



# SOARING

*A Publication of Mennonite Home Communities*

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# RETIREMENT TRANSITIONING



### On the Cover

**Ivan Sellers**, a Woodcrest Villa resident, talks with **Mindy Morrie**, Admissions Associate, and his sister, **Norma Varner**. Norma recently transitioned from Woodcrest Villa to Lancaster General Hospital, then to Wissler Run rehabilitation household, and finally to her new home in Assisted Living at Mennonite Home. Social workers and admissions staff helped ease and guide the transitions.

### SOARING COMMITTEE MEMBERS:

- Greg Pierce**, Editor
- Nelson Kling**
- Jennifer Murr**
- Denise Paterson**
- Nan Rush**
- Betty Ann Smith**
- Jennifer Walters**

# Myths &

Here are a few common misunderstandings

### MYTH #1:

**I understand Medicare will pay for my skilled nursing care for at least 100 days and maybe longer.**

Congress designed Medicare to cover short-term stays in a healthcare center. The maximum number of days covered is 100, however it is almost impossible to receive benefits for 100 consecutive days. To be eligible for the Medicare program, a physician must prescribe some type of skilled service, such as therapy. When this service is no longer needed or the resident has reached a plateau (cannot improve any further), Medicare eligibility ends.

### MYTH #2:

**Once I move into a facility, my ability to remain active is severely limited.**

Mennonite Home Communities provides a wide range of physical and mental activities for their residents. The Dakim BrainFitness system provides mental stimulation while the Wii provides a variety of physical activities. An exercise room with modern equipment awaits those who enjoy more of a physical challenge. Group activities include bingo, games and programs provided by staff or external resources. A craft room is available for residents interested in using their creative skills. The resident has the choice to remain as active as they desire.

### MYTH #3:

**As a resident, it is difficult for family and friends to visit.**

All residents are encouraged to have their family members and friends be an active part of their life in the community. Visiting hours are open and no appointments are required. Although our doors are locked at night for safety, staff will respond to the doorbells at any time.



**Burnell Rebert** enjoys his daily BrainFitness session.



Jackson Run resident **Beryl Wible** visits with **Brané Nichols**, Household Coordinator and **Zoie**.

# Realities

concerning life and care at Mennonite Home.



Wii Bowling Champion **Ruth Marsh** prepares for another strike.



**Debra Kruger**, direct care worker, visits with **Marian Sanders** and **Luke Shuler**.

## **MYTH #4:**

**The information provided on the application (medical & financial) is available to all staff.**

HIPPA regulations require a facility to protect personal information. Medical staff have access to clinical information as needed. Financial information is strictly limited to key staff professionals.

## **MYTH #5:**

**I understand you will need a payment before I move into the facility.**

No payment is due before admission. We bill on a monthly basis for services rendered.

## **MYTH #6:**

**If I enter the health center on three (3) separate occasions, I will become a permanent resident.**

The goal is to provide therapy and other services that will return a resident to their apartment or home. A discharge plan is always part of the care plan. Multiple visits may occur, and if the resident is able to function independently, they are encouraged to return to their residence.

## **MYTH #7:**

**My tax advisor says I may give each child and grandchild \$13,000 every year.**

That is true only from the Gift Tax perspective. However, if you should need to apply for Medicaid within the next five years, Pennsylvania could deny you eligibility because you gave away assets that should have been available for your own care.

## Home Care Licensure Update

In July 2006, Governor Ed Rendel signed a bill to include home care agencies as part of the amended **Pennsylvania Health Care Facilities Act**. In December 2009, the Department of Health published home care regulations, effective June 30, 2010.

This legislation covers home health providers and residential living direct care workers. It protects residents of residential living in a CCRC as well as persons living in their home. The regulations require staff background checks, education and insurance coverage for any staff providing services. It insures that consumers receive advanced notification of the name of direct care workers, time of service, and the rate charged for any service rendered.

Woodcrest Villa is licensed and fully compliant with this consumer protection law.



– **Nan Rush**, Vice President  
Residential Living

# Six Smart Mother Ne - About Long T



"The new options for Long Term Care Insurance are attractive. If care is needed for a long time, the cost can be financially ruinous. My husband was incapacitated by Alzheimer's Disease for ten years. His Long Term Care policy considerably eased the financial burden. I would encourage everyone to investigate that type of insurance when planning for their financial future."

— **Janice Schlimm**,  
Woodcrest Villa resident

## LTCI RECOMMENDATIONS

- Consider your family medical history.
- Everyone needs inflation protection.
- Get coverage for Home Health, Adult Daycare, Assisted Living and Skilled Nursing services.
- Consider all the available riders closely.
- Consider multiple policies to achieve new benefits.
- Determine if a hospital stay is required to trigger

**Jenn Murr**, LPN  
Clinical Coordinator,  
converses with  
residents **Louise  
Newswanger** and  
**Kay Adelman**  
about Long Term  
Care Insurance.

Honestly, Mom may have mentioned the basics about Long Term Care Insurance (LTCI). These policies accumulate premiums over years to pay for home-health services, Assisted Living and Skilled Nursing care. Four very important options (in addition to age and health) determine your premium:

- The Elimination Period is the time you must wait for coverage to begin. You may agree to pay for the first 60 or 90 days of service out of pocket.
- The Maximum Daily Benefit defines the amount of coverage per day.
- The Maximum Lifetime Benefit defines the total dollar amount or years of coverage.
- The Cost-of-Living or Inflation rider provides protection against cost increases.

A team of LTCI experts and Mennonite Home staff offered their best perspectives in a recent Question and Answer forum.

### Question 1) Why waste my money on a "use it or lose it" product?

Answer: Rosanne Schaefer, CLTC, CSA, LTC Financial Partners, explains, "Shared premium riders for spouses allow a husband and wife to draw on the benefits of each others' policy. If one dies prematurely or uses only a small amount of care, the balance left in their coverage would go to the surviving spouse." Mike Baker, Target Insurance Services, explained another option, "A Linked Benefit life insurance policy with LTCI options provides very attractive benefits. Investing \$100,000 at retirement can create either a \$191,398 death benefit OR a pool of \$574,000 for LTCI benefits."



# 5 Things Your Never Told You!

## Term Care Insurance

**FACT:** Chance of having a fire in your home ~ less than 1%  
Chance of needing long term care or home health services ~ 70%

### Question 2) What is the state of Pennsylvania doing to encourage consumers to buy LTCI?

Answer: Mike Baker answers, "The PA Long Term Care Partnership program (Act 40) encourages Pennsylvanians to purchase Long Term Care Insurance by providing asset protection equal to the benefits paid by the policy. Dollar-for-dollar asset protection means a person whose qualifying policy paid for \$100,000 of care could keep \$100,000 in assets if they need to apply for Medical Assistance in the future. PA mandates a cost-of-living rider for these policies."

### Question 3) Why should I buy LTCI if I plan to enter a faith-based Continuing Care Retirement Community?

Answer: John Miller, MHC Chief Financial Officer clarifies, "Some CCRCs now require LTCI and others are considering this requirement. A good LTCI policy gives our residents the flexibility to maintain the greatest independence and delay higher-cost levels of care. You can use home health providers to delay the need for Assisted Living. People should consider buying coverage while they are healthy and rates are more affordable."

### Question 4) When should I think about buying LTCI?

Answer: Greg Pierce, MHC Director of Development and a LTCI policyholder, suggests buying LTCI in your mid-fifties. Most LTCI companies allow you to pay for your coverage over ten years. If that coincides with your last years of work, you reap three great benefits: 1) Your exposure to rate increases is limited. 2) You do not carry the expense of LTCI into retirement. 3) A paid-up LTCI policy may be considered an asset by your CCRC for qualifying to enter their facility. Of course, you may become uninsurable at any time.

### Question 5) Are there any other new developments we should watch?

Answer: David 'Ski' Skalski, CLU, CLTC, Engle-Hambright & Davies Advisory Services said, "The Pension Protection Act now allows annuity rollovers to pay for LTCI with tax-leveraged dollars. You can fully exchange an old annuity for a new hybrid insurance or annuity contract that also includes long term care, so that you can withdraw your money tax-free, as long as it is being used for long term care."

Answer: Nelson Kling, MHC President, "Keep your eye on the Community Living Assistance Services and Supports (CLASS) Act, a component of the new national health insurance reform. This Act allows working people to pay premiums for a minimum of five years and achieve a modest daily benefit, projected to be \$50 for home health services and \$75 for institutional care. The Secretary of Health and Human Services has two years to work out the details. Benefits can only be paid from premiums received, not from the general treasury."

### Question 6) Are there benefits for small business owners to consider?

Answer: David 'Ski' Skalski explained, "Business owners can deduct long term care premiums as business expenses (tax free) and they can include their spouses too! If structured properly, they can even have it "paid-up" by the time they retire or sell their business. Finally, it is highly-selectable; they can choose the employees they wish to cover."

In conclusion, Long Term Care Insurance is a valuable tool in planning for your retirement needs. The government is offering various inducements so that everyone will take personal responsibility for each individual's health care needs. Please discuss the options with a knowledgeable insurance broker who works with multiple companies.

**Average Length  
of Stay at  
Mennonite Home**

Rehabilitation:  
1 month

Skilled Nursing:  
9 months

Dementia Care:  
23 months



# John & Jean Gunn, Philanthropists

*A Conversation with Greg Pierce,  
Director of Development*

John and Jean Gunn moved into Woodcrest Villa in 1994. I recently talked with John about his philanthropy and that of his late wife. I explained to John, *“This fall the Development Department will publish a list of Memorial and Honor gifts. That report will show that you and Jean gave more charitable gifts than any other donors and that many memorial gifts were received in Jean’s memory. Why do suppose that is?”*

John replied, *“Well, Jean and I lived lives of service and realized the importance of giving back to important charities. We always tried to give a memorial gift for any of our friends at Woodcrest. Earlier in our lives, Jean was a dental hygienist and was very concerned about under-privileged kids who needed dental work. She found great satisfaction in encouraging donors to provide money for their care.”*

John continued, *“Frankly, we always felt blessed to live at Mennonite Home Communities; it is a real haven and people should routinely support its mission. We have watched management add beautiful features like the Country Store, the Café and the Wellness Center. When Jean needed more care, she moved into Goods Run household. She was surrounded by beautiful décor and dedicated staff. Of course Dr. Kraybill and his assistant, Dalynn Miller, provided superb medical care.”*

I asked John, *“How do you feel about receiving gifts in Jean’s memory and seeing her gold leaf on the Tree of Life?”* John replied, *“I was humbled by the many gifts and appreciated that people followed our suggestion. A number of people run out of money at Mennonite Home. Medicaid does not even begin to cover expenses. The Tree of Life is a wonderful tribute to those who have lived at Mennonite Home. I love reading the individualized messages. I’m sure Jean is pleased with her gold leaf!”*

*“Do you have any other thoughts?”* I asked. John reflected and replied *“Yes – there are a number of real angels among the volunteers and the staff. Honor gifts are a great way for the residents or family members of residents to say a special thanks.”*

John and Jean Gunn have been two of the blessings of my six-year tenure at Mennonite Home Communities. Jean will be sorely missed but gratefully remembered. Thank you, John and Jean, for your most generous hearts.



**John Gunn** in front of the Tree of Life at Mennonite Home.

# Securing Our Second Century

## Capital Campaign

**MENNONITE HOME COMMUNITIES HAS SERVED THE NEEDS OF OLDER ADULTS FOR 105 YEARS. THE MISSION REMAINS TO PROVIDE COMPASSIONATE CHRISTIAN SERVICE TO THOSE IN OUR CARE. THE BOARD OF DIRECTORS STRIVES CONTINUOUSLY TO IMPROVE THE FACILITIES AND SERVICES TO MEET THE HIGHEST STANDARDS.**

Recently we implemented the Person Centered Care philosophy in entirely new physical settings called households of sixteen to twenty-two residents. Person Centered Care focuses on the needs and desires of residents, providing increased options and enhanced privacy. This philosophy increases resident satisfaction and enhances staff fulfillment, because it fosters closer relationships within a household.

*Four elements create a physical environment that promotes Person Centered Care.*

- 1) **HOUSEHOLDS:** Health care households of 16 to 22 residents provide greater privacy, more choices and more space for family visits.
- 2) **REHABILITATION:** The Wissler Run rehabilitation household promotes enhanced care focused on the unique needs of short-term residents needing therapy until they return to Woodcrest Villa or their community homes.
- 3) **VISITOR ENTRYWAY:** The Visitor Entryway separates visiting families from the service elevators, providing greater privacy for the household residents.
- 4) **FACADE:** Our new facade eliminates the old institutional appearance.

Clearly, Person Centered Care households are a tremendous asset to our residents, their families, and all Lancastrians who require short-term rehabilitation or extensive services. As throughout our history, we need the philanthropic support of those who care about the highest level of care for older adults.

We proudly announce the capital campaign, "Securing our Second Century," has exceeded the \$1,250,000 that our consultants projected we might raise. We surpassed this milestone in spite of a deep and unforeseen economic downturn. We are deeply grateful to the Board, employees, and generous donors who have brought us to this point.

We have set a new stretch goal of \$1,500,000 that we can reach with the generous help of the community. If you would like to add your personal gift to the growing list of supporters, please contact Greg Pierce at 717.390.4903 or use the attached envelope.



## Mennonite Home Communities

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If you would like to receive information about **Residential Living at Woodcrest Villa**, call Linda at 717.390.4103.

If you would like to receive information about **Assisted Living or Health Care at Mennonite Home**, call Mindy at 717.390.7979.

If you wish to have your name removed from our mailing list, call Betty Ann at 717.390.4105.

## Volunteer Connection: Assisted Living Volunteer Gives Back to Her Community

Did you realize that our residents also volunteer, frequently taking their skills back out into the local community? Miriam Latshaw is one great example.

Miriam explains her history of volunteering. *"I first started volunteering in the evenings at Philadelphia hospitals approximately 15 years ago. The hospital setting appealed to me because I had three aunts who were nurses. Also, I just like to help people."*

About ten years ago, Miriam attended training through the Red Cross in preparation for her responsibilities at Lancaster General Women & Babies Hospital. Miriam drives herself the short distance to the hospital each week. She performs various tasks such as delivering flowers, preparing



**Miriam Latshaw**  
Community Volunteer

charts, transporting lab specimens and guiding visitors within the hospital.

Kathy Maule, Volunteer Coordinator for MHC, encouraged Miriam to become a "Friendly Visitor" for MHC residents. Miriam explains, *"Many residents of Mennonite Home do not have local family. I visit with six to eight residents each week, letting them know someone cares. They share stories of their holiday traditions and experiences of their earlier years. It is quite fascinating and they appreciate the attention!"*

Moving to Woodcrest Villa, and then Anderson Run at Mennonite Home, has not interfered with Miriam's passion for volunteering. She finds that volunteering is the perfect compliment to retirement.