Resource Directory for Rye's Seniors

compiled by the
RYE SENIOR ADVOCACY COMMITTEE
City of Rye
2015

The special contents of this publication are copyright 2015, by the City of Rye
ACKNOWLEDGEMENTS

Members of the City Council

MAYOR

City Council Members

Hon. Laura Brett  Hon. Kirstin Bucci  Hon. Julie Killian
Hon. Richard Mecca  Hon. Terrance McCartney  Hon. Richard Slack

Members of the Rye Senior Advocacy Committee

Joseph P. Murphy, LCSW
CHAIR

Philip Cicchiello  Ellen D'Angelo
Josephine Del Monte  Esther Martensen
Edward Matthews  Jane O'Sullivan

NEW YORK STATE SENATOR GEORGE LATIMER
Consultant

with generous support from the
ASSEMBLYMAN STEVE OTIS' STAFF
who assisted in researching this edition's revisions (e)
Table of Contents
(Note that at the beginning of each Section you will find a Table of Contents)

Introduction *(please read this first)* ...................................................i

Enjoy Rye & Environs...........................................................................Section 1

Adult Day Care Services........................................................................Section 2

Health & Special Services to Remain in Your Home................Section 3

Health Services.....................................................................................Section 4

Payment or Insurance for Health Care & Prescriptions......Section 5

Legal & Protective Services...............................................................Section 6

Finance, Taxes & Assistance............................................................Section 7

Housing for Seniors in Westchester...................................................Section 8

Transportation Services.......................................................................Section 9

Additional Information Resources .................................................. Section 10
Resource Directory for Rye's Seniors

The enclosed data has been assembled to help anyone reviewing or searching for information on service providers of special interest to seniors, residing in Rye City. It has been compiled from a number of sources believed to be accurate but there is no guarantee (expressed or implied) as to the quality of these providers; and the directory does not recommend or endorse any provider in particular. The full responsibility for choosing a service provider rests with the senior or the family or his/her immediate advisers. Anyone looking for such services is urged to carefully evaluate the information of the listed providers herein, along with other sources found elsewhere, before making any final choices. Each section of the Table of Contents above is detailed section by section to target the providers that best meet the meaningfulness of topical divisions.

Readers of this Directory are invited to suggest the names of additional providers of special services not covered here or identify any errors they may find in this directory. Please communicate information or suggestions to Joseph Murphy, Senior Advocate for the RSAC (914) 643-7813 or to SPRYE's attention via its e-mail address: info@sprye.org.

Copies of this directory are available at the Rye Recreation Department and the Rye Free Reading Room. You may also gain access to it on the City of Rye's web page by clicking 'Digital Documents' on the left and then 'Seniors.'

BACKGROUND:

The idea for the Rye Senior Advocacy Committee (RSAC) originated from the work of Joseph P. Murphy, LCSW, a Licensed Clinical Social Worker/Geriatric Care Manager and the late Marian Moto Shea, a community activist. At the time, these two leaders collaborated as a Team in responding to the serious needs of a senior living alone in a rental in the Rye Colony Co-Op apartments. The senior at the time was threatened with eviction due to delays in meeting her rental payments. As a result, her landlord brought her to the local court to proceed with eviction procedures. This action prompted the court personnel to contact the county's Adult Protective Services (APS) judging that the senior, a retired Army Major, was "incapable" of caring for herself; and susceptible to "early onset dementia" which resulted in an assessment to consider placement in a county facility. Truth was, the client's personality and demands for services became the underlying causes for moving toward "guardianship" measures. The two founders intervened and advocated for her well being in court and vowed to offer her assistance so she could stay in her apartment with supportive services. Joseph Murphy worked closely with the client and guided her in paying her rent in a timely manner and shielding her from the landlord's pressures and neighbor complaints. In contrast Marian Shea identified young volunteers to clean her apartment and maintain her stability at home. The representation of these experiences proved to the local judge that the court should accept the Team's efforts and subsequently withdrew the grounds for "guardianship."
Concomitantly, the suggestion by APS that the client was too irrational to care for herself was proved wrong. The Team's initiatives demonstrated to all authorities that this senior, although physically challenged was well connected in the clarity of her thinking and in control of her decision making abilities. The particular life experience of this one senior proved to the Team that there were other seniors, like their client, who needed more than recreational services. The Team demonstrated through their advocacy posture that it was feasible to respond to the changing demands of the growing senior population by offering ways to keep them safe in their own home as was evident in this cited case. Ergo, the idea for the RSAC was born based on the development of a composite of various services to keep seniors safe at home. The Team subsequently recommended a plan to summon local leaders from the community for the purpose of soliciting their input to the idea of broadening senior services that augmented the programs under the auspices of the Recreation Department, adding a more holistic approach that projected alternative services to seniors as their medical/social needs became more pronounced. In addition, the Team recognized the allied demands for caregiving, to satisfy emotional needs of Rye Seniors as demands for services expanded. From community meetings it became apparent that the increasing senior population was proving to need more specialized services to keep them at home. At this time in the planning process, it was agreed that with the passing of Anne Pastor, the appointed "Senior Advocate" for the City of Rye left a gap in services to seniors; and the Mayor and City Council felt that a committee of knowledgeable individuals rather than a single person could better address the needs of the senior citizens of Rye.

Consequently, the RSAC was formed and the idea was presented to the Rye City Council as a plan to deliver ongoing services to the senior population. The committee's original mission to enhance the lives of all of Rye's seniors by offering assistance in identifying other community resources to address their unique needs and bringing together information on available resources. It became obvious that the RSAC needed a directory that would define these potential resources. The original suggestion to design and publish a directory was spearheaded by one of the RSAC members, namely, Arthur Stampleman, who envisioned the original concept with the goal of assembling a wide-ranging resource guide to assist the seniors. In addition, the Committee worked with individuals where there were requests for special assistance.

In the years of service, the Committee cooperated with the Westchester County Department of Senior Programs and Services to promote its Livable Community Connections (LCC) initiative. Why? The LCC initiative targeting six municipalities: Harrison, Larchmont, Mamaroneck, Port Chester, Rye City, and Rye Brook promoted an acceptable premise, i.e., to keep seniors safely in their own home environments. This ideal was addressed, but it was learned from contacts with each municipality that the scope of a collaborative effort was too broad. There needed to be a prototype model that would be capable of serving the elders and not a complex organizational structure. So the RSAC recommended designing an "Aging in Place" prototype initiative in Rye City which could be replicated to serve the elderly in Rye as well as in the other five communities. This led to a proposal that took on a
life of its own, and from which Rye's residents volunteered under the leadership of Thomas Saunders by establishing a unique membership organization known as S.P.R.Y.E., INC. This acronym stood for "STAYING PUT IN RYe & Environs" which was the start of an organization that served the needs of its members, bringing into its structure a host of volunteers who provided services to the members. Its aim as well was to help seniors stay in their homes and not be forced to move to retirement communities. The most significant start-up initiative was that the volunteers became drivers, enabling seniors members to shop as well as helping them keep their medical appointments, and staying with the senior until they were finished. Subsequently, SPRYE expanded its services to include home maintenance, elderly-friendly home modifications, access to home care and cultural, recreational, and social activities.

The leadership of the RSAC also served on SPRYE's Board of Directors and initiated a "scholarship fund" to cover the annual memberships for the senior residents needing financial assistance.

As the RSAC progressed, its mission was modified as a result of its work and overall perception of advocating for improved senior services. The revised focus of its mission is:

"The mission of the RYE SENIOR ADVOCACY COMMITTEE is to support the concerns of Rye's elder adults, to advocate for their needs, and seek new models and opportunities to better accommodate Rye's growing older population. Our vision is to develop and maintain a healthy, diverse populace in which citizens of all ages have the opportunity to contribute to the strength of the Rye community."
Enjoy Rye & Environs
A number of institutions in and around Rye offer special recreational, artistic, athletic and intellectual programs or special program fees for seniors. These include:

Rye Recreation Department Seniors Program

Rye YMCA

Rye Free Reading Room

Rye Arts Center

Clay Art Center, Port Chester, NY

Purchase College, Purchase, NY

Neuberger Museum of Art, Purchase, NY

Bruce Museum, Greenwich, CT

SPRYE, Inc

Rye Golf Club

The authors and sponsors of this directory make no guarantee (expressed or implied) as to the quality of any provider, and do not recommend or endorse any provider in particular. The full responsibility for choosing a provider rests with the senior citizen and his or her immediate advisers.
Rye Recreation Department Seniors Program
281 Midland Avenue  (914) 967-2535  www.ryeny.gov/recreation.cfm
The Rye Seniors program is open to all Rye residents 60 years of age or older. Annual Dues of $10, payable in September. There is a wide variety of senior programs including exercise, stretching & balancing, line dancing, quilting, arts & crafts, knitting, mahjong, cards, bingo, special events, trips, holiday celebrations, shopping & health. Meets on Wednesdays. Senior tennis permits available.

Rye YMCA
21 Locust Avenue  (914) 967-6363  www.ryeymca.org
The “Y” offers a senior discount membership rate. Besides its standard fitness and swimming pool facilities, programs of particular interest to seniors include an annual Senior Health and Fitness Day, shallow water exercise classes, “limbercize” stretch and fitness class, adult exercise and swimming program offered jointly with The Rye Association for the Handicapped, a fall-proof program developed for The Osborn, blood pressure screenings, “spirit, mind & body” classes, yoga, and group recreational activity for arthritis sufferers. There are also open swim periods for non-members over 62.

Rye Free Reading Room (RFRR)
1061 Boston Post Road.  (914) 967-0480  www.ryelibrary.org
The RFRR has a sizable collection of large print books at its Village Green home and an enlarger for those with low vision. In addition, it operates a branch library at The Osborn. Any Rye resident or Westchester Library System cardholder may use either library (Village Green site during usual business hours and The Osborn (Monday, Wednesday, and Friday: 9-1). Staff can help with access to large print books, audiobooks, music CDs, DVDs and downloadable material. There are book clubs at The Osborn for large print books and books on tape. Westchester County senior resources guides are available at the Village Green site. There are computer classes in the new Tech Center (Organizing Windows Files, Getting Started with Microsoft Word & Getting Started with Microsoft Excel).

Rye ARTS Center
51 Milton Road.  (914) 967-0700 x 22  www.ryeartscenter.org
RAC has a $25 annual senior membership fee that allows a 10% discount on classes and additional merchant discounts. Classes vary and can include digital photography, colored pencils, portrait painting, contemporary art, precious metal clay, writing, poetry, and memoir classes, as well as jewelry, ceramics and hand building along with regular oil/acrylic painting, watercolor and drawing. Classes can be customized for groups of 6 or more. Individual and group classes are conducted in the music school for all instruments for getting back in the groove or learning for the first time. On request, the RAC brings arts education to senior centers through its Famous Artist’s arts education program. Non-members can take classes. Full handicap accessibility.
Clay Art Center
40 Beech Street, Port Chester  (914) 937-2047  www.clayartcenter.org
Clay Art Center provides artists with studio space, offers classes to adults and children, and features a gallery with monthly exhibitions. It offers a wide variety of clay classes for adults beginners including hand building and wheel throwing to special topic classes for those with previous experience with ceramics. Programs include one-time three-hour weekend workshops and monthly Helping Hands classes where grandparents and grandchildren can make a project together. There is no entrance fee.

Purchase College
735 Anderson Hill Road., Purchase  (914) 251-6500
www.purchase.edu/ce
As part of the college’s continuing education program, New York State residents who are at least 60 years of age are welcome to enroll tuition-free as a “special auditor” each semester in a maximum of two credit-bearing courses, providing space is available to auditors. Course and space availability may vary.

Neuberger Museum of Art, Purchase College
735 Anderson Hill Road., Purchase  (914) 251-6100  www.neuberger.org
Permanent collection of 20th century American Art and African Art as well as changing contemporary art exhibits.

Bruce Museum
1 Museum Drive, Greenwich, CT  (203) 869-0376  www.brucemuseum.org
The Bruce Museum has permanent exhibits on natural history and science as well as changing art exhibits featuring diverse schools and periods.

SPRYE, Inc. (Staying Put in RYE and Environ)
sprye.org  director@sprye.org  (914) 481-5706
c/o Betti Weimersheimer at director@sprye.org
SPRYE is a new membership 501(c)3 organization formed to help senior citizens enjoy life more by remaining in their homes longer and avoiding the necessity of moving to retirement communities. Its mission will be achieved via services and information that meet the special needs of seniors. The services include volunteers providing rides for shopping or medical appointments, help with home maintenance, vetted professionals providing elderly-friendly home modifications and health or home care, and organizing cultural, recreational, and social activities. SPRYE has its offices, staffed by its executive director and trained volunteers whose help is just a phone call away. Funding comes from its membership fees, donations and grants. Contacts are welcome from prospective members, volunteers, or donors.

1.3
Rye Golf Club
Welcoming Seniors since 1965

* Rye Senior Pool Access through the Rye Rec Program: In 2015 Rye Golf Club will be providing access to our pool facility for all members of the Rye Recreation Senior Club. Members of the Rye Rec Seniors Club will be permitted to visit the pool 1 weekday per week (any Monday through Thursday) for only $5. For further information please contact the Rye Recreation Department.

* House Memberships: For only $400, Rye Residents will be granted membership at Rye Golf Club and be eligible to use the pool or golf course up to 15 times per season with payment of guest fees. This is a great option for our seniors that may not be interested in playing golf or using the pool more than 15 times in a season. You will also be permitted to bring guests with in our defined guest policies. For more information please contact Rye Golf Club's membership office: 914-835-3200.

* All members of Rye Golf Club (including House members) that are 62 years of age or older are eligible for a discount on their electric riding cart. Additionally, Rye Golf Club offers several senior-only golf competitions including a Senior Club Championship.

* Whitby Castle is open for dining to both members of Rye Golf Club and members of the public. Whitby Castle's restaurant (and patio - weather permitting) is open for lunch Tuesday through Sunday at 12pm and dinner on Friday through Sunday until 10pm. The castle's dining is seasonal, running April through October. Whitby Castle is currently being operated by Lessing's Hospitality group of Long Island. For further information please contact Whitby Castle directly at 914-777-2053

* As always - Rye Golf Club never charges an initiation fee, imposes assessments for capital improvements, or requires a Food & Beverage minimum.

**Rye Resident Rates**

- Comprehensive $5175.00
- Individual Daily Golf $3565.00
- Individual Weekday Golf $2185.00
- Family Pool $1668.00
- Individual Pool $863.00
- Pool For Two $1357.00
- House $400.00

Membership Contact Info
(914)835-3200 ext.3
Membership@ryegolfclub.com
Adult Day Care Services

Adult day care centers feature activities to improve and maintain the physical, mental, and social well-being of frail elderly persons who currently live in their own homes. They provide the elderly with a comfortable environment where they can socialize with other seniors, caregivers, or family. Directories are provided with addresses, telephone numbers, and the name of the respective director, so that these centers can be easily reached.

Social Adult Day Service Programs...........................................................Page 2.2
These programs are for adults who may be socially isolated or need supervision. Program goals generally include supervision, socialization, nutrition, and community services linkages.

Medical Adult Day Service Programs.......................................................Page 2.3
These programs are for the chronically ill, frail and disabled adults. Program goals generally include comprehensive integrated long term care health service and management.

Psychiatric Adult Day Service Programs...............................................Page 2.4
These programs are for adults who have psychiatric issues.

(For Caregiver Respite Services, including for day care - see page 3.18)

The authors and sponsors of this directory make no guarantee (expressed or implied) as to the quality of any provider, and do not recommend or endorse any provider in particular. The full responsibility for choosing a provider rests with the senior citizen and his or her immediate advisers.
Directory of Social Adult Day Services Programs
(Lower Westchester listings only)

Wartburg: The Adult Day Care Program
Phone: (914) 513-5172 fax: (914) 699-0905
Wartburg Place
Mount Vernon, NY 10552
Dana Nolan, Director (513-5472)

Edna Lillian Roker Day Program
Phone: (914) 761-3885 fax: (914) 761-4972
311 North Street., Suite 101
White Plains, NY 10605
Miriam Horsford, R.N., Director

Lanza Family Center for All Ages
Intergenerational Center
106 North Broadway
White Plains, NY 10603
Rebecca Lippel, Gerontologist, Director
(914) 422-8100

My Second Home
Phone: (914) 241-0770 fax: (914) 242-5201
Adult Day Program of Family Services of Westchester, Inc.
95 Radio Circle
Mount Kisco, NY 10549
Rina Bellamy, Director

Westchester County Department of Senior Programs & Services
Phone: (914) 813-6300 fax: (914) 813-6399 seniorcitizens.westchestergov.com
9 S First Avenue #10
Mount Vernon, NY 10550
Case Management Services Only

River House
Phone: (203) 622-0079 gadcriverhouse.org
125 River Road Extension,
Cos Cob, CT 06807
Directory of Medical Adult Day Service Programs

Beth Abraham Health Services Adult Day Health Program
Rehabilitation & Comprehensive Care Programs
Phone: (914) 683-1600 fax: (914) 993-7878
335 Old Tarrytown Road
White Plains, NY 10603
Ellen Gloskin, Director

Home for the Aged Blind/Guild Care
Phone: (914) 963-4661 ext. 590 fax: (914) 963-1458
75 Stratton Street South
Yonkers, NY 10701
Joan Clark, R.N., B.S., Director

Sarah Neuman Center for Health Care and Rehabilitation
Adult Day Health Program (24 hrs)
Phone: (914) 698-6005 fax: (914) 864-5802
845 Palmer Avenue
Mamaroneck, NY 10543
Susan Holodak, Vice President, Director

St. Joseph's Medical Center Geriatric Day Program
Phone: (914) 375-7333 fax: (914) 375-3346
127 South Broadway
Yonkers, NY 10701
Lourdes Bunque, Director

Montefiore-New Rochelle Ludington Adult Day Care Services
Phone: (914) 365-4220 fax: (914) 365-5265
16 Guion Place
New Rochelle, NY 10802
Pearl Hacker, LCSW, Director

The Wartburg Adult Day Health Care Program
Phone: (914) 513-5172 fax: (914) 699-0905
Wartburg Place
Mount Vernon, NY 10552
Dana Nolan, Director
Directory of Psychiatric Adult Day Service Programs

Westchester Jewish Community Services
Phone: (914) 761-0600 fax: (914) 946-3972
845 North Broadway, Suite 2
White Plains, NY 10603
Alan Warner, Coordinator awarner@wjcs.com
(Also has New Rochelle location)

St. Vincent’s Westchester
(914) 967-6500
275 North Street
Harrison, NY 10528
Evaluation and Referrals

Mobile Crisis Team
(914) 925-5959
St. Vincent's Hospital

The Guidance Center, STEP Program
(914) 636-4440
277 North Avenue
New Rochelle, NY 10801
277 Washington Street
Mount Vernon, NY 10553
Health & Special Services to Help You Remain in Your Home

(These services represent an option for those who can manage at home with some help and thus avoid placement in a nursing home or other institutional setting.)

Home Health Agencies - Basic...............................................................Page 3.2
Home Health and Hospice Agencies - List of Agencies....................Page 3.4
Osborn Home Care..............................................................................Page 3.6
Family Services of Westchester.........................................................Page 3.7
Expanded In-Home Services for the Elderly Program......................Page 3.8
Medical and Home Care Services for the Medicaid-Eligible........Page 3.9
Nutrition Site Directory.....................................................................Page 3.11
Meals Delivered at Home.................................................................Page 3.12
Rye Police Dept................................................................................Page 3.14
Community Links for the Homebound or Ill .................................Page 3.15
& Medical Emergency Information Front-Door Bags
Driving Education & Rehabilitation Programs...............................Page 3.16
Caregiver & Respite Services.............................................................Page 3.17
Support Groups................................................................................Page 3.18/3.19
Finding a Good Manager for an Elderly Person's Care.................Page 3.20
Making Home A Safer Place, Affordably; Disaster Preparation..Page 3.21/3.23
Project Lifesaver (for wanderers).......................................................Page 3.24
Phone Numbers of Phone, Electric and Utilities............................Page 3.25

SPRYE SPECIAL RECOGNITION(Program to keep seniors at home)-refer to ........Page 1.3

The authors and sponsors of this directory make no guarantee (expressed or implied) as to the quality of any provider, and do not recommend or endorse any provider in particular. The full responsibility for choosing a provider rests with the senior citizen and his or her immediate advisers.

3.1
Home Health and Hospice Agencies - Basics

There are about 300 home health and hospice care agencies serving Westchester County. The NYS Department of Health is responsible for monitoring the care they provide. A listing of three dozen agencies, most them serving Rye, may be found starting on page 3.4 and are categorized as follows:

Certified Home Health Agencies (CHHA's)
They provide part-time, intermittent health care and support services to individuals who need intermediate and skilled health care. CHHAs can also provide long-term nursing and home health aide services, can help patients determine the level of services they need, and can either provide or arrange for other services including physical, occupational, and speech therapy, medical supplies and equipment, social work and nutrition services. There are Special Needs CHHA populations eligible for services from the Office of Mental Health.

Licensed Home Care Services Agencies (LHCSA's)
They provide personal care housekeeper and homemaker services. The latter involves touching clients. Clients pay privately or have private insurance coverage (Long Term Care Insurance); and if a client is hospitalized for three consecutive days and discharged to a rehabilitation facility, Medicare will cover the bill for 20 days, providing the patient is eligible for Medicare. The LHCSA agencies may also contract to provide services under Medicare (see above explanation) or under Medicaid in those cases that are managed by another provider or entity, such as a private home health aide or under a certified home health agency, given that a licensed practical nurse from a Medicaid prior-approved private duty nursing staff is assigned.

Long Term Home Health Care Program
This program is a coordinated plan of medical, nursing, and rehabilitative care provided at home to persons with disabilities, which are medically indicated for placement in a nursing home. This program offers patients an alternative to institutionalization. An assessment to determine nursing home eligibility is performed by a registered nurse who uses an approved assessment tool which identifies the individual's medical diagnoses and their levels of independence in performing the "Activities of Daily Living" such as: (a) bathing, (b) eating, (c) walking, (d) toileting and (e) transferring. The individuals eligible for this program must have care costs which do not exceed the costs for nursing home placement. Individuals can access this program through a hospital Discharge Planner, the local Department of Social Services (DSS), or a Long Term Home Health Care Provider. The county determines eligibility for the program, and the DSS authorizes all services that are provided.
Hospice/Palliative Care

Hospice/Palliative Care programs provides care to either terminally ill individuals or persons with a diagnosis of looming death. These combinations of programs focus on easing symptoms rather than treating the disease(s). The emphasis of the program is to help individuals remain at home for as long as possible and are supported by a team of professionals who provide physical, psychological, social, and spiritual support and care for the patient and family.

Services offered through Hospice/Palliative Care include nursing and physician services, medical social services, counseling (including nutrition and bereavement counseling), and physical and occupational therapy. In addition, these programs can provide home health aide and homemaker services, medical supplies and appliances, speech therapy, and short-term inpatient care. Hospice/Palliative Care is made available through Medicaid, Medicare, private insurance or some health insurance carriers. Referrals to Hospice/Palliative Care programs may come from any source, but must have a physician's certification that the patient has a terminal illness with a life expectancy of fewer than six months or longer.

The above information and the names of agencies on pages 3.4 and 3.5 were extracted from a New York Department of Health web page. The web page can also provide detailed information on each agency listed. The web page is: http://homecare.nyhealth.gov/index.php

The Department of Health introduces this material with the following comments: “Use this site to find information about home health agencies and Hospice/Palliative Care programs in New York State. Where possible, quality of care measurements are provided. Please be mindful that while we believe these quality measures are among the most reliable, measuring quality is difficult because of variations among agencies coupled with the types of patients for whom they offer care. Every senior is encouraged to use this information to begin conversations with your doctor and other health care professional about your home care options, as well as with family members, friends, and associates who may have direct experience with a particular agency or program.”
Home Health and Hospice/Palliative Care Agencies

Certified Home Health Agencies
Gentiva Health Services (White Plains) (914) 948-6565
Montefiore Medical Center (Bronx) (718) 920-4321
PTS of Westchester, Inc. (White Plains) (914) 949-5150, ext. 223
Visiting Nurse Services In Westchester Inc. (White Plains) (914) 682-1480, ext. 621
Westchester County Department of Health (New Rochelle) (914) 813-5000
White Plains Hospital Home Care Department (White Plains) (914) 681-0600

Licensed Home Care Services Agencies
A&A Staffing Health Care (White Plains) (914) 428-1515 or (914) 949-1300
All Metro Health Care (Mount Vernon) (914) 667-0300
Any-Time Home Care (White Plains) (914) 761-7100
Barksdale Home Care (Pelham) (914) 361-4722
Concept Care (White Plains) (914) 682-7990
ElderServe (Yonkers) (914) 368-5500 or (914) 375-7318
Family Services of Westchester (914) 738-1728 (Pelham) or (914) 937-2320 (Port Chester)
Gentiva (White Plains) (914) 948-6565
Home Health of Jewish Community Services (White Plains) (914) 761-0600
Osborn Home Care (Rye) (914) 925-8221
Personal Touch Home Care (White Plains) (914) 949-4040
PHC Services Ltd. (Yonkers) (914) 423-6410
Priority Home Care, Inc. (White Plains) (914) 366-7474
Recco Home Care (New Rochelle) (914) 654-0003
Unlimited Care (White Plains) (914) 428-4300
VIP Health Care Services (New Rochelle) (914) 654-6540
Westchester Care at Home (White Plains) (914) 997-7912

Long Term Home Health Care Program
Dominican Sisters Family Health Services, Inc. (Ossining) (914) 941-1951
St. Cabrini Nursing Home (Dobbs Ferry) (914) 693-6800, ext. 551
St Joseph’s Hospital Nursing Home of Yonkers (Yonkers) (914) 375-3300
United Hebrew Geriatric Center (New Rochelle) (914) 632-2804
The Wartburg Home (Mount Vernon) (914) 699-0800 or (914) 513-5472
Westchester Division – Montefiore Medical Center (Tarrytown) (914) 345-8605 or (914) 631-2895
Hospice at Home
Calvary Home Health Agency and Hospice Care (Bronx) (718) 518-2465 or (718) 518-2000
Hospice/Palliative Care of Westchester (White Plains) (914) 682-1484
Hospice Care in Westchester and Putnam, Inc. (Tarrytown) (914) 666-4228
Jansen Hospice and Palliative Care (Tuckahoe) (914) 961-2818
Phelps Hospice (Sleepy Hollow) (914) 366-3325
Osborn Home Care

The Osborn Home is a continuing care retirement community renowned for providing fine accommodations and services for independent living residents, and persons qualified for Assisted Living and Skilled Nursing on its Rye campus. The same care services experienced by residents of The Osborn are also available through Osborn Home Care (914-925-8285) to individuals still living in their own homes, being it is a licensed home care agency, offering a wide spectrum of in-home and professional services, seven days a week, 24 hours a day.

Osborn Home Care's services are tailored to each client's specific needs and can include:
- Long or short-term care in the home
- Hourly, daily, or round-the-clock care
- Professional case management
- Chore services (light housekeeping, shopping, errands, laundry, meal preparation)
- Personal care (bathing, grooming, dressing)
- Rehabilitation services ( occupational, physical, speech therapies)
- Companionship
- Medical supplies and equipment procurement
- Medication assistance
- Coordination of services (scheduling doctors’ appointments, transportation)
- Skilled nursing care

The Osborn's Home Care Agency provides personal client service packages based on an evaluation and professional assessment in consultation with the individual, the family, and the primary care physician. A Nurse Case Manager develops and implements a Home Care Plan which is offered by a professional case management service that includes monitoring and coordinating all aspects of a client's care, performing regular health assessments, scheduling physician visits and special care services, medication assistance and 24/7 on-call RN assistance.

Osborn HomeCare is licensed by the New York State Department of Health which accepts private pay and/or many insurance policies. Those who need financial assistance to pay for home care may qualify for Osborn Home Care’s Scholarship Program. Call (914) 925-8221 to request more information.

3.6
Family Services of Westchester

Family Services of Westchester (FSW) is a private, not-for-profit, nonsectarian agency headquartered in White Plains with a satellite offices in Port Chester. Since 1954, FSW’s stated mission has been strengthening and supporting families and individuals at every stage of the life cycles with a broad range of social and mental health services. Key program areas are Family Mental Health Services, Adoption & Children's Services, Head Start and Early Head Start, Senior Services, Home Health Care, Big Brothers/Big Sisters, AmeriCorps, Therapeutic Foster Care for Youth, and a spectrum of services for families living with HIV/AIDS.

FSW is governed by a Board of Directors composed of volunteers from the business and local community, and has a professional staff of more than 450 professionals and paraprofessionals including Master degree level social workers, psychiatrists, clinical psychologists, child care workers, nurses, certified home health aides, multi-lingual clinicians, peer counselors and early childhood educators.

FSW helps families meet the challenges facing them today, including finding services that enable seniors – regardless of financial means – to live their later years in dignity within the county. They provide a continuum of care for the elderly, with a menu of options that support seniors and meet their special needs. FSW works with families to design a plan of care intended to keep seniors safe and enhance their quality of life.

FSW’s Home Health Care program can provide one-on-one assistance, personal care, and support to those with chronic or acute needs who want to remain in their own homes. FSW also provides Geriatric Outreach services, including in-home counseling for seniors who are experiencing depression, anxiety and other symptoms that may require supportive services.

In addition, FSW operates two intergenerational, Social Adult Day Care Programs. The original "My Second Home" is located in Mt. Kisco. The newest initiative is the "Lanza Family Center for All Ages" is located in White Plains. Both are affordable alternatives to assisted living and nursing home care. They offer an intergenerational approach with extensive activities in these facilities. FSW also offers Enriched Housing for seniors in Ossining and White Plains. For information:

Phone (914) 937-2320, Fax 937-4902 or www.fsw@fsw.org
Expanded In-Home Services
for the Elderly Program

EISEP Eligibility
EISEP helps individuals who are: age 60 or older and need help with activities such as eating, dressing, bathing, toileting, cooking, shopping, laundry, or housekeeping and finds that some of these needs cannot be met by friends or relatives.

EISEP Cost
Each client is required to pay according to his/her ability for the homemaker or housekeeper services received through EISEP. Charges are based on a sliding fee schedule ranging from no cost to full cost for services, depending upon monthly income. There is no charge for home visits during which a care plan is developed, nor for finding agencies to provide these services.

EISEP SERVICES

Case Management
The case manager assesses the client's situation in a face-to-face interview in the client's home. Where possible, family members involved in the client's care are included. Based on the assessment, the case manager designs a care plan in cooperation with the client and the family. Either the case manager, the client or his or her family arrange for the delivery of services. Case managers stay in contact with the client to see that the services provided agree with the care plan.

Non-Medical In-Home Services

Housekeepers
Housekeepers are hired to provide assistance such as shopping, cooking, laundry and other services that do not require "hands-on" care.

Homemakers
Homemakers provide the same services as the housekeeper, but in addition, assist the client with bathing, dressing, transferring or walking.

Respite Care
Relief from caring for a frail elderly person can be provided by the homemaker or housekeeper through the EISEP program. In addition, the case manager can assist the family in arranging for other forms of respite or sitter companion.

For further information, call the Case Management Unit of the Westchester County Department of Senior Programs and Services at (914) 813-6442

3.8
Medical and Home Care Services for the Medicaid-Eligible

The Department of Social Services is responsible for the needs assessment, eligibility determination and authorization of a wide range of medical and home care services for Medicaid recipients.

All home care services are designed to insure the health and safety of elderly, infirm, or disabled individuals by providing a range of home based services which assist in maintaining the recipient at home. Home care services are physician ordered and supervised by a registered nurse. Licensed providers under contract with and monitored by Department of Social Services, are responsible for service delivery.

**Personal Care Services** provide assistance with the "Activities of Daily Living" (personal hygiene, dressing and feeding, household tasks and nutrition). They may be combined with other services such as visiting nurse or Hospice/Palliative Care.

**Long Term Home Health Care Program (LTHHCP),** also known as Nursing Home without Walls (Lombardi Program), is a coordinated plan of care/service provisions offered to individuals at home in instances where these recipients meet the standards of medical eligibility for placement in a health related facility or nursing home. It is a financially capitated program.

**Consumer Directed Personal Care Assistance Program (CDPAP)** given to recipients who are able to recruit, hire, and train their own personal care aide, to manage the delivery of their own home care services.

**Comprehensive Care Management (CCM)** provides a precipitated program of coordinated health care through the NY State Comprehensive Care Management Program. The recipient who is appropriate for this program must be classified as a frail elderly person with a complex medical profile, as well as nursing home eligible. The patients receive all their medical care through Beth Abraham Health Services located in White Plains and attend their day program.

**Assisted Living Program (ALP)** serves individuals who are medically eligible for residential health care facility placement but whose needs could be met in a less restrictive setting. Care needs are met by combining the services of an adult home or enriched housing program with supportive home care services.
Certified Home Health Services (CHHA) provides nursing services, physical therapy, and home health aide services at home rather than in a hospital or nursing home.

Personal Emergency Response System (PERS) is a telephone electronic monitoring device that summons emergency assistance to homebound individuals. This device is used in conjunction with Personal Care or Long Term Home Health Care Services.

Care-at-Home is a program designed to enable parents to care for their severely physically disabled child at home by providing medical assistance, case management, and respite care services to children aged 0-18 who would be Medicaid-eligible if institutionalized.

How to Apply for Home Care Services

Eligibility for all home care programs is determined by the Office of Medical Home Care Services. (914) 231-3621, 131 Warburton Avenue (North Side) Yonkers, NY 10701

Nursing home care
Chronic Care Medical Assistance is a financial service available to meet the cost of nursing home care. Through the Deputized Worker Program, staff at a majority of homes and hospitals in Westchester have been trained to conduct eligibility interviews in their facilities for the convenience of those already residing there or persons who are hospitalized and in need of placement. Eligibility is determined by the Institutional Assistance Unit located at 131 Warburton Avenue, (North Side) Yonkers, N.Y. 10701. The phone number is: (914) 231-3672. To make an appointment or file an applications call (914) 231-3674.

Long-term care
NY Connect provides information about long-term care options (in Spanish) for seniors and for disabled children and adults: (914) 813-6300.
The Nutrition Program is composed of two segments: meals served at congregate sites throughout the County and the Home Delivered Meals program. All the nutrition sites and the Home Delivered Meals programs are monitored by the Food and Nutrition Services Division, which plans the meals according to standards set by federal and state regulations and monitors the entire program to ensure compliance with federal, state and county regulations.

Meals are provided five or more days per week at approved nutrition sites and multipurpose centers throughout the county and to the homebound elderly who are unable to participate at congregate sites. Each meal provides at least 1/3 of the recommended dietary allowance (RDA) for an individual.

The New York State Supplemental Nutrition Assistance Program (SNAP) aims to improve the well-being of those elderly who are at a level of "high nutritional risk" with particular emphasis on the provision of services to the low income, minority, frail and isolated elderly.

For more information please call (914) 813-6300.

**Mamaroneck Senior Center at VFW Center**
1288 West Boston Post Road, Larchmont
*(914) 834-8840* Noon Mon-Fri - Prior Day Reservations required
Congregate Meals

**Port Chester Senior Center**
222 Grace Church Street, Port Chester
*(914) 939-4975*
Congregate Meals
Supplemental Nutrition Assistance Program

There are also centers in New Rochelle, Mt. Vernon and White Plains.
Meals Delivered at Home

Meals on Wheels
A Non-Profit Volunteer Program Serving Port Chester, Rye and Rye Brook since 1973. It is a program which delivers nutritious weekday meals over a period of two months or less to those who are homebound. This independent, nonprofit, volunteer organization exists through the generosity of individual volunteers and donors with the cooperation and support from the Port Chester Nursing and Rehabilitation Centre.

Meal Recipients
Anyone recuperating from an illness or operation or needing short-term support may ask to be considered for Meals on Wheels. All applications must be recommended by a physician or other health care professional.

Meal Offerings
A recipient may request a complete hot dinner and a cold supper. The dinner consists of meat or fish, a vegetable, salad, dessert and a beverage. The cold supper includes a sandwich, salad, dessert and a beverage. Recipients may choose to receive only the hot dinner if they are able to prepare their own supper. Meals on Wheels confirms the dietary requirements (diabetic, low sodium, lactose intolerant, regular) with the recipient’s doctor to ensure the proper nutrition.

Origin for the Meal Preparation
All meals are planned by a trained nutritionist and prepared by professional cooks at Port Chester Nursing and Rehabilitation Centre.

Meal Delivery Schedule
Deliveries are made once a day, between 11:00 am and 1:00 pm, Monday through Friday. Meals are also delivered on major holidays by request. Duration of the meal service is two months, except in an emergency.

Meal Costs
The cost of the hot dinner and the cold supper is $18.25 a week. The cost of the hot dinner only is $12.50 a week. These costs are subject to change. Bills are mailed to recipients at the end of the month, unless other arrangements are made.
Meals on Wheels Volunteers
All meals are delivered by volunteers, using their own cars without reimbursement for their time and expenses.

Meals on Wheels Requests
Leave your name and number at (914) 925-0778 or visit 321 Rye Beach Ave, Rye NY. They will call you and set up an interview. They request 24 hours to suspend or terminate service.

Meals on Wheels Drivers
Call Meals on Wheels at (914) 925-0778 to get started. Most volunteers commit to deliver meals one day a month. It takes about two hours to load up and deliver the meals. Some volunteers drive alone and others drive with a friend. Meals on Wheels provides orientation and detailed driving directions.

Meals on Wheels Supporters
Meals on Wheels charges its recipients exactly what the provider charges them. The organization’s expenses, including insurance, equipment, phone, postage and printing are covered by tax-deductible donations from individuals and philanthropic organizations. Checks may be made payable to “Meals on Wheels, Inc.”, and mailed to P.O. Box 555 Rye, NY 10580.

Home Delivered Gourmet Prepared Meals
The goal of "Top Chef Meals" is to prepare affordable gourmet meals and deliver them to the home. They cater to busy families, overworked singles, the elderly, homebound and disabled. The meals are prepared without any added salt or preservatives. Made to order and flash frozen. They are designed to simply heat and eat. All meals are packed in specially designed oven and microwavable safe biodegradable trays. Customers choose an entree and two side dishes with next day delivery. All meals are $6.85 or less, with 20% discounts for all seniors, disabled and the homebound which includes delivery charges.

175 Clearbrook Road, Elmsford, NY 10523
Phone: (914) 372-7080 Fax: (914) 372-7083 meals@topchefmeals.com www.topchefmeals.com

3.13
Rye Police Department

Other Rye Police Service - Responding to Cardiac Arrest

Rye Police Department (914 - 967-1234) personnel are trained to the level of “Certified First Responders," who are qualified to use Automated External Defibrillators (AEDs). These are electronic devices that analyze the heart's rhythm and administer a shock if necessary when a patient is in cardiac arrest. This service is accessed by dialing 911 and only in emergencies.

All Rye police cars are equipped with AED devices. Although our local EMS response time is excellent, time is critical when a patient experiences a heart attack, and the role of the police is to be able to begin Cardio-Pulmonary Resuscitation (CPR) and deploy an AED within minutes, and continue care until the arrival of Paramedics.
Community Links for the Homebound and Ill
Medical Emergency Information front Door Bags

Friendly Callers Program
The Metro-American Red Cross will make weekly phone calls for a friendly chat and a well-being “check-up”. Calls are friendly conversations, not counseling or therapy sessions. Callers are also able to make referrals to community resources if needs come up in the conversation. Once a year ‘callees’ are invited to attend a luncheon. Contact (914) 946-6500 for further information.

Red Cross Mail Watch Program
When a person registers with Red Cross Mail Watch Program, a special label, not visible to anyone else, is placed inside his or her mailbox. If mail is not picked up regularly, the postal carrier will notify the Westchester County Chapter of the American Red Cross.

Medical Emergency Information Front-Door Bags
The "Front Door Bags" contain health information, specific to the individual, as well as emergency contacts and general information. Seniors are encouraged to fill out the Emergency Medical Information Card and leave the bag on the inside of the front door. In the event of a medical emergency, rescuers would easily be able to find the information and expedite treatment. The Emergency Front Door Bags can be picked up from local offices for aging, Full Service Caregiver Resource Centers, Nutrition Programs and the Metro-American Red Cross. For more information call: Department of Senior Programs and Services (914) 813-6300.
Driving Education and Rehabilitation Programs

Despite the declining physical conditions associated with advancing age, research is showing that older persons are successfully adjusting for those age related changes and are driving safely well into their 70s, 80s and 90s. And today, there are programs which can help many to drive safely longer. But while many older persons know when to surrender the keys, there are others who continue to drive when they are at-risk. For families, friends and caregivers, the issue of what to do about an aging loved one who is at-risk driving can be both perplexing and paralyzing. The following are among the programs that have been developed to deal with the above issues:

1. **AARP Defensive Driving Course** is designed for individuals over 55. It focuses on violations that older drivers typically include such as failure to yield right-of-way, improper turning, and incorrect lane changing, as well as on problems individuals have in driving situations that require quick response, full vision, and interaction with other drivers. An added benefit from taking the course often is enjoying savings on auto insurance premiums. The 8 hour program is offered from time to time by either the Rye Recreation Department or the Rye Police Department. It can also be accessed on-line through AARP’s web page: [www.aarp.org/families/driver_safety/driver](http://www.aarp.org/families/driver_safety/driver)

2. **Burke Rehabilitation Hospital** offers a Driver Rehabilitation Program. These programs typically specialize in the evaluation of the necessary skills for safe driving in individuals who have physical, mental or cognitive conditions. The programs generally have three phases: a clinical evaluation, a behind-the-wheel road test and a driver training program if indicated. For information, contact Outpatient OT at (914) 597-2326.

3. "**When You Are Concerned**" is a 47-page guide for families, friends and caregivers about the safety of an older driver, published by the New York State Office for the Aging. The handbook covers a range of issues from skill improvement, leaving the road and life after driving. It can be accessed by calling (800) 342-9871 or by downloading a pdf at: [http://www.aging.ny.gov/Caregiving/OlderDriver/DriverChapter3.cfm](http://www.aging.ny.gov/Caregiving/OlderDriver/DriverChapter3.cfm)
Caregiver & Respite Services

Taking care of an older relative or friend can at times, be challenging. Whether you prepare meals for your father, drive your mother to the doctor, or provide 24-hour care for your spouse, you are making an invaluable contribution to you loved one’s life. You need and deserve the most up-to-date information about community resources and services available to help you in your caregiving role.

The Westchester County Department of Senior Programs and Services Family Caregiver Support Program offers free:

- Caregiver consultations during which our staff will meet with you to review your caregiving situation and provide guidance about your options;
- A Guide for Caregivers: What You Need to Know, a 30 page booklet filled with practical advice for the caregiver;
- A Guide for Caregivers: Respite Services and Caregiver Support Groups (see partial lists on 3.19 & 3.20), a 37-page support guide for services in Westchester;
- The Caring Newsletter;
- Educational programs throughout the County;
- Older Driver Family Assistance Program for those concerned with the safety of an older driver that provides information on how to talk to the older driver about this concern and the services available to make them a better driver;
- Faith Based Outreach, a program to assist congregations; and
- A network of support groups and workshops to help seniors, 60-plus who are raising grandchildren younger than 18 years of age under a "Grandparents Program"

Call the Family Caregiver Support Program at (914) 245-9167 for more information.

Caregiver Support Groups are composed of people who share information and common experiences. These groups are good informational resources and stress outlets, and are often led by a health care professional and may include guest speakers. The county guide on support groups lists over two dozen organizations. (Three examples are listed on the next page.)

Respite Services provide temporary substitute care to an elderly homebound person allowing the caregiver some necessary time off. Respite can be a few hours in the home or several days outside of the home in a nursing home or hospital setting. Respite is a benefit to both the caregiver and the care receiver. (Examples are listed on the next page.)
Support Groups

**Greenwich Adult Day Care, Inc.** (For Caregivers of those with Alzheimer’s Dementia, other). Meets Every Other Wednesday, 2pm
(203) 622-0079
Greenwich Adult Day Care, 70 Parsonage Road, Greenwich, CT 06830
Contact Jane Kramer, CSW
Free

**Club Wartburg Adult Day Health Services** (For Caregivers caring for a loved one at home)
Third Thursday of every month, 6-8 pm, light dinner served. Family members are always welcome.
(914) 513-5472
Club Wartburg, Bldg. #3, Lower Level, Wartburg Place, Mount Vernon, NY 10552
Contact Dana Nolan
$5 donation requested

**Hugh A. Doyle Center** in partnership with ElderServe Alzheimer’s Community Service Program of the Hebrew Home at Riverdale (Alzheimer Caregiver Respite Support Group)
Wednesdays, twice a month, 10:30-11:30 am
(914) 235-2363 or (914) 683-7530
New Rochelle Office for Aging, Hugh A. Doyle Center, 94 Davis Avenue, New Rochelle, NY 10805
Contact Phillis Maucieri, Program Specialist, or Lucy Ortiz, LSW, or Arlene Rosen, R.N., Ed.D
Contributions Voluntary.

Respite Services

**Project Time-Out**: Westchester Jewish Community Services (In-home respite program and escort service for those over 60 years of age and homebound)
(914) 761-0600 Ext. 344
845 North Broadway (Suite 2), White Plains, NY 10603
Contact Valerie Rissman, C.S.W.
Sliding Fee Scale ($0 - $12.75/hour), MEDICAID is not accepted.

**Sprain Brook Manor** (For stays up to 20 days)
(914) 472-3200 ext. 104
77 Jackson Avenue Scarsdale, NY 10583
Contact JoAnn Farenga, Admissions Director
$345/day semi-private room, $360/day private room, MEDICAID accepted.
Religious services and activities are offered to all residents.

3.18 Cont’d
**Hebrew Home for the Aged at Riverdale** (Patients w/ Alzheimer’s, and those requiring skilled nursing care for 1-6 weeks)

(718) 581-1249 or (718) 581-1000
5901 Palisade Avenue, Riverdale, NY 10471
Contact Elena Racca-Stevens
$300/day. MEDICAID accepted.

For a full listing of Caregiver Support Groups and Respite Services go to:


For additional help or information you may also call the Westchester County Department of Senior Programs & Services at (914) 245-9167.
Finding a Good Manager for an Elderly Person's Care
(Suggestions from experts for hiring geriatric care managers, from the New York Times (January 2003 and See Last Page Herein)

- **Contact professionals:** The National Association of Professional Geriatric Care Managers (www.caremanager.org) will help find managers closest to the person needing care. The Eldercare Locator of the federal Administration on Aging (www.eldercare.gov, or call (800) 677-1116) which links consumers to services in their cities.

- **Check credentials:** The care manager should be a licensed or certified social worker (LCSW), nurse (Registered Nurse), psychologist or licensed therapist, or be "certified care manager," a credential that is offered by the National Academy of Certified Care Managers in Colchester, Connecticut.

- **Know the scope of practice:** Some agencies specialize in initial assessments and development planning, but do not follow up continually with clients. Others may not be able to help with money management or other needs. Ask to see the agency's code of ethics.

- **Assess style:** During your consultation, get a sense of the care manager's personality. Does he or she seem empathetic and knowledgeable about the social and emotional issues that face older people? Ask what the manager might do in various situations your relative might encounter.

- **Ask about outside resources:** Is the manager familiar with transportation, home care, senior centers and other local services? If an agency sells home care or legal services as well as care management, make sure that you are comfortable with the arrangement or ask for alternatives. Find out how the agency supervises the people who provide the services.

- **Get references:** Ask for names of other clients.

- **Discuss fees:** Get a copy of the fee structure. It should include the cost of the initial assessment as well as hourly fees. If the manager recommends outside services, make sure you know those costs, too.

- **Check on availability:** Ask managers how often they visit or call, and how after-hour emergencies are handled. What are their vacation backup systems?

- **Follow up on care:** Make sure the care manager provides what is promised. Talk to your relative about the care, and ask the manager for regular and detailed reports. Check in with one of the services that the manager has arranged, or ask a neighbor to drop by occasionally.
Making Home Safer Place, Affordable/Disaster Protected

Preparedness

By Lesley Alderman
New York Times, July 18, 2009

Stay put or sell? That's the question many older people ponder as they move into their 70s and beyond.

Most older people settle on staying put, according to a recent survey by the Home Safety Council, a nonprofit organization dedicated to preventing home-related injuries. (From the source of the survey, you can see where this column is heading, right?)

Staying put makes economic sense. It is not only more comfortable to live out your life in your own home, it's much more affordable. The average annual fee at an assisted-living facility -- a place where older people live independently but also receive a host of services like medication monitoring and meals -- is $34,000. And in the nation's most expensive metropolitan areas, including New York, the costs may be closer to $70,000.

But while home might be cozier and cheaper than a residential center, it's not always safer. Every year in this country about 7,000 elderly people die in home-related accidents, and millions are seriously injured. Falls are the leading cause of injuries, but the elderly are also at risk for being burned by the stove, scalded by hot water or drowning in the tub.

The home "environment can be a great support to independent living," says Jon Pynoos, professor of gerontology at the University of Southern California. "Or it can be a health care hazard."

After Maryann Connelly's mother fell and hurt herself two years ago, Ms. Connelly considered moving her to an assisted-living facility.

But the mother, Catherine Fisher, who is in her 80s and has lived on her own for 18 years, had a two-word response -- "No way!" -- even though her rheumatoid arthritis made it difficult to walk up and down stairs and get in and out of chairs.

So Ms. Connelly and her siblings hired an occupational therapist to modify Ms. Fisher's two-story townhouse in Newton, N.J., to make it safer and easier for her to navigate. The therapist added, among other things, an electric stair lift and grab bars throughout the house. The total cost, for the therapist's fee, equipment and installation, was $4,500.

As Ms. Connelly learned, an entire service industry is slowly taking shape around the goal of letting people age in place. If you want to make your own home or an older relative or friend's home a safer, more supportive place to live, here are basic guidelines to the most efficient and cost effective approaches.
**Taking Stock:** Learn where the potential hazards lie and how you can reduce them. For starters, go to the "Home Safety Council" site, (MySafeHome.net), and take the house tour, which points out possible dangers room by room. Many of the changes the site suggests are simple and inexpensive, like removing area rugs and installing brighter bulbs in hallways.

**AARP** also has an interactive home safety checklist created with the National Association of Homebuilders.

**A Professional Assessment:** If you have multiple medical issues, say arthritis and/or poor vision, ask your doctor for a referral to an occupational therapist (OT) as they're known to specializes in home modifications. The O.T. can analyze your potential challenges and your home's shortcomings and suggest a plan that a contractor or handyman can alter or modify with easy directions.

"An O.T. is your best source for doing the right thing" according to Professor Pynoos, who is also the co-director of the "Fall Prevention Center of Excellence," an organization in California supported by the Archstone Foundation, a nonprofit group in Long Beach focused on issues related to aging. OT Specialists are able to analyze needs in a way we never would have been able to...like raising the height of client's chairs to make getting in and out them easier, or installing threshold ramps and railings at the front door to make it safer for handicap clients to leave and enter the house on their own."

**Other O.T. assistance:** Helpful in supplying you with an invoice that lists the medical necessities for each home improvement – a document that you might need for reimbursement under a LTC insurer.

**Long-Term Care (LTC) Coverage:** If you were far-sighted enough to have such a policy, call your insurance agent and ask whether home modifications are covered under your plan and what documentation you need for reimbursement. A policy will not pay for upgrades if you are still healthy. In general, regular health insurance does not cover physical upgrades to the home, though it often will pay for an Occupational Therapist to come in and do an assessment.

**Tapping Home Equity:** If you want to make substantial changes to your home, but don't have the cash to pay for them, consider taking out a home equity loan. For information on ways you can tap into your home equity, go to LongTermCare.gov, a site run by the Department of Health and Human Services. While a home equity loan is your best option, if a bank won't give you such a loan, another possibility is a Reverse Mortgage, available to people over 62, which lets you convert the equity in your home into cash. Fees can be substantial, so be sure to speak with a financial planner before assuming this type mortgage.

3.22 Cont'd
When Money is Scarce: Contact your local Department of Senior Programs and Services to identify resources for home modification loans and services available to seniors. Use the federal government's elder care locator - www.eldercare.gov find your local office, or call 800-677-1116. Some government agencies make low-interest loans to those with low or moderate incomes. In addition, get in touch with Rebuilding Together (www.rebuildingtogether.org, or 1-800-473-4229), a national nonprofit organization that helps people with low incomes improve their homes. The organization's Safe at Home Program was created specifically to help older people stay safe at home.

Disaster Preparedness

Red Cross: Publishes a 17-page booklet “Disaster Preparedness for Seniors by Seniors.” Emergencies and disasters can strike quickly without warning and can force you to evacuate your neighborhood or be confined to your home. Learn how to protect yourself and cope with disasters, even if you have NO physical limitations.

The booklet lists the essential supplies needed for evacuations and steps to prepare an evacuation plan, including vital records and documents to protect along with contacts, and protective measures to take beforehand. Also, it gives steps to take should a disaster strike and effect your home. Booklets are available from www.redcrosstbc.org/pdf/DisasterPreparednessSeniors.pdf or contact Metro-American Red Cross offices at (914) 946-6500.
Project Lifesaver

**Project Lifesaver**: a free program that uses radio-frequency technology to find seniors with Alzheimer’s disease who wander from their homes - will celebrate its second anniversary in Westchester County **this month**.

As of July 2010, it located seven missing seniors and safely returned them home to their grateful and greatly relieved families.

Project Lifesaver works through bracelets with special batteries that the seniors wear on their wrists. Should the senior become lost, specially trained and equipped police officers from the Westchester County Department of Public Safety can locate them by tracking a radio signal the bracelets transmit. The public safety department co-sponsors Project Lifesaver with the county's Department of Senior Programs and Services (DSPS) and Project Lifesaver International.

“It’s a godsend,” said Mary Brady of Thornwood, who saw the tremendous value of Project Lifesaver first-hand about a year ago when her husband Ed, who had Alzheimer’s disease, was missing. “It saved Ed’s life,” she said. “We couldn’t find him. He was under an evergreen tree on a neighbor’s property but you could not see him. When he was found he was all scraped and scratched.” Mary said her husband was found in about an hour – “but I can tell you it was an eternity.” In addition to the seven seniors found using the technology, county police have been activated to search for six other missing seniors but they all were found before the police went out.

For more information about Project Lifesaver, contact Melody Keel at the ElderServe Safe Center for Seniors at (914) 365-1983 or send an e-mail to mkeel@hebrewhome.org.
**Phone Numbers of Phone companies + Utility Companies**

**Verizon** (phone, cable TV, internet) *(800) 837-4966*  
(Special discount service for low income customers and customers with disabilities - 914 890-0550)

**Optimum/Cablevision** (phone, cable TV, internet) *(914) 777-9000*  
(Promotional discounts for senior citizens)

**ConEd** (electricity & gas) *(800) 752-6633*

**Water**
- Long Island American Water *(877) 426-6999*
- Westchester Joint Water Works *(914) 698-3500*

**Sewers** (Rye Department of Public Works) *(914) 967-7464*
Health Services

Health Service Providers - General..................................................Page 4.2
(hospitals, urgent care facilities, family health, ambulance)

Evaluation Services: Counseling, Psychiatric & Geriatric......Page 4.3

Special Health Needs & Services..................................................... Page 4.4
(from “Alzheimer’s” to “Visual Rehabilitation”)

Dialysis Facilities Within 10 Miles..............................................Page 4.5

Op-Ed Article on Doctors and Geriatric Medicine…………….Page 4.6
“The Patients Doctors Don't Know”

ADDITIONAL INFORMATION

Prescription Protection for Seniors & Medicare HMO's: See pages starting at 5.1 on
Payment or Insurance for Health Care & Prescriptions

Adult Day Health Care & Home Health Service Agencies: See pages starting at 2.0

The authors and sponsors of this directory make no guarantee (expressed or implied) as to
the quality of any provider, and do not recommend or endorse any provider in particular.
The full responsibility for choosing a provider rests with the senior citizen and his or her
immediate advisers.
Health Service Providers - General

As always, for a life-threatening emergency/needs.................................................Dial 911
Greenwich Hospital (CT)......................(203) 863-3000 or (800) 657-8355 (toll free)
Montefiore New Rochelle Hospital.................................................................(914) 365-3600
White Plains Hospital Center.................................................................(914) 681-0600

Rye Walk-in Medical Center.................................................................(914) 967-3266
"Urgent care" (not Primary Care) for minor problems (e.g. flu, x-rays, stitches), 150 Purchase St, accepts private insurance & Medicare.

Walk-in Urgent Care, Westchester Medical Group.................................(914) 848-8890
Seven Days a week at 1 Theall Road in Rye, Weekdays: 8 a.m. 9 p.m., Sat/Sun: 9 a.m. 5 p.m., covers diagnostic capabilities of a hospital, including general X-ray, CT scans and laboratory testing.
Physicians respond to non-life-threatening medical needs that require prompt medical attention such as abdominal pain, allergic reactions, asthma, back pain, bronchitis, eye, ear, and skin infections, gastroenteritis, headaches, injuries of the shoulder, leg, hand, wrist, knee, including ankle, lacerations, contusions, minor burns, urinary tract infections, and pneumonia.

Open Door Family Medical Center.......................................................(914) 937-8899
A non-profit, affordable, primary medical care family practice at 5 Grace Church Street, Port Chester, accepting most insurance including Medicare & Medicaid.

Port Chester, Rye, Rye Brook EMS Ambulance..................................................911
Evaluation, Counseling, Psychiatric, and Geriatric Services

**Burke Rehabilitation Hospital, White Plains**
Memory Evaluation and Treatment Service

**NY Presbyterian Hospital, Westchester Division**
Behavioral health programs for the elderly and others with psychiatric, behavioral, emotional and addiction problems

**St. Vincent's Westchester**
Psychiatric evaluation & treatment, geriatric outpatient & inpatient services, mental health & substance abuse programs

**Geriatric Assessment Centers**
Comprehensive physical & cognitive assessment followed by recommendations & referrals as required
- Greenwich Hospital, Greenwich, CT
- Geriatric Associates of Westchester at Montefiore NR Hospital

**The Guidance Center, Inc., New Rochelle**
Individual/group therapy, mental illness, psychiatric rehabilitation, substance abuse, vocational, housing & nutrition assistance

**Family Services of Westchester**
Individual, couples, and family mental health treatment, elder abuse prevention, geriatric care management, home health care, adult day program

**Greenwich Hospital Center for Healthy Aging**
Aging assessment (including memory screening and safety assessment), caregiver and psychiatric consultation, Generations Program (including some discounts for outside goods and services, seminars, and workshops), and literature
Special Health Needs & Services

Alzheimer's Association Westchester Office................................................. (914) 253-6860
Safe Return Bracelets available to assist in the quick return of people who may wander and get lost, support groups, educational programs, care consultations, caregiver help, advocacy and outreach, 24/7 national helpline (800) 272-3900

Arthritis Foundation Helpline (NY Chapter)..........................................................(800) 246-2884

Cardiac Rehabilitation, Montefiore New Rochelle Hospital.........................................................(914) 637-1520

Gilda's Club Westchester.....................................................................................(914) 644-8844
Social opportunities & emotional support for men, women & children with various cancers or for their family & friends. FREE.

My Sister's Place..............................................................................................................(800) 298-7233
Shelter, support & legal services to battered women & children

Healthy Living Center at Greenwich Hospital.......................................................(203) 863-3177
Cardiac and Pulmonary Rehabilitation

Stroke Center at White Plains Hospital...............................................................(914) 681-1168
First state-designated stroke center in Westchester, provides initial rapid assessment of stroke symptoms and planning for long term treatment.

Visual Rehabilitation, Lighthouse International...................................................(800) 829-0500
Visual rehabilitation & facilitating access to physicians and community care providers for people with vision impairment
Dialysis Facilities

Port Chester Dialysis & Renal Center
(914) 937-8800
38 Buckley Avenue, Port Chester, NY 10573

White Plains Dialysis
(914) 328-4900
200 Hamilton Avenue (Suite 13B), White Plains, NY 10601

Sound Shore Dialysis Center (Fresenius Medical Care)
(914) 235-6878
16 Guion Place, New Rochelle, NY 10801
Op-Ed Article on Doctors and Geriatric Medicine
“The Patients Doctors Don't Know”
By Rosanne M. Leipzig
Published: New York Times July 1, 2009

As they do every July, hospitals across America are welcoming new interns, fresh from medical school graduation. Given how much these trainees have yet to learn, common wisdom holds that it's not a good time of year to get sick. This may be particularly true for older patients, because American medical schools require no training in geriatric medicine.

Often even experienced doctors are unaware that 80-year-olds are not the same as 50-year-olds. Pneumonia in a 50-year-old causes fever, cough and difficulty breathing; an 80-year-old with the same illness may have none of these symptoms, but just seems “not himself/herself” as well as confused and unsteady; and unable to get out of bed.

The senior may end up in a hospital, where a doctor prescribes a dose of antibiotic(s) that would be right for a woman in her 50s, but is twice what an 80-year-old patient should get; and the result could be the start of kidney failure and symptoms of growing weaker and more confused. In this confused state, the patient could pull the tube from his/her arm and the catheter from his/her bladder.

Instead of reevaluating whether the tubes are needed, the doctor then asks the nurses to tie the patient’s arms to the bed so he/she won't hurt himself/herself. This only increases agitation and keeps him/her bed-bound, causing the loss of muscle and bone mass. Eventually, the patient recovers from the pneumonia and his/her mind is clearer, so the patient is considered ready for discharge, but the female patient is no longer the woman she was before her illness. She's more frail, and needs help with walking, bathing and daily chores.

This shouldn't happen. All medical students are required to have clinical experiences in pediatrics and obstetrics, even though after they graduate most will never treat a child or deliver a baby. Yet there is no requirement for any clinical training in geriatrics, even though patients 65 and older account for 32 percent of the average doctor's workload in surgical care and 43 percent in medical specialty care; and they make up 48 percent of all inpatient hospital days. Medicare, the national health insurance for people 65 and older, contributes more than $8 billion a year to support residency training, yet it does not require that the training focus on the unique health care needs of older adults.

Medicare beneficiaries receive care from doctors who may not have been taught that heart attacks in octogenarians usually present without chest pain, or that confusion can be due to bladder infections, heart attacks or Benadryl. They do not routinely check for memory problems, or know which community resources can help these patients manage their conditions. They're uncomfortable discussing goals of care, and recommend screening tests and treatments to patients who are not going to live long enough to reap the benefits.
I was part of a group of doctors and medical educators who recently published in the journal Academic Medicine a set of minimum abilities that every medical student should demonstrate before graduating and caring for elderly patients. Nicknamed the “don't kill Granny” list, it includes being able to prescribe medicines, assess patients' ability to care for themselves, recognize atypical presentations of common diseases, prevent falls, recognize the hazards of hospitalization and decide on treatments based on elderly patients' prognosis and their personal preferences.

The 2008 Institute of Medicine report “Retooling for an Aging America” resolved that all licensed health care professionals should be required to demonstrate such competence in the care of older adults. But this resolution lacks teeth. Medical resident training programs that receive Medicare money should be required to demonstrate that their trainees are competent in geriatric care. Medicare should finance medical training in nursing homes. State licensing and medical specialty boards should require demonstrations of geriatric competence for licensing and certification.

Basic geriatric knowledge is preventive medicine. Nurses, social workers, pharmacists and other health care professionals should have it, too, in order to improve care for older people. But until doctors get this basic training, we can’t even begin to give 80-year-olds the care they need.

Rosanne M. Leipzig, a physician, is a professor at Mount Sinai School of Medicine.
Payment or Insurance for Health Care & Prescriptions

Medicare Basics.................................................................Page 5.2

Medicare Prescription Drug Coverage (Part D)......................Page 5.4

Health Care Reform Bill.........................................................Page 5.7

Medicaid Basics....................................................................Page 5.9

Long-Term Care Insurance.....................................................Page 5.13

"Long-Term Care Insurance: Is It Right for You".............Page 5.16
(and Your Parents)?

Medicare and Medicaid are not Long Term Care.............Page 5.19

Elderly Pharmaceutical Insurance Coverage Program.........Page 5.21

New York Rx Card................................................................Page 5.25

*The authors and sponsors of this directory make no guarantee (expressed or implied) as to the quality of any provider, and do not recommend or endorse any provider in particular. The full responsibility for choosing a provider rests with the Senior Citizen and his or her immediate advisers.*

5.1
Medicare Basics
(Sourced from Medicare’s “Medicare & You - 2010” 124-page handbook)

Medicare
Medicare is health insurance for people age 65 or older, under age 65 with certain disabilities, and any age with End-Stage Renal Disease (ESRD) or "permanent kidney failure" requiring dialysis or a kidney transplant.

Different Parts of Medicare
The different parts of Medicare help cover specific services if you meet certain conditions. Medicare has the following parts:

- **Medicare Part A (Hospital Insurance):** Helps cover inpatient care in hospitals, skilled nursing facilities, hospice, and home health care

- **Medicare Part B (Medical Insurance):** Helps cover doctors’ services and outpatient care and home health care and some preventive services to help maintain your health and to keep certain illnesses from getting worse.

- **Medicare Part C (Medicare Advantage Plans) (like an HMO or PPO):** A health coverage choice run by private companies approved by Medicare. Includes Part A, Part B, and usually other coverage including prescription drugs.

- **Medicare Part D (Medicare Prescription Drug Coverage):** A prescription drug option run by private insurance companies approved by and under contract with Medicare. Helps cover the cost of prescription drugs. May help lower your prescription drug costs & help protect against higher costs in the future.

Medicare Coverage Choices
With Medicare, you can choose how you get your health and prescription drug coverage. Below are brief descriptions of your coverage choices.

- **Original Medicare:** Run by the Federal government. Provides Part A and Part B coverage. You can go to any doctor or hospital that accepts Medicare, join a Medicare Prescription Drug Plan to add drug coverage, and buy a Medigap (Medicare Supplement Insurance) policy (sold by private insurance companies) to help fill the gaps in Part A and Part B coverage.
**Medicare Advantage Plans (like an HMO or PPO):** Run by private companies approved by Medicare. Provides Part A and Part B coverage but can charge different amounts for certain services. May offer extra coverage and prescription drug coverage for an extra cost. Costs for items and services vary by the plan selected. If you want drug coverage, you must get it through your plan (in most cases). You don’t need a Medigap policy.

**Other Medicare Health Plans:** Plans that aren’t Medicare Advantage Plans but are still part of Medicare include Medicare Cost Plans, Demonstration/Pilot Programs, and Programs of All-inclusive Care for the Elderly (PACE). Some plans provide Part A and Part B coverage, and some also provide prescription drug coverage (Part D).

**Medicare Prescription Drug Coverage (Part D):** Medicare offers prescription drug coverage (Part D) for everyone with Medicare. To get Medicare drug coverage, you must join a plan run by an insurance company or other private company approved by Medicare. Each plan can vary in cost and drugs covered. If you want Medicare drug coverage, you need to choose a plan that works with your health coverage.

**Answer Sources to Your Medicare Questions:** 1-800-MEDICARE (1-800-633-4227) TTY 1-877-486-2048 or Go to Medicare’s web page: www.medicare.gov

**State Health Insurance Assistance Program (SHIP)**
To get FREE personalized health insurance counseling, including help making health care decisions, getting information on programs for people with limited income and resources, as well as help with claims, billing, and appeals.

**Social Security**
Provide replacement Medicare cards, will change your address or name, get information about Part A and/or Part B eligibility, clarify entitlements, and enrollment, and apply for “extra help” with Medicare prescription drug costs, and report a deaths at 1-800-772-1213 TTY 1-800-325-0778.

**Coordination of Benefits**
To get information on whether Medicare or your other insurance pays first and to report changes in your insurance information. 1-800-999-1118 TTY 1-800-318-8782

**Veterans and Special Situations:** Contact U.S. Department of Defense, State Department of Health and Human Services and the U.S. Department of Veterans Affairs
Medicare Prescription Drug Coverage

There are two ways to get Medicare prescription drug coverage:

1. Medicare Prescription Drug Plans: These plans (sometimes called “PDPs”) add drug coverage to Original Medicare, some Medicare Cost Plans, some Medicare Private Fee for-Service (PFFS) Plans, and Medicare Medical Savings Account (MSA) Plans.

2. Medicare Advantage Plans (HMO or PPO) or Health Plans that offer Medicare Rx’s: You get all of your Part A and Part B coverage, including prescription drug coverage (Part D), through these plans. Medicare Advantage Plans with prescription drug coverage are sometimes called “MA-PDs.”

Types of Plans called “Medicare Drug Plans”

Even if you don’t take a lot of prescription drugs now, you should still consider joining a Medicare Drug Plan. If you decide not to join a Medicare Drug Plan when you are first eligible, and you don’t have other creditable prescription drug coverage as defined by Medicare, you may likely pay a late enrollment penalty (higher premiums) should you choose to join later.

Note:
Discount cards, doctor samples, free clinics, drug discount web sites, and manufacturer pharmacy assistance programs are not classified as Prescription Drug Coverage or Creditable Coverage. If you have limited income and resources, you may qualify for “extra help” from Medicare paying your Prescription Drug Coverage. You may also be able to get help from your state.

How Medicare Drug Plans Work in Providing Coverage:
To join a Medicare Prescription Drug Plan, you must have Medicare Part A and/or Part B. To join a Medicare Advantage Plan (HMO/PPO), you must have Part A and Part B. You must also live in the service area of the Medicare drug plan you want to join. If you have employer or union coverage, call your Benefits Administrator before you make any changes, or before you sign up for any other coverage. If you drop your employer or union coverage, you may not be able to get it back. You also may not be able to drop your employer or union drug coverage without dropping your employer or union health protection (physician/hospital coverage). If you drop coverage for yourself, you may be obligated to terminate coverage for your spouse and dependents.
Choosing Medicare Prescription Drug Coverage (Part D):
Joining a Medicare Drug Plan when you are first eligible means you won’t have to pay a late enrollment penalty. Every year (between November 15th–December 31st), you can switch to a different Medicare drug plan if your plan coverage is changing or your medical needs change. When you join or switch to a new Medicare Drug Plan, your coverage generally begins on January 1st of the following year. After you join a Medicare Drug Plan, the plan will mail you membership materials, including a card to use when you get your prescriptions filled. When you use the card, you may have to pay a copayment, coinsurance, and/or deductible charged by the plan.

When Can You Join, Switch, or Drop a Medicare Drug Plan:
You can join, switch, or drop a Medicare Drug Plan when you first become eligible for Medicare between November 15th–December 31st each year. Then your coverage will begin on January 1st of the following year. In most cases, you must stay enrolled for that calendar year starting the date your coverage begins.

How Do You Join a Medicare Drug Plan:
Once you choose a Medicare Drug Plan, you may join by completing a paper application, or by calling the plan, or enrolling online. Medicare Drug Plans are not allowed to call you to enroll you in their plan. So, you should contact the Plan to find out how to enroll. When you join a Medicare Drug Plan, you will have to provide your Medicare number and the date your Part A or Part B coverage started. This information is on your Medicare card.
Visit www.medicare.gov, or call 1-800-MEDICARE (1-800-633-4227) for a list of the Medicare plans in your area. TTY users should call 1-877-486-2048.

How Do You Switch Your Medicare Drug Plan:
Depending on your circumstances, you can switch your Medicare Drug Plan simply by joining another Drug Plan during the enrollment periods listed above. You don’t need to cancel your old Medicare drug plan or send them anything because you will get a letter from your new Medicare Drug Plan informing you when your NEW coverage begins.

How Much Does Medicare Drug Coverage Cost:
Exact coverage and costs are different for each Plan, but all Medicare Drug Plans must provide at least a standard level of coverage set by Medicare. Your actual drug plan costs will vary depending on the drugs you use, the plan you choose, or whether you go to a pharmacy in your plan’s network, and whether you qualify for “extra help” that results in paying your Part D costs.

Monthly premiums:
Most drug plans charge a monthly fee that varies according to the Plan. You pay this in addition to the Part B premium. If you belong to a Medicare Advantage Plan (HMO/PPO) or a Medicare Cost Plan that includes Medicare prescription drug coverage, the monthly premium may include the cost for the prescription drug coverage.
**Yearly deductible:**
This is the amount you pay for your prescriptions before your plan begins to pay. Some drug plans charge no deductible.

**Copayments or coinsurance:**
This is the amounts you pay for your prescriptions after the deductible, that is, you pay your share, and your plan pays its share for covered drugs.

**Coverage gap:**
Most Medicare Drug Plans have a coverage gap period. This means that after you and your plan have spent a certain amount of money for covered drugs, you have to pay all costs thereafter out-of-pocket for your drugs up to a certain limit. Your yearly deductible, your coinsurance or copayments, and what you pay in the coverage gap period all count toward this out-of-pocket limit. The limit doesn’t include the drug plan’s premium. There are plans that offer some coverage during the gap, like for generic drugs. However, plans with gap coverage may charge a higher monthly premium. Check with the Plan's Formularies first to see if your drugs would be covered during the gap period.

**Catastrophic coverage:**
Once you reach your plan’s out-of-pocket limit during the coverage gap, you automatically get “catastrophic coverage.” Catastrophic coverage assures that once you have spent up to your plan’s out-of-pocket limit for covered drugs, you only pay a small coinsurance amount or a copayment for the rest of the year.

**Note:**
If you get “extra help” paying for your drug costs, you will not have a coverage gap; and will pay a small or no copayment until you reach the catastrophic coverage period.
Many senior citizens worry about the effect that the health care reform bill may have on them. After all, they generally use the health care system more than younger people. And those living on fixed incomes may have little leeway in their budgets to help if their health costs rise.

Would the healthcare reform legislation that President Obama plans to sign into law on Tuesday affect seniors in any direct way? The short answer is “yes.”

The longer answer is that some seniors may lose Medicare benefits they now enjoy. Many others will gain from an enhancement of Medicare’s prescription drug program.

Here are some specifics on these changes:

- **Medicare Cuts**: Under the healthcare reform bill, government payments to Medicare Advantage – plans that are run by private insurers, such as Humana, and are an alternative to traditional Medicare. These will be cut by $132 billion over 10 years; and these plans currently receive more per person from the government than traditional Medicare does.

- **Medicare Advantage Plans**: Offer extra benefits that seniors in traditional Medicare don’t get. It is possible that these extras will be dropped as Medicare Advantage plans feel a budget squeeze. In most areas of the United States, this reduction will be phased in over three years, beginning in 2011, although in some places it will take longer. The bill does not contain cuts to traditional Medicare benefits. However, Medicare payments for home healthcare would be reduced by $40 billion between now and 2019. And certain payments to hospitals would be cut by $22 billion over that same period.

- **Medicare Enhancements**: The bill would bolster the existing Medicare prescription-drug benefit by addressing part of its “doughnut hole” problem. Right now, after a senior has spent $2,700 on drugs in a year. Coverage stops until that same person has spent $6,154 on drugs, when it re-starts. Hence the “doughnut hole” nickname.

Beginning in 2010, people who fall into this "doughnut" hole will get $250 from the government to help. Thereafter, according to the bill, the US will gradually increase the percentage of drug costs it pays within this gap. By 2020, the US will pay 75 percent of senior drug costs between $2,700 and $6,154. Medicare will also begin to pick up the tab for annual wellness visits.
**Medicare Payment Advisory Board:** Healthcare reform legislation also establishes what it terms an Independent Payment Advisory Board, made up of 15 members, that would submit legislative proposals to reduce per capita Medicare spending if that spending grows too fast. “Too fast” is defined as exceeding the growth rate of the Consumer Price Index measures for a five-year period, ending in 2013. If that happens, beginning in 2014, this board will submit proposals to Congress and the president for consideration.

Some critics have charged that this board will be the leading edge for Medicare reductions. Legislative wording in the healthcare reform bill prohibits the board from submitting any idea that would ration care, raise taxes, or change benefits.

More detailed information on health care reform may be found on the AARP Public Policy Institute web page “Health Reform Legislation – Key Facts”, as follows:
Medicaid Basics

Medicaid is a program for New Yorkers who can't afford to pay for medical care.

You may be covered by Medicaid if:
- You have high medical bills.
- You receive Supplemental Security Income (SSI). and
- You meet certain income, resource, age, or disability requirements.

You can apply for Medicaid in any one of several ways, including writing, phoning, or going to your local Department of Social Services (DSS). In Westchester, contact the Westchester County DSS office at 914-995-5000 or visit the County Office Building #2, 112 East Post Road, White Plains, New York 10601 for assistance.

When I go for my application interview, I should take:
- Proof of age, like a birth certificate,
- Proof of citizenship or alien status,
- Recent paycheck stubs (if you are working),
- Proof of your income from sources like Social Security, Supplemental Security Income (SSI), Veteran's Benefits (VA), retirement,
- Any bank books and insurance policies that you may have,
- Proof of where you live, like a rent receipt or landlord statement,
- An Insurance Benefit Card or the policy (if you have any other health insurance), and
- Medicare Benefit Card

NOTE:
Medicaid coverage is available, regardless of alien status, if you are pregnant or require treatment for an emergency medical condition. A doctor must certify that you are pregnant or had an emergency, and you must meet all other eligibility requirements.

If I think I am eligible for Medicaid, should I cancel any other health insurance I might already have? NO. If you currently pay for health insurance or Medicare coverage or have the option of getting that coverage, but cannot afford the payment, Medicaid can pay the premiums under certain circumstances.

Even if you are not eligible for Medicaid benefits, the premiums can still be paid, in some instances, like losing your job or having your work hours reduced. If you need help with a COBRA premium, you must apply quickly, to determine if Medicaid can help pay the premium.
You may be eligible for the Medicare Savings Program which pays your Medicare premiums and deductibles.

**How do I know if my income and resources qualify me:**
The chart below shows how much income you can receive in a month and the amount of resources you can retain and still qualify for Medicaid. The income and resource levels depend on the number of family members who live with you.

**2014 Income & Resource Levels:**

<table>
<thead>
<tr>
<th>#</th>
<th>Singles, Couples, and Low Income Families</th>
<th>Families, Disabled, Blind, and Over 65</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Annual Income</td>
<td>Monthly Income</td>
</tr>
<tr>
<td>1</td>
<td>$9,105</td>
<td>$759</td>
</tr>
<tr>
<td>2</td>
<td>$11,363</td>
<td>$947</td>
</tr>
<tr>
<td>3</td>
<td>$13,520</td>
<td>$1187</td>
</tr>
</tbody>
</table>

(There are higher figures for larger families effective January 1, 2014)

Income and Resource Levels are subject to yearly adjustments. You may also own a home, a car, and personal property and still be eligible. The income and resources of legally responsible relatives in the household will also be counted.

**Eligibility for Medicaid beyond the money in the chart:**
Yes, some people can. Disabled persons and others may also be eligible for Medicaid if their income and/or resources are above these levels, and they have medical bills. A Medicaid worker can define if you fit into one of these groups. And in those instances where an adult has too much income/resources and is not Medicaid-eligible, that adult may be eligible for Family Health Plus or the Family Planning Benefit Program.

**RIGHTS:**
The Medicaid application, Access NY Health Care, tells you what your rights are when you apply for Medicaid. See the pages titled "Terms, Rights and Responsibilities." People who receive Medicaid have privacy rights. Medicaid also keeps your health information private and shares it only when they need to.

Generally, local districts must determine if you are eligible and send a letter notifying you if your application was accepted or denied within 45 days of the application date. If you are pregnant or applying on behalf of children, the local district office has 30 days from the application date to determine your eligibility for Medicaid. Persons with disabilities must be evaluated within 90 days.
If you are not satisfied with a decision made by the local social services district office, you may request a conference with the agency. You may also submit an Fair Hearing Appeal to the NYS Office of Temporary and Disability Assistance by calling (800) 342-3334.

Residency in a nursing home (Residential Health Care Facility) or in an intermediate care facility for the developmentally disabled may NOT be the criteria for taking all your money: Under Medicaid you are allowed to keep a small amount of your income for personal needs. You can also keep some of your income for your family if they are dependent on you. A spouse who remains in the community may also keep resources and income above the levels shown.

Health Services covered by Medicaid:
In general, the following services are paid for by Medicaid, but some may not be covered for you because of your age, financial circumstances, family situation, transfer of resource requirements, or living arrangements. Some services have small co-payments and these services may be provided using your Medicaid card or through your Managed Care Plan if you are enrolled therein. You will not have a co-pay if you are in a Managed Care Plan that offers:

- smoking cessation agents,
- treatment and preventive health and dental care (doctors and dentists),
- hospital inpatient and outpatient services,
- laboratory and X-ray services,
- care in a nursing home,
- care through home health agencies and personal care,
- treatment in psychiatric hospitals (for persons under 21 or those 65 and older), mental health facilities, and facilities for the mentally retarded or the developmentally disabled,
- family planning services,
- early periodic screening, diagnosis, and treatment for children under 21 years of age under the Child/Teen Health Program,
- medicine, supplies, medical equipment, and appliances (wheelchairs, etc.),
- clinical services,
- transportation to medical appointments, including public transportation and car mileage,
- emergency ambulance transportation to a hospital,
- prenatal care,
- some insurance and Medicare premiums, and
- other health services,
If you are eligible for Medicaid, you will receive a Benefit Identification Card which must be used when you apply for medical services, but there may be limitations on certain services.

For you to use your Benefit Identification Card for certain medical supplies, equipment, or services (e.g., wheelchair, orthopedic shoes, transportation), you or the person or facility that will provide the service must receive prior approval before the service can be given.

**Medicaid Managed Care Program:**
Enrollment in a Medicaid Managed Care Program (MCP) through a Health Maintenance Organization (HMO), clinic, hospital, or physician group is available at any local DSS Office. And if you are NOT enrolled in a MCP you may be required to join one. When you join a MCP, you will choose a personal doctor who will be responsible for making sure all your health care needs are met and only that doctor can refer you to some other doctor if you need more help than your original doctor can provide.

**Managed Care Coverage:**
MCP covers most of the benefits recipients will use, including all preventive and primary care, inpatient care, and eye care. People in MCP use their Medicaid Benefit Card to get those services that the plan does not cover.
Long-Term Care Insurance
Source: AARP Public Policy Institute

Background
Relatively few older persons have private insurance that covers the cost of long-term care. Many common long-term care needs (e.g., bathing, dressing, and household chores) do not require skilled help and therefore are not generally covered by private health insurance policies or Medicare.

But without private insurance or public program coverage, the high cost of long-term care is unaffordable for most Americans. The average cost of a nursing home stay is more than $88,000 per year and exceeds $100,000 in 10 states. The base rate for assisted living facilities is over $41,000 per year. Hourly home care agency rates average $37 for a licensed practical nurse and $19 for a home health aide.

As an alternative to public program coverage and direct payments for services, a market for private long-term care insurance (LTCI) has developed in recent years. However, its overall role is still limited. Private insurance currently pays about 7% of all long-term care costs.

Long-Term Care Insurance
By 2010, roughly 7-9 million LTCI policies were in force in the United States. Most policies sold today (90%) cover services received in a range of settings, including institutions and at home. Typically, policies reimburse the insured for long-term care expenses up to a fixed amount, such as $100 or $150 per day.

To receive benefits, the insured must meet the policy’s disability criteria. Nearly all policies define disability as either severe cognitive impairment or the need for help in performing at least two “activities of daily living” such as bathing and dressing.

In 2010, the typical purchaser was age 59 and had fairly substantial income and assets. The purchasers (57%) had incomes over $75,000 per year and more than three-fourths (77%) had over $100,000 in liquid assets. By comparison, only 44 percent of the general population age 50 and older had liquid assets in excess of $100,000.

Cost of Long-Term Care Insurance
The cost of LTCI is the reason that most people give for not purchasing it. Factors that affect the policy’s premium include the individual’s age at the time of purchase, the amount of coverage, the length of any waiting period before benefits are paid, the stringency of benefit triggers, i.e., whether policyholders can retain a partial benefit if they let their policy lapse for any reason, including inability to pay (“non-forfeiture benefit”), and whether the policy’s benefits are adjusted for inflation.

5.13 Cont’d
Table 1 shows the average annual premium for policies in 2010. On average, these policies provided a daily benefit of $150, 5.5 years of coverage in home and institutional settings, and included some form of automatic inflation protection.

Table 1: **Average Annual Premiums**: 2010

<table>
<thead>
<tr>
<th>Ages</th>
<th>Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>55-64</td>
<td>$2,261</td>
</tr>
<tr>
<td>65-69</td>
<td>$2,781</td>
</tr>
<tr>
<td>70-74</td>
<td>$3,421</td>
</tr>
<tr>
<td>75+</td>
<td>$4,123</td>
</tr>
</tbody>
</table>

Table 1: **Average Annual Premiums**: 2010

<table>
<thead>
<tr>
<th>Ages</th>
<th>Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>55-64</td>
<td>$2,261</td>
</tr>
<tr>
<td>65-69</td>
<td>$2,781</td>
</tr>
<tr>
<td>70-74</td>
<td>$3,421</td>
</tr>
<tr>
<td>75+</td>
<td>$4,123</td>
</tr>
</tbody>
</table>

Source: National Clearinghouse for Long-Term Care Information

Private LTCI is priced differently from most other types of insurance. While health and life insurance policy premiums generally increase with age, most LTCI policies offer the purchaser a premium that will not increase as a result of individual circumstances, such as age or health condition. Insurance companies can, however, increase premiums for entire classes of individuals (e.g., all policyholders age 75 or older) based on their experience in paying benefits.

**Lapse Rates**

There is some evidence that lapse rates for LTCI have been declining. One study reports total lapse rates of approximately 5% during 2002 – 2004. However, this average masks significant variations. During the first year of purchase, some 9% of buyers let their policies lapse. Lapse rates in the first year also are substantially higher among policies with lower benefits. For example, 19% of policies with a lifetime maximum benefit under $100,000 were lapsed in the first year, compared to 7% of policies with a lifetime benefit over $250,000. Also, voluntary lapses have decreased from 7.6% in 1984-1999 to 3.8 percent from 2005-2007.

**Inflation Protection**

Inflation protection is an important policy feature because the cost of long-term care has increased significantly over time. An individual who purchased LTCI in his or her 60s may not need benefits for 20 or more years. Without inflation protection, the value of the insurance benefits is likely to erode.

The best protection for buyers, especially those under age 70, is to purchase 5% automatic, compounded inflation protection. Even with this protection, a policy will cover, on average, just 70% of the estimated lifetime nursing home costs. It will, however, cover more than 90% of typical home care or assisted living costs. While most purchasers with incomes of $75,000 or more buy inflation protection (79%), fewer than half of buyers with incomes below $25,000 do so (38%).
Tax Treatment
Nearly all policies sold today meet federal standards for favorable tax treatment. Individuals covered by such policies are allowed to deduct their premiums, up to a maximum limit that increases with age. For example, in 2011 someone age 40 or younger could deduct $340 whereas taxpayers ages 71+ could deduct up to $4,240. However, to qualify, the taxpayer must itemize deductions and have medical costs in excess of 7.5% of “adjusted gross income” – a standard that relatively few taxpayers meet.

Written by Enid Kassner
AARP Public Policy Institute
601 E Street NW, Washington, DC 20049
(202) 434-3890 E-mail: ppi@aarp.org
www.aarp.org/ppi
"Long-Term Care Insurance: Is It Right for You (and Your Parents)"?

By: Jonathan D. Pond | Source: AARP.org | May 21, 2009

Most people have to think about buying long-term-care (LTC) insurance. Your parents may be considering it, whether they’re still working or retired. The purchase often presents the most nagging insurance question for people over 50. What’s more, LTC coverage may not be necessary or affordable.

Before buying, take the following into account:

- **Family status**: Consider the financial risk of incurring out-of-pocket expenses for long-term care: impoverishing a spouse, partner, or other financially dependent family member. Single people don’t face that risk, so all other things being equal, they have less need for LTC insurance.

- **Affordability**: Most LTC experts say the ideal candidates for long-term-care coverage are those who can comfortably afford the premiums and can handle premium increases, which are becoming quite common. Your general financial picture also determines how affordable LTC policies are for you. One common measure is net worth, excluding the home, or more simply, the amount of investments and savings you expect to have after you retire. People with less than $500,000 in investments might not be able to afford LTC coverage. Another more reliable measure of affordability is how much the insurance will cost as a percentage of your expected retirement income. If the premiums are likely to consume more than 10% of your income, you probably can’t afford the coverage. Singles with more than $1 million in investments, and married or partnered couples with more than $1.5 million in investments, may want to consider self-insuring. If this describes you, though, remember that a long stay in a nursing home or extended home-health care could whittle down even a large nest egg.

- **Family health history**: Not a perfect predictor, the health patterns of parents and grandparents can still indicate what the future may hold. If your parents experienced chronic health problems or other conditions that required prolonged care, this may argue in favor of an LTC policy.

- **Importance of passing on an inheritance**: If passing on an inheritance is important to you, a LTC policy could protect some of your assets for future generations.
Before Buying a Policy: A LTC policy can be an expensive, long-term investment. Consider the following:

Understand the limitations and features of the policy. Long-term-care insurance is aggressively sold. Many purchasers don't understand what they're getting—or not getting. Become an expert on long-term-care insurance before buying a policy. Its premiums could be one of your biggest retirement expenses. So make the most of your hard-earned dollars. If your employer offers LTC insurance, consider it. But while policies offered through an employer may be less expensive, the benefits may not be as comprehensive as you would like. Favor policies that provide comprehensive home healthcare coverage and coverage for nursing homes. Inflation protection is also an important feature, particularly for boomers who are considering this coverage.

Instead of buying long-term-care insurance, consider using the money you would pay in LTC premiums to invest in other ways. Think on this: According to a 2005 study published in the journal Inquiry titled "Long-Term Care Over an Uncertain Future: What Can Current Retirees Expect?," only 37% of all 65-year-olds will need long-term care in a nursing home or assisted-living facility. Most will stay less than two years.

You can cut premium costs by limiting the LTC policy to three years or less. However, if you spend much longer than that in a nursing home, you may impoverish yourself anyway. According to the study I mentioned, 8% of us will spend more than five years in a “nursing facility.”

If you're worried about nursing-home costs draining your resources, consider investing some of your retirement savings in an annuity. That assures you and/or a surviving spouse or partner a lifetime source of income that won’t be forfeited to the nursing home.

You may lower premium costs by eliminating all the expensive bells and whistles while keeping the inflation kicker. Lowering the daily reimbursement rate and increasing the waiting period until benefits kick in also lowers premiums. If you can only afford to insure one person, women are more likely to spend extended periods in nursing homes.

Factor-in the possibility that your LTC premium will increase. Many policyholders have had to endure premium increases of 50% or more in a single year. Those burdened by increasing premiums can pay the higher cost, pay the original premium by accepting scaled-back coverage, or let the policy lapse.

While you’re in the market for a new policy, ask the agent or the insurance company whether or not premiums on policies they’ve previously issued have gone up. If premium payments have increased, find out how much.

5.17 Cont’d
Instead of LTC, you or your parents could also think about continuing-care communities. These communities provide all levels of care—独立 living, assisted living, and nursing-home care. By choosing a continuing-care community, you may eliminate the need for an LTC policy.

**Buying a LTC Policy:** Keep in mind that the annual premiums for LTC coverage are much higher if you wait until your 60s or later to take out a policy. Few experts recommend purchasing coverage before age 50. After age 70, premiums may become prohibitively expensive.

While you'll pay lower premiums if you buy a policy at a younger age, keep in mind that you're likely to pay a long time before collecting benefits, if ever. The average age at which people enter nursing homes is 83.

On the other hand, a compelling argument for purchasing a policy at a younger age is that health issues could render you uninsurable at an older age. Buy an LTC policy at a younger age if any of the following apply:

- If your health is deteriorating
- If you engage in high-risk activities
- If your family has a history of early disability
- If your fear of the unexpected is robbing you of sleep, you may want to obtain coverage now rather than waiting. Also, decisions of equal importance are whether you can afford the premiums or are wealthy enough to self-insure.

Copyright 1995–2009, AARP.
Medicare and Medicaid are not Long Term Care

Most people assume that Medicare, the healthcare program for the elderly, or Medicaid, the government’s program for the poor, will pay for all their long-term care needs. Not so. Here’s a guide to what each plan covers.

**Medicare**

**Nursing homes**

*To qualify:* You have been hospitalized 3 days prior to needing skilled-nursing care, and a doctor certifies that you need it.

*Coverage includes:*
- Semiprivate room.
- Nursing services (not private duty).
- Supplies and equipment, and medicine furnished by facility.

*What is paid:* Skilled-nursing-facility expenses for 20 days. Then you are responsible for a copayment. The plan ceases payments after 100 days per benefit period. (A benefit period begins the first time you are hospitalized and ends only after you have been out of the hospital for 60 days.)

**Home care**

*To qualify:* You are homebound, under a doctor’s care, require skilled-nursing care, and require a part-time home-health-aide and medical services.

*Coverage includes:*
- Physical or speech therapy
- Home-health-aide services for bathing and dressing.
- Medical equipment.

*What is paid:* All medical services. Skilled-nursing and home-health-aide services for no more than 8 hours per day, or a maximum of 28 hours a week. Eighty percent of medical equipment such as hospital beds and walkers.

**Hospice care**

*To qualify:* A doctor certifies that you have 6 months or less to live.

*Coverage includes:* Two 90-day periods of care followed by an unlimited number of 60-day periods.

*What is paid:* All expenses for nursing and medical services, supplies, counseling, and home health and homemaker services in a Medicare-approved hospice. Drugs and bereavement costs. Five percent of the cost of outpatient drugs, up to $5 per prescription, may be charged.
Medicaid

Nursing homes

*To qualify:* You meet a state-determined poverty level and certain health-related criteria. Generally, you may keep only the house in which your spouse or dependent resides, the furniture, a car, a burial plot and funeral funds, and a small amount of cash.

*Coverage includes:* Room, board, nursing care, and social activities in the nursing facility.

*What is paid:* Room, board, nursing care, and social activities.

Source: Consumers Union of U.S. Inc.
**Elderly Pharmaceutical Insurance Coverage (EPIC) Program**

EPIC is a New York State program that helps seniors pay for their prescription drugs. More than a quarter million EPIC enrollees are saving an average of 90% of the cost of their medicines. Most enrollees have Medicare Part D or other drug coverage, and use EPIC to lower their drug costs even more by helping them pay the deductibles and co-payments required by their other drug plans. EPIC also helps members pay for Medicare Part D premiums.

**The Eligibility Requirements:** Must be a New York State resident 65 or older with an annual income under $35,000 (single) or $50,000 or less (married). Must join a Medicare Part D plan (with no exceptions) and not be receiving full Medicaid benefits.

**Medicare Part D Drug Plan Requirement:** EPIC members without other primary drug coverage are required to enroll in a Medicare Part D plan (with limited exceptions). If seniors do not already have Part D, EPIC will help them select and enroll in a basic Medicare plan based on their drug and pharmacy needs. Medicare provides primary drug coverage and EPIC coverage is secondary. Using the two plans together results in greater savings for drug costs that are not covered by Medicare (including deductibles, co-payments, coinsurance and coverage gap) and can be submitted to EPIC.

- EPIC pays the Medicare Part D premiums, up to the average monthly cost of a basic drug plan, for members in the Fee Plan.
- EPIC lowers the deductible for its Deductible Plan members to help pay for their monthly Medicare Part D premiums.

**Outcomes of EPIC used with other Prescription Drug Coverage (including Part D):** EPIC supplements other prescription coverage for greater benefits and savings. When purchasing prescription drugs, the enrollee shows both EPIC and other insurance cards at the pharmacy. Any drug costs that are not covered by the other prescription coverage, including deductibles, coinsurance/co-payments and coverage gap, can be submitted to EPIC. This results in the lowest possible copayment, and is often less than if EPIC or the other coverage is used alone. For example, if an EPIC enrollee also has other prescription drug coverage that requires a $25 co-payment on a brand-name drug that costs $100, the $25 copayment will be covered by EPIC and the enrollee would pay only a $7 EPIC co-payment. In this example, if the senior did not use EPIC, $25 would have been paid. If they used EPIC alone, they would have paid a $20 EPIC co-payment. By using both plans together, they paid a much lower co-payment!

**Senior Applications for Extra Help:** EPIC seniors who are income eligible for Extra Help from Medicare are required to complete a Request for Additional Information (RFAI) form (PDF, 231KB, 4pg) to enable EPIC to apply for this federal benefit on their behalf. The application for Extra Help will also be submitted to the NYS Medicaid program for eligibility in a MSP that provides additional benefits as well as LTS for approved members.

5.21 Cont’d
The EPIC System:
- Seniors with moderate incomes pay a low quarterly fee, and participate in the Fee Plan.
- Seniors with higher incomes must meet an annual deductible, and participate in the Deductible Plan.
- Those who pay a fee or those who met their deductibility copayment at the pharmacy when purchasing prescriptions.

Drugs Covered: Almost all prescription medicines are covered, as well as insulin, and insulin syringes and needles. Both brand and generic drugs are included.

Drug Quantity Allowances: Allowed Quantities depend on what Part D or other primary drug coverage the EPIC member has. The dispensing limits under the primary coverage apply. For members without Part D or other coverage, EPIC allows prescriptions up to a 30-day supply or 100 tablets or capsules, whichever is greater. For other drug forms (such as patches, liquids, creams, injectables) the maximum is also a 30-day supply.

Pharmacies Restrictions: Most pharmacies in New York State are enrolled as EPIC providers, allowing seniors full access to EPIC benefits. However, EPIC cannot be used at pharmacies located outside of New York State, including mail order pharmacies. When traveling outside New York State, enrollees should plan to have an adequate supply of their medications with them. They can also make arrangements with their pharmacy in New York to have their prescriptions mailed or delivered to them on a short-term basis or in emergency situations.

For more information: 1-800-332-3742 or epic@health.state.ny.us. For an application: http://www.health.state.ny.us/health_care/epic/application_contact
### New York State EPIC Prescription Protection for Seniors Application

#### PLEASE PRINT CLEARLY

<table>
<thead>
<tr>
<th>Who is applying?</th>
<th>☐ Yourself only</th>
<th>or</th>
<th>☐ Yourself and your spouse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your Last Name</td>
<td>First</td>
<td>Middle Initial</td>
<td>Social Security Number</td>
</tr>
<tr>
<td>c/o Name (if different from above)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mailing Address</td>
<td>Box # or Apt. #</td>
<td>Your Date of Birth</td>
<td></td>
</tr>
<tr>
<td>City</td>
<td>County</td>
<td>Zip</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Marital Status
- ☐ Widowed, Single or Divorced
- ☐ Married
- ☐ Married, Living Separately

#### Sex
- ☐ Female
- ☐ Male

#### Ethnic Information (Optional)
- ☐ White
- ☐ Black
- ☐ Hispanic
- ☐ Asian
- ☐ Native American
- ☐ Other

#### Spouse’s Last Name (if Living)
<table>
<thead>
<tr>
<th>First</th>
<th>Initial</th>
<th>Social Security Number</th>
</tr>
</thead>
</table>

#### Spouse’s Birthdate
- Month
- Day
- Year

#### Spouse’s Ethnic Information (Optional)
- ☐ White
- ☐ Black
- ☐ Hispanic
- ☐ Asian
- ☐ Native American
- ☐ Other

#### Do you have other insurance that covers prescriptions? ☐ Yes ☐ No
- If yes, name of other insurance __________________________

#### Does your spouse have other insurance that covers prescriptions? ☐ Yes ☐ No
- If yes, name of other insurance __________________________

#### Do you have Medicaid? (Not Medicare) ☐ Yes ☐ No
- If yes, do you have a Medicaid spenddown? ☐ Yes ☐ No
- Does your spouse have Medicaid? (Not Medicare) ☐ Yes ☐ No
- If yes, does your spouse have a Medicaid spenddown? ☐ Yes ☐ No

---

(Please turn over and fill in other side)

NEED HELP? CALL TOLL-FREE: 1-800-332-3742
NECESITA AYUDA? LLAME 1-800-332-3742

NON DMH 4109 5/12

---

5.23 Cont’d
Report your total income for the previous calendar year.

- If you are married, you must report the joint income of you and your spouse.
- Fill in each line. Where you did not have income, check the NONE box.
- Report all income including Social Security (without Medicare Premiums), pensions, interest from savings, IRA distributions, wages, etc. Multiply monthly amounts by 12 to get yearly income.
- Your income information may be verified with the Social Security Administration, the NYS Department of Taxation and Finance and others. We may ask for copies of documents that verify your income.

| 1. Social Security (without Medicare) and/or Railroad Retirement Benefits |
| YOUR YEARLY INCOME | NONE | SPouse's YEARLY INCOME | NONE |
| $___________ | ☐ | $___________ | ☐ |

| 2. Pensions and Annuities |
| $___________ | ☐ | $___________ | ☐ |

| 3. Other Income (Net Rental Income, IRA, Capital Gains, Wages, Business Income or Loss, etc.) |
| $___________ | ☐ | $___________ | ☐ |

| 4. Interest and Dividends |
| $___________ | ☐ | $___________ | ☐ |

| 5. TOTAL YEARLY INCOME (Add lines 1-4) |
| $___________ | $___________ |

Read carefully and sign below:

I certify that the information on this form is correct. I reside in New York State, and am not currently receiving Medicaid benefits. I know that I may be required to give proof of my age, income, residency and other pre-scription insurance. I know that I do not have to disclose my Social Security number; but if provided, it will be used to verify my eligibility under Article 19-K of the Executive Law. I consent to the exchange of all information necessary to verify my eligibility between EPIC and the Social Security Administration, NYS Medicaid Program, NYS Tax Department, private insurance companies and others. In the event of duplicate or overpayment by EPIC, I assign to EPIC any drug benefits that I may be entitled to under any other private insurance or governmental plan. I authorize my health care providers to release to the EPIC program my medical information pertaining to prescriptions to be used for authorized program purposes.

You or your representative must sign below:

Your signature ___________________________ Date ______________

Spouse's signature ___________________________ Date ______________

Mail this form with proof of age, and income documentation if available, to:

EPIC
P.O. Box 15018, Albany, NY 12212-5018

The information on this application is kept strictly confidential and is used only to determine your eligibility for EPIC.
**New York Rx Card**
*(Save Money on Prescription Drugs)*

As a resident of New York, you and your family have access to a FREE Prescription Drug Card program. Simply download and print a free "New York Rx Card" from:

http://www.newyorkrxcard.com

This program has the "LOWEST PRICE" logic to guarantee that you pay the lowest price for your prescriptions (you pay the lower of a discount off the Average Wholesale Price-AWP, a discount calculated off MAC Pricing, or the Pharmacy Promotional/Retail price). New York Rx Card is accepted at over 50,000 pharmacies around the country including Rye Beach Pharmacy and CVS.

The New York Card was developed by a non-profit organization and is made possible through the support of pharmacies and pharmaceutical companies. This program is not a government-sponsored program nor is it a Medicare Prescription Drug Plan. For more information call (877) 321-6755 or email: chez@newyorkrxcard.com. This plan is not insurance.

There are no enrollment forms, no restrictions, no age or income requirements, no waiting periods, no eligibility requirements, and covers pre-existing conditions, no claim forms, no annual limits, and includes generic and brand medications.

This program can be used by people who have Health Savings Accounts, High Deductible Plans and Medicare Part D on non-covered drugs.

No personal information is required to get a card. All New York residents are eligible to get pharmacy discounts through this program.
LEGAL & PROTECTIVE SERVICES

Legal Services.................................................................Page 6.1

Elder Abuse.................................................................Page 6.6

Adult Protective Services..............................................Page 6.8

What a Spouse Needs to Know.................................Page 6.9
(Also identifies four important documents everyone needs)

Identity Theft: How to Protect Yourself......................Page 6.10

The authors and sponsors of this directory make no guarantee (expressed or implied) as to the quality of any provider, and do not recommend or endorse any provider in particular. The full responsibility for choosing a provider rests with the Senior Citizen and his or her immediate advisers.
Legal Services

**Legal Services of the Hudson Valley**: This is a nonprofit organization funded in part by Westchester County, New York State, and the federal government. It provides free legal advice for low income elderly clients struggling with pressing non-criminal legal problems, such as bankruptcy, lockouts, evictions, utility cut-off, no food, Medicaid denial, benefits, unemployment, and divorce. Call (877) 574-8529

**Elderlaw Attorneys**: Specialize in legal issues of concern to seniors. Westchester County Department of Senior Programs has a list of lawyers known to have this specialization (page 6.5) but this listing should not be considered an endorsement.

**Westchester County Bar Association**: The Association offers a "Lawyer Referral Service" whereby residents may identify an attorney to address a legal matter. The Association can be reached from 10 a.m. to 4 p.m. at (914) 761-5151.

**The AARP Legal Services Network**: Publishes a directory of attorneys. This list is not a "lawyer referral service" or "prepaid legal plan." It is a complimentary member benefit for AARP members, their spouses/partners giving easy access to a large directory of attorneys. Where available these attorneys have agreed to provide specific services to AARP members, spouses/partners at discounted rates. The list highlights attorneys near or around Rye as shown on page 6.4. Attorneys from this AARP Network can address legal concerns of seniors from buying a home to making a will to addressing consumer issues. For full information on this network go to: [www.aarplsn.com/lsn/home.do](http://www.aarplsn.com/lsn/home.do) or call (866) 330-0753. This service offers (where available) an initial FREE consultation up to 45 minutes by phone or in the attorney's office. Other legal services are available at a 20% discount or at the attorney's usual and customary rates.

The initial meeting will be used by the attorney to ask questions, assess needs, and identify the options available. If the consultation extends beyond 45 minutes, the attorney can charge for the extra time. There is no obligation to retain the attorney after the initial 45 minutes. Seniors should come prepared with pertinent documents, questions, addresses and phone numbers, and/or a written history of events pertaining to the legal matter.

The Law Firm and each Associated Attorney will offer to each AARP member who seeks to retain it, a written fee agreement prior to initiating any legal services. This allows AARP members to understand their obligations as it relates to the attorney handling their legal issue once hired.
The Network has a directory of attorneys across the country by zip code. Below please find a list of attorneys in the directory within a few miles of Rye. For more information (866) 330-0753.

To reach a specific attorney, use the contact details beside his or her name below. Contact the attorney directly to schedule an appointment by telephone or e-mail to schedule an appointment. When you make your appointment with a Listed Attorney, notify them that you found them through the AARP Legal Services Network. If you are an AARP member, provide them your AARP membership number to ensure you are offered AARP member benefits. Come prepared and on time to your appointment and bring your AARP membership card. Ask your attorney for a written fee agreement if you intend to retain him/her.

AARP claims that each listed attorney must meet the following requirements:

- They must have been actively licensed to practice law for at least 3 years,
- They must remain in good standing to practice law in the state(s) in which they are licensed to practice law,
- They must carry minimum levels of malpractice insurance. The AARP Network requires that each attorney carry malpractice insurance in limits of at least $100,000 per claim and $300,000 per aggregate, and
- They must be engaged full time in the practice of law.

The Network is pleased to provide access to articles containing legal information provided by Nolo. Nolo is not affiliated in any way with AARP Legal Services Network, AARP Services, Signature Agency, Inc. or any of their affiliates. Neither the articles, nor the information contained in the articles, and shall not be deemed to constitute, financial or legal advice. Legal advice should only be provided by the attorney. The articles contain information about legal, financial, and practical issues for individuals and their families. And the information contained in these articles is not the same as receiving advice from a licensed professional. To access the articles, go to http://www.aarplsn.com/lsn/ui/jsp/legalInfo.jsp

6.3 Cont’d
Michael K. Getman, Law Offices of Michael K. Getman PLLC
(914) 837-4552
445 Hamilton Avenue (Suite 1102), White Plains, NY 10601
**Areas of Practice:** Elder Law, Estate Planning, Probate/Estate Administration, Small Business, Trusts, Wills

Robert A. Peirce & Associates
(914) 946-8200
8 Cottage Place, White Plains, NY 10601
**Areas of Practice:** Accident injury, Auto Accident, Insurance, Personal Injury, Probate/Estate Administration, Wills

Kenneth Busman, Kenneth Busman Attorney at Law
(914) 946-6555
175 Main Street (Suite 507), White Plains, NY 10601
**Areas of Practice:** Accident injury, Bankruptcy, Divorce/Separation, Family/Domestic, Negligence, Probate/Estate Administration

Ely J. Rosenzveig & Associates, P.C.
(914) 816-2900 Fax: (914) 617-21515
info@ejrosenlaw.com
50 Main Street (Suite 1275)
White Plains, NY 10606

6.4 Cont'd
**Additional Elder Law Attorney List**

<table>
<thead>
<tr>
<th>Name</th>
<th>Firm/Nickname</th>
<th>Address</th>
<th>City, State ZIP</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dean Bress</td>
<td>Bress Law Firm</td>
<td>399 Knollwood Road #107</td>
<td>White Plains, NY 10603</td>
<td>(914) 428-0770</td>
</tr>
<tr>
<td>Anthony J. Enea</td>
<td>Bashian, Enea &amp; Sirignano, LLP</td>
<td>245 Main St.</td>
<td>White Plains, NY 10601</td>
<td>(914) 948-1500</td>
</tr>
<tr>
<td>Scott Sherman</td>
<td></td>
<td>800 Westchester Avenue (Suite 641)</td>
<td>Rye Brook, NY 10573</td>
<td>(914) 481-8311</td>
</tr>
<tr>
<td>Penelope Morgan</td>
<td></td>
<td>75 South Highland Ave.</td>
<td>Ossining, NY 10562</td>
<td>(914) 941-2515</td>
</tr>
<tr>
<td>Neil T. Rimsky</td>
<td>Cuddy &amp; Feder</td>
<td>445 Hamilton Ave, 14th Floor</td>
<td>White Plains, NY 10601</td>
<td>(914) 761-1300</td>
</tr>
<tr>
<td>Steve Schurkman</td>
<td>Keane &amp; Beane Attorneys, PC</td>
<td>445 Hamilton Ave, 15th Floor</td>
<td>White Plains, NY 10601</td>
<td>(914) 946-4777</td>
</tr>
</tbody>
</table>

This list should not be considered an endorsement from the Westchester County Department of Senior Programs and Services. It serves only as a partial list of known attorneys specializing in elderlaw in Westchester. For other names, contact the Lawyer Referral Service of the Westchester County Bar Association at (914) 761-5151.

---

6.5
Elder Abuse

According to the best available estimates, between 1 and 2 million Americans age 65 or older have been injured, exploited, or otherwise mistreated physically; and up to 5 million abused financially by someone on whom they depended for care or protection. Estimates indicate that for every single case of elder abuse, neglect, exploitation, or self-neglect reported to authorities, about five go unreported.

Elder Abuse vs Financial Abuse: Hitting an older person, taking their money or ignoring a health problem are examples of elder abuse. It can happen to anyone be they smart and healthy seniors or those who are confused, frail and lonely. The abuser can be a caregiver - a wife caring for her husband, a son caring for his elderly mother, or a worker in a nursing home. Elder abuse can come from a friendly stranger on the telephone promising a free cruise or a neighbor who asks for cash to repair a leaky roof. Many people keep abuse a secret. Researchers estimate that for every one case that is reported, five are not. Victims often feel ashamed to report that a family member is hurting them, or embarrassed to admit they were tricked out of their money. And no caregiver wants to admit harming or neglecting someone they love. But elder abuse exists and it is on the rise. So it’s time to do something about it – learn about it, get help for it, report it and stop it.

Signs and Symptoms: Elder abuse is complex; there is no one cause. Most likely it’s a combination of psychological, physical, social and economic factors affecting both the victim and perpetrator. The New York State Office of Children and Family Services compiled the following lists:

- Substance abuse
- Unemployment
- Lack of knowledge of duties, resources, and/or services
- Stress, fatigue and/or dissatisfaction
- History of violence
- Psychological and/or physical impairments
- Poor impulse control
- Bruises, welts, fractures, rope burns, signs of hair pulling
- Unexplained STDs (sexually transmitted diseases)
- Signs of malnutrition/dehydration, weight loss or dry skin
- Soiled clothing or bed linens
- Unexpected or unexplained health problems
- Unexplained paranoia
- Excessive fear
- Insomnia, sleep deprivation, or need for excessive sleep
- Signs of excessive drugging or lack of medication

6.6 Cont’d
Sometimes elder abuse is not physical. In fact, the most insidious kind is financial. Financial abuse is the improper use of an adult's funds, property, or resources by another individual. This includes fraud, embezzlement, forgery, falsifying records, coerced property transfers, or denial of access to assets. Some indicators of financial abuse include:

- Unexplained or sudden inability to pay bills,
- Unexplained or sudden withdrawal of money from accounts, and
- Disparity between assets and living conditions.

Many people keep abuse a secret. Victims often feel ashamed to report that a family member is stealing from them or embarrassed to admit they were tricked out of their money by a stranger. Westchester seniors are encouraged to participate in a new program to prevent elder fraud and crime. Senior Crime Busters is designed to teach seniors and there are family ways to stay safe and avoid financial exploitation and other scams. The new outreach effort in Westchester brings officials from law enforcement, social service agencies, and non-profit organizations together to offer FREE presentations to senior groups. Anyone interested in bringing Senior Crime Busters to a group, or is seeking more information, should call (914) 995-2190.

**Where to Call for Help:** In cases of emergency, call 911 or the Rye Police Department at (914) 967-1234.

**Westchester County District Attorney's Office** (Special Prosecution's Division Elder Abuse Bureau) (914) 995-3000

**Westchester County Department of Social Services (DSS):** For seniors, contact Adult Protective Services at (914) 995-5411

**Westchester County Department of Senior Programs and Services:** This is the county's department that plans and provides agency services for seniors as well as the organizations that they fund. Call (914) 813-6300

**Elder Abuse Help Line:** Call (914) 813-6436

**Victims Assistance Services of Westchester, Inc:** Call (914) 345-3113

**ElderServe-The Hebrew Home for the Aged at Riverdale:** Operates a special sheltered protective program 24/7 to respond to abused seniors, providing a safe environment surrounded with professional staff, known as "ElderServe at Night". Call **(800) 567-3646.**

**The ElderServe Safe Center for Seniors:** There are other offices in White Plains (914) 365-1983 and Mount Vernon (914) 813-6436
Adult Protective Services

Protective Services for Adults (PSA) is a New York State-mandated program which is provided without regard to income to assist adults age 18 or older who, because of mental or physical impairment, 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.

Adult Protective Service Programs:

- Investigations,
- Assessments,
- Counseling,
- Case Management,
- Advocacy,
- Money Management,
- Housing Referrals,
- Crisis Intervention,
  - Short-Term Involuntary protective Service Orders (imminent risk of death or serious physical harm).
  - Admission to a Psychiatric Facility in conjunction with Mental Health Professionals and/or the police of a person at risk of harm to himself or others.
- Orders of Protection,
- Guardianship, and
- Petition the court when APS Supportive Services are not enough to ensure safety due to legal incompetence.

Additional Information:
Visit your Local Social Service Center in White Plains 9 AM to 5 PM Monday through Friday, except holidays, or call (914) 995-6522 during the workweek. For evenings (after 4:30 PM) and weekends call Emergency Services at (914) 995-2099.
What a Spouse Needs to Know

Financial Planners and estate attorneys suggest that each spouse have easy access to a letter with crucial financial information. That letter should be updated every year and should include:

* Indicates four important documents everyone should have.

**Bank Accounts**: List checking and savings accounts and name and location of bank or savings and loan. List T-bills, CDs. Know ahead of time your bank’s policy on joint accounts upon the death of a spouse.

**Insurance Policies**: List company, policy number, agent, location of life or health insurance policies.

**Safety Deposit boxes**: Location of safety deposit box, private vaults, home safe. Who has key, combination or passwords.

**Real Estate**: List real estate holdings and location of mortgages, deeds and documents.

**Car Titles**: Registrations, loan & lease arrangements.

**Will and Birth/Marriage Certificates**: Provide documentation locations.

**Corporate Benefits**: List pensions, profit sharing plans, 401(K) savings plans. Numbers, vesting rights, telephone number of corporate contact.

**IRAs, Mutual Funds and Securities**: Location and details of investments, individual retirement accounts, mutual fund and stock certificates and records, and stock brokers.

**Advisers**: Name and telephone number of attorney, accountant, financial planner, broker.

**Loans**: Amount and due dates. Name, address of lender.

**Tax Returns**: Location of state & federal tax returns for past five years.

**Health Care Proxy**: Location of documents authorizing the spouse or another party to make medical decisions if an individual is unable to do so.

**Living Will**: Indicate to what extent the individual wants or does not want life-sustaining measures implemented in the event of extreme medical emergencies.

**Power of Attorney**: Location of document authorizing the spouse or another party to make financial decisions and sign legal commitments documents, if the individual is unable to do so.
Identity Theft: How to Protect Yourself
(from the New York State Office of the Attorney General)

Theft of identity is when someone else uses personal identification information about you, for example, your social security number and date of birth, to apply for credit, open bank accounts or make unauthorized purchases. Theft of identity is fast becoming the most prevalent and costly financial crime in the nation. If someone has fraudulently obtained a credit card in your name, he/she may be ruining your credit and your reputation. Unfortunately, you may not find out until damage has been done; when you are rejected for a mortgage or a loan or denied an employment opportunity.

Tips to Protect Yourself

Never provide any personal, bank account or credit card information to anyone who contacts you through a telephone solicitation. Any reputable company would be happy to send you information about their product or service.

Be careful about to whom you give out personal identification information, such as your mother’s maiden name and your Social Security Number. Ask if it can be kept confidential. Inquire into how it will be used and with whom it will be shared.

Tear Up/Destroy all ATM and bank receipts, old insurance forms, bank checks, expired charge/credit cards, and any other papers that include personal information, identification, and account numbers about you.

This includes pre-approved credit card solicitations! Thieves oftentimes search through garbage to find these forms and information and use it to apply for credit in your name.

Keep items with personal information in a safe place. Keep a list of all credit cards, account numbers, expiration dates, and the customer service phone numbers in a secure place so that you can quickly contact your creditors in case your cards are lost or stolen.

Minimize the number of credit cards and other items with personal information printed on them that you carry. Cancel all inactive accounts. Even though you do not use them, those accounts appear on your credit report, which can be used by thieves.

Do not leave envelopes containing your checks in your home mailbox, unless they’re secured. Due to the increased risk of theft, it is best to mail bills and other sensitive items at the post office, rather than from your residence.
Social Security Number: Give it out only when necessary. Ask to use other types of identifiers when possible. DO NOT store your Social Security Card in your wallet.

When creating passwords or PINs, do not use the last four digits of your Social Security Number, your birth date, middle name, mother’s maiden name, address or anything else that could be discovered easily by thieves.

To decrease the number of credit card applications that you receive (and the chances of these applications being stolen) call (888) 5OPT-OUT or (888) 567-8688 to have your name removed from marketing lists sold by credit bureaus.

Monitoring your credit card statements and your credit report are the most important steps you can take to safeguard your credit identity. Under federal law, you are entitled to one free copy of your credit report from each of the three nationwide credit bureaus every 12 months. You may contact (877) 322-8228 or visit www.annualcreditreport.com to order your report. You can order your report from each of the companies one at a time. To order or purchase additional copies of your report, contact the following credit bureaus: Equifax - (800) 685-1111; Experian - (888) 397-3742, and Trans Union - (800) 916-8800.

Don’t let merchants record your credit card number on a check. It’s prohibited by law for them to require it. The same goes for traveler’s checks and money orders.

Consider placing a security freeze on your credit file to restrict access to your credit line and prevent an impostor from opening an account in your name.

For more information about identity theft contact the Attorney General’s Office at (800) 771-7755 or http://www.ag.ny.gov/bureaus/consumer_frauds/identity_theft.html

The web site has several pamphlets including one for victims of identity theft.
The authors and sponsors of this directory make no guarantee (expressed or implied) as to the quality of any provider, and do not recommend or endorse any provider in particular. The full responsibility for choosing a provider rests with the Senior Citizen and his or her immediate advisers.
Reverse Mortgages
Source: AARP Publications – see AARP’s web page for more information
(AARP does not endorse any reverse mortgage lender or product)

Until recently, there were two main ways to get cash from your home: (1) Sell your home, but then you would have to move; or (2) Borrow against your home, but then you would have to make monthly loan repayments. Now Reverse Mortgages give you a third way of getting money from your home. And you don't have to leave your home or make regular loan repayments.

A Reverse Mortgage is a loan against your home that you do not have to pay back for as long as you live there. It can be paid to you all at once, as a regular monthly advance, or at times and in amounts that you choose. You pay the money back plus interest when you die, sell your home, or permanently move out of your home.

Eligibility: All owners of the home must apply for the Reverse Mortgage and sign the loan papers. All borrowers must be at least 62 years of age for most Reverse Mortgages. Owners generally must occupy the home as a principal residence.

Single family one-unit dwellings are eligible properties for all Reverse Mortgages. Some programs also accept 2-4 unit owner-occupied dwellings, along with some condominiums, cooperatives, planned unit developments, and manufactured homes. Mobile homes are generally not eligible.

How They Work: Reverse Mortgage loans typically require no repayment for as long as you live in your home. But the money borrowed must be repaid in full, including all interest and other charges, when the last living borrower dies, sells the home, or permanently moves.

Because you make no monthly payments, the amount you owe grows larger over time. As your debt grows larger, the amount of cash you would have left after selling and paying off the loan (your "equity") generally grows smaller. But you generally cannot owe more than your home’s value is at the time the loan is repaid.

Reverse Mortgage borrowers continue to own their homes. So you are responsible for property taxes, insurance, and repairs or the loan is payable in full.

What You Get: These loans can be paid to you all at once in a single lump sum of cash, as a regular monthly loan advance or as a credit line that lets you decide how much cash to use and when to use it. Or you may choose any combination of these payment plans.

7.2  Cont’d
Some Reverse Mortgages are offered by state and local governments. These "public sector" loans generally must be used for specific purposes, such as paying for home repairs or property taxes. Others are offered by banks, mortgage companies, and savings associations. These "private sector" loans can be used for any purpose.

The amount of cash you can get from a private sector Reverse Mortgage generally depends on your age, your home's value and location, and the cost of the loan. The greatest cash amounts typically go to the oldest borrowers living in the most expensive homes on loans with the lowest costs.

The amount of cash you can get also depends on the specific Reverse Mortgage plan or program you select. The differences in available loan amounts can vary greatly from one plan to another. Most homeowners get the largest cash advances from the federally insured Home Equity Conversion Mortgage (HECM). HECM loans often provide much greater loan advances than other Reverse Mortgages.

**What You Pay:** The lowest cost Reverse Mortgages are offered by state and local governments. They generally have low or no loan fees, and the interest rates are typically low or moderate as well. Private sector Reverse Mortgages are very expensive, and include a variety of costs. An application fee usually includes the cost of an appraisal and a credit report. Other loan costs typically include an origination fee, closing costs, insurance, and a monthly servicing fee. These costs generally can be paid with loan advances, which mean they are added to your loan balance (the amount you owe). Interest is charged on all loan advances.

Reverse Mortgages are most expensive in the early years of the loan, and then become less costly over time. The cost can be very high in the short term, and is least costly if you live longer than your life expectancy. The federally insured HECM is generally less expensive than other private sector Reverse Mortgages. Consumers considering a private sector reverse mortgage other than a HECM should carefully consider how much more it may cost before applying.

**Other Information on HECM:** This is the most well-known and widely available Reverse Mortgage. This is the only Reverse Mortgage insured by the federal government. HECM loans are insured by the Federal Housing Administration (FHA). It tells HECM lenders how much they can lend you, based on your age, current interest rates and home value. The HECM program limits your loan costs, and the FHA guarantees that lenders will meet their obligations. HECM's are generally less expensive than privately insured Reverse Mortgages. These other Reverse Mortgages may have smaller fees, but they generally have higher interest rates. For HECM's, your home must meet HUD’s minimum property standards and you must discuss the program with a counselor from a HUD-approved counseling agency. Reverse Mortgages generally must be a “first” mortgages so if you now owe any money on your property, you must pay off the old debt when you take out your Reverse Mortgage.

7.3 Cont’
Lenders can require repayment at any time if you: (a) fail to keep your home insured, pay your property taxes or assessments, or maintain and repair your home, or (b) rent or change ownership of the house. The home value used to determine the loan amount was subject to a limit of $625,000 until December 2009. It could be higher or lower after that. The costs of a loan include an origination fee, third-party closing costs, a mortgage insurance premium, a servicing fee, and interest.

**Taxes, Estates, and Public Benefits:** Reverse Mortgages may have tax consequences, affecting eligibility for assistance under Federal and State programs, and have an impact on the estate and heirs of the homeowner. An American Bar Association guide states that generally "the IRS does not consider loan advances to be income." The guide explains that if you receive SSI, Medicaid, or other public benefit loan advances, they are counted as "liquid assets" and if you keep them in an account past the end of the calendar month in which you receive them, you could lose your eligibility for these programs if your total "liquid assets" (money you have in savings and checking accounts) are greater than these programs allow.

**Other important questions to keep in mind:** Do you really need a Reverse Mortgage? They may be an expensive way to raise money for a vacation or cost more than the return if the funds are used for investment. And another question is: (1) Can you afford a Reverse Mortgage because they have high upfront costs and are expensive, especially if you plan to stay in the house for a short period. (2) Can you afford to start using up your home equity now? The more you use now, the less you will have later for health care or everyday living expenses or a move to assisted living. If you are not facing a financial emergency now, then consider postponing a Reverse Mortgage.

If you have regular income and can afford monthly payments, do you have less costly options such as a standard “forward mortgage”, a home equity loan or line of credit. Or, do you have access to state, county or other assistance as an alternative.

**Comparisons with a standard “forward mortgage”:** Both types of mortgages create debt against your home and affect how much equity or ownership value you have in your home. But they do so in opposite ways. With a "forward mortgage”, you make monthly payments and have falling debt and rising equity. With a Reverse Mortgage, you have rising debt and falling equity, unless home values increase. When a Reverse Mortgage becomes payable because you sell, move, violate loan terms or die, you may owe a lot of money, up to the value of the house.
Contacts for Reverse Mortgages
(Counseling (Mandated before completing any transaction))

Westchester Residential Opportunities, Inc. (914) 428-4507 x313 (Contact Jane Lindau)

Lenders
A list of Reverse Mortgage lenders operating in New York State may be found at:

Bank of America Home Mortgage
170 Hamilton Avenue (#310), White Plains, NY 10601
(914) 397-2866

MetLife Home Loans
Jennifer M. Jalil, Reverse Mortgage Consultant,
707 Westchester Avenue. (#105), White Plains, NY 10604
565 Taxter Road. (Suite 630), Elmsford NY 10573
(914) 462-8978 or (914) 289-0652 or (800) 269-6797
Fax: (518) 953-1544
Email: jjalil@metlife.com
Website: www.mlbreversemortgage.com/jjalil

Webster Bank
Kathryn J. Freda, Reverse Mortgage Consultant
(800) 543-3375 Ext. 37294
Email: KFreda@WebsterBank.com

Wells Fargo Home Mortgage
50 Main Street, White Plains, NY
(914) 286-4911
Property Tax Exemption Programs

Partial exemption from school property taxes is available to persons over 65 who hold property in the City of Rye and reside on that property as their principal residence. These exemptions are available under the following programs. Exemption amounts depend on the program:

Residents approved for Real Property Tax Aged Exemption under Section 467 of the Real Property Tax Law (applicable to all property taxes):
- Eligibility is based upon an annual gross income under $37,400 (includes Social Security Income - as of 2010)
- Requires annual filing (renewals) and proof of age and income

Residents approved for "Enhanced" STAR (School Tax Relief exemption program)
- Eligibility is based upon an annual adjusted gross income under $83,300 (as of 2014)
- Requires annual filing (renewals) and proof of age and income

Residents approved for "Basic" STAR
- Requires a one-time filing
- There is NO age requirement

To qualify for these programs, complete the application forms; and various documents must be submitted to the office of the Assessor of the City of Rye. The application process must be complete by May 1st to be eligible for the coming year.

For full information on these programs and the necessary application forms, please contact the City of Rye Assessor’s Office at 1051 Boston Post Road in Rye or (914) 967-7565.
Income Tax Preparation
Offered by AARP Tax-Aide
People Helping People

Is available from February 1st to April 15th each year* at over a dozen locations in Westchester:

Port Chester Public Library
1 Haseco Avenue, Port Chester, NY 10573
Thursday 10 a.m. - 12 noon, and 1 p.m. - 3 p.m.

New Rochelle Public Library
1 Library Plaza, New Rochelle, NY 10801
Tuesday & Thursday 10 a.m. - 3 p.m.

White Plains Senior Center
65 Mitchell Place – Armory Plaza, White Plains, NY 10601
Monday – Thursday 10 a.m. - 3 p.m., and Friday 1 p.m. - 4 p.m.

Theodore D. Young Community Center
32 Manhattan Avenue, White Plains, NY 10607
Friday & Saturday 10 a.m. - 2 p.m.

Verify timing/locations in subsequent years by calling (888) 227-7669

AARP membership is not required. Please bring the following:

- Copy of last year’s federal & state income tax returns
- W-2 forms showing income from your employer
- 1099-R forms showing pension or annuity income
- SSA-1099 forms showing Social Security benefits
- 1099-Div, -INT, -G, -MISC, -OID forms showing dividends, interest, NYS tax refund, gambling income, etc.
- Any other information concerning your income and deductions
- Photo ID and Social Security / ITIN cards.
Finding Help with Investment Planning

Advice on finding help with investment planning can be found from a number of sources. Here are extracts from a few articles from four different sources that can be both helpful and less likely to have an axe to grind. Each source has more related information and more articles available on their internet web pages.

Finding an Investment Professional: Investing wisely doesn't require an advanced degree, but it takes time to master the basics of investing and to stay on top of your accounts over time. The challenge is to identify a financial professional who is a good match with your situation — someone with experience, integrity and a working style that makes you comfortable. Here are some things to keep in mind.

1. **Ask your friends and family for referrals.** The best recommendation for a financial professional is a personal one. If someone you know and trust is willing to recommend a financial professional, that's a check in the plus column. Look for recommendations from someone whose life circumstances are similar to yours.

2. **Consider more than one name.** You're hiring the chief financial officer of your investment plan. Interview at least two or three candidates before you make a decision. Come prepared with a list of questions about the candidates professional experience and credentials and investment philosophy. Ask the candidate to describe his or her "average" client.

3. **Ask about education, experience and specific training.** Unlike a physician or a teacher, there's no easy way to determine whether a financial professional has adequate training or education. In fact, anyone can use the title "financial advisor" without training, education or experience. However, most financial professionals seek to demonstrate their expertise by gaining one or more of the following designations:
   - **Certified Financial Planner (CFP®)** - Requires years of training and testing on financial subjects, continuing education to update knowledge and adherence to a prescribed code of ethics.
   - **Chartered Financial Consultant (ChFC®).** An insurance professional who has completed courses on financial subjects and continues to update knowledge through additional coursework and testing.
   - **Chartered Financial Analyst (CFA®).** Must pass three rigorous exams, have at least three years of experience and commit to a code of ethics and professional standards of conduct. Continuing education is voluntary.
   - **Registered Investment Adviser (RIA®).** Indicates that the adviser has registered with the SEC or with their state securities board (depending on the amount of money they manage).
   - There are numerous additional designations, indicating specialties in estate planning, divorce, personal financial planning, insurance, retirement and others.

7.8 Cont'd
4. **Ask about compensation.** Some financial professionals charge a percent of assets under management, which may go down as the size of your account goes up. Others charge a flat fee or an hourly fee. Some managers are compensated based on the products they sell you. And some professionals have more than one way to charge, depending on the service they provide. Ask for a clear statement as to where compensation comes from and how you will pay. Don't hire anyone who is not clear and forthcoming on this question.

**U.S. Securities & Exchange Commission**

Choosing Between Investment Advisers & Financial Planners
http://www.sec.gov/investor/pubs/invadvisers.htm

Most financial planners are investment advisers, but not all investment advisers are financial planners. Some financial planners assess every aspect of your financial life—including saving, investments, insurance, taxes, retirement, and estate planning—and help you develop a detailed strategy or financial plan for meeting all your financial goals.

Others call themselves financial planners, but they may only be able to recommend that you invest in a narrow range of products, and sometimes products that aren't securities.

Before you hire any financial professional, you should know exactly what services you need, what services the professional can deliver, any limitations on what they can recommend, what services you're paying for, how much those services cost, and how the adviser or planner gets paid.

Be sure to meet potential advisers "face to face" to make sure you get along. And remember: there are many types of individuals who can help you develop a personal financial plan and manage your hard–earned money. The most important thing is that you know your financial goals, have a plan in place, and check out the professional you chose with your securities regulator.

Depending on their size, investment advisers have to register with either the SEC or the state securities agency where they have their principal place of business. For the most part, investment advisers who manage $25 million or more in client assets must register with the SEC. If they manage less than $25 million, they must register with the state securities agency in the state where they have their principal place of business.

Most investment advisers must fill out a form called "Form ADV." They must file their Form ADVs with either the SEC or the state securities agency in the state where they have their principal place of business, depending on the amount of assets they manage.
You can get copies of Form ADV from the investment adviser, your state securities regulator or the SEC, depending on the size of the adviser. If the SEC registers the investment adviser, you can get a copy of the Form ADV by accessing How to Request Public Documents.

If the professional you're considering claims to be a CFP® certificant, you should also visit the website of the Certified Financial Planner Board of Standards, Inc. (CFB Board) to see if the professional is, in fact, certified as a CFP® professional and whether the professional's certification has been suspended or revoked by the CFP Board. You can also call the CFP Board at (888) 237-6275 to obtain other disciplinary information about the professional.

While some investment advisers and financial planners have credentials -- such as CFP® certification or CFA (chartered financial analyst) -- no state or federal law requires these credentials. Many states require advisers to pass a proficiency exam or meet other requirements.

Investment advisers and financial planners may come from many different educational and professional backgrounds. Before you hire a financial professional, be sure to ask about their background. If they have a credential, ask them what it means and what they had to do to earn it.

For information on various financial professional credentials and the entities that issue them, please visit FINRA's website and read Understanding Financial Professional Designations.

**Consumer Federation of America**

**What are the Differences in Providers' Legal Obligations?**

http://www.consumerfed.org/

Investment services providers not only offer different types of services and charge for them differently, they also are subject to different federal and state regulatory requirements and have different legal obligations to their customers. Important distinctions depend on which legal category the provider falls into under our securities laws.

**Investment advisers:** Are subject to a fiduciary duty. That means they have to put your interests ahead of theirs at all times by providing advice and recommending investments that they view as being the best for you. Investment advisers also are required to provide up-front disclosures about their qualifications, what services they provide, how they are compensated, possible conflicts of interest, and whether they have any record of disciplinary actions against them.

**Brokers:** Are generally not considered to have a fiduciary duty to customers, although this standard may apply in certain limited circumstances. Instead, brokers are required: 1) to know your financial situation well enough to understand your financial needs, and 2) to recommend investments that are suitable for you based on that knowledge.
**Financial planners:** Are not separately regulated as planners. Instead, their regulation and the level of responsibility they owe customers depends on the type of services they provide. Planners who provide investment advice must be registered or licensed as investment advisers and are subject to a fiduciary duty. Those who trade securities must be registered or licensed representatives or brokers. Some financial planners perform other activities that do not involve securities and therefore are not regulated under laws.

**Public Media**

Responsible newspapers and broadcasters, directly or from their web pages, can often be a source of useful advice. For example, the New York Times “Your Money” section under the following website: [www.nytimes.com/pages/your-money/index.html?src=busfn](http://www.nytimes.com/pages/your-money/index.html?src=busfn) covers a range of topics. And the L.A. Times has the following article on point at: [www.latimes.com/business/la-fi-montalk-20100801,0,4379197.column](http://www.latimes.com/business/la-fi-montalk-20100801,0,4379197.column)

**Money advice: Finding trustworthy financial advisors**

By Liz Pulliam Weston, Money Talk, Los Angeles Times August 1, 2010

[You need] at least three advisors to handle [a large amount to investment] i.e., a financial planner, an accountant and an estate-planning attorney. You can get referrals for fee-only financial planners - who are compensated only by fees their clients pay and not by commissions or kickbacks - from the National Association of Personal Financial Advisors at [http://www.napfa.org](http://www.napfa.org) or the Garrett Planning Network at [http://www.garrettplanningnetwork.com](http://www.garrettplanningnetwork.com).

You should interview at least three prospects about their education, ethical commitment and experience advising people who acquire sudden wealth. Check out their backgrounds using the Broker Check feature at the Financial Industry Regulatory Authority website (FINRA.org). Garrett advisors typically charge by the hour and often don't manage assets - the client makes the actual investments. NAPFA advisors typically do offer asset management and may charge a percentage of assets.

One way to reduce the chances of becoming a Ponzi scheme victim is to make sure your money is held by an independent financial institution such as a bank, brokerage or mutual fund and that your statements come from that institution. You also should find out who audits your advisor and do a background check on that company as well.
Checking Medigap & Long Term Care Insurers
Call the New York State Insurance Dept. at (800) 342-3736 or (212) 480-6400 M-F 8:30-4:30

Aged ALL (Property Tax Savings)
- Seniors 65+ with income under $36,400 can fill out one application to get city, county and school tax reductions or call.
- Rye tax assessor’s office at (914) 967-7565 or (914) 939-3566

Property Tax Credit for Homeowners & Renters (Circuit BreakerIT-214)
- Tax credits or cash payment of up to $375 to eligible homeowners and renters. For homeowners with property value assessed up to $85,000 or renters with monthly rents of $450 or less. Household income under $18,000
- Find the application at www.tax.state.ny.us/pdf/2005/inc/it214i_2005.pdf or Call Westchester Residential Opportunities, Inc. (914) 428-4507

Food Stamps
- Eligible low income individuals will receive debit cards with an allotted dollar amount to be spent on food items.
- Food Stamp Program, Westchester County Department of Social Services (914) 995-5846 or (914) 995-4774 or (914) 995-3333

Home Energy Assistance Program
- Assists low-income New Yorkers with the cost of heating their homes November/April. An additional grant may be awarded for emergencies & shut offs. Income limits in the 2009/2010 winter were: 1 person: $2,030/month; 2 persons: $2,654/month.
- Department of Social Services (914) 995-5619 (available after mid-September) or go to www.otba.state.ny.us

Minor Home Repair Program
- In conjunction with weatherization (see below), this program provides eligible 60+ seniors or disabled homeowners with free minor repair of items that can improve energy savings. These include but are not limited to: minor repair of roofs, plumbing, water heaters or window repair where there is energy loss. Recent income limits were: 1 person: $2,030/month; and 2 persons: $2,654/month.
- County Department of Senior Programs (914) 813-6300
The Bureau of Prescription Drugs Help

A private organization that provides financial aid and advice, and help purchasing medication, for those who have exhausted all other sources. P.O. Box 515, Doniphan, MO 63935 (573)996-7300

Senior Citizen Rent Increase Exemption (SCRIE)
- Tenants 62+ may qualify for full or partial exemption from rent increases in rent-regulated apartments. Local communities set exemption allowance amounts. For rent that is more than 1/3 of household income.
- State Rent Abatement Program, (914) 948-4434 (Forms & Info Only) Westchester Residential Opportunities, Inc. (914) 428-4507 or 428-0953 or (914) 428-4507, extension 313 (Jane Lindau)
- For additional information, call the Office for Senior Programs and Services at (914) 813-6300

Social Security Benefits
- Monthly cash benefit based on prior employment and amount withheld from earnings during employment years. No income limits.
- Local Social Security Office (85 Harrison St, New Rochelle) or (800) 772-1213

Supplemental Security Income (SSI)
- Provides monthly cash benefits to meet food, clothing or shelter needs. The benefit amount depends on other income, whether person lives alone, with others, in another’s household or in a residential facility, and what financial resources the person has. Income limits involve a number of complex adjustments but start with: Living alone: single -$694; Couple - $1,031
- Local Social Security Office (85 Harrison St, New Rochelle) or (800) 772-1213

Veterans Benefits
- Provides pensions, medical care and prescription drugs, vocational rehabilitation, education, home loans, burial and other benefits.
- County Veterans Service Agency (914) 995-2146 or (914) 995-2145

Weatherization
- Helps eligible low income 60+ seniors and disabled homeowners make their home energy efficient. Income limits: 1 person: $2,030/month; and 2 persons: $2,654/month
- County Department. of Senior Programs and Services (914) 813-6300

7.13
Housing for Seniors in Westchester

Introduction..............................................................................................Page 8.2

Westchester Residential Opportunities Inc. &
Affordable & Subsidized Rental Housing................................. Page 8.4

Other Residential Options for Seniors.................................................Page 8.8

Partial Directory of..............................................................................Page 8.9
Assisted Living & Residential Care
Independent Living & Retirement Communities
Nursing Care & Rehabilitation
Continuing Care Retirement Communities (CCRC) & Multilevel Care Facilities

The authors and sponsors of this directory make no guarantee (expressed or implied) as to
the quality of any provider, and do not recommend or endorse any provider in particular.
The full responsibility for choosing a provider rests with the Senior Citizen and his or her
immediate advisers.
Housing Introduction

There is a wide variety of housing designed for senior citizens available in Westchester. They include subsidized housing, assisted living facilities, residential health care facilities, life care communities, continuing care retirement communities, retirement residences and more. Comprehensive information on many alternatives may be found by referring to the county's “Housing and Energy” web page - [http://seniorcitizens.westchestergov.com/](http://seniorcitizens.westchestergov.com/) and click on “Housing” in the yellow bar at the top or by calling (914) 813-6300. The county’s “At the Crossroads” directory is available on the web page or by calling (914) 813-6300. The directory covers residential and health care facility options, adult homes, assisted living, enriched housing and retirement residences.

Also available on the web page or by calling 813-6300 is “Westchester Senior Housing Sites,” a listing of subsidized housing alternatives with information on financial and rental assistance that is available. A list of subsidized rental apartment buildings in or near Rye is shown on page 8.8 below. The list includes Rye Manor sponsored by Rye Interfaith Housing. Information on Rye Manor can be found by calling Roberta Fox at (914) 592-5434 or (914) 967-5023.

The federal government sets income limits, based on the size of a household, to qualify for the county’s subsidized housing programs. The income Limits for 2010 for Rye Manor are $36,650 (Tier 1) or $52,950 (Tier 2) for one person and $41,900 (Tier 1) or $60,500 (Tier 2) for two persons. Rent is usually 30% of household incomes. Arrangements and limits available elsewhere are similar but can vary. To participate outside of Rye, one must apply for a “Section 8 Housing Choice Voucher” by calling the county’s Section 8 program at (914) 995-2415. There are waiting lists for the programs.

As for other options for seniors, go to page 8.9 for a list of nearby assisted living facilities, independent & retirement living facilities, nursing care and rehabilitation facilities and continuing care retirement communities. The list includes The Osborn in Rye with facilities for independent living, assisted living, skilled nursing, short-term rehabilitation and home health care. Information on The Osborn can be found at [www.theosborn.org](http://www.theosborn.org) or by calling (914) 921-2200.
The New York State Attorney General’s Office provides two guides in this area - one outlining legal issues of special interest to seniors as owners or renters and the other outlining the rights of tenants with the following information:

**Housing Guides for Seniors:** For seniors as tenants, homeowners or purchasers, this guide addresses such key issues as age discrimination, harassment, Senior Citizen Rent Increase Exemption (SCRIE), alternative housing, in-home assistance, financial assistance, help with electric and gas utilities, and help with telephone service.

**Tenant’s Rights Guide:** For tenants, an explanation of leases, rent, habitability requirements, safety issues, utility services, and tenants’ personal protections.

The guides may be had by contacting the AGO’s office at (800) 771-7755 or (914) 422-8755 or at www.oag.state.ny.us
WRO & Affordable Housing

**Mission**: Westchester Residential Opportunities, Inc. (WRO) is a nonprofit organization whose mission is to promote equal, affordable and accessible housing opportunities for all residents of our region.

Founded in 1968 as a nonprofit housing agency, WRO champions the expansion of nondiscriminatory housing opportunities for low- and moderate-income people in Westchester County, minorities, senior citizens, and the psychiatrically disabled.

WRO is a HUD-certified Housing Counseling agency, a licensed real estate broker, and a United Way agency. All of WRO’s housing services for consumers are free, and are funded by government grants, private contributions, and corporate support.

WRO collaborated with other agencies to reach individuals who can benefit from its services. WRO works with Realtors, managing agents, and landlords to ensure that fair housing laws are followed as well as with banks and other lenders to ensure that fair lending procedures are practiced.

(914) 428-4507 Fax: (914) 428-9455 www.wroinc.org
470 Mamaroneck Avenue, White Plains, NY 10605

**Programs**

**Senior Housing Assistance Program**: The program provides counseling services to clients on a one-to-one basis for seniors who

- Experience housing emergencies such as rent or security shortfalls, mortgage payments problems, moving expenses and termination of utility services;
- Want to apply for subsidized housing and obtain legal entitlements, such as the New York State Senior Citizen Rent Exemption Program, the New York State Real Property Tax Credit or Rebate Program, the Home Energy Assistance Program, as well as many other federal, state, and local programs and entitlements.
- Would like to obtain Section 8 rental subsidies and additional support when applying for assistance from other social services or government agencies.

**Project SHARE**: Helps with renting a room in your house or apartment to earn extra dollars, have companionship, and link up with someone to share chores and shopping. Project SHARE has over the years brought together over 600 older homeowners or apartment dwellers with congenial renters of various ages.
Reverse Equity Mortgage Program

WRO counsels homeowners 62 years of age or older who may benefit from a Reverse Equity Mortgage. - see Section 5. A reverse mortgage allows you to borrow against the accumulated equity in your home, and make no payments while you live in the house.

Senior Housing
seniorhousing@wroinc.org
(914) 428-4507 Ext. 312
Contact Esperanza Marte-Pina

Independent Living Program: WRO’s Independent Living Program assists clients who are psychiatrically disabled with housing issues, both assisting clients with Section 8 vouchers to locate decent, affordable housing, and case management services to clients who have yet to obtain a Section 8 voucher. To apply, the client should speak to a counselor to schedule an appointment in his/her office.

Shelter Plus Care Program: This program provides a housing subsidy similar to Section 8. Clients in this program sublease apartments from WRO for 30% of their monthly income. WRO also provides case management for clients in this program. To qualify for this program, clients must be homeless and psychiatrically disabled.

Supported Housing Program: This program functions in the same manner as the Shelter Plus Care Program, with the exception that clients do not have to be homeless to qualify.

Single Room Occupancy Program: The SRO is a nine-room home with twenty-four hour staff. It has the same admission process and requirements as Supported Housing. Residents of the SRO have their own rooms, and share a kitchen and bathroom with three other clients of the same sex. The SRO is ideal for clients who are almost ready to live on their own but still benefit from having a staff member available to them at all times.

Independent Living Program
lbundy@wroinc.org
(914) 428-4507 Ext. 310
1st Time Home Buyer Counseling and Education Programs

WRO's homeownership counseling can prepare individuals to buy a home. WRO is a HUD-approved housing agency offering counseling to potential homebuyers. WRO's home buying program is designed to assist potential buyers review their overall household's financial situation and prepare for homeownership. Workshops offered by WRO's Homeownership Program cover topics ranging from credit & budgeting, to learning who the key players in the home buying process are. The workshops offered by WRO cover all areas of the home buying process while providing you the opportunity to see samples of important documents and address a range of questions. WRO is a Fair Housing agency. (914) 428-4507 x306 Fax: (914) 428-9455 Contact Marlene Zarfes, Fair Housing Director at mzarfes@wroinc.org

General Housing Program
This program deals with the following issues:
- Homelessness, Eviction Prevention Shut-off Prevention
- Mortgage Default Counseling on landlord-tenant problems
- General Housing Program Fair Housing for All
(914) 428-4507 ext. 305 housinghelp@wroinc.org

Rental Opportunities
WRO provides information on available rentals and vacancy listings throughout Westchester, and provides information about applying for Section 8 and subsidized rental housing.
To request the most "current" apartment listing, please contact:

Maureen Davis
(914) 428-4507 Ext. 301
mdavis@wroinc.org

Delores Palmer:
914-428-4507 Ext. 305
housinghelp@wroinc.org

8.6
Subsidized Senior Housing Rentals

There are some six dozen buildings with subsidized senior housing rentals available in Westchester. Complete lists are available from WRO and on Westchester Dept. of Senior Services web pages. They include the following in or near Rye:

**Mamaroneck**

Mamaroneck Towers
233 Halstead Avenue Mamaroneck, NY 10543
Managed by Community Housing Management Corp.
5 West Main Street, Suite 214 Elmsford, NY 10523
(914) 592-5434

**Port Chester**

Brooksville Terrace
167&169 Terrace Avenue
Port Chester, NY 10573

Kingsport
245 King Street
Port Chester, NY 10573
Managed by Community Housing Management Corp.
5 West Main Street – Suite 214
Elmsford, New York 10523
(914) 592-5434

Drew Gardens
10 & 22 Drew Street
Port Chester, NY 10573
Managed by Port Chester Housing Authority
2 Weber Drive
Port Chester, NY 10573
(914) 937-5550

**Rye**

Rye Manor
300 Theall Road Rye, NY 10580
Managed by Community Housing Management Corp.
(914) 592-5434
5 West Main Street – Suite 214
Elmsford, NY 10523
Other Residential Options for Seniors

Assisted Living
Assisted Living is senior housing designed for those who are no longer able to live safely on their own, but who don’t require the high level of care provided in a nursing home. Assisted living facilities are licensed by state governments and known by many different names including Residential Care, Board and Care, Congregate Care and Personal Care.

Independent & Retirement Living
Independent living is the ability to maintain one's residence and lifestyle without custodial or medical assistance. Independent living options range from fully furnished private apartments or cottages to large two-three bedroom units that are available on a buy-in, rental-assisted or market-rate basis depending on the community. Social activities and fine-dining meals are often available and residents can select the services they want, often at an additional fee. Generally referred to as elder housing in the government-subsidized environment. If custodial or medical care becomes necessary, residents in independent living communities are often permitted to bring in outside services of their choice.

Nursing Care & Rehabilitation
A Nursing Home is a licensed facility that is staffed with 24-hour onsite nursing professionals for the care of the frail residents who require a high level of medical care and assistance. Short-term rehabilitative care can include such therapies as intensive physical, occupational or speech therapy in order to restore a patient to a former capacity.

Continuing Care Retirement Communities & Multilevel Care Facilities
Includes facilities or a campus offering more than one level of care including independent living as well as skilled and nursing care. Also known as Lifetree centers.

Lists of these types of facilities may be obtained from the Westchester County, either in their “At the Crossroads Directory” by calling at (813) 6300 or through the following web page: http://seniorcitizens.westchestergov.com/ and click on “Housing” in the yellow bar at the top. The web page has the directory as well as a ‘senior housing locator’. The attached list of facilities near Rye was assembled from the ‘senior housing locator’.
### Assisted Living & Residential Care (PARTIAL)

<table>
<thead>
<tr>
<th>Service Provider</th>
<th>Address</th>
<th>City, State ZIP Code</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Osborn</td>
<td>101 Theall Road</td>
<td>Rye, NY 10580</td>
<td>(914) 921-2200</td>
</tr>
<tr>
<td>The Osborn at Sterling Park</td>
<td>103 Theall Road</td>
<td>Rye, NY 10580</td>
<td>(914) 925-8000</td>
</tr>
<tr>
<td>Sunnydale Home</td>
<td>809 Stuart Avenue</td>
<td>Mamaroneck, NY 10543</td>
<td>(914) 698-2824</td>
</tr>
<tr>
<td>Merry Go Round, Inc.</td>
<td>1/2 Bolling Place</td>
<td>Greenwich, CT 06830</td>
<td>(203) 869-9448</td>
</tr>
<tr>
<td>The Esplanade, White Plains</td>
<td>95 South Broadway</td>
<td>White Plains, NY 10601</td>
<td>(914) 761-8100</td>
</tr>
<tr>
<td>King Street Home, Inc.</td>
<td>787 King Street</td>
<td>Rye Brook, NY 10573-1225</td>
<td>(914) 937-5800</td>
</tr>
<tr>
<td>Sarah Neuman Center for Healthcare and Rehabilitation</td>
<td>845 Palmer Avenue</td>
<td>Mamaroneck, NY 10543-2406</td>
<td>(914) 698-6005</td>
</tr>
<tr>
<td>Willow Towers EHP</td>
<td>355 Pelham Road</td>
<td>New Rochelle, NY 10805</td>
<td>(914) 636-6565</td>
</tr>
<tr>
<td>The Greens at Greenwich</td>
<td>1155 King Street</td>
<td>Greenwich, CT 06831-3246</td>
<td>(203) 531-5500</td>
</tr>
</tbody>
</table>

### Independent Living & Retirement Communities (PARTIAL)

<table>
<thead>
<tr>
<th>Service Provider</th>
<th>Address</th>
<th>City, State ZIP Code</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Osborn at Sterling Park</td>
<td>103 Theall Road</td>
<td>Rye, NY 10580</td>
<td>(914) 925-8000</td>
</tr>
<tr>
<td>Atria Rye Brook</td>
<td>1200 King Street</td>
<td>Rye Brook, NY 10573</td>
<td>(914) 939-2900</td>
</tr>
<tr>
<td>Garito Manor</td>
<td>180 Union Avenue</td>
<td>New Rochelle, NY 10801</td>
<td>(914) 636-4200</td>
</tr>
<tr>
<td>Edgehill Health Center</td>
<td>122 Palms Hill Road</td>
<td>Stamford, CT 06902</td>
<td>(203) 323-2323</td>
</tr>
<tr>
<td>Pilgrim Towers</td>
<td>25 Washington Court</td>
<td>Stamford, CT 06902</td>
<td>(203) 324-2327</td>
</tr>
</tbody>
</table>

### Nursing Care & Rehabilitation (PARTIAL)

<table>
<thead>
<tr>
<th>Service Provider</th>
<th>Address</th>
<th>City, State ZIP Code</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Osborn</td>
<td>101 Theall Road</td>
<td>Rye, NY 10580</td>
<td>(914) 967-4100</td>
</tr>
<tr>
<td>Port Chester Nursing &amp; Rehabilitation Center</td>
<td>1000 High Street</td>
<td>Port Chester, NY 10573</td>
<td>(914) 937-1200</td>
</tr>
<tr>
<td>King Street Home Inc.</td>
<td>787 King Street</td>
<td>Port Chester, NY 10573</td>
<td>(914) 937-5800</td>
</tr>
</tbody>
</table>
Sarah Neuman Center for Healthcare and Rehabilitation
845 Palmer Avenue
Mamaroneck, NY 10543
(914) 698-6005

White Plains Center for Nursing Care LLC
220 W Post Road
White Plains, NY 10606
(914) 686-8880

Greenwich Woods Health Care Center
1165 King Street
Greenwich, CT 06831
(203) 531-1335

Connecticut Health of Greenwich
1188 King Street
Greenwich, CT 06831
(203) 531-8300

Continuing Care Retirement Communities (CCRC) & Multi-Level Care Facilities

The Osborn*
101 Theall Road
Rye, NY 10580
(914) 967-4100
Transportation Services

Taxi Voucher Program for Seniors...........................................Page 9.2

Rye Taxi Fares, Regulations & Companies.................................Page 9.3

Recreation Department Medical/Shopping/Event Trips ...Page 9.6

ParaTransit for the Disabled.......................................................Page 9.7

Bee Line Bus Routes for Westchester..............................call (914) 813-7777
Bus & NYC Subway Fare Discounts..........................call (914) 813-6300
Senior reduced fares are available on Bee Line for riders at least 65 years of age with a Medicare Card, a Westchester County Senior ID (call (914) 813-6300 for information) or a personalized Reduced Fare MetroCard (1-800-638-7622 for information). The Reduced Fare MetroCard allows riders who are at least 65 to pay only $1.10 per ride on NYC local buses and subways.

Metro North Commuter Railroad.................................(845) 373-4333

Driving Education & Rehabilitation Program......................Page 3.17

The authors and sponsors of this directory make no guarantee (expressed or implied) as to the quality of any provider, and do not recommend or endorse any provider in particular. The full responsibility for choosing a provider rests with the Senior Citizen and his or her immediate advisers.
Taxi Voucher Program

The Taxi Vouchers provide eligible Rye seniors with $4.00 toward each taxi ride. Recipients may receive up to 15 vouchers each month.

The voucher program is available to those who meet any one of the following eligibility tests:

1. Residents of Rye Manor (the means tested senior housing apartment building on Theall Road),
2. Residents approved for Real Property Tax Aged Exemption under Section 467 of the Real Property Tax Law.,
3. Residents participating in the Enhanced STAR program. (Information about the Enhanced STAR program may be found in Section 7 of this Directory), and
4. Means tested seniors identified by their houses of worship.

To see if you are eligible, obtain information and receive vouchers, please contact the Committee member, listed below, who is active on the Rye Interfaith Housing Corp. (RIHC).

- Carolyn Cunningham at (914) 835-1988

RIHC is able to provide taxi vouchers to eligible seniors through a grant program financed by funds from the Westchester Department of Senior Programs & Services, the U.S. Department of Health & Human Services, the New York State Office for the Aging, with matching funds provided by RIHC and other local contributors.

All taxis with licenses to operate in Rye must accept one voucher when offered in partial payment for a trip. The taxis must accept each voucher at its face value. The taxis are reimbursed by RIHC through the City of Rye Finance Department for the vouchers they accept. Report complaints to Taxi Voucher Committee.
Rye Taxi Fares, Regulations, Zone Map & Companies

**Taxicab zones**: The following taxicab Zones A to C are established as shown on the annexed map on page 9.5. Fares within each zone are as follows:

<table>
<thead>
<tr>
<th>Zone</th>
<th>Fare</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>$4.00</td>
</tr>
<tr>
<td>B</td>
<td>$5.00</td>
</tr>
<tr>
<td>C</td>
<td>$5.50</td>
</tr>
</tbody>
</table>

Maximum fares to or from railroad station. The maximum fares for taxicabs between the railroad station and points within the taxicab zones shall be as follows:

<table>
<thead>
<tr>
<th>Route</th>
<th>Maximum Fare</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Railroad Station and Points in Zone A</td>
<td>$4.00</td>
</tr>
<tr>
<td>Between Railroad Station and Points in Zone B</td>
<td>$5.00</td>
</tr>
<tr>
<td>Between Railroad Station and Points in Zone C</td>
<td>$5.50</td>
</tr>
</tbody>
</table>

Maximum fares between points other than to or from railroad station.

The maximum fare:

- Between points within Zone A (other than the railroad station) shall be the regular fare of Zone A, plus $0.50;
- Between points within other zones or between other zones shall be the regular fare of the highest zone involved, plus $0.50.

Minimum fare on Saturdays, Sundays and holidays shall be $4, and on other days between 12:00 midnight and 6:00 a.m. it shall be $5.

**Additional passengers**: Each additional passenger coming from the same location as the passenger first engaging the taxicab and going to the same destination shall pay $2.

**Single passengers**: Any single passenger who shall insist upon riding alone to the exclusion of other passengers waiting at the point of origin may be charged two whole fares.
**Children**: Children under six years of age, when accompanied by an adult, shall not be charged.

**Rates per hour**: Shall be as follows: Service Fee for waiting time, shopping within the city, touring, etc. $30

**Prepayment of fare**: Every driver of a taxicab shall have the right to demand payment of the legal fare in advance and may refuse service unless prepaid, but no driver of a taxicab shall otherwise refuse or neglect to convey any orderly person or persons upon request anywhere in the City unless previously engaged or unable to do so.

**Disputed fares**: All disputes as to fares shall be determined by the officer in charge at the police station, and failure to comply with such determination shall be a violation of this chapter and punishable as hereinafter provided. Whenever a passenger asks for a receipt, it shall be given to him/her by the driver. Such receipts shall state the name of the driver, the name of the owner of the taxicab, the number of the taxicab, the time when the trip began and ended and the amount of fare collected.

**Overcharging**: No driver shall charge or attempt to charge any person a greater rate of fare than that to which the taxicab is entitled under the provisions of this city law.

**Rye Taxi Cab Companies**

County Taxi & Airport Svc. (914) 967-9111  
Purchase St. Taxi (914) 967-5000  
Rye Brook Taxi & Airport Service. (914) 967-5656  
Rye Cab (914) 967-0500  
Rye Taxi (914) 967-0150  
Rye Metro Taxi (914) 921-0666 or (914) 967-0555  
Westchester Taxi (914) 967-8261
The Rye Senior Citizen Program is organized by the Rye Recreation Department and offers limited transportation for members to meetings, shopping trips, medical visits and special events. The Rye Senior Citizen program is open to all Rye residents age 60 and over. Membership dues is $10 per year, September to August (see Page 1.2). Non-members may register for trips and special events after it has been first opened to the membership; and these individuals will pay an additional fee as space permits.

Rye Recreation has its own Senior bus which seats 12/13 persons. On Mondays, the bus is used for visits to doctors’ offices by club members but the bus cannot wait. It is a "drop off" service only. The bus also takes seniors for scheduled weekly grocery trips to local supermarkets, like the A&P and Pathmark. It is also for special Thursday shopping trips or outings (for a fare of $4). On Wednesdays the bus picks up members who don't drive to bring them to the weekly Seniors meeting at the Damiano Recreation Center.

Dates, prices, registration processes, etc. for trips are announced in seasonal Rye Recreation brochures and in Trip-Related flyers and/or at the membership meetings. For information, call (914) 967-2535 or visit www.ryeny.gov/recreation.cfm.
Para-Transit System for the Disabled

ParaTransit is available from the county Bee-Line bus service for people with a disability. Disability alone does not qualify a person to ride. A person must be functionally unable to use the fixed-route, regular Bee-Line service. ParaTransit service is provided to the following general groups of persons with disabilities:

1. Persons who have specific impairment-related conditions which make it impossible — not just difficult — to travel to or from the bus stop.
2. Persons who need a wheelchair lift-equipped bus, but it is not available on the fixed-route when they need to travel.
3. Persons who are unable to board, ride or exit from the regular Bee-Line buses even if they are able to get to a bus stop and the bus is equipped with a wheelchair lift.

Temporary eligibility may apply to individuals with temporary physical disabilities, or visually as well as cognitively impaired individuals.

The cost of each Bee-Line ParaTransit ride is a shared ride service for $4/ride; and appointments must be made from one day to 5 days in advance. Since it is a curb-to-curb service, no assistance is provided to individuals between the door of their starting point or destination; and Para Transit vehicles do not go into driveways or parking lots.

Para Transit does not provide service to any area outside of Westchester County. Although ParaTransit currently provides some services beyond those required under ADA, the goal in the future is for ParaTransit service to more closely “mirror” regular Bee-Line bus service.

All ParaTransit riders can travel within Westchester County during Core Service Hours, Monday through Friday from 6 a.m. to 7 p.m.; on Saturdays from 8 a.m. to 7 p.m. ParaTransit is only required to provide service if both the starting point and destination of a trip are located within 3/4 mile of a regular Bee-Line bus route and only during hours when that regular Bee-Line bus route is in service. Some ParaTransit riders whose trips begin and end within the 3/4 mile limit can travel during additional service hours, Mondays through Fridays, 7 p.m. to 11 p.m., Saturdays from 6 a.m. to 8 a.m. and 7 p.m. to 11 p.m. & Sundays from 8 a.m. to 8 p.m.

For ParaTransit applications or information, please call (914) 995-2956 or (914) 995-2960 or (914) 995-7393 (TTY only) or write to the Westchester County Office for the Disabled Attn.: ParaTransit, 148 Martine Avenue, Room 102, White Plains, NY 10601
Additional Information Resources

Helpful Information.................................................................................................Part 10.2

Private Professionals Practitioners.................................................................Part 10.3
Helpful Information

**Dial 211:** This easy-to-dial 2-1-1 number is a free and confidential helpline that easily links people to the services they need. People can call about everything from basic needs like food, clothing and shelter, to volunteer opportunities, legal services, drug treatment, employment support, eldercare and more.

**Westchester County Department of Senior Programs and Services:** Provides numerous services & publications on various subjects, including services, benefits and savings for Senior Citizens. (914) 813-6300 or [http://www.westchestergov.com/seniors.htm](http://www.westchestergov.com/seniors.htm)

**Westchester County Department of Social Services:** They are concerned with citizens in need of assistance and services by providing child support, financial, food, housing, medical and protective services. (914) 995-5000 or [http://socialservices.westchestergov.com/](http://socialservices.westchestergov.com/)

**Elder Care Locator:** This is a public service of the U.S. Administration on Aging. It helps find local agencies that can help older persons access home and community-based services like transportation, meals, home care, and caregiver support services. (800) 677-1116 or [www.eldercare.gov](http://www.eldercare.gov)

**New York State Office of Attorney General (OAG)** For information on guarding against scams such as telemarketing, mail sweepstakes, predatory lending, identity theft, bogus charities, protecting savings & medical scams call (800) 771-7755 or [http://www.oag.state.ny.us](http://www.oag.state.ny.us)

**AARP:** A nonprofit membership organization that helps people 50+ improve the quality of their lives through advocacy, community service, products & services. [http://www.aarp.org](http://www.aarp.org) or 1-888-OUR-AARP

**Consumer Federation of America:** Gives consumers a voice in decisions that affect their lives. Gathers facts, analyzes issues, & disseminates information to the public & policymakers. [http://www.consumerfed.org](http://www.consumerfed.org)

**Westchester Jewish Community Services:** A wide range of senior services including bereavement, caregiver network, case management, geriatric care, meals, counseling and services for the disabled. (914) 761-0600, Ext. 340 or jfink@wjcs.com or [www.wjcs.com](http://www.wjcs.com)
PRIVATE PROFESSIONAL PRACTITIONERS

Geriatric Care Managers: These are licensed professionals practitioners who work in the field of the aging on issues that are imperatively important to seniors and/or their families. The practitioners are involved in counseling related to life experiences and determining the proper application of professional assistance needed to resolve presenting problems. Comprehensive Care Plans are developed in preparation for identifying the appropriate levels of care, ideally, keeping the seniors in their homes for the duration of their life experiences. Some of these individuals are:

Linda Ziac, LPDC, LACDC, BCPC, CEAP, CCM, CDP, CSW, President
The Caregiver Resource Center (Provides services in client's home or place of residence)
(203) 861-9833 (business & fax)
LindaZiac@CaregiverResourceCenter.com (e-mail)
www.CaregiverResourceCenter.com (website)
P.O. Box 122222
Cos Cob, CT 06807

The Caregiver Resource Center, serving the community since 1990. It is a division of Employee Assistance Professionals, Inc., and provides a spectrum of case management and advocacy services for individuals, families and businesses. Ms. Ziac has more than 40 years of experience in health and mental fields as a licensed professional counselor who assist seniors, people with special needs, and families.

Joseph P. Murphy, LCSW
J.P. GROUP
(914) 643-7813 & Fax: (914) 967-7456
DE-Mail: josephmurphy4@verizon.net
Website: WestchesterElderCareConsulting.com
57 Franklin Avenue, Rye, NY 10580

Joe Murphy, a licensed clinical social worker has been in private practice for more than 35 years, working with seniors in nursing homes and other health related facilities. He also developed new initiatives for seniors, like co-founding the Rye Senior Advocacy Committee in the City of Rye; and has been designed the Senior Advocate providing case management initiatives to achieve safe independence for seniors in their own homes. He is particularly skilled in handling complex cases and fostering financial alternatives to sustain medical services and Medicaid.

Physical Therapists: PT's are licensed health care professionals who diagnose and treat individuals with medical or other health-related conditions that limit their abilities to move and perform functional activities in their daily lives. PT's examine each individual and develop a plan, using

10.3
Cont'd
treatment techniques to promote the ability to move, reduce pain, restore function and balance, and prevent disability. In addition, PTs work to prevent the loss of mobility before it occurs by developing fitness and wellness-oriented programs for healthier and more active lifestyles. Working with a PT can help you maintain and promote optimal physical function, resulting from injury or disease, enabling you to achieve the quality of life you desire.

Dr. Stacey Rittenberg, PT, DPT, NCS
(914) 522-7997, Fax: (914) 560-2302
E-Mail Address: s.rittenbergpt@gmail.com
Website: www.westchesterhomept.com
27 Leslie Place, New Rochelle, NY 10804
Stacey Rittenberg is a licensed physical therapist who brings over 17 years of clinical expertise to you! Since 2006, Stacey has been providing home physical therapy and wellness services to adults and seniors in Westchester County. The convenience of in-home PT and wellness services allows for personalized one-to-one care in the comfort of your home. Her philosophy considers the whole person—mind, body, and spirit to ensure your personal best is achieved. She worked with various patient populations including but not limited to individuals with amputations, cancer, cardiopulmonary disease, diabetes, neurologic conditions, orthopedic injuries, osteoporosis, and vestibular disorders.

Stacey earned her undergraduate degree in Biology from SUNY Oswego in 1995. She went on to obtain her Masters in Physical Therapy from Nova Southeastern University in 1997. She returned to Nova Southeastern where she earned her Doctorate of Physical Therapy degree, graduating with the highest honors in 2013.