




**It's so much more than moving.**  
**Your Guide to Stress-Free  
Rightsizing and Relocation**



**NASMM**  
National Association of  
Senior Move Managers  
Premier Providers of Senior Relocation

## It's so much more than just a move...

Making a move at any age can be difficult and stressful. After 30, 40, or even 50 years in your current home, the process of rightsizing and relocating to a new home is overwhelming.

NASMM members are highly qualified Senior Move Managers who specialize in helping older adults and their families through the daunting process of transitioning to a new residence.

NASMM members understand that your move is so much more than just a move. This guide has been developed to provide you with tips and checklists to enhance your moving experience.



## About NASMM

Founded in 2002, the National Association of Senior Move Managers is a not-for-profit, professional association of organizations dedicated to assisting older adults and families with the physical and emotional demands of later life living including downsizing, relocating, or modifying their homes. As the only professional association in North America devoted to helping the rapidly increasing 55+ population with middle and later life transition issues, NASMM members are committed to maximizing the dignity and autonomy of all older adults.

**National Association of Senior Move Managers**

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# About Senior Move Management

Senior Move Management is the profession that assists older adults and their families with the emotional and physical aspects of relocation and/or "aging in place." Senior Move Management professionals — Senior Move Managers® — have backgrounds in gerontology, social work, health care, nursing and psychology, others come to this industry from the corporate world of project management, technology, accounting or marketing. Senior Move Managers® require a profound commitment to connecting with older adults and a desire to perform meaningful work.

## Why is Senior Move Management needed now and not twenty years ago?

The numbers tell the story. The U.S. population aged 65 and over will jump nearly 80 percent when the Baby Boom generation retires (from 2010 to 2030). By 2030, the elderly will account for one-fifth of the total U.S. population. Did you also know that Americans age 85 and above comprise the fastest growing segment of the U.S. population?

Today, many families are geographically dispersed and adult children are often not able to help with the moving process due to distance, career and family obligations. For family members living far away, the barriers may be geographic.

Many seniors have no surviving children, or increasingly, their children are older adults themselves. If illness or death precipitates the move, the family is likely already drained both emotionally and physically. They need help. Senior Move Managers® emerged to fill these gaps and to facilitate the transition for everyone involved.

Older adults making a transition have usually not moved in 30, 40 or 50 years and need to downsize considerably. The organizational and physical tasks associated with planning and implementing such a complex move can be overwhelming for the entire family. Seek the help of experienced, insured professionals and call a Senior Move Manager®.

## What are the real benefits of Senior Move Management services?

Senior Move Managers® have significant expertise in resources and approaches that save money, reduce stress and produce quality results.

Personalized, client-centered services are designed to meet the client's needs and preferences. Families, particularly, should never doubt the power of an outside expert!

NASMM members are reviewed for insurance and experience requirements prior to acceptance. Additionally, NASMM requires all new members to take certificate classes in Senior Move Management Ethics and Safety. These programs, along with NASMM's ongoing educational programs reflect the NASMM commitment to professionalism and to working with older adults.

NASMM members adhere to a Code of Ethics and Standards of Practice; and NASMM members are guided and supported by the NASMM Ethics Compliance Committee.

One call to a Senior Move Manager® can connect you with services older adults and families need for a seamless, successful transition of all kinds.



# Hiring a Senior Move Manager

Here are some helpful questions to ask when you are considering hiring a Senior Move Manager.

- How long have you been providing senior move management services?
- Have you participated in any formal training?
- Are you fully insured for liability and workers' compensation?
- Do you charge by the hour or by project? (NASMM recommends fees should be provided in writing to the consumer or responsible party *prior* to providing services.)
- Will you provide a written contract?
- Can you provide references?
- Are you a member of the National Association of Senior Move Managers (NASMM)?
- Do you offer customized floor plans?
- Do you provide organizing, sorting and downsizing services?
- Do you arrange for the profitable disposal of unwanted items through auction, estate sale, buy-out, consignment, donation, or a combination?
- Do you interview, schedule and oversee movers?
- How is the billing arranged for the movers?
- *Do you pack or do you hire a moving company to perform the packing? (If the Senior Move Manager indicates they pack, make sure they have the appropriate insurance to cover any damages.)*
- Do you completely unpack and set up the new home? (These services include unpacking everything, hanging pictures, draperies, installing electronics, etc.)
- Will you handle the transfer of my utilities, mailing address etc?
- What additional services do you offer? Items to consider include:
  - house cleaning
  - waste removal
  - shopping
  - senior escort
  - assisting with selection of a realtor
  - helping prepare the home to be sold

Senior Move Managers® have extensive, practical knowledge about the costs, quality and availability of various local community resources. Additionally, Senior Move Managers® frequently assist individuals who choose to stay in their own homes, but simply require expert organizational skills and solid knowledge of "aging in place" concepts to help them achieve their goal of ... not moving anywhere, but improving quality of life!



# Ten tips to downsize and ‘de-stress’ your move!

## 10. Start Early – End Happy

It's never too early to begin the downsizing process. Begin by focusing on typical problem areas such as the attic, basement, garage, closets, file cabinets.

## 9. Get Generous

Since you can't take everything you own to your new home, now is the time to make arrangements to “gift” some of your treasures to special people in your life including, and especially family, helpful neighbors, friends, favorite organizations, or a church/synagogue.

## 8. Save Your Memories

You may have boxes of old photos from every holiday, vacation and birthday party attended. What do you do with them? Consider the following ways to preserve family photos and stories: a customized process of audio and video recordings called Life-Storying. Copy your special photos on to CDs, or try your hand at scrap-booking. Also services now exist that will take all your photos, slides, and videos and do it for you.

## 7. New Looks for Books

If you own large quantities of books, you need to spend time downsizing your collections. Books occupy lots of space and are heavy to move. Consider donations to libraries or senior centers, or sales to used bookstores. Call on a book dealer for older books with potential value.

## 6. Use It Up..Don't Move It Out

Take an inventory of your canned goods, frozen foods, and paper products. Plan to use as many of these products as you can before moving. If you simply have too many of these items, think about passing them on to a local food pantry. Check to see if the Senior Move Manager you hire participates in NASMM's Move For Hunger Initiative.

## 5. Recycle the Toxins

Take time to put together a box or two of household, yard, and automotive cleaning products, as well as paint, that are considered hazardous. Visit [Earth911.org](http://Earth911.org) for more information on hazardous collection in your area.

## 4. Don't Lose Touch

Create a list of people, places, and utilities/services that need to be notified of your upcoming change in address.

## 3. Space Plan Ahead

Most Senior Move Managers can provide you with a customized floor plan of your new residence. A floor plan will help you determine the pieces of furniture that will fit in your new home, and the best location of each. Knowing which pieces will fit in your new space will help you in your rightsizing process.

## 2. Pack a Survival Bag

Put together a survival bag for move day. It might include personal needs (medications, eyeglasses, toiletries, change of clothes, important papers, etc); kitchen needs (snacks, drinks, folding chair, disposable cups plates); basic tools (hammer, screwdriver, flashlight, tape, etc.); cleaning supplies (sponge, roll of paper towels, soap, etc.); and payment for mover – be sure you know which form of payment they accept.

## 1. Ask For Help

Don't be too proud or independent-minded to ask for help. Moving is not easy and you shouldn't do it all yourself. But don't wait until the last minute to ask for help. Some of these downsizing steps require months to accomplish. The best place to find help is through the National Association of Senior Move Managers ([www.nasmm.org](http://www.nasmm.org)).

# Understanding Senior Living

Gone are the days when “retirement housing” was just a nice way of saying “nursing home.” Today, many different senior living options exist, yet many older adults and their families are not aware of the choices. An overview of the alternatives reveals that retirement housing is as varied as the lifestyles and needs of residents.

## Continuing Care Retirement Community (CCRC)

A CCRC, also referred to as a life-care community, combines residential accommodations with health services. The purpose of a CCRC is to allow residents to receive the appropriate care across a continuum, from independent living to assisted living and skilled nursing care, as their needs change, without having to leave the retirement community. This model ensures residents will be cared for through end-of-life. CCRCs usually charge residents an entrance fee as well as a monthly payment. The entrance fee may include the cost of purchasing a unit, or it may be a one-time fee.

Paying for a CCRC is decided by the level of care that you require, and where you reside, from independent living to assisted living and skilled nursing care. In independent living, the only option is private payment. Assisted living is not covered by Medicare, Medigap, Managed Care and Medicaid, but is covered by certain long-term care policies (LTCI) and Veterans Benefits. Skilled nursing is covered by Medicare, Managed Care, Medigap, Medicaid, long-term care insurance (LTCI) and Veterans Benefits.

## Assisted Living

Assisted living is a general term used to describe residential facilities that provide care for individuals who cannot live independently, but do not require twenty-four hour skilled nursing care. These facilities typically serve individuals age sixty and older, although younger persons with similar needs may be served as well. Some facilities also offer Alzheimer's and/or dementia care.

Assisted living facilities provide room and board, some housekeeping, social activities, supervision and assistance with basic activities like personal hygiene, dressing, eating and walking. Facility staff either provides or arranges transportation for residents. Most facilities offer three meals per day, as well as snacks in between meals.

These communities are considered non-medical facilities and are not required to have nurses, certified nursing assistants or doctors on staff, although many facilities do have medical staff either onsite or on call. Medications can be stored and distributed for residents to self-administer.

Medicare, Medigap and Managed Care do not cover care in assisted living communities. In some states, Medicaid will pay for assisted living; however, very few facilities accept Medicaid as reimbursement. Long-term care insurance policies (LTCI) and Veterans Benefits sometimes can cover the cost of assisted living facilities. Most assisted living is private pay.



*continues*

## Understanding Senior Living CONTINUES

Some Assisted Living facilities stratify costs along three or four levels of care, with all costs of care included in the monthly fee. A higher level of care results in a higher monthly fee. Others have a basic monthly cost and costs for additional services are added on a fee-for-service basis. Some have a hybrid of the two systems, with stratified costs by level of care plus additional fees for certain services. In short, cost structures vary considerably and can be quite complicated.

Although the components of each level of care vary from facility to facility, some basic guidelines do exist. Many facilities use a point system to determine a resident's required level of care. No cost-of-care fee applies if the resident is considered independent and doesn't require any help. This can also apply to residents who only need verbal instructions to complete the activities of daily living (ADLs). Residents who do require care are assessed prior to moving into the facility. The components that typically determine the level of care a resident requires are: bathing, clothing, grooming, mobility, continence, caregivers, eating, medication, laundry and dementia.

### Nursing Homes

Nursing homes or convalescent homes are also known as skilled nursing facilities, or SNFs (pronounced "sniffs"). SNFs are live-in facilities that provide medical treatment prescribed by a physician. These nursing care facilities cater to several types of patients: some patients require short-term rehab while recovering from surgery; others require long-term nursing and medical supervision. In addition, some SNFs offer specialized care programs for Alzheimer's or other illnesses, or short-term respite care for frail or disabled persons when a family member requires a rest from providing care in the home.

SNFs provide 24-hour nursing care; rehabilitation services such as physical, speech and occupational therapy; assistance with personal care activities such as eating, walking, bathing and using the toilet; coordinated management of patient care; social services; and activities.

The primary ways to pay for skilled nursing facility care are Medicare, Medigap and Managed Care, Medicaid, Long-term care insurance policies (LTCI), Veterans Benefits or private payment. Most skilled nursing care at a facility is covered initially by Medicare. After Medicare coverage stops, your options are LTCI, Medicaid, private payment or a combination thereof.

#### Medicare covers:

- First 20 days in a Medicare-approved skilled nursing facility
- Days 21-100: Medicare pays for all covered services except for a daily coinsurance amount which adjusts annually; Visit [www.http://answers.hhs.gov/](http://answers.hhs.gov/) for current Medicare coinsurance rates.
- Doctors' visits
- Nursing care
- Semiprivate room rates
- All meals (including special diets)
- Physical, occupational and speech therapies
- Lab and X-ray services
- Prosthetic devices
- Prescription drugs
- Some medical supplies and equipment

## Conditions and Limitations:

- Strict limitations exist for Medicare coverage in skilled nursing facilities
- Beneficiary must be in the hospital for 3 consecutive days, not counting day of discharge
- Must be admitted to skilled nursing facility within 30 days of hospital discharge
- Services must be related to condition that was treated in hospital
- Must require daily skilled nursing or rehabilitation services
- Must be determined that services can only be provided on an inpatient basis
- Doctor must specify need for daily skilled care services
- Doctor must re-certify need at day 5 and day 14 after admission, and every 30 days thereafter
- Medicare must review and approve continued need for skilled care services
- Skilled nursing facility stay must be 100 days or less
- Medicare must approve the length of stay (100 days are not automatically granted)

## Home vs. Independent Living Community: Cost Comparison

In our current economy, many individuals are reluctant to move because of a perceived or real decrease in the value of their home. Most equate staying at home as “free.” However, numerous, “hidden” costs are associated with remaining at home, even with a fully paid mortgage. Below is a cost comparison of staying at home versus moving to an Independent Living Community.

The table below compares amenities you currently pay versus what you would (in most cases) find included in your rent at a community. Include any additional costs not listed that you may currently pay to gain a better understanding of where you stand, versus the cost of living in a community.

Amenities	Your Current Cost	Included (Community)
Meals		1-3 meals included (varies by community)
Housekeeping		Weekly or bi-weekly included
Home Maintenance		Included
Lawn Maintenance		Included (some communities have options for you to do your own gardening with cottage) style living)
Water		Included
Electricity		Included
Cable		Included
Gas		Included
Insurance		Included (you should purchase property insurance to cover your own personal property)
Trash Removal		Included
Entertainment		Included
Mortgage Payment/Rent		Cost of apartment/cottage
Real Estate Taxes		Included





# Understanding Senior Living CONTINUES

The chart below compares the levels of care by activities of daily living. Use this as a guide when determining what level of service you or your family member may need.

Level of Care Chart				
INDEPENDENT	ASSISTED LIVING/SUPPORTIVE LIVING			SKILLED NURSING
0	1	2	3	4
Independent	Minimum Assist	Stand-By Assist	Hands-On Assist	Total Assist
Independent in an emergency, able to negotiate stairs in an emergency.	Able to respond in an emergency.	May need assistance in an emergency.	Needs assistance in an emergency.	Needs supervision in an emergency.
Able to accomplish all ADLs without intervention from staff or family: <ul style="list-style-type: none"> <li>• bathe, dress, groom</li> <li>• transfer and ambulate</li> <li>• toilet</li> <li>• eat and take medications</li> <li>• communicate</li> </ul>	<ul style="list-style-type: none"> <li>• Walks/transfers independently; infrequent falls; independent to verbal reminders.</li> <li>• Independent with medications/doctors' appointments.</li> <li>• Continent bowel/bladder.</li> </ul>	<ul style="list-style-type: none"> <li>• Transfers/stands by assist may be needed.</li> <li>• ADLs - reminders to verbal cues.</li> <li>• Medication management helpful.</li> <li>• Occasional incontinence assistance.</li> <li>• Bathing set-up helpful.</li> </ul>	<ul style="list-style-type: none"> <li>• Transfer - one person assist usually needed.</li> <li>• ADLs - verbal cues to hands-on assist.</li> <li>• Medication management.</li> <li>• Incontinence management.</li> <li>• Bathing assistance needed.</li> </ul>	<ul style="list-style-type: none"> <li>• Transfers - mechanical lift/two-person transfer/bedfast.</li> <li>• ADLs - hands-on assistance.</li> <li>• Medication/behavior management.</li> <li>• Incontinence management.</li> <li>• Bathing assistance.</li> </ul>
Meals/housekeeping assistance is helpful.	Meals/nutrition/house-keeping assistance is helpful.	Meals/nutrition/house-keeping assistance is helpful.	Meals/nutrition/house-keeping assistance is needed.	Verbal cues/hands-on assistance to eat.
Would benefit from socialization and activities - minor encouragement.	Able to independently plan social activities.	Reminders/encourage to participate in activities.	Encourage/escort to participate in activities.	Encourage/escort to activities or one-on-one visits.
Limited room service.	Oriented to self - little memory impairment.	Mild memory impairment - sometimes disoriented.	Impaired memory - poor orientation - mild confusion.	Needs 24-hour nursing supervision or skilled services - PT, OT, ST
Does not medically "need" to move.	Family "slightly concerned."	Family "concerned."	Family "very concerned and has to do something."	Needs continuous assistance.



ADLs = Activities of Daily Living = ambulating (walking), bathing, continence, dressing, eating, transferring to or from a bed or wheel chair, and using toilet facilities.

# What Others Say About Senior Move Management

**The New York Times** Jay Goldstein and his wife, Carrie, accumulated 15,000

books in the 46 years they lived in the Glen Cove split ranch where they raised their four children. Its sixth bedroom became the second story of a library. Just cleaning out the attic was a major thing,” said Mr. Goldstein, who described himself as “lawyer by training, not a mover,” and was very busy taking care of his wife, who has a neurological disease. With three grown children residing out of state, Mr. Goldstein, 75, decided to hire Barbara Feldman, a “senior move manager.” Her mission: clear out the house, call in an antiques dealer to look at some of the books, and arrange for charitable donations. She also needed to have their new apartment completely set up by their move-in date.

~ *The New York Times, May 19, 2011*

**SmartMoney**  
THE WALL STREET JOURNAL MAGAZINE

If the term “senior move manager” is an unfamiliar one, you’re not alone; membership in the national association currently hovers around 600. But it’s a field you’ll likely hear a lot more about as our population ages rapidly and the average occupancy rate for senior housing inches back up. What do you get . . . ? In theory, a far less stressful late-life transition—not just a clipboard jockey who’s organizing the whole shebang (distributing to family, donating, selling, dumping, planning, packing, moving), but a compassionate facilitator steeped in the ethical and safety issues of dealing with this often-vulnerable population.

~*SmartMoney, May 12, 2011*

**TODAY'S CAREGIVER**  
CAREGIVER.COM

Senior Move Managers: As parents, grandparents and other loved ones age, their lifestyles must change as well, including the place they call home. A stressful time in anyone’s life is “moving day.” Many companies are popping up around the country, offering practical assistance to long-distance caregivers and compassion to the loved ones needing to change location. These services are not merely the typical brawny “moving guys,” but professional consultants who provide room-by-room guidance.

~*Today's Caregiver magazine, March/April 2011*

**Angie's list** After Anna-Louise Fitzgerald’s doctor diagnosed her with a heart condition, the active 68-year-old decided to put her affairs in order. That meant downsizing by selling her home in Fort Mill, S.C., and making plans to move to the Southminster Retirement Community in Charlotte, where she’ll have easy access to nurses and others her age. Making the decision to move was easy, Fitzgerald says. But deciding which pieces to keep and what items to toss or donate? That proved to be more difficult because of the large quantity of things she’s accumulated during her lifetime. On the advice of Southminster, Fitzgerald hired a senior move manager to help make those decisions and arrange the move details. “It’s the best money I ever spent at this age,” she says.

~ *Angie's List, April 13, 2011*

**The New York Times** . . . many families are finding senior move managers indispensable, and not just because they handle the logistics. Tensions can spill over when an elderly parent must relocate. Hundreds of necessary decisions and actions can swallow time the family may not have; the inevitable negotiations and concessions can trouble even the best parent-child relationships.

~ *The New York Times, December 30, 2010*



Senior Move Managers represent a knowledgeable, professional resource with whom Geriatric Care Managers can partner in working with elderly hoarders. They are well-equipped to handle the labor intensive, sometimes time-critical requirements of working with hoarders. Since they specialize in late life transitions where downsizing is the norm, Senior Move Managers have a variety of proven resources for disposal or donation of belongings.

~ *Journal of Geriatric Care Management, Fall 2010*





(A)

# Mom's Move To Do

(B)



Bill  
Beth  
Dan  
Kristin  
Steve  
me

Jung  
Sale  
when??

Moving  
is everyone  
available  
Rememba  
Mom's  
prescriptions

- Call AppleCrest Commons + get floorplan
- Design floorplan for apt. (need graph paper)
- Call/email sibs (everyone needs to give 3-4 weekends.)
- Make calendar on Google for next 6-8 wks.
- Sort through all rooms + closets: built-ins, bookcases, cabinets, linen closets
- Hummel collection - what do we do??
- Clean out basement (boxes in furnace room) \* slide carousels, holiday decorations, Snow Village, etc.
- Garage - what are we going to do w/ 2nd car?
- Shed - lawn mower, snowblower, hedge trimmer, dad's tools
- Junk removal (how much? when?)
- Schedule garage sale (can Beth do Friday?) \* contact newspaper \* tag everything \* have signs made
- Buy packing materials - research stores + online for least \$\$\$
- Arrange for disposal of old paint cans, etc.
- Pack!!! (Will need everyone for 4-5 days.)
- Call AppleCrest again - what do we need to know about moving in elevators, etc.???
- Get three estimates (from movers) also call references
- Contact charities for stuff we want to donate + about 100 other tasks!!

Call a Senior Move Manager  
[www.nasmm.org](http://www.nasmm.org)



NASMM members specialize in helping older adults and their families with the daunting process of downsizing and moving to a new residence.

Experienced professionals, NASMM members are bound by a pledge of integrity, committed to safety and ethics and dedicated to continuing professional development.

NASMM is the leading membership organization for Senior Move Managers and, as such, is the best place for you to find one.

NASMM members will move you expertly, compassionately and affordably.

It's so much more than moving. Let us help.

[www.nasmm.org](http://www.nasmm.org)  
877.606.2766

Wikes  
High!



**Because it's so much more than moving.**