



The CalPERS Long-Term Care Program by the Numbers:

130,242 total active participants

\$4.2 bil fund balance

\$2.1 bil total benefits paid since program began

\$281 mil benefits paid in 2016

\$336 mil total premiums received in 2016

\$2,584 average annual premium

Numbers rounded, current as of December 31, 2016

New California Regulations for the Delivery of Home Care Services

Since January 1, 2016, most entities providing services to California residents in their home are required to be licensed by the State of California.

This regulation, AB-1217, was passed to enhance consumer protection for elderly and disabled persons who need Home Care Services, defined under the regulation to include the following, often referred to as “custodial care” services:

- bathing
- dressing
- feeding
- exercising
- personal hygiene and grooming
- transferring
- ambulating
- positioning
- toileting and incontinence care
- housekeeping
- assisting with medication that the client self-administers
- meal planning and preparation
- laundry
- transportation
- correspondence

- making telephone calls
- shopping for personal care items or groceries
- companionship
- supervision due to cognitive impairment

If you choose to use an independent provider, whether licensed or not, it is critical that you obtain and abide the terms of the CalPERS LTCP Independent Provider Packet when employing your independent provider.

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Preparing for a Hospital Stay

Research has shown that more than 30% of older adults discharged from the hospital are readmitted to the hospital within 30 days because of complications. If your doctor has recommended treatment requiring a hospital stay, or if you are living at home with a chronic illness or disability that may result in periodic hospital stays, there are things you can do to prepare for those stays.

Make a checklist of things to do, questions to ask, and items you will want to have with you in the hospital. Share the checklist with a family member or friend. Preparing ahead for a planned or unplanned hospitalization can improve your odds of a successful discharge and recovery at home.

Here is a suggested checklist:

Learn about the hospital's policies and procedures:

- Items you can bring with you and what will be provided for you in your room
- How you will get telephone or TV access so that you don't have to spend a day or two after you are admitted waiting for those services to get set up

- Visiting hours, how many visitors you can have at once, and accommodations for overnight guests, if allowed
- If your stay is planned, ask if you can pre-order your first day's meals so that your menu isn't chosen for you

Think about the room type you prefer:

- If you would like a private room, find out if the hospital has them and what you might need to do in advance to obtain one. If your health insurance won't cover private room charges, be prepared for any additional out-of-pocket costs

Bring the basic paperwork and documents you will need:

- A valid photo ID
- Your health insurance, Medicare, or Medicaid/MediCal card
- A health plan referral or hospital authorization form, if needed
- Your power of attorney form and healthcare proxy form (HIPAA form) that will allow a loved one to talk to your doctors and nurses about your care and your condition. If you don't have a healthcare proxy or HIPAA form, be sure to ask for one when you are admitted to the hospital so that your advocate can freely discuss your care with your doctors and nurses.
- A small amount of cash, a check, or a credit card to pay for services not covered by insurance (such as telephone or television)
- An advance directive (living will) and health care proxy documentation
- An up-to-date list of all your current medications (and doses), the names and contact information for your care providers, and a primary family contact person

Make a checklist of things to do, questions to ask, and share it with a family member or friend.

For your personal comfort and convenience, consider also bringing:

- Personal care items such as soap, shampoo, toothbrush, and toothpaste
- Pajamas, bathrobe, and slippers (non-slip!)
- Glasses, dentures, hearing aids, or any other assistive devices you normally use
- Items for your enjoyment and entertainment like books, magazines, crossword puzzles, and hand-held video games
- A small flashlight to keep at your bedside
- A small notebook to jot down questions for the doctor during his or her daily rounds
- An inexpensive radio
- Special photos or family drawings to make your space more home-like

If your hospital allows the use of electronic devices, feel free to bring needed devices (CD player or iPod – with headphones so you don't disturb your roommate) and chargers. Keep in mind that few hospitals provide a secure locked place for you to store those items when you are not in your room. Think about asking family or friends to

bring you those items when they come to visit, then take them with them when they leave. Make sure everything that you bring to the hospital is clearly labeled with your name.

Also consider that there are a number of items that hospitals typically ask that you not bring:

- Jewelry, large amounts of cash, and other valuables
- Medicines from home (prescription or over the counter)

Make arrangements for your absence from home:

- Suspend your newspaper and mail temporarily or ask a neighbor to bring in the mail and newspapers.
- Make sure a neighbor or family member has a key in case your house needs any tending to while you are in the hospital or if you find you left something behind.
- If you have pets, be sure to make arrangement for their care.
- Pay bills that will be due during your stay or prepare them for mailing by a family member or friend.

Ask about your care and treatment specifics:

- Talk with your primary care doctor or surgeon about what to expect in terms of tests and procedures, what you can expect in terms of pain and follow-up care, and how long you should expect to be in the hospital. Ask if you will be discharged to home or to a rehabilitation or nursing home.

- Find out what time hospital doctors or your own doctor generally make their morning rounds. It is helpful to have a family member or friend with you so that they can also hear what the doctors have to say.
- If you want your loved ones to be involved with your care, find out how family members can call in to the nurses' station and what releases or forms you need to fill out in order for the nurses to talk freely with them and keep them apprised of your health status.

Ensure your doctor or surgeon gives you a list of post-discharge instructions and follow-up care, including:

- New medications you will be taking and pre-hospital medications you should stop
- Home care needs, such as assistance to bathe, dress, and use the toilet or to dress wounds or care for an incision
- When you can resume driving
- Will it be safe to be home alone
- Equipment needs, such as a walker, wheelchair, oxygen
- Therapy – either in-home or outpatient
- Follow-up visit with the doctor
- Special diet, if any

References

Preparing for Your Hospital Stay. University of Chicago Medicine, <http://www.uchospitals.edu/visitor/for-patients/visit/stay.html>
Preparing for Admission at the Cleveland Clinic, <http://my.clevelandclinic.org/patients-visitors/prepare-appointment/admissions>



Heart Health

In an average lifetime, the human heart beats about 2.5 billion times. Many, perhaps most of us, think little about the health of our heart until something goes wrong.

When the heart stops, its essential functions, among them the continuous flow of oxygen, fuel, or hormones and its role in disposing of metabolic waste products like carbon dioxide, fail. Despite all of the advances in heart health over the past 50 years, heart disease remains the leading cause of death in the USA.

You may think that heart disease is typically a man's problem. The truth is that heart disease is the leading cause of death for African American and white women in the United States, and causes the same number of deaths as cancer for Hispanic women. For Native American and Native Alaskan women, heart disease as the cause of death is second only

to cancer. However, even if you were born with "unlucky genes" and a family history of heart disease, there are things you can do to keep your heart healthy for a long time.

This article, with information from the Federal Drug Administration and from Harvard Health Publications, will focus on topics important to master in order to take control over your heart health:

- Committing to a heart healthy diet
- Making exercise part of your routine
- Managing your chronic health conditions
- Considering whether an aspirin a day is right for you
- Recognizing the signs of a heart attack



Commit to a heart healthy diet.

They say that you are what you eat and that's definitely so when it comes to diet and heart health. Learn to read nutrition labels on packaged and prepared foods and select those that are low salt or low sodium and do not contain trans-fats, which will appear on the label of "partially hydrogenated oils." Trans-fats have been implicated in higher rates of atherosclerosis and heart disease. In addition, avoid foods with added sugar, including glucose, fructose, sucrose, and corn syrup. Maintaining a healthy weight and a diet high in vegetables, fruits, and nuts are important for heart health.



Make exercise part of your routine.

Exercise is an important part of maintaining your overall health, not just your heart health. If you don't already have one, consider buying a fitness tracker or install a fitness app on your smart phone. Talk to your health care provider about your exercise plan and set reasonable goals for the number of daily steps you'll take, your heart rate, your calorie intake, the number of stairs you climb, etc. Getting real time information on your progress toward those goals can be tremendous reinforcement. Start slow and work up to 10,000 steps a day. Your heart will thank you and so will your brain, muscles, and other essential organs.



Manage your chronic health conditions.

The medical literature is replete with scientific studies that document that your risk of heart disease is increased if you have high blood pressure, diabetes, or high cholesterol. Taking your medications as directed, seeking regular medical follow-up, and regularly monitoring your blood sugar and blood pressure will reduce your risk of damage to your heart and blood vessels.

Women with chronic diseases who are pregnant should take special care of their chronic conditions during the pregnancy and should be closely managed by their physicians.

While many chronic diseases are well managed on medication, medication can have its own complications. If you have high cholesterol or high levels of other lipids, learn about the risks and benefits of taking statin medicines to treat this condition. You should know your cholesterol level as well as the levels of other lipids such as low density lipoprotein (LDL), high density lipoprotein (HDL) and triglycerides and work with your health care practitioner to keep them in a health range.



Is an aspirin a day right for you?

Ask your health care provider about taking a daily aspirin! While aspirin may help prevent heart attack or stroke, it is not right for everyone. Don't start taking a daily aspirin without your health care provider's advice. If you receive advice to take a daily aspirin to protect your heart and blood vessels, ask your health care provider:

- **What dose** of aspirin you should take, for instance 81 mg, which is a "baby" aspirin?
- **What type** of aspirin should you take, for instance, should you take a buffered aspirin?
- **How often** you should take aspirin?
- **How long** you should take aspirin?

You should know that some products combine aspirin with other ingredients and are not meant for

There are things you can do to keep your heart healthy for a long time

long-term use. Tell your healthcare provider about all of the medicines and supplements you take. Your risk of bleeding may be higher if you use aspirin while also taking certain medicines, vitamins, or herbs.



Recognize the signs of a heart attack.

While crushing chest pain or pressure is a classic sign of a heart attack, it's important to know that the signs of a heart attack can be different for women than they are for men and that a person having a heart attack may have one or more, or none, of these listed symptoms:

- Chest pain (heavy ache or pressure)
- Pain in your upper body (arms, neck, jaw, back or upper stomach)
- Shortness of breath
- Breaking out in a cold sweat
- Unusual or unexplained tiredness
- Feeling dizzy or light-headed
- Feeling sick to your stomach (nausea)

If you think you or someone near you is having a heart attack, call 911!



Wellness: Dementia Prevention

The bad news is that the silent dementia epidemic is growing: 1,270 times a day – every 68 seconds – someone in the U.S. develops Alzheimer’s disease, according to the Alzheimer’s Association. One in three seniors will die with Alzheimer’s or another type of dementia. And the aging of the baby boomer generation dramatically increases the number of individuals who may end up with Alzheimer’s and other forms of dementia.

The good news is that studies show regular physical exercise may be a beneficial strategy to lower your risk.

Evidence from several research projects suggests that **exercise may directly benefit brain cells** by increasing blood and oxygen flow. Even stronger evidence suggests exercise may protect brain health through its proven benefits to the cardiovascular system — for example, lower blood pressure, lower blood glucose, lower cholesterol and other lipids. Because of the known cardiovascular benefits, a medically approved exercise program is a valuable part of any overall wellness plan.

Research also suggests that diet may have a significant impact on brain health, again, through its effect on the cardiovascular system. The best current evidence suggests that heart

healthy eating patterns, such as the **Mediterranean diet, also may help protect the brain.**

A Mediterranean diet includes relatively little red meat and emphasizes whole grains, fruits and vegetables, fish and shellfish, nuts, olive oil and other healthy fats.

Research shows that lifestyle choices such as physical activity, diet, mental exercise and engagement in life may support brain health and prevent dementia

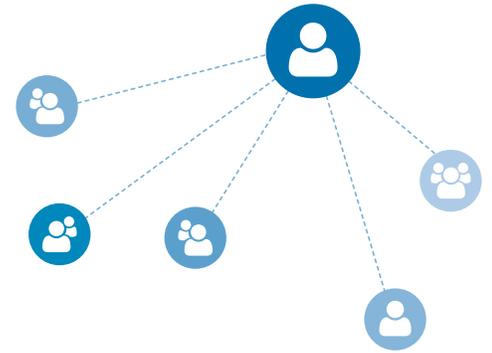
Clinical studies have found that **maintaining strong social connections and keeping mentally active can also lower the risk of cognitive decline.** Though the science behind this premise is developing, some experts believe that social and mental stimulation protects the brain. A large recent research study in the United States showed that individuals who actively “trained” their brain with Internet-based programs experienced lower rates of dementia.

Dementia is the most common cause of claims made to the CalPERS Long-Term Care Program. Although a cure for this disease has yet to be identified, research shows that lifestyle choices such as physical activity, diet, mental exercise and engagement in life may support brain health and prevent dementia as we age. Many of these lifestyle changes have been shown to lower the risk of other diseases, such as heart disease, diabetes and stroke. Healthy lifestyle choices can improve your health and may even protect your brain—is there any good reason for you to not to start making these changes today?

For more information about Alzheimer’s disease, visit www.alz.org.

Expanded Eligibility

Did you know that CalPERS Long-Term Care (LTC) eligibility extends to more than just California Public Employees and retirees? Your immediate family members — spouses, siblings and adult children — were already eligible to apply for coverage.



Now, CalPERS LTC eligibility criteria is expanded to include any former California Public Employees and their immediate family members, including grandparents, grandchildren, nieces, nephews, aunts, uncles, sons-in-law, daughters-in-law, brothers-in-law, and sisters-in-law. Family members are

eligible even if the public employee who makes them eligible for CalPERS LTC doesn't apply for coverage.

This expansion provides an opportunity for even more people to find the peace of mind available with CalPERS Long-Term Care.

If you have any questions about applying for coverage, or you want to find out if you or someone you know is eligible to apply, please call the CalPERS Long-Term Care toll free at **(800) 908-9119**, Monday through Friday, 8:00 a.m. to 5:00 p.m. Pacific Time or visit our website anytime at www.calperslongtermcare.com.

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The California Home Care Services Bureau was established to administer the requirements imposed by this new regulation, and the bureau is tasked with providing information to consumers to help them locate agencies and caregivers who have met these new requirements. The California Home Care Services Bureau oversees only those entities subject to AB-1217 and not agencies and entities that are regulated by CMS (Centers for Medicare and Medicaid), referred to as Medicare or MediCal certified agencies. Home Care entities whose caregivers are independent contractors are referred to as "referral agencies" and are not subject to the new license requirements. It is important for CalPERS participants to remember that caregivers contracted with a referral agency are not eligible for coverage under the terms of the CalPERS Long-Term Care Program.

Following are key requirements under the new regulation:

- Federal and state criminal background checks
- Fingerprinting
- Tuberculosis testing
- HCS 402- Employee Dishonesty Bond

Entities licensed by the bureau are referred to as Home Care Organizations (HCO). Their employee caregivers are referred to as Affiliated Home Care Aides. Privately hired caregivers are not required to be licensed by the bureau, but may choose to be licensed. Licensed, privately hired aides are referred to as Home Care Aides. Under the terms of the CalPERS Long-Term Care Program, Home and Community Care benefits are provided only for services rendered by persons who, if required, are licensed to provide those services. Licensed Home Care Organizations and their Affiliated Home Care Aides, as well

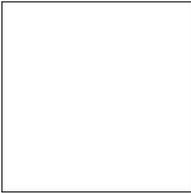
as independent Home Care Aides, meet the Program's requirements for coverage.

If you choose to use an independent provider, whether licensed or not, it is critical that you obtain and abide the terms of the CalPERS LTCP Independent Provider Packet when employing your independent provider.

Names, addresses, and contact information for licensed entities, their employee caregivers and independent licensed Home Care Aides, as well as entities and individuals who have applied for licensure, can be found on the bureau's website: <https://secure.dss.ca.gov/cclid/hcsregistry>.

If you have questions about the impact this new regulation may have on the care you already have in place or anticipate initiating, you should contact the Home Care Services Bureau at **(916) 657-3570**, or HCSB@dss.ca.gov.

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