



Jim Koewler <jameskoewler@gmail.com>

Seniors and Special Needs News - September 11, 2015

1 message

The Koewler Law Firm <Newsletter@protectingseniorsnews.com>
 Reply-To: The Koewler Law Firm <Newsletter@protectingseniorsnews.com>
 To: Jim <protectingseniorsnewsarchive@gmail.com>

Fri, Sep 11, 2015 at 9:02 AM

With help, seniors and people with special needs can keep some of their assets in the family rather than lose their entire life savings to the costs of long term care. They can use these protected assets to enhance their quality of life beyond what long term care alone will provide.

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The Koewler Law Firm
 JAMES L. KOEWLER, JR.



Seniors and Special Needs News

Legal Issues when someone has Dementia Think about Medical Insurance

Today's newsletter continues the discussion of Legal Issues when someone has Dementia. The introductory newsletter ([May 1, 2015](#)) put forth the issue of "Who can speak for someone with dementia?" The [May 15, 2015](#) newsletter discussed the situation where the person with dementia has Advance Directives in place. The [May 22, 2015](#) newsletter discussed the legal issues in determining whether a dementia sufferer can choose to have new Advance Directives prepared. The [May 31, 2015](#) newsletter discussed options in preparing a Health Care Power of Attorney. The [June 5, 2015](#) newsletter discussed how to decide whether to prepare a Living Will. The [June 12, 2015](#) newsletter discussed the General Power of Attorney. The [June 19, 2015](#) newsletter discussed the importance of making the General Power of Attorney "durable." The [June 26, 2015](#) newsletter discussed whether to make General Powers of Attorney "springing." The [July 3, 2015](#) newsletter discussed revoking prior Powers of Attorney. The [July 10, 2015](#) newsletter discussed Do Not Resuscitate orders. The [July 17, 2015](#) newsletter discussed the Right of Disposition designation. The [July 24, 2015](#) newsletter discussed the Will (aka Last Will and Testament.) The [August 1, 2015](#) newsletter discussed Beneficiary Designations on IRAs, bank accounts, etc. The [August 7, 2015](#) newsletter discussed whether to pre-plan a funeral. The [August 14, 2015](#) newsletter discussed how to choose a final resting place. The [August 28, 2015](#) newsletter discussed pre-planning the funeral ceremony itself. The [September 4, 2015](#) newsletter discussed when and how to pay for the pre-planned funeral. Today's installment will discuss medical insurance choices.

Today's installment continues the discussion of issues to manage when someone finds out that they have a disease that causes dementia. These issues should be managed before the dementia gets worse, before the disease takes away the person's ability to make decisions. Along with the issues previously discussed, someone who has dementia (or his or her family) should look at the different options to pay for his or her upcoming medical costs.

Because the vast majority of people who have dementia related disease are seniors, this installment will focus on Medicare options. The people who have dementia related disease that are not yet old enough to qualify for Medicare have health insurance options very similar to those available to people with special needs discussed in the [March 6, 2015](#) installment of this newsletter. (Someone who becomes disabled (from the dementia related disease or from some other cause) can get Medicare 25 months after the disability is recognized by the Social Security Administration. These people have the same Medicare options as seniors.)

People who have Medicare available to them have three basic options for medical insurance. So called "straight Medicare" provides the insured person with Medicare coverage for 80% of medical costs. The insured person is responsible for the other 20% as a co-pay.

People who do not wish to pay the 20% co-pay can purchase Medi-Gap insurance. Medi-Gap policies can be either Advantage Plans or Medicare Supplements.

An Advantage Plan is an insurance policy that pays most or all of the 20% of medical costs that Medicare does not cover. The amount of the insured's new co-pay depends on the Advantage Plan that the insured chooses. Generally, the higher the premium, the lower the co-pay. There are plenty of other options that change the price and co-pay as well. (An Advantage Plan actually steps into the shoes of Medicare and pays the 80% in addition to whatever costs exceed the insured's co-pay. The Advantage Plan insurance company receives both the premium of the individual insured person and a payment from the Medicare program in lieu of Medicare's usual 80% payment towards the insured's costs. The Advantage Program's coverage of Medicare's portion of costs is generally not noticed by the insured.) Because an Advantage Plan is a "replacement" for Medicare, it can have some limitations in covered services or in approved service providers as compared to "straight Medicare." In addition, there are many different advantage plans, each offering slightly different coverage, from which to choose.

When an insured person has a Medicare Supplement, the Medicare program pays its usual 80% pays the insured's medical costs, and the Supplement pays the 20% not covered by the Medicare office. Medicare Supplements,

because they supplement Medicare rather than replace Medicare, do not generally have any differences from Medicare in covered services or approved service providers. There are many different Supplements. The differences among Supplements generally is small, but worth examining.

Advantage Plan premiums usually cost about one-third of Medicare Supplements. (Some Advantage Plans have a \$0 premium, in fact.) An Advantage Plan's limitations on services and providers is the trade-off for a lower premium. The most glaring difference between Advantage Plans on the one hand and both straight Medicare and Medicare Supplements on the other hand is the coverage of post-hospitalization rehabilitation services.

With straight Medicare and Medicare Supplements, an insured person who has been admitted to the hospital for three days and then needs post-hospitalization rehab can have 100 days of rehab coverage. Someone on an Advantage Plan may have rehab coverage end before 100 days have elapsed. An Advantage Plan (because it has rules slightly different than straight Medicare) can determine that rehab is not helping the insured person and can end coverage. Sometimes the rehab coverage is stopped as early as day 20. Rehab can be very expensive, so Advantage Plans have a strong incentive to end rehab coverage as early as possible.

("Admission" to the hospital rather than "under observation" in the hospital is a very important distinction in the availability of insurance coverage for rehab. That issue is not handled differently by Medicare, Advantage Plans, or Medicare Supplements, though. Consequently, the "admission" versus "observation status" issue is not important to today's discussion. I mention it here as a side note because it is an important issue for all people insured through Medicare.)

Someone who has a dementia causing disease is likely to need much greater medical attention than before the dementia started. Accordingly, someone suffering from dementia (or his or her family) may want to change to an insurance plan with greater coverage than he or she had previously. (Open enrollment for such a switch falls between October 15 and December 7 each year, with the new policy taking effect on January 1 of the next year.)

Unfortunately, someone covered by any form of Medicare cannot switch plans on demand. (Medicare, unlike the Affordable Care Act, allows the insurance company to make underwriting decisions on individual plans.)

Trying to move to a plan that provides more coverage may require a medical examination and will certainly require answering medical questions. If the dementia related disease has been identified by a doctor or is noticeable to an insurance company underwriter, a more generous plan may not be available.

Accordingly, I urge anyone who believes that he or she is in the early stages of a dementia related disease to move to a plan with better coverage (if necessary) at the next open enrollment period. Generally, I urge people to

move to a Medicare Supplement, if they can.

If a Medicare Supplement is not available, an alternative is an Advantage Plan or even straight Medicare with a separate Hospital Indemnity policy. (The cost of an Advantage Plan plus Hospital Indemnity policy is usually less than a Medicare Supplement.) A Hospital Indemnity policy is subject to underwriting, though. If someone with a dementia related disease waits too long, the Hospital Indemnity policy may not be available either.

Without considering the cost of premiums, my preferences for medical insurance for someone who has a dementia related illness is a Medicare Supplement. My second choice is an Advantage Plan with a Hospital Indemnity policy. My third choice is straight Medicare. Finally, my fourth choice is an Advantage Plan. I realize that my preference is for the most expensive insurance. When someone learns that he or she has dementia, I suggest that he or she abandon price sensitivity and try for the best coverage. (The insurance may not be available because of the dementia or some other pre-existing condition, but, with the disease likely only to get worse, trying to get the best insurance as soon as possible is a good idea.)

Most people on Medicare keep their existing insurance plans from year to year. Someone who believes that he or she has the early stage of a disease that causes dementia should take a hard look at his or her insurance choices at the next open enrollment period.

Acknowledgement: Thanks to Michael Whitaker of Premier Solutions Group in Brookpark, Ohio for helping me understand Hospital Indemnity insurance.

Suggest a Newsletter Topic

I try to write something new (and useful) in my newsletter every week. So, I know that I will sometimes have writer's block. I'd like your help, please.

If you have a topic for my newsletter that you'd kindly suggest, I promise to consider it. (I don't promise to pursue it. I just promise to consider it.) I try to write about issues concerning seniors, health care, long term care, special needs, Veterans Pension (aka Aid and Attendance) benefits, and Veterans Compensation benefits. Please keep your suggestions within or near to those topics.

Please submit your suggestion [here](#). If I use your topic suggestion, I'll put the content in both my blog and newsletter.

Thank you for your help.

Social Media Posts from the past week

09-10-2015 #Crayons that are easier for children with #SpecialNeeds to use
<http://ow.ly/RxqXY>

09-09-2015 Getting ready for #AgingParent to get out of #Hospital into
#HomeCare <http://ow.ly/RxoD4>

09-08-2015 Choices when #LongTermCareInsurance premiums
increase <http://ow.ly/ROqiA>

09-07-2015 What to consider when looking at #HomeCare for an
#AgingParent <http://ow.ly/RxAAR>

09-06-2015 Possible preventive steps for #Alzheimer'sDisease
<http://ow.ly/RxpjH>

09-05-2015 An #ElderLaw #Attorney is good for health. Who expected that?
<http://ow.ly/RxrnH>

09-04-2015 #Legal Issues when someone has #Dementia – Consider how to
Pay for a Pre-Planned #Funeral <http://wp.me/p47F09-do>

Older social media posts can be found in the [social media post archive](#) on the
firm's website, ProtectingSeniors.com.

The Koewler Law Firm News

9-22-2015 Jim Koewler will discuss Money Management for Seniors at
Chambrel of Montrose, a Brookdale Community, in Akron, Ohio.

9-24-2015 Jim Koewler will discuss Helping Reluctant Seniors accept the
benefits of Long Term Care at Stow-Glen Retirement Village in Stow, Ohio.
Continuing education credit is available for Certified Case Managers, social
workers, counselors, and nurses. (rescheduled from an earlier date)

10-28-2015 Jim Koewler will discuss Preventing Senior Fraud at Southwest
General Medical Center in Middleburg Heights, Ohio. Continuing education
credit is available for Certified Case Managers, social workers, counselors,
and nurses.

10-28-2015 Jim Koewler will discuss Helping Reluctant Seniors accept the
benefits of Long Term Care at Westlake Village in Westlake, Ohio.

Continuing education credit is available for Certified Case Managers, social workers, counselors, and nurses.

Older items of firm news can be found in the [news archive](#) on the firm's website, ProtectingSeniors.com.

Jim's available presentations

- Overcoming Seniors' Resistance to Long Term Care (Continuing Education credit available for social workers, counselors, nurses and Certified Case Managers)
- Preventing Senior Fraud (Continuing Education credit available for social workers, counselors, and nurses)
- My Care Ohio and Medicare/Medicaid “Dual Eligibles” (Continuing Education credit available for social workers, counselors, and nurses)
- Navigating Medicaid, Medicare, and the Affordable Care Act (Continuing Education credit available for social workers, counselors, and nurses)
- What people Know about Long Term Care that is Wrong (Continuing Education credit available for social workers, counselors, and nurses)
- Government Benefits that can help Pay for Long Term Care (Continuing Education credit available for social workers, counselors, and nurses)
- Legal Issues for People with Dementia (Continuing Education credit available for social workers, counselors, and nurses)
- Veterans Benefits for Long Term Care (Continuing Education credit available for social workers, counselors, and nurses)
- Advance Directives – Powers of Attorney, Living Wills, etc. (Continuing Education credit available for social workers, counselors, and nurses)
- Buying Long Term Care Insurance Wisely (Continuing Education credit available for social workers, counselors, and nurses)
- Planning Ahead to Protect against Long Term Care Costs (Continuing Education credit available for social workers, counselors, and nurses)
- Organizing for Long Term Care (Continuing Education credit available for social workers, counselors, and nurses)
- Pre-planning your Funeral (Continuing Education credit available for social workers, counselors, and nurses)
- Elder Law: A Primer (Continuing Legal Education credit available)
- Protecting your Money when you need Long Term Care and Essential Estate Planning Considerations (with free living wills for up to 20 audience members)
- Myths about Long Term Care Costs
- How to help your Parents Manage their Affairs

Upcoming meetings

9-11-2015 Eldercare Professionals of Ohio, Home Instead Senior Care, Parma, Ohio, 9:00 a.m.

9-14-2015 Medina County Senior Services Network's Education Committee, Yours Truly, Medina, Ohio, 11:30 a.m.

9-15-2015 UH Bedford Medical Center Senior Network, Jennings Center for

Older Adults, Garfield Heights, Ohio, 8:30 a.m.

9-16-2015 Geauga Professional Association Specializing in Seniors ("PASS"), Maplewood Assisted Living, Chardon, Ohio, 8:30 a.m.

9-22-2015 Summit County Senior Services Network, Anthony Kucko Kertesz Funeral Home, Akron, Ohio, 8:00 a.m.

9-22-2015 Professional Networking Group, Montefiore, Beachwood, Ohio, 8:30 a.m.

9-22-2015 Wayne Holmes Senior Service Coalition, Wayne County Care Center, Wooster, Ohio, 8:30 a.m.

9-24-2015 Parma Hospital Senior Resource Network, Westwood Place, Strongsville, Ohio, 8:30 a.m.

9-24-2015 Portage Senior Services Network, Family and Community Services Building, Ravenna, Ohio, 8:30 a.m.

9-24-2015 The Association of Specialists in Aging, Mentor Senior Center, Mentor, Ohio, 8:30 a.m.

9-25-2015 Eldercare Professionals of Ohio, Broadway Care Center, Cleveland, Ohio, 9:00 a.m.

9-30-2015 UH Bedford Senior Network's Wellness Expo and Cookoff, Solon Senior and Community Center, Solon, Ohio

10-6-2015 Aging Services Network of Euclid, Euclid Hospital's Waltz Auditorium, Euclid, Ohio, 8:30 a.m.

10-7-2015 Stark Senior Services Network, Canton Baptist Temple, Canton, Ohio, 9:00 a.m.

10-7-2015 Richfield Chamber of Commerce luncheon, Days Inn and Suites, Richfield, Ohio, 11:45 a.m.

10-7-2015 Medina County Senior Services Network's Client Services Committee, Sully's, Medina, Ohio, 3:00 p.m.

10-8-2015 Lorain County Senior Services Network, 8:30 a.m.

10-9-2015 Eldercare Professionals of Ohio, Ames Family Hospice House, Westlake, Ohio, 9:00 a.m.

Newsletter Archive

Past issues of this newsletter can be found in the [newsletter archive](#) on the firm's website, ProtectingSeniors.com.

Contact Jim Koewler

If you'd like to contact Jim, this newsletter has a dedicated [contact page](#) on the firm's blog site, ProtectingSeniorsNews.com.

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The Koewler Law Firm
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