians and medical consultants. It is advisable to visit and carefully evaluate a health care facility. It may be beneficial to visit area facilities before the need arises or a crisis occurs. (For more information regarding selection criteria see Appendix II on page 61.)

### **DETERMINING MEDICAL ELIGIBILITY**

The type of placement for an individual is determined by a written evaluation which assesses the physical, psychological, and social needs of the applicant. The forms to assess eligibility for a health care facility are the PRI (Patient Review Instrument) and the Screen. They must be completed by a certified nurse and are valid for a period of 90 days. Information about completion of a PRI can be obtained at a hospital, from a nursing home, the Department of Social Services, or the Cortland County Health Department. There is a fee for the PRI evaluation.

### **PAYING FOR NURSING HOME CARE**

#### **1. Medicare**

Most people depend on Medicare or Medicaid to help pay for nursing home care because long-term care placement is costly. **It is not generally understood, however, that Medicare payment for nursing home care is limited.**

Under very limited conditions, Medicare will pay for some nursing home care costs for those who require skilled nursing or rehabilitation services. If a person has been hospitalized for at least three days and requires skilled nursing care on a daily basis for continued treatment of the same condition, Medicare Part A, may pay for a **limited** number of days in a health care facility.

**Medicare does not pay for custodial care in a residential health care facility. If a person is hospitalized, contact the hospital social worker or discharge planner to discuss eligibility for Medicare nursing home coverage.**

#### **2. Medicaid (see page 27)**

#### **3. Private Payment**

Those who require nursing home care who are not covered by Medicare and who have assets above the Medicaid eligibility level must pay the full cost privately to the facility. When negotiating financial arrangements with a nursing facility, it is important to have a written agreement clearly indicating what services will be provided. Nursing home costs may also be covered by Long Term Care Insurance. (See page 28 - Long Term Care Insurance)

**In all cases, it is essential to explore one's financial situation with a knowledgeable advocate before expending assets or signing a contract.**

## **RESIDENTIAL CARE FACILITIES**

This listing is for informational purposes only and does not constitute approval or endorsement.

- Cortland Care Center  
193 Clinton Street Extension  
Cortland, NY 13045  
(607) 756-9921

**This facility offers a Specialized Dementia Care unit and subacute rehabilitation services for individuals who are in need of a short term medical or rehabilitation stay before returning to their pre-existing environment.**

- Cortland Regional Nursing and Rehabilitation Center  
134 Homer Avenue  
Cortland, NY 13045  
(607) 756-3900

**This facility offers a Short Term Scheduled Stay Respite Program and a Medical Model Adult Day Care Program. This facility also offers subacute rehabilitation services for individuals who are in need of a short term medical or rehabilitation stay before returning to their pre-existing environment.**

- Groton Residential Health Care Facility  
120 Sykes Street  
Groton, NY 13073  
(607) 898-5876

**This facility offers subacute rehabilitation services for individuals who are in need of a short term medical or rehabilitation stay before returning to their pre-existing environment.**

- [Northwoods Rehabilitation Extended Care Facility at Cortland](#)  
28 Kellogg Road  
Cortland, NY 13045  
(607) 753-9631

**This facility offers subacute rehabilitation services for individuals who are in need of a short term medical or rehabilitation stay before returning to their pre-existing environment.** Peritoneal dialysis, total parental nutrition (pn) and palliative care onsite can be provided.

## **CORTLAND COUNTY COALITION FOR LONG TERM CARE**

The Coalition is an organization of health care providers, consumers, and others interested in long term care which meets on a regular basis. It assists its members in providing quality care. The Coalition also informs county, state and federal legislators about issues affecting long term care. For further information call:

[Area Agency on Aging](#)  
(607) 753-5060

## **OMBUDSMAN PROGRAM**

This program operates to improve the quality of the day to day lives of residents of health care facilities and adult care homes. Volunteers are recruited and trained to work closely with administrators and staff, along with residents and families to help resolve difficulties.

[Cortland County Ombudsman Program](#)  
[Cortland County Area Agency on Aging](#)  
Cortland, New York 13045  
(607) 753-5060

## **NEW YORK STATE DEPARTMENT OF HEALTH OFFICE OF HEALTH SYSTEMS MANAGEMENT**

This agency regulates the operations of hospitals, nursing homes, certified home health agencies, and adult care facilities. Health Department Staff responds to complaints made by facility staff, families and residents themselves.

[New York State Department of Health](#)  
Office of Health Systems Management  
217 South Salina Street  
Syracuse, NY 13202  
(315) 426-7710



## **Appendix I**

### **HEALTH CARE PROXY**

A law has been enacted by New York State which allows a person to appoint an agent, usually a trusted family member or close friend, to decide about medical treatment if the person loses the ability to make these decisions for him/her self. In order to do this, a form called a "Health Care Proxy" must be signed and witnessed, and the health care agent must indicate on the proxy that he/she knows the person's wishes regarding artificial hydration and nutrition.

All competent adults can appoint a health care agent by signing a Health Care Proxy form. Planning should be made in advance. Health Care Proxy forms are available from the Area Agency on Aging at 753-5060 or contact:

[New York State Department of Health](#)  
Health Care Proxy  
P. O. Box 2000  
Albany, New York 12220

(A Health Care Proxy form follows.)

### **NONHOSPITAL ORDER NOT TO RESUSCITATE (DNR)**

A Do Not Resuscitate (DNR) order tells medical professionals not to perform cardiopulmonary resuscitation (CPR). This means that medical personnel will not use procedures to restart a patient's heart and breathing when the patient suffers heart failure. DNR orders may be written for patients in a hospital or nursing home, or for patients at home. The "Nonhospital" DNR order is for patients at home. (A Nonhospital Order Not To Resuscitate follows.)

# PLANNING IN ADVANCE

## FOR YOUR MEDICAL TREATMENT

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### *Your Right to Decide About Treatment*

Adults in New York State have the right to accept or refuse medical treatment, including life-sustaining treatment. Our Constitution and state laws protect this right. This means that you have the right to request or consent to treatment, to refuse treatment before it has started, and to have treatment stopped once it has begun.

### *Planning in Advance*

Sometimes because of illness or injury people are unable to talk to a doctor and decide about treatment for themselves. You may wish to plan in advance to make sure that your wishes about treatment will be followed if you become unable to decide for yourself for a short or long period. If you don't plan ahead, family members or other people close to you may not be allowed to make decisions for you and follow your wishes.

In New York State, appointing someone you can trust to decide about treatment if you become unable to decide for yourself is the best way to protect your treatment wishes and concerns. You have the right to appoint someone by filling out a form called a Health Care Proxy. A copy of the form and information about the Health Care Proxy are available from your health care provider.

If you have no one you can appoint to decide for you, or do not want to appoint someone, you can also give specific instructions about treatment in advance. Those instructions can be written, and are often referred to as a Living Will.

You should understand that general instructions about refusing treatment, even if written down, may not be effective. Your instructions must clearly cover the treatment decisions that must be made. For example, if you just write down that you do not want "heroic measures," the instructions may not be specific enough. You should say the kind of

treatment that you do not want, such as a respirator or chemotherapy, and describe the medical condition when you would refuse the treatment, such as when you are terminally ill or permanently unconscious with no hope of recovering. You can also give instructions orally by discussing your treatment wishes with your doctor, family members or others close to you.

Putting things in writing is safer than simply speaking to people, but neither method is as effective as appointing someone to decide for you.

It is often hard for people to know in advance what will happen to them or what their medical needs will be in the future. If you choose someone to make decisions for you, that person can talk to your doctor and make decisions that they believe you would have wanted or that are best for you, when needed, if you appoint someone and also leave instructions about treatment in a Living will, in the space provided on the Health Care Proxy form itself, or in some other manner, the person you

select can use these instructions as guidance to make the right decision for you.

## **Deciding About Cardiopulmonary Resuscitation**

Your right to decide about treatment also includes the right to decide about cardiopulmonary resuscitation (CPR).

CPR is emergency treatment to restart the heart and lungs when your breathing or circulation stops.

Sometimes doctors and patients decide in advance that CPR should not be provided, and the doctor gives the medical staff an order not to resuscitate (DNR order). If your physical or mental condition prevents you from deciding about CPR, someone you appoint, your family members, or others close to you can decide. A brochure on CPR and your rights under New York law is available from your health care provider.

# *Appointing Your Health Care Agent*

## NEW YORK STATE'S PROXY LAW

A law called the New York health care proxy law allows you to appoint someone you trust--for example, a family member or close friend--to decide about treatment if you lose the ability to decide for yourself. You can do this by using a Health Care Proxy form like the one inside, to appoint your "health care agent."

This law gives you the power to make sure that health care professionals follow your wishes. Your agent can also decide how your wishes apply as your medical condition changes. Hospitals, doctors and other health care providers must follow your agent's decisions as if they were your own.

You can give the person you select, your health care agent, as little or as much authority as you want. You can allow your agent to decide about all health care or only certain treatments. You may also give your agent instructions that he or she has to follow.

### **Why should I choose a health care agent?**

If you become too sick to make health care decisions, someone else must decide for you. Health care professionals often look to family members for guidance. But family members are not allowed to decide to stop treatment, even when they believe that is what you would choose or what is best for you under the circumstances. Appointing an agent lets you control your medical treatment by:

- allowing your agent to stop treatment when he or she decides that is what you would want or what is best for you under the circumstances;
- choosing one family member to decide about treatment because you think that person would make the best decisions or because you want to avoid conflict or confusion about who should decide; and
- choosing someone outside your family to decide about treatment because no one in your family is available or because you prefer that someone other than a family member decide about your health care.

### **How can I appoint a health care agent?**

All competent adults can appoint a health care agent by signing a form called a Health Care Proxy. You don't need a lawyer, just two adult witnesses. You can use the form printed here, but you don't have to.

### **When would my health care agent begin to make treatment decisions for me?**

Your health care agent would begin to make treatment decisions after doctors decide that you are not able to make health care decisions. As long as you are able to make treatment decisions for yourself, you will have the right to do so.

### **What decisions can my health care agent make?**

Unless you limit your health care agent's authority, your agent will be able to make any treatment decision that you could have made if you were able to decide for yourself. Your agent can agree that you should receive treatment, choose among different treatments and decide that treatments should not be provided, in accord with

your wishes and interests. If your health care agent is not aware of your wishes about artificial nutrition and hydration (nourishment and water provided by feeding tubes), he or she will not be able to make decisions about these measures. Artificial nutrition and hydration are used in many circumstances, and are often used to continue the life of patients who are in a permanent coma.

#### **How will my health care agent make decisions?**

You can write instructions on the proxy form. Your agent must follow your oral and written instructions, as well as your moral and religious beliefs. If your agent does not know your wishes or beliefs, your agent is legally required to act in your best interests.

#### **Who will pay attention to my agent?**

All hospitals, doctors and other health care facilities are legally required to honor the decisions by your agent. If a hospital objects to some treatment options (such as removing certain treatment) they must tell you or your agent IN ADVANCE.

#### **What if my health care agent is not available when decisions must be made?**

You can appoint an alternate agent to decide for you if your health care agent is not available or able to act when decisions must be made. Otherwise, health care providers will make treatment decisions for you that follow instructions you gave while you were still able to do so. Any instructions that you write on your Health Care Proxy form will guide health care providers under these circumstances.

#### **What if I change my mind?**

It is easy to cancel the proxy, to change the person you have chosen as your health care agent or to change any treatment instructions you have written on your Health Care Proxy form. Just fill out a new form. In addition, you can require that the Health Care Proxy expire on a specified date or if certain events occur. Otherwise, the Health Care Proxy will be valid indefinitely. If you choose your spouse as your health care agent and you get divorced or legally separated, the appointment is automatically canceled.

#### **Can my health care agent be legally liable for decisions made on my behalf?**

No. Your health care agent will not be liable for treatment decisions made in good faith on your behalf. Also, he or she cannot be held liable for costs of your care, just because he or she is your agent.

#### **Is a health care proxy the same as a living will?**

No. A living will is a document that provides specific instructions about health care treatment. It is generally used to declare wishes to refuse life-sustaining treatment under certain circumstances.

In contrast, the health care proxy allows you to choose someone you trust to make treatment decisions on your behalf. Unlike a living will, a health care proxy does not require that you know in advance all the decisions that may arise. Instead, your health care agent can interpret your wishes as medical circumstances change and can make decisions you could not have known would have to be made. The health care proxy is just as useful for decisions to receive treatment as it is for decisions to stop treatment. If you complete a Health Care Proxy form, but also have a living will, the living will provides instructions for your health care agent, and will guide his or her decisions.

#### **Where should I keep the proxy form after it is signed?**

Give a copy to your agent, your doctor and any other family members or close friends you want. You can also keep a copy in your wallet or purse or with other important papers.

**APPOINTING A HEALTH CARE AGENT IS A SERIOUS DECISION. MAKE SURE YOU TALK ABOUT IT WITH YOUR FAMILY, CLOSE FRIENDS AND YOUR DOCTOR.**

**DO IT IN ADVANCE, NOT JUST WHEN YOU ARE PLANNING TO ENTER THE HOSPITAL.**

**FILLING OUT A HEALTH CARE PROXY IS VOLUNTARY. NO ONE CAN REQUIRE YOU TO DO SO.**

# About the Health Care Proxy

This is an important legal form. Before signing this form, you should understand the following facts:

1. This form gives the person you choose as your agent the authority to make all health care decisions for you, except to the extent you say otherwise in this form. "Health care" means any treatment, service or procedure to diagnose or treat your physical or mental condition.
2. Unless you say otherwise, your agent will be allowed to make all health care decisions for you, including decisions to remove or provide life-sustaining treatment.
3. Unless your agent knows your wishes about artificial nutrition and hydration (nourishment and water provided by a feeding tub), he or she will not be allowed to refuse or consent to those measures for you.
4. Your agent will start making decisions for you when doctors decide that you are not able to make health care decisions for yourself.

You may write on this form any information about treatment that you do not desire and/or those treatments that you want to make sure you receive. Your agent must follow your instructions (oral and written) when making decisions for you.

If you want to give your agent written instructions, do so right on the form. For example, you could say:

*If I become terminally ill, I do/don't want to receive the following treatments....*

*If I am in a coma or unconscious, with no hope of recovery, then I do/don't want....*

*If I have brain damage or a brain disease that makes me unable to recognize people or speak and there is no hope that my condition will improve, I do/don't want...*

*I have discussed with my agent my wishes about and I want my agent to make all decisions about these measures.*

Examples of medical treatments about which you may wish to give your agent special instructions are listed below. This is **not** a complete list of the treatments about which you may leave instructions.

- artificial respiration
- artificial nutrition and hydration (nourishment and water provided by feeding tube)
- cardiopulmonary resuscitation (CPR)
- antipsychotic medication
- electric shock therapy
- antibiotics
- psychosurgery
- dialysis
- transplantation
- blood transfusions
- abortion
- sterilization

Talk about choosing an agent with your family and/or close friends. You should discuss this form with a doctor or another

health care professional, such as a nurse or social worker, before you sign it to make sure that you understand the types of decisions that may be made for you. You may also wish to give your doctor a signed copy. **You do not need a lawyer to fill out this form.**

You can choose any adult (over 18), including a family member, or close friend, to be your agent. If you select a doctor as your agent, he or she may have to choose between acting as your agent or as your attending doctor; a physician cannot do both at the same time. Also, if you are a patient or resident of a hospital, nursing home or mental hygiene facility, there are special restrictions about naming someone who works for that facility as your agent. You should ask staff at the facility to explain those restrictions.

You should tell the person you choose that he or she will be your health care agent. You should discuss your health care wishes and this form with your agent. Be sure to give him or her a signed copy. Your agent cannot be sued for health care decisions made in good faith.

Even after you have signed this form, you have the right to make health care decisions for yourself as long as you are able to do so, and treatment cannot be given to your or stopped if you object. You can cancel the control given to your agent by telling him or her or your health care provider orally or in writing.

## Filling Out the Proxy Form

- Item (1) Write your name and the name, home address and telephone number of the person you are selecting as your agent.
- Item (2) If you have special instructions for your agent, you should write them here. Also, if you wish to limit your agent's authority in any way, you should say so here. If you do not state any limitations, your agent will be allowed to make all health care decisions that you could have made, including the decision to consent to or refuse life-sustaining treatment.
- Item (3) You may write the name, home address and telephone number of an alternate agent.
- Item (4) This form will remain valid indefinitely unless you set an expiration date or condition for its expiration. This section is optional and should be filed in only if you want the health care proxy to expire.
- Item (5) You must date and sign the proxy. If you are unable to sign yourself, you may direct someone else to sign in your presence. Be sure to include your address.

Two witnesses at least 18 years of age must sign your proxy. The person who is appointed agent or alternate agent cannot sign as a witness.

New York State Department of Health  
1991

# Health Care Proxy

(1) I, \_\_\_\_\_  
hereby appoint \_\_\_\_\_  
\_\_\_\_\_  
(name, home address and telephone number)

as my health care agent to make any and all health care decisions for me, except to the extent that I state otherwise. This proxy shall take effect when and if I become unable to make my own health care decisions.

(2) Optional instructions: I direct my agent to make health care decisions in accord with my wishes and limitations as stated below, or as he or she otherwise knows. (Attach additional pages if necessary.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Unless your agent knows your wishes about artificial nutrition and hydration [feeding tubes], your agent will not be allowed to make decisions about artificial nutrition and hydration. See instructions for samples of language you could use.)

(2) Name of substitute or fill-in agent if the person I appoint above is unable, unwilling or unavailable to act as my health care agent. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(name, home address and telephone number)

Unless I revoke it, this proxy shall remain in effect indefinitely, or until the date or conditions stated below. This proxy shall expire (specific date or conditions, if desired):  
\_\_\_\_\_

(5) Signature \_\_\_\_\_  
Address \_\_\_\_\_  
Date \_\_\_\_\_

Statement by witnesses (must be 18 or older)

I declare that the person who signed this document is personally known to me and appears to be of sound mind and acting of his or her own free will. He or she signed (or asked another to sign for him or her) this document in my presence.

Witness 1 \_\_\_\_\_  
Address \_\_\_\_\_  
Witness 2 \_\_\_\_\_  
Address \_\_\_\_\_



# Deciding about CPR: Do-Not-Resuscitate Orders (DNR)

## What do CPR and DNR orders mean?

CPR--cardiopulmonary resuscitation--refers to the medical procedures used to restart a patient's heart and breathing when the patient suffers heart failure. CPR may involve simple efforts such as mouth-to-mouth resuscitation and external chest compression. Advanced CPR may involve electric shock, insertion of a tube to open the patient's airway, injection of medication into the heart and in extreme cases, open chest heart massage.

A do-not-resuscitate (DNR) order tells medical professionals not to perform CPR. This means that doctors, nurses and emergency medical personnel will not attempt emergency CPR if the patient's breathing or heartbeat stops.

DNR orders may be written for patients in a hospital or nursing home, or for patients at home. Hospital DNR orders tell the medical staff not to revive the patient if cardiac arrest occurs. If the patient is in a nursing home or at home, a DNR order tells the staff and emergency medical personnel not to perform emergency resuscitation and not to transfer the patient to a hospital for CPR.

## Why are DNR orders issued?

CPR, when successful, restores heartbeat and breathing and allows patients to resume their previous life-style. The success of CPR depends on the patient's overall medical condition. Age alone does not determine whether CPR will be successful, although illnesses and frailties that go along with age often make CPR less successful.

When patients are seriously ill or terminally ill, CPR may not work or may only partially work, leaving the patient brain-damaged or in a worse medical state than before the heart stopped. In these cases, some patients prefer to be cared for without aggressive efforts at resuscitation upon their death.

## Can I request a DNR order?

Yes. All adult patients can request a DNR order. If you are sick and unable to tell your doctor that you want a DNR order written, a family member or close friend can decide for you.

## Is my right to request or receive other treatment affected by a DNR order?

No. A DNR order is only a decision about CPR and does not relate to any other treatment.

## Are DNR orders ethically acceptable?

It is widely recognized by health care professionals, clergy, lawyers and others that DNR orders are medically and ethically appropriate under certain circumstances. For some patients, CPR offers more burdens than benefits, and may be against the patient's wishes.

## Is my consent required for a DNR order?

Your doctor must speak to you before entering a DNR order if you are able to decide, unless your doctor believes that discussing CPR with you would cause you severe harm. In an emergency, it is assumed that all patients would consent to CPR. However, if a doctor decides that CPR will not work, it is not provided.

## How can I make my wishes about DNR known?

An adult patient may consent to a DNR order orally by informing a physician, or in writing, such as a living will, if two witnesses are present. In addition, the Health Care Proxy Law allows you to appoint someone you can trust to make decisions about CPR and other treatments if you become unable to decide for yourself.

Before deciding about CPR, you should speak with your doctor about your overall health and the benefits and burdens CPR would provide for you. A full and early discussion between you and your doctor will assure that your wishes will be known.

## If I request a DNR order, must my doctor honor my wishes?

If you don't want CPR and you request a DNR order, your doctor must follow your wishes or:

- transfer your care to another doctor who will follow your wishes; or
- begin a process to settle the dispute if you are in a hospital or nursing home.

If the dispute is not resolved within 72 hours, your doctor must enter the order or transfer you to another doctor.

**If I am not able to decide about CPR for myself, who will decide?**

First, two doctors must determine that you are unable to decide about CPR. You will be told of this determination and have the right to object.

If you become unable to decide about CPR, and you did not tell your doctor or others about your wishes in advance, a DNR order can be written with the consent of someone chosen by you, by a family member or by a close friend. The person highest on the following list will decide about CPR for you:

- the person chosen by you to make health care decisions under New York’s Health Care Proxy Law;
- a court appointed guardian (if there is one);
- your closest relative (spouse, child, parent, sibling);
- a close friend.

**How can I select someone to decide for me?**

The Health Care Proxy Law allows adults to select someone they trust to make all health care decisions for them when they are no longer able to do so themselves, including decisions about CPR. You can name someone by filling out a health care proxy form, which you can get from your physician or other health care professionals.

**Under what circumstances can a family member or a close friend decide that a DNR order should be written?**

A family member or close friend can consent to a DNR order when you are unable to decide for yourself and you have not appointed someone to decide for you.

Your family member or friend can consent to a DNR order when:

- you are terminally ill; or
- you are permanently unconscious; or
- CPR will not work (would be medically futile); or
- CPR would impose an extraordinary burden on you given your medical condition and the expected outcome of CPR.

Anyone deciding for you must base the decision on your wishes, including your religious and moral beliefs, or if your wishes are not known, on your best interests.

**What if members of my family disagree?**

In a hospital or nursing home, your family can ask that the disagreement be mediated. Your doctor can request mediation if he or she is aware of any

disagreement among your family members.

**What if I lose the ability to make decisions about CPR and do not have anyone who can decide for me?**

A DNR order can be written if two doctors decide that CPR would not work or if a court approves of the DNR order. It would be best if you discussed your wishes about CPR with your doctor in advance.

**Who can consent to a DNR order for children?**

DNR order can be entered for a child with the consent of the child’s parent or guardian. If the child is old enough to understand and decide about CPR, the child’s consent is also required for a DNR order.

**What happens if I change my mind after a DNR order has been written?**

You or anyone who consents to a DNR order for you can remove the order by telling your doctor, nurses or others of the decisions.

**What happens to a DNR order if I am transferred from a nursing home to a hospital or vice versa?**

The DNR order will continue until a doctor examines you and decides whether the order should remain or be canceled. If the doctor decides to cancel the DNR order, you or anyone who decided for you will be told and can ask that the DNR order be entered again.

**If I am at home with a DNR order, what happens if a family member or friend panics and calls an ambulance to resuscitate me?**

If you have a DNR order and family members show it to emergency personnel, they will not try to resuscitate you or take you to a hospital emergency room for CPR.

**What happens to my DNR order if I am transferred from a hospital or nursing home to home care?**

The order issued for you in a hospital or nursing home will not apply at home. You, your health care agent or family member must specifically consent to a home DNR order. If you leave a hospital or nursing home without a home DNR order, a DNR order can be issued by a doctor for you at home.

**State of New York  
Department of Health**

**Nonhospital Order Not to Resuscitate  
(DNR Order)**

Person's Name \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Do not resuscitate the person named above.

Physician's Signature \_\_\_\_\_

Print Name \_\_\_\_\_

License Number \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

It is the responsibility of the physician to determine, at least every 90 days, whether this order continues to be appropriate, and to indicate this by a note in the person's medical chart. The issuance of a new form is NOT required, and under the law this order should be considered valid unless it is known that it has been revoked. This order remains valid and must be followed, even if it has not been reviewed within the 90-day period.



## APPENDIX II

### SELECTION CRITERIA

Room availability may limit selection of nursing facilities. Within this limitation, however, it is still necessary and advisable for the consumer to evaluate the facility and the services provided.

Once the decision has been made that nursing home placement is the most appropriate option, these questions should be considered and carefully evaluated:

1. What kind of resident does the facility accept? Is it licensed by the New York State Health Department? Can it supply the precise medical and nursing care needed by the prospective resident?
2. Do residents look well cared for, clean and comfortable?
3. Does at least one doctor spend time in the facility with residents and the nursing staff? How many hours does the medical director spend within the facility? Can the resident's personal attending physician continue to follow after placement has occurred?
4. What is the nurse staffing ratio? Are the nurses easily summoned when necessary? How easily summoned are they during the night?
5. What dental treatment and other special medical attention, such as foot care by a podiatrist, are available to residents?
6. Are there facilities for rehabilitation, and are they used regularly? This is particularly essential for individuals who might otherwise be confined to bed.
7. Is the nursing staff trained in basic rehabilitation techniques? Are advance directives such as a living will, health care proxy and Do Not Resuscitate Orders recognized and followed?
8. Are adequate safety precautions taken by the facility? Are fire escapes and ramps available for quick evacuation? Is there an evacuation plan posted? Are fire drills held regularly? Is the building fire-resistant?
9. Does the home maintain high standards of food service? Are the meals being served in accordance with posted menus? Is the kitchen clean and properly equipped? Are dining services available for family members for special occasions?
10. Will the facility prepare therapeutic diets, such as those required by a diabetic?

There are other things to look for when visiting a nursing facility. Is the location convenient? Are the visiting hours sufficient to enable family and friends to visit frequently? Is the general atmosphere homelike? Is the facility clean, orderly and relatively free of unpleasant odors? Does each resident have sufficient space for personal possessions? Are telephones, radios, and television available? Are residents encouraged to dine and socialize together? Is the staff friendly toward residents? Are recreational services available? Are there arrangements for volunteers to come in, to socialize with the residents, to help them write letters, etc.

It must be kept in mind that the atmosphere of a nursing facility might be quite satisfactory to one person but completely unsuitable for another. One individual might prefer a large nursing facility, while another might prefer a smaller one.

**NOTE: Facilities should be visited and carefully evaluated. It may be beneficial to visit area facilities before the need arises or a crisis occurs.**



## APPENDIX III

### PHONE NUMBERS

Able Medical Transport, Inc.	315-472-3393
Access to Independence of Cortland County	753-7363P / 757-4884 F access@odyssey.net www.cilcortland.org
Addiction Solution for Individuals & Families	756-4167
Adult Protective Services	753-5248
Alarm Services	753-3877 www.21stcenturyalarm.com/toc.htm
Alert Call	1-800-752-1914
All Metro Health Care	758-8776
Alzheimer's Association - Central New York Chapter	1-800-339-4177 www.alzcnny.org
Alzheimers Disease Assistance Center - University Geriatricians	315-464-6100
American Association of Retired Persons	202-434-2277 www.aarp.org
American Cancer Society	1-800-725-3181 www.cancer.org
American Diabetes Association	1-800-724-3060 www.diabetes.org askADA@diabetes.org
American Foundation for the Blind	1-800-232-5463 www.afb.org
American Heart Association	315-446-8334 www.americanheart.org
American Lung Association	315-422-6142 www.lungusa.org
American Medical Association	312-464-5000 www.ama-assn.org
<a href="#">American Parkinson's Disease Association</a>	1-800-223-2732

Association for Vision Rehabilitation and Employment, Inc.	724-2428 www.blindinc.org
Better Hearing Institute	1-800-327-9355 www.beterhearing.org mail@betterhearing.org
Caring Community Hospice of Cortland	753-9105 hospice@odyssey.net
Catholic Charities	756-5992
Central NY Developmental Services Office	756-5637
Community Action Program of Cortland County Inc. (CAPCO)	753-6781
Cornell Cooperative Extension of Cortland County	753-5077 www.cce.cornell.edu/cortland cortland@cornell.edu
Cortland Care Center	756-9921
Cortland County Area Agency on Aging	753-5060 www.cortland-co.org/ofa ccaaa@cortland-co.org
Cortland County Caregivers Resource Center	753-5060 ccaaa@cortland-co.org
Cortland County Chapter NYS ARC	756-2015
Cortland County Department of Social Services	753-5248
Cortland County Elderly Pharmaceutical Insurance Coverage Outreach (HIICAP)	753-5060 www.cortland-co.org/ofa ccaaa@cortland-co.org
Cortland County EISEP In-Home Services	753-5060 www.cortland-co.org/ofa ccaaa@cortland-co.org
Cortland County Health Department Administration	www.cortland-co.org/health 753-5036
Environmental Health	753-5035
Nursing Division	753-5028
Cortland County Medical Society	756-3523
Cortland County Mental Health Association	758-3107 mhacortland@odyssey.net

Cortland County Mental Health Clinic	758-6100 lmedeiros@cortland-co.org www.cortland-co.org/mhealth
Cortland County Retired and Senior Volunteer Program	753-5057 ccaaa@cortland-co.org www.cortland-co.org/ofa
Cortland County Sheriff's Department	753-3311
Cortland County Veterans Service Agency	753-5014 cbullock@cortland-co.org www.cortland-co.org/veterans
Cortland Housing Assistance Council	753-8271 info@cortlandhousing.org
Cortland Housing Authority	753-1771 rcordla1@twcny.rr.com
Cortland Regional Medical Center	756-3500 www.cortlandhospital.org
Cortland Regional Medical Center - Lifeline System	756-3646
Cortland Memorial Hospital Center Durable Medical Equipment	756-3880
Cortland Regional Medical Center Long Term Home Health Care	756-3646
Cortland Regional Nursing and Rehabilitation Center	756-3900
Cortland Transit	758-3383 corttrans@odyssey.net
Coverage Stroke Network	1-800-553-6321 www.strokeassociation.org
<b>DAY CARE:</b>	
Cortland Memorial Nursing Facility Adult Day Health Care	756-3918 www.cortlandhospital.org
James L. Seward Heritage House Social Day Program	753-9668
Dial-A-Ride - Cortland Transit	758-3383 corttrans@odyssey.net
Elizabeth Brewster House	749-2442 brewsterhouse@cnymail.com
Epilepsy Foundation of America	1-800-332-1000 www.epilepsyfoundation.org
Family Counseling Service	753-0234

Franziska Racker Center	753-9375 kerried@rackcenters.org www.rackercenters.org
Greenbriar Home for Adults	749-7287
Groton Residential Health Care Facility	898-5876
Health Insurance Information, Counseling and Assistance (HIICAP)	753-5060 ccaaa@cortland-co.org www.cortland-co.org/ofa
Home Care for Cortland County, Inc.	753-9326
Horizon House	753-6751 gmoos@cortland-co.org www.cortland-cco.org/mhealth/Horizon
Incontinence, Help for	1-800-252-3337 nmuller@nafc.org www.nafc.org
Island Peer Review Org. Inc. (Quality Care for Medicare)	1-800-331-7767 www.IPRO.org support@ipro.us
Ithaca College Ewing Speech and Hearing Clinic	274-3714
Legal Services for the Elderly	753-5060 ccaaa@cortland-co.org www.cortland-co.org/ofa
Legal Services of Central New York	753-1134
LIFENET	1-888-424-8164 www.lifenet.org
Life Safety Consultants	756-4996
Lupus Foundation of America	1-800-558-0121 www.lupus.org info@lupus.org
Medic Alert Foundation	800-432-5278
Medicare Part A - Hospitalization	1-800-633-4227 www.medicare.gov
Medicare Part B Blue Shield of Western New York	1-800-633-4227 <a href="http://www.medicare.gov">www.medicare.gov</a>

National Association of the Deaf	301-587-1788/ TTY# 301-587-1789 www.nad.org NADinfor@nad.org
National Cancer Institute	800-422-6237 www.cancer.gov cancergovstaff@mail.nih.gov
National Council on Alcoholism and Drug Dependence	1-800-622-2255 national@ncadd.org http://www.ncadd.org
National Institute on Aging	1-800-222-2225 www.nia.nih.gov
National Mental Health Association	1-800-969-6642 www.nmha.org
National Multiple Sclerosis Society	1-877-334-4867 www.nmss.org
New York State Elderly Pharmaceutical Insurance Coverage (EPIC) Hotline	1-800-332-3742 <a href="http://www.health.state.ny.us/health_care/epic/index.htm">http://www.health.state.ny.us/health_care/epic/index.htm</a>
New York State Department of Health	1-800-562-9423 www.health.state.ny.us
New York State Office for the Aging	1-800-342-9871 www.aging.state.ny.us
New York State Long Term Care Ombudsman	1-800-342-9871 www.ombudsman.state.ny.us
New York State Insurance Department/Consumers Services Bureau	1-800-342-3736 www.ins.state.ny.us
Northwoods Rehabilitation and Extended Care Facility of Cortland	753-9361
Protective Services for Adults, Cortland County	753-5265
Red Cross	753-1182 <a href="http://chapters.redcross.org/ny/cortland/c.htm">chapters.redcross.org/ny/cortland/c.htm</a> bonnie-ccarc@cnymail.com
Rosewood Home for Adults - Cincinnatus	863-3833
Seven Valley Council on Alcoholism	756-8970 www.7vcasa.org
Seward Heritage House Day Care Program	753-9668

Social Security Administration	1-800-772-1213 <a href="http://www.socialsecurity.gov/">http://www.socialsecurity.gov/</a>
Southern Tier Aids Program, Inc.	798-1706 <a href="http://www.stapinc.org/">http://www.stapinc.org/</a> info@stapinc.org
SUCC Speech and Hearing Clinic	756-5423
TLC Ambulette Wheelchair Service	756-7564 315-422-0211 www.tlc3.com
United Seniors Health Cooperative	202-479-6973
Veterans Medical Center - Syracuse	315-476-7461 <a href="http://www1.va.gov.visns.visn02/syracuse.html">http://www1.va.gov.visns.visn02/syracuse.html</a>
Veterans Services Office - Cortland	753-5014 <a href="http://www.cortland-co.org/veterans/index.html">http://www.cortland-co.org/veterans/index.html</a> cbullock@cortland-co.org
Walden Place	756-8101

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**LONG TERM CARE COLATION MEMBER AGENCIES**

- Cortland Regional Medical Center
- Cortland County Mental Health Department
- Cortland County Health Department
- Cortland County Department of Social Services
- Cortland County Legislature
- Cortland County Area Agency on Aging
- Cortland Housing Authority
- Home Care for Cortland County
- Northwoods Rehabilitation and Extended Care Facility of Cortland
- Cortland Care Center
- Cortland Developmental Services Office
- Elizabeth Brewster House
- State University of New York, College at Cortland
- Family Health Network of CNY, Inc.
- Cortland Regional Nursing and Rehabilitation Center
- Eight County Physician Organization
- Greenbriar Adult Home
- Long Term Home Health Program
- Walden Place
- Access to Independence

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