Options for Long-term Care for US Polio Survivors

Matt McCann, Lombard, Illinois (800-959-7055)

We face many involuntary risks, so we buy homeowner and auto insurance, although the chance of something happening is very low. If we reach the age of 50, half of us will require some type of long-term care in our lifetime — making this the biggest involuntary risk we will face in life.

Long-term care is care required in our own homes, in adult daycare facilities, assisted living facilities and skilled nursing facilities (nursing homes). The cost of long-term care is a financial burden for many because traditional health insurance or Medicare does not pay for it. (Most health insurance plans and Medicare will only pay up to 100 days of skilled care in a facility and only if you are improving.)

Long-term care insurance is available and will pay for all areas of care, either at home or in a facility. But, the problem with most long-term care insurance plans is that you must “health qualify” to get a policy. Many of the limitations caused by prior polio can disqualify you from long-term care insurance plans.

For some people who had polio, an insurance company called Penn Treaty Network America (www.penntreaty.com/ProdpenntreatyV2) will consider some limited benefits pending a home interview done by a RN. Based on your medical records and the home interview, the company will determine if you are eligible.

This option from Penn Treaty would provide $100 per day for up to two years of care with 5% compound inflation. In 15 years, you would have $200 per day with the inflation protection. (Because of pricing, this is better for people under 65 years of age.) A rider, at extra cost, for some limited homecare is also available pending health approval. A 59-year-old in Illinois, for example, could get this plan with the limited homecare rider for $1,097 per year.

For people who may not health qualify for the above policy, a company called Homeward Bound (TLC Services, Inc., www.tlcservicesinc.com) has a program that provides homecare services for cooking, cleaning, bathing, dressing, shopping, laundry, housekeeping, toileting, taking a person to and from the doctor, medication management and other “non-skilled” needs. This program, available in most states, is not an insurance contract nor is it an insurance policy. It as a maintenance agreement, such as the one you have on your refrigerator. But, this “fee for service” contract is for you.

Any person can qualify for this program from Homeward Bound as long as they are not in a nursing home or other facility or suffering from a terminal illness.

For a yearly fee (paid annually, semi-annually, quarterly or monthly), you can buy a certain number of “homecare hours” for each “event.” An event is any reason you need help due to illness, age or injury. You could have many events in one year or you could have no events in a year.

A person who had polio may purchase up to 720 hours of care per event. (There is a maximum number of hours for each diagnosis.) Remember, this is not per year but for each need. If you run
out of hours for one event, your hours will restore in one year (e.g., one year after the hours expire.)

While you are waiting for the hours to restore, you can keep the same caregiver at a discounted rate, but you will pay the fee. In the meantime, whether you recover or not, if you have another “event,” you have a new set of hours to use.

If you do not recover and have an ongoing need, every other year you will get another set of hours for that need, as stated in the agreement.

An example: As a 56-year-old person who has post-polio syndrome, you purchase 360 hours per event at a cost of $1,172.49/ year or $97.71/month.

You fall and break a leg. You have 360 hours available (usually scheduled in four-hour shifts) for home care, so you or a family member contacts Homeward Bound and an RN case manager assists in developing a “plan of care.” Homeward Bound contracts with health care agencies in advance and uses those companies to select the caregiver. However, if you don’t like a person who is hired, you can request a new person.

You recover and after 53 days (212 hours when using 4 hours per day) you no longer need care. Five months later, you require heart surgery and are recovering at home. Since this is a new event, you have another 360 hours available.

To continue the example, next year you have a stroke and it is decided that you will always need care. For this event, you will use up all of your hours and then go on private pay at a discounted rate. But, another 360 hours becomes available in one year. If you fall and break a hip and need care, this is considered a new event and a new set of hours is available.

Homeward Bound also can maintain full review and coordination of other services (i.e., physical therapy, respiratory therapy, infusion therapy, etc.) under your “Plan of Service.”

Should you need an RN/LPN or other specialist, Homeward Bound’s service coordinator can make the arrangements for you on an individual fee basis.

This program is guaranteed renewable and may not be cancelled except for nonpayment or for reporting false information on the application.