



Caroleann Burr, D.A.B.F.E.

1712 Whittier Avenue, Costa Mesa, CA 92627
(949) 646-2071 Fax (949) 650-4540

LONG TERM CARE ©

Long Term Care is the inability to perform the activities of daily living without assistance

WHAT ACTIVITY - ACTIVITIES OF DAILY LIVING

BATHING - washing oneself by sponge bath or in a tub or shower

DRESSING - choosing your clothes, tying shoes etc.

TOILETING - getting to, from, on, and off of the toilet and performing the associated personal hygiene

CONTINENCE - maintain control of bowel and bladder function

TRANSFERRING - AMBULATE the ability to move into or out of bed, a chair or the ability to walk around inside or outside of the home

EATING - feeding oneself by getting the food in the body from a plate, cup or table

IMPAIRMENT OF COGNITIVE ABILITY - a person needs substantial supervision due to severe cognitive impairment or injury



Caroleann Burr, D.A.B.F.E.

1712 Whittier Avenue, Costa Mesa, CA 92627
(949) 646-2071 Fax (949) 650-4540

EVOLUTION OF LONG TERM CARE HABITAT©

- **CHILDHOOD** live in parents home
- **Adulthood** partners home
- **OLDER ADULT** - board & care (assisted living),
Personal residence or nursing home

PAYING FOR LONG TERM CARE \$\$\$

- Self insure
- Die before the need
- Live with children
- Apply for government benefits
- Transfer cost to insurance company

INSURANCE

- Indemnity policy
- Specific Disease
- Group or individual insurance policy
- Medi-Gap or HMO
- Government Benefits – Medi-Cal (Medicaid in other states)
- California Partnership policy
- Long term Care insurance policy



Caroleann Burr, D.A.B.F.E.

1712 Whittier Avenue, Costa Mesa, CA 92627
(949) 646-2071 Fax (949) 650-4540

LONG TERM CARE INSURANCE ©

- Type of policy determines your premium

COMPREHENSIVE POLICY INCLUDES

- Residential Care
- Home care
- Adult day care; adult day health care
- Respite care
- Nursing home care

CA PARTNERSHIP FOR LONG TERM CARE

- Protection of assets for benefit paid

Factors determining your premium

- Elimination period; 0-20 day or more no benefits paid
- Waiver of premium: first day of coverage or upon receipt of facility care
- Non forfeiture benefit- -reduced coverage when premiums not paid
- Spousal riders
- Return of premium



Caroleann Burr, D.A.B.F.E.

1712 Whittier Avenue, Costa Mesa, CA 92627
(949) 646-2071 Fax (949) 650-4540

BENEFIT AMOUNTS ©

- Nursing facility maximum daily rate (\$50 - \$500 per day)
- CA Partnership (\$110-\$500)
- Residential Care Facility of daily rate to 100% of the nursing home benefit
- Home & community based care up to 100% of the nursing facility benefit
- Length of coverage; 1 year, up to lifetime (5 years recommended)
- Clarify how lifetime payment is determined

Major Factors Determining your premium

- Inflation protection
- Annual simple benefit increase – 5% every 3rd year
- Annual compounded benefit increases 5%
- Caution; UNDERSTAND THE INFLATION PROTECTION THESE ARE INDEMNITY POLICIES
- Indemnity daily rate you are purchasing

Other considerations

- Reliability of company – policy rating (Moody, Best)
- Policy health underwritten – age limit, pre-existing conditions
- 30 day free look
- Claim notices
- Who will file your claim?
- Care management
- Outline of coverage

LIFE CARE CONTRACTS

- Certificate – authority from Department of Social Services
- No certification then subject to Long Term Care chapter of insurance code



CAROLE ANN BURR, D.A.B.F.E

Forensic Examiner - Consultant

1712 Whittier Avenue
Costa Mesa, CA 92627-4509

Email: CaroleAnnBurr@govmaze.com
(949) 646-2071 FAX (949) 650-4540

Life Fellow and Diplomate of American Board of Forensic Examiners

Medi-Cal, Medicare, Government Programs

REFERRALS

Community Care Licensing - Residential Care for the Elderly, Assisted living and Board & Care
714 703 2840 or Website www.cclid.ca.gov (click home page scroll to regional office)

Council on Aging – Linkage program, Ombudsman, Fast, CCFV (Care Connection) 714 479-0107 or www.coaoc.org

Department of Health Service – Nursing Home Licensing
916 322 9193 or 714 456 0630 Orange County

DHS Department of Managed Care (HMO – Medicare Advantage)
Appeals/Complaints 1 888 HMO (466) 2219

HELP 310 533 1996 obtain the booklet “YOUR WAY”
ABOUT HEALTH CARE DECISIONS

help4srs.org

HICAP (Health Insurance Counseling & Advocacy Program)
Assists with Medicare and Insurance issues; including Medicare Part D prescription drug program
1 800 434 0222 or 714 560 0424 Orange County

****Lumetra** Hospital, Nursing home discharges and denial of services
800 841 1602

*www.ten-fold.com/new-work/
lumetra-brochure*

Office on Aging Information & Assistance 800 510 2020

OMBUDSMAN Nursing Home and Assisted Living 714 479 0107

Social Security Administration 800 772 1213

Veteran's Services (Aid and Attendance) or other Veteran benefits 800 927 1000 or 714 567 7450 Orange County

References and Contacts for Information About End-of-Life issues

“Your Way”. (A guide to help one go through one’s thinking about these issues.)

H.E.L.P. , 1404 Cravens Ave., Torrance, CA 90501

www.help4srs.org www.better-endings.org (310) 533-1949

“Preparing for Death:Instructions for Your Survivors” (A good guide for beginning the discussion and covers all the steps through to Advance Directive form.)

Forward Movement, 300 West Fourth St., Cincinnati, OH, 45202-266

www.forwardmovement.org (800) 543-1813

“Cedars-Sinai” Health Systems (An excellent web page for Advance Directives and Healthcare Ethics.

www.cshs.org/6595.html

Stanley A. Terman, PhD, MD (Author of several detailed books on end of life, and a peaceful death. An expert on death of terminally ill people by voluntarily stopping food and water. Also on writing an advance directive for people who are concerned about developing dementia.)

www.CaringAdvocates.org. (800) 844-3223

“California Coalition for Compassionate Care” (A wonderful organization for information about public policy, advance care planning, end of life care, resources and publications. Also is the authority on POLST; Physician Orders for (about) Life-Sustaining Treatment.

www.finalchoices.calhealth.org

“National Hospice and Palliative Care Organization NHPCO” (A national organization with a wealth of information re: hospice, caring for someone, grieving, and planning ahead.)

www.nhpc.org www.caringinfo.org

"Ask First!"

This form is to be filled out by any person who is offering legal, financial, retirement, insurance, accounting, estate, long-term care or similar planning services. Respond to ALL categories completely; sign and date at the bottom of the page.

① MY EDUCATION- I have achieved the following level of education (check HIGHEST level achieved):

<input type="checkbox"/> Some High School	<input type="checkbox"/> High School Diploma	<input type="checkbox"/> Bachelors Degree
<input type="checkbox"/> GED	<input checked="" type="checkbox"/> Some College	<input type="checkbox"/> Masters or other Advanced Degree

② MY CREDENTIAL(S)- I have the following specialized credential(s) and training (examples: CFP, ChFC, CLU, CPA, JD, MBA, years of relevant experience):

Over 25 years experience with regulations and programs relating to health, long term care, & nursing homes.

③ MY RELEVANT LICENSE(S)- I have the following license(s) giving me the legal authority to provide the services I am offering to you (examples: bar license (attorney); securities license; insurance license):

License Type	Covers What Activities	Issued By	License No.
none required			

④ LEGAL SERVICES- (Check ONE):

- I DO NOT practice law, and the services I am offering to you do not involve practicing law.
- I DO practice law, and have an active license to practice law in California.
- I DO practice law, but DO NOT have an active license to practice law in California. I am, however, under the supervision of the following attorney who has an active license to practice law in California:

Name of attorney: Not Applicable	Telephone:
Address:	

⑤ OUR BUSINESS RELATIONSHIP- Check TRUE or FALSE:

- True / False: In our business relationship, I will at all times serve as a fiduciary and put your interests before my interests and those of my employer.

⑥ MY COMPENSATION- I will be paid in the following way (commission, fee, salary, etc.), by the named person or company, in connection with the services I am offering to you:

Way(s) I'll Be Paid	Payment Will Be Made By (name each person or company)
Payment at time of service	Party requesting professional services.
Usually a flat fee.	No kickback or referral fees

⑦ FINANCIAL PRODUCTS / AFFILIATED ORGANIZATIONS- Check TRUE or FALSE:

- True / False: I offer or sell annuities, insurance, mutual funds or other financial products; or I am, or my employer is, affiliated with a person or organization that offers or sells annuities, insurance, mutual funds or other financial products.

⑧ I certify under penalty of perjury that the responses herein are true to the best of my knowledge.

Date: April 2013	Business Name: Caroleann Burr Forensic Examiner -Consultant
Signature: Caroleann Burr	Address: 1712 Whittier Ave. Costa Mesa, CA 92627
Print Name: Caroleann Burr	Telephone: (949) 646 2071

CAROLEANN BURR, D.A.B.F.E..... (949) 646-2071

RECEIVED NUMEROUS AWARDS & CERTIFICATES...

- ❖ In 1994, she received the Orange County Senior Roundtable Elder Advocate of the Year award.
- ❖ The United States Congress Congressional Recognition for Outstanding and Invaluable Service to the Community was presented to her in 2001.
- ❖ In December 2001, she was awarded the California State Assembly Certificate Recognition honoring her volunteer contribution to the Alzheimer's Association of Orange County.

SERVED ON COMMITTEES...

- ❖ During the 1980s, she served as member of the California Health Decisions Committee; members were committed to establishing the Advanced Health Care Directive in California.
- ❖ She was an active participant with the committee chaired by Orange County Supervisor Harriet Wieder, who was investigating the potential of a managed care program for the Medi-Cal beneficiary that would provide better access and better funding for the providers. Now known as Cal-Optima.
- ❖ May 9, 1988 she testified before at the Orange County Commission on the Status of Women Public Hearing concerning the "Flexibility of Medi-Cal benefits in Nursing Homes" in response to February 1, 1988 Federal Register.
- ❖ Caroleann was certified in 1988 as a Long Term Care Ombudsman and remained an Ombudsman for several years. She currently provides consulting or seminars as needed.
- ❖ She served three years as a consultant member of the Fiduciary Abuse Specialist Team (FAST) in Orange County.

AND MAINTAINS THESE PROFESSIONAL AFFILIATIONS:

- ❖ Orange County Bar Elder Law Section
- ❖ Orange County Bar Social Security Section
- ❖ Orange County Bar Estate Planning Section
- ❖ Orange County Bar Senior Lawyer Section
- ❖ Orange Caregiver and Resource Center
- ❖ Alzheimer's Public Policy Committee
- ❖ Senior Roundtable of Orange County
- ❖ AARP & Older Women's League
- ❖ Eligibility Workers Association

...SO WHO BENEFITS FROM CAROLEANN BURR'S HELP?

Attorneys, CPA's, case managers, families, recipients, spouses, advisors, care providers and professionals working with the elderly or disabled can benefit from Caroleann Burr's expertise to make sure a resident or client receives the best possible care under the most favorable financial terms available.

Caroleann Burr's unique ability to decipher the rules and regulations of the bureaucratic maze of government programs has repeatedly released families from the grip of anxiety and fear of financial ruin, thereby allowing them to better care for the physical and emotional needs of their loved ones. Guiding a family through the government maze of regulations to provide benefits and care for beloved seniors and disabled individuals has become the work and mission of Caroleann Burr.