

ADVANCED CARE PLANNING

*Planning for the Rewards and
Challenges of Aging*



Chevron Retirees Association

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PREPARING FOR CURRENT AND FUTURE NEEDS

Growing older offers many rewards. However, along with the rewards of aging come new challenges. At some time you'll most likely face a senior care situation, either as the person in need of care or as a caregiver. Thirteen percent of people over age 65 need assistance with one or more daily activities (for example, walking or eating). It is estimated that more than 9 million senior Americans need some type of long-term care. A majority of that care is presently provided by a child or a spouse.

Most individuals are unfamiliar with the issues involved with senior care. And when managing older adult care, the financial, legal, and emotional concerns can be overwhelming. This booklet examines some senior care issues to help you handle current needs and plan for future care for yourself or a family member including: identification of senior care needs; evaluation of different types of care; and highlights of government and private insurance opportunities. In addition to the topics discussed here, you'll find a list of references covering a broad spectrum of senior care issues to help you find answers to other questions.

At the time this booklet was last updated, all contact information was accurate. However, as agencies change the focus of their services, these numbers may change. The Chevron Retirees Association regrets any inconvenience this may cause.

Disclaimer

The material presented in this booklet is for information purposes only. It is not the intent of the Chevron Retirees Association (CRA) to offer advice or make suggestions about long-term care or senior care decisions. References to Chevron plan provisions are summarized and therefore may be incomplete. If there is any inconsistency between the information provided here and the official plan texts, the provisions of the official plan texts will prevail. Chevron Corporation reserves the right to modify a plan, in whole or in part, at any time, and for any reason. CRA is not a subsidiary of the Chevron Corporation (Chevron) but an independent organization comprised of retired employees of Chevron or its predecessor companies.



IDENTIFYING NEEDS

The most important step in preparing for aging is to identify current and future needs. The success of any care program is dependent upon an accurate understanding of an individual's needs.

Senior Needs

Older adults' needs span across a broad spectrum. Health care creates significant requirements for older adults. A doctor's diagnosis is an important part of the deliberation process; but, don't forget to consider other areas such as domestic needs. Many times, day-to-day personal and social needs are the greatest challenge for older adults. The listings shown below illustrate some of the needs of aging adults. Generally, when an adult needs help with two or more of these items, it is time to consider some type of senior care.

Questions To Help Evaluate Needs

Matching a senior's needs with a care program involves careful thought and a lot of research. Every senior situation is as unique as the person receiving the care. There is no precise formula that determines the exact timing and type of care. In some situations, the senior may abruptly require intensive long-term medical care. In this case, it is clear that immediate and acute care is necessary. Other times, a senior may gradually require help with small, everyday tasks and minor medical care. His or her needs may increase in increments, slowly moving from one level of care to another, lacking a clear delineation of when additional care is necessary. To identify when (and at what level) care is necessary, you should consider a variety of factors. Questions on the following page may help you. (From *"Taking Care: A Handbook for Family Caregivers to Older Adults"*, Second Edition by Mildred O. Hogstel, PhD, RN, C.)

Routine Living/Social Needs

- Transportation
- Shopping
- Companionship
- Social Activities
- Worship Services
- Banking
- Paying Bills
- Managing Finances
- Managing Assets

Personal/Home Needs

- Nutritional Planning
- Cooking
- Dressing
- Bathing
- Laundry
- Home Security
- Home Cleaning
- Home Maintenance
- Home Repairs

Health Care Needs

- Regular Checkups
- Ongoing Treatment
- Filling Prescription
- Taking Medications Correctly
- Emergency Care



IDENTIFYING NEEDS

Physical/Health

- What conditions have been diagnosed and are being treated?
- What can you anticipate regarding future health status?
- How satisfied is the family with current health care providers?
- What do you know about the senior 's eating habits and use of alcohol, drugs, and tobacco?
- Are there changes due to aging, such as hearing or vision loss, that can be corrected or improved?
- Has the senior executed an advance health care plan (living will) and named a health care agent to act when the senior is too ill to make medical decisions?

Living Arrangements

- How manageable is the senior 's present living arrangement?
- How secure is the senior's home-both inside, in terms of features such as adequate lighting and safe access to bathrooms; and outside, in terms of safety in the neighborhood?

Support

- How well does the senior get along with other people?
- To what extent is contact with friends and neighbors being maintained?
- How much assistance are you, your family, and friends able to provide?

Functional

- How well does the senior handle the following activities of daily living?
 - Getting out of bed.
 - Toileting and bathing.
 - Preparing and eating meals.
 - Communicating needs.
 - Managing household chores.
 - Getting dressed and groomed.
 - Moving around the house.
 - Handling finances.
 - Shopping.



IDENTIFYING NEEDS

Emotional/Spiritual

- How does the senior feel about his or her living situation?
- How has the senior handled difficulties in the past? Does he or she tend to depend on others, keep his/her problems to oneself, or ask for appropriate help? (This should provide insight into how he/she will act in the future.)
- How is the senior's memory and judgment?
- What spiritual or religious beliefs have been important to the senior, and is he or she able to continue to meet those needs?

Financial

- What assets (e.g., savings, value of home) does the senior have? And, has he or she made his/her wishes clear for the disposition of those assets if it becomes necessary?
- What is the senior's regular income (e.g., monthly Social Security check, etc.)? Will that income continue in the future?
- What are the anticipated expenses for the senior's care?



TIPS FOR A CAREGIVER

Making decisions about the care of an older adult can be extremely taxing. The degree of worry and frustration is likely to be intensified by distance when parent and children live in separate cities, regions of the country, or abroad. Although care needs vary greatly depending on the person's situation, here are some general points to keep in mind when contemplating long-term care for an aging person:

- Recognize your responsibilities to yourself and the rest of your family. Ask "What am I willing to do for my parents?" "To what extent should my involvement affect my life?" "How do I feel about the type and amount of support I can give?" Resolving your feelings about caring for an aging person is a critical first step.
- Acknowledge the impending loss. Making the choice to live somewhere else often means a great sense of loss, because "home" is a symbol of personal control and independence. Even with limited help, an aging adult is frequently able to stay longer in his or her own home and remain happier.
- Involve the aging person to the fullest extent in decisions about care and living arrangements. Respect the aging person's "adulthood" and dignity.
- Involve other family members. Don't hesitate to ask other family members for help. However, be sure that your request is reasonable.
- Check out nursing homes and have one or two in mind in case home living arrangements don't work out. Having an aging person living with you just may not work. Be aware that many nursing homes (especially the better ones) have waiting lists of two or three years.
- Set up a file of personal information about the aging person.
 - Bank accounts, financial assets, and investments.
 - Credit cards.
 - Liabilities and debts.
 - Property.
 - Valuables.
 - Safety deposit boxes, email addresses, and computer passwords.



TIPS FOR A CAREGIVER

- Official certificates: birth; marriage; divorce; citizenship; death, if spouse is deceased; Social Security number, Medicare number, etc.
- Employment history.
- Insurance coverage and identification cards.
- Important names: relatives, friends, clergy, physicians, lawyers, financial advisers, etc.
- Medications and medical history.
- Location of the will and/or trust, advance care plan (living will), health care agent documents and any other powers-of-attorney documents.
- Requests.
- Preferences.
- Prearrangements for a funeral.
- Any other information that helps you administer the aging person's affairs.
- Consider what legal or financial assistance you may need to handle taxes (income, estate), trusts, guardianship of a parent, joint accounts of a parent, power-of-attorney, will, living will, etc.
- Actively search for information about community services for aging individuals and meeting a person's health needs.

TIPS FOR A CAREGIVER

Resources

- For a nearby agency on aging, call the U. S. Administration On Aging's Eldercare Locator at 800-677-1116 on weekdays or go to their web site at www.eldercare.acl.gov
(When calling, it will be required that one leave the zip code, city, and county for which one is needing information.)
- For information on a broad range of needs and provisions of care, there are often free brochures from:
 - American Association of Retired Persons (AARP)
601 E Street, NW
Washington, DC 20049
888-687-2277 or go to web site to print brochures at www.aarp.org.
- For elder care professionals in your area, contact the following:
 - Aging Life Care Association
3275 West Ina Road, Suite 130
Tucson, Arizona 85741
520-881-8008 or go to web site to locate area managers at <https://www.aginglifecare.org/>
- To order other free related publications, contact the following:
 - Medicare at 800-633-4227 or go to the web site to print brochures at <https://www.medicare.gov/> (If ordering brochures by telephone, please allow 3 weeks for delivery.)

Words Of Caution:

- **Remain Vigilant!**
- **Do Your Homework—It Pays Off!**



CONSIDERING DIFFERENT LIVING ARRANGEMENTS

The type of living arrangement that is right for the situation depends on the individual's medical, financial, and day-to-day needs. Outlined below are the most common aging adult living arrangements, and general costs.

Staying at Home

Remaining in one's home is usually the senior's first choice. This option offers freedom, independence, and the security of a familiar setting; however, it also means the continuation of maintenance activities and expenses. Many times, seniors living at home are assisted by different support services such as skilled nursing care/physical therapy, homemaker assistance, home health aid, home delivered meals, and emergency response systems. These are described in more detail in the **In-Home and Community Services** section of this booklet. In addition to these services, modifications to the home may ease domestic annoyances—for example: attaching lever handles to doors instead of knobs; making the house wheelchair accessible; and rearranging closets and cupboards.

Home Matching

If a senior has extra space in a home or apartment and needs help with expenses and household tasks, a home matching program may offer the necessary financial and home care assistance. The program matches the homeowner with someone needing housing such as another older person or a student. Usually, no fee is charged for the matching service, and the senior and the renter work out a financial arrangement.

Federally Assisted "Subsidized" Housing

An older adult who meets low-income rules may find subsidized housing to be an attractive living option. Generally, rent is a percentage of the older adult's income set by annual national standard if operated by the government. Subsidized apartments are also operated by private management companies; however, both usually have long waiting lists.

CONSIDERING DIFFERENT LIVING ARRANGEMENTS

Shared Housing

Some seniors may benefit from living in a housing arrangement in which three or more unrelated persons share a home or an apartment owned by an agency or an organization. Residents have private bedrooms, but share common areas such as living and dining rooms. This may be appealing to older adults who are capable of handling their personal needs, but may require help with support services such as transportation, housekeeping or preparing meals.

Congregate or "Retirement" Communities

Congregate communities are multi-unit rental apartments or homes planned to meet a wide range of interests and needs. Large communities such as Sun City and Leisure World not only have their own libraries, golf courses, and health clubs, but they also have facilities for lapidary, woodworking, sculpting, and painting. Some of the newer communities are more specialized and revolve around a theme, such as gourmet cooking or photography. Another approach to congregate communities is the "lifestyle town." For example, Worman's Mill in Maryland is organizing its community around an old-style farming village. Residents can raise their own animals or convert their downstairs into shops that face a town square. Byron Park, a 186-unit congregate living house in California, is reproducing an eighteenth-century English country inn, including such finishing touches as a horseshoe-shaped courtyard with peacocks. (From "*Age Wave*", 1990, pages 134-142.) Most communities charge a monthly service fee. Support services may include housekeeping, meals, activities, and transportation. Additional support services are usually available for a fee.

Continuing Care or Life Care Communities

A life care community offers several levels of care so that residents do not have to relocate if their ability to function changes. The facility may include independent apartments and garden homes, assisted living, and nursing home care. This arrangement may provide a lifetime commitment to meet residents' housing needs. Costs can include a significant entrance or endowment fee in addition to monthly charges. Some also may sell a percentage of return of capital of the entrance fee to the resident or to one's estate.



CONSIDERING DIFFERENT LIVING ARRANGEMENTS

Assisted living offers housing alternatives for seniors who need assistance with dressing, bathing, eating, and toileting but do not require intensive medical or nursing care. The senior may have a private apartment or room but shares common areas such as dining, parlor, meeting, and recreation.

Nursing Homes

If a senior has difficulty caring for himself or herself and needs some degree of medical attention, a nursing home may be the answer. Nursing homes offer three different levels of care.

- **Sheltered Care:** Provides a safe environment for individuals who need minimal nursing care. Generally, they are frail and can no longer live on their own. The nursing home monitors their health, medications, and provides meals and social activities.
- **Intermediate Care:** Provides supervised 24-hour nursing care with the focus on personal care such as bathing, eating, dressing, and walking. This level provides care for people who have long-term disabilities or illnesses that have been stabilized. Rehabilitative services may also be provided.
- **Skilled Care:** Provides intensive medical treatment and monitoring by highly skilled medical personnel 24 hours a day. This level is also appropriate for seniors who need daily physical or occupational therapy.

Companionship of Adults Age 65 and Older

Based upon 2016 data from the U.S. Bureau of the Census, the group percentage of adults age 65 and older had the following living arrangements:

- 67.6% live with family in a household
- 25.9% live alone in a household
- 3.4% live with nonfamily in a household
- 3.1% live in group quarters *

*Major types of group quarters are adult correctional facilities, nursing facilities/skilled facilities, other health care facilities/residential schools for people with disabilities, college/university student housing, military quarters/military ships, and other non-institutional facilities.

However, the likelihood of living in a family household diminished with age. Older people were far more likely to live alone and in group quarters with age.



IN-HOME AND COMMUNITY SERVICES

In-home care provides assistance with day-to-day and minor medical care. These services may be temporary (help while recovering from an illness) or ongoing.

Skilled Health Care Services

Generally, the goal of skilled health care services is to assist in the senior person's recuperation or rehabilitation following an illness or injury. These services are prescribed by a physician and performed under the direction of a registered nurse. These services include physical therapy, speech therapy, and nursing care.

Homemaker/Home Health Aide

If a senior needs assistance with domestic activities (e.g., housekeeping, cooking, etc.), you may wish to consider employing a homemaker or home health aide. In addition to domestic duties, the aides can assist with personal needs like bathing, dressing, and getting out of bed. These services can be given alone or in combination with skilled health services.

Adult Day Care Centers

Adult day care provides structured weekday programs that include recreational activities, health and rehabilitation services, and meals during the day. The supervised group environment offers a chance to interact with peers and receive care and nourishment. In addition, some centers offer transportation and special programs for individuals with special needs, such as dementia.

Senior Centers

If a senior does not require supervised activity but wants a place to socialize, Senior Centers offer a variety of social, health, nutritional, educational, and recreational programs. Generally, they are community-based and operated by community agencies, park districts, and religious or ethnic organizations.



IN-HOME AND COMMUNITY SERVICES

Home Delivered Meals

Home delivered meals are available in most communities for older people who have difficulty shopping or cooking their own meals. Meals are either delivered hot and ready to eat or frozen so that they can be reheated.

Nutritional Sites

Older adults, who require a noon-time meal, may consider visiting a nutritional site. These sites include senior centers, housing developments, churches, synagogues, and other community locations. In addition to food, the sites provide companionship and possibly some social activities.

Emergency Response Systems

Emergency Response Systems (ERS) are devices which can help signal for assistance if an accident occurs when an individual is home alone. These devices vary in degree of sophistication and cost. They are often helpful in maintaining older persons in their homes.

Telephone Reassurance

Telephone reassurance is a support service provided by volunteers who make daily phone calls to older adults living alone to ensure that they are all right. This service is usually coordinated by your local Red Cross chapter, visiting nurse association, religious organization, or senior center.

Friendly Visitors

Non-profit organizations arrange for volunteers to regularly visit older adults to provide companionship. The visits may include activities, such as running errands, reading, writing letters and taking short walks. Friendly visits are usually provided by religious or voluntary organizations.

IN-HOME AND COMMUNITY SERVICES

Many adults over age 65 use some type of support service previously mentioned. Here is a breakdown of the most common services and the number of hours spent based on findings issued by the Administration On Aging in their Aging Network Program Reports in 2009:

- Personal Care and Chore Services: 28.7 million hours
- Transportation Rides: 27.5 million hours
- Day Care/Health Services: 8.0 million hours

Other Support Services in Your Area

Many community agencies, both public and private offer different in-home support services in your area. These services include:

- Social activities and outreach;
- Health promotion;
- Home Health Care;
- Hospice;
- Senior rights advocacy;
- Legal aid;
- Respite care;
- Public benefits and insurance counseling;
- Senior abuse prevention; and/or
- Special transportation.

For more information on how to track down resources, please refer to the section of this booklet entitled **Tracking Down Community Resources**.

Resources

*Turn to the section of this booklet entitled **Evaluating Facilities & In-Home Providers** for a checklist which you may wish to use to help evaluate in-home services.*

To learn more about helping the elderly live independent lives, call the National Rehabilitation Information Center at 800/346-2742. The National Rehabilitation Information Center (NARIC.com) is the library of the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR). We collect, catalog, and disseminate the articles, reports, curricula, guides, and other publications and products of the research projects funded by NIDILRR. NIDILRR funds more than 250 projects each year that conduct research on a wide range of issues including technology, health and function, independent living, and capacity building. [Learn more about NIDILRR.](#)

EVALUATING FACILITIES AND IN-HOME PROVIDERS

After determining the best type of senior care assistance, it's important to set a standard to evaluate the providers that offer the services. The following checklists can help you evaluate home health care and nursing homes.

Home Health Care Agency Checklist

Here are some questions to ask:

- Is the homemaker/aide an employee of the agency? (If no, see "[Home Health Care Registry](#)" in this section.) What type of employee screening is conducted by the agency?
- Does the agency have a current operating license and how long has the agency been serving the community?
- Does the agency provide service in your geographic area?
- What type of ongoing training and skilled supervision are provided to the staff?
- Are supervisors and back-up staff available to provide on call assistance 24 hours per day?
- Are they certified by Medicare and/or Medicaid, if appropriate? Is the quality of care certified by a national accrediting body such as the Joint Commission for the Accreditation of Healthcare Organizations?
- Does the agency provide a full assessment or plan of care that the patient, physician and family have input in the formulation? Is this ongoing process continued?
- Does the agency offer seniors a "Patients' Bill of Rights" that describe the rights and responsibilities of both the agency and the senior patient?
- [Home Health Care Registry](#)
 - Does the agency allow you to interview the homemaker/aide?
 - Is there an interview fee?
 - Is there a placement fee paid to the agency for providing a homemaker/aide?
 - Does the homemaker/aide have proper insurance and bonding and a list of good references?



EVALUATING FACILITIES AND IN-HOME PROVIDERS

- Does the placement fee guarantee a supply of homemakers/aides for a reasonable length of time?
- How does the registry screen its workers?
- **Homemaker/Home Health Aide**
 - Does the homemaker/aide have related work experience?
 - Does the homemaker/aide have an educational background, certification, or training in home health care?
 - Does the homemaker/aide enjoy working with older people?
 - Is the homemaker/aide able to commit to the length of time needed to care for the person?
 - Does the homemaker/aide have reliable transportation?
 - Does the homemaker/aide show good judgment in emergencies?
 - Does the homemaker/aide have good references?

Nursing Home Checklist

Many seniors and caregivers are skeptical about nursing homes and the quality of their care. Selecting a nursing home that meets your standards is very important. Some of the same questions apply to retirement or life care communities. Following is a checklist of some items to look for when choosing living arrangements outside the home.

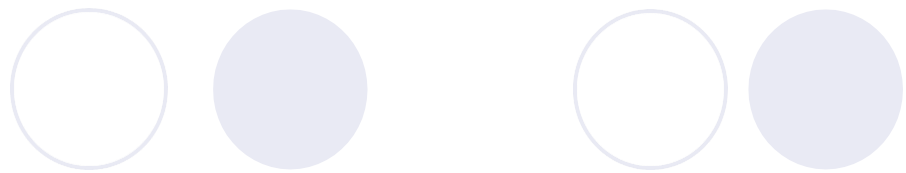
- **Legal and Financial**
 - Do the nursing home and its administrator have current state licenses? Is the licensing report available to read at the site? What are the state ratings for the home?
 - Is the home certified to receive reimbursement from Medicare and/or Medicaid, if applicable? What is the quality-of-care ratings the home has received?
 - Have you been provided with complete information on charges, applicable



EVALUATING FACILITIES AND IN-HOME PROVIDERS

insurance coverage, and a breakdown of monthly costs?

- Who owns the home?
- Have you been provided with information on what circumstances will cause charges to be raised or lowered?
- Do you know if a resident's space will be retained if one must be hospitalized?
- **Environment:** Making the transition to a new location can be stressful for a senior person. Here are some basic environmental attributes to look for to make the stay as comfortable as possible:
 - Does the location and setting meet with your requirements?
 - Are residents and guests invited to public spaces, such as lobbies, lounges and outdoor areas?
 - Is the home clean and free of persistent odors?
 - Is the environment safe; are traffic areas well-lit; and are there sufficient handrails, sturdy furnishings, adequate fire exits and sprinkler systems? (Ask to see a report of the last fire and safety inspection.)
 - Are residents permitted to smoke in their beds?
 - Are there procedures for reporting missing or stolen property?
 - Does the home respect the privacy of the resident — do staff members knock before entering a closed door; do shared rooms have drapery partitions; and is the modesty of the resident respected?
- **Meals:** Visiting the home during a meal allows you to observe dining activities and taste



EVALUATING FACILITIES AND IN-HOME PROVIDERS

the food. Here are some things to look for:

- Is the dining room attractive and inviting?
- Can residents choose from a selection of foods and eating times? Is a dietitian involved in planning the meals if a special diet is ordered by a physician?
- Is food accessible between meals?
- Does the food smell, look, and taste good?
- Are slow eaters allowed to finish?
- **Care and Services:** Care is one of the most important factors in determining satisfaction with a nursing home. To understand the home's care style, try to observe the nurses, physicians, and other staff members interacting with residents. Here are some questions about qualities that may promote a positive care environment:
 - What type of employee screening is conducted by the home, including criminal background check? What ongoing training is available for the staff?
 - Does the staff treat the residents in a warm and caring manner — such as the tone of voice, attitude and physical handling?
 - Are the residents properly dressed and groomed?
 - Are the conditions acceptable under which residents are physically situated?
 - Are health and personal services (e.g., pharmacists, physicians, dentists, beauticians, podiatrists, social workers, and physical therapists) regularly available, and is a physician on call for emergencies?
 - Are residents able to retain their private physicians?
 - Are matters concerning a resident's health handled appropriately — for instance, if a resident refuses to take medication or presents physical or emotional complaints, is the family notified, and are specific issues recorded?
 - Does the home ensure that advance directive (e.g., living will, do not resuscitate,

EVALUATING FACILITIES AND IN-HOME PROVIDERS

and power-of-attorney for health care) documents are on file for each resident?

- What are the policies regarding telephone use, alcohol, smoking roommates, and physical intimacy?
- **Social Therapeutic and Recreational Activities:** Many nursing homes have a calendar listing their activities. You should view some of the publicized activities to see what actually occurs and the number of residents participating. The following are some things that may make a senior's stay more appealing:
 - Are there opportunities for religious services and practices?
 - Are activities geared toward assisting residents physically, psychologically, and socially?
 - Are there recreational trips outside of the home?
 - Does the home make available therapeutic group sessions such as "life review", art and music, memory improvement, and mild exercise?

Words Of Caution:

- **Ask For References—Be Sure To Check Them Out!**
- **Ask Questions!**

TRACKING DOWN COMMUNITY RESOURCES

Resources offering support and services for the elderly are available in almost every community. But tapping into them can be a challenge. With persistence and a number of well-placed phone calls, you can begin to unravel an abundance of information and a wide variety of services. You may be surprised by the virtually hidden diversity of federal, state, and local government agencies, charities, and social and religious organizations that have been created specifically to serve aging people.

The following agencies sponsored by the U.S. Government and another organization will help you search for information and assistance.

- **Administration for Community Living:** Coordinates funding and services of state and community agencies. Their address is 330 C ST W, Washington, DC 20201; their phone number is 202-401-4634; and they can be found on the web at <https://acl.gov>
- **National Institute on Aging:** Provides printed materials on health, safety, and nutrition issues relating to the elderly. Their address is P.O. Box 8057, Gaithersburg, MD 20898; their phone number is 800-222-2225; and they can be found on the web at www.nia.nih.gov.
- **Social Security Administration:** Provides general information on Social Security benefits and specific information on personal accounts. Their address is 6401 Security Boulevard, Baltimore, MD 21235; their phone number is 800-772-1213; and they can be found on the web at www.ssa.gov.
- **USAging:** Provides education about benefits and services for the elderly in local communities. Their address is 1100 New Jersey Avenue, SE, Suite 350, Washington, DC 20003; their phone number is 202-872-0888; and they can be found on the web at <https://www.usaging.org>

The agencies listed above oversee a vast network of thousands of government offices and other groups that focus on in-home care services, community-based social services, and housing options other than nursing homes through:

- Informal caregivers.
- Homemaker services.
- Home-delivered meals (Meals-on-Wheels).
- Home health care.
- Hospice.
- Respite care services.
- Housing assistance.



TRACKING DOWN COMMUNITY RESOURCES

- Group housing (senior apartments, continuation care retirement communities, assisted living facilities).
- Counseling.
- Special transportation services.
- Senior centers.
- Social activities and outreach.
- Health promotion.
- Senior rights advocacy.
- Legal services.
- Public benefit and insurance counseling.
- Senior abuse prevention.

Words Of Caution:

- **Don't Get Frustrated—Stick With It!**
- **Be Persistent!**

SERVICE RESOURCES

The following are resources to consider in dealing with Advanced Care Planning:

- **American Association of Retired Persons (AARP):** National Office offers publications, information and resources to a broad range of issues for the over age 50 population. Their address is 601 E Street, NW, Washington, DC 20049; their phone number is 888-687-2277; and they can be found on the web at www.aarp.org.
- **National Council on Aging:** It provides advocacy, information and resources on disease, personal relationships and safety. It also offers Benefits-Check Up, which assists seniors in locating senior programs for medication, meals, health care and other essential services within your local community. Their address is 1901 L Street, NW, 4th Floor, Washington, DC 20036; their phone number is 202-479-1200; and they can be found on the web at www.ncoa.org.
- **Lawyer Referral and Information Service:** It provides referrals to legal services within your local community. Their address is American Bar Association, 321 North Clark Street, Chicago, IL 60654; their phone number is 800-285-2221; and they can be found on the web at www.americanbar.org
- **National Association for Home Care:** It provides information and referrals on home health care and related services within your local community. Their address is 22287 7th Street, SE, Washington, DC 20003; their phone number is 202-547-7424; and they can be found on the web at www.nahc.org.
- **National Center for Assisted Living:** It provides information and referrals on assisted living centers in your local community. Their address is 1201 L Street, NW, Washington, DC 20005; their phone number is 202-842-4444; and they can be found on the web at www.ncal.org.
- **Assisted Living Federation of America:** It provides information and referrals on assisted living centers in your local community. Their address is 1650 King Street, Suite 602, Alexandria, VA 22314; their phone number is 703-894-1805; and they can be found on the web at www.alfahousing.org.
- **National Adult Day Services Association:** It provides information and referrals on adult day services in your local community. Their address is 85 South Washington Street, Suite 316, Seattle, WA 98104; their phone number is 877-745-1440; and they can be found on the web at www.nadsa.org.
- **Social Security Administration:** For information on Social Security benefits call 800-772-1213 or visit their website at www.ssa.gov.

SERVICE RESOURCES

- **Veteran's Administration:** For information on veteran's benefits and services call 877-222-9387 or visit their website at www.va.gov.
- **Specialized Disease Organizations:** The following are just a few of the specialized organizations that exist.
 - **Alzheimer's Association:** For information and assistance call 800-272-3900 or visit their website at www.alz.org.
 - **American Cancer Association:** For information and assistance call 800-227-2345 or visit their website at www.cancer.org.
 - **American Diabetes Association:** For information and assistance call 800-342-2383 or visit their website at www.diabetes.org
 - **American Heart Association:** For information and assistance call 800-242-8721 or visit their website at www.heart.org
 - **American Lung Association:** For information and assistance call 800-548-8252 or visit their website at www.lung.org
 - **American Parkinson's Disease Foundation:** For information and assistance call 800-223-2732 or visit their website at www.apdaparkinson.org
 - **Arthritis Foundation:** For information and assistance call 800-283-7800 or visit their website at www.arthritis.org.
 - **National Kidney Foundation:** For information and assistance call 800-622-9010 or visit their website at www.kidney.org.
 - **National Osteoporosis Foundation:** For information and assistance call 800-231-4222 or visit their website at www.nof.org.
- **Other Local Resources:** The following are just a few of the other resources that exist in most areas.
 - **Health and Social Services Departments:** Contact the local agency for your city or county.
 - United Way
 - YMCA or YWCA
 - Salvation Army
 - **Local Hospital:** Contact the Social Services Department for information and referrals for care services in your community.
 - **Bookstores and Libraries:** They generally have many excellent books and reference material about care giving and aging.
 - AARP

SERVICE RESOURCES

In addition to the above resources dealing with aging and medical conditions you should also remember that for daily living there are other resources that can afford you discounts on certain purchases. These include merchandise and services. Many older adult groups offer discounts to senior citizens. These discounts can be found on the following items:

- Apparel.
- Groceries.
- Hotels, car and truck rentals, cruises, tours and vacation packages.
- Health care (dental, hearing eyes, prescription medications, and health and beauty products).
- Financial services (credit cards and lifetime income options).
- Insurance (health, home, life, mobile home, motorcycle and automobile).
- Restaurants.
- Services (roadside assistance and legal help).
- Technology (cell phone service, internet access, computers, personal emergency response service and home security).
- Entertainment (games, leisure activities, flowers and other related items).

For more information about discounts that are available to seniors contact AARP by phone at 888-227-7669 or visit their website at www.aarp.org/discounts.

HEALTH CARE COVERAGE FOR SENIORS

Finding your way through the maze of public benefits and private health care insurance requires patience and perhaps the assistance of a knowledgeable advisor. Available benefit resources may vary, and selecting the proper coverage depends on health needs, financial resources, and other factors. Generally, no combination of coverage provides reimbursement for 100% of an aging person's expenses. Personal resources generally will be required.

The following list will acquaint you with various types of health insurance for the elderly. Keep in mind these are highlights; you should base any decisions about coverage on specific plan details.

- **Medicare:** It helps pay the health care expenses of persons age 65 and over, persons of any age with permanent kidney failure, and certain disabled persons under age 65. Deductibles, coinsurance, and other "gaps" in coverage can leave sizeable expenses for you to pay. Medicare consists of a few parts which help pay hospital, doctor and drug expenses.
 - **Part A (Hospital Expenses):** Covers Medicare-approved expenses for hospital, skilled nursing facility, hospice, home health and psychiatric care. Coverage is provided automatically to anyone who qualifies for Social Security or Railroad Retirement benefits; other people may be able to purchase coverage at a monthly premium. Check with Medicare for current premiums. Medicare generally does not cover nursing home care and prescription drugs (unless you have a Part D Prescription Drug Plan described below).
 - **Part B (Doctor Expenses):** Covers part of expenses (on average about 80% of Medicare-approved expenses) for physician's services, X-rays and testing, physical and other therapy, and outpatient services. Helps cover some preventative services. You may purchase coverage within six months of becoming eligible for Part A coverage. You must sign up for Medicare Part B coverage when you attain age 65 or become eligible for Part A coverage, if earlier.
 - **Part D (Drugs):** A prescription drug option run by private insurance companies approved by and under contract with Medicare. Helps cover the cost of prescription drugs. Each plan can vary in cost and drugs covered.
 - **Part C (HMO):** A health care coverage option run by private companies approved by and under contract with Medicare. Includes Part A, Part B and usually other benefits that Medicare does not cover. Most plans also provide prescription drug coverage. Before choosing any such plan (referred to as Medicare Advantage plans) make sure you understand the pros and cons of joining one of these plans.

HEALTH CARE COVERAGE FOR SENIORS

An important note regarding Medicare: If you work beyond age 65 and ARE NOT covered by an employer-provided medical plan, you should sign up for Medicare when you first become eligible. If you fail to enroll within a year of your initial eligibility period, you will have to pay permanently increased premiums when you do enroll. If you work beyond age 65 and ARE covered by your employer-provided medical plan, you can apply for coverage up to eight full months after your employer-provided coverage ends or when employment ends (whichever comes first) without paying increased premiums.

- **Medicaid:** This is the only government program that covers long-term care in nursing homes. In some states, Medicaid covers long-term care through home services too. Coverage is available only to people with relatively low incomes and minimal assets. Benefits and rules vary by state. This program is funded through federal/state taxes. To receive benefits the aging person must "spend down" personal assets to "poverty level" and they must use virtually all their income on nursing home costs. However, a portion of their assets and income can be reserved for their spouse.
- **Medicare Supplement Insurance ("Medigap" or "Medsup"):** This is private insurance that fills in benefit gaps in Medicare by paying some or all of the amounts that Medicare does not pay in full or care that it does not cover. There are ten standard plans, regulated by federal law, that are currently offered in almost all states. Each plan includes a different combination of coverage and varying premiums. Since Medigap benefits must be the same by law, you are shopping for service, convenience, reliability and price; as well as the combination of benefit coverage that best meet your needs. You must purchase coverage when you first become eligible for Medicare Part B, otherwise conditions can be attached to your policy. Medigap does not pay for long-term care (nursing home) expenses.
- **Medicare Select Insurance:** It is the same as Medigap insurance, except you receive benefits (or the highest level of benefits) only if you receive benefits from a network of participating doctors and hospitals. Premiums often are lower than standard Medigap policies. Benefits are reduced or denied if you go outside the network for care. Also, other similar limitations as mentioned above for Medigap policies can apply.
- **Managed Care Plans:** This type of coverage originally referred to prepaid health plans (generally, health maintenance organizations (HMO's) that furnish care through a network of providers under a fixed budget and manage costs. Increasingly, the coverage is also used to include preferred provider organization (PPOs.). When considering a HMO, service, convenience, reliability, reputation and price should be taken into consideration. It should also be noted that managed care plans do not pay for long-term care (nursing home) expenses.



HEALTH CARE COVERAGE FOR SENIORS

- **Employer Group Insurance for Retirees:** Some people can continue their employer or union sponsored health insurance after retirement. The retiree should always check the price of the coverage and the benefits provided, including whether a spouse/ domestic partner and other dependents can be insured. When checking the benefits you may wish to consider if coverage is provided for prescription drugs or dental care and how the benefits are integrated with Medicare, if you are eligible. In the case of individuals eligible for Medicare you may wish to determine if the employer/union health insurance is equal to, less than or greater than the coverage and premiums under Medigap policies.

As a Chevron retiree under age 65 you may be eligible for Chevron Medical coverage. Chevron Plans typically offer coverage for hospital, doctor, prescription and certain other services. In the case of Medicare eligible retirees, typically the Plans only recognize expenses that are covered by Medicare. The Chevron Plans allow you to insure yourself, your eligible spouse/eligible domestic partner and your eligible children. Depending upon the Plan selected coverage may include: home nursing care; certain private duty nursing services (if medically necessary); second and additional surgical opinions; mental health/sub- stance abuse treatment; hospice care; prescription drugs; and certain other treatments and procedures. For further details you should consult Chevron's Plan documents or contact the Chevron Human Resources Services Center.

You should bear in mind that group plans can provide different coverage than Medigap insurance. This difference could include the amount of coverage that is provided for Medicare gaps, e.g., deductibles and coinsurance payments. Be sure to also check how the plan coordinates benefits with Medicare. Also, group plans, including the Chevron Medical Plans, usually do not cover long-term (nursing home) expenses. You should also remember that employers can terminate or change a plan, including your premium at any time.

- **Long-Term Care Insurance (for nursing home care or in-home care):** It covers some or all costs for nursing home care and it may include certain in-home care. Benefits are typically limited to a certain amount per day and/or lifetime (a set period of time or for specific health conditions). This type of insurance is sometimes referred to as "middle class coverage" since these are the type of individuals who generally consider purchasing coverage. It protects individuals from having to use up life savings and/or current income to pay for nursing home care or in-home care. Persons with limited savings and low current income may alternatively qualify for Medicaid coverage. Also, wealthy individuals may be better off paying for long-term care on their own. Likewise, if Medicaid is within reach, buying Long-Term Care Insurance may be wasteful. If you are considering purchasing Long-Term Care Insurance you should bear in mind that the older you are the most costly it will be. Also, the state of your health can play an important role in your ability to purchase coverage and its premium cost. If you are considering purchasing Long-Term Care Insurance you should remember that if you think you may qualify for Medicaid coverage it generally duplicates Medicaid benefits.

HEALTH CARE COVERAGE FOR SENIORS

Before you agree to purchase a policy check the benefits and limitations carefully since some policies do not provide complete coverage.

*(For a more detailed discussion of Long-Term Care Insurance please refer to the section entitled **Long-Term Care Insurance**.)*

- **Hospital Indemnity Insurance:** It pays a fixed cash amount for each day you are hospitalized, up to a designated number of days. Some policies include benefits for surgery or skilled nursing home care. Most policies pay the daily amount regardless of any other health insurance you may have. Remember, some policies limit the number of days or the total payment amount. Also, these plans are not designed to fill gaps in Medicare coverage.
- **Specified Disease Insurance:** It pays a fixed amount of benefits for a single disease, such as cancer, or for a group of specified diseases. The value of the policy is predicated upon the insured becoming inflicted with the specified disease(s) and the amount of insurance carried. This type of insurance is not available in all states. Also, this coverage is not designed to fill gaps in Medicare. Finally, policies limit the total amount payable.



INSURANCE CHECKLIST

The following is a partial list of points to consider when buying most types of private insurance, especially Medigap coverage. Additional points to consider when purchasing Long-Term Care Insurance are covered under the section entitled **Checklist for Long-Term Care Insurance**.

- **Consider Your Alternatives:** You'll typically have a number of coverage possibilities, so consider the aging person's health care needs, current coverage, and the potential cost/benefit of added coverage.
- **Shop Carefully Before You Buy:** After selecting the "right" type of coverage, remember that policies differ in coverage and cost. Companies differ in service. Check out different companies and compare premiums.
- **Don't Buy More Than You Need:** One comprehensive policy is better than several policies with overlapping coverage.
- **Beware of Replacing Existing Coverage:** Have a good reason for switching from one Medigap policy to another — different benefits, better service, lower price, etc. In setting pre-existing condition restrictions, the new policy must give credit for time spent under the old policy. You must sign a statement that you intend to cancel the old policy - but don't cancel it until you're sure you want to keep the new one.
- **Know the Benefit Maximums:** Most policies limit benefits in some way, either by dollar amount or number of days covered.
- **Check Your Right to Renew:** Medigap policies must be guaranteed renewable (unless you miss payments or falsify the application). Beware of older policies that let the company refuse to renew. Keep in mind that premiums can be raised even though coverage is renewable.
- **Know That Policies Aren't Government Sponsored:** State and federal agencies do not sell insurance or sponsor policies. You should report any person claiming otherwise to the State Board of Insurance.
- **Know With Whom You Are Dealing:** Check with the state insurance department to make sure the company and agent you are considering are licensed. Keep their name, address, and phone number.
- **Take Your Time:** Don't be pressured. Trustworthy salespeople will not rush you. (But remember, there is a time limit for Medicare Part B enrollees to buy a Medigap policy without restrictions being imposed.)
- **Don't Pay Cash:** Pay by check, money order, bank draft or credit card made out to the insurance company, not the agent or anyone else. Keep a receipt.



INSURANCE CHECKLIST

- **Expect Prompt Policy Delivery or a Refund:** If the policy isn't delivered in 30 days, write to the company. If 60 days go by without a response, contact the state insurance department.
- **Use the "Free-Look" Provision:** Insurance companies must give you at least 30 days to review a Medigap policy. If you decide you don't want it, send it back within 30 days.
- **Periodically Review Your Coverage:** After you purchase coverage you should periodically review your policy to be sure it still meets your needs. Also, you should check the market to be sure that the protection and premium are still competitive.

Words Of Caution:

- **Read The Fine Print!**
- **Know What's Covered and What's Not Covered!**
- **Match Your Needs To The Policy!**
- **Don't Be Pressured Into Buying a Policy!**



LONG-TERM CARE INSURANCE

Long-Term Care Insurance is designed to pay for nursing home care, home health care and other services for individuals who are unable to care for themselves because of a disabling medical condition. Generally, Long-Term Care Insurance is purchased by individuals who wish to protect their assets from erosion caused by the cost of receiving nursing home or similar care. It should be noted that at least 70% of retirees will require some form of long-term care during their lives. Also, the average stay in a nursing home is approximately 2 1/2 years.

Most long-term care services are not covered by Medicare or Supplemental Medicare Insurance. Medicare only covers a very small portion of nursing home costs, which focus on immediate care rather than long-term care. Supplemental Medicare Plans typically do not cover nursing home costs. Medicare coverage is limited to 100 days per benefit period following a three-day hospital stay. Supplemental Medicare Insurance typically assists with paying Medicare deductibles and copayments, and providing additional coverage where Medicare benefits are limited.

Unlike Medicare, Medicaid does provide nursing home coverage. While Medicaid is the primary means of financing nursing home stays, coverage is limited to individuals who qualify for financial aid. To qualify for financial aid, an individual must be at or near the poverty level of income and have limited assets. In 2007 Medicaid paid about 50% of long-term care costs; Medicare paid about 20%; individuals paid about 18%; Long-Term Care Insurance about 7%; and the balance came from miscellaneous sources.

Is Long-Term Care Insurance Necessary?

This is an individual decision that should be based on your facts and circumstances. However, like any insurance, the main reason for purchasing Long-Term Care Insurance is to provide financial security. Generally, Long-Term Care Insurance is recommended for individuals who wish to protect their assets. Without insurance many long-term care recipients rely on Medicaid once they deplete their assets.

In considering whether to purchase Long-Term Care Insurance you may wish to first consider the cost of nursing home care in your area. Next, compare this cost to your current living expenses (food and shelter). If the cost of nursing home care is greater, you may wish to consider purchasing insurance for the difference. Alternatively, if you have minimum assets you may wish to determine if you qualify for Medicaid. You'll need to check your State's requirements for Medicaid.



LONG-TERM CARE INSURANCE

Generally, financial planners recommend that individuals should consider purchasing Long-Term Care Insurance if they have assets greater than \$75,000, excluding the value of a house or a car; they have a retirement income of at least \$25,000 (\$35,000 for a couple); and they can afford to pay Long-Term Care Insurance premiums. (*Source: "Own Your Future", Issued by the Centers for Medicare & Medicaid Services, 2010*) Before deciding whether to purchase insurance you may wish to discuss your situation with your financial advisor or lawyer.

The Cost of Long-Term Care

The cost of living in a nursing home depends upon the type of home, its location, the services provided, and the quality and intensity of medical care. Nursing home costs for a private room in 2008 averaged \$75,000 nationally. Depending upon where you live this cost could be substantially different. We strongly encourage you to check nursing home costs in your area. Local costs can be found at www.ltcfeds.com. As mentioned earlier, Medicare only covers a very small part of nursing home costs. Most of the cost will be your responsibility or Medicaid, if you qualify.

CHECKLIST FOR LONG-TERM CARE INSURANCE

The following points which are in addition to the points already outlined in the section entitled **Insurance Checklist** should be considered when purchasing Long-Term Care Insurance.

- **Consider Your Age:** The premium cost for Long-Term Care Insurance is based on your age. The younger you are the less costly will be the insurance. In 2005, the average annual premium for Long-Term Insurance was approximately \$2,000 for individuals who were between ages 60 and 75. At age 60 the cost was about \$1,900 and at age 75 the cost was about \$2,600. (Source: "America's Health Insurance Plans")
- **Consider Your Health:** The ability to purchase Long-Term Care Insurance, historically, has been directly correlated to the condition of the applicant's health. With the introduction of National Health Care Reform in 2010, we may see an easing of these restrictions. However, it's always wise to purchase coverage while you are in reasonably good health.
- **Individual Policy or Employer Sponsored Policy:** Generally, benefits and premium costs of individual and employer-sponsored policies are similar. However, the underwriting requirements for an Individual Policy can be more restrictive. When considering purchasing Long-Term Care Insurance two sources to consider are Chevron's coverage which is offered through MetLife and AARP's coverage. Also, beginning in 2011 the Federal Government will be offering Long-Term Care Insurance. Information on how to contact these sources may be found in the section entitled **Types of Long-Term Care**.
- **Amount of Insurance:** Typically, only a small percentage of people spend several years in a nursing home. To reduce the cost of the coverage, you may wish to consider a shorter benefit period. For example, there are some policies that cover a maximum of five years confinement to a nursing home for each covered person.
- **Consider What's Covered by the Policy:** Know what kind of care is covered (e.g., skilled nursing, intermediate nursing, custodial) and in what setting it can be provided (e.g., your home, nursing home, group setting/retirement community). Some policies also cover assistance with chores such as shopping and doing laundry. Read the policy's list of covered services as well as those that are not covered. Lastly, be sure to determine when benefits commence. Some policies start paying benefits when someone is considered dependent in two or more "activities of daily living" (e.g., eating, bathing, or dressing). Other policies may consider a person dependent only if he or she needs direct help every time an activity is performed; and still other policies may only require the person to need assistance or supervision. Also make sure the policy covers Alzheimer's disease.

CHECKLIST FOR LONG-TERM CARE INSURANCE

- **Know What the Policy Pays:** Long-Term Care Policies pay a per diem amount for nursing home care. The greater the per diem amount the more costly will be the insurance. Therefore, you should consider purchasing only the amount of coverage you will need. One way of assessing your need is to start with the cost of nursing home care in your area; and then determine the amount of your current living expenses. You should then consider purchasing Long-Term Care with a per diem amount equal to the difference between your current living expenses and the cost of nursing home care. Because of inflation and other factors, the cost of nursing home care may increase. Therefore, you should consider purchasing Long-Term Care coverage that has a built-in inflation protection clause. As an alternative to purchasing automatic inflation protection some insurance companies will periodically allow you to increase your coverage. Be sure to check what is offered by insurance companies before purchasing a policy.
- **Additional Points to Consider:** When shopping for Long-Term Care Insurance you may wish to keep in mind that the best policies:
 - Do not require prior hospitalization;
 - Cover both skilled and non-skilled nursing care;
 - Provide at least three to five years of coverage;
 - Pay for home care as well as institutionalized care;
 - Guarantee protection against inflation (higher benefits as costs increase); and
 - Include patients with Alzheimer's disease and other degenerative illnesses.

You should find out if the policy:

- Pays back part of your premiums if you cancel without using the benefit (and how much this feature may add to the normal premiums);
- Applies any unused benefits to the remaining spouse where both spouses are insured where one spouse dies;
- Pays death benefits; and
- Is guaranteed renewable even if the covered person's health worsens.

Words Of Caution:

- **Know Your Financial Situation!**
- **Match Your Needs To The Policy—Don't Over Buy Or Under Buy!**
- **Seek Professional Advice!**

TYPES OF LONG-TERM CARE

When considering a policy, check to see if the following expenses (as defined below) are covered. (Note: Medicare and Medicaid definitions may vary.)

- **Skilled Nursing Care:** It is 24-hour-a-day care that is given by skilled medical personnel, such as registered nurses or professional therapists; ordered by a doctor; and it involves a treatment plan. It may be provided in-home and it must be needed for either a short or a long period of time.
- **Immediate Nursing Care:** It is care for a stable condition that requires daily, but not round-the-clock, nursing supervision. Also, it is more oriented towards personal care; and it is generally needed for long periods of time.
- **Custodial Care:** It is care that helps a person perform activities of daily living, such as eating, dressing or bathing. The care is usually given by people without professional medical training. It can be provided in many settings, including nursing homes, adult day care centers or at home.

Resources:

You may wish to consult the following resources for further information about Long-Term Care Insurance.

- *Centers for Medicare & Medicaid Services*
Phone: 877-267-2323; Website: www.cms.gov
- *National Association of Insurance Commissioners*
Phone: 816-842-3600, 816-783-8300; Website: www.naic.org
- *AARP*
Phone: 888-687-2277; Website: www.aarp.org
- *NAIFA*
Phone: 703-770-8100; Website: www.naifa.org
- *The Federal Long-Term Care Insurance Program*
Phone: 800-582-3337; Website: www.ltcfeds.com
- *U.S. Department of Health and Human Services*
National Clearinghouse for Long-Term Care Information
Phone: 202-619-0724; Website: www.acl.gov/ltc



TYPES OF LONG-TERM CARE

- *John Hancock Insurance Company*
Website: www.johnhancock.com
- *MetLife*
 - *General: Website: www.metlife.com*
 - *Chevron: Website: www.genworth.com/chevron*

CHEVRON HEALTH AND WELFARE BENEFITS AND CRA DENTAL BENEFITS

Chevron helps eligible pre-65 retirees and their dependents by providing health and welfare benefits including handling some of the costs for medical coverage. Chevron helps eligible post-65 retirees and their dependents by providing health care reimbursement (HRA) on health care plans selected through Via Benefits. Both Chevron and the CRA provide dental coverage plans to eligible retirees and their dependents.

Medical Coverage

To help handle the cost of medical coverage Chevron offers eligible pre-65 employees the ability to continue into retirement Medical Plan coverage for themselves and their eligible dependents. Typically, they have the choice of different plans through Anthem Blue Cross. These plans cover a variety of services, including office visits, hospital and surgical services and prescription drugs. Where retirees are also eligible for Medicare, eligible post 65 retirees and their eligible dependents receive assistance from Chevron in the form of a health care reimbursement account (HRA) to assist in the cost of health care arranged through Via Benefits. In addition, assistance on the costs for medical coverage or with an HRA, where applicable, can continue for your spouse/domestic partner and other eligible dependents if you predecease them, provided you and they were covered by eligible medical plan coverage at the time of your death. For further information about the pre-65 Chevron Medical Plans you should visit Chevron's benefits website or you should telephone its Service Center. Contact information is shown on the next page.

Dental Coverage

To assist with the cost of dental care Chevron offers eligible career Chevron legacy employees the ability to continue into retirement Dental Plan coverage for themselves and their eligible dependents. The cost of the Chevron Dental Plan is shared by the eligible retirees and the Company. For further information about the Plan you should visit Chevron's benefits web-site or you should phone its Service Center. Contact information is shown on the next page.

In addition, CRA makes available to its dues-paying members a voluntary Dental Program. The Program consists of two Dental Plans – a Low Plan and a High Plan. Coverage can be elected for themselves and their eligible dependents. The cost of the coverage is determined by where the member lives; and the member pays the full cost. Note the main purpose of this Program is to make available dental coverage to non-Chevron legacy retirees. For further information about the Program you should visit CRA's dental website or you should phone their representative. Contact information is shown on the next page.

Long-Term Care Insurance

To assist with the expenses of long-term care Chevron makes available through MetLife Long -Term Care Insurance. Eligible retirees can cover themselves and their eligible dependents. The terms and conditions of coverage are governed by MetLife and the full cost of the coverage is paid by the retiree. For further information you should contact MetLife as shown on the next page.

Group Life Insurance

To assist eligible career employees with financial security, certain legacy companies provide/ make available Life Insurance coverage during retirement. To determine if you qualify for continued Life Insurance you should refer to the documents that you received at retirement from your retiring company. For further information about your Life Insurance you should visit Chevron's benefits website or you should phone their Service Center. Contact information is shown below.

Retirement Benefits

Depending upon whether you were employed by Chevron or a legacy company you may be receiving a monthly pension benefit. You may also have residual benefits remaining under a savings plan. The terms and conditions of payment of these benefits are strictly governed by their plan rules. For further information you should consult the documents that you received at retirement from your retiring company. In addition, if you are receiving a pension supplementation payment from Chevron the terms and conditions of payment are set forth in documents you received from Chevron or a legacy company. For further information about these benefits you should visit Chevron's benefits website or you should phone their Service Center. Contact information is shown below.

Contact Information

- Chevron's Service Center:
 - Phone: 888-825-5247
 - Website: [https:// www.hr2.chevron.com/formeremployee](https://www.hr2.chevron.com/formeremployee)
- Via Benefits:
 - Phone: 1-844-266-1392
 - Website: www.My.Viabenefits.com/Chevron
- CRA Dental:
 - Phone: 412-992-2820
 - Website: www.cradental.com
- Chevron Long-Term Care Insurance:
 - Phone: 800-438-6388
 - Website: www.genworth.com/chevron

APPENDIX

AGENCIES ON AGING

To find out about services offered in specific states and to obtain estimates of associated costs, please write directly to the state's agency on aging or call the U.S. Administration on Aging's Eldercare Locator at 800-677-1116, weekdays from 9:00 a.m. to 8:00 p.m. EST.

ALABAMA

Alabama Department of Senior Services
RSA Tower
201 Monroe Street, Suite 350
Montgomery, AL 36104
Phone: 334-242-5743, 877-425-2243
www.alabamaageline.gov

ALASKA

Alaska Commission on Aging
Dept. of Health and Social Services
P.O. Box 110693
Juneau, AK 99811-0693
Phone: 907-465-4793
www.dhss.alaska.gov

ARIZONA

Division of Aging & Adult Services
Department of Economic Security
1789 W. Jefferson Street, No. 950A
Phoenix, AZ 85007
Phone: 602-542-4446
www.des.az.gov/services/older-adults/healthy-living

ARKANSAS

Division of Aging and Adult Services
700 Main Street
Little Rock, AR 72201
Phone: 501-682-2441
www.humanservices.arkansas.gov/division-on-aging

(AMERICAN) SOMOA -Territorial

Administration on Aging
Pago Pago, AS
96799
Phone: 011-684-699-2531
Email Contact: els.taooa@yahoo.com

CALIFORNIA

Department of Aging
2880 Gateway Oaks Dr Suite 200
Sacramento, CA 95834
Phone: 800-510-2020
www.aging.ca.gov

COLORADO

Division of Aging and Adult Services
Department of Human Services
1575 Sherman Street, 10th Floor
Denver, CO 80203-1714
Phone: 303-866-2800
<https://cdhs.colorado.gov/older-adults>

CONNECTICUT

Department of Aging and
Disability Services
55 Farmington Avenue
Hartford, CT 06105
Phone: 806-424-5055
www.ct.gov/aging

DELAWARE

Division of Services for Aging and Adults with
Physical Disabilities
1901 N. DuPont Highway
New Castle, DE 19720
Phone: 800-223-9074
www.dhss.delaware.gov/dhss/dsaapd/

DISTRICT OF COLUMBIA

Department on Aging
500 K Street, NE 5TH Floor
Washington, DC 20002
Phone: 202-724-5626
<https://dacl.dc.gov/>

FLORIDA

Department of Elder Affairs
4040 Esplanade Way
Tallahassee, FL 32399
Phone: 850-414-2000
<https://elderaffairs.org/>

APPENDIX

GEORGIA

Division of Aging Services
Department of Human Services
2 Peachtree Street, NW, 9-385
Atlanta, GA 30303
Phone: 404-657-5258
www.aging.georgia.gov

GUAM

Division of Senior Citizens
123 Chalan Kareta
Mangilao, Guam 96913-6304
Phone: 011-671-487-6429 or
011-671-487-6354
Email contact:
biba.seniorcitizens@dphss.guam.gov
<https://dphss.guam.gov/>

HAWAII

Executive Office on Aging
250 South Hotel Street, Suite 406
Honolulu, HI 96813 -2831
Phone: 808-643-2372
www.hawaiiADRC.org

IDAHO

Idaho Commission on Aging
6305 West Overland Road Suite 110
Boise, ID 83709
Phone: 208-334-3833
www.aging.idaho.gov

ILLINOIS

Illinois Department on Aging
One Natural Resources Way
Suite 100
Springfield, IL 62702-1271
Phone: 800-252-8966
www.illinois.gov/aging

INDIANA

Indiana Division of Aging
402 W. Washington Street
Indianapolis, IN 46204
Phone: 800-673-0002
www.in.gov/fssa/da/contact-us

IOWA

Iowa Department of Aging
510 East 12th St., Suite 2
Des Moines, IA 50319
Phone: 515-725-3333
www.iowaaging.gov

KANSAS

Kansas Department on
Aging
NEW England Building
503 South Kansas Avenue
Topeka, KS 66603
Phone: 785-296-4986
<http://www.kdads.ks.gov>

KENTUCKY

Department For Aging & Independent Living
275 E. Main Street
Frankfort, KY 40621
Phone: 502-564-6930
<https://chfs.ky.gov/agencies/dail/Pages/default.aspx>

LOUISIANA

Governor's Office of Elderly Affairs
602 North 5th Street, 4th Floor
Baton Rouge, LA 70802
Phone: 225-342-7100
www.goea.louisiana.gov

MAINE

Department of Health & Human Services
Aging & Disability
Services, Office of
41 Anthony Avenue
Augusta, ME 04333
Phone: 207-287-3707
www.maine.gov/dhhs

MARIANA ISLANDS

CNMI Office on Aging
Commonwealth of the Northern Mariana Islands
6P2C+WQR Garapan
Saipan, MP 96950
Phone: 607-233-1320/22
<https://cnmiooa.org>

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MARYLAND

Department of Aging
301 W. Preston Street, Suite 1007
Baltimore, MD 21201
Phone: 410-767-1100
www.aging.maryland.gov

MASSACHUSETTS

Executive Office of Elder Affairs
One Ashburton Place Suite 517
Boston, MA 02108
Phone: 617-727-7750
<https://www.mass.gov/orgs/executive-office-of-elder-affairs>

MICHIGAN

Behavioral and Physical Health
and Aging Services
Administration
P. O. Box 30676
Lansing, MI 48909
Phone: 517-241-4100
www.michigan.gov/aasa

MINNESOTA

Aging & Adult Services
PO Box 64976
St. Paul, MN 55164
Phone: 651-431-4936
www.mn.gov/dhs

MISSISSIPPI

Division of Aging & Adult Services
200 South Lamar Street
Jackson, MS 39201
Phone: 601-359-4500
www.mdhs.ms.gov

MISSOURI

Dept. of Health & Senior Services
912 Wildwood Drive
P. O. Box 570
Jefferson City, MO 65102
Phone: 573-751-6400
www.health.mo.gov

MONTANA

Senior and Long-Term Care Division
1100 N Last Chance Gulch, 4th Floor
Helena, MT 59601
Phone: 406-444-4077
www.dphhs.mt.gov/sltc

NEBRASKA

Health and Human Services – State Unit on Aging
P.O. Box 95026
301 Centennial Mall South
Lincoln, NE 68509
Phone: 402-471-3121
www.dhhs.ne.gov

NEVADA

Aging and Disability Services Division
Dept. of Health & Human Services
3320 West Sahara Ave. Suite 100
Las Vegas, NV 89104
Phone: 702-486-3545
www.adsd.nv.gov

NEW HAMPSHIRE

Bureau of Elderly and Adult Services
Main Building -105 Pleasant St.
Concord, NH 03301
Phone: 602-271-9203
www.dhhs.nh.gov/programs-services/adult-aging-care

NEW JERSEY

Division of Aging Services
PO Box 715
Trenton, NJ 08625
Phone: 877-222-3737
www.nj.gov/humanservices/clients/aging/

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NEW MEXICO

Aging and Long-Term Services Department
2550 Cerrillos Road
Santa Fe, NM 87505
Phone: 505-467-4799 (main)
Phone: 800-432-2080
www.nmaging.state.nm.us

NEW YORK

State Office for the Aging
2 Empire State Plaza
Albany, NY 12223
Phone: 844-697-6321
www.aging.ny.gov

NORTH CAROLINA

Division of Aging & Adult Services
2001 Mail Service Center
Raleigh, NC 27699-2101
Phone: 919-855-3400
www.ncdhhs.gov/aging

NORTH DAKOTA

Aging Services Division
Dept of Health and Human Services
1237 West Divide Avenue, Suite 6
Bismarck, ND 58501
Phone: 855-462-5465
www.hhs.nd.gov/adults-and-aging

OHIO

Department of Aging
30 E Broad St. ,22nd Floor
Columbus, OH 43215-3414
Phone: 1-800-266-4346
www.aging.ohio.gov

OKLAHOMA

Community Living, Aging &
Protective Services
Oklahoma Human Services
P.O. Box 53159
Oklahoma City, OK 73152
Phone: 1-800-211-2116
www.oklahoma.gov/okdhs/services/cap.html

OREGON

Seniors & People with Disabilities
Department of Human Services
500 Summer Street, NE, E15
Salem, OR 97301
Phone: 503-945-5600
www.oregon.gov/dhs/seniors-disabilities

PENNSYLVANIA

Department of Aging
555 Walnut Street, 5th Floor
Harrisburg, PA 17101-1919
Phone: 717-783-1550
www.aging.pa.gov

PUERTO RICO

Governor's Office of Elderly Affairs
P.O. Box 191179
San Juan, PR 00919-1179
Phone: 787-721-6121
www.seniorresource.com/pr.htm

RHODE ISLAND

Health and Human Services for Older Adults (65+)
3 West Road
Cranston, RI 02920
Phone: 401-462-5274
www.eohhs.ri.gov/consumer/older-adults

SOUTH CAROLINA

Department on Aging
1301 Gervais Street, Suite 350
Columbia, SC 29201
Phone: 803-737-9900 or 800-868-9095
www.aging.sc.gov

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SOUTH DAKOTA

Office of Adult Services and Aging
Dept. of Social Services
3800 E. Highway 34 Hillsview Plaza
c/o 500 East Capitol Avenue
Pierre, SD 57501
Phone: 605-773-5990
www.dhs.sd.gov/ltss

TENNESSEE

Commission on Aging and Disability
502 Deaderick Street
Nashville, TN 37243-0860
Phone: 615-741-2056
www.tn.gov/aging

TEXAS

Texas Health and Human Services
North Austin Complex
4601 W. Guadalupe St.
Austin, TX 78751-3146
P.O. Box 13247
Austin, Texas 78711-3247
Help number: 512-424-6500
www.hhs.texas.gov/services/aging

U.S. VIRGIN ISLANDS

Senior Citizen Affairs Administration
Department of Human Services
3011 Golden Rock Christiansted
St. Croix, VI 00820
Phone: 340-718-2980
www.dhs.gov.vi

UTAH

Division of Aging and Adult Services
195 North 1950 West
Salt Lake City, UT 84116
Phone: 801-538-3910
Toll free: 877-424-4640
www.daas.utah.gov

VERMONT

Department of Disabilities, Aging and Independent Living
280 State Drive, HC2
South
Waterbury, VT 05671
Phone: 802-241-2401
www.dail.vermont.gov

VIRGINIA

Department for the Aging
1610 Forest Avenue, Suite 100
Henrico, VA 23229
Phone: 804-662-9333
Toll Free: 800-552-3402
www.vda.virginia.gov

WASHINGTON

Aging and Long-Term Support Adm.
4450 10th Avenue SE
Lacey, WA 98503
Phone: 360-725-2300
www.dshs.wa.gov/altsa/home-and-community-services/altsa-contact-information

WEST VIRGINIA

Bureau of Senior Services
1900 Kanawha Blvd., East
3003 Town Center Mall (Fed Ex Zip 25389)
Charleston, WV 25305-0160
Phone: 304-558-3317
www.wvseniorservices.gov

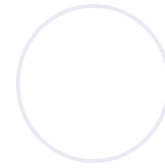
WISCONSIN

Bureau of Aging and Disability Resources
Dept. of Health and Family Services
One West Wilson Street (Fed Ex Zip 53703)
P.O. Box 7851
Madison, WI 53703-7851
Phone: 608-266-1865
www.dhs.wisconsin.gov

WYOMING

Dept. of Health Aging Division
2300 Capitol Avenue
Cheyenne, WY 82002
Phone: 307-777-7995 or 800-442-2766 (within WY only)
<https://health.wyo.gov/aging/>

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OTHER RESOURCES

ADMINISTRATION ON AGING

Department of Health and Human Services
Washington, DC 20201 (Mailing Address)
One Massachusetts Avenue NW
Washington, DC 20001 (Physical Address)
Phone: 202-619-0724 (general information)
Phone: 800-677-1116 (Eldercare Locator Line)

CENTERS FOR MEDICARE AND MEDICAID SERVICES

7500 Security Boulevard
Baltimore, MD 21244
Phone: 877-267-2323
Website: www.cms.gov

CHILDREN OF AGING PARENTS

Woodbourne Office Campus
1609 Woodbourne Road, Suite 302-A
Levittown, PA 19057
Phone: 215-945-6900, 800-227-7294

USAgging

Washington Office
1730 Rhode Island Avenue, NW, Suite 1200
Washington, DC 20036
Phone: 800-227-7294
Website: <https://www.usaging.org/>

FAMILY CAREGIVER ALLIANCE

180 Montgomery Street, Suite 900
San Francisco, CA 94104
Phone: 800-445-8106
Website: www.caregiver.org

HEALTH CARE FINANCING ADMINISTRATION (HCFA)

Department of Health and Human Services
(Medicare and Medicaid)
200 Independence Avenue SW.
Washington, DC 20201
Phone: 410-786-3000

HOSPICE FOUNDATION OF AMERICA

1710 Rhode Island Avenue, NW, Suite 400
Washington, DC 20036
Phone: 800-854-3402
Website: www.hospicefoundation.org

LAWYER REFERRAL AND INFORMATION SERVICE

American Bar Association
321 North Clark Street
Chicago, IL 60654-7598
Phone: 312-988-5000, 800-285-2221

LONG TERM CARE PARTNERS, LLC

P.O. Box 797
Greenland, NH 03840-0797
Phone: 800-LTC-FEDS
Website: www.ltcfeds.com

*Long-term care insurance coverage for federal employees and annuitants, retired and active uniformed service members and their qualified relatives. For more information refer to the **Long-Term Care Insurance** section in this booklet.*

MEALS ON WHEELS ASSOCIATION OF AMERICA

203 South Union Street
Alexandria, VA 22314
Phone: 703-548-5558
Website: www.mealsonwheelsamerica.org

NATIONAL ASSOCIATION FOR HOME CARE & HOSPICE

228 Seventh Street, SE
Washington, DC 2003
Phone: 202-547-7424
Fax: 202-547-3540

NATIONAL ASSOCIATION OF NUTRITION AND AGING SERVICES PROGRAM

1612 K Street, NW
Suite 400
Washington, DC 20006
Phone: 202-682-6899

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OTHER RESOURCES

THE NATIONAL ASSOCIATION OF PROFESSIONAL GERIATRIC CARE MANAGERS (NAPGCM)
3275 West Ina Road, Suite 130
Tucson, AZ 85741-2198
Phone: 520-881-8008
Fax: 520-325-7925

For a free listing of geriatric-care managers in your area, send the name of the county, state and nearest metropolitan area, plus a self-addressed, stamped envelope.

NATIONAL COUNCIL ON AGING
251 18th Street South, Suite 500
Arlington, VA 22202
Website: www.ncoa.org

NATIONAL FAMILY CAREGIVERS ASSOCIATION
10400 Connecticut Avenue, Suite 500
Kensington, MD 20895
Phone: 1-800-896-3650
Website: <https://www.caregiveraction.org/>

NATIONAL HOSPICE & PALLIATIVE CARE ORGANIZATION
1731 King Street
Alexandria, VA 22314
Phone: 800-338-8619
Website: www.nhpco.org

NATIONAL INSTITUTE ON AGING
Building 31, Room 5C27
31 Center Drive, MSC 2292
Bethesda, MD 20892
Phone: 301-496-1752
Phone: 800-222-2225 (publications)

NATIONAL INSTITUTE ON DISABILITY AND REHABILITATION RESEARCH AND ABLE DATA
Phone: 800-227-0216 or 301-608-8998, senior services
Government funded contractors provide information about research, services and organizations. Able Data is a database of 35,000 products for the disabled.

NATIONAL RESOURCE ON SUPPORTIVE HOUSING & HOME MODIFICATION
3715 McClintock Avenue
Los Angeles, CA 90089-0191
Phone: 213-740-1364
Website: www.homemods.org

NATIONAL SHUT IN VISITATION SOCIETY
237 Franklin St.
Reading, PA 19602
Phone: 610-373-5579

NURSING HOME DATABASE CERTIFIED MEDICARE & MEDICAID
Phone: 800-633-4227
Website: www.medicare.gov (click on Nursing Home Compare)
Provides nursing home summary information about each facility.

SOCIAL SECURITY ADMINISTRATION
Office of Public Inquiries
Windsor Park Building
6401 Security Boulevard
Baltimore, MD 21235
Phone: 800-772-1213
Website: www.ssa.gov.

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INFORMATION ASSISTANCE/PUBLICATIONS

The following is a list of organizations that provide assistance to find information and/or free or low-cost publications on such topics as health, housing and insurance for seniors.

AMERICAN ASSOCIATION OF RETIRED PERSONS (AARP)

601 E Street, NW
Washington, DC 20049
Phone: 888-687-2277

Website: www.aarp.org

Publication: *"Planning for Long-Term Care—Your Resource Guide"*, printed in 2010

HEALTH CARE FINANCING ADMINISTRATION

6325 Security Boulevard
Baltimore, MD 21207
Phone: 410-966-3000

Website:

<https://www.federalregister.gov/agencies/health-care-finance-administration>

Publication: *"Choosing a Medigap Policy" is a free Guide to Health Insurance for People with Medicare.*

THE NATIONAL INSURANCE CONSUMER HELPLINE

Phone: 800-942-4242

Publications: *"Guide to Long-Term Care Insurance" is a free. They also provide a variety of free and low-cost materials, written in layman's terms, to help educate the consumer on the insurance industry.*

NATIONAL ASSOCIATION OF INSURANCE COMMISSIONERS (NAIC)

2301 McGee Street Suite 800
Kansas City, MO 64108-2662
Phone: 816-842-3600

Website: <https://www.content.naic.org>

Publications: *NAIC Consumer Guides can be ordered free on such topics as: "A Shopper's Guide to Long-Term Care Insurance" and "Choosing a Medigap Policy." Guides are also available for Download on a variety of topics including: "Life Insurance Buyer's Guide."*

NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS (NAIFA)

2901 Telstar Court
Falls Church, VA 22042
Phone: 877-TO-NAIFA

Website: www.belong.naifa.org

Publications: *NAIFA provides free Consumer Articles and Guides on a wide variety of Health Insurance topics.*

NATIONAL INSTITUTE ON AGING

Building 31, Room 5C27
31 Center Drive, MSC 2292
Bethesda, MD 20892

Phone: 301-496-1752, 800-222-2225 (to order publications)

Website: www.nia.nih.gov

Publications: *A source for information on aging.*

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SUGGESTED READING LIST

The following is a list of reading material dealing with different aspects of aging.

ON YOUR OWN

Armstrong, Alexandra and Mary R. Donahue
Chicago: Dearborn, 2000

ELDER CARE 911: THE CAREGIVER'S COMPLETE HANDBOOK FOR MAKING DECISIONS

Beerman, Susan and Judith Rappaport
Amherst, NY: Prometheus Books, 2008

AGING AND MENTAL HEALTH

Butler, R. N., Myrna M. Lewis, and Trey Sunderland
Austin, TX: Pro-Ed, Inc., 2005

THE LOSS OF SELF: A FAMILY RESOURCE FOR THE CARE OF ALZHEIMER'S DISEASE AND RELATED DISORDERS

Cohen, Donna, and Carl Eisdorfer
New York: Norton, 2001

RECENT ADVANCES IN PSYCHOLOGY AND AGING

Costa, Paul and Ilene Siegler
Boston: Elsevier, 2004

CARING FOR PARENTS: THE COMPLETE AARP GUIDE

Delehanty, Hugh and Elinor Ginzler
New York: AARP/Sterling, 2008

A BETTER WAY OF DYING: HOW TO MAKE THE BEST CHOICES AT END OF LIFE

Fitzpatrick, Jeanne and Eileen M. Fitzpatrick
New York: Penguin Books, 2010

THE AGING NETWORK: PROGRAMS AND SERVICES

Gelfand, Donald E.
New York: Springer, 2006

WIDOW TO WIDOW: THOUGHTFUL, PRACTICAL IDEAS FOR REBUILDING YOUR LIFE

Ginsburg, Genevieve
Cambridge, MA: Da Capo/Life Long Press, 2004
THE 36 HOUR DAY: A FAMILY GUIDE TO CARING FOR PERSONS WITH ALZHEIMER'S DISEASE, RELATED DEMENTING ILLNESSES, AND MEMORY LOSS IN LATER LIFE

Mace, Nancy and Peter V. Rabins
New York: Warner Books, 2006

LETTING GO WITH LOVE: THE GRIEVING PROCESS

O'Connor, Nancy
Tucson, AZ: La Mariposa Press, 2007

ALZHEIMER'S DISEASE: A GUIDE FOR FAMILIES AND CAREGIVERS

Powell, Lenore and Katie Courtice
Cambridge, MA: Perseus Publishers, 2002