

Journal #6

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April 2, 2013

Invite to World of Aging

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As a social worker you may hear the term "aging in place,." This simply means that older adults function best and have the best mental health when they age in a place they feel most comfortable. The most essential aspect of this idea is that the older adult gets to choose where they grow old. Most times the older adult will choose to stay in their own house because to them it's more than just a house, it's a home. As a social worker you have to evaluate the situation in order to decide what additional support they may need to fulfill their wishes. However, on the other hand, some older adults may rather go to an assisted living arrangement. This approach is connected to self-determination which is part of the Dignity and Worth of the Person, which is one of the six ethical principles within the Social Work Code of Ethics. Basically, the older adult has the freedom to make their own choice.

Yet, most of the time these choices are not very cheap. Assisted living homes can cost up to 6,000 dollars a month. However, there are some social welfare programs out there that can help with these payments. The most common and well known program is Social Security. This program came out of the Social Security Act of 1935, as part of Franklin D. Roosevelt's New Deal. Social Security is a program that provides income to retired workers, survivors of deceased workers, and workers that have become disabled. This program is funded by legal workers that get taxed 4.2 percent of their earnings while the employer gets taxed 6.2 percent. There is a limit to the amount one gets taxed for Social Security. For example, if you make 200,000 dollars of income a year, you will only be taxed for the first 106,800 dollars earned. To qualify for these benefits, workers must have worked for 40 quarters, or 10 years and be over the age of 65, or have become

disabled in some way and not be able to work for longer than 12 months and have enough work credits depending on the age when you became disabled.

The future of this program however, does not seem so bright. Most likely, this generation and the baby boomer generation will have Social Security to depend on, but it does not look as promising for the generations to follow. In 2008, the Social Security Board of Trustees reported that the program will cost more than it is taking in by the year 2015, and by the year 2041 the program will probably be bankrupt. There are many suggestions on how to fix and save Social Security however, every suggestion has been objected by some interest group.

In the year 1972, Supplemental Security Income (SSI) was passed as part of the Social Security Act of 1972. This program provides additional income for older adults and people with disabilities. The most basic difference between SSI and Social Security is that to qualify for SSI you do not have to meet a requirement of work credits. This means that you can receive this program if you have never worked a day in your life. Another difference is that SSI is funded by general tax revenues and not out of the Social Security trust funds.

While on the subject of Social Security and SSI, why not talk about Medicare and Medicaid? First, Medicare is a health insurance program for people over 65 and some people with disabilities. This program is funded by employee and employer payroll taxes. The program however, does not cover all health-care expenses. There are different parts from A to D, and each part has different coverage. On the other hand Medicaid is health insurance for low income citizens including families, children, elderly and the disabled. The government created Medicaid with the presumption that if we spend time, money,

etc. on certain concerns or needs now; we are likely to save money in the long-term. This program is funded by federal funds, but each state has some wiggle room over the specifics of the program.

Now that we understand income support and health insurance programs available for older adults, we can take a closer look at services older adults may need to preserve their independence. The largest program under the OAA, which stands for Older Americans Act and Aging, is Title III which authorizes the development of services for older adults. Based on the state, certain areas are known to be served by Area Agencies on Aging (AAAs). These services can be non-profit agencies or governmental agencies. Also, based on your state size there may be many AAAs or few AAAs.

Title III is broken down into parts A through D. Part A identifies the community based services funded by AAAs such as access services which are outreach programs such as transportation and escort services. They also include in-home services such as homemaking, chore service and home repair and community services which include senior centers, adult day health, and legal aid. Also, caregiver services such as counseling and education. Part C covers nutrition programs, such as congregate meals and home-delivered meals. Lastly, Part D emphasizes disease prevention and health-promotion services. This idea behind OAA is not to provide assistance after an elder is sick, but to prevent that from happening.

If you need to find services that I have described above go to <http://www.eldercare.gov>. This is a very user-friendly site where you can just type in your town or city and up pops services in your area with a full list of contact information

and general information about that particular service. This will make it very easy for you to figure out which service best fits your needs.

As I stated before, many adults choose to remain in their house, because it is very valuable to them. While living in this house elderly adults may need to pay additional medical costs, house repairs, and taxes. One option for older adults is to take out a Home Equity Conversion Mortgage, or a reverse mortgage. A reverse mortgage is a loan against an older adult's home that does not have to be paid back as long as the older adult still lives in the home. You may wonder why every elderly person does not take out a reverse loan, but having a reverse loan has many disadvantages. First, after the older adult dies and the home is sold, the first obligation is to repay the amount of the reverse loan plus interest. Second, many reverse mortgages are not cheap, and many older adults do not use the whole loan, but you still have to pay the entire loan back plus interest. Lastly, older adults must maintain sufficient home insurance, keep current on property tax, and maintain good living conditions.

It is obvious that the future for income support and health insurance programs is dreary, due to the generation of the baby boomers that will use the last funds. However, I feel confident that there is a possibility that a solution will be found and such wonderful programs such as Social Security, SSI, Medicare, and Medicaid will not disappear. If we got out of the Great Depression, why can't we get out of this recession?

Social Security

- Benefits based on earnings
- Financed by employer and wage contributions
- No income limit
- No resource limit
- Must have enough work credits
- Medicare • Benefit Types:
 - Retirement (age 62 & older)
 - Survivor
 - Disability (includes blindness)
- Provides benefits to eligible family members
- Benefit amount based on average lifetime earnings

- Other income does NOT affect benefits (Except wages may affect benefits under full retirement age or disability benefits)
- Where you live or who lives with you does NOT affect benefits

SSI

- Benefits based on need
- Financed by General Revenues

- Limited income
- Limited resources
- No work credits are required
- Medicaid (Medi-Cal in California)
- Benefit Types:
 - Aged (age 65 and older)
 - Disability (any age, includes children)
 - Blindness (any age, includes children)
- No family benefits

- Benefit amount based on Federal and State laws

- Other income MAY affect benefits – report any income you receive
- Where you live or who lives with you MAY affect benefits – report all changes