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2015-2016 | Volume 1

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The Elder Law attorneys of Ross and Shoalmire, LLP are here to help guide clients through difficult decisions concerning health, housing, financial and legal issues. Our practice is devoted entirely to Estate Planning, Wills, Trusts, Powers of Attorney, Guardianship, Advance Directives, Probate, Medicaid/Medicare and VA benefits.

Are you concerned about not wanting to lose your independence, worry about becoming a burden on your loves ones and fear losing your life savings later in life. ... then contact Kristen Ishihara, your Longview area Ross & Shoalmire Elder Law Attorney.

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Did you know there are more people now on planet Earth over the age of 65 than there has ever been in the history of our world? Our modern age has made it possible for multiple generations of families to know and enjoy one another and for seniors to savor their retirement years without the burdens of backbreaking work. However, the joy of those retirement years can quickly vanish if a senior has an abrupt health crisis or illness. Suddenly, issues such as getting the right care and support, paying for such care and avoiding the nursing home, all while not being a burden on others, becomes a top priority for that senior. Also, a sudden health crisis can bring concerns about going broke to pay for needed care or concerns about preserving assets to pass down to the next generation.

We can help you think about and address these issues. Our goal is to help you plan, prevent and protect:

- Plan to live your retirement years on your terms, without unnecessary interference from others
- Prevent institutional care if at all possible
- Protect your assets not only from the costs of probate and taxes, but from uncovered long term care and medical costs as well

Aging Insight is an educational and information resource for seniors and their loved ones. Our goal is to help families plan for, pay for and coordinate the long-term care needs of elderly or disabled loved ones. By providing information related to health, housing, financial resources and legal needs, we want to guide you through the aging process and give you reliable resources to obtain the care you need and maintain the highest possible quality of life. Aging Insight is designed to assist families who need to respond to the current and future challenges of long-term illness and disability, including care support, estate planning, asset protection, Medicaid planning, care planning and coordination, patient advocacy and more.

Live your life on your terms...here is the information to do it!

John K. Ross IV is an Elder Law attorney and senior partner of Ross & Shoalmire, LLP Elder Law Firm. John holds a degree in Accounting from Texas State University and a Juris Doctorate from Texas Tech School of Law. John devotes his entire practice to assisting individuals with their estate planning and Elder Law needs. He is licensed to practice in Texas, Arkansas, and before the United States Tax Court. John is a U.S. Marine Corp veteran and is also an accredited Veterans Affairs attorney, a member of the National Academy of Elder Law Attorneys, a member of the Judge Advocate for the American Legion and a member of the board of directors for the Alzheimer's Alliance. John is a frequent speaker on both a local and national level, and has been quoted by such national publications as the Wall Street Journal on aging issues. John is the co-host of the Aging Insight radio program Saturdays from Noon to 1:00p.m. on 98.5 FM Texarkana and the Aging Insight television program on KLFJ-TV Channel 10 Texarkana.



Lisa Shoalmire, J.D., M.Tax. a senior partner of the Ross & Shoalmire, LLP Elder Law Firm, is a senior advocate and Elder Law attorney. Lisa's practice is centered on protecting the rights of seniors and the disabled. She holds a Juris Doctorate and a Masters of Taxation from Baylor University and a Certified Public Accounting certificate from the State of Louisiana. Lisa is licensed to practice law in Texas and Arkansas and she is a member of the Board of Directors for Opportunities, Inc. and the Texarkana Community Foundation. Lisa's unique knowledge of the interaction between special needs planning, trusts, and asset protection planning has allowed her to assist countless families in maintaining the highest quality of life for themselves or their loved ones. Lisa is also a member of the National Academy of Elder Law Attorneys. Lisa is the co-host of the Aging Insight radio program Saturdays from Noon to 1:00p.m. on 98.5 FM Texarkana and the Aging Insight television program on KLFJ-TV Channel 10 Texarkana.





Renovating the Home to Provide a Safe Living Environment

Lisa Shoalmire

In our Elder Law practice, many of our client's most pressing concern is their ability to remain in their home for as long as possible. In some cases, this desire proves to be impossible because of health issues beyond the client's control. For example, a severe stroke that causes paralysis may require almost constant attention that just cannot be provided in a home environment. However, many of our clients end up unable to continue to live at home because of preventable conditions. An example of this would be where a person's health requires they be in a wheel chair, but their household bathroom is too small and therefore inaccessible. Another example is where the house itself contains tripping hazards that lead to falls which in turn lead to long hospitalizations and possibly nursing home stays.

If a person desires to stay in their home for as long as possible, it is vitally important to make the home into a safe place that will be well suited as the person ages. Contained in this articles are suggestions and ideas that can be used now to make sure your home will be safe in the future.

One of the biggest risks to seniors is falling. In fact, falls are the leading cause of death among individuals over age 65. In an effort to prevent falling, you should consider taking any or all of the following steps:

Remove hazards around the home

- Remove all rugs, clutter, low furniture such as coffee tables and ottomans, and electrical cords that run across walkways.
- Increase the lighting in the home with stronger light bulbs and night lights, and have these controlled with remote controls or added switches for convenience.
- Remove plush carpeting and slick flooring such as tile and replace with commercial grade low-pile carpet or non-slip vinyl.
- Reduce the water temperature of the hot water heater to 120 or below.
- Replace circular door knobs with lever action handles
- Place telephones in each room and close to the ground. Also, place emergency numbers next to each phone.

Bathrooms

- Install secure grab bars in the bathtub or shower and near the toilet.
- Replace faucets with single lever controls that are easy to operate.
- Place non-slip mats on any slick standing surface.
- Consider replacing existing bathtubs with walk in tubs or showers with built-in seats.

Kitchens

- Move all items from higher shelves to lower shelves and discard stepping stools.
- Consider replacing gas appliances with electric appliances.
- Replace faucets with single lever controls that are easy to operate.

- Ensure the refrigerator shelves are accessible and remove outdated foods. Move foods to the middle so they are not too low nor too high.
- Replace any difficult to use appliance with easier to use alternatives, for example, electric can openers.

Stairs

- First of all, if you live in home with multiple stories, consider moving before your age makes these areas of the home inaccessible.
- Make sure stairways have adequate light.
- Install or reinforce handrails as necessary.
- Do not have a door that swings out over a staircase. Reinstall any such doors so that they open inward.
- Ensure steps have a non-slip surface.
- If you are a care giver for someone who may wander, consider making stairs inaccessible with locks or gates.

Living areas

- Raise the height of chairs and couches to make them easier to get in and out of.
- Use firmer cushions so that you do not sink into the furniture.
- Consider lift chairs if standing is difficult.
- Remove the wheels from any chair. If you cannot remove the wheels, discard the chair.

Bedrooms

- Your bedroom should be on the first floor of your home. If it is not, consider moving to a first floor room or remodeling to convert a

first floor space into a bedroom.

- Have a flashlight or lamp easily reachable from the bed.
- Make sure night stands are large enough for all of your bedside objects (telephone, glasses, etc.)
- Place a sturdy chair with arm rests near where you dress.
- Install night lights to provide a clear path from the bed to the bathroom at night.

Garage and outdoors

- Avoid any steps or other obstacles at the doorways. If necessary, consider installing ramps.
- There should be adequate outdoor lighting to provide clear paths.
- Trim and hedges or trees so that they do not block windows.
- Install easy to operate electric garage door openers.
- Have salt or sand available for icy conditions and a friend or neighbor willing to sprinkle it on sidewalks and driveways.
- Consider covering smooth concrete garage floors with non-slip coating and clean oil or other spills immediately.
- If yard maintenance becomes difficult, hire someone.
- Repair any cracks in the sidewalks or driveways that could cause a fall.

It is not possible to prevent all accidents. However, planning ahead can prevent many of the most common accidents, which in turn means safely staying in your home longer. Although the initial cost of some of the suggestions in this article may be significant, they pale in comparison to the cost of an extended stay in a skilled nursing center. The more you can do now to protect yourself, the better off you will be in the future.

Lisa Shoalmire
Elder Law Attorney
Accredited VA
Attorney



Ross & Shoalmire opened an office in Longview in January, 2015 with Kristen J. Ishihara serving as the lead attorney. Kristen has been practicing law in Longview since 2006. She is currently serving as the District 4 representative for the Longview City Council and active in the Zonta Club of Longview and the Junior League of Longview. Kristen and her husband Richard became involved with Special Olympics upon moving to Longview and Kristen has had the privilege of assisting several of those families in receiving guardianships for their children. It was this experience that first opened her eyes to the unique needs of adult individuals with disabilities that require a legal advocate to help navigate the legal process and also the intricate rules surrounding governmental benefits that also play a role. Those same unique needs exist for our senior population and it is a true privilege to help families and individuals navigate through these elder law issues. Ross & Shoalmire is bringing 10+ years of experience in the elder law and estate planning area to Longview and the firm is committed to providing quality service to our community. In addition to service to clients, Ross & Shoalmire is committed to providing education to the community through community awareness events and other public speaking engagements. **Basics at Brunch** will be held every 3rd Wednesday at 10:30 am at Greet Street Recreation Center- 814 S. Green Street, Longview, TX – for more information contact Kamekia@rossandshoalmire.com or 903-212-7313.

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Hospice – Common Misconceptions

By Kimberly Barbolla, D.O.

You or your loved one are at the doctor's office or in the hospital and they utter the scary word....Hospice. For many, the simple word causes them to feel frightened or hopeless. However, hospice can assist in giving yourself or your loved one a compassionate, dignified and comfortable death.

Many believe that you must be actively dying to be placed on hospice. This is not true. Many suffer needlessly for months when they could achieve symptom management long before the final moments of life. So what exactly is required for someone to be placed on hospice care? It is true, there must be a diagnosis that will lead to death if it follows its expected pathway. The person must have a life expectancy of 6 months or less. However, prognostication, or predicting how long a person has left to live, is one of the hardest parts of being a physician and especially a hospice physician. It is impossible for any person to tell you or your family member the exact amount of time they have left on this earth. The only one that knows, God, does not talk out loud. So when a physician suggest hospice, they are relying on their best "guess" based on experience, previous cases, history of a disease process or yes even sometimes their gut feeling. Sometimes we are correct and sometimes people surprise us.

Another common belief is that hospice is only for cancer patients. This is completely inaccurate. Yes, when a cancer patient has reached that point in their disease where the treatment is no longer working or they are to the point that they no longer want to pursue treatment they are hospice appropriate. However, there are many other diseases that are appropriate for hospice care as well. Some examples are end stage lung disease, congestive heart failure, end stage coronary disease, Parkinson's disease, Alzheimer's dementia, end stage kidney disease, ALS, MS and the list can go on and on. Many different disease processes can reach the point where the treatment is no longer helping or the patient no longer wants to pursue aggressive treatment. That is when it is the time to reach out and allow hospice to help give comfort.

Yet another misconception is that when you go on hospice we stop all treatment and leave the person to die. That is again totally inaccurate. We work with each patient on an individual basis to determine what medications they want to continue, which they want to stop and which ones are no longer necessary. We always continue any medications that contribute to comfort and for each disease process that list may be different. If the person gets a bladder infection for instance, that can cause discomfort, so we give the option of treating or not. It is always a personal or family decision. When I refer to symptom management what does that involve? It includes treating pain, which is a common symptom with many diseases, nausea, constipation, diarrhea, agitation, shortness of breath, chest pain and again the list can go on and on. Hospice is

about achieving comfort and compassion at the end of a person's life.

So I would ask you "what is the goal of care"? If the answer is comfort, dignity and compassion then hospice is an appropriate action to take. Be mindful that sometimes the treatment is worse than the disease and no one wants to endure more pain and suffering when it is not helping. Hospice does not mean you have given up on yourself or your family member, but instead that you want the last days on earth to be ones that are not filled with distress.



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Board certified in Internal Medicine and Hospice & Palliative Medicine

Internal Medicine practice with Good Shepherd Medical Associates in Marshall, Texas. Hospice Medical Director for Marshall Homecare & Hospice. Chief of Medicine for Good Shepherd Medical Center in Marshall, Texas. Doctor, wife, mother of seven, grandmother of 6 and motorcycle enthusiast. Became involved in hospice after losing her mother to Alzheimer's Dementia

What would you say if I asked you, “What are the most important estate planning documents that you will ever sign?” The typical answer to this question is a Last Will and Testament. But if that is how you answered the question, you would be wrong. Although Wills can be important documents for certain individuals, Powers of Attorney are an absolute requirement for any adult age person.

Many people consider themselves familiar with a Power of Attorney but may not fully understand what a Powers of Attorney can and cannot do for them and their loved ones. If you have not had the need for one, or you have one that has worked for your needs, you likely haven’t given much thought to what a Power of Attorney actually says, or should say. Many businesses or agencies accept a Power of Attorney without reading it, however, the reality is that a Power of Attorney grants you only the powers specifically outlined in the document. If you exercise a power as the agent not granted in the document, you have breached a fiduciary duty and may be personally liable. If you as the principal fail to give sufficient authority to your agent, you may hinder their ability to handle your business in a manner that serves your best interests and protects your assets. It has been our experience that far too few individuals and businesses pay attention to the language of the Power of Attorney and fully understand the consequences of what that language provides and does not provide, when it is the details of this document that give it its power.

First: What is a Power of Attorney? There are two types of Powers of At-



Powers of Attorney

orney (POA) that this article will discuss: (1) a Durable Power of Attorney; and (2) a Medical Power of Attorney. With any Power of Attorney, there is a principal who grants authority to an agent to act on their behalf. However, the principal remains in charge and is able to revoke a Power of Attorney at any time. We will discuss both a Durable Power of Attorney and Medical Power of Attorney in detail.

Durable Power of Attorney. A Durable Power of Attorney is a written instrument, defined by Texas law, which designates another person as attorney in fact or agent for the person granting a POA and is signed and acknowledged by that person in front of a notary public. The authority of the agent is limited to only the specific powers listed in the POA. A POA may be effective immediately or may be a “springing” POA that becomes effective upon the principal’s subsequent incapacity. Very simply, a Durable POA allows someone to act on your behalf with third parties to handle your business.

The most commonly known type of POA is a Statutory Durable Power of Attorney. The form for such is found in Section 752.051 of the Tex

as Estates Code and is often used by individuals that have searched and found the terms on the Internet. The Statutory Durable Power of Attorney allows you to check a number of powers that can be granted to the agent that relate to financial matters. The Statutory Durable Power of Attorney is generally sufficient for actions such as handling daily banking activity on behalf of the principal and corresponding with providers contracted with the principal (utilities, phone, etc.). However, the Statutory Durable Power of Attorney does not grant authority to the agent that may become necessary in a comprehensive estate plan, particularly in providing for long term care. The Statutory Power of Attorney does not provide for the creation of trusts and it also limits the amount of a gift to an individual to not exceed the amount of annual exclusions allowed by the federal gift tax. These, and other omissions in the Statutory Durable Power of Attorney, do not appear alarming initially but can quickly become so if the principal that granted the POA becomes incapacitated and can no longer make those decisions on their own and have not granted the authority to do so to a trusted agent.

You can easily protect yourself in this situation by having an Elder Law attorney draft a Durable Power of Attorney for you that takes into consideration your specific circumstances and needs. This POA will be much lengthier than a Statutory Durable Power of Attorney and provide for a much greater depth of individual situations, including those that would allow for long term care planning and asset protection.

Medical Power of Attorney. A Medical Power of Attorney is a written document that gives the agent the power to make health care decisions on behalf of the principal. An agent does not have the authority to make any medical decisions on behalf of the principal until a physician certifies in the principal's medical record that the principal is incompetent to make his or her own medical decisions. Very simply, a Medical POA allows an individual to make medical decisions for you once you become unable to do so.

To be effective, a Medical POA must be executed with the appropriate formalities. A Medical POA must be signed in the presence of two

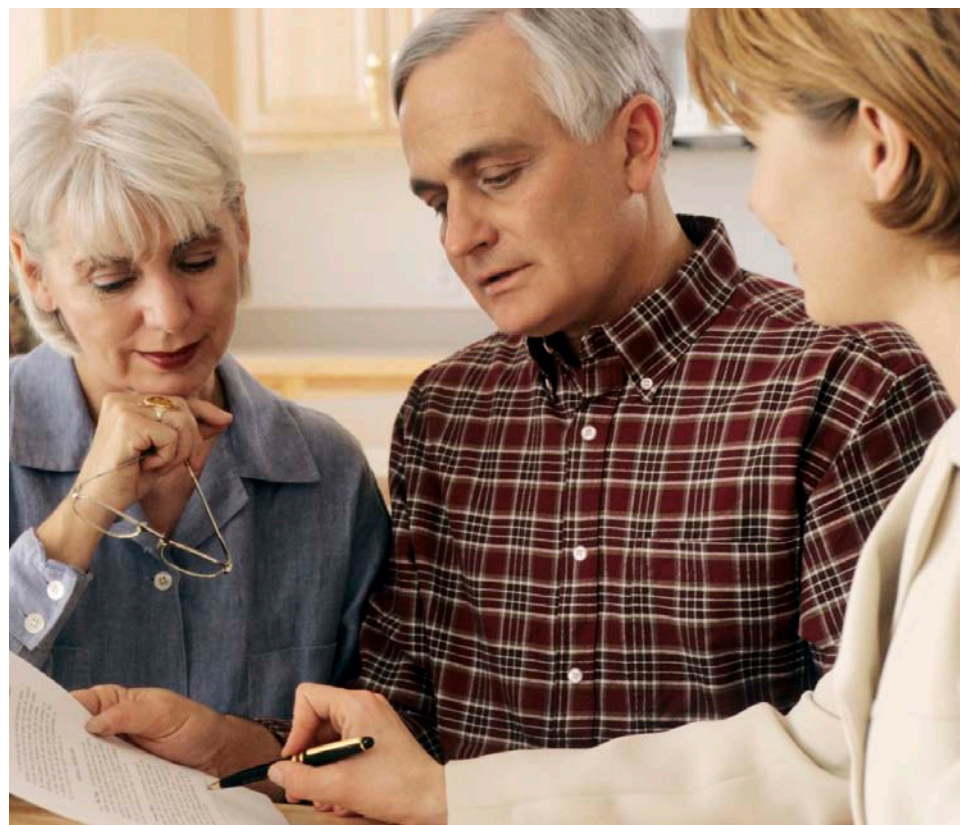
ascribing witnesses, or acknowledged by a notary. The appropriate language for the Medical POA is found in Section 166.164 of the Texas Health and Safety Code and must be executed in conjunction with the Disclosure Statement found in Section 166.163. A Medical POA may also include personal requests for an intimate and important time in your life. An Elder Law attorney can help you consider your individual situation and draft a Medical POA that is appropriate.

In addition to the traditional Medical POA, there is another element that must be considered. There is a federal law called the Health Insurance Portability and Accountability Act, referred to as HIPAA, that governs the privacy of your health information. To make sure that the person you have appointed as your agent on the Medical POA can access your medical records, it is necessary to include very specific language in the Medical POA or in a separate document that grants the agent authority to access medical information under the HIPAA privacy law. This type of information is commonly omitted by many Medical POAs, but it is the kind of information that an Elder Law attorney will insure is included in your documents.

Second: What's the Rush? Many don't feel a sense of urgency to put important estate-planning tools into place, such as a Durable and Medical Power of Attorney. However

once you or someone you know has a situation where they needed a POA or had a POA that was poorly drafted, you will quickly develop that sense of urgency. We run across that situation far too many times in our practice and hope you will heed the warning to meet with an Elder Law attorney sooner rather than later to discuss these important documents, as well as other documents that are important to your estate planning and protection of your assets.

A client named Sarah learned about the importance of having comprehensive estate planning and Power of Attorneys in place the hard way. Sarah had been happily married to her spouse for over ten years when he suffered a number of significant health care crises in a short period of time. These crises rendered Sarah unable to care for her spouse, Walter, at home and after he left the hospital he was admitted to a skilled nursing facility. Prior to his marriage to Sarah, Walter had executed a Medical



Power of Attorney giving authority to his adult sibling, Jean, to make medical decisions on his behalf if he became unable to do so. After Sarah and Walter married, they visited an attorney that updated their wills and did a statutory power of attorney, but no other estate planning documents. Because Walter had not updated his Medical POA, nor revoked the Medical POA granted to his sister Jean, even though he was married to his spouse Sarah, it was Jean that the medical care providers had to ask for medical decisions. This turned into a conflict between Jean and Sarah and the situation escalated quickly. Sarah found herself in the position of not being able to make medical decisions for her spouse, not being able to provide for his financial affairs or get him qualified for Medicaid which he desperately needed and the stress of the situation took away from her ability to provide Walter with the love and support that she as his wife wanted to provide. We were able to help Sarah right this situation, however it was a lengthy and expensive process that could have been easily avoided by a visit to an Elder Law attorney that would have discussed the importance of having appropriate estate planning documents in place.

Sarah experienced what so many of our clients experience: an unexpected health crisis, which turns into a housing crisis after that individual cannot return to their home, which turns into a financial crisis when that family realizes the cost of a long-term care facility is upwards of \$4,500.00 per month. We assist clients everyday that find themselves in this type of urgent situation, however with some planning in advance, an Elder Law attorney can make the best plan to provide protection for your assets and your legacy.

Third: What now? We hope by learning more about Power of Attorneys and the role that they can play in your comprehensive estate plan you are interested in getting the appropriate documents put into place for you and your loved ones.

So what is the first step? Contact an Elder Law attorney to set up a consultation to discuss your individual needs, concerns and situation. That attorney can tailor a plan to meet your needs. That attorney will be glad to go over each document and its importance with you. You do not need to gather personal information prior to making the appointment, the attorney can help you through that process and almost all the necessary information you will know, or will have readily accessible. The biggest mistake you can make is putting off this type of planning because you feel you don't understand the documents, don't think you have time to gather the information, or most commonly don't want to think about a potential health crisis, or assume that you and your loved ones will not be impacted by a health crisis. An Elder Law attorney can help give you and your loved ones peace of mind. Don't delay in taking the necessary steps to protect yourself and your family, contact an Elder Law attorney today.

Kristen J. Ishihara

Kristen J. Ishihara has been a practicing attorney in Longview, Texas since 2006. She graduated from Baylor Law School with honors and is licensed to practice in Texas, Arkansas and Oklahoma.

Kristen was elected to the Longview City Council as representative for District Four in 2014 and enjoys serving the community in that capacity. Kristen was honored to be selected as an Emerging Young Leader in 2013 by the Longview Chamber of Commerce. Kristen is also an active member with the Junior League of Longview and the Zonta Club of Longview.

Kristen is happy to assist clients with elder law issues, asset protection and estate planning issues to include:

- *Trusts and wills;*
- *Estate Planning Documents such as Power of Attorney and other directives;*
- *Medicaid Applications and Medicaid Estate Recovery;*
- *Veteran Aid & Attendance Applications;*
- *Guardianships; and*
- *Probate.*

Kristen is an accredited Veterans Affairs attorney, as well as a member of the National Academy of Elder Law Attorneys.



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Five Steps to Feel More Confident about Your Retirement

It's natural to have mixed emotions about retirement – it's a huge life change that people spend most of their working life preparing for. While the thought of retirement is exciting, the options and advice available can sometimes seem overwhelming and complex. There are several simple things you can do if you're feeling unprepared for your retirement years. Check out the following steps to help you get ready for this milestone.

1

- ▶ **Determine your vision.** One of the most enjoyable parts about planning for retirement is deciding how you'll spend your time. Though you could just be looking forward to relaxing, you may also decide to move to a different area of the country, travel, volunteer or spend more time with family and friends. Your plans can always change, but creating a list of activities you may want to pursue is a valuable and fun part of the planning process.

2

- ▶ **Start with the basics.** Developing a written plan is the first important step, but before you get caught up in the numbers, determine what you will absolutely need to cover expenses that are truly essential. Include basics like groceries, mortgage payments, healthcare costs and other financial obligations. You may want to make a list of areas where you could cut back and reduce your expenses if you hit a financial roadblock in the future.

3

- ▶ **Make your plans concrete.** Many people get hung up on this step, as it can come with a tough reality check. To begin, calculate how much money you'll need to cover your essentials over the course of a 30 year retirement, and then add discretionary expenses that accompany activities and lifestyle goals – such as travel and hobbies. Be honest with yourself and try to account for cost-of-living increases and rising healthcare costs in your projections. This will give you a rough estimate of how much "income" you'll need in retirement to replace your paycheck and achieve your desired lifestyle. Then consider all the sources you can draw this income from – such as a 401(k), annuities or cash savings. Also consider breaking this amount down into smaller goals that you can more easily prioritize, manage and track.

4

- ▶ **Protect your plan and your legacy.** Ensure the beneficiary information on your accounts is up-to-date and that you have the right insurance and protection plans in place to safeguard your income and assets now – and for the long-term. Also begin thinking about the legacy you want to leave – to your family or to organizations that are important to you. Involve your loved ones in these conversations and clearly communicate your intentions and expectations.

5

- ▶ **Track your progress.** As with all goals, it's important to set milestones, check-in and reflect as you go. Keep in mind that a little time and organization goes a long way. Set aside one day each month to sit down with your finances, and also consider meeting with a legal and financial professional annually. Even if your goals still seem far away or if you've experienced a setback, you won't regret spending the extra time to review your progress. This also provides a good opportunity to make adjustments if your situation or plans for the future have changed.

Retirement planning can be a complicated, emotional and overwhelming process. Consider seeking objective advice from a professional financial advisor who can guide you through it and ensure you're aware of all your options. It's important to keep in mind that the surest way to feel confident about what's to come is to do everything you can to prepare for it.

Shane Sherwood, CFP®, CRPC®, ChFC®, is a Private Wealth Advisor with Ameriprise Financial Services, Inc. in Longview, TX. He specializes in fee-based financial planning and asset management strategies and has been in practice for 16 years. To contact him:

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USING MEDICAID TO PAY FOR LONG-TERM NURSING CARE

Long Term Care Medicaid is the federally mandated program that provides access to skilled nursing care for individuals who meet certain requirements. Although Medicaid is a federally created program, the actual administration of that program is left to the individual states. Because of this division between federally created rules and state administration, there are many specific differences between the states, although the overall rules are generally the same. Also, the rules change frequently, so from the time a reader starts this article, the rules may change before they even finish the article. As a result, the following information is for general knowledge and should not be relied upon without the advice of an expert in elder law.

There are a bevy of misconceptions related to Long Term Care Medicaid. In fact, it is common for families who could be eligible for Medicaid to incorrectly assume that they do not qualify, even before they know the rules. Even more often, individuals and families will attempt to “plan” for their future Medicaid needs by acting on rumor and the advice of family, neighbors and friends. Most often, these people find that not only have they acted incorrectly, but that their attempts at “planning” have actually caused more problems than they solved.

Because of the many rumors, misunderstandings and outright lies related to Medicaid, it is necessary to provide a general background to the program’s eligibility requirements before any discussion of planning can occur. The purpose of this article is to provide exactly that general overview with the intent that once the reader is armed with the basic

knowledge, he or she will not make the same mistakes as so many of the people who came before them.

How does one qualify for Medicaid long-term nursing home benefits?

In very general terms, in order to qualify for Long Term Medicaid, the applicant must, (1) be a U.S. citizen or an alien lawfully living in the U.S. AND reside in the state where they are applying for benefits; (2) be over 65, disabled or blind; (3) have a “medical necessity” requiring skilled nursing care; (3) meet the income cap which means the applicant cannot make more than \$2,163.00 (in 2015) per month in income; and (4) have only limited assets. In addition to these requirements, applying for LTC Medicaid does a person no good unless he or she is at a facility that accepts Medicaid and not all nursing homes accept Medicaid benefits. Of those nursing homes that do, the nursing home may only accept a limited number of Medicaid recipients. Additionally, the Medicaid “bed” generally is in a semi-private room.

What if the applicant receives only \$1,000.00 per month in income but the other spouse receives \$1,700.00 or even \$3,000.00 per month in income?

The applicant will not have a problem with the income cap because he is receiving less than \$2,163.00 per month in 2015. Medicaid only counts the applicant’s income and not the spouses income! If a couple

are receiving rental payments from a lease of their land or are receiving note payments, the Medicaid Agency will consider that the income goes to the spouse whose name is on the check.

What if the applicant does have too much income?

Even if you, the applicant, has too much income, they can still qualify for Medicaid. If the applicant otherwise qualifies for Medicaid long term nursing home benefits, the applicant) or the applicant’s spouse or duly appointed agent) may create a Qualified Income Trust or “Miller Trust.” This trust allows the applicant to transfer his/her income into the trust and then qualify for Medicaid long term nursing home care benefits. This means that no one should every be disqualified for Medicaid because they have too much income! Either you have less than the income limit and qualify or you have more than the limit, set up a Miller Trust and then qualify.

This Miller Trust sounds great, can I transfer my other assets into a Miller Trust to protect them?

No. A Miller Trust is ONLY used to overcome the income cap issue. A Miller Trust is NOT a trust used to protect assets (resources).

What are the assets that I can keep and still qualify for Medicaid?

When applying for Medicaid, the state will look at what they call your “countable resources.” To qualify for Medicaid, an unmarried individual’s countable resources (assets) cannot exceed \$2,000.00. If both spouses are applying for long term care nursing home benefits, then their combined countable resources generally cannot exceed \$3,000.00. If only one spouse is applying for Medicaid benefits, the community spouse will keep more than \$2,000.00 in assets. When the Medicaid application is made, all available non-exempt resources of both spouses will be counted as resources, whether the property is classified as community or separate. One half of the couple’s resources will be set aside for the spouse not applying for Medicaid benefits, with a minimum set aside amount of \$23,448.00 and a maximum of \$117,240.00 in 2015. There may be ways in which to increase the maximum amount that can be set aside for the spouse staying at home but the strategies can be complex and should be discussed with an expert.

Are all of a person’s resources or assets counted when determining Medicaid eligibility?

No. The following assets are exempt from being included as a resource.

- a. The principal residence of the Applicant up to a value of \$543,000.00;
- b. A burial plot held for the Applicant or the Applicant’s family;
- c. Term or burial insurance, if it has no cash value;
- d. Identifiable burial funds in the amount of \$1,500.00 or a prepaid irrevocable burial contract regardless of the value;
- e. One automobile is exempt, regardless of value;

- f. Household goods and personal items;
- g. Life insurance policies owned by the Applicant with total face values of \$1,500.00 per insured person or less;
- h. Livestock and poultry that are held for business purposes or for consumption;
- i. Business property essential for self-support; and
- j. Non-business property valued at up to \$6,000.00, essential for self-support (generally mineral interests).

What if I am told that I have to “spend down” resources before I or my spouse qualifies for Medicaid. Should I “spend down” before I make application for Medicaid or after the application is made?

Spending down before or after the application is not the key. The Medicaid Agency gives you a credit for all monies spent after you enter a medical facility and ultimately stay for 30 days or more. For example, imagine that a Wife has a stroke and goes into the hospital in September. On October 4, she is moved into a nursing facility and continues to reside there. Her husband makes application for Medicaid benefits for her in December. The Medicaid Agency will determine what their assets were all the way back to September 1 and then again on December 1 to see if they have already spent funds to meet any spend down.

When only one spouse is applying for Medicaid, it is best to “spend down” AFTER the Medicaid application is filed. This is generally AFTER a person goes into a nursing home. However, before a person spends anything, they should get the advice of an expert. Many families do not have to spend a single penny before qualifying for Medicaid!



But I heard that if I go into a nursing home, I will lose my house. Isn’t this true?

No, you do not need to sell your homestead and spend the money in order to qualify for Medicaid. Nor will a nursing home make you sign your house over to them. These are all just rumors. The Medicaid Agency considers your homestead an “exempt” asset and therefore will not include it when determining your eligibility. You can get Medicaid and keep your house!!!

What about after my death? Will the State take the house if either I or my spouse receives Medicaid assistance?

Not if you protect it first! When the state pays for your care under the Medicaid program, the money they pay is more like a loan instead of a gift. The way they collect on their loan is a law called the Medicaid Estate Recovery Program. However, is no estate recovery, ever, when the deceased Medicaid recipient has a surviving spouse, minor children, disabled child of any age) or an unmarried adult child who lived in the home. If none of these conditions doesn’t apply to you, all hope is not lost. There are many other ways you can protect your home and belongings if done very carefully.

Can I give away some of my resources (assets) in order to qualify for Medicaid?

Generally, no. If a nursing home applicant makes a transfer of resources for less than fair market value (a “gift”) in order to qualify for Medicaid benefits, the applicant will be penalized for the gift by being ineligible for Medicaid benefits for a calculated period of time (the “transfer penalty”). The Medicaid Agency has determined that the average private pay cost for nursing home care is \$156.34 per day for Texas and \$5,098.00 per month for Arkansas. To determine the number of months of ineligibility for any gift, the Medicaid Agency will divide the amount of the gift by \$156.34 or \$5,098.00 (depending on the state). The resulting quotient is the number of days/months of ineligibility for benefits.

If a gift is made, the presumption is that it was made in order to qualify for Medicaid benefits. The Applicant would have to prove that the gift was made for a totally different reason, which is a very difficult burden of proof. Also, do not confuse the Medicaid gifting penalty with the federal gift tax law. Under the gift tax rules, a person can give away up to \$14,000 per person each year without having to file a gift tax return. But this rule

is completely separate from Medicaid. Any gift can potentially cause a problem with Medicaid, no matter what amount it is.

Can I transfer all of my assets into a Trust and then apply for and qualify for Medicaid long term nursing home benefits?

Congress allows a disabled person under the age of 65 to transfer assets to a Supplemental Needs Trust drafted by an attorney or a Pooled Trust (e.g. the Arc of Texas, Master Pooled Trust) without transfer penalties. Both of these trusts require that upon the death of the applicant/beneficiary, all Medicaid expenditures are paid back to the State out of the remaining funds. These trusts are generally irrevocable. Also, if you have a disabled child or other disabled individuals in your family, you can transfer assets into trusts for their benefit if it is done very carefully.

If a person is planning ahead, there are additional types of trusts that can potentially be used to protect your assets from the costs of nursing home care. These are very specialized documents and should only be created by an attorney that is familiar with the Medicaid eligibility rules. These are not “living trusts” or “revocable trusts” which are the most common type of trust agreement. Generally, living trusts will not protect your assets from your own costs of care.

How can I learn the details about the Medicaid program?

When asking a legal question about the Medicaid program or any other legal issue, it is imperative that a person obtain advice from a competent elder law attorney. For example, Texas law prohibits non-attorneys from advising persons about Medicaid qualification and charging fee.



a. A person who is not licensed to practice law in Texas commits an offense if the person charges a fee for representing or aiding an applicant or recipient in procuring assistance from the Commission [the Texas Health and Human Services Commission's Medicaid program].

b. A person commits an offense if the person advertises, holds himself or herself out for, or solicits the procurement of assistance from the Commission.

c. An offense under this section is a Class A misdemeanor. Section 12.001 of the Texas Human Resources Code.

In any case, **DO NOT** take the advice of anyone other than a qualified elder law attorney. This includes insurance agents, nursing home case workers, DHS employees or even other lawyers who do not specialize in Elder Law.



John K. Ross IV, Lisa B. Shoalmire and/or Ross & Shoalmire, LLP, by way of this Medicaid Frequently Asked Questions, is not offering legal advice. This article is intended to be for informational purposes only. Before relying on any information contained herein, the reader should consult an elder law attorney.

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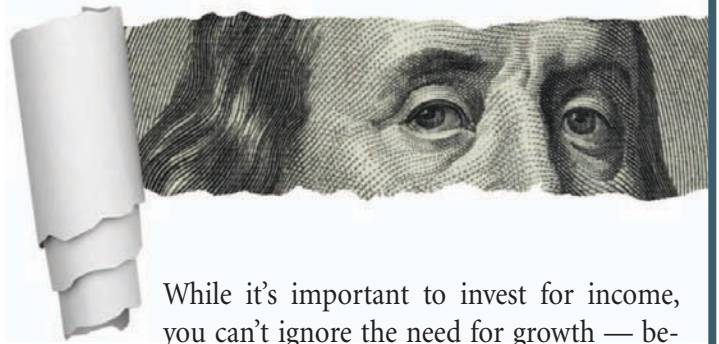


Here's an interesting statistic: Over the past three decades, the centenarian population in the United States has grown about 66%, according to the U.S. Census Bureau. Of course, this doesn't necessarily mean that you have a good chance of living to 100 — but the possibility may not be as remote as it once was. In any case, if you do plan to retire in your

mid-60s, and you are in good health, you may well have two, or even three, decades ahead of you. To enjoy this time to the fullest — and to help prevent the possibility of outliving your financial resources — you will need to invest for income and growth throughout your retirement years.

As a retiree, how much income do you need from your investments? There's no one "right" percentage for everyone. Furthermore, you shouldn't have to rely solely on your investment portfolio, because you may have other sources — such as Social Security and potentially your employer-sponsored retirement plan — from which to draw income. Nonetheless, your investments can play a big role in providing you with the income you'll need during retirement.

Many retirees depend on fixed-rate investments for a good portion of their retirement income — so it's a real challenge when interest rates are low, as they have been for the past several years. Consequently, when you retire, you'll certainly need to be aware of the interest-rate environment and the income you can expect from these investments. Longer-term fixed-rate vehicles may be tempting, as they typically offer higher rates than shorter-term ones, but these longer-term investments may have more price fluctuation and inflation risk than shorter-term investments. Ultimately, you'll likely need a balance between short, intermediate and long-term, fixed-income investments to provide for a portion of your income in retirement.



While it's important to invest for income, you can't ignore the need for growth — because you won't want to lose purchasing power to inflation. As you know, we've experienced quite mild inflation recently. But over time, even a low rate of inflation can seriously erode your purchasing power. To illustrate: If your current monthly costs are \$3,000, they will be about \$4,000 in 10 years with only a 3% annual inflation rate. And in 25 years at that same rate, your monthly costs will have more than doubled, to about \$6,200. To help protect yourself against inflation risk, you should consider having at least some investments that offer growth potential, rather than only owning fixed-income vehicles. And some investment vehicles, such as dividend-paying stocks, can offer both growth potential and current income. In fact, some stocks have paid, and even increased, their dividends for many years in a row, giving you not just income, but rising income. (Keep in mind, though, that companies are not obligated to pay dividends, and can reduce or discontinue them at any time.)

To determine the right mix of growth and income vehicles for your individual needs, consult with a financial advisor who is familiar with your retirement plans, your risk tolerance and your family situation. And it may well be a good idea to plan for a very long retirement. You may not live to be 100 — but it would be a good feeling to know that you could afford to do so.

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John K. Ross, IV

VA's Aid and Attendance Benefit

Benefits available through the Veterans Administration are the most commonly overlooked benefits available to seniors. Many times, veterans and their spouses make incorrect assumptions related to their entitlement to VA benefits. These individuals will assume that since they did not retire from the military they are not entitled to any benefits from the VA, or they will assume that since they were not injured during their service they are not entitled to any benefits from the VA. While there are in fact benefits available to retired veterans and veterans with service connected disabilities, these are not the only benefits available.

The most commonly overlooked VA benefit is called the "Aid and Attendance" benefit. Of the people who have heard of this benefit, many have been incorrectly told that they do not qualify. The reality is, this benefit is available to many veterans and their spouses and can prove to be a lifesaver when times get tough.

In order to qualify for the VA Aid and Attendance benefit, the veteran must have served at least ninety (90) days of active duty. Of those ninety days, at least one of the days must have been during a designated period of war. This does not mean that the veteran had to have served in

combat. It is merely a requirement that the veteran's service occur during one of the periods of time where the United States had declared war. Official periods of war include: the Mexican Border, May 9, 1916, to April 5, 1917; World War I, April 6, 1917, to November 11, 1918 (April 1, 1920, if served in Russia); World War II, December 7, 1941, to December 31, 1946; Korean Conflict, June 27, 1950, to January 31, 1955; Vietnam War, August 5, 1964, to May 7, 1975 (February 28, 1961, if served in Vietnam); and the Persian Gulf War, August 2, 1990 to an as yet unknown date.

In addition to the Veterans active duty service, he or she must have

been discharged from the military in some way other than dishonorably. This could include an honorable discharge, an other-than-honorable discharge, a general discharge or a medical discharge. Even if a veteran was dishonorably discharged, it may still be possible to petition VA to have the dishonorable discharge changed to one of the other forms of discharge.

A veteran who meets the above noted requirements is considered a wartime veteran. So what about the spouse of a wartime veteran? The surviving spouse of a wartime veterans is also entitled to the Aid and Attendance benefit, if he or she was married to the veteran for at least one year, married to the veteran at the time of the veteran's death and has not since remarried. There is no requirement that the spouse be married to the veteran during the veteran's time of service. Additionally, if the widow of a veteran does remarry and his or her new spouse is also a veteran who meets the eligibility requirements, then the spouse can qualify under that second marriage instead.

The reason the VA benefit is termed the Aid and Attendance benefit, is because it is for veterans or their surviving spouses who need assistance with their normal activities of daily living. In order to meet this requirement, the applicant must be over sixty-five (65) years of age or blind or disabled and need someone else's help with their activities of

daily living. Such assistance might include help with feeding, bathing, getting dressed, meal preparation, financial management and similar items.

Finally, in order to qualify for this benefit, the applicants must have what the VA considers to be low monthly income and a normal net worth. However, a person should not assume that they do not meet these requirements without having a full understanding of what these terms mean. For example, when the VA uses the term "low monthly income," they are referring to Income for VA Purposes (IVAP). IVAP is defined as the total household income minus any unreimbursed medical expenses. Such unreimbursed medical expenses might include in-

fine normal net worth. Instead, the VA will look at a person's net worth in relation to how much they are spending and their life expectancy. Therefore, a younger veteran might be entitled to keep more assets than an older veteran. Typically, the VA does not count the value of a home in its determination of net worth. With a thorough understanding of the rules and the guidance of someone experienced with dealing with the VA, many people can meet this section of the eligi-



insurance premiums, copays, prescription drugs and the cost of in home care or assisted living. For example, a veteran with \$4,000.00 in monthly income might not consider himself to have low monthly income. But if this veteran lives in an assisted living facility that charges \$3,500.00 a month in rent, then the veteran's Income for VA Purposes is only \$500.00 per month. That would meet the definition of low monthly income.

The VA also requires an applicant to have a normal net worth. Unlike other federal programs, the VA does not de-

bility test. It should be noted that as of the writing of this article, the VA does not impose a penalty for transfers of assets. However, there have been several attempts to pass legislation in Congress that if passed will impose a transfer of assets penalty similar to Medicaid. This makes it even more important to plan ahead if you might benefit from the VA Aid and Attendance program at some point in the future.

So, why is all of this discussion about the Aid and Attendance benefit so important? For those who qualify, the VA will send money that the person can use to help pay for their care. For 2015, a surviving spouse of a veteran could receive a maximum benefit of approximately \$1,149.00 per month, a single veteran could receive a maximum benefit of approximately \$1,789.00 per month and a veteran with a dependent spouse could receive a maximum benefit of approximately \$2,120.00 per month.



Let's take Sally as an example. Sally is the surviving spouse of a veteran who served during the Korean conflict. She is

seventy-nine years old and her Social Security and retirement income totals \$2,000.00 per month. Sally's health has declined and although she still lives at home, it is becoming more and more difficult for her to take care of herself. Sally looked at one of the local assisted living facilities and really liked what she saw. However, when she was told that the monthly cost would be \$2,500.00, she assumed that she could not afford that much expense and continued to live at home in an unsafe environment. But after applying for the Aid and Attendance benefit through the VA, Sally was able to receive the maximum VA benefit of \$1,149.00 per month. This increased her income to \$3,100.00 dollars and she can now afford to live in the assisted living facility that she thought she could not afford.

Planning related to obtaining VA benefits is very complicated. Not only must you meet VA's eligibility rules exactly, this type of planning is only a small part of the type of planning that is necessary for a person to protect themselves, their life savings, and their dignity. Many elder law attorneys are also accredited VA attorneys. A lawyer must be accredited by the Veterans Administration in order to assist you with VA planning. In addition to elder law attorneys, there are Veterans Service Organizations (VSO) that can also provide assistance with VA benefits.

Also, it should be noted that as of the time of this writing, the VA has proposed significant changes to the Aid and Attendance program. These changes, if passed, will make pre-planning related to VA benefits even more important.

For those who qualify, the VA Aid and Attendance benefit can be the difference between life and death. Anyone interested should seek advice, even if they do not need the benefit yet. Thank you to all the veterans and their family who have given so much for this country

Sincerely;

John K. Ross IV
Elder Law Attorney
Accredited VA Attorney
United States Marine



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What If Things Don't Go According To "The Plan"

Burns G. Barr had a plan - to live one day longer than his beloved wife of 63 years who was ill and confined to a wheelchair. Even at the age of 83, Mr. Barr was relatively healthy and throughout his life had managed a successful career and household, so he believed he had the situation under control. He never considered that he would be the one to die suddenly on that warm June day or things would have been different—or would they? Of course, no one knows when that day will come, that thing called death, all that we do know is that death is inevitable for each of us and the timing is not our own. If we did know, wouldn't we want to take the necessary steps to protect our family and our assets? But what if we didn't know what we needed to do?

Mr. Barr's story is a common one. No one wants to be a burden on their family, and often the family has promised never to place their loved ones in a facility, so they continue "doing the best they can do". Sometimes this is a viable option, but even so, every family needs to have an estate plan in place – a plan that takes into consideration your family, health, housing, finances and future needs. These things that appear very simple can quickly become complicated (you are healthy today, but what happens if you have a stroke tomorrow?) Where do you turn? You need a law firm, one who specializes in elder law whose focus is to protect the family members and their assets and put a plan together. Ross & Shoalmire attorneys have helped countless families through crisis situations and have first-hand knowledge and experience in assessing the various outcomes, often unforeseen by the family. Governmental assistance, in the form of Medicaid or VA benefits, may or may not become a necessity, but the plan should definitely include those options as the rules are complex and the appropriate steps must to be taken to insure maximum protection of a family's assets.

So what happened to the beloved wife? The kids had to step up and help mom out physically and financially. Mr. & Mrs. Barr had lived on a very modest income before his death and her monthly expenses tripled upon moving into an assisted living facility. Their son, who lives in Texarkana, heard of the Ross & Shoalmire law firm and their events like Basics at Brunch. He decided to make an appointment and believes it was the best decision he

By Christal Browning

could have made. During the initial free consultation, he learned of the Aid & Attendance benefit available to the Veteran OR the spouse of a Veteran. He, like most VA families, had not heard of that benefit before. Ross & Shoalmire assisted the family to establish a VA Asset Protection Trust in order to get her qualified. What the son realized before he left that initial appointment was "that this would be an investment and worth every penny". Once Mrs. Barr was approved she started receiving the benefit which is tax free monthly income to help pay for her expenses at the assisted living facility. This helped her children who had been paying the bulk of the expense. "The knowledge that Ross & Shoalmire has is invaluable. It is not just information -- it is powerful information and is truly invaluable!" as quoted from the son, Burns A. Barr. Burns also said, "Sometimes when you are in the middle of the crisis you may never find these things out and I'm just grateful that I did. What I have also learned is that I need to take care of all my personal planning before there is a crisis. I love my wife and kids and want things to be easier for them!"

Find out what options are available to establish a plan to best take care of you and your family by visiting with one of the elder law attorneys at Ross & Shoalmire law firm where they can help you by understanding your personal situation.



Christal Browning is the Business Development Executive for Ross & Shoalmire, LLP. Christal has a BA in Communications from Stephen F. Austin State University and has worked in the healthcare arena for 14 years. She is the proud editor of Aging Insight and Aging Insight Longview. She is the president of Twin City Marketing Alliance and Healthcare Connections in Texarkana, TX. She is a board member for Hands on Texarkana and is also a member of P.E.O. Philanthropic Educational Organization which is a national organization. Married to Kevin, she has 3 kids- Spencer, Garrett and Avery and a step-daughter Madison.



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Longview, TX

Access Family Health

3218 N 4th Street
Longview, TX 75605
903-236-5333

Accolade Home Care

2163 Gilmer Road
Longview, TX 75604
903-297-8200

A.N.D. Home Health

1011 W. Loop 281, Suite 9
Longview, TX 75604
903-234-0433

At Home HealthCare

1412 Judson Road
Longview, TX 75601
903-234-0389

Bethany Home Health

103 W. Loop 281 #440
Longview, TX 75605
903-553-0056

Care Team-Home Health and Hospice

4362 Highway 259 N
Longview, TX 75605
903-561-7250

Choice Homecare

1605 Judson Rd., Suite C
Longview, TX 75605
903-363-9932

Comfort Keepers

2401 Judson Rd.
Longview, TX 75601
903-291-0111

Divine Care Nursing Services

1511 Judson Rd.
Longview, TX 75601
903-753-1000

Encompass Home Health

407 East Methvin, Suite 300
Longview, TX 75601
903-295-3020

Family Home Health

2814 Bill Owens Pkwy.,
Suite 100
Longview, TX 75605
903-212-8080

Good Shepherd Home Care

911 West Loop 281 Suite 480
Longview, TX 75605
903-315-5525

Jordan Home Services

1605 Judson Road Suite 107
Longview, TX 75601
903-234-0104

Kinsman Home Health

3218 N 4th Street
Longview, TX 75605
903-680-2220

LifeCare Health Services

1809 Gilmer Rd.
Longview, TX 75604
903-297-9300

Onesource Homecare

4002 Technology Center
Longview, TX 75605
903-248-2530

Onesource Homecare

4002 Technology Center
Longview, TX 75605
903-248-2530

Pinetree Home Health Care Inc.
1125 Judson Rd Ste 193
Longview, TX 75601
903-236-8880

Premier Home Health
823 N. 4th
Longview, TX 75601
903-753-2273

Texas Home Health
1809 Judson Road
Longview, TX 75605
903-758-0794

Marshall, TX
Good Shepherd Home Care
401 South Bolivor Street
Marshall, TX 75670
903-927-1144

Marshall Home Care & Hospice
111 East Burleson
Marshall, TX 75670
903-923-8154

Thompson Home Health
304 University Avenue
Suite # 104
Marshall, TX 75670
903-938-6590

Sulphur Springs, TX
1st Choice Home Health
1091 Church Street
Sulphur Springs, TX 75482
903-439-4757

At Home Healthcare
858 Gilmer Street
Sulphur Springs, TX 75482
903-885-5606

Cooper Home Health Inc
121 Oak Avenue
Sulphur Springs, TX 75482
903-885-6349

Cypress Homecare
1304 Church St.
Sulphur Springs, TX 75482
903-438-8400

EXCEPTIONAL Home Health Care
1330 Church Street
Sulphur Springs, TX 75482
903-885-5566

Heart's Choice Health Care
1335 Shannon Rd. E
Sulphur Springs, TX 75482
903-439-6030

Vibrant Home Health Care
1707 South Broadway Street #4
Sulphur Springs, TX 75484
903-885-3975

Tyler, TX
At Home Healthcare
423 South Beckham Avenue
Tyler, TX 75702
903-597-7700

At Home Healthcare
Hwy 31 E.
Tyler, TX 75701
903-592-8001

Choice Homecare
6760 Old Jacksonville Hwy.
Suite 101
Tyler, TX 75703
903-363-9932

Girling Community Care
100 East Ferguson Street
Suite 600
Tyler, TX 75702
903-526-2914

HomePointe Home Health
P.O., Box 7838
Tyler, TX 75711
903-533-0300

Integra Care Home Health
1700 S. SE. Loop 323 Suite 400
Tyler, TX 75701
903-534-7185

Jordan Health Services
921 Shiloh Rd., Suite B-200
Tyler, TX 75703
903-509-0959

Maxim Healthcare Services
1828 E. SE. Loop 323 Suite 101
Tyler, TX 75701
903-581-8881

Texas Home Health
4925 South Broadway Ave #900
Tyler, TX 75703
903-597-2086

Hospice Services

Carthage, TX
Heartsway Hospice
437 W. Panola St.
Carthage, TX 75633
903-690-9924

Longview, TX
Faith Hospice
4362 U.S 259
Longview, TX 75605
903-663-5300

Heartsway Hospice
4351 McCann Rd., Suite A
Longview, TX 75605
903-295-1680

Heart to Heart Hospice
100 West Hawkins Pkwy.,
Suite A
Longview, TX 75605
903-663-3310

LifeCare Hospice
1809 Gilmer Road
Longview, TX 75604
903-297-9300

Southern Care Hospice
911 West Loop 281, #101
Longview, TX 75604
903-759-7500

Marshall, TX
Heartsway Hospice
205 East Austin Street
Marshall, TX 75670
903-938-5200

Marshall Home Care & Hospice
111 East Burleson Street
Marshall, TX 75670
903-923-8154

Sulphur Springs, TX
Heart to Heart Hospice
1312 Church Street
Sulphur Springs, TX 75482
903-439-1810

Legacy Hospice
301 Gilmer Street, Suite A
Sulphur Springs, TX 75482
903-335-8901

Tyler, TX

CIMA Hospice
921 Shiloh Road, Suite B-100
Tyler, TX 75703
903-509-2462

Compass Hospice
1111 Idel
Tyler, TX 75701
903-533-8383

Grace Hospice Care
1820 Shiloh Road
Tyler, TX 75703
903-617-6893

The Hospice of East Texas
4111 University Blvd.
Tyler, TX 75701
903-266-3400

Legacy Hospice
1901 Rickett Lane
Suite 103
Tyler, TX 75703
903-509-3015

Texas Hospice/Home Health
2904 N. Fourth, Suite 102
Longview, TX 75605
903-234-0943

Independent Living

Henderson, TX

Chalice Apartments
301 N. Marshall St.
Henderson, TX 75652
903-657-4331

Longview, TX

Arabella of Longview
91133 E Hawkin Pkwy.
Longview, TX 75605
903-663-8886

Buckner Westminster Place
2201 Horseshoe Lane
Longview, TX 75605
903-234-0000

Colonial Village Retirement
2910 N Eastman Rd.
Longview, TX 75605
903-758-6332

Eden Place
327 Eden Drive
Longview, TX 75605
903-757-9181

Tyler, TX

Atria Copeland
5317 New Copeland Rd.
Tyler, TX 75703
903-218-4131

Garden Estates of Tyler
2055 W. Grande Blvd .
Tyler, TX 75703
866-791-8188

Hillside Village Apartments
205 West Whaley Street
Longview, TX 75601
903-753-5665

Rosewood Estates
506 Rice Rd.
Tyler, TX 75703
903-402-1261

Long-Term Care & Rehab

Carthage, TX

Carthage Health Care Center
701 South Market Street
Carthage, TX 75633
903-693-6671

Gilmer, TX

Gilmer Nursing & Rehab
703 Titus Street
Gilmer, TX 75644
903-843-5529

Upshur Manor Nursing Home
623 Texas 155
Gilmer, TX 75644
903-797-2143

Henderson, TX

Autumn Leaves Nursing Home
321 Kilgore Drive
Henderson, TX 75652
903-657-1923

Brookdale Henderson
1000 Richardson Drive
Henderson, TX 75654
903-730-8962

Henderson Health & Rehab
1010 W. Main St.
Henderson, TX 75672
903-657-6513

Jefferson, TX

Magnolia Manor
510 East Bonham Street
Jefferson, TX 75657
903-665-3903

Pine Hill Nursing & Rehab
1307 Martin Luther King
Jefferson, TX 75657
903-665-8167

Kilgore, TX

Arbor Grace Nursing & Rehab
144 FM 1252 W.
Kilgore, TX 75662
903-984-5688

Kilgore Health & Rehabilitation
2700 Henderson Dr.
Kilgore, TX 75662
903-984-3511

Longview, TX

The Clairmont Longview
3201 N. 4th
Longview, TX 75605
903-236-4291

Genesis Healthcare
3201 N. 4th St.
Longview, TX 75605
903-236-4291

Haven Care
111 Ruth Lynn Drive
Longview, TX 75601
903-757-2557

Holiday Lodge Nursing Home
1301 Eden Drive
Longview, TX 75605
903-753-7651

Heritage at Longview Health and Rehabilitation
112 Ruth Lynn Drive
Longview, TX 75605
903-753-8611

Highland Pines Nursing & Rehab
1100 North Fourth St.
Longview, TX 75601
903-753-7661

Pine Tree Lodge Nursing Center
2711 Pine Tree Road
Longview, TX 75604
903-759-3994

Summer Meadows
301 Hollybrook Dr.
Longview, TX 75605
903-758-7764

Treviso
1154 East Hawkins Parkway
Longview, TX 75605
903-931-8433

Whispering Pines
2131 Alpine Road
Longview, TX 75601
903-757-8786

Marshall, TX
Heritage House Nursing & Rehab
5915 Elysian Fields Road
Marshall, TX 75672
903-935-6700

Marshall Manor Nursing & Rehab
1007 S. Washington Ave.
Marshall, TX 75672
903-935-7971

Marshall Manor West
207 West Merritt Street
Marshall, TX 75670
903-938-3793

Sulphur Springs, TX
Rock Creek Health & Rehab
1414 College Street
Sulphur Springs, TX 75482
903-439-0107

Carriage House Manor
210 Pipeline Road
Sulphur Springs, TX 75482
903-885-3589

Sulphur Spgs. Health & Rehab
411 Airport Road
Sulphur Spring, TX 75482
903-885-7668

Sunny Springs Nursing & Rehab
1200 Jackson St North
Sulphur Springs, TX 75482
903-885-6571

Tyler, TX
Azalea Place Nursing & Rehab
810 South Porter Ave
Tyler, TX 75701
903-593-2463

Brookdale Tyler South Memory Care Unit
5403 Plantation Drive
Tyler, TX 75703
903-939-2443

Colonial Tyler Care Center
930 South Baxter Ave
Tyler, TX 75701
903-597-2068

Greenbrier Nursing and Rehab
3526 West Erwin Street
Tyler, TX 75702
903-593-6441

The Heights of Tyler
2650 Elkton Trail
Tyler, TX 75703
903-266-7200

Park Place Nursing and Rehabilitation Center
2450 East 5th Street
Tyler, TX 75701
903-592-6745

Providence Park Rehabilitation and Skilled Nursing
5505 New Copeland Rd
Tyler, TX 75703
903-939-2443

Provider/Sitter Services

Longview, TX
Right at Home
501 Pine Tree Rd., Suite U-8
Longview, TX 75604
903-215-8083

Summit Sitter Services
4206 FM 2011
Longview, TX 75603
903-643-5366

Visiting Angels
1605 Judson Rd
Longview, TX 75601
903-215-8183

Tyler, TX
Right At Home
420 E. 5th St.
Tyler, TX 75701
903-253-0778



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Quick Psych Contact Information

For Allegiance Behavioral Health (Inpatient) Admission Contact:

Phone: 903.983.4389

Fax: 903.983.4320

For Inspirations (Outpatient) Admission, Contact:

Phone: 903.983.4376

Fax: 903.983.4183

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Allegiance Specialty Hospital of Kilgore has been dedicated to providing East Texas with excellent service for over 10 years. What makes us truly special is the compassionate care and respect patients receive from our experienced healthcare team. Allegiance provides a safe, confidential and therapeutic program which focuses on patients' strengths and capabilities. Medicare Accepted.

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(903) 655-1198

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3505 University Boulevard
Tyler, TX 75701
(903) 565-0800

Brookdale Texarkana

Assisted Living
4204 Moores Lane
Texarkana, TX 75503
(903) 838-3562

Brookdale Longview

Assisted Living
2920 North Eastman Road
Longview, TX 75605
(903) 757-6020

Brookdale Tyler South

Alzheimer's & Dementia Care
5403 Plantation Drive
Tyler, TX 75703
(903) 534-4955

Brookdale Paris

Assisted Living
2410 Stillhouse Road
Paris, TX 75462
(903) 784-8800

