

LONG-TERM HEALTH CARE FOR RETIRED PRIESTS

1. Medicare policies and diocesan insurance guidelines per Mutual of Omaha thru Burri and Company Fidelitas are the primary determining factors to influence all policies regarding health care. All major medical services must have prior approval by Medicare, Mutual of Omaha thru Burri and Company Fidelitas, and the diocese.
2. In the case of terminal illness, hospice care prescribed by the doctor at home or in an institution is usually covered by Medicare.
3. Prescription medicines are covered by the Insurance Department.
4. Nursing care at home or in an institution is covered if approved by Mutual of Omaha and Medicare.
5. Home health care if prescribed by the doctor and approved by Mutual of Omaha is covered.
6. Unreimbursable medical costs are to be borne by the priest and/or his estate. If the priest's estate is not able to cover unreimbursable expenses, the priest is expected to apply to Medicaid for assistance.
7. The priest should make provision for durable power of attorney for health care to be given to a priest friend or family member and inform the chancellor of his decisions regarding a living will, burial arrangements, etc.
8. If the diocese makes prior arrangements with a health care facility for long-term care for priests, priests will be expected to use the facility unless they wish to assume any additional expenses of an alternative care facility on their own.