

[TRACK 10: SURVIVOR STORIES: LIVING ARRANGEMENTS]

Social worker

[Social Worker]

Maria's husband died several years ago. Since then, she has lived alone and has found it more and more difficult to take care of her home and yard. Then, last year she developed cancer, and the treatments have taken their toll. Maria now finds it hard to move around without getting short of breath and feeling fatigued. Given the stage of Maria's illness, her doctor feels she should not be living alone any longer and has suggested to Maria and her children that they get together to decide about making some new living arrangements for her. The doctor even suggested that a nursing home might be a good idea.

[Social Worker]

Maria was devastated to hear this suggestion, as she very much wants to continue to live at home. She lives on a fixed income and does not have a lot of extra money to pay for housekeeping and gardening help. But, she has always been good with figures and she and her husband went over their finances carefully before his death.

[Social Worker]

Maria decided that she needed to collect some information so she can negotiate for herself better. I'm an oncology social worker at our local hospital. I had first met Maria when she was in the hospital after her cancer surgery. She called me now to ask if I could help her collect information about the services in her area, like how you apply, what kind of waiting list they have, and how much they cost. I gave her an important telephone number -- the Eldercare Locator number -- 1-800-677-1166. It's a national number, but when you call it, you can get help in finding local support resources. At first, Maria was uncomfortable about calling a national number, but she thought, it's a free call, so why not give it a try. The people who answered were friendly and helpful. They had all kinds of suggestions and resources for her. She felt good knowing they were there if she ever needed to call them again. Most importantly, the Eldercare people told her about how she could get meals delivered and get some household help.

[Social Worker]

Once she had this information, I helped Maria plan an agenda before meeting with her children.

[Social Worker]

She feels ready to negotiate for where she wants to live and how her care can be managed at home.

[Narrator]

Many people in Maria's situation may choose differently. Another person may be comfortable with a move to a nursing home or assisted-living facility, but they, too, will need information and resources to make this happen. Still other people may have planned ahead and purchased special insurance just for nursing-home care. They, like many of us, have discovered that Medicare does not pay for nursing-home care needed at the end of life. Medicare pays only for care that is considered "skilled" and that needs a nurse to perform it. Medicare and other insurance do not cover what is called "custodial" care. This is care needed to bathe, dress, feed, and assist a person in their usual daily activities.

[Narrator]

State Medicaid insurance will pay for nursing-home care that is custodial, but your financial assets and income must be very limited to qualify. Couples may fear that the remaining partner will lose their home or ability to financially support themselves, while caring for the partner with cancer. Laws are in place to protect the surviving spouse. You can obtain this information by contacting your state Department on Aging or your local Area Agency on Aging.

[Narrator]

This last section of this program, Standing Up for Your Rights, may be the most important. After all, who knows better than you what you need and want for your life, but sometimes, being an older person makes it more difficult to get what you need or desire. This may be especially true with pain control.

[Narrator]

Chronic pain is common in older people. In fact, older people often believe that some level of pain is expected as a part of aging. Some health-care workers may believe this, too. Yet, chronic pain has a very negative impact on most people. They can become depressed, stop going out or seeing friends, have difficulty sleeping, or getting around. Too often, pain is under-treated in older people.