

UW Medicine

My Plans for the Future

What plans can I make now that will help later on?

From MaryBeth, care partner:

“Being proactive really pays off. I don’t think there’s a single thing we’ve done that’s been bigger than that. Making a switch earlier – whether with driving, or a living situation, or getting involved in arts programs for those with memory loss – gives you plenty of time to adjust. There are wonderful things available if you can accept what’s going on. We faced everything early on, and we never looked back.”



From Myriam, living with dementia:

“I can still live independently, but I am thinking about the future, and when I can no longer live alone. I haven’t yet developed my plan - I need to sit down and do that.”

After receiving a diagnosis of memory loss, some people want to start planning for the future right away. Others prefer to wait until they have adjusted to the news.

When you are ready, use the information in this chapter to guide you through the medical, legal, and financial decisions you may need to make.

Key Points in This Chapter

- *Advance care planning is a way to clarify your values and make decisions about your future ahead of time.*
- *Planning ahead helps you be in charge of your future.*
- *Legal forms and health insurance are 2 important areas for decision making.*

What is advance care planning?

Advance care planning is planning for your future care needs. It is an ongoing process. It involves careful thought, conversations with your loved ones and doctors, and filling out paperwork. It helps you clarify your values, decide what treatments you want now and in the future, and know what your goals are for end-of-life care.

Why is it important to plan ahead?

Planning ahead helps you be in charge of your future. Changes in memory and thinking can affect your ability to make decisions about things like healthcare and finances. If the time comes when you cannot make these decisions on your own, having a clear guide for your family and doctors will ensure your wishes are followed.

It's easy to put off these tasks. But, making some decisions now can bring peace of mind, and will help both you and your family later.



Durable power of attorney gives someone you trust the legal right to make decisions for you, if needed.

What legal forms do I need?

There are 3 important legal forms to fill out when planning ahead: Durable Power of Attorney, advance directive, and POLST.

Durable Power of Attorney (DPOA)

Durable power of attorney is the way to legally give another person the right to make decisions for you. These decisions can be about your healthcare, your finances, or both.

With a DPOA, you name this person in advance, but they only start making decisions for you if you cannot make them yourself. Make sure the person knows that you have chosen them, and that they know what kinds of decisions you want them to make for you.

The Durable Power of Attorney (DPOA) form is a legal document. You can prepare this form in 1 of 2 ways:

- You can have your DPOA written by a lawyer. This allows you to make sure your specific concerns are included on the form.
- Or, you can use forms that you download from the internet.

For your DPOA to be legal, **you must sign it in front of a notary, or in front of 2 witnesses. These witnesses cannot be your family members or your doctor.** Some financial institutions only accept DPOA for finances if it has been notarized.

It is important to sign a DPOA at an earlier stage of memory loss. The law states that when you sign a DPOA, you must be able to understand what you are doing and to sign the form yourself. This is called having “decisional capacity.” Here is a legal definition:

“Capacity” means an individual’s ability to understand the significant benefits, risks, and alternatives to proposed health care and to make and communicate a health-care decision.” (Uniform Health-Care Decisions Act of 1993, 1994)

If someone does not have this capacity, they cannot sign a DPOA. Without a signed DPOA, your family may be limited in making some important decisions unless they go to court and apply to be your legal guardians.

Make sure to give a copy of your signed DPOA to your doctor.

Advance Directive (Healthcare Directive, Living Will)

An advance directive is also called a healthcare directive or living will. This document states your wishes for the kind of healthcare you do and do not want if you become very ill.

For example, you can state that you would or would not want doctors to use a feeding tube to give you nutrition and liquids. Doctors are not legally required to follow your advance directive, but it will be used as a guide for making healthcare decisions if you cannot speak for yourself. Doctors will consult your healthcare directive, your family members, and your healthcare DPOA to get advice on what to do.

You can get a healthcare directive form at your doctor's office, from an attorney, or online. For the form to be legal:

- You must sign it.
- Your signature must be witnessed by 2 people who are not family members or hospital staff.

An advance directive does not need to be notarized. Make sure that you give a copy to your doctor.

Physician Order for Life-sustaining Treatment (POLST)

The POLST form is used to guide your healthcare providers in an emergency. It tells first responders, doctors, and family members what you have decided about certain kinds of care, such as:

- Resuscitation and CPR
- Having a breathing tube placed to use a *ventilator* (breathing machine)
- Using a feeding tube to give you nutrition and liquids

Your POLST form is kept at home or with you so that emergency first responders will see it and follow the orders. Some people post their POLST form on their refrigerator or in another place where it can be seen easily if an emergency occurs.

If you want to fill out a POLST form, talk with your doctor about it. It must be signed by you (or your agent) **and** your doctor.

The POLST form is used in many states, including Washington, Oregon, Idaho, Montana, and California. To learn more, visit: <https://wsma.org/POLST>.

Do I need health insurance? How do I get it?

The Affordable Care Act (ACA) requires that everyone buy health insurance. If you already have Medicare or Medicaid, you do not have to buy any other health insurance.

Under the ACA, some people qualify for a subsidy that pays part of the cost of the insurance coverage. Many people get a full subsidy.

If you do not have health insurance, you can apply for it on the Washington Health Plan Finder website:

- Go to www.wahealthplanfinder.org.
- Find the section on “Washington Apple Health,” and click on “Apply Now.”
- If you need the information in a language that is not English, click on “Language Assistance.”

A social worker or financial counselor at the Memory and Brain Wellness Center can help you with this, if needed.

On the website, you can choose from a list of insurance plans. You can see the price of the premium, your subsidy, and your cost for the coverage.

Think about your future health when you choose a plan. The plan that costs the least may not give you the coverage you need.

Under the ACA, you cannot be denied coverage because of a pre-existing condition. If you have Alzheimer disease or another form of dementia and do not have health insurance, you can still get coverage for your future healthcare costs through the ACA.



What kinds of health insurance are there?

Medicare

Medicare is excellent insurance coverage. It is usually the primary insurance for people age 65 and over. If you are under age 65 and have been on Social Security Disability Insurance for 24 months, you are also eligible for Medicare.

Medicare pays 100% of most emergency medical treatment and 80% of most other care. It does not cover the cost of care for regular daily care such as bathing, dressing, and preparing meals.

You must apply for Medicare. It does not begin just because you turn 65. You can apply online, or at an SSA office near you. It is OK to have someone you trust help you apply.

To apply online, visit the Social Security Administration (SSA) website: www.socialsecurity.gov. The instructions will tell you what information you need.

Medicare Supplement Insurance

Some people also buy a Medicare supplement insurance policy. You must pay for this yourself. It is not covered by a public program.

A supplement will usually pay for the 20% portion of a medical bill that Medicare does not cover. It can cover fees from a hospital stay, a doctor visit, home healthcare, or a nursing home. A supplement can be a good idea if you think your healthcare bills will rise and you can afford the monthly fees.

Private Health Insurance

If you have private health insurance, read your plan booklet to learn what your plan covers. Review it carefully to see if any parts of care for dementia are not covered.

Under the ACA, you cannot be denied healthcare insurance if you have a pre-existing condition. But, your insurance plan might have limits on what it will cover. If you find that your plan will not cover treatment for Alzheimer disease or other forms of dementia, you could look at other plans on the Washington Health Plan Finder website (www.wahealthplanfinder.org).

Long-term Care Insurance

Long-term care (LTC) healthcare plans vary greatly. If you have already bought a policy, review your policy booklet.

Insurance companies often give a memory test to rule out dementia care before they agree to cover someone's long-term care needs. But, if you develop dementia after you are already on the plan, they most likely will keep covering your care as long as you pay the premium. Most long-term care plans cover extended nursing home care, home healthcare, and some assisted living care.

There is no public program to help pay for long-term care insurance. If you have an LTC plan and the benefits are used up, you may be able to apply for Medicaid.

Medicaid

Medicaid is a healthcare insurance program that is run by both the federal and state governments. Under the ACA, coverage for Medicaid has been expanded.

To apply for Medicaid online, visit www.washingtonconnection.org.

To apply in person, visit your local Community Service Office (CSO) of the Department of Social and Health Services (DSHS). To find your local office:

- Visit www.dshs.wa.gov.
- Under "How Do I ...?" click on "Find a local service office."
- Under "How to Find an Economic Services Administration Office," click on "Community Services Offices."
- Enter your zip code or country to see a list of offices in your area.

If you qualify for Medicaid, it will cover most treatment costs for dementia. This includes some in-home care, assisted living, and nursing home care. A social worker will give you an in-home assessment to find out if you qualify for these extra programs.

