



A guide to **Assisted Living**

This guide offers an introduction to assisted living, including amenities, timeline considerations, and cost-offsetting benefits.

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Understanding Assisted Living

Hundreds of thousands of seniors currently call an assisted living community their home. But, like everyone, seniors want to preserve their independence.

Assisted living communities are designed for seniors who need help with activities of daily living (ADLs), such as bathing, grooming, dressing, medication management, and toileting.

These communities are perfect for social and active seniors who don't require intensive medical care and want to maintain their independence.

These communities offer a comfortable home-like setting where residents can choose apartments and receive the necessary assistance to maintain a high quality of life. Assistance may range from medication management to toileting, bathing, dressing, and meal preparation.

Because each resident is different, assisted living is not one size fits all.

Assisted Living vs. Nursing Home

Assisted living is a social support system rather than a medical facility. Unlike nursing homes, which operate under a medical model regulated by the federal government, assisted living is governed by state regulations.

In assisted living, residents maintain independence while receiving assistance with daily activities. This contrasts with nursing homes, where decisions about residents' health are typically made by medical staff.

Assisted living aims to provide support without confining residents, allowing them to maintain autonomy and have a voice in their care.

The social model and medical model represent different approaches to senior living, each with its own benefits.

Assisted Living:

- **Emphasis on Quality of Life:** Assisted living focuses on promoting social interaction, engagement, and overall well-being. It prioritizes the emotional, social, and psychological needs of seniors.
- **Community Integration:** Seniors are encouraged to participate in group activities, events, and outings, fostering a sense of belonging and reducing feelings of isolation.
- **Empowerment:** Assisted living empowers seniors to maintain independence for as long as possible, providing support and assistance as needed without undermining their autonomy.
- **Preventative Care:** By promoting healthy lifestyle choices, social connections, and mental stimulation, assisted living can help prevent or delay the onset of certain health conditions.

Nursing Homes:

- **Focus on Health and Safety:** Nursing homes prioritize healthcare services, medical interventions, and safety measures to address seniors' physical health needs.
- **Specialized Care:** It provides access to skilled nursing care, rehabilitation services, and medical professionals to manage chronic conditions and acute illnesses effectively.
- **Diagnostic and Treatment:** Nursing homes employ a clinical approach to identify, diagnose, and treat medical issues promptly, aiming to improve seniors' overall health outcomes.
- **Coordination of Care:** It involves collaboration among healthcare providers, specialists, and caregivers to ensure seniors receive comprehensive and coordinated care.



Activities of Daily Living

Assisted living communities are for seniors whose health or well-being require a higher level of support. This is determined through a community health assessment in accordance with state regulations.

While each community is different, assisted living offers services and amenities that focus on essential aspects of wellness. These include physical safety and health, intellectual stimulation, and social connection.

These three foundational pillars help slow cognitive decline and keep seniors healthier and happier longer.

Understanding ADLs/IADLs

Two frequently used terms when assessing assisted living are ADL (activities of daily living) and IADL (instrumental activities of daily living).

ADLs are related to activities like bathing, dressing, toileting (going to the bathroom), transferring (the ability to get in and out of bed), and continence (being able to control your bladder).

IADLs are related to paying the bills, cleaning the house, cooking food for yourself, transporting yourself outside of the house, and socializing.

Most assisted living communities will assess the ADL/IADLs of seniors contemplating assisted living to ensure they can meet their care needs.

A self-assessment is included in this guide.

When is the right time to evaluate assisted living?

There are general warning signs and hints that it may be time for assisted living.

Many of these signs are directly related to the activities of daily living discussed on the previous page and can be explained medically. That could be because the senior being assessed is depressed or has something more severe, like dementia or cancer.

For example, weight loss could indicate not getting adequate nutrition.

Unpaid bills may mean they don't have the cognitive ability to understand numbers like they once could. Without filling out an ADL chart, what signs may indicate it's time to seek professional help regarding your loved one's living situation?



1. Worsening Medical Conditions

As seniors age, the likelihood of developing a chronic medical condition escalates. AARP reported that more than 70 million people (aged 50 and older) have at least one chronic medical condition. These can be debilitating issues like Alzheimer's disease or heart disease.

As seniors with these conditions age, they are less capable of caring for themselves and require more medical attention. Outside of chronic conditions, the potential for medical emergencies increases with age. If your loved one indicates that they have fallen and struggled to get up on more than one occasion, it's not safe for them to be living on their own.

(Nearly one-third of seniors fall at least once a year, and the death rate for falls has climbed steadily in the past decade.)



2. Monetary Issues

Many aging seniors need help keeping up with all their financial responsibilities. Bills from banks and insurance brokers can pile up because seniors either don't have the motivation or funds to pay them.

Diseases like dementia affect seniors' ability to think abstractly and handle numbers on a complex level. This can cause challenges with taxes or managing multiple bills at once.



3. Isolation

Isolation is a serious problem that can affect a senior's health. According to the U.S. Census Bureau, more than 11 million seniors live alone. When seniors isolate themselves, they decrease how often they participate in things like hobbies, social interactions with family and friends, or simply the amount of time they leave the house.

Some health issues associated with isolation include depression, addiction, and mortality.



4. Messy Living Space

A messy and odorous living space can indicate that a senior cannot or should not live independently anymore.

This is often because seniors may struggle with physical tasks like vacuuming, washing dishes, or even loading the dishwasher.

It's also important that you look at the food your loved one is eating. Open up the fridge and look around. Is there spoiled food stacked on top of spoiled food? Is food past its expiration date? Is there a lot of the same food (such as leftovers of the same meals from the same restaurant)?

All these may be signs that your loved one 1) can't cook for him or herself anymore and 2) isn't eating healthy food or full meals, which causes a general unhealthiness.



5. Poor Hygiene and Frailty

Reduced motivation can signal it's time for assisted living, even if the individual can still manage self-care to some degree.

Some signs of poor hygiene include messy grooming habits and a foul body odor, which could indicate they aren't bathing as often as they should or doing laundry. That can also mean they're starting to lack the ability to care for themselves.



6. Medication Management

Errors in medication management can pose a significant danger for seniors. The CDC estimates that 350,000 people are hospitalized each year due to misuse of prescriptions.



ADL/IADL Self Assessment

Below is an example of an ADL/IADL self-assessment. It is not meant to be used as an official evaluation but to highlight potential areas of concern.

For each category below, write “1” if you can complete the task independently or “0” if you require assistance. The higher the score, the more independent a resident can live. If a senior scores a 5 out of 6 on the model, they have a relatively easy time completing essential functions of life. But if a senior scores 1 or 2 out of 6, they need more care and attentiveness and, thus, will need a more hands-on level of senior care.

Activities (Points 1 or 0)	Independence (1 Point) NO supervision, direction, or personal assistance.	Dependence (0 Points) WITH supervision, direction, personal assistance, or total care.
Bathing Points: _____	(1 Point) Bathes self completely or needs help in bathing only a single part of the body such as the back, genital area, or disabled extremity.	(0 Points) Needs help with bathing more than one part of the body and getting in or out of the tub or shower. Requires total bathing.
Dressing Points: _____	(1 Point) Can get clothes from closets and drawers and puts on clothing and outer garments complete with fasteners. May need help tying shoes.	(0 Points) Needs help with dressing self or needs to be completely dressed.
Toileting Points: _____	(1 Point) Goes to the toilet, gets on and off, arranges clothes, cleans genital area without help.	(0 Points) Needs help transferring to the toilet, cleaning self, or using a bedpan or commode.
Transferring Points: _____	(1 Point) Moves in and out of bed or chair unassisted. Mechanical transfer aids are acceptable.	(0 Points) Needs help in moving from bed to chair or requires a complete transfer.
Continence Points: _____	(1 Point) Exercises complete self-control over urination and defecation.	(0 Points) Is partially or totally incontinent of bowel or bladder.
Feeding Points: _____	(1 Point) Gets food from a plate into the mouth without help. Preparation of food may be done by another person.	(0 Points) Needs partial or total help with feeding or requires parenteral feeding.

Total Points: _____

Scoring: 6 = High (Independent)

0 = Low (Very Dependent)

Insurance & Benefits

When it comes to paying for assisted living, many options are available depending on the community.

There are many different approaches to pricing and payment options for assisted living. Some communities offer Medicaid waivers, elderly waivers, and other government-subsidized options immediately. Others may not provide those options until a resident has privately paid for assisted living services for two years.

Most of Immanuel's assisted living communities do not accept Medicaid or elderly waivers (except Immanuel Courtyard and Trinity Village.)



While considering assisted living, many families and retirees do not know some of their options to help make the monthly fees more affordable.



Veteran's Benefits

The Veteran's Pension program provides monthly payments to wartime veterans or surviving spouses who meet certain age or disability requirements and have an income and net worth within certain limits. Your net worth includes all personal property you own (except your house, car, and most home furnishings) minus any debt you owe and is also combined with your spouse's net worth.

You may be eligible for the Veterans Pension program if you meet these requirements:

Both of these must be true:

- You received an honorable discharge from the service.
- Your yearly family income and net worth meet certain limits set by Congress.

And at least one of these must be true about your service:

- You started on active duty before September 8, 1980, and you served at least 90 days on active duty with at least one day during wartime.
- You started on active duty as an enlisted person after September 7, 1980, and served at least 24 months or the full period for which you were called or ordered to active duty (with some exceptions) with at least one day during wartime.
- You were an officer and started on active duty after October 16, 1981, and you hadn't previously served on active duty for at least 24 months.

And at least one of these must be true:

- You're at least 65 years old.
- You have a permanent and total disability.
- You're a patient in long-term care because of a disability.
- You're getting Social Security Disability Insurance or Supplemental Security Income.

For qualifying veterans or surviving spouses needing assisted living, the VA's "Aid and Attendance Benefit and Housebound Allowance" program can provide monthly dollars to offset the expense of care.

The Retirement Living Consultant at each of Immanuel's communities can assist you in evaluating your eligibility.

Long-Term Care Insurance

Long-term care refers to a host of services not covered by regular health insurance. This includes assistance with routine daily activities, like bathing, dressing, or getting in and out of bed.

Long-term care insurance covers costs for chronic medical conditions, disabilities, or disorders like Alzheimer's. Policies typically reimburse for care at home, in nursing homes, assisted living facilities, or adult day care centers.

Under most long-term care policies, you're eligible for benefits when you can't do at least two out of six "activities of daily living," called ADLs, on your own or you suffer from dementia or other cognitive impairment.

When you need care and want to make a claim, the insurance company will review medical documents from your doctor and may send a nurse to do an evaluation. Before approving a claim, the insurer must approve your plan of care.

Under most policies, you'll have to pay for long-term care services out-of-pocket for a certain amount of time, such as 30, 60, and 90 days, before the insurer reimburses you for any care. This is called the "elimination period."



The policy starts paying out after you're eligible for benefits and usually after you receive paid care for that period. Most policies pay up to a daily limit for care until you reach the lifetime maximum.

Some companies offer a shared care option for couples when both spouses buy policies. This lets you share the total amount of coverage so you can draw from your spouse's pool of benefits if you reach the limit on your policy.

Most long-term care policies have a maximum amount of monthly and lifetime capped benefits. This means that the policy may help cover some or all of the expenses of assisted living for a time but will one day cease when the lifetime benefit threshold is met. Additionally, the benefit alone may not cover the total monthly fees for assisted living.

The Retirement Living Consultant at Immanuel's Communities can help you evaluate your long-term care policy and understand your benefits.





Tailored Living Options

Our Retirement Living Consultants have helped thousands of families find the choice that's right for them. Schedule your free consultation today and we can help you break through the confusion to start living your best years yet.

By Phone: **402-507-4899** Online: **[Immanuel.com](https://www.immanuel.com)**

Glossary of Terms

Activities of Daily Living (ADL): ADLs are routine activities that individuals typically do every day without assistance. These include bathing, dressing, grooming, eating, mobility, and toileting.

Assisted Living: Assisted living provides personalized support and assistance with ADLs, while also promoting independence and maintaining a sense of community and purpose.

Elderly Waiver: An Elderly Waiver is a Medicaid program that provides long-term care services to seniors who wish to remain in their homes or communities instead of moving to a nursing home.

Elimination Period: The elimination period is the period of time between when a person becomes eligible for long-term care benefits and when the benefits actually begin.

Health Assessment: A health assessment is an evaluation of an individual's physical and mental health status, often conducted by healthcare professionals to determine care needs and develop personalized care plans.

Instrumental Activities of Daily Living (IADL): IADLs are activities that are not essential for basic functioning but are necessary for maintaining independence in daily life. These include tasks such as meal preparation, housekeeping, managing finances, and transportation.

Long-Term Care: Long-term care encompasses a range of services and supports designed to meet the needs of individuals with chronic illnesses, disabilities, or other conditions that require ongoing assistance with ADLs and/or medical care.

Veteran's Pension Program: The Veteran's Pension Program provides financial assistance to wartime veterans and their surviving spouses who meet certain income and asset criteria, helping them afford long-term care services and support.



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