Changes and Choices

Legal Rights of Senior Adults

Dear Friends:

Your state Legislature is dedicated to the responsibility of helping people live full, productive lives. As we grow older, we should see broader horizons and increased options. Unfortunately, that is not the case for a number of our senior citizens.

This book has been specially prepared as a reference guide to provide information helpful to senior adults. Our hope is that your life will be enriched and empowered by this knowledge and that your senior years will truly be golden. In all cases, the more you know, the better you can provide for your own well-being.

Please take the time to read this information. It is designed to help you understand your legal rights. An integral and continuing aspect of the well-being of senior adults is access to information and education concerning legal issues. Our intention is to give you information, not legal advice. It is toward that end that this publication is directed. May you find it useful.

Prepared by the Michigan Legislature

This information is provided free to Michigan citizens
and is not for reproduction for resale or profit.

This booklet contains information of a general nature concerning the legal rights of older people, but may not apply to all fact situations. ***It is not meant as a substitute for state or federal law or the decisions of courts or public officials or agencies.*** *It is an informational guide, intended to aid the reader as to the types of issues that should be raised with an attorney or with the appropriate representative of public or private agencies listed in this publication.*

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Introduction

"Changes and Choices: Legal Rights of Senior Adults" is a reference guide for seniors and their families. It covers a wide range of topics of special interest to many seniors. The book uses a question and answer format to help clarify issues and ideas. It is divided into chapters, with bold headlines and subheads, to allow for quick referral to specific points.

The legal matters covered in this book deal with a broad array of issues we believe are important and interesting to seniors. It is not, however, an exhaustive legal encyclopedia. We have tried, rather, to give you basic information on subjects you are not likely to find explained elsewhere. Some situations will require the assistance of an attorney or an agency which provides legal aid. Our intention is to give you information, not legal advice.

Many topics covered in this book are subject to change through modifications in laws or administrative policies. We have made the information as accurate and up-to-date as possible, but we recommend that you check with an attorney or other authority before taking any action.

The intention of this book is to help increase your awareness of your legal rights and the state and community resources available to you.

Disability and Consent

GUARDIANSHIP

What is a guardian?

A guardian is a person appointed by probate court and given power to make some or all decisions about the care of another person. A person for whom a guardian is appointed is known as a ward.

How does the appointment of a guardian affect an individual's rights?

An individual may lose certain rights. A guardian can be given the power to choose where a ward will live; to consent to medical treatment; to receive money and property belonging to the ward; and to apply this money toward the ward's support and care.

Who can petition the court for appointment of a guardian?

An individual on his or her behalf, a family member, a Department of Human Services worker in cases of abuse or neglect, or any person interested in the welfare of the prospective ward can petition the court.

What should I do if a guardianship is sought and I disapprove?

Consult a lawyer immediately. If you do not know a lawyer, seek referral through the county or state bar association, or contact the local legal services office. See page 70 for services in your area.

What will happen if I don't retain a lawyer?

Probate court will appoint a person, known as a guardian ad litem, to represent you during guardianship proceedings. This person will be chosen by the court, not by the petitioner.

The guardian ad litem must visit you, explain the proceeding, inform you of your rights, and determine whether you wish to protest the guardianship.

What rights do I have when facing potential guardianship?

1. You have the right to object to the guardianship, to the powers of the guardian, and to appointment of a particular person as guardian.
2. You have the right to be present at the hearing.
3. You have the right to be represented by a lawyer. The court will appoint a lawyer if you request one or if you wish to contest any aspect of the proceeding.
4. You have the right to present evidence on your own behalf.
5. You have the right to cross-examine all witnesses.
6. You have the right to have a jury trial.

When can the court appoint a guardian?

The court must be convinced by evidence presented at the hearing that you are not capable of making informed decisions about your own care.

Can a guardian be appointed just because of my age?

No.

Can a guardian be appointed just because I am physically disabled?

No. For example, a guardianship is not appropriate merely because a person is wheelchair-bound due to severe arthritis. A guardianship may only be imposed if a disability substantially affects intellectual functioning.

Who can be appointed as guardian?

The following people may be appointed as guardian: your spouse; an adult child or relative you have lived with; any other adult; or an agency.

Can I choose my own guardian?

Yes. The court must appoint the person chosen if that person is suitable and willing to serve.

Do all guardians have the same powers?

No. If a guardianship is appropriate, the court must tailor the powers of the guardian to the demonstrated need of the ward. A guardian with less than full powers is known as a limited guardian.

Can I handle my own financial affairs?

A court may allow a ward to control part of his or her property to encourage self-reliance. For instance, a court may allow a ward to maintain a checking account.

While under guardianship, do I have the right to make a will?

Yes, if you are aware of property owned and natural heirs, and understand that the document drafted is a will.

Can a guardian commit a ward to a mental hospital?

A person can be involuntarily committed if he or she is mentally ill and dangerous to oneself or others. This determination can only be made after a commitment hearing, often separate from the guardianship hearing.

What are the responsibilities of a guardian?

The responsibilities of a guardian include providing for the care and comfort of the ward, and taking reasonable care of clothing, furniture and automobiles. In addition, a guardian must secure services to help the ward return to self-care as soon as possible.

Can a guardian be replaced?

Yes. You, or any person interested in your welfare, can petition the court to remove a guardian. The court will remove the guardian and appoint another person if it is in your best interest.

How long will a guardianship last?

Oftentimes, a guardianship lasts until death. But the court must review your guardianship one year after it begins and then every three years. You also have the right to request a review.

What if I feel I no longer need a guardian?

You can send a letter to the judge of probate court requesting the guardianship to be ended. Or a petition can be filed by you or by anyone interested in your welfare. In either case, a hearing will be held.

What rights do I have at this hearing?

All rights you had during the initial hearing are retained in a termination hearing, including the right to an appointed lawyer. Presentation of a statement on your behalf from a doctor may be particularly important.

CONSERVATORSHIP

What is a conservator?

A conservator is a person or corporation appointed by probate court to manage another person's property and financial affairs, as compared to a guardian, who is appointed by probate court and makes decisions about the care of another person.

When can the court appoint a conservator?

In general, the court must determine after a hearing that you are unable to manage your property and financial affairs effectively. If you need a guardian but have substantial property, a conservator may also be appointed. *(Sometimes the same person serves as both guardian and conservator.)*

A court can appoint a conservator for you at your own request.

Can a conservatorship be imposed just because of my age?

No.

Can I choose my own conservator?

Yes. If you have the capacity to make an intelligent choice, the court in almost all circumstances must respect this choice.

What powers does a conservator have?

A conservator becomes trustee of all property belonging to the other person. He or she has broad, but not unlimited, power to deal with the property in the interests of the other person. Per Public Act 173 of 2012, a conservator cannot dispose of a protected individual's dwelling, real property, or interest without the court's approval.

Can a conservator decide where someone will live?

Legally, a conservator does not have this power.

Can a conservator consent to medical treatment on your behalf?

No.

What are the responsibilities of a conservator?

A conservator must spend funds of the person necessary for support, education and care. He or she must file with the court a list of all property, and keep accurate records of money received and money spent.

Can a conservator be replaced?

Yes. A conservator can be removed by the court if he or she is not properly carrying out his or her responsibilities.

What if I feel I no longer need a conservator?

You, or anyone interested in your welfare, can file a petition with probate court requesting the conservatorship be ended. If a conservator was originally appointed at your request, a hearing may not be necessary.

Upon termination of the conservatorship, title to all property passes back to you. For more information, please consult an attorney.

DURABLE POWER OF ATTORNEY

What is a power of attorney?

A power of attorney is a document which gives another person the power to handle some or all your financial or legal affairs. The person to whom you give this power is known as your "attorney-in-fact."

What is a durable power of attorney?

An ordinary power of attorney ends when you become mentally incompetent because of sickness or injury to handle your affairs. A durable power of attorney does not end in these circumstances. Indeed, you can draft a durable power of attorney which only takes effect if and when you become incompetent *(unable to make decisions for yourself).*

What powers can I give through a durable power of attorney?

There are two types of durable powers of attorney. One gives your attorney-in-fact power over all property and financial affairs—signing checks and making deposits, paying bills, selling property, investing money. *(An attorney-in-fact cannot cash your Social Security check, but can deposit it and then make withdrawals.)* You can grant your attorney-in-fact power to deal with only certain property, and be quite specific how you want this property managed.

The second is a durable power of attorney for health care. This will be explained more fully later in this section.

If my spouse and I own everything "jointly," might a durable power of attorney still be useful?

Yes. If you become incompetent your spouse can still sign checks and make withdrawals on joint bank accounts, but your spouse cannot sell

jointly owned stocks or real estate without your signature. Your spouse cannot name or change a beneficiary on your life insurance or your retirement benefits.

Who can I appoint as attorney-in-fact?

You can choose any person age 18 or over—spouse, relative, friend—or a bank. It is important to appoint someone you trust, who can handle the tasks, and who is willing to serve.

Can I name more than one person as attorney-in-fact?

Yes. You can name two people to act jointly or name a second person to serve if the first is unable to do so, or name different people to handle different affairs.

What is the legal responsibility of an attorney-in-fact?

An attorney-in-fact is obligated to follow your instructions set forth in the durable power of attorney. To the extent the attorney-in-fact has discretion, he or she must act in your best interest. You can sue the attorney-in-fact for damages if he or she breaches duties owed to you.

Are there advantages and disadvantages to a durable power of attorney?

A person has absolute control as to whom to designate as attorney-in-fact. An individual can grant limited powers. A durable power of attorney can be used to plan for the possibility of future incompetence.

However, a power of attorney is a private agreement and is not overseen by any court. You do have a right to an inventory or an accounting upon request. It is important to designate someone you trust as attorney-in-fact.

Can I revoke a power of attorney once granted?

Yes, in most circumstances. In the agreement you may specify how the power be ended. If you wish to terminate a power of attorney, you should give written notice to the attorney-in-fact and send a copy to all persons and institutions the attorney-in-fact was dealing with in your behalf, such as your bank.

Can anyone else revoke a power of attorney I have granted?

Yes. If a conservator is appointed for you by the probate court, the conservator has the right to revoke the durable power of attorney. But if you have drafted a durable power of attorney, it is less likely a conservator will ever be needed.

Does the death of a grantor affect a power of attorney?

Yes. All powers of attorney, ordinary or durable, generally cease when the person granting the power dies.

Is there a method to effect the same ends as a durable power of attorney, but have the power survive death?

Yes. You can have a lawyer draft a document known as an inter vivos or living trust. A trustee would handle your affairs if you became incompetent and the trustee would continue to manage the property after your death. The cost of setting up and maintaining the trust makes this option worthwhile only for larger estates.

ADVANCE DIRECTIVES

What is an "advance directive?"

An advance directive is a written document in which a competent individual gives instructions about his/her health care, that will be implemented at some future time should that person lack the ability to make medical decisions for himself or herself.

Must I have an advance directive?

No. The decision to have an advance directive is purely voluntary. No family member, hospital or insurance company can force you to have one, or dictate what the document should say if you decide to write one.

Are there different types of advance directives?

Yes. Two types are a durable power of attorney for health care and a living will. Living wills are not recognized in Michigan law. You may wish to consult an attorney for further information regarding living wills.

What is a "durable power of attorney for health care"?

A durable power of attorney for health care is a document in which you give another person power to make medical treatment and related personal care and custody decisions for you.

Is a durable power of attorney for health care legally binding in Michigan?

Yes, based on state law originally passed in 1990.

Who is eligible to create a durable power of attorney for health care?

Anyone who is 18 years of age or older and of sound mind is eligible.

What is the title of the person to whom I give decision-making power called?

That person is known as a "patient advocate."

Who may I appoint as my patient advocate?

Anyone who is 18 years of age or older may be appointed. You should choose someone you trust, who can handle the responsibility, and who is willing to serve.

Does a patient advocate need to accept the responsibility before acting?

Yes, he or she must sign an acceptance. This does not have to be done at the time you sign the document. Nevertheless, you should speak to the person you propose to name as patient advocate to make sure he or she is willing to serve.

When can the patient advocate act in my behalf?

The patient advocate can make decisions for you only when you are unable to participate in medical treatment decisions.

Why might I be unable to participate in medical treatment decisions?

You may become temporarily or permanently unconscious from disease, accident or surgery. You may be awake but mentally unable to make decisions about your care due to disease or injury.

Who determines that I am no longer able to participate in these decisions?

Your attending physician and one other physician or licensed psychologist will make that determination. If your religious beliefs prohibit an examination to make this determination, and this is stated in the designation document, you would indicate in the document how it would be determined when the patient advocate can act.

What powers can I give a patient advocate?

You can give a patient advocate power to make those personal care decisions you normally make for yourself. For example, you can give your patient advocate power to make an anatomical gift, consent to or refuse medical treatment for you, to contract for home health care or adult day care, arrange care in a nursing home or move you to a home for the aged.

Can I give my patient advocate the authority to make decisions to withhold or withdraw life-sustaining treatment, including food and water administered through tubes?

Yes, but you must express in a clear and convincing manner that the patient advocate is authorized to make such decisions, and you must acknowledge that these decisions could or would allow you to die. If you have specific desires as to when you want to forego life-sustaining treatment, you should make them clear to your advocate. You may also include them as written instructions in your durable power document.

Do I have the right to express in the document my wishes concerning medical treatment and personal care?

Yes. You might, for example, express your wishes concerning the type of care you want during terminal illness. You might also express a desire not to be placed in a nursing home and a desire to die at home. Your patient advocate has a duty to try to follow your wishes.

Is it important to express my wishes in the durable power of attorney for health care designating document?

Yes. Your wishes might not be followed if no one is aware of them. It can also be a great burden for your patient advocate to make a decision for you without guidance.

Can I appoint a second person to serve as patient advocate in case the first named person is unable to serve?

Yes.

Must a durable power of attorney for health care designation document be witnessed?

Yes. Two witnesses must sign. The witnesses cannot include your spouse, parent, child, grandchild, sibling, presumptive heir, known devisee at the time of the witnessing, physician, or patient advocate; an employee of your life or health insurance provider; an employee of a health facility that is treating you; or an employee of a home for the aged as defined in Section 20106 of the Public Health Code, Act No. 368 of the Public Acts of 1978, being Section 333.20106 of the Michigan Compiled Laws, where you reside.

In general, what should I do before completing an advance directive?

Take your time. Consider who you might choose to be your patient advocate, or to act in your place. Think about your treatment wishes. Discuss the issue with family members and your doctor. Talk with your minister, rabbi, priest, or other spiritual leader if you feel it would be helpful.

Are there issues I should give particular attention to?

Yes. Many people have strong feelings about the administration of food and water. If you are unable to swallow, food and water can be supplied by a tube down your throat, a tube placed surgically into your stomach, or intravenously. You may wish to consider and indicate in what circumstances, if any, you wish such procedures withheld or withdrawn. Also, bear in mind that people's opinions regarding their own health care sometimes change over time. Your wishes regarding medical treatment when you are relatively young may be quite different from your wishes when you reach advanced age, so you may wish to review your decisions periodically with your patient advocate.

Is there a standard form for an advance directive?

No. You may use a form designed by an organization, you may hire a lawyer to draft the necessary documentation, or you may write out the documentation yourself. If you write the documentation yourself, make sure that it is legible. Under state law, you must sign the document, date it and have it witnessed as described above. A person accepting the responsibility to act as a patient advocate must sign the designating document.

Note: Under state law, any form evidencing a patient advocate's acceptance of the position must contain the statements in sections A through J, below.

A. This designation shall not become effective unless the patient is unable to participate in medical or mental health treatment decisions.

B. A patient advocate shall not exercise powers concerning the patient's care, custody and medical or mental health treatment that the patient, if the patient were able to participate in the decision, could not have exercised on his or her own behalf.

C. This designation cannot be used to make a medical treatment decision to withhold or withdraw treatment from a patient who is pregnant that would result in the pregnant patient's death.

D. A patient advocate may make a decision to withhold or withdraw treatment which would allow a patient to die only if the patient has expressed in a clear and convincing manner that the patient advocate is authorized to make such a decision, and that the patient acknowledges that such a decision could or would allow the patient's death.

E. A patient advocate shall not receive compensation for the performance of his or her authority, rights and responsibilities, but a patient advocate may be reimbursed for actual and necessary expenses incurred in the performance of his or her authority, rights and responsibilities.

F. A patient advocate shall act in accordance with the standards of care applicable to fiduciaries when acting for the patient and shall act consistent with the patient's best interests. The known

desires of the patient expressed or evidenced while the patient is able to participate in medical or mental health treatment decisions are presumed to be in the patient's best interests.

G. A patient may revoke his or her designation at any time and in any manner sufficient to communicate an intent to revoke.

H. A patient may waive his or her right to revoke his or her designation as to the power to make mental health treatment decisions and, if such waiver is made, his or her ability to revoke as to certain treatment will be delayed for 30 days after he or she communicates his or her intent to revoke.

I. A patient advocate may revoke his or her acceptance to the designation at any time and in any manner sufficient to communicate an intent to revoke.

J. A patient admitted to a health facility or agency has the rights enumerated in Section 20201 of the Public Health Code, Act No. 368 of the Public Acts of 1978, being Section 333.20201 of the Michigan Compiled Laws.

Note that some, but not all, of the rights enumerated in Section 20201 include:

A patient or resident in a health facility or agency (including a hospital and a nursing home) shall not be denied appropriate care on the basis of race, religion, color, national origin, sex, age, disability, marital status, sexual preference or source of payment.

Patients and residents are also entitled to:

- inspect, or receive for a reasonable fee, a copy of their medical records, and to have the confidentiality of those records maintained.
- receive and examine an explanation of their bills regardless of the source of payment and to receive, upon request, information relating to financial assistance available through the facility.
- associate and have private communications with their physician, attorney, or any other person of their choice, and to send and receive personal mail unopened on the same day it is received at the health facility or agency, unless medically contraindicated as documented by the attending physician in the medical record.

What if there is a dispute as to how my durable power of attorney for health care should be carried out?

If there is a dispute as to whether your patient advocate is acting consistent with your best interest, the probate court may be petitioned to resolve the dispute. The court can remove a patient advocate who acts improperly on your behalf.

CIVIL COMMITMENT

What is civil commitment?

Civil commitment is a procedure through which you involuntarily become a patient at a private or public psychiatric hospital, a psychiatric alternative treatment program, or a psychiatric unit upon order of a court.

Who may be committed?

To be involuntarily committed, a probate court must find you are "a person requiring treatment." The court must determine you are mentally ill and that there is a reasonable expectation of harm to you or others, or an inability to attend to your basic bodily needs, such as shelter, clothing, or food. A person can also be committed if they do not understand the need for treatment or if they are unlikely to participate in treatment voluntarily.

Can I be committed merely because of my age?

No.

What is the procedure for committing a person?

Unless paid for privately, the process begins when someone requests hospitalization or files an application with the local community health services program, or files a petition in probate court. The application or petition states you need in-patient psychiatric care and sets forth supporting facts. In most cases, it must be accompanied by a statement from a doctor or psychologist who has examined you, and found you to be a person requiring treatment.

Once you are at the hospital, a psychiatrist will examine you within 24 hours, and certify that you are a person requiring treatment. A probate court hearing to determine whether you are to be committed must be held within seven days, excluding Sundays and holidays. You will probably remain hospitalized until the hearing. Routine treatment will not begin until after the court hearing and you are found to be a person requiring treatment.

What will happen during the time before the hearing?

If you are in the hospital involuntarily, within 72 hours (3 days), you will be visited by your lawyer, a community mental health worker, a hospital employee and a person of your choice. They will inform you of the nature of commitment, the proposed plan of treatment in the hospital or the community health center, and your right to defer the hearing and agree to accept the treatment offered.

If I choose to defer the hearing, how long will the deferment last?

The deferment will be no longer than 60 days if you remain in the hospital, and no more than 90 days if you accept community treatment or a combination of hospitalization and community treatment as long as you continue to receive the treatment. You retain the right to refuse treatment and to request a hearing during this time.

Who is responsible for my care in community treatment?

The court will designate the appropriate community mental health services program or, if private pay, an independent mental health practitioner to be responsible for your care.

What will happen after the deferment period?

You can choose to remain a voluntary patient if you still need treatment. If you do not wish to remain in treatment, but the director of the hospital or community mental health center believes you still need treatment, additional documentation will be filed with the court and a hearing will be held.

What are my rights at the hearing?

1. The right to be present at the hearing.
2. The right to be represented by a lawyer. If you are indigent and cannot afford a lawyer, the court will appoint one for you.
3. A doctor or licensed psychologist who has examined you must testify. You have the right to cross-examine him or her, and any other witnesses.
4. The right to present evidence in your own behalf.
5. The right to have a jury trial.
6. The right to an independent clinical evaluation.

Under what circumstances can the court order hospitalization or community treatment?

The judge or jury must find there is clear and convincing evidence that you are a person requiring treatment. If this is not shown, you must be discharged immediately.

If it is proven I am a person requiring treatment, what can the court order?

The court may order that you be hospitalized, but only if there is no suitable alternative treatment. The court may order that you undergo community treatment, or a combination of hospitalization and community treatment for a limited period of time.

Another option that the court may pursue is the ordering of assisted outpatient treatment, or AOT. AOT is court-ordered treatment for individuals who have a history of medication or treatment noncompliance. This option may only be ordered for individuals who have a record that shows they have failed to comply with treatment plans in the past and pose a danger to themselves or others.

Any individual over 18 years of age may file a petition asserting that a person meets the criteria for AOT. The court must then hold a hearing to determine whether the subject of the petition meets the criteria. If so, and if the individual is not scheduled to begin a course of outpatient mental health treatment that includes case management services or assertive community treatment team services, the court will order the person to receive AOT through his or her local community mental health services provider.

If the court orders that I be hospitalized, is there a chance I will someday be released?

Yes. The probate court must have a new hearing on your further commitment after 60 days, and again, after an additional 90 days of hospitalization, and then again, annually. Every six months after that, the director of the hospital must review your status, file a report with the probate court, and notify you of the results of the review. If you disagree with the recommendation, you have the right to a hearing.

If the hospital director or the court finds that you are not a person in need of treatment, or in need of treatment but not hospitalization, you will be discharged from the hospital.

What rights do I have concerning medical treatment in the hospital?

You have the right to be informed of your condition and progress. You may have your own doctor if you can afford one. If you are competent to consent and have no guardian, you have the right to refuse surgery.

You also have the right to designate an individual as your mental health treatment patient advocate. This individual would be responsible for consenting to your mental health treatment during a time of incapacitation. Additionally, you have the right to create a statement of your desires for mental health treatment, which is known as an "advanced directive." This document would provide a basis for the mental health professionals dealing with you, or with your patient advocate, when deciding a course of treatment.

May I have personal possessions and money?

You may have personal possessions, including your own clothing. This right to personal possessions can be limited by the hospital for a number of reasons, including the prevention of theft.

A hospital can require you to deposit all money on your person in an interest-bearing account for safekeeping. You have the right to access your money and to spend it. This right may only be restricted if essential to prevent you from unreasonably spending all your money.

What is the responsibility of the hospital?

You are entitled to mental health services suited to your condition, and to a safe, sanitary and humane living environment. Further, you have a right to be treated with dignity and respect.

Wills and Estate Planning

People often view estate planning only in terms of a will; several other devices can be used. This chapter presents some goals of estate planning and describes methods available to meet these goals.

Why should I plan my estate?

It is beneficial to plan your estate in order to:

1. dispose of property after death;
2. partially or completely avoid probate;
3. realize tax savings;
4. manage your property during your lifetime.

What is probate?

Probate is the process through which a court oversees the distribution of one's property after death. The court is called probate court.

Does all property go through probate?

No. Jointly held property, trust accounts, pension benefits and life insurance proceeds go directly to the joint tenant or named beneficiary.

Must an estate be probated?

Not necessarily. For example, if all property were held jointly with a spouse and the spouse survived, there would be no probate of an estate.

Is there more than one method to probate an estate?

Yes. There are several procedures for smaller estates. For larger estates, you can specify in your will a preference for either independent or supervised probate. In independent probate there are no formal court hearings. The estate still must be kept open for at least five months to allow creditors to submit claims.

How does one initiate the probate process?

A petition is filed with probate court. The petition can be brought by a surviving spouse, a child, an heir, the personal representative *(formerly known as "executor")* or a creditor *(if no petition is filed within 30 days of the person's death).*

Forms necessary to probate an estate can be purchased from some office supply stores.

Is one required to have a lawyer?

No, but it is usually helpful to seek such guidance. If a lawyer is retained, there will be attorney fees. These fees are payable by the estate.

Does my estate avoid probate if I have a will?

No. Whether or not you die with a will, your estate may go through probate. If there is a will, the initial purpose of probate is to prove its validity. The person named in the will as personal representative is then appointed to proceed with administering the estate.

What if I die without a will?

If a petition is filed, the probate court will appoint a personal representative to administer the estate. Generally, the surviving spouse (or a person of his/her choice) has first priority; the closest heir has next priority.

What is the role of a personal representative?

A personal representative collects assets of the estate, pays debts and taxes, and distributes property as directed in the will. A personal representative is entitled to be paid from the estate for his or her service.

Is the personal representative responsible for debts of the deceased?

Generally, debts are paid from assets in the estate. The personal representative is only responsible if careless. For instance, a personal representative might be liable if he or she distributes estate assets to beneficiaries before proper debts are paid.

How long does it take to probate an estate?

The time necessary depends, among other factors, on the size of the estate, whether there is a surviving spouse and whether the validity of the will is questioned.

What costs are involved in probating an estate?

The personal representative may charge a fee. If the personal representative seeks legal counsel, there will be attorney fees. A filing fee and an inventory fee *(based on the value of the probate estate)* must be paid to probate court.

Who is responsible for paying these costs?

Fees are paid by the personal representative from assets of the estate.

What taxes must be paid?

Estate (Inheritance) Tax—The state no longer collects a separate inheritance tax. Michigan's estate tax is equal to the maximum allowable federal credit for state estate taxes paid; this is commonly called a "pick up" tax. Since January 1, 2005, there has been no state estate tax credit in federal law. Therefore, there has been no Michigan estate tax for dates of death during this period, and no estate tax forms need to be filed with the Michigan Department of Treasury. Should the federal estate tax provide for a state credit in the future, Michigan's estate tax would resume.

The filing deadline was also changed from 105 days from the date of death to nine months. Additionally, estate tax returns are filed with the State Department of Treasury instead of with local county treasurers and probate courts.

Property held in joint tenancy does not go through probate; it passes directly to the surviving owner(s).

What are some devices that may be used for estate planning?

1. Joint tenancy with full rights of survivorship
2. Trust
3. Gift
4. Will

What is joint tenancy with full rights of survivorship?

This is one way that property can be held by more than one person. A joint owner cannot sell his or her interest without the permission of all other owners. Upon the death of a joint owner, property automatically belongs to surviving owner(s); provisions in a will do not affect it.

What are "the rights of tenants by the entirety"?

This is a form of joint tenancy. This arrangement is only possible between a wife and husband. Rights of the parties are the same as those between joint tenants with full rights of survivorship.

What are advantages to holding property in joint tenancy with full rights of survivorship?

Property held in joint tenancy does not go through probate; it passes directly to the surviving owner(s). Having property in joint tenancy may also reduce inheritance taxes.

Is there a disadvantage?

Yes, if the joint tenant is not your spouse. Should you decide to sell an asset held jointly (a home, for example), you would need the permission of each joint tenant and the spouse of each joint tenant. While it may be difficult to imagine, the possibility of future disagreement should be carefully considered.

Can I protect myself if property is put in joint tenancy?

Partially. By using a declaration of trust, you decrease the possibility a joint owner will refuse to permit a future sale. The declaration makes clear the joint tenancy is created for estate planning purposes, with no intention to make a gift now.

How do I put real estate in joint tenancy with full rights of survivorship?

A deed must be executed by the present owner or owners. The deed need not be recorded in the county registry of deeds to make the change effective.

Should an automobile be put in joint tenancy?

Probably not. A joint tenant, as partial owner, will be jointly liable if an accident results in a lawsuit.

Can bank accounts, stocks and bonds be put into joint tenancy?

Yes.

Is there a disadvantage to having a joint bank account?

Yes, there is a disadvantage if the account is not with your spouse. Usually, each joint tenant can withdraw money from the account. Substantial withdrawals can be made without your knowledge or approval.

A trust is a written agreement wherein you give a trustee power to manage certain property for a beneficiary. There are several types of trusts.

Can I add someone's name to my bankbook but prevent this person from withdrawing money?

Yes. You can put savings or certificate accounts in trust.

What is a trust?

A trust is a written agreement wherein you give a trustee power to manage certain property for a beneficiary. There are several types of trusts.

What are the purposes of trusts?

Purposes include controlling assets after death, avoiding probate, providing for disability, and reducing taxes.

How would I put a bank account in trust?

Banks have simple forms that can be used. You may name yourself as trustee, and whomever you wish to receive the money at your death as beneficiary. You are free to deal with the funds as you like—you can even close the account. No one else can withdraw money. At your death money in the account will go to your named beneficiary without going through probate.

If you want information about putting other property in trust, consult a lawyer with expertise in estate planning.

What property may I give away during my life?

You may give away any property you alone own. If property is jointly owned, the permission of each joint owner is necessary.

Can I give a house to children but reserve the right to live there?

Yes. The interest retained by you is known as a life estate. An advantage is that the asset will not go through probate. But there are potential disputes. If a gift reserving a life estate is made, a detailed document should be drafted concerning responsibility for taxes, special assessments, and maintenance costs.

What are the purposes of a will?

The primary purposes are to provide for distribution of your property after death, and to designate a personal representative to see that your wishes are carried out. A will may also be used to appoint a guardian for minor children.

Must I have a will?

There is no legal requirement that you have a will, or use any estate planning device.

What happens if I die without a will?

Property held in joint tenancy will pass directly to the co-owner(s). Life insurance proceeds and pension benefits will go to the named beneficiary. The personal representative will pay debts and taxes, and distribute the balance of your estate according to Michigan statute.

What are the requirements of a valid will?

There are three types of wills. Each type of will is equally valid.

1. A **handwritten** will must be dated, and signed at the end.
2. A **formal** will can be typewritten. It must be signed, and witnessed by at least two people who also sign. A beneficiary under the will should never be a witness to its signing.
3. A **statutory** will is a form. It is relatively simple to use, but allows limited choices. The form is available in the *Planning for Your Peace of Mind* publication that is available from your state legislator at no cost.

How would my property be divided under the terms of a statutory will?

You may leave up to two cash gifts to people or charities. You could write a list, separate from your will, of personal and household items, naming whom you wished to receive each item.

All the rest of your property would go to your spouse; if your spouse died before you, all the property would be divided equally among your children.

Which type of will should I choose?

That depends on the size of your estate and your wishes concerning distribution of your property.

For example, a statutory will is inappropriate if your estate is large enough to merit tax planning and the use of trusts, or if you do not want your children to get equal shares of your property. In such cases, it is usually helpful to consult with a lawyer.

How much does it cost to have a lawyer draft a will?

Before hiring a lawyer, be sure to ask about his or her fee.

Using a formal will, can I give my property by will to whomever I please?

Yes, with two exceptions. First, a spouse has certain rights in the estate, regardless of the provisions of a will. A spouse almost always has a choice of taking a share under the will, or taking a share set forth by law. Second, a will does not affect property held in joint tenancy or life insurance policies with named beneficiaries.

Can I exclude my children from sharing in my estate?

Absolutely. If you decide to exclude one or more children, mention this in the will. You need not state a reason.

Can I give money to grandchildren but require they save it?

Yes. You can establish a trust or custodial account, with grandchildren as beneficiaries. Money is given to each grandchild when he or she reaches the age you specify.

How should property be described in a will?

Property may be described generally, for example, "all property that I own"; or specifically, for example, "my silver watch." If you are specific, describe items sufficiently to avoid confusion.

Is there an alternative to listing personal property in the will itself?

Yes. Whatever type of will you choose, you can make reference to a separate list of items including jewelry, books, automobiles, furniture and other personal and household items. In the list you indicate who is to get each item.

You can make this list before you make your will, at the same time, or afterward. You may change the list as often as you wish.

The list must be in your handwriting or signed by you.

If property is specified in my will or on a separate list, can I still sell it or give it away?

Yes. Your will is not effective until you die. If you have sold or given away property mentioned in the will, that provision is simply ignored.

Whom should I nominate as personal representative in any type of will?

The duties of a personal representative were briefly noted earlier. You should nominate someone you trust who can handle the task, and who is willing to serve. It will probably be simpler if the person is a resident of Michigan.

The personal representative can be a relative, a friend or acquaintance, or a bank. It is a good idea to nominate a second person to serve if the first is unable to serve.

Your will is not effective until you die. If you have sold or given away property mentioned in the will, that provision is simply ignored.

Can a beneficiary under the will serve?

The personal representative can be, and often is, a beneficiary under the will. In making a choice, however, you should consider any conflicts of interest.

How can a will be changed?

Once a will is signed (whether the will be handwritten, a form or typewritten) no changes should be made on the document, itself. You can write an amendment known as a codicil or draft a new will.

If a new will is drafted, what should I do with the old will?

The old will and all copies should be destroyed after the new will is signed.

When should I review my will?

You should review the provisions every two or three years, and after events such as births, deaths, marriages, and relocations to another state.

Where should a will be kept?

A will should be kept in a secure place. A will can be filed at probate court. There is currently a one-time filing fee of $25.00.

DISTRIBUTION OF ESTATE IF NO WILL (MCL §700.2102, §700.2103)

Sec. 2102. (1) The intestate share of a decedent's surviving spouse is 1 of the following:

(a) The entire intestate estate if no descendant or parent of the decedent survives the decedent.

(b) The first $150,000.00, plus 1/2 of any balance of the intestate estate, if all of the decedent's surviving descendants are also descendants of the surviving spouse and there is no other descendant of the surviving spouse who survives the decedent.

(c) The first $150,000.00, plus 3/4 of any balance of the intestate estate, if no descendant of the decedent survives the decedent, but a parent of the decedent survives the decedent.

(d) The first $150,000.00, plus 1/2 of any balance of the intestate estate, if all of the decedent's surviving descendants are also descendants of the surviving spouse and the surviving spouse has 1 or more surviving descendants who are not descendants of the decedent.

(e) The first $150,000.00, plus 1/2 of any balance of the intestate estate, if 1 or more, but not all, of the decedent's surviving descendants are not descendants of the surviving spouse.

(f) The first $100,000.00, plus 1/2 of any balance of the intestate estate, if none of the decedent's surviving descendants are descendants of the surviving spouse.

(2) Each dollar amount listed in subsection (1) shall be adjusted as provided in section 1210.

Sec. 2103. Any part of the intestate estate that does not pass to the decedent's surviving spouse under section 2102, or the entire intestate estate if there is no surviving spouse, passes in the following order to the following individuals who survive the decedent:

(a) The decedent's descendants by representation.*

(b) If there is no surviving descendant, the decedent's parents equally if both survive or to the surviving parent.

(c) If there is no surviving descendant or parent, the descendants of the decedent's parents or of either of them by representation.

(d) If there is no surviving descendant, parent, or descendant of a parent, but the decedent is survived by 1 or more grandparents or descendants of grandparents, 1/2 of the estate passes to the decedent's paternal grandparents equally if both survive, or to the surviving paternal grandparent, or to the descendants of the decedent's paternal grandparents or either of them if both are deceased, the descendants taking by representation; and the other 1/2 passes to the decedent's maternal relatives in the same manner. If there is no surviving grandparent or descendant of a grandparent on either the paternal or the maternal side, the entire estate passes to the decedent's relatives on the other side in the same manner as the 1/2.

**Adopted children are treated the same as natural children of their adoptive parents; step-children are not heirs of their step-parents.*

Choosing a Nursing Home

Making a choice to reside in a nursing home is a difficult emotional decision. Nursing homes, however, may provide a level of care that individuals simply cannot provide on their own. Whether you are planning for your own future or assisting relatives in investigating their options, it is important to seek advice from family, friends, and experts. In order to ensure that the decision you make regarding a nursing home is the best choice possible, it is essential to begin your search before a crisis forces you to make a hasty choice. Also, space in a nursing facility is so much in demand that you may find it difficult to immediately find anything available and to your liking. Even with time for hunting, frequently the individual's name may have to be placed on several waiting lists. Thus, in addition to beginning your search as early as possible, it is wise to check out as many nursing facilities as possible.

Although nursing homes used to be categorized by the level of service provided, that is no longer the case due to the Nursing Home Reform Amendments of the federal Omnibus Budget Reconciliation Act of 1987 (OBRA '87). Since October 1, 1990, all nursing homes, now known as "nursing facilities," must be able to offer the same levels of care. One major advantage to this new definition of nursing facilities is that residents will no longer need to move to another facility if their health deteriorates.

A first step in finding the right nursing home is to consult your doctor or hospital social worker. In addition, you may obtain a list of nursing facilities in your area through your local Long-Term Care Ombudsman Office (see p. 75 for sources of additional information). Michigan Department of Community Health inspection reports may also provide a valuable guide for deciding on an appropriate facility. These reports are available from the department in Lansing and from the local ombudsman office. In addition, talk to people in your community such as your doctor, social worker, clergy, other friends and retirees, and the people in various community volunteer organizations. They may be able to provide important information not readily obvious from reports. Remember, many people have had to make these decisions already, so make every effort to seek out their advice and experience.

Each nursing facility in Michigan must be licensed by the Bureau of Health Care Services in the Michigan Department of Licensing and Regulatory Affairs. In order to be eligible to accept Medicaid or Medicare residents, a nursing facility must also be certified by the department. If you expect Medicaid or Medicare to assist in paying for nursing facility care, make sure the facility you are interested in is certified. Nearly all Michigan nursing facilities have beds that are certified for Medicaid and many are also certified for Medicare.

WHAT TO LOOK FOR

Once you have determined which licensed homes are most suitable and conveniently located for your needs, your next step should be to visit the facilities on your list. You should make several visits at different times to assess the quality of the facility. For your first visit, you should call ahead to make an appointment for a full tour. After your first visit, make your visits unannounced. One of your visits should be made during meal hours to see the quality of the food and to see if the residents enjoy the meals. During your visit, talk to the various officials and staff. In addition, talk to the residents and their families about their level of satisfaction. Ultimately, you must be satisfied that the facility will be a pleasant home in which to live.

On your visits to facilities, consider the following questions:

General Appearance and Atmosphere

- ☛ IS THE GENERAL ATMOSPHERE one of warmth and comfort?
- ☛ IS THERE A FRIENDLY SPIRIT, cooperation, and communication between the staff and the residents? Do the staff members appear to "get along" with each other as well? Do the residents interact with each other as well as with the staff?
- ☛ HOW DO THE RESIDENTS APPEAR? Alert? Clean? Well-groomed with hair neat, clean-shaven? Unless they are very ill and bedridden, are they active—involved with each other or taking part in activities? Or do they just sit?
- ☛ DO THE RESIDENTS LOOK HAPPY?

Physical Facilities

- ☛ Is the building ATTRACTIVE? Outside—if the home is in a residential or country area—is there an area where residents can enjoy a walk or sitting in the fresh air and sunshine?
- ☛ Is the facility CLEAN and WELL-KEPT? Are there pictures on the walls, flowers and plants about? Comfortable furniture in lounge areas? Are there clocks and calendars around to help residents and staff keep track of time? Does the home seem homelike?
- ☛ Is the most RECENT SURVEY REPORT by the Bureau of Health Care Services, and any plan of corrections, EASILY AVAILABLE for your review? Are past reports available for review?
- ☛ Is the facility FREE FROM ODORS? Bowel and bladder accidents do happen, but permanent odors are not a "natural" result; prompt attention to cleaning up such accidents prevents odors from lingering.
- ☛ Is the facility FREE FROM heavy, cover-up DISINFECTANT ODORS?

- ARE THE HALLWAYS WIDE enough to accommodate passage of wheelchairs, food and service carts, and people traffic? Are they well-lighted? Free from obstacles and safety hazards? Are there handrailings on the sides?
- Is there a crafts or ACTIVITIES ROOM? Is it actually used by residents?
- Is there a LOUNGE AREA for use by residents, guests? Is it homelike?
- Is the DINING ROOM ATTRACTIVE? Are the tables so spaced to allow easy maneuvering of wheelchairs and walkers? Are the tables at a comfortable level for wheelchair users?
- Are the RESTROOM AND BATHING FACILITIES CLEAN? Are they equipped with grab bars and handrails? Are there nonskid mats on surfaces in the tubs and showers?

- Check the RESIDENTS' ROOMS—are they CLEAN AND NEAT? Attractive? Comfortable? Is there enough space between beds and other furniture to allow easy maneuvering with a wheelchair or walker? Does each bed have a privacy curtain and a working nurse call-bell within easy reach of bedridden patients? Is there fresh drinking water and a glass at each bedside? Is there closet and/or drawer space for each resident's personal articles? Is there at least one comfortable chair for each resident?
- Are there special THERAPY ROOMS?
- Is there a THERAPY STAFF that includes a registered physical therapist and a registered occupational therapist? If the therapy staff is only consulting, how often do they come to the facility?
- Are there ROOMS AVAILABLE and appropriate FOR MEETING PRIVATELY with your spouse, doctor, attorney, family members or friends?
- Is there access to a TELEPHONE that can be used without being overheard?

SERVICES

Nursing

- IS A REGISTERED NURSE RESPONSIBLE for the nursing staff in the facility?
- How many REGISTERED NURSES AND LICENSED PRACTICAL NURSES work in the facility each weekday? Each weekend?
- How many LICENSED NURSES AND AIDES/ORDERLIES are on duty each day?

- ☛ STATE LAW requires at least enough nursing staff to provide a minimum of 2.25 hours of care to each resident each day. Most Michigan nursing homes retain enough staff to provide an average of over 3 hours of care per resident per day. What are the figures for this facility?
- ☛ Are residents' CALLS FOR ASSISTANCE answered promptly?
- ☛ Are RESIDENTS ENCOURAGED to do as much for themselves as they can—such as eating, bathing, and dressing?
- ☛ Are RESIDENTS ENCOURAGED to be up and about during the day? Is assistance given to those who need it in walking?
- ☛ Are RESIDENTS ENCOURAGED to use dentures, eyeglasses, hearing aids, and orthopedic devices when needed?
- ☛ Are bowel and bladder RETRAINING PROGRAMS available and followed when needed?
- ☛ Are bedridden RESIDENTS ENCOURAGED to do whatever they can do for themselves?

Medical

- ☛ How is a resident involved in his or her own PLAN OF TREATMENT?
- ☛ What is the nursing home's policy in regard to PHYSICIANS? Residents of a nursing home have the right to choose an attending physician. If a resident's own physician is unable to respond, the medical director of the facility is responsible for filling in.
- ☛ Are OTHER MEDICAL SERVICES, such as dental, optometric and hearing, available regularly? Is there an added cost for these services? Routine eye, hearing, and dental care is essential to maintain relatively good health. Check to see if these services are covered by Medicaid or Medicare before paying for them.
- ☛ Does the home have a transfer agreement with a nearby hospital for EMERGENCY CARE?

Dietary

- ☛ Are MENUS planned in advance, posted in a conspicuous area in the facility, and followed as written?
- ☛ HOW DO THE MEALS LOOK? Sufficient in amounts and quality? Attractively served? Served promptly and efficiently so that hot foods are still hot and cold foods are still cold when the resident receives them?
- ☛ Are RESIDENTS ENCOURAGED to use the dining room?
- ☛ How are BEDRIDDEN RESIDENTS served?

- ☛ Are residents allowed ENOUGH TIME to eat at their own pace? Is assistance in feeding given when needed? Are self-help feeding devices available and encouraged?
- ☛ Are SUBSTITUTES freely offered when a resident does not like an item? Are SNACKS served at night?

Activities

- ☛ Is there an ACTIVITIES DIRECTOR? If so, is the director full-time or does the director have other responsibilities as well?
- ☛ Is there a VARIETY of activities?
- ☛ Are individual resident's PREFERENCES observed?
- ☛ Are there separate group and individual ACTIVITIES?
- ☛ Are RESIDENTS ENCOURAGED to participate in activities (but not forced)?
- ☛ Are there frequent OUTSIDE TRIPS for those who are able?
- ☛ Is there COMMUNITY INVOLVEMENT with the facility's programs, such as with school or volunteer groups conducting or assisting with activities?

Miscellaneous Services

- ☛ Is there a SOCIAL WORKER in the facility? If so, is this person full-time or does the social worker have other responsibilities?
- ☛ What type of arrangements are made for residents to WORSHIP as they please?
- ☛ Are BARBERS AND BEAUTICIANS available for residents regularly?
- ☛ Does the home provide LAUNDRY SERVICES? In the home or sent out? Is there an additional cost?

ADMINISTRATION AND ROUTINE

Each nursing home does have certain "rules" that residents must follow.

- ☛ What are they? They should be in writing. Do they seem to be REASONABLE?
- ☛ Are VISITING HOURS convenient and flexible?
- ☛ Do the administrator and director of nursing show a SINCERE INTEREST in the residents and staff members as people? The attitudes of these two individuals determine the attitudes of the rest of the staff.
- ☛ Can the resident bring any PERSONAL FURNITURE ITEMS on admission to the facility?

- ☛ On admission, is an INVENTORY taken of the resident's possessions? Are clothing articles to be labeled for easy identification and to prevent loss? Is reimbursement made for loss or damage?

Financial

To apply for Medicaid, contact your local Department of Human Services (DHS). If a person is eligible, the patient may have to pay part of the charges based on his or her income—this amount is set by the DHS and is known as the patient pay amount.

To find out if a person is eligible for Medicare, contact your local Social Security Administration office.

While visiting the nursing home, find out:

- ☛ Does the home provide a WRITTEN LIST of charges for such services as haircuts, dental care, foot care, etc.?
- ☛ Are DEPOSITS required?
- ☛ If you are going to pay privately for care, do "comparison shopping"; find out what the BASIC MONTHLY RATE is—and what any "EXTRA" charges would be.
- ☛ Does the home ask for a LIFETIME CONTRACT—providing lifetime care for a certain sum of money? Does the home accept Medicaid to cover cost of care given? Not all do. Is it a life-lease home? If such a contract is involved, check it out with a lawyer.

Even after you settle on the best available nursing facility, do not sign anything you do not completely understand. If you do not understand something, ask questions. You should not be pressured into signing anything—take the time to make the right decision.

RIGHTS OF NURSING HOME RESIDENTS

Remember, too, that successfully finding the appropriate facility is only the beginning. Residents of a facility may have to change their lifestyle when they move in, but they do not lose any of their rights as individuals. They maintain the same constitutional and civil rights that all citizens have. Federal and state laws and regulations require nursing facilities to have written policies and procedures to implement resident rights and responsibilities. These must be made available to the resident, the resident's family, and the public.

Residents also have the right to complain to the Long-Term Care Division in the Michigan Department of Licensing and Regulatory Affairs about any condition, event, or procedure without having to cite any specific violation of the law or rules. To file a complaint with the Michigan Department of Licensing and Regulatory Affairs, simply call (800) 882-6006 or (517) 241-4712.

The Michigan Public Health Code (MCL § 333.20201) provides nursing home residents with a number of specific rights. In summary these include:

- A resident will not be denied care on the basis of race, religion, color, national origin, sex, age, handicap, marital status, sexual preference, or source of payment.
- A resident is entitled to inspect, or receive for a reasonable fee, a copy of his or her medical records.
- A resident is entitled to the confidentiality of his or her medical records.
- A resident is entitled, to the extent feasible, to privacy, consideration, respect, and dignity in treatment and in caring for personal needs.
- A resident is entitled to appropriate care and to receive information concerning his or her medical condition.
- A resident is entitled to refuse treatment to the extent provided by law.
- A resident is entitled to his or her rights as a patient or a citizen, free from restraint, interference, coercion, discrimination, or reprisal.
- A resident is entitled to information concerning any experimental procedure which may be proposed for his or her care.
- A resident is entitled to receive and examine his or her bill, regardless of funding source, and to receive information on financial assistance available through the facility.
- A resident is entitled to know who is directly responsible for his or her care, and information concerning his or her health needs and alternative treatments, as well as to be actively involved in his or her discharge planning, if appropriate.
- A resident is entitled to associate with his or her physician, attorney, or other person, and has the right to receive personal mail, unopened, on the same day it was received.
- A resident is entitled to be free from physical or mental abuse. A physician may authorize physical or chemical restraint in writing and for a specified and limited time.
- A resident is entitled to be free from providing services to the facility.

In addition, this section further provides, in part, that patients or residents in a nursing home or home for the aged be permitted to associate with persons of their choice; and have reasonable visiting hours, not less than eight hours per day; reasonable access to a telephone; a private room in which to visit his or her spouse; retain personal clothing or possessions; adequate and appropriate pain management; and the opportunity to discharge himself or herself; as well as have the right to be transferred for medical reasons only, and only under certain circumstances.

A nursing home patient is also entitled to be informed of the services available at the facility; in charge of his or her finances; visited by representatives; and, in the case of terminal illness, to be visited on a twenty-four-hour-a-day basis by parents, children, a spouse, next of kin, or representative.

One final, and probably the most significant, question to ask yourself is, Would you be comfortable living in a particular facility? If you can honestly answer yes, then the facility may provide you with a true home.

NURSING HOME RESIDENCY

Do I forfeit any rights upon entering a nursing home?

Federal and state laws have been passed to help ensure that rights of nursing home residents are respected.

What determines the respective responsibilities of the nursing home and the resident?

You must be provided a written contract at the time you enter the nursing home. The contract specifies the services to be provided you, the charge for each service and who is responsible for payment.

Can a nursing home ask or require my child(ren) to pay the private pay rate for a period of time before the home will accept Medicaid payment for my care?

Absolutely not; such behavior is a violation of federal law. A nursing home is also prohibited from soliciting a gift or contribution from a family member as a condition of accepting your application.

Are there special Medicaid eligibility rules for a married couple when one spouse needs nursing home care?

Yes. As a result of a federal law passed in 1988, there are different rules that apply to a spouse at home, when the other spouse is living in a nursing home. The rules allow the at-home spouse to keep more income and more of the couple's assets. The Department of Human Services or the Long-Term Care Ombudsman should be able to tell you how these rules apply to you. Phone numbers for these agencies are listed in the back of this book.

Are there any reasons I can be moved to another nursing home against my wishes?

Yes, but only for medical reasons, non-payment of a bill or the threat of physical harm.

If there is no emergency, you must be given notice of the reason for a transfer. If you disagree with this reason you may appeal the decision. Before moving, you must be offered counseling to minimize any adverse effects.

May I know my medical condition and treatment?

Yes. You are entitled to participate in the planning of your medical treatment. You should be fully informed of your medical condition unless the doctor believes it's not in your best interests. You have the right to refuse treatment. You may have your own doctor.

Can I take care of my own money?

Yes. Simply because you are a resident of a nursing home, the nursing home does not gain authority to manage, use or dispose of your money. You can control your monthly personal needs allowance and any other personal funds.

You can, if you wish, have the nursing home hold your money in trust, like a savings account. You can withdraw money when you wish. You will receive a statement every three months which shows the amount of money you have, the amount spent, and the source of all funds.

May I keep possessions?

Yes, subject only to limitations of space.

May I wear my own clothing?

Yes.

What are my rights concerning visitors?

You may see family, friends, a lawyer—anyone you choose. You have a right to meet with any visitor in private.

May I make private telephone calls and send and receive mail unopened?

Yes.

Can I make a will or sign a power of attorney?

Yes, but as always, you should fully understand any document before signing it. Consult a lawyer or trusted friend if questions arise.

May I vote in local, state and federal elections?

Yes.

What is a patient's representative?

A patient's representative is a friend or relative you may appoint to assert many rights in your behalf. You have the right to speak for yourself and/or appoint a representative to speak for you.

How can I find out what other rights I have?

You must be given a copy of your rights when you enter the nursing home. A copy should also be posted on a bulletin board of the nursing home. Ask if you do not understand any of your rights.

To whom should I complain about a violation of my rights?

If you encounter problems requiring immediate action such as physical abuse, neglect or improper diet, speak with the director of nursing or the administrator of the home, or call the **Department of Licensing and Regulatory Affairs Bureau of Health Care Services Complaint Hotline, (800) 882-6006.** For non-emergencies, get the support of a trusted aide or a family member. If a residents' council exists, consider bringing the issue up for discussion.

If you are not satisfied, call or write the Michigan Department of Licensing and Regulatory Affairs. You may also contact the **Long-Term Care Ombudsman Office** for your county. Addresses and phone numbers for these agencies are listed at the back of this book or you can call **(866) 485-9393** to contact the statewide Long-Term Care Ombudsman program.

MEDICAID AND MEDICARE COVERAGE

Medicaid pays for stays in a Medicaid-certified nursing facility. There are, however, financial eligibility standards. These standards allow an individual, couple, or family to keep some of their income and some property such as a home, car, personal and household items, and other resources. Other assets, called "countable assets," are considered when determining Medicaid eligibility. That is, such assets may have to be spent on nursing care before Medicaid will pay for that care. Keep in mind that this is done because Medicaid is intended for low-income persons. Persons with more money or property than Medicaid guidelines allow are considered to have the ability to pay for nursing care even though relatively few people can afford to pay for such care for very long on their own.

An additional concern in choosing a nursing facility is in a situation where one spouse needs to enter a facility while the other remains in the family home. In such a case, a noninstitutionalized spouse may keep enough of the couple's earnings to keep their income from falling below 150% of the federal poverty level for a couple, while an institutionalized spouse may keep a small portion of their income for monthly personal

expenses. In addition, the noninstitutionalized spouse may keep part of the couple's countable assets. It is allowable, under certain circumstances, to transfer resources of an institutionalized spouse to a noninstitutionalized spouse in order to maximize the amount of property and resources that the couple may keep.

Medicare Part A, a program for the elderly and disabled, may also provide assistance in paying for stays in nursing facilities. Generally speaking, this aid is intended to assist with temporary nursing home stays in order to properly recover following hospitalization. Specifically, this assistance will not be provided unless the person had a previous hospital stay of at least three days within the thirty-day period prior to admission to the nursing facility. Once eligible, Medicare coverage expires after **100 days of benefits** per benefit period. Those who need to stay in a nursing facility **beyond 100 days** may have some of their care paid for by **Medicare Part B**. This subsequent coverage would not, for example, apply to room and board or nursing services. Note that a benefit period is defined as a period of consecutive days that begins with a hospitalization and ends when the patient has not been an inpatient of a hospital or nursing facility for sixty consecutive days. A beneficiary may have more than one benefit period per year. In addition, a beneficiary may have to make a coinsurance payment. There is no coinsurance payment for **days 1-20 in a nursing facility**, while **days 21-100 require a coinsurance payment of $114 per day**, for example. As with Medicaid, if you wish to apply for Medicare assistance, make sure the facility is certified for Medicare. If you are also eligible for Medicaid, that program will pay your coinsurance if it is more than your Medicaid patient pay amount.

APPLYING FOR MEDICAID

This section is intended for patients in a medical facility—hospital or nursing home—who have a spouse at home. The rules are based on Section 1924 of the Social Security Act.

Medicare and health insurance may not cover all your nursing home costs or other medical expenses. If you qualify, Medicaid may be able to help with the amounts they do not pay.

Medicare is the **federal** program administered by the Centers for Medicare and Medicaid Services.

Medicaid is the **state** program administered by the Michigan Department of Community Health (DCH) in cooperation with the Michigan Department of Human Services.

A word of caution: rules and financial limits change from time to time, so be sure to check with your local Department of Human Services (DHS) office about your eligibility before making any decisions.

Limits are placed on the amount of income and countable assets you may have to be eligible for Medicaid. The income rules apply to all persons expected to remain in a long-term care facility for at least 30 consecutive days regardless of admission date.

If at any time during the process described in this section you feel an action or decision was improper, talk with your DHS worker or the worker's supervisor. If you still believe the action is improper, you may request a hearing. A hearing request must be filed within 90 days of notice of an action. Hearing requests must be in writing and signed and dated by you or your representative. Send your request to your local DHS office.

When should I apply for Medicaid?

Anyone may apply for Medicaid at any time. However, even if you do not wish to apply for Medicaid now, you should still contact your local Department of Human Services office if you expect to be in a long-term care facility for a 30-day continuous period. (A continuous period is not interrupted by transfers between a hospital and a nursing home.) Once you notify the DHS, they will complete an *initial assessment* of your financial and medical eligibility for Medicaid.

An *initial assessment* is the total amount of countable assets owned by you and/or your spouse at home on the day you entered a long-term care facility for the first 30-day continuous period. This amount will be part of determining your asset eligibility when you actually apply for Medicaid.

It is recommended that you request an *initial assessment* as soon as you are admitted to a long-term care facility if you expect to be in the facility for 30 days or more before you return to your home. You will probably be able to give the DHS more accurate information for the *initial assessment* at the beginning of your stay rather than at some future time.

How do I apply for Medicaid?

Contact the local DHS office. It should be listed under "Michigan Department of Human Services" in the state government pages of your telephone directory.

There is at least one in each county. Ask for an application form. You can pick up the application or have it mailed to you. You may authorize someone to act for you. You or your representative may be asked to come to the local office. Tell the local office worker if you need help with medical bills. Tell the local office worker if you need help filling out the application.

Medicaid eligibility is usually effective the first day of the month in which you applied.

MEETING MEDICAID ELIGIBILITY REQUIREMENTS

What will I be asked?

The Department of Human Services worker asks about your:

- Income and assets
- Age
- Medical expenses
- Social Security checks
- Medical insurance
- Ability to work if you are under age 65

The DHS will ask about your spouse's assets. They will also ask about the income of your spouse and dependents at home.

Will I need proof?

The DHS worker will need proof of income and assets. If you are under age 65, they may need doctor reports. They will need proof of medical expenses. These are some of the proofs the DHS worker will ask you for:

- Bank books or statements, including joint accounts
- Pension checks
- Social Security checks
- Real estate value (not your home)
- Recent medical bills

You must have a Social Security number. They must see your Social Security number card or other proof. If you do not have a Social Security number, the DHS worker will help you apply for one.

After I apply for Medicaid what happens?

The local DHS office decides if you are eligible for Medicaid. You are notified of the decision:

- Within 60 days if you are disabled
- Within 45 days in other cases

The Michigan Department of Community Health notifies the DHS of the type of care you need when you are in a nursing home. The nursing home must be qualified to provide the care you need and the care must be medically necessary.

If I am eligible for Medicaid—what happens next?

You get a mihealth card. It shows how much, if any, you are expected to pay towards the cost of your care. A new card is mailed around the first of each month. You must present the card each time you request medical services. The card may only be used for the eligible person listed on the card.

The medical facility bills you for the amount you are expected to pay towards the cost of your care and bills Medicaid for the rest.

The Department of Human Services does not provide or pay for estate planning.

ASSETS

How is my asset eligibility determined?

This is a complicated process, but it may be easier to understand if we first define a special term.

PROTECTED SPOUSAL AMOUNT: The protected spousal amount is the amount of assets protected for use by the spouse at home. The protected spousal amount is one-half of the initial assessment amount but not less than $23,184 nor more than $115,920. These amounts are for 2013. The minimum and maximum amounts change each year. (See the first question on page 38 regarding the *initial assessment* amount.)

The ASSET LIMIT is $2,000.

To determine your asset eligibility, the Department of Human Services subtracts the protected spousal amount from the countable assets owned by you and your spouse for the month you apply for Medicaid. The amount of the remaining assets are considered to be your countable assets. You meet the asset limit for Medicaid eligibility if your countable assets for that month are equal to or less than $2,000.

Once you are determined to be asset-eligible for the current month, you remain asset-eligible for 12 months unless you are discharged for 30 days or more or your assets are increased above the $2,000 limit. (If you are discharged for 30 days or more, the process begins over when you again enter a long-term care facility. To be asset-eligible, you and your spouse's assets, minus the protected spousal amount, must be equal to or less than $2,000.)

At the end of the 12-month period your asset eligibility is determined by counting only your assets. Your countable assets must be equal to or less than $2,000. You need to transfer enough assets to your spouse so that at the end of the 12-month period the value of your countable assets is equal to or less than $2,000.

What assets are counted to be eligible for Medicaid?

This is a list of the most common assets.

A. Money in:

- Cash, savings and checking accounts

- Credit union share and draft accounts
- Certificates of deposit
- U.S. Savings Bonds
- Individual retirement accounts (IRA) and Keogh plans
- Nursing home trust funds
- Prepaid funeral contracts which can be cancelled
- Trusts, depending on the terms of the trusts

B. Equity in:
- Real estate (other than your primary home) including property that you own by yourself or with other people
- More than one car
- Boats or recreational vehicles
- Stocks, bonds and mutual funds
- Land contracts or mortgages held on real estate sold

What assets are NOT counted?

- Home in Michigan
- Personal belongings and household goods
- One car
- Income-producing real estate. The annual income after expenses must equal at least 6% of your equity (income that equals more than 6% of your equity may be considered an asset).
- Burial spaces and certain related items for you, your spouse and members of your immediate family*
- Up to $1,500 designated as a burial fund for you or your spouse*
- Irrevocable prepaid funeral contract*
- Value of life insurance if face value is $1,500 or less*
- Assets which you and your spouse do not have the legal right to use or dispose of
- Assets you and your spouse have been unable to sell. The asset must have been up for sale for at least 30 days during the last 3 months. The asking price must not have been more than fair market value. You must not have received a reasonable purchase offer.

What if I have a joint account with someone other than my spouse?

The entire amount is counted as yours unless you prove some of the money belongs to the other person. This rule applies to cash assets such as:

- Savings and checking accounts
- Credit union share and draft accounts

**See page 43 for more about funeral expenses.*

- Certificates of deposit
- U.S. Savings Bonds

What about other assets I own with someone else?

Each owner is assumed to own an equal share unless the ownership document specifies otherwise.

Can I give my assets or income away?

Giving away or transferring assets or income for less than fair market value may result in a penalty. This restriction applies to you and your spouse. Transfers include:

- allowing another person to take your (or your spouse's) assets or income by setting up a joint account, and/or
- limiting the availability of your assets or income or your spouse's through a trust or similar device.

The penalty is that Medicaid will not pay for your nursing home care or equivalent home care for the time the uncompensated value would have met your care cost. The Department of Human Services looks at transfers that occur up to 36 months before, or any time after, your date of application for Medicaid or your date of admission to a nursing home, whichever is later. The DHS looks back 60 months regarding transfers to or from a trust. However, there is no penalty if assets are transferred:

- between spouses; or
- by you or your spouse to your blind or disabled children (regardless of age or marital status).

In addition, you or your spouse may transfer your home without penalty to:

- your children under age 21, or
- your children age 21 or older who lived in your home and provided care that allowed you to remain at home for at least two years immediately before you entered the nursing home, or
- your brother or sister who is a part owner of the home and lived in your home for at least one year immediately before you entered the nursing home.

What can I do if my assets are over the limit?

You can use your assets to pay medical expenses, living costs and other bills. You can use your assets to buy things that are not countable assets. You may be asked to verify how you used your assets (see pages 40 and 41).

FUNERAL EXPENSES

What about funeral expenses?

There are several ways you can prearrange for a funeral and still be eligible for Medicaid. How much money you can protect and for whom depends on what arrangements you choose. Arrangements commonly used are listed below.

- Buy a prepaid funeral contract

  A contract can be made irrevocable and not counted for Medicaid when the price is $2,000 or less and the contract is for your expenses. Your spouse may also have an irrevocable contract if he/she is also applying for Medicaid.

- Assign life insurance proceeds

  Michigan law allows you to assign proceeds from your life insurance for your funeral expenses. There is a limit to the amount you can assign. The limit changes yearly based on cost-of-living increases.

  Medicaid does not count the insurance if you permanently transfer ownership so that no one can use money from the insurance for anything other than your funeral expenses. This arrangement is frequently made by permanently transferring ownership to a trust when you purchase the insurance.

  You may also protect funds for your spouse's funeral expenses.

- Buy burial space items

  You can buy items and services for interment such as a casket, burial plot, vault, headstone and opening and closing the grave site.

  Medicaid does not count these items when purchased for yourself, your spouse or members of your immediate family.

- Designate a burial fund

  The burial fund is to pay for funeral expenses not covered by the burial space exclusion.

  Medicaid does not count certain assets, such as a separate savings account, designated as a burial fund for you or your spouse. The limit is $1,500 for each person. The $1,500 limit is reduced by:

  – The face value of life insurance not counted by Medicaid.

  – The amount paid for an irrevocable funeral contract.

  – The amount of insurance designated for burial expenses.

You may wish to discuss your options with someone in the funeral or insurance business or with your Department of Human Services eligibility worker or caseworker.

INCOME

Do I have to repay Medicaid?

If you receive more benefits than you are entitled to, whether through your fault or through an error on the part of the agency, you may have to repay any extra benefits received.

Is there a limit on income?

You may get help when your income is not enough to pay your medical expenses. Usually, if you are eligible for Medicaid, you will pay part of your medical expenses and Medicaid will pay the rest.

What income is counted?

The income you receive such as:

- Social Security benefits (only your portion of a joint check)
- Pensions
- Rent income (minus expenses)
- Veterans benefits

How much of my income can I keep?

The Department of Human Services deducts the following from your income to determine how much you must pay each month toward your long-term care facility costs:

- $60 for your personal needs
- Health insurance premiums you pay
- Guardianship fees and expenses you pay (limited)
- An allowance for your spouse at home (called the community spouse income allowance). The amount allowed is $1,892* plus certain shelter costs minus your spouse's income. The basic allowance of $1,892* plus shelter costs cannot exceed $2,898 in calendar year 2013. You may choose to contribute less to your spouse.
- An allowance for you and/or your spouse's dependents living at home with your spouse (called the family allowance). The allowance for each dependent is $1,839*—minus that dependent's countable income—divided by 3.

* *This amount changes each year.*

Is there a limit on my spouse's income?

No. However, if your spouse gives you money regularly, that money is counted as your income.

The Department of Human Services will ask about the income of your spouse and other dependents at home to determine if they should deduct a spouse allowance or a family allowance from your income.

Consumers' Rights

Consumers face problems such as inadequate information, undue pressure, and fraud when dealing with the marketplace. Following a general discussion, a few issues of particular concern are discussed.

What can I do to prevent consumer problems?

1. Take time in making decisions; comparison shop whenever possible.
2. Be skeptical of advertising claims; never expect something for nothing.
3. Don't rely on oral promises; get guarantees in writing.
4. Read thoroughly and understand all papers before signing them.

Are there laws to protect me?

Yes. There are more than 25 state and federal laws regulating consumer transactions. Some of these laws create a limited "cooling off" period during which you can change your mind; others make a merchant provide you with information; some require a seller to tell the truth if information is given out; still others prohibit certain activities.

SALES METHODS

Is there a law against false advertising?

Yes. The Michigan Consumer Protection Act prohibits false advertising as well as several other types of fraud.

What are examples of types of advertising or fraud prohibited by the Michigan Consumer Protection Act?

- A jewelry store has a sign in the window reading "gold necklaces 40 percent off" or "necklaces 40 percent off the regular price," but the store has inflated the "regular" price.
- An appliance store mentions in a radio advertisement a sale on a certain model refrigerator without disclosing it has only four available.
- A department store advertises a low-priced sewing machine in a catalogue with the intent to lure you into the store, then pressure you to buy a higher-priced model.
- A food manufacturer puts an advertisement on a cereal box implying that a free t-shirt is inside, but details in small print indicate you first have to buy six boxes of the cereal.

- A car dealer states in a newspaper advertisement that all models are available for immediate delivery when in reality some models would have to be traded for or ordered.

Must I pay for merchandise received by mail unsolicited?

No. Such items are considered gifts under Michigan law and need not be returned.

Can I change my mind after making a purchase from a door-to-door salesman?

Yes. If the product or service costs $25 or more, you generally have three business days to cancel the transaction by delivering written notice to the seller. This three-day period also applies to goods and services sold by telephone. It is the seller's obligation to return your money and to pick up the goods.

If the product purchased is health insurance, you have thirty days after receiving the policy to return it for a full refund.

SPECIFIC PRODUCTS/SERVICES

Prescription Drugs

What are generically equivalent drugs?

Several drug companies might manufacture a drug with the same chemical composition but a different name. These products are generically equivalent.

May a pharmacist substitute a generically equivalent drug for one prescribed?

Yes. Michigan law allows a pharmacist to substitute a generic equivalent if it's less expensive, and if the doctor doesn't indicate "dispense as written" on the prescription. With the same qualifications, a pharmacist must so act if requested by the purchaser.

How can I comparison shop for prescription drugs?

A pharmacist is required to provide you with price information upon your request by telephone or in person. Ask the pharmacist for a price comparison of the name brand and any generic equivalents available. The latter are often substantially less expensive.

Hearing Aids

How should I go about purchasing a hearing aid?

Federal regulations prohibit sale of a hearing aid without a written statement from a doctor. While you can waive this requirement, it is still best to see a doctor (preferably an ear specialist) to determine the cause of any hearing loss.

If a doctor finds I may need an aid, what is the next step?

Visit a reputable hearing aid dealer. Before selling you an aid, a dealer must provide a user instructional brochure. He or she must review its contents with you and give you time to read it. The brochure contains information on how to use the aid and includes a statement that a hearing aid will not restore normal hearing or prevent further hearing loss.

Can I try out a hearing aid before purchasing it?

Some dealers have a trial-rental program; you can try the aid for a short time at a nominal charge before deciding whether to purchase it.

What should I look for in a purchase contract?

Read the entire contract carefully. For example, note whether the cost of the ear mold is included, how long free service is available, and the details of the written warranty. If not satisfied with the contract, do not sign it.

Where can I complain about sales or service?

Contact the U.S. Food and Drug Administration or the Michigan Board of Hearing Aid Dealers.

Funeral/Burial

What choices are available in funeral and burial arrangements?

Insofar as ceremony, one may have a funeral, a memorial service, or no service at all. The body may be buried or entombed, cremated or donated to medical science.

Is embalming necessary?

Embalming is not required if the person didn't suffer from a communicable disease, and the body is buried or cremated within 48 hours of death.

Is a casket required if a body is cremated?

No, only an inexpensive container. Nor is an urn necessary to hold the ashes. If a body is buried, a grave vault is not required; a cemetery might insist on a grave lining.

Can I pre-arrange a funeral and burial?

Yes. There are obvious emotional and financial advantages: you can compare prices and make a choice without guilt or pressure. A funeral and burial can also be paid for in advance through a "prepaid funeral contract." This type of contract is extensively regulated through state law.

Even if you do not pre-arrange a funeral, it is a good idea to write down your preferences and let relatives know of these wishes.

Must a funeral home itemize prices for service, flowers and casket?

Yes. If you wish this information over the telephone, the funeral home must provide it. This gives you an easy opportunity to comparison shop.

If you inquire in person, the funeral home must give you an itemized price list of each item and service offered. You have the right to purchase only those specific goods and services you want.

What happens after one chooses certain goods and services?

The funeral home must give you an itemized statement which includes the total cost of the goods and services you have selected. Once you see this total, you can change your mind about any items if the total cost is more than you wish to pay.

Can one avoid dealing with a funeral home?

Not entirely. In order to bury or cremate a body, a burial transit permit must be signed by a funeral director or mortuary science licensee. The body must be transported by, or under the supervision of, a funeral home.

A funeral director does need the permission of a family member to move a body from a hospital or nursing home.

Where can I complain if a funeral home does not comply with these rules?

Write the Michigan Department of Licensing and Regulatory Affairs, and the Federal Trade Commission.

SCAMS

What is a scam?

A scam is a way to "take" people by convincing them to participate in a fraudulent scheme.

How can I avoid being taken?

First, be aware of specific scams. Second, never accept a sales pitch that promises something for nothing. Never give out your personal information, **especially your social security number** and bank account numbers.

What are some scams?

Bank examiner—A person calls claiming to be a bank investigator. He asks for your cooperation in helping catch an embezzler. You are supposed to help by withdrawing money from your bank account and giving it to him.

Pigeon drop—A person approaches you, claiming to have found a large sum of money. He promises to share it if you first give him money to prove your good faith.

Pyramid/Ponzi—A salesperson offers you an opportunity to receive money or goods for convincing other people to participate in a sales scheme. Some of these promotions are illegal in Michigan.

Phishing—Is an attempt to collect your user names, passwords, credit card numbers and other confidential information through electronic communications.

When else may fraud occur?

Fraud may occur in any consumer transaction. Be particularly wary of home improvement offers, work-at-home schemes, and the sale of vacation or retirement real estate.

REMEDIES

What should I do if I have a consumer problem?

The first steps you should take depend on the type of problem. If you feel you are the victim of false advertising or other disreputable sales tactics, visit the store. If you don't receive satisfaction, consider calling the local Chamber of Commerce or the Better Business Bureau.

If a product you have purchased does not work as it should, take it back to the store. If they will not replace it or give you a credit or refund, write the manufacturer. Send a copy of your receipt. Keep a copy of the letter you send.

If you are the victim of a scam, immediately contact the police and prosecuting attorney. If the scam involved real estate, home improvement or an investment, also call the Michigan Department of Licensing and Regulatory Affairs.

What if my problem is not resolved after those steps?

File a complaint with the Consumer Protection Division of the state Attorney General's office.

At the same time, consider filing a lawsuit. You can sue in small claims court for up to $5,000 without hiring a lawyer.

If your damages are substantial or you believe many other people have had the same problem, it may be best to contact a lawyer.

The Consumer Protection Division of the Attorney General's office helps consumers each year by mediating complaints that fall within their jurisdiction. In many cases their assistance will help you obtain an acceptable resolution to your problem. However, if their mediation is not successful, the Attorney General **cannot** act as a private attorney on your behalf.

For more information on how to process a claim, contact:

Consumer Protection Division
P.O. Box 30213
Lansing, MI 48909-7713
Phone: (517) 373-1140
Toll-Free: (877) 765-8388
Fax: (517) 241-3771

Age Discrimination

An employer, a real estate agent, or a government agency cannot discriminate against you because of your race or sex. In many instances, it is also illegal to discriminate on the basis of your age.

Age discrimination is often subtle and people may not be aware of their rights.

What are some examples of age discrimination in employment?

- A prospective employer will not hire you just because you are 60.
- A present employer discharges you solely because you reach your 65th birthday.
- An employer or employment agency specifies in a classified advertisement that a "younger person" is sought for employment.
- An employer permits people over 70 to work only part-time when younger employees are given the opportunity to work full-time.

Do age discrimination laws apply only to employment?

No. Examples of other conduct that may be prohibited are:

- A college or public school will not permit you to apply, or counts your age against you in the admissions process.
- A bank or loan company denies you a home improvement loan because you are 68.
- A department store will not open a charge account in your name because you are 72.
- You cannot secure approval for elective surgery payable by Medicaid because of your age.
- A community mental health center provides you fewer services than are available to younger people.
- A landlord refuses to rent an apartment to you, stating that you are too old.

Are there both federal and state laws prohibiting age discrimination?

Yes.

What areas are covered by these laws?

Employment—including employers, employment agencies and labor unions.

Credit—including banks, charge plans, retail stores and finance companies.

Federally funded services—examples are Medicaid, community mental health, vocational rehabilitation, legal services and education.

Housing—including both sales and rentals.

Public accommodations—including business establishments, hospitals, entertainment, recreation and transportation facilities.

What if I am the victim of age discrimination?

Consult a lawyer for advice, and/or contact the Michigan Department of Civil Rights. (See page 77 for address and phone number information.)

If you believe you have been the victim of discrimination and the alleged discrimination has occurred within the past 180 days, you may file a complaint at any of the district offices of the Michigan Department of Civil Rights, alleging a violation of civil rights protected by state law or the Constitution.

Michigan law prohibits discrimination in employment, education, housing, public accommodation, law enforcement, or public service based on religion, race, color, national origin, age, sex, marital status, height, weight, familial status, or disability.

What civil rights are guaranteed by Michigan law?

Michigan law, Public Act 220 of 1976 (the Persons With Disabilities Civil Rights Act) and Public Act 453 of 1976 (the Elliott-Larsen Civil Rights Act), prohibits discrimination in employment, education, housing, public accommodation, public service, and law enforcement on the basis of religion, race, color, national origin, sex, age, weight, height, marital status, disability, or familial status.

However, the ability of a person with a disability to perform a job or utilize facilities which cannot be reasonably altered, can legally be considered.

The Michigan Department of Civil Rights accepts complaints based on any of the forms of discrimination covered in Public Acts 220 and 453 of 1976 as amended.

CIVIL RIGHTS COMPLAINT

How do I file a complaint?

A complaint may be filed at any of the Michigan Department of Civil Rights offices if the alleged act of discrimination has occurred within the past 180 days, or the past 300 days if the complaint is filed with both the department and Equal Employment Opportunity Commission (EEOC). The complaint must be in writing and notarized. If the alleged discrimination is of a continuing nature, and one of the acts of discrimination occurred within the last 180 days, you may be able to include those charges in your complaint as well.

It will facilitate the process, but is not necessary, for the claimant to provide the department with written records supporting the allegations of discrimination and the names, addresses, and phone numbers of witnesses with first-hand information of the alleged discrimination.

Department colleagues receive and investigate complaints of discrimination, and provide referrals and education and outreach. They can answer questions concerning the protections guaranteed by law. Translators are also available.

What happens to complaints?

Many complaints are resolved during informal resolution attempts. However, if the complaint cannot be resolved, and there is evidence supporting the claimant's allegations, the respondent is invited to a conciliation conference in an effort to resolve the issues. If the matter cannot be resolved at this level, the department may issue a charge; and schedule a full public hearing.

The Michigan Civil Rights Commission has the power to order appropriate remedies, including measures to prevent future occurrences, after a finding of unlawful discrimination at a public hearing.

Pension Rights

In times past, people participating in pension plans often discovered upon retirement they could not collect any benefits. A federal law—Employment Retirement Income Security Act (ERISA)—now provides certain protections.

Other protections are found in the Internal Revenue Code and in laws passed by the state.

Due to this complexity, you should consult a lawyer with expertise in employee benefits if you don't receive your expected pension.

What protections does ERISA afford?

The law protects employees under many pension plans by setting minimum standards for eligibility for benefits, by providing insurance for certain plans that fail, and by requiring information be given to plan participants.

Does ERISA require an employer to provide a pension plan?

No. Nor does the law require minimum dollar benefits if a plan is made available.

Are all pension plans covered by ERISA?

No. Some plans are not covered by all or part of the law. For example, government and church plans are not covered. Individual account plans and plans requiring no employer contributions are not insured. Plans maintained outside of the U.S. are not insured.

ERISA also does not apply to anyone who retired before January 1, 1976.

Is there any protection for one who retired before 1976, or whose plan is not covered?

Yes. The Taft-Hartley Act applies to plans governed by collective bargaining and jointly administered by union and employer. Courts have interpreted language of the act to require that pension plans not be arbitrary or unreasonable in their exclusion of workers.

Someone who retired before 1976 may also have protection under state law.

Can I be denied the right to participate in a pension plan because of older age?

Before 1988, you could have been excluded from participation in a defined benefit plan if you began working for the employer within five years of normal retirement age.

Once participating in a plan, you may not be dropped from a plan due to your age. Under many plans, you will continue to earn pension credit for work beyond normal retirement age.

How are an individual account plan and a defined benefit plan different?

In an individual account plan, your pension benefit depends on the amount contributed by you and/or your employer. Profit sharing, stock bonus and money purchase are examples of individual account plans.

In a defined benefit plan, there is a set benefit; you accrue a percentage of that benefit for each year of participation.

What circumstances determine my pension rights?

The most important factors are the number of years of service you have with an employer, and the years of participation you have under a particular plan.

What is a year of service?

A year of service is a 12-month period during which you work for your employer at least 1,000 hours. Regardless of hours worked, a plan need not count work done before a pension plan was started.

A plan may require more than 1,000 hours for you to earn a full year of participation.

Can years of service be lost?

Yes. The most likely way is through certain breaks in service.

What is a break in service?

This is a 12-month period during which you work for your employer 500 hours or less. No break in service less than five years will lead to a loss in years of service.

You cannot lose vested benefits through a break in service.

If I change employers do I ever maintain years of service?

Yes, but only if the two employers operate under the same multi-employer plan or if their separate plans provide reciprocity. You can lose credit if you participate in plans of different union locals, even if locals are part of the same national union.

What are vested benefits?

These are benefits you have a right to draw at some time, regardless of future service. All employee contributions vest immediately. Employer contributions vest at retirement age or sooner, according to a formula based on years of service.

Will I lose vested benefits by leaving a job before retirement?

No. But you will usually have to wait until the retirement age specified in the plan to receive your benefits.

Can I withdraw any benefits before I retire?

Employee contributions can be withdrawn, although this may cause the loss of other vested benefits. Early withdrawal can result in certain monetary penalties.

Do some plans provide for early retirement?

Yes. Some plans provide for an option of early retirement with reduced benefits. You may have to get the signature of your spouse to choose early retirement benefits.

What if I die before retiring?

Plans covered by ERISA must offer a pre-retirement annuity payable to your spouse should you die with vested benefits before you reach retirement age. Payments begin when the worker would have reached early retirement age.

This option can be waived in writing if both worker and spouse agree.

Can I choose a joint and survivor annuity?

Yes. Plans covered by ERISA that provide benefits through periodic payments must provide a joint and survivor annuity, unless this option is waived in writing by both the worker and spouse.

If you have a joint and survivor annuity, you accept lower monthly payments in return for further reduced payments to your spouse should he or she outlive you.

What are a spouse's rights in case of divorce?

In a divorce proceeding, the court can provide that a share of pension benefits goes to the spouse. The court can require that the spouse receive those benefits when the worker reaches the earliest retirement age allowed in the plan, even if the worker doesn't retire.

A spouse will receive survivor's benefits if the court awards them, or if the divorce occurs after retirement and a joint and survivor annuity has already been chosen.

Will I receive pension benefits immediately upon retirement?

Probably not. If a plan doesn't provide for early retirement, payment must begin within 60 days of the end of the plan year when the latest of these occur: a) termination of employment; b) normal retirement age (or age 65, if earlier); and c) tenth anniversary of your participation.

Can the amount of my pension be reduced because of the Social Security benefits I receive?

Yes, if the plan provides for the "integration" of benefits, which is no longer very common. No more than 50% of pension benefits earned after 1988 can be lost through integration.

Once your pension benefit amount is calculated, future Social Security increases will have no effect on that amount.

Will payment of pension benefits be suspended if I go back to work?

Payment can be suspended if you return to the same employer. Payment can be suspended under a multi-employer plan if you return to work in the same industry, in the same geographical area.

What information am I entitled to?

If a plan is covered by ERISA you should automatically receive a summary plan description within 90 days of becoming a plan participant. Information is included on vesting, accrual and forfeiture of benefits, and claims procedure.

Once a year, you may request in writing a statement from the plan administrator setting forth your accrued and vested benefits as of a specific date.

Upon termination of employment you should receive a statement detailing vested benefits.

How do I apply for pension benefits?

Every covered plan must establish a reasonable claims procedure. The summary plan description will state whether a claim is to be submitted to the plan administrator or to the insurance company which pays benefits.

If a claim is denied, you must receive written notice giving reason for this decision. Upon receiving a denial, immediately contact a lawyer. You have a right to a "full and fair hearing" by the administrator or insurance company, and a right to appeal to court.

Where can I direct complaints or requests for information?

Contact the Employee Benefits Security Administration of the U.S. Department of Labor. The department's toll-free contact center is at (866) 487-2365. If a plan should fail, contact the Pension Benefit Guaranty Corporation Customer Contact Center at (800) 400-7242.

Tax Benefits

Many older people do not take advantage of federal and state tax provisions designed specifically for them. The purpose of this chapter is to outline these provisions.

What are the types of tax benefits?

A **credit** reduces tax to be paid, in the amount of the credit. Some "refundable" credits can result in cash rebates.

A **deduction or exemption** results in a tax saving by reducing the income upon which tax is figured.

A **deferral** is not a reduction in tax, but a postponement of the date when a tax is due.

State of Michigan

What tax credits are available?

Property (Homestead) Tax Credit—A rebate is available if the amount of property tax exceeds a specified percentage of total household resources. Special rules apply to a person age 65 or older and to the unremarried spouse of a person who died after reaching age 65.

You need not own a home to qualify for the rebate. Renters are eligible, as are residents of nursing homes, life-lease facilities, government-subsidized housing (if the development pays taxes or service fees), and mobile homes.

You should file your claim for a rebate with your Michigan income tax return, due April 15. If you do not have to file a Michigan income tax return, you should file your claim as soon as your property taxes and total household resources are known. You may amend a claim for a homestead property tax credit until December 31 of the fourth year following the tax year. Appropriate forms are available from the Michigan Department of Treasury.

What tax deductions are available?

Extra Exemption—In figuring Michigan income tax, each taxpayer can deduct an amount from income as a personal deduction.

Exemption for Pension Income—The exemptions for pension benefits were eliminated in 2011. The taxation of retirement benefits is now largely age based:

1. *Born before 1946*: All pension benefits received from public retirement systems are exempt from Michigan income tax. Depending on the amount of a private pension, all or part of it will not be taxed.
2. *Born 1946 to 1952*: Public and private benefits are deductible up to $20,000 single/$40,000 married filing joint.
3. *Born after 1952*: All retirement benefits are taxable until the taxpayer reaches age 67. Once the taxpayer reaches 67, he or she will have to elect between taking a $20,000/$40,000 exemption OR taking personal exemptions along with exemptions for Social Security, military pensions, and railroad pensions. A private tax preparer can provide you with additional information.

Under certain circumstances, persons born before 1946 can take advantage of a deduction for interest, dividend and capital gain income.

What taxes and assessment may be deferred?

Special Assessment—This assessment is commonly levied to pay for installation of curbs, sidewalks and sewers. A homeowner, age 65 or older, or totally disabled, who meets income limitations, may postpone paying this assessment if certain criteria are met.

Application must be made to the township or city assessor. The tax will not be due until one year after your death, or until the homestead is sold. Interest will be added at 6% per year.

Summer Tax—Any taxpayer age 62 or older, or blind, or totally disabled, whose household income in the prior taxable year was $40,000 or less, may postpone paying summer taxes until February 15 of the next year. There may be no penalty or interest charged for the period ending February 15.

Application must be made to the treasurer of the city, village or township by September 15 of the tax year.

Winter Tax—If your county board of commissioners permits, a taxpayer age 65 or older, or blind, or totally disabled, may postpone paying winter taxes until April 30. To qualify, you must apply for a homestead tax credit by February 15, not receive the refund by March 1, and present a copy of the tax credit form to the county treasurer.

Are there other tax breaks available from the state?

Yes. Home heating tax credits may be available to you. The Michigan Department of Treasury or a private tax preparer can provide you with eligibility details.

Federal Government

What tax credits are available?

Credits for the Elderly—This credit is designed for elderly or permanently disabled citizens who are 65 years of age before the end of the tax year or who are under age 65, retired on disability, and were permanently and totally disabled when they retired. The maximum credit of $1,125 may be available to those filing jointly with no Social Security and a gross income of $7,500 or less. The credit will only be subtracted from taxes otherwise owed; no cash rebate will be given.

What tax deductions are available?

Items Exempt From Tax—The following are "deductions," and may be totally or partially exempt from tax.

1. Social Security benefits (15% to 100% of your benefit is tax exempt, depending on amount of your other income.)
2. Railroad Retirement benefits (Part of Tier 1 benefits is subject to the same rules as Social Security benefits.)
3. Veterans benefits
4. Pension income (Portion attributable to employee contributions is not taxable.)
5. Health and life insurance proceeds
6. Gifts and inheritances

Higher Standard Deduction—In figuring federal income tax, each taxpayer who does not itemize deductions can deduct an amount from his or her income as a standard deduction. If you are age 65 or older, you can claim a higher standard deduction.

Gain on Sale of Home—If a home is sold for more than its adjusted basis (the price paid for it plus the cost of improvements made), the gain is ordinarily subject to the capital gains tax. This provision allows a taxpayer to exempt up to $250,000 ($500,000 on a joint return) of the gain if certain conditions are met.

Are there programs available to help me figure my taxes?

There are a variety of free programs, including Tax Counseling for the Elderly and Volunteer Income Tax Assistance. Call the Internal Revenue Service at (800) 829-1040 or the local agency on aging for the nearest location.

Landlord-Tenant Law

Must a lease be in writing?

There is no requirement that a residential lease be in writing if it is for a period of one year or less. A residential lease for a period longer than a year must be in writing. However, it is always better to have a written lease in case a dispute arises.

What information should be included in a lease?

1. Name and signature of landlord and tenant(s).
2. Amount of rent.
3. Address of the property.
4. Beginning date. For long-term tenancies, an ending date should also be included.
5. "Truth in Renting" notice.
6. Amount of security deposit.
7. All other terms of the lease, including responsibility for utilities, maintenance, snow removal and repairs, etc.

Must a tenant sign a form lease just as it is?

No. A tenant can bargain with a landlord as to many lease provisions. If a change is made in a form lease, both tenant and landlord should initial the change. If a tenant has questions about anything in a proposed lease, he or she should contact a lawyer *before* signing it.

Can a landlord charge a security deposit?

Yes, a security deposit can be charged for an apartment, a room, a mobile home space, or a house. The deposit can be no more than one and one-half times the monthly rent.

How does a tenant get back a security deposit?

Michigan law sets up procedures for a landlord and tenant to follow:

1. Upon moving in, a tenant completes an inventory checklist as to the condition of each room.
2. When the tenant moves out, both landlord and tenant complete another inventory checklist.
3. Tenant provides a forwarding address to landlord within four days of moving out.

4. Within 30 days, landlord either returns deposit or a list of damages for which tenant is responsible together with the balance of the deposit, if any.

For what reasons can a landlord keep all or part of a security deposit?

All or part of a security deposit may be kept to cover unpaid rent, unpaid utility bills, and damage to the rental unit beyond "normal wear and tear."

What if a landlord does not comply with the security deposit law?

A tenant may sue the landlord for double the amount of money still held by the landlord after 45 days.

Does a landlord have the right to enter a leased house or apartment?

A landlord can enter at reasonable hours to inspect and to make repairs. The landlord should notify the tenant beforehand, except in emergencies.

For what repairs is a landlord responsible?

A landlord has a general obligation to keep the place in good repair. However, a landlord does not have a duty to repair damage that is the tenant's fault. If there is something which needs repair, a tenant should tell the landlord about it; the landlord then has a reasonable time to make the repair.

What if the landlord does not respond?

It is important for the tenant to then send a letter to the landlord detailing necessary repairs.

Is help available elsewhere?

Yes. If there may be a health or safety code violation, a tenant should send a letter to the local building department and/or health department requesting a housing inspection.

What if a landlord still refuses to act?

A tenant has several choices. If there is a danger to health or safety, a tenant should consider moving out immediately. If there is no danger but the repair problem is serious, a tenant can consider withholding the rent, or repairing the problem and deducting the costs. Before taking either of these actions a tenant should discuss the matter with a lawyer.

How much notice must a tenant give before moving out?

A lease may have a provision for giving notice. If not, one week's notice must be given for a lease that is renewed weekly; one month's notice for a lease renewed monthly. For a year lease, a tenant should give notice one month before the end of the lease. Notice should always be given in writing. Notice should always be given prior to the next rental period.

Can a tenant move out in the middle of a year lease?

Maybe. A tenant should first ask the landlord to cancel the lease. If the landlord will not agree, the tenant can try to sublet (if not prohibited in the lease). If the tenant moves without first having the lease canceled or subletting, the landlord can sue. If the landlord is unable to re-rent the apartment or room, the tenant will be responsible for all rent due during the remainder of the lease. If the landlord does re-rent the unit, the prior tenant will be responsible for rent until the new tenant moves in.

Can a landlord evict a tenant without going to court?

No. During the period of a lease, a landlord cannot simply order a tenant to move out, nor can a landlord remove possessions, disconnect utilities, or change locks to force a tenant to move. A landlord cannot evict a tenant because the tenant has complained to the landlord or to governmental agencies about the need for repairs.

Can a tenant be evicted because the building is being converted into a condominium project?

Michigan law provides certain protections. All tenants have the right to stay during the term of their lease or for 120 days after notice of condominium conversion, whichever is longer. All tenants age 65 or older have the right not to move out for at least one year. Many older people are eligible to remain in their apartments for periods ranging from four to ten years.

What procedures must be followed by a landlord to evict a tenant?

1. Tenant is given or sent a "Notice to Quit" (for failure to pay rent), or a "Notice to Terminate Tenancy." (Tenants in federally subsidized housing, unlike other tenants, cannot be evicted simply because their landlord wants them to move.)
2. After waiting a period of one, seven, or thirty days a landlord can bring an eviction action in district court. (The waiting period depends upon the reason for eviction.) Tenant is served with a summons and complaint. (A tenant should immediately see a lawyer at this point.)
3. Court hearing. Both landlord and tenant should attend to present their respective arguments.

4. If tenant loses, tenant can appeal. If there is no appeal, court will order tenant to move within ten days or earlier if the case involves illegal drugs.
5. If tenant refuses to move, court may give sheriff permission to physically remove the tenant and his/her possessions from the house or apartment.

What points should tenants and landlords remember?

1. All agreements should be put in writing.
2. It is important to keep records—lease, rent receipts, letters, court papers.
3. Letters should be sent by certified mail, return receipt requested. Copies of all letters should be kept.

MOBILE HOME PARKS

If I live in a mobile home in a mobile home park, what are my rights as a tenant?

Most mobile home residents own their own homes, but are tenants in a park. They usually rent a space from the park owner. Mobile home park tenants enjoy the same legal rights as residential tenants.

What are the advantages and disadvantages of having a written lease in a mobile home park?

With a lease, the conditions, rules and rent are fixed during the term of the lease agreement, and the lease usually cannot be cut short or extended except by mutual consent or breach of the contract (i.e., the tenant or landlord fails to keep his/her promises or fails to discharge his/her obligations).

Can I be evicted from a mobile home park without a reason?

No. State law generally prohibits “without just cause” evictions such as selling illegal drugs, causing intentional harm to other tenants or the property of other tenants for mobile home owners.

What fees may mobile home parks charge?

Park owners and operators may charge certain fees and charges incidental to the installation of the mobile home or a park charge for site preparation to accommodate a specific mobile home. They may also require a security deposit of up to 1-1/2 times the monthly rent. Upon

leaving the site, a mobile home park tenant may be liable for any damages to the site that are a direct result of his/her negligence, which would normally be deducted from the security deposit. A park may also charge for the number of people, including children, living in the home, over and above the normal monthly rent.

Entrance and exit fees, whether refundable or nonrefundable, and whether charged directly or indirectly, are specifically prohibited by the Mobile Home Commission Act.

A list of all charges included in the rent must be conspicuously displayed in the park office. Potential park tenants should read it carefully before signing a lease.

May a mobile home park operator impose rules governing park tenants' behavior?

Yes. Most park operators have rules governing pets, maintenance, automobiles, and other matters. The Mobile Home Commission Act requires mobile home park operators to make copies of park rules available to potential tenants and to provide copies to park tenants upon occupancy. Before moving into a park, potential tenants should closely examine these rules to decide whether they will be comfortable living under their terms.

How can a park tenant bring a complaint against a mobile home park operator?

A tenant may notify the Bureau of Construction Codes, Office of Local Government about any complaint by calling (517) 241-9347. Also, complaints could be filed with the Manufacturing Housing Commission at (517) 241-9317. Whenever possible, the park tenant should first notify the park owner in writing of his/her intent to file a complaint with the Bureau. If the complaint falls within its jurisdiction, the Bureau will follow up and conduct any necessary investigation or inspection. If the matter is not within the Bureau's jurisdiction, a park tenant should ask the Bureau for referral to the proper authority. Under certain circumstances, a park tenant may also be able to bring a legal suit. Check with an attorney or contact the Consumer Protection Division of the Office of the Michigan Attorney General for advice (telephone (517) 373-1140).

Am I allowed to sell my mobile home without moving it out of the park I am currently in?

Yes, under P.A. 337 of 1988, effective on May 1, 1989, you may sell your mobile home on the site, if you meet the rules and regulations of the park. The law states that the "age or size of a mobile home shall not be used as the sole basis for refusing to allow an on-site, in-park sale." Conversion of the park to other uses (such as a shopping center) is allowed as a reason to refuse to permit on-site, in-park sales under the law.

May mobile homes be placed on private property outside of a mobile home park?

Yes. Local governments may set standards for all housing units concerning such features as minimum square footage, a permanent foundation, and certain roof lines. These standards may also apply to mobile homes, as well as other types of homes. A local government may restrict the location of a mobile home if it fails to satisfy standards designed to ensure that the mobile home will compare favorably with other housing that would be allowed on that site. However, these standards may not single out mobile homes, but must be applied uniformly to all types of housing. Local governments may also impose additional regulations concerning installation and anchoring of mobile homes. Those located outside of parks must also comply with laws governing smoke detectors and multiple fire extinguishers.

Legal Resources

A competent, honest and affordable lawyer, and other legal resources available in the community can be helpful to you in appropriate circumstances. If you believe you have a legal problem, act quickly to determine your rights, and to protect them.

Is there a means to have my legal questions answered by telephone?

Yes. A free statewide "legal hotline" for people age 60 or older is now available. The program is particularly interested in reaching the homebound, those in rural areas, and others with limited access to a lawyer. Telephone consultation with a lawyer is available during normal business hours by calling (800) 347-5297.

Do I always need a lawyer if I have a legal problem?

No. For example, you can sue in small claims court for damages up to $5,000.

What are examples of cases that can be brought in small claims court?

You might sue a dry cleaner for damaging your clothing, or an automobile repair person who doesn't fix your car properly, or an appliance store which refuses to repair a television set under warranty.

Are there cases that cannot be brought?

Yes. In small claims court you cannot sue for fraud, libel or slander. Also, you cannot sue to make someone do something (like tear down a fence), or stop doing something (like trespassing).

What if the amount involved is more than $5,000?

You may still sue in small claims court, but you give up the right to collect any amount over $5,000.

How is small claims court different from other courts?

Small claims court is designed to avoid long delays and high court costs. People involved in a small claims lawsuit give up three rights:

1. You cannot have a lawyer.
2. You cannot have a jury trial.
3. You cannot appeal to a higher court.

It is important to realize that a case will not be heard in small claims court unless both parties agree to this forum.

How do I start a lawsuit in small claims court?

You must file a claim in the court district where the person or business you are suing lives or does business, or where the action giving rise to the dispute occurred.

Tell the district court clerk you want to file a small claim. You will be given a form called an affidavit. Complete the form, giving the exact name of the person or business you are suing, how much you are suing for, and the reason you believe you are owed money.

Should I bring anything with me when I file?

Yes. Take with you any written evidence, such as receipts, bills and contracts. It may be necessary to attach copies to the claim form.

What is the cost of bringing a small claim?

There is a filing fee and a fee for "serving" papers on the person sued; together, these fees will run from $15 to $25. If you win the lawsuit, the person sued will have to pay you back for these expenses.

What happens when the person or business sued receives the claim?

If the person sued wishes to be represented by a lawyer or have a jury trial, he or she can move the case to a regular session of district court. Should this happen, consult a lawyer. (If you are sued in small claims

court, see a lawyer for advice on whether to defend the case in small claims court or move it to a regular session of district court.)

What should I bring to the hearing?

Bring any witnesses who can help your case. Also bring all papers, documents, bills, canceled checks, photographs or other relevant evidence.

What will the hearing be like?

The trial will be informal. If you started the case, you will speak first. You tell the judge your story, have witnesses testify, and present written evidence. The person being sued can ask you or your witnesses questions.

When you have completed your case, the person being sued presents his or her case in the same manner. After hearing both sides the judge will make a decision.

What happens if I win my case?

The judge will sign a paper stating the person or business you sued owes you a specified amount in damages plus court costs.

What if the defendant will not pay?

There are several legal procedures you can follow in an attempt to collect the money due. You will have to return to court.

Are there other procedures available where a lawyer is not necessary?

Yes. Mediation, whereby a neutral party seeks to help settle a dispute without the necessity of court action may be available.

Are there legal services available at no cost?

There may be. Several counties have programs funded under the Older Americans Act. Anyone age 60 or older is eligible regardless of income, but the program may not handle all types of legal problems. A list of agencies is included at the end of this chapter.

If you work for, or have retired from, Chrysler, Ford or General Motors, you, among others, may be eligible to participate in a prepaid legal services plan. Certain legal problems will be handled at no cost to you. The telephone number for the United Auto Workers Legal Services Plan is (800) 572-1383.

Are there different types of private legal practice?

Yes. Some lawyers work by themselves, others work in small or large firms or in legal clinics. Some lawyers handle a variety of legal issues; others specialize in such areas as family law, real estate, criminal law, tax or corporate law.

If I wish to hire a lawyer in private practice, how can I find a good one?

There is no sure-fire way. Here are some suggestions:

1. If you have dealt with a lawyer in the past and were satisfied, go back to that person. If he or she does not handle the present type of problem, he or she can recommend someone who does.
2. Ask friends, neighbors or relatives for someone they have been pleased with.
3. Ask a person you respect, such as a religious leader, or call an organization such as a consumer group or a civic organization.
4. Call the county or state bar referral service, which will provide you with the names of one or more lawyers. A list of bar referral services is included at the end of this chapter.
5. Consult the yellow pages or newspaper classified section.

Are lawyers certified as specialists as doctors are?

No. If you receive names of lawyers through a bar referral service for a certain type of case, it is only because those lawyers have requested referrals in that type of case. The lawyer may or may not have substantial experience.

If you see an advertisement stating a lawyer specializes in a certain area of the law, it does not mean any group has certified or licensed the lawyer in that specialty. Expertise among lawyers is self-proclaimed.

You might check the experience and reputation of a lawyer by asking her or him for references.

How do private lawyers charge for their services?

Do not deal with any lawyer who refuses to talk about money.

Lawyers charge clients in one of three ways: flat fee, hourly, or contingency. Under a flat fee arrangement you are charged a specific amount for the service, e.g., $90 to draft a simple will.

Under an hourly fee you are charged an amount, e.g., $80 for each hour the lawyer spends on your case. A lawyer may ask for a retainer, which is similar to a down payment.

If you have suffered a personal injury, a lawyer may handle your case for a contingent fee. She or he will receive a percentage, often one-third, of any settlement or court judgment you receive. If you lose the case, you don't owe your lawyer any attorney fees.

How do I know how much my lawyer will charge?

Although it is often uncomfortable for both lawyer and client, it is important to discuss financial arrangements at the outset. Some lawyers will talk about this over the telephone. Other lawyers may discuss it at an initial consultation, for which they charge only a nominal amount. Do not deal with any lawyer who refuses to talk about money.

If a lawyer charges you by the hour for a case, he or she will not be able to tell you exactly how much it will cost, but he or she should be able to provide some estimate. Make sure you know what the hourly fee includes. Some lawyers charge for items such as long-distance telephone calls, secretarial time and photocopying in addition to their hourly rate.

Whatever the fee arrangement, you are responsible for court filing fees.

If I speak to a lawyer, do I have to hire that lawyer?

No. Do not hire a lawyer unless you are comfortable, you have confidence in his or her ability, and you can afford his or her services.

What is the role of a lawyer?

A lawyer is supposed to lay out your legal options in given circumstances, advise you of the possible effects of each legal alternative, and pursue the alternative you choose. The authority to make these decisions is exclusively yours. You should neither allow nor expect a lawyer to make such decisions for you.

How can I make best use of my lawyer?

First, prepare ahead of time. Collect and organize all relevant papers. Have in mind what you want to accomplish. Second, be open and honest with your lawyer. The lawyer cannot divulge to others what you tell her or him.

Third, ask your lawyer to keep you informed about the progress of your suit or legal problem, but do not expect immediate results. Delay is sometimes out of your lawyer's control. Finally, don't sign any paper until you understand all its language.

Always remember, you have hired a lawyer to work for you.

Can I fire a lawyer if I am not satisfied?

Yes. But you may still owe the lawyer for services he or she has already rendered to you.

What if I feel a lawyer has been careless or dishonest?

As in any business, there are some lawyers who are not ethical. Some may use disreputable tactics or charge you for unnecessary services. Do not pay a bill unless it is itemized, and unless it is according to your original agreement. Try resolving honest disagreements about fees by talking to the lawyer.

If you feel a lawyer has been dishonest, careless or incompetent, you can complain to the Michigan Attorney Grievance Commission. A lawyer's license can be suspended or revoked. You can also file a lawsuit against the lawyer and seek damages.

Legal and State Bar Referral Assistance

The following organizations can help you with legal services and referrals. The resources are listed by city with serving counties. For more information or if your city is not listed, please contact the **State Bar of Michigan** toll-free at **(800) 968-1442** or the **State Bar Lawyer Referral Service** toll-free at **(800) 968-0738**.

ALPENA

Legal Services of Northern Michigan
123 N. 2nd Avenue, Suite 1
Alpena, MI 49707
Phone: (989) 356-9081
Toll-Free: (888) 356-9009
Fax: (989) 354-4711
Serving County: Alpena

ANN ARBOR

Legal Services of South Central Michigan
420 N. Fourth Avenue
Ann Arbor, MI 48104-1197
Phone: (734) 665-6181
Serving Counties: Livingston, and Washtenaw

Washtenaw County Bar Association
101 E. Huron Street
P.O. Box 8645
Ann Arbor, MI 48107
Phone: (734) 994-4912
Referral Phone: (734) 996-3229
Serving Counties: Lenawee, Livingston, Monroe, Washtenaw, and Western Wayne

BIG RAPIDS

Legal Aid of Western Michigan
203 S. Third Avenue, Suite B
Big Rapids, MI 49307
Phone: (231) 796-2191
Toll-Free: (888) 783-8190
Serving Counties: Lake, Mecosta, and Osceola

BLOOMFIELD HILLS

Oakland County Bar Association
1760 S. Telegraph Road, #100
Bloomfield Hills, MI 48302
Phone: (248) 334-3400
Referral Phone: (248) 338-2100
Serving County: Oakland

CLINTON TOWNSHIP

Lakeshore Legal Aid Counsel and Advocacy Law Line
21885 Dunham Road, Suite 4
Clinton Township, MI 48036
Phone: (586) 469-5185
Toll-Free: (888) 783-8190
Serving County: Bay

DETROIT

Detroit Metropolitan Bar Association
645 Griswold Street
Detroit, MI 48226
Phone: (313) 961-6120
Serving County: Wayne

ESCANABA

Legal Services of Northern Michigan
806 Ludington Street
Escanaba, MI 49829
Phone: (906) 786-2303
Toll-Free: (888) 786-2303
Fax: (906) 786-4041
Serving County: Delta and Upper Peninsula

FLINT

Legal Services of Eastern Michigan
436 S. Saginaw Street
Flint, MI 48502
Phone: (810) 234-2621
Toll-Free: (800) 322-4512
Referral Phone: (810) 232-6000
Serving County: Saginaw

GAYLORD

Legal Services of Northern Michigan
1349 S. Otsego Avenue, Unit 7B
Gaylord, MI 49735
Phone: (989) 705-1067
Toll-Free: (888) 645-9993
Fax: (989) 705-7178
Serving Counties: Gaylord and Otsego

GRAND RAPIDS

Grand Rapids Bar Association
161 Ottawa Avenue, NW #203
Grand Rapids, MI 49503
Phone: (616) 454-5550
Referral Phone: (616) 855-0273
Serving Counties: Kent, Allegan, Ionia, Ottawa, and Muskegon

Western Michigan Legal Services – Main Office
400 Cornerstone Building
89 Ionia, NW
Grand Rapids, MI 49503
Phone: (616) 774-0672
Toll-Free: (800) 442-2777
INTAKE/Toll-Free: (888) 783-8190
Serving Counties: Kent, Montcalm, and Ionia

HOLLAND

Legal Aid of Western Michigan
636 Hastings Street
Holland, MI 49423
Phone: (616) 394-1380
INTAKE/Toll-Free: (888) 783-8190
Serving Counties: Allegan and Ottawa

HOUGHTON

Legal Services of Northern Michigan
706 Sharon Avenue
Houghton, MI 49931
Phone: (906) 482-3908
Toll-Free: (888) 482-2343
Fax: (906) 482-4748
Serving County: Houghton

JACKSON

Legal Services of South Central Michigan
540 N. Jackson Street
Jackson, MI 49201
Phone: (517) 787-6111
Serving County: Jackson

KALAMAZOO

Western Michigan Legal Services
201 W. Kalamazoo Avenue
Kalamazoo, MI 49007
Phone: (616) 344-8113
INTAKE/Toll-Free: (888) 783-8190
Serving Counties: Kalamazoo, Barry, Branch, and Calhoun

LANSING

Legal Services of South Central Michigan
3490 Belle Chase Way, Suite 50
Lansing, MI 48911
Phone: (517) 394-3121
Toll-Free: (800) 968-0044
Fax: (517) 394-4276
Serving Counties: Barry, Clinton, Eaton, Ingham, Livingston, Shiawassee

Sixty-Plus Elder Law Clinic
Cooley Center, 6th Floor
300 S. Capitol Avenue
Lansing, MI 48933
Phone: (517) 334-5760

MARQUETTE

Legal Services of Northern Michigan
112 W. Washington Street, Suite 1
Marquette, MI 49855
Phone: (906) 228-5620
Toll-Free: (888) 228-5590
Fax: (906) 228-3439
Serving: Upper Peninsula

MONROE

Senior Citizen Legal Services
1126 S. Telegraph Road
Monroe, MI 48161
Phone: (734) 241-7644
Fax: (734) 241-8394
Serving County: Monroe

Legal Services of South Central Michigan
1118-A S. Telegraph Road
Monroe, MI 48161
Phone: (734) 241-8310
Toll-Free: (888) 251-1598
Serving County: Monroe

MT. CLEMENS

Macomb County Bar Association
40 N. Main Street, Suite 435
Mt. Clemens, MI 48043
Phone: (586) 468-2940
Referral Phone: (586) 468-8300
Serving Counties: Macomb and St. Clair

MUSKEGON

Legal Aid of Western Michigan
450 Morris, Suite 302
Muskegon, MI 49940
Phone: (231) 726-4887
INTAKE/Toll-Free: (888) 783-8190
Serving Counties: Lake, Mason, Muskegon, Newago, Oceana, and Osceola

REDFORD

Legal Services Elder Law Center
12121 Hemingway
Redford, MI 48239
Phone: (313) 937-8291
Serving County: Wayne

ST. JOSEPH

Western Michigan Legal Services
901 Port Street
St. Joseph, MI 49085
Phone: (269) 983-6363
INTAKE/Toll-Free: (888) 783-8190
Serving County: Berrien

SAULT STE. MARIE

Legal Services of Northern Michigan
130 W. Spruce Street
P.O. Box 710
Sault Ste. Marie, MI 49783
Phone: (906) 632-3361
Toll-Free: (888) 632-9313
Fax: (906) 632-9876
Serving: Upper Peninsula

TRAVERSE CITY

Grand Traverse, Leelanau and Antrim Bar Association
P.O. Box 1958
Traverse City, MI 49685
Phone: (231) 922-4715
Serving Counties: Grand Traverse, Leelanau, and Antrim

Legal Services of Northern Michigan
221 Garland Street, Suite H
Traverse City, MI 49684
Phone: (231) 941-0771
Toll-Free: (888) 941-9599
Fax: (231) 941-9876

Consumer Resources

AGE DISCRIMINATION

Michigan Department of Civil Rights
Toll-Free: (800) 482-3604

Detroit Service Center
Cadillac Place, Suite 3-600
3054 W. Grand Boulevard
Detroit, MI 48202
Phone: (313) 456-3700

Lansing Service Center
110 W. Michigan Avenue, Suite 800
Lansing, MI 48906
Phone: (517) 335-3165

U.S. Equal Employment Opportunity Commission
477 Michigan Avenue, Room 865
Detroit, MI 48226
Phone: (313) 226-4608

U.S. Department of Health and Human Services
233 N. Michigan Avenue, Suite 1300
Chicago, IL 60601
(federally funded services)
Toll-Free: (800) 368-1019

CONSUMERS (GENERAL)

Michigan Attorney General
Consumer Protection Division
P.O. Box 30213
Lansing, MI 48909
Phone: (517) 373-1140
Toll-Free: (877) 765-8388

Federal Trade Commission
6th Street and
Pennsylvania Avenue, N.W.
Washington, D.C. 20580
Toll-Free: (877) 382-4357

FUNERALS

Department of Licensing and Regulatory Affairs
Corporations, Securities and
Commercial Licensing Bureau
P.O. Box 30018
Lansing, MI 48909
Phone: (517) 241-9252

Cemetery Regulation
Lansing, MI 48909
Phone: (517) 241-8070

HEALTH INSURANCE

Department of Insurance and Financial Services
P.O. Box 30220
Lansing, MI 48909
Phone: (517) 373-0220
Toll-Free: (877) 999-6442

HEARING AIDS

Michigan Board of Hearing Aid Dealers
P.O. Box 30018
Lansing, MI 48909
Phone: (517) 241-9288

U.S. Food and Drug Administration
300 River Place, Suite 5900
Detroit, MI 48207
Phone: (313) 393-8100

NURSING HOMES

Bureau of Health Systems Operations Division
MDCH Complaint Investigation Unit
P.O. Box 30664
Lansing, MI 48909
Phone: (517) 241-4712

Complaint Hotline and Nursing Home Abuse Hotline
Toll-Free: (800) 882-6006

Centers for Medicare and Medicaid Services
Toll-Free: (800) 447-8477

Health Care Association of Michigan
7413 Westshire Drive
Lansing, MI 48917
Phone: (517) 627-1561
Fax: (517) 627-3016

American Association of Retired Persons State Office
309 N. Washington Sq., Suite 110
Lansing, MI 48933
Phone: (517) 482-2794
Toll-Free: (886) 227-7448

Michigan Association of Homes and Services for the Aging
6512 Centurion Drive, Suite 300
Lansing, MI 48917
Phone: (517) 323-3687

Adult Well Being Services
1423 Field Avenue
Detroit, MI 48214
Phone: (313) 924-7860
Fax: (313) 924-0350

Medicare/Medicaid Assistance Program
Phone: (800) 803-7174

PENSIONS

U.S. Department of Labor
Employee Benefits Security Administration
Detroit District Office
211 W. Fort Street, Suite 1310
Detroit, MI 48226
Phone: (313) 442-3360
Fax: (313) 226-3254

SCAMS

Michigan Department of Licensing and Regulatory Affairs
Enforcement Division
Corporations and Securities Bureau
P.O. Box 30018
Lansing, MI 48909
Phone: (517) 241-9202
Fax: (517) 241-9280

Michigan Attorney General Consumer Protection Division
Phone: (517) 373-1140

Health Care Fraud Hotline
Toll-Free: (800) 24-ABUSE (22873)

TAXES

Michigan Department of Treasury
Treasury Building
Lansing, MI 48922
Phone: (517) 373-3200

U.S. Internal Revenue Service
500 Woodward Avenue
Detroit, MI 48226
Phone: (313) 628-3722

Michigan Long-Term Care Ombudsman Offices

The following Long-Term Care Ombudsman and Services for the Aging offices can assist you with housing questions and concerns. Find your serving city or county for the nearest office. If you do not find your city or county listed, please contact the main office toll-free at (866) 485-9393 or visit michigan.gov/osa.

Concerned relatives with investigative complaints or suggestive remedies or for assistance with resident rights, payments, issues, guardianship, and nursing home placement, can contact the main office toll-free at (866) 485-9393 or visit michigan.gov/ltc for more information.

DETROIT AREA

Region 1a Agency on Aging
1333 Brewery Park Blvd., Suite 200
Detroit, MI 48207
Phone: (313) 446-4444
Serving Cities: Detroit, Grosse Pointe, Grosse Pointe Farms, Grosse Pointe Park, Grosse Pointe Shores, Grosse Pointe Woods, Hamtramck, Harper Woods, and Highland Park

Region 1b Agency on Aging
29100 Northwestern Hwy., Suite 400
Southfield, MI 48034
Phone: (248) 357-2255
Serving Counties: Livingston, Macomb, Monroe, Oakland, St. Clair, and Washtenaw

Region 1c The Senior Alliance, Inc.
3850 Second Street, Suite 201
Wayne, MI 48184
Phone: (734) 722-2830
Serving Counties: Wayne County except the cities served by Region 1a

JACKSON AREA

Region 2 Area Agency on Aging
102 N. Main Street
Brooklyn, MI 49230-0189
Phone: (517) 592-1974
Serving Counties: Hillsdale, Jackson, and Lenawee

BATTLE CREEK and KALAMAZOO AREA

Region 3a Area Agency on Aging
3299 Gull Road
P.O. Box 42
Nazareth, MI 49074
Phone: (269) 373-5147
Serving County: Kalamazoo

Region 3b Area Agency on Aging
200 West Michigan Ave., Suite 102
Battle Creek, MI 49017
Phone: (269) 966-2450
Serving Counties: Barry and Calhoun

Region 3c Area Agency on Aging
570 Marshall Road
Coldwater, MI 49036
Phone: (517) 278-2538
Serving Counties: Branch and St. Joseph

Region 4 Area Agency on Aging
2900 Lakeview Avenue
St. Joseph, MI 49085
Phone: (269) 983-0177
Serving Counties: Berrien, Cass, and Van Buren

FLINT AREA

Region 5 Valley Area Agency on Aging
225 E. Fifth Street, Suite 200
Flint, MI 48502
Phone: (810) 239-7671
Serving Counties: Genesee, Lapeer, and Shiawassee

LANSING AREA

Region 6 Tri-County Office on Aging
5303 South Cedar Street
Lansing, MI 48911-3800
Phone: (517) 887-1440
Serving Counties: Clinton, Eaton, and Ingham

SAGINAW AREA

Region 7 Area Agency on Aging
1615 S. Euclid Ave.
Bay City, MI 48706
Phone: (989) 893-4506
Serving Counties: Bay, Clare, Gladwin, Gratiot, Huron, Isabella, Midland, Saginaw, Sanilac, and Tuscola

WESTERN MICHIGAN

Region 8 Area Agency on Aging
3215 Eaglecrest Drive NE
Grand Rapids, MI 49525
Phone: (616) 456-5664
Serving Counties: Allegan, Ionia, Kent, Lake, Mason, Mecosta, Montcalm, Newaygo, and Osceola

ALPENA AREA

Region 9 Area Agency on Aging
2375 Gordon Road
Alpena, MI 49707
Phone: (989) 356-3474
Serving Counties: Alcona, Alpena, Arenac, Cheboygan, Crawford, Iosco, Montmorency, Ogemaw, Oscoda, Otsego, Presque Isle, and Roscommon

NORTHWEST MICHIGAN AREA

Region 10 Area Agency on Aging
1609 Park Drive
P.O. Box 5946
Traverse City, MI 49686
Phone: (231) 947-8920
Serving Counties: Antrim, Benzie, Charlevoix, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee, and Wexford

UPPER PENINSULA AREA

Region 11 Area Agency on Aging (UPCAP)
2501 14th Avenue, South
P.O. Box 606
Escanaba, MI 49829
Phone: (906) 786-4701
Serving Counties: Alger, Baraga, Chippewa, Delta, Dickinson, Gogebic, Houghton, Iron, Keweenaw, Luce, Mackinac, Marquette, Menominee, Ontonagon, and Schoolcraft

MUSKEGON AREA

Region 14 Senior Resources
560 Seminole Road
Tanglewood Park
Muskegon, MI 49444
Phone: (231) 739-5858
Serving Counties: Muskegon, Oceana, and Ottawa

Michigan State Departments

For more information about Michigan state departments, search **www.michigan.gov**.

Agriculture and Rural Development
Constitution Hall
P.O. Box 30017
Lansing, MI 48909
Toll-Free: (800) 292-3939

Attorney General
G. Mennen Williams Bldg., 7th Floor
525 W. Ottawa Street
Lansing, MI 48909
Phone: (517) 373-1110

Auditor General
201 N. Washington Sq., Suite 600
Lansing, MI 48913
Phone: (517) 373-8050

Civil Rights
Capitol Tower Building, Suite 800
110 W. Michigan Avenue
Lansing, MI 48913
Phone: (517) 335-3165

Civil Service Commission
400 S. Pine Street
Lansing, MI 48909
Phone: (517) 373-3030

Community Health
Medical Services Administration
Lewis Cass Building, 6th Floor
320 S. Walnut Street
Lansing, MI 48913
Phone: (517) 241-7882

Corrections
Grandview Plaza
206 E. Michigan Avenue
P.O. Box 30003
Lansing, MI 48909
Phone: (517) 335-1426

Education
Hannah Building
608 W. Allegan Street
P.O. Box 30008
Lansing, MI 48909
Phone: (517) 373-3324

Environmental Quality
P.O. Box 30473
Lansing, MI 48909
Toll-Free: (800) 662-9278

Human Services
Grand Tower
235 S. Grand Avenue
P.O. Box 30037
Lansing, MI 48909
Phone: (517) 373-2035

Insurance and Financial Services
611 W. Ottawa Street, 3rd Floor
Lansing, MI 48933-1070
Phone: (517) 373-0220
Toll-Free: (877) 999-6442
Fax: (517) 335-4978

Licensing and Regulatory Affairs

Employment Relations
3026 W. Grand Blvd., Suite 2-750
P.O. Box 02988
Detroit, MI 48202-2988
Phone: (313) 456-3510
Fax: (313) 456-3511

Health Care Services
P.O. Box 30070
Lansing, MI 48909
Phone: (517) 335-1980
Fax: (517) 241-9416

Licensing Division
P.O. Box 30018
Lansing, MI 48909
Phone: (517) 241-9288
Fax: (517) 373-3085

Wage and Hour Program
P.O. Box 30476
Lansing, MI 48909
Phone: (517) 322-1825
Fax: (517) 322-6352

Military and Veterans Affairs
3411 Martin Luther King Boulevard
Lansing, MI 48913
Phone: (517) 481-7564

Natural Resources
530 W. Allegan Street, #4
Lansing, MI 48933
Phone: (517) 373-1230

Secretary of State
General Information
Lansing, MI 48918
Toll-Free: (888) 767-6424

State Police
333 S. Grand Avenue
P.O. Box 30634
Lansing, MI 48909
Phone: (517) 332-2521

Technology, Management and Budget
Lewis Cass Building
320 S. Walnut Street
Lansing, MI 48909
Phone: (517) 373-1004

Transportation
State Transportation Building
425 W. Ottawa Street
P.O. Box 30050
Lansing, MI 48909
Phone: (517) 373-2090

Treasury
Michigan Department of Treasury
Lansing, MI 48922
Phone: (517) 373-3200

Bureau of State Lottery
101 E. Hillsdale
P.O. Box 30023
Lansing, MI 48909
Phone: (517) 335-5600

Workforce Development Agency
Victor Office Center, 7th Floor
201 N. Washington Square
Lansing, MI 48913
Phone: (517) 335-5858
TTY: (888) 605-6722
Fax: (517) 241-8217

Toll-Free Hotlines

In an effort to keep you informed, generally updated and communicating with government officials about government programs and services, many toll-free hotlines were created. You are able to call the hotline numbers below without cost. Keep this list in a safe place for reference whenever the need arises.

Travel Bureau—provides information on upcoming events, campsites, and accommodations. **(888) 784-7328** (in Michigan and from out of state).

Natural Resources—to report poaching and other violations of conservation laws. **(800) 292-7800**

National Highway Traffic Safety Administration—receives reports on auto safety problems; provides information on autos recalled, and complaints received about specific makes and models. **(888) 327-4236**

Bureau of Automotive Regulation—for problems dealing with auto repairs, auto dealerships, etc., except for those problems with automobiles that are still under warranty (contact the Attorney General's office with these problems). **(800) 292-4204**

Utilities (Public Service Commission)—handles complaints on utility services; assists with rates and billings. **(800) 292-9555**

Medicare (Blue Cross-Blue Shield)—Monday through Friday, 8:30 a.m. to 8:00 p.m., answers all Medicare questions. **(877) 241-2583**

For any other consumer-related problems, contact the **Attorney General's Consumer Protection Division** for assistance or referral. **(877) 765-8388**

Other hotline numbers you might find useful are:

STATE

Michigan Bar Association
Legal Hotline for Michigan Seniors
(866) 400-9164

Cash, Food, Medical or Home and Burial Assistance
(855) 275-6424
(855) ASK-MICH

FEDERAL

Consumer Product Safety Commission
(800) 638-2772

Office of Inspector General Information
(800) 447-8477
(800) HHS-TIPS

Notes

The information in this publication is available, upon request, in an alternative, accessible format.

For more information regarding the Michigan Legislature,
scan this QR code with your smartphone.