

ASSISTED LIVING – A SMOOTHER, SMARTER SEARCH.



How do you know you or a loved one is ready for an assisted living community? Use these tips as a handy reference from the moment you start the conversation to the point you find the perfect fit.

VILLAGE ON THE GREEN | 
A LIFESPACE COMMUNITY®

BEGIN BY BEING MORE OBSERVANT.

- Are daily tasks becoming a challenge?
- Has it become difficult to leave the house?
- Are they becoming socially isolated?
- Have there been recent falls, accidents or medical scares?
- Are they having trouble recovering from common illnesses?
- Are chronic health conditions worsening?
- Are you noticing mood changes or a change in daily habits?

LOOK TO MINIMIZE STRESS.

- Engage all members of your family who are willing and able to help.
- Keep an open mind – Identify both your top concerns and the areas your loved one feels they may need help with.
- Lean on the experience and knowledge of experts.

Wherever you are in your care journey, don't hesitate to call 407-682-0230 anytime you need advice.

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515 Village Place | Longwood, FL 32779
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ANALYZE YOUR OPTIONS.

- Make a list. Identify wants and needs to assess the options available in your area.
- Do your research and, most importantly, go for an in-person visit.
- Are there any initial costs and what do they include? How about monthly fees?
- Get to know all of the community's health care offerings in case needs change over time.
- Talk to current residents and their families.
- Attend the community's next informational event.

CONSIDER THESE KEY QUESTIONS.

- Do floor plan options provide ample space and offer features that feel like home?
- Is the community conveniently located? Does it feel secure?
- What types of amenities, common spaces and dining options are available?
- Are there opportunities for wellness, fitness and continued learning?
- Is there a strong social support system among neighbors?



MAKING SENSE OF MEDICARE.

When it comes to financing a stay or a move to skilled nursing whether for short-term or long-term care, it's critical to learn about Medicare – the federal insurance program for people 65 and older and those who've been disabled for at least two consecutive years. There are several kinds of coverage:

- **Medicare Part A** covers comprehensive nursing care and rehabilitation services immediately following a hospital stay, limited to a period of 100 days per incident of illness. Part A also covers hospitalization, home health and hospice.
- **Medicare Part B** helps cover services such as outpatient therapy, durable medical equipment (DME) and other services.
- **Medicare Part C** provides Advantage Plans/ Medicare replacement plans. Some communities accept only traditional Medicare for skilled nursing and rehab.
- **Medicare Part D** covers medications.



WHAT'S USUALLY COVERED?

When rehabilitation services are needed, Medicare covers room and board, dietary counseling, medications, medical social services, medical supplies and equipment used, and ambulance transportation (when other transportation endangers health). And when needed as part of the insured's health goals, Medicare also covers physical, occupational and speech therapies.

WHO IS ELIGIBLE FOR SHORT-TERM REHABILITATION AT OUR COMMUNITY?

For the Medicare Part A benefit, the insured must meet these qualifications:

- Medicare is their primary form of insurance.
- They've spent at least three consecutive inpatient midnights in a hospital within the last 30 days.
- They have a qualifying diagnosis and a need for daily skilled services, such as nursing or therapy services.
- Their doctor has written orders allowing them to be discharged from the hospital to a Medicare-certified comprehensive nursing care facility.

For further details, call 1-800-MEDICARE (1-800-633-4227) or visit [medicare.gov](https://www.medicare.gov).

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