

5. Making claims for benefits and filing appeals upon denial;
6. Assisting survivors with spousal and beneficiary rights under the plan;
7. Assisting with spousal rights under Qualified Domestic Relations Orders (QDRO's);
8. Assisting employees with claims arising from incorrect calculations or incorrect interpretations of plans.

Project attorney's have specialized training in employee benefits law pertaining to single and multi-employer plans, retirement plans maintained by federal, state, and local government plans, railroad plans, and church plans. Project staff provide advocacy through administrative claims and appeals, and prepares the administrative record should the case require litigation. The Project also consults with a panel of expert ERISA attorney litigators for possible referrals for litigation.

The UMPPRP serves the states of Minnesota, Iowa, Wisconsin, North Dakota and South Dakota. There is a part-time attorney in Iowa to handle Iowa clients, sponsored by *Iowa Legal Aid*. The Project is sponsored in Wisconsin by the *Coalition of Wisconsin Aging Groups* who make referrals to the UMPPRP and assist with outreach and dissemination of Program materials throughout Wisconsin. The Project is sponsored in South Dakota by the *University of South Dakota Law School*, and in North Dakota by *Legal Services of North Dakota*. These agencies assist in Program outreach and dissemination of Program materials and referrals to the UMPPRP. There are no age or income eligibility requirements in order to be served by the UMPPRP.

The UMPPRP also conducts extensive outreach through a network of various labor unions, senior citizen and elderly advocacy groups, the AARP, Aging and Disability Resource Centers (ADRC's), Senior LinkAge Line®, elected officials (federal, state, county, and local), legal services providers, and social security offices throughout the five-state region served by the UMPPRP.

The activities of the UMPPRP interrelate with many other legal aid groups and matters handled by other agencies. Clients assisted by the UMPPRP often have issues related to workers' rights, SSDI, family law, elder law, housing, as well as other claims for government aid. The UMPPRP tries to facilitate with other legal aid groups as much as possible to make sure clients' needs are met. In addition, the UMPPRP takes very seriously its role to report on larger scale problems that are affecting numerous people in an effort to improve the pension system and ensure compliance with applicable laws and regulations.

For many of our clients the correct payment of their pensions makes all the difference in the world for meeting their economic needs. Some clients face recoupments that could cause them to be in need of welfare from the state. Other clients face possible pension reductions that could mean they cannot afford their rent, utilities or food. For many others, the UMPPRP's services provide simple peace of mind that they are getting a fair deal and that someone is monitoring this process. Without the UMPPRP and similar groups, clients are alone in attempting to understand the complicated pension process and have to rely on pension plan administrators and companies to administer things fairly.

The UMPPRP (Upper Midwest Pension Rights Project) can be contacted at:

Toll Free: 1-866-783-5021

Email: pensions@tcaging.org

Or visit website at www.midwestpensions.org.

Beyond Medicare: Consumer Rights in Home Care

Minnesotans who receive certain in-home services (commonly called home care) from state licensed and Medicare certified home care providers and certain Medicaid home care providers have protections under federal and state laws through the Home Care Bill of Rights and other regulations.

Home care services may include the following services: housekeeping, meal preparation, shopping, help with paying bills; assistance with personal care including dressing, oral hygiene, hair care, grooming, bathing, mobility and exercises; medication reminders and medication administration; nursing services such as assessment of a person's functional status and need for nursing services, medication set up, wound care, administration of certain injections or narcotics and supervision of delegated nursing services.

Hospice is also available in one's own residence. Hospice services are regulated by either a state license or by both a state license and Medicare certification. Hospice consumers are protected by the hospice bill of rights.

There are other services offered in one's home but these services (chore, companion, home delivered meals) are not licensed or certified.

Medicare beneficiaries who receive home care or hospice services paid by Medicare have rights under the federal

Medicare home care or hospice bill of rights.

Home care services including assisted living services may be offered in congregate housing settings called Housing With Services (HWS). HWS residences are registered with the Minnesota Department of Health and may offer certain health-related services and certain supportive services to tenants age 55 and older.

The health-related/home care services in a HWS residence are offered through a home care agency having either a Class A or Class F state home care license. The HWS entity either holds one of these licenses or contracts with a Class A or F licensee to deliver the services to HWS tenants.

Assisted living services include certain health-related services and other services that are offered through a Class A or F licensee.

Once HWS tenants enter into a home care service plan or service agreement with a provider having a Class A or F license, they are considered home care clients and have protections under the Minnesota Home Care Bill of Rights. If these clients also get assisted living services, they have some additional protections through the assisted living law.

HWS tenants who have a hospice plan of care have similar safeguards under hospice rights and regulations.

Some key provisions of the Home Care Bill of Rights include the right to:

1. Receive written information about rights in advance of receiving care including what to do if rights are violated;
2. Receive care and services according to a suitable and up to date plan;
3. Take an active part in creating and changing the plan and evaluating care and services;
4. Be told the services that will be provided, the frequency of visits, choices available and consequences of choices including refusal of these services;
5. Know whether the services are covered by health insurance, Medical Assistance, or other health programs and the charges for services that will not be covered by Medicare and the charges the consumer may have to pay;
6. Know what the charges are regardless of who will be paying the bill;
7. Privacy of all personal, financial and medical information;

8. Be allowed access to records and written information;
9. Be treated with courtesy and respect and be free from physical and verbal abuse;
10. Right to reasonable, advance notice of changes or charges, including at least 10 days (30 days for assisted living services) advance notice of the termination of services (with some exceptions).

- To report a concern about the quality of Medicare home care services contact:
Stratis Health (Minnesota's Medicare Quality Improvement Organization)
(877) 787-2847
www.stratishealth.org
- To report or discuss a complaint about home care and hospice services licensed or Medicare certified by the Minnesota Department of Health contact the:
Office of Health Facility Complaints
(800) 369-7994
www.health.state.mn.us/divs/fpc/ohfcinfo/filecomp.htm
- To talk with an ombudsman (consumer advocate) about the rights, regulations and quality of in-home, community services and housing with services or to seek help in resolving a problem with these services contact the:
Office of Ombudsman for Long-Term Care
(800) 657-3591
www.mnaging.org
- For a copy of the home care and hospice bills of rights and for information about the regulations, inspection and complaint investigations of licensed and certified home care and hospice agencies contact the:
Minnesota Department of Health
(651) 201-4101
www.health.state.mn.us/divs/fpc/consinfo.html

Services Available in Housing With Services

If the HWS residence offers assisted living services, the assisted living services must include:

1. Health-related services through a Class A or Class F home care license:
 - A. Assistance with self-administration of medication or medication administration and
 - B. Assistance with at least **three** of the following seven activities of daily living: bathing, dressing, grooming, eating, transferring, continence care and assistance to use the toilet;

2. Registered Nurse (RN) assessment of the physical and cognitive needs of the consumer;
3. A system for delegation of health care activities to unlicensed assistive health care personnel by an RN, including supervision and evaluation of the delegated activities;
4. Staff access to an on-call RN 24 hours per day, seven days a week;
5. A system to check on each assisted living client at least daily;
6. A means for assisted living clients to request assistance for health and safety needs 24 hours per day, seven days a week;
7. A (staff) person available 24 hours a day, seven days a week, who is responsible for responding to the requests of the assisted living clients for assistance with health or safety needs (includes 6 criteria);
8. The availability of the following supportive services:
 - A. Two meals per day;
 - B. Weekly housekeeping;
 - C. Weekly laundry service;
 - D. Upon request of the client, assistance with arranging for transportation to medical and social services appointments and the name of or other identifying information about the person(s) responsible for providing this assistance;
 - E. Upon request of the client, assistance with accessing community resources and social services available in the community and the name of or other identifying information about the person(s) responsible for providing this assistance; and
 - F. Periodic opportunities for socialization; and
9. Availability to all prospective and current assisted living clients, current information on the residence's Uniform Consumer Information Guide (also known as UCIG).

Other health care services that may be available to all HWS tenants:

1. Skilled nursing services
2. Central storage of medications
3. Medication set up
4. Medication reminder
5. Insulin injections
6. Therapy services

7. Blood pressure check
8. Blood glucose
9. Oxygen management
10. Nebulizer treatment
11. Routine foot care
12. Overnight companion or respite
13. Nutritional counseling

Other possible housing services, amenities or features:

1. Congregate meals in a community dining room
2. Meal delivery to one's unit
3. Private entertaining space
4. Van services
5. Hair stylist shop
6. Exercise room
7. Activity room
8. Library
9. Internet and cable access
10. Laundry room or washer/dryer in the unit
11. Whirlpool room
12. Garage or off-street parking
13. Guest accommodations
14. Chapel or faith services
15. Outdoor patio or deck
16. Swimming pool or spa
17. Cafe or store
18. Movie theater
19. Social, recreational and educational activities
20. Special services for persons with memory loss

To request an outline of the *Uniform Consumer Information Guide* or a copy of the consumer resource *Housing With Services, Home Care and Assisted Living* contact the Office of Ombudsman for Long-Term Care at (651) 431-2555 or (800) 657-3591.

Beyond Medicare: Supporting Family Caregivers

Family caregivers are family, friends, and neighbors who provide a wide range of assistance to older adults with tasks they are no longer able to do for themselves. This includes assisting with day-to-day tasks such as shopping, laundry, paying bills and providing transportation or more hands-on personal care, managing medications, monitoring vital signs, and arranging care. In Minnesota, 92% of all long term care needed by older Minnesotans is provided by family caregivers.

Family caregiving impacts virtually everyone—across all