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A CLOSER LOOK

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# Spectrum of available care: Other options to consider

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To find eldercare services, call the Eldercare Locator at 800 677-1116, which will put you in touch with the Area Agency on Aging in your community. The Triple As, as they are known, were established under the federal Older Americans Act to help people connect with services.

## Home care

You can arrange to have your relative cared for at home by a home attendant, who can be hired from a Medicare-certified agency, a licensed home health agency, or a registry. Expect to pay around \$20 an hour for a worker from a Medicare-certified agency and less from others. Home care keeps people at home, so there may be little social stimulation. And if your relative needs close to 24-hour supervision, this option can become as costly as nursing-home care.

## Adult day care

This is a good option to consider in conjunction with home care. If your relative has a caregiver for the evening, adult day care may be the ideal solution. Clients attend a program for several hours during the day and participate in activities, including music and exercise, that are appropriate for their condition. Most people pay for adult day care out of their own pocket; there is little public funding available. Find out if your community has a Program for All Inclusive Care for the Elderly (PACE), which provides an integrated approach to long-term care for those eligible for Medicaid, and others who buy into the program. PACE is basically a day-care arrangement, where participants receive personal-care services, social interaction, and medical care. The coordination of services through PACE saves you a lot of the hassle of seeking them on your own. To find out if there is a PACE program in your area, call the National PACE Association at 703 535-1565.

## Continuing-care communities

For those with significant capital, continuing-care retirement communities (CCRCs) offer a continuum of care on the premises. Residents may buy or rent a living unit while they can still live independently. CCRCs often have assisted-living wings and nursing facilities available for residents who temporarily or permanently need help with activities of daily living. Some CCRCs require a large initial fee in addition to monthly fees.

## Section 202 housing

If your relative's income is low, consider putting him or her on the waiting list for government-subsidized housing units found in some communities. Most units are available under what is called Section 202 housing (the name comes from the 1959 Housing Act).

Facilities vary considerably in the amenities and the ambience of the buildings. Many have communal dining rooms that serve one or two meals a day. Some have limited or no medical personnel. You may have to stitch together your own package of services. Only about one-third of Section 202 projects have coordinators on the premises to help find services for their residents.

## **Board-and-care homes**

These are found in every state, and most states require them to be licensed, regulated, or certified in some way. Sometimes Medicaid pays for care in them. People who have space in their homes obtain a license and provide care and assistance with activities of daily living to four, five, and sometimes more residents. Your local Triple A can help you find one. These are much less expensive than some of the fancier assisted-living facilities.

## **Nursing homes**

Useful information is available from the federal and state governments to help you in your search for a nursing home. We have used this data to flag problematic nursing homes in each state, and we note them in the Consumer Reports Complete Guide to Health Services for Seniors. Many nursing-home residents pay for their care by spending down; that is, they use up virtually all of their income and all of their assets to pay for care before Medicaid steps in to pay the bills. Medicaid pays for about half of all nursing home stays.

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