

SAFE PLANNING

Seniors' Asset & Family Estate Planning

FEBRUARY 2013

In this Issue:

- Income Needs For a Patient's Spouse
- The Woes of Getting Older
- So Many Misconceptions

**Call our
offices for a
FREE
consultation!**

Phone (318) 869-3133
Toll Free 1-888-836-2738
Fax (318) 869-3134
920 Pierremont Rd.
Suite 105
Shreveport, LA 71106

Phone (941) 907-3030
Toll Free (877) 588-3030
Fax (941) 907-7780
6800 Professional Pky. West
Lakewood Ranch, FL 34240

Visit our website at
www.safeplanning.net



Income Needs for a Patient's Spouse

By Ric Cochran

Did you know Medicaid rules provide for spouses of nursing home patients to have income to live on? Sadly, many don't. And while I don't see anyone eager to place a spouse in a nursing home, it's usually the hardest thing they ever do; many risk their health and safety as well as the health and safety of their spouse trying to keep them at home long past the time for transition. A spouse repeatedly falling, wandering off, becoming combative, or simply requiring more care than can be delivered by family caregivers has become a risk to themselves and others. Many men in effect say, "I'm going to keep her home as long as I can, even if it kills me." Too frequently, it does just that. Without him, his widow goes to the nursing home and he's not around to care for her and comfort her there. They don't realize how important it is for the patient for the caregiver to not get run-down. Many women do pretty much the same thing. Why?

Many believe no one can care for their spouse as well as they can. Evidence in too many cases doesn't support this belief. It's all too common to find out the spouse administering the medicine, doing the cooking, and other household chores has health issues of their own that endangers the health of the other. Examples include not being able to read the medicine labels, not fully understanding the importance of strictly following all the dosage instructions, and not making sure meds are always taken on schedule. It's not at all unusual for a spouse with dementia to be cared for by a spouse who also has memory issues. Can you see how that could lead to dosages missed, even meals missed? It's very common and explains why many people improve when they transition to a facility providing regular meals and medication compliance. I don't see anyone trying to give a spouse bad care. I just see too many struggling to do their best when their best is no longer enough. Caregivers may feel guilt and shame, failing to realize they are trying to do more than anyone in their position is humanly capable of.

Income needs often explain why too many try to care for a spouse at home beyond their ability to do so effectively. Misunderstanding how Medicaid works, many think they will lose everything, which should never happen with the assistance of those in my field dedicated to preserving assets for families in a long-term care crisis. And here are three things families usually don't realize about income for a spouse at home:

- The income of a spouse at home should not count against the Medicaid eligibility of a spouse in a nursing home. A spouse at home is entitled to unlimited income!
- A spouse at home with low income can often draw income from the spouse who is a patient in a nursing home, up to \$2,898 in 2013.
- Just because you are told that you or your spouse won't qualify for assistance because of too many assets or too much income doesn't mean a professional can't help you meet the requirements and get help. Don't believe anyone who tells you otherwise!

Not knowing this, many spouses afraid of not having anything to live on are putting their own health and that of their loved one at risk. It's one thing to care for someone at home when it's practical. It's another thing to try to do the impossible just because you don't know what else to do. Help is available!

Ric Cochran writes articles, speaks to groups, and assists families facing the crisis of paying for long-term care. He can be reached at 318.869.3133 at S.A.F.E. Planning. Check out his new Facebook page at www.facebook.com/AgingAmerica and "like" it to receive updates and new information.

Florida News

6800 Professional Parkway West
Lakewood Ranch, FL 34240

WHAT IF...

Everything you thought you knew about investing was wrong?

Rainey Asset Management (RAM)*

- Why do investors really lose money? You'll be shocked!
- Why does Wall Street profit even when investors lose?
- Why does the financial press favor Wall Street over Main Street?
- Who profits from greed and fear at your expense?
- What about volatility and how can it be tamed?
- How can investors achieve true financial peace of mind?

Call our office for information on upcoming workshops.

Make plans to attend one or several!

*Rainey Asset Management, Inc. is a Registered Investment Advisory Firm registered in Florida and Louisiana.



Cindy Tench, Office Manager / Investment Services Coordinator in the Florida Office with her pups...Rusty and Rambo. Congratulations! Cindy just celebrated her fourth year with our company.

The secret to staying young is to live honestly, eat slowly, and lie about your age.

-Lucille Ball

Oh, the Woes of Getting Older

By Elaine Marze, Newsletter Editor

Many of our clients are over age 50. Most of us have occasionally moaned about the trials of getting older. Some of us have learned how incidents and accidents from which we would have bounced back 20 years ago can have profound results now as I found out during Thanksgiving holidays when I broke a leg in a fall. Before my broken leg, I thought I had empathy and sympathy for the handicapped! The past weeks have been enlightening – especially now that I am a widow with no spousal support to hand me things and hold me upright while I tried to balance on one leg.

Trying to walk on crutches was a disaster so I spent most of my time in a wheelchair until I was told I could use a walker. Mostly I stayed at home because it was too much trouble to go anywhere, but I did get talked into attending a Sunday school party.

My leg was so swelled up that I had to have help unraveling the four tangled Velcro straps on my boot and help to get it on (I usually just carried it in my hands) to leave for the party. With my newly developed upper body strength from pushing the wheels on my chair, I grabbed hold of the handle in the Suburban and swung up like a jungle ape, but the real fun began when I got to the party which was held at an Acadian style house on piers –with five steps between the ground and the porch!

Help came in the form of retired policeman, Roger Connell, who swore his back was up to the immense challenge of helping my escort carry me, my heavy boot and wheelchair up the stairs. I believe it was on the second step that the foot-holder part that one man was gripping – came off in his hand so that his side of the chair dipped –dramatically. All of a sudden I'm hanging upside down with him hyperventilating (hopefully from the challenge of holding his side of the chair with one hand) while I'm searching desperately for something to grab to keep from literally being dumped on my head. My wheelchair did not come equipped with a seatbelt, and I feared a broken neck to go along with my leg! While that drama was being enacted on my left side, Roger was making comments about my weight which seemed funny at the time (probably the stress) so he and I were laughing so hard he was in danger of dropping his side of the chair. I was grabbing every body part on either man I could get hold of, determined that if I go down, they were going down with me. I'm pretty sure I had a death grip on one of Roger's pectoral muscles by the time they got me deposited on the porch. I was praying that neither one of them would have a heart attack because of their good deed – and for my diminishing self-esteem. Being lifted and toted by "older" men who are doing some dramatically heavy breathing could be a cause for alarm!

As the partying continued that night, there were numerous comments and plans (some in very bad taste I thought) about how to get me down the steps, including one plan involving a wheel-barrow and a 1x6, and another plan using a tractor's front-end loader. Then, when I had to make a trip to the bathroom in my wheelchair, it was a little disconcerting to have kind-hearted friends announcing, "Clear a path! Coming through! Elaine has to go to the bathroom!" One thing about old folks is, when you've been "down" you lose some of your modesty and pride as you realize you have to have help in ways you've hitherto rejected.

We partied late. It had to have been at least 9 pm when we got ready to leave! I'd been dreading this moment. New exit plan: four men were going to carry me down the stairs (without a front-end loader I'm pleased to say). They gathered round and lifted me, my heavy boot and chair, while commenting on my apparently overwhelming weight, with my late husband's retired SFD Chief Jim Rolland reminiscing about how he was reminded of the 600 pounders they hauled out of buildings during their firefighting years. All four men were obviously on different steps which meant that my body was flipped, flopped and tossed several times during our ungraceful exit for which all the attendees turned out to watch per the evening's entertainment. Jim and Roger were on my right side, and vocally hoped they might survive without having a heart attack, continuing to erode what little self-esteem I had left. Roger kept proclaiming I'd eaten too much (I hadn't) and had gained weight in the three hours we'd been there. The other two men were threatening to fall, and I know one of them stumbled because I felt it on our clumsy way to the bottom. With a sign of relief, I thanked the laughing

bystanders for their applause, and with lots of help my chair and I were loaded up for the trip back to my apartment.

We arrived, and my friend went to the rear to unload the wheelchair. I heard parts hitting the concrete, but eventually he arrived at my door with the chair. I held onto the ceiling handle and swung down again like an agile primate. As soon as my bottom hit the chair I knew something was different. The wheelchair cushion was one of the things that had fallen out on the ground. The cushion is covered on one side with HEAVY-duty, commercial type Velcro which attaches to the Heavy-duty Velcro I was sitting on in my stretch-knit pants. Sitting on Velcro feels like sitting on cockle-burrs. I didn't realize how adhered I was to the Velcro until I tried to stand up on my one good leg for the cushion to be repositioned. Just a word of advice to people Velcroed to something: When you stand up, portions of your pants stay attached to the bottom of the chair. Just saying.

So to all the people who live on crutches, walkers and wheelchairs – I salute you! And, to those friends and family members who attempt to help us navigate the world of the handicapped, you deserve a lot of credit. Also, on behalf of all us who have had to depend on “help” from others, thank you for not grumbling or whining about all the chaos that comes with our disabilities!

Humorous Headlines

Include Your Children when Baking Cookies

Something Went Wrong in Jet Crash, Expert Says

Police Begin Campaign to Run Down Jaywalkers

Safety Experts Say School Bus Passengers Should Be Belted

Drunk Gets Nine Months in Violin Case

Survivor of Siamese Twins Joins Parents

Iraqi Head Seeks Arms

Eye Drops Off Shelf

Teacher Strikes Idle Kids

President Wins on Budget, But More Lies Ahead

Enraged Cow Injures Farmer with Ax

Plane Too Close to Ground, Crash Probe Told

Miners Refuse to Work after Death

Juvenile Court to Try Shooting Defendant

If you are a member of a church, civic, or other group that would like for us to come speak about Medicaid planning and provide you with information on how to protect your savings, please call our office and let us know.

Louisiana News

TWO FREE PUBLIC WORKSHOPS

Wednesday, March 6

**SHREVE MEMORIAL LIBRARY
BROADMOOR BRANCH**

**1212 CAPTAIN SHREVE DRIVE
(ONE BLOCK NORTH OF EAST PRESTON)**

**10am / S.A.F.E. Planning : Don't Lose
Your Home & Savings To Pay For
A Nursing Home**

**1pm / Investing Myths Shattered:
How Wall Street is
Fleeing Investors**

*Presented by Rainey Asset Management, Inc.

Learn the truth about where gains in the market come from, how to manage volatility, whether you are investing prudently or chasing popular myths.

Please call ahead to make your reservation! (318) 869-3133

Invite friends, family members, and anyone you care about to attend our workshops. This is important to everyone who wants to protect an estate from devastating nursing home costs and / or costly investing mistakes.

**See the new issue of
PRIME TIME MAGAZINE
at [www.issue.com/
primetimag](http://www.issue.com/primetimag)**

OR

**When you come by the
office, be sure and pick
up your FREE copy!**

*Rainey Asset Management, Inc. is a Registered Investment Advisory Firm registered in Florida and Louisiana.



Seniors' Asset & Family Estate Planning

920 Pierremont Rd.
Suite 105
Shreveport, LA 71106

PRSR STD
US POSTAGE
PAID
SHREVEPORT, LA
PERMIT # 1079

So Many Misconceptions

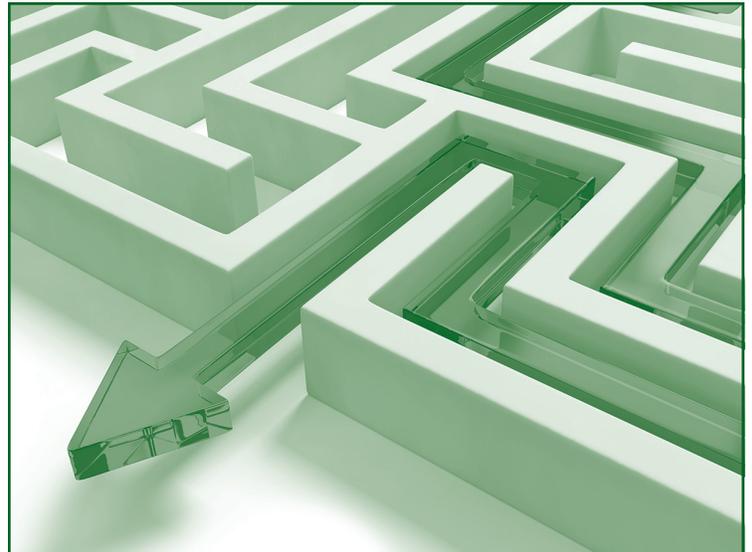
The maze of Medicaid information and misinformation is astounding. It is no wonder that people get frustrated and upset trying to find out what to do, how to do it and when to do it. That is why so many people come to us.

Some people don't even know the difference between Medicaid and Medicare. When they hear the word Medicaid, they may think that if a person receives Medicaid for their long term care needs that the nursing home has a different standard by which they care for those patients. Or, worse, they might believe that they will receive a notice from the state that informs them where they will have to go. Sometimes a family will tell us that they aren't interested in qualifying for Medicaid because they are afraid the care won't be the same, but when a family member is approved for benefits that person will not only stay in the same facility, but will stay in the same room and same bed as before.

You can certainly find differences in the quality of the facilities and the care given between one nursing home and another, but within an individual facility you will not see any difference in the quality of care that a Medicaid recipient receives versus that of someone who is paying privately.

Most of the skilled nursing facilities that we deal with accept Medicaid. Some of our Medicaid clients are in the newest, nicest facilities in our area. Some have been in the facility and are converting over to Medicaid, and some were admitted as Medicaid eligible on the first day they went in. They will see no difference in their care than someone who is in the bed next to them who is self paying or has private insurance.

Some misinformation about this has been propagated by those in the insurance industry who were trying to sell long-term care insurance. Long-term care insurance can be a good thing. If a person can qualify for it



and afford it, it should be considered. Some policies will allow benefits at home or will pay for a private room which Medicaid will not do.

If you have someone who needs to be in a long-term care facility, do your homework and visit the homes for yourself. Talk to the staff, look at the rooms, cafeteria, etc. and see if you can find one that is suitable for your loved one. You can take into consideration the location of the home and search for one that is in close proximity to the family. It is up to you! The state is not going to assign your loved one to a nursing home – you can even change facilities if you feel that you need to for whatever reason. As long as the new facility accepts Medicaid and has a bed available, a change can be made and Medicaid benefits will continue without having to reapply for benefits.

Age is an issue of mind over matter. If you don't mind, it doesn't matter.

-Mark Twain