



Do your parents need a manager?

Geriatric care managers offer to help with elders

By [Elizabeth O'Brien](#)



As Hurricane Sandy barreled up the East Coast, Meg Mindell visited her elderly clients and made sure they had emergency supplies for any power outages. When the storm made landfall and two clients—a couple in their late 70s whose Rumson, N.J. home wasn't in an evacuation zone—noticed water seeping into their living room home in the middle of the night, Mindell and a colleague coordinated the couple's evacuation to a hospital. The husband was admitted, but the wife couldn't return home and had no local family. So Mindell took the client home with her for a week until a bed opened up at an assisted living facility.

It was all just part of the job description for Mindell. She's a geriatric care manager, a member of a profession that's been in existence since at least the 1980s but doesn't get much attention from the public. Geriatric care managers—who often come from backgrounds in nursing, psychology, or social work—coordinate many aspects of their older clients' care, from hiring home health aides to navigating public benefits and helping in emergencies.

The National Association of Professional Geriatric Care Managers, the main national organization focused solely on geriatric care, has 2,000 members nationwide, but experts in the field say there are many other practitioners in the field who don't belong to that group. The managers don't personally perform the basic, more menial tasks of housekeeping and personal care associated with home-health aides, but they often help families coordinate that kind of care. Adult children typically hire care managers to help with their aging parents, although a growing number of childless adults are inquiring about their own future care, care managers report.

Care managers charge by the hour, like therapists or lawyers, and hourly fees generally range from \$100 to \$200. Typically, families pay out of pocket. Medicare doesn't cover the cost of geriatric care management (nor does it cover the cost of long-term care).

Some long-term care insurance policies, like ones issued by John Hancock Financial, cover geriatric care services to an extent—in John Hancock's case, the level of coverage depends on the policy. And some companies include geriatric care services as a benefit to help employee caregivers. [Chevron Corp.](#), for example, covers six hours of care management per year, a benefit that can provide particular comfort to workers posted overseas who have responsibility for loved ones back home, said spokesman Brent Tippen.

An investment in care management can prove cost effective—to say nothing of the dividends it pays in peace of mind—but you have to do your homework, experts say. “Anyone can call themselves a care manager,” said Robert Bullock, principal of the Elder & Disability Law Center in Washington, D.C., who frequently works with care managers.

Four different organizations provide certification for care managers, ensuring that they’ve met certain education and other requirements. Members of the National Association of Professional Geriatric Care Managers, which isn’t one of the certifying agencies, must uphold a code of ethics. But in most states there are no laws requiring that care managers have such certifications or belong to such groups.

Beyond official credentials, consumers considering hiring a care manager should seek out practitioners with expertise that matches their loved one’s needs. Some managers have particular strengths in caring for people with dementia, for example.

Ideally, a family’s relationship with a care manager should be established before the arrival of a crisis (medical or otherwise). The relationship typically begins with a needs assessment, which can take up to a full day. Sometimes, the care manager works solely with family members and never meets the older care recipient, instead concentrating on directing the family to the resources they need. Other times, the care manager visits the older person’s house, observing the person and conducting a safety check of the environment. Clients and their families can then decide if they want an on-going relationship that might include weekly or monthly visits by the manager.

While the out-of-pocket costs can add up, there are various ways a care manager might save clients money in the long run. She could determine, for example, that a client can manage with a few hours of home help daily, and not full-time care as the family had imagined. Care managers can also help families negotiate with assisted living facilities. They can introduce clients to resources they hadn’t known about—in some communities, for example, Rotary Club members offer handyman services free to older people.

A typical individual care manager has between 20 and 25 clients, said Linda Fodrini-Johnson, executive director of Eldercare Services, a geriatric care practice in the San Francisco Bay area. But clients and their families should understand upfront who will actually provide the services when they engage a geriatric care manager, Bullock advises. Some busy professionals hire contract care managers to handle some of their work on an hourly basis. You may interview a primary care manager only to find your family member’s case assigned to someone else.

Contract workers might not get paid to do research like visiting assisted living facilities or attending a seminar. “They’re not employees, and their ability to do background work is limited based on whether the employer will pay for education,” Bullock said. Part-time workers might not want to be contacted after hours, added Bullock, who says he has had trouble contacting some care managers during evenings and weekends.

Sometimes, families prefer not to pay the higher, care-manager prices for a particular job. Fodrini-Johnson, for example, charges \$140 per hour for her services. But she might send a

lower-cost provider to take a patient to the doctor and accompany the patient in the waiting room, and then arrive herself right at the appointment time if her expertise is needed—thus saving the client money.

Families should ask prospective care managers if they have any financial relationships with providers like assisted living facilities or home care agencies. Liza Petrick, a geriatric care manager in the Washington, D.C. area, said she's been offered money for client referrals from various types of service providers, which she has refused as unethical. Nonetheless, some care managers do accept such payments, critics say, and they might pose a conflict of interest.

Whatever the arrangement, terms must be outlined at the beginning of the relationship so clients and their families face no surprises, experts say. Families usually sign a service agreement at the beginning of the relationship. This should clearly state the hourly fee that will be charged for services, care managers say, and should outline under what terms the relationship can be terminated by either party.

While it involves some legwork, a deliberate, informed choice of care manager can reap huge rewards for families, Bullock said: "The better ones do an excellent service."