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Acknowledgements

This edition of the *South Carolina Senior Citizens’ Handbook* would not have been possible without the help and hard work of the members of the S.C. Bar Elder Law Committee and grant funding from the Administration on Aging made available through the Lieutenant Governor’s Office on Aging.
Preface

The South Carolina Senior Citizens’ Handbook is intended to address in a cursory manner some of the many complicated issues that confront South Carolina’s senior citizens.

While some of the information contained herein is similar to information in the 2006 edition, many sections have been substantially revised due to changes in various laws and regulations, and new sections have been added.

Though the new information is based on current legislation and industry standards, readers should always consult with the appropriate professional(s) before making decisions regarding the various legal, financial and other issues addressed herein. Contributing authors have covered a wide variety of issues concerning the elderly. However, the handbook does not take the place of advice and counsel from a competent attorney where a legal problem or issue exists.

This edition represents the hard work of many individuals, from a wide variety of backgrounds, all of whom contributed to revising and updating this edition.

We hope the 2012 edition of the handbook will prove to be a useful educational tool for South Carolina’s seniors and those who care for them. Corrections and suggestions for additional topics to be included in future editions are welcome.

Printing funded through a grant from the Administration on Aging.

To the People of South Carolina:

It is our great pleasure to provide you with this updated version of the South Carolina Senior Citizens Handbook: A Guide to Laws and Programs Affecting Senior Citizens. This guide is an extensive resource for our seniors, our vulnerable adults, and their friends, families, and caregivers.

We have been able to produce this at no cost to our state through a grant from the Administration on Aging. This project was accomplished through an ongoing partnership with the South Carolina Bar and with the generous contribution of time and knowledge from attorneys and legal practitioners throughout our state. We are deeply grateful to all of the contributors and to the legal community for all of their effort and hard work that has produced this much needed resource for the seniors of our state.

We envision South Carolina as a state where seniors enjoy an enhanced quality of life, contribute to their communities, have economic security, and receive those supports necessary to age with choice and dignity. This guide is one small step toward fulfilling the mission of the Lieutenant Governor’s Office on Aging. Through partnerships such as the one that produced this guide, we will continue to advocate, plan, and develop resources that will meet the present and future aspirations of the growing senior population.

Together, through our mutual efforts, we will continue to enhance the quality of life for seniors in South Carolina.

Sincerely,

Glenn F. McConnell
Lieutenant Governor

State of South Carolina
Office of The Lieutenant Governor
Post Office Box 142
Columbia, South Carolina 29202

Glenn F. McConnell
Lieutenant Governor

Telephone (803) 734-2080 • Fax (803) 734-2082
To the People of South Carolina:

The South Carolina Bar has a rich history of providing public education to the citizens of South Carolina to improve their understanding of the law. We continue that tradition with the publication of the 2012 edition of the South Carolina Senior Citizens Handbook: A Guide to Law and Programs Affecting Senior Citizens.

It is our pleasure to collaborate with the Lt. Governor’s Office on Aging to produce this handbook. It is our hope that it will provide valuable information to our seniors, their families, caregivers and friends.

This handbook would not have been possible without the efforts and expertise of the members of the S.C. Bar Elder Law Committee, S.C. Bar staff, and the staff of the Lt. Governor’s Office on Aging. It is through the efforts of dedicated professionals such as these that we are able to provide opportunities for our citizens to increase their knowledge of the law and their rights as citizens.

The South Carolina Bar welcomes the opportunity to serve the citizens of South Carolina, and we look forward to providing other opportunities to advance justice and the understanding of the law.

Sincerely,

Angus H. Macaulay
President

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Elder Law

An Elder Law attorney is an important resource for seniors seeking advice and counsel on matters contained in this handbook. If you have never heard of elder law, you are not alone. While the year 2012 marks the 25th anniversary of “Elder Law” as a recognized area of practice, it is still a relatively new and developing area of the law. Elder Law is very different from other areas of the law because it is defined not by specific legal issues but by the needs of the older client. As our population is aging, it became more and more apparent that there was a growing need for a holistic approach to addressing the concerns of the older client. Elder Law is an attempt to fill that need.

Elder Law attorneys are educated to address not just the immediate need of the client, but also to consider and discuss with the client how a decision on one issue may affect other areas of concern in the future. For example, a simple request to prepare a deed of your home to your child may lead to a discussion of the perceived reason for the transfer, as well as the intended and unintended consequences of such a transfer. These consequences are far ranging and include: potential ineligibility for Medicaid; the requirement of filing a gift tax return; the possible increase in your property taxes; capital gains taxes when the property is sold; the risk that the home may be lost if your child dies, divorces or is the defendant in a lawsuit. Once you have been made aware of the potential consequences, you are then in a better position to take the action that best accomplishes your goals.

The National Elder Law Foundation is the certifying organization for elder law. It defines “Elder Law” as the legal practice of counseling and representing older persons and their representatives about the legal aspects of health and long term care planning, public benefits, surrogate decision-making, older persons’ legal capacity, the conservation, disposition and administration of older persons’ estates and the implementation of their decisions concerning such matters, giving due consideration to the applicable tax consequences of the action, or the need for more sophisticated tax expertise.

The National Academy of Elder Law Attorneys lists 13 areas encompassing elder law:
- Estate planning and probate
- Estate and gift tax planning
- Guardianship/conservatorship
- Medicaid
- Medicare
- Entitlement programs
- Retirement benefits
- Age discrimination
- Elder abuse/neglect
- Housing
- Long term care financing
- Medical decision making
- Disability planning
- Insurance

Aside from the official definitions and descriptions, the practice of elder law is a state of mind: an approach to helping clients who have concerns about being able to live as high a quality of life as possible, to provide for their loved ones, and then to die with dignity.

You can locate attorneys who concentrate in this area of law through the South Carolina Bar at www.scbar.org and through the National Academy of Elder Law Attorneys at www.naela.org.
A. MEDICARE

Medicare is a federal health insurance program for:
- people age 65 or older,
- people under age 65 with certain disabilities, and
- people of all ages with End Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant).

Medicare has three parts, Part A Hospital Insurance, Part B Physician coverage and Part D prescription drug coverage:

Part A Hospital Insurance
Medicare Part A (Hospital Insurance) covers:
- Inpatient care in hospitals
- Inpatient care in a skilled nursing facility (not custodial or long-term care)
- Hospice care services
- Home Health Care services
- Inpatient care in a Religious Nonmedical Health Care Institution

Part B Medical Insurance
Medicare Part B (Medical Insurance) covers medically necessary services such as:
- Doctor’s services
- Home health care services
- Durable medical equipment
- Other medical services
- Many preventive services

Medicare Advantage Plans (Part C)
A Medicare Advantage Plan (like an HMO or PPO) is another Medicare health plan choice you may have as part of Medicare. Sometimes they are called Part C or MA plans. They are offered by private companies approved by Medicare. If you join a Medicare Advantage Plan you still have Medicare. You will get your Part A (hospital insurance) and Part B (medical insurance) coverage from your Medicare Advantage Plan and not from original Medicare. In all parts of Part C plans, you are always covered for emergency and urgent care. Medicare Advantage Plans must cover all the services Medicare provides except hospice. Original Medicare covers hospice care even if you are in a Medicare Advantage Plan. Medicare Advantage Plans are not supplemental coverage.

Medicare Advantage Plans must cover all the services Medicare provides except hospice. Medicare Advantage Plans are not supplemental coverage.

Medicare Advantage Plans are offered by private companies approved by Medicare. You can choose a Medicare Advantage Plan if you are enrolled in Medicare Part A and Part B. Medicare Advantage Plans are also known as Part C plans.

Medicare has three parts, Part A Hospital Insurance, Part B Physician coverage and Part D prescription drug coverage:

Part A Hospital Insurance
Medicare Part A (Hospital Insurance) covers:
- Inpatient care in hospitals
- Inpatient care in a skilled nursing facility (not custodial or long-term care)
- Hospice care services
- Home Health Care services
- Inpatient care in a Religious Nonmedical Health Care Institution

Part B Medical Insurance
Medicare Part B (Medical Insurance) covers medically necessary services such as:
- Doctor’s services
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- Durable medical equipment
- Other medical services
- Many preventive services

Medicare Advantage Plans (Part C)
A Medicare Advantage Plan (like an HMO or PPO) is another Medicare health plan choice you may have as part of Medicare. Sometimes they are called Part C or MA plans. They are offered by private companies approved by Medicare. If you join a Medicare Advantage Plan you still have Medicare. You will get your Part A (hospital insurance) and Part B (medical insurance) coverage from your Medicare Advantage Plan and not from original Medicare. In all parts of Part C plans, you are always covered for emergency and urgent care. Medicare Advantage Plans must cover all the services Medicare provides except hospice. Original Medicare covers hospice care even if you are in a Medicare Advantage Plan. Medicare Advantage Plans are not supplemental coverage.

Medicare Part D Prescription Drug Coverage
Original Medicare offers prescription drug coverage to everyone with Medicare. There are two ways to get Medicare Prescription Drug coverage (Part D):
- Medicare Prescription Drug plans (sometimes called “PDPs”) add drug coverage to original Medicare, some Medicare Cost Plans, some Medicare Private Fee-for-services (PFFS) plans, and Medicare Medical Savings (MSA) savings accounts.
- Medicare Advantage Plans or other Medicare health plans that offer Part D.

You must live in the service area of the Medicare drug plan you want to join. You may contact www.medicare.gov/find-a-plan to find a plan in your area. You should read the national Medicare Handbook section on Part D. You may request a copy by calling 1-800-633-4227 (TTY 1-877-486-2084) or read and order a copy from www.medicare.gov. YOU SHOULD ALWAYS CONTACT 1-800-MEDICARE to find out the most up-to-date information on all Medicare plans including premium and deductible amounts since they change from year to year. Open enrollment dates may also change. For Medicare Parts C and D you should also contact the South Carolina State Health Insurance Assistance Program (SHIP). SC Ship provides help with questions about appeals, buying other insurance, choosing a health plan, buying a Medigap policy, and Medicare rights and protections. For the most recent phone number information, you may check the website at www.medicare.gov/contacts/home.asp.

Extra Help With the Costs of Medicare Part D:
Social Security
You may qualify for help to pay some of your expenses if you have Medicare. These requirements change frequently. For more information contact Social Security at 1-800-772-1213 or visit their website at www.ssa.gov.

Supplemental Security Income Benefits (SSI)
What is this program?
Supplemental Security Income (SSI) is a monthly benefit paid by the Social Security Administration to people with limited income and resources who are disabled, blind, or age 65 or older. SSI benefits provide cash to meet basic needs for food, clothing, and shelter. SSI benefits aren’t the same as Social Security benefits. You can make an appointment to apply for SSI benefits on the telephone or in person at your local Social Security office.
How do I qualify for this program?

To qualify for SSI, you must have limited income and resources, and be disabled, blind, or age 65 or older. You also must be a resident of the United States, not be absent from the country for more than 30 days, and be either a U.S. citizen or national, or in one of certain categories of eligible non-citizens.

What do I do next?

For more information, call Social Security at 1-800-772-1213, or contact your local Social Security office. TTY users should call 1-800-325-0778. You can also visit www.ssa.gov/ssi and use the Benefits Eligibility Screening Tool (BEST) to find out if you are eligible for SSI or other benefits to help you decide whether to apply.

B. MEDICAID

Medicaid is a program designed to pay for health care for persons who have low income and limited assets. This program, also referred to as the Medical Assistance Program, or Title XIX (of the Social Security Act), is financed jointly by the federal government and the State of South Carolina. Because Medicaid uses state as well as federal funds, and is administered by the state, rules and regulations vary from state to state. In South Carolina, since June 2, 2002, the Medicaid Program has been administered solely by the Department of Health and Human Services. There are numerous program manuals and policy issuances and the rules change from time to time.

A person can have both Medicaid and Medicare. If you have both, Medicare will probably pay the monthly Medicare premium, the coinsurance and deductibles and cover Medicare services, which are not covered by Medicaid.

The discussion below covers only the major aspects of the Medicaid programs that benefit seniors. More information can be obtained at your local county Department of Health and Human Services or at www.scdhhs.gov.

Programs

Please note that income and resource limits listed for eligibility for a specific program can change from year to year. If you need one of these types of assistance, check for current limits with your local Department of Health and Human Services office.

SSI—SSI stands for Supplemental Security Income. It is a program administered through Social Security for seniors and disabled persons whose incomes and countable resources are below a certain limit. If a person receives an SSI check, that person is automatically enrolled in Medicaid. The coverage includes medical treatment, hospitalizations and medications. The income limit is $698 for 2011 and the resource limit is $2,000.

ABD—This is a state program to provide coverage for medical treatment, hospitalizations and medications for people who are aged, blind or disabled and have an income of less than $903 for an individual or $1,226 for a couple. There is a resource limit of $6,680 for an individual or $10,020 for a couple.

SLMB—The specified low income beneficiary category allows a person with income up to $1089, or a couple with income up to $1,471.00, to receive assistance to cover the Medicare Part B premium, if the person has Medicare Part A. There is a resource limit of $6,680 for an individual and $10,020 for a couple.

QI—The qualifying individual category allows a person with income up to $1226, or a couple with income up to $1,655 to receive assistance to cover the Medicare Part B premium. There is a resource limit of $6,680 for an individual and $10,020 for a couple.

OSS—The program helps cover the cost of assisted living or boarding home care for an individual whose income is less than $1,157 and whose resources are below $2,000.

Hospital, Nursing Home—Medicaid helps cover hospital and nursing home care for those who meet level of care criteria and who have incomes below $2,022 per month and countable resources below $2,000.

HBCS—the Home and Community Based Services waiver covers in-home assistance for people who meet nursing home level of care criteria but prefer to stay at home. There is an income cap of $2,022* per month and countable resources must be below $2,000.

*If the person's income exceeds $2,022 per month, it is still possible to obtain Medicaid assistance by placing the excess income into an income trust. Your local Department of Health and Human Services can provide you with a sample trust or you can contact an attorney to assist with the creation of the trust.

Countable resources

Whenever there is a resource limit, this refers to countable resources. Some assets are excluded from consideration.

1. The residence (up to an equity value of $506,000) is an exempt resource so long as the applicant has an intent to return - the exemption includes all land contiguous to the residence. If there is a spouse, a child under age twenty-one, or a disabled child living in the home, there is no limit on the value of the home. Although excluded from consideration for eligibility purposes, there may be estate recovery against the home if it is titled in the name of the Medicaid recipient at death.

2. Personal property and household goods (held for personal use and not for investment purposes) are exempt regardless of value.

3. Up to $1,500.00 cash value of life insurance or a burial fund of $1,500.00 may be exempted. You may also have term insurance with no cash value.

4. One car is exempt, and

5. Irrevocable pre-need burial plans are exempt.

These are exemptions from consideration in the qualification process. Federal law has mandated that each state implement a recovery program to collect amounts paid out by Medicaid from the estate of deceased recipients. If the asset is included in the decedent's probate estate, it will be subject to a Medicaid claim.

Spousal Impoverishment

In October of 1988, the Medicare Catastrophic Coverage Act was enacted by Congress. This Act provides some protection for spouses of those who need institutional level of care under the Hospital, Nursing Home program or the HBCS program. The spouse's income does not affect eligibility, but if the spouse's income is below the minimum monthly maintenance needs allowance, a portion of the applicant's income can be diverted to the spouse. The spouse is also allowed to retain additional assets.

Information concerning spousal impoverishment may be found at www.scdhhs.gov.
Transfer of Assets

The Medicare Catastrophic Coverage Act (MCCA), Public Law 96-611 and the Deficit Reduction Act of 2005 (DRA), Public Law 109-171, revised the transfer of assets provisions found in §1917 of the Social Security Act. Individuals who apply for Hospital, Nursing Home or HCBS programs may be penalized for the transfer of a resource for less than fair market value.

All transfers within the five year period immediately preceding the application (the look-back period) must be reported. If the individual or their spouse disposed of assets for less than fair market value during this period, there may be a transfer penalty imposed. The transfer penalty is a period of time during which the individual is not eligible for assistance in paying for long term care. The transfer penalty does not start until the individual is in a nursing home, has applied for Medicaid, and meets all other eligibility requirements. The penalty period is approximately equivalent to the length of time the individual could have paid for care with the assets that were given away.

The transfer penalty does not apply in the following situations:

- No penalty is imposed for the transfer of a home to spouse, child under age 21 or a blind or disabled child, sibling with equity interest who lived in the home at least one year before the individual’s admission to the institution, or child who lived in the parent(s)’ home for at least two years before the parent was admitted to the institution and who provided care for the parent which delayed institutionalization.
- No penalty is imposed if the resources were transferred to a community spouse, minor, blind disabled child, or another for the sole benefit of community spouse.
- If the individual can show that he intended to dispose of resources at fair market value.
- If the individual can show that the resources were transferred for some reason other than to qualify for Medicaid.
- No penalty is imposed, if the imposition of the penalty would work an undue hardship.

The Medicaid Card

Once an individual is eligible for Medicaid, he or she will receive a Medicaid card, which entitles the individual to coverage. When the person goes to the doctor, or gets a prescription filled, he or she will be asked to show the Medicaid card. The health care provider files a claim with Medicaid. The individual cannot file the claim.

In some cases there is a co-payment required for the services received.

Not all doctors and health care providers accept Medicaid. It is important to find out before services are received if the provider has agreed to accept Medicaid payments as full payment, and the provider cannot charge the beneficiary the difference between what Medicaid pays and what he or she charges.

Not all medical services are covered under Medicaid, and the individual will be responsible for paying for those services not covered.

Covered Services

Medicaid will pay for health care services that are covered and that are medically necessary. Some services are limited to a certain number per fiscal year (July 1st through June 30th). These services are subject to change and may be limited by who can receive them. The types of procedures that are covered, and the number of times they can be received and paid for by Medicaid may be found at www.scdhhs.gov.

How to Apply

The aged, blind, or disabled, who may be eligible for Supplemental Security Income (SSI), should apply at the local Social Security Office. If they are eligible to receive SSI, they will automatically receive Medicaid. They will not need to make a separate application for Medicaid, unless they also need nursing home or HCBS Medicaid.

Other categories of eligibility may be determined by contacting the local Medicaid eligibility office. Additional information may be obtained on the Web at www.scdhhs.gov.

Rights

Medicaid cannot discriminate on the basis of race, color, national origin, or disability. If an individual is turned down for eligibility, he or she has the right to appeal, and can request a fair hearing. This request must be made within 30 days of receiving notice of having been turned down. For More Information go to www.scdhhs.gov.

C. LONG TERM CARE

Long-term care is a variety of services that includes medical and non-medical care to people who have a chronic illness or disability. Long-term care is also needed when a person requires someone else to help them with a physical or emotional need (i.e. as house cleaning preparing meals, companionship or support for loved ones) over an extended period of time. Most long-term care is to assist people with support services as activities of daily living: bathing, dressing, toileting, walking, transferring and eating. The need for long-term care may only last for a few weeks or months or it may go on for years. Long-term care may be provided at home, in the community, in an assisted living facility or in a nursing home. Most people prefer to stay at home and most of the time family and friends becomes the caregiver. The deciding factors of where you receive care are the intensity and amount of services needed for support, and the payment sources available for such care.

Custodial care (non-skilled care) and skilled care are terms used by the medical community, health care plans, health insurance plans, Medicare, Medicaid and the Veterans Administration. These terms are used to differentiate care provided by medical providers as opposed to care provided by aides, volunteers, family or friends. Generally only skilled services are paid for by a health care plan.

Skilled care is the provision of services and supplies that can be given only by or under the supervision of skilled or licensed medical personnel. Skilled services must be done under a written plan of care which often also includes custodial care services.
Custodial care is the provision of services and suppliers that can be given safely and reasonably by individuals who are neither skilled nor licensed medical personnel, such as those provided by most in home caretakers or at Adult Day Care facilities.

Types of Residential Facilities

Community Residential Care Facilities/Assisted Living Facilities provide room and board and limited personal assistance. The core services provided include, but are not limited to:
- Three meals a day
- Snacks at no additional charge
- Housekeeping services
- Assistance with eating, bathing, dressing, toileting and walking
- Medication assistance
- 24 hours, seven days a week staffing
- Transportation to medical appointments.

Residents of these facilities are not eligible for reimbursement from Medicare or Medicaid, but eligible residents may qualify for the Optional State Supplement Program which can pay a supplement to a Community Residential Care facility for individuals 65 and over, blind or disabled. This program is administered by the Department of Health and Human Services. The requirements to qualify for OSS have stringent limitations on assets and income available to the recipient. Community Residential Care Facilities (CRCFs) are licensed and monitored for compliance by the SC Department of Health and Environmental Control, Division of Health Licensing.

Nursing Homes are facilities with organized nursing staff that maintain and operate organized facility services to accommodate two or more unrelated persons over a period exceeding twenty-four hours. A nursing home may be operated in connection with a hospital or as a freestanding facility for the express or implied purpose of providing nursing care for persons who are not in need of hospital care. Nursing homes provide a wide range of personal and health services. A resident’s plan of care will differ based on his or her needs. Some residents will return home after a short rehabilitative stay following a hospitalization and others may require care for an extended period.

Nursing home facilities are licensed by the State and monitored for compliance with federal regulations by the SC Department of Health and Environmental Control, Division of Health Licensing. You will find information from state surveys of nursing homes in your area at Nursing Home compare on the Medicare website (www.medicare.gov/NHCompare). This helpful site is easy to navigate and gives star ratings for facilities based on the evaluation criteria. It also provides information on whether the facility participates in Medicaid and provides information from surveys conducted by the state.

Alzheimers Services or Memory Care facilities offer special care treatment and/or special care units for dementia residents. Both Community Residential Care facilities and Nursing Homes may provide special care for Alzheimers patients. The facility must disclose the information that distinguishes the form of care or treatment for Alzheimers residents.

Continuing Care Retirement Communities (CCRC) are housing developments that are planned, designed, and operated to provide a full range of accommodations and services for older adults, including independent living, congregate housing, and medical care. Residents may move from one level to another as their needs change. Financial arrangements usually include a substantial entrance fee plus monthly charges. A contract is required for entry. The terms of the contract vary among CCRCs and it is important to understand what the terms of the contract are. For example, does the CCRC have the right to require the resident to transfer to a higher level of care? Under what circumstances?

Lists of licensed long term care facilities in South Carolina by type of facility may be found on the Department of Health and Environmental Control (DHEC) website at: www.scdhec.gov/health/licen/hrtypfac.htm

On this page you will find links to lists of Community Residential Care Facilities (CRCFs), Day Care Facilities for Adults, Nursing Homes and Home Health Agencies. On the left column of the page you will find a link to a list of “Facilities Providing Alzheimers Assistance” which includes both nursing homes and CRCFs.

Choosing the Right Facility

Choosing a nursing home for long term care is a decision requiring much care and thought. The nursing home you choose could have a profound impact on your or your loved one’s quality of life and sense of dignity. First, determine what you can afford and whether your loved one qualifies for any public assistance programs such as those from Veterans Administration or Medicaid to help with the cost. If Medicaid is a potential payor, you will need to determine whether a facility accepts Medicaid and upon what conditions. (See Financing Long Term Care).

Visit several homes at different times of day and take a checklist with you. The bathrooms, lounges and offices should be clean and odor free. Observe whether the atmosphere is warm and comfortable. Is there a homelike atmosphere? Are the drinking fountains, televisions and radios functioning properly? Are residents in bed or up participating in activities? Is the menu posted? Is the meal being served the same as the meal posted? Are the residents eating or receiving assistance with meals?

The staff of the home should have a positive and encouraging attitude toward the residents. Notice if residents are treated with dignity and respect. First, determine what you can afford and whether your loved one qualifies for any public assistance programs such as those from Veterans Administration or Medicaid to help with the cost. If Medicaid is a potential payor, you will need to determine whether a facility accepts Medicaid and upon what conditions. (See Financing Long Term Care).

Visit several homes at different times of day and take a checklist with you. The bathrooms, lounges and offices should be clean and odor free. Observe whether the atmosphere is warm and comfortable. Is there a homelike atmosphere? Are the drinking fountains, televisions and radios functioning properly? Are residents in bed or up participating in activities? Is the menu posted? Is the meal being served the same as the meal posted? Are the residents eating or receiving assistance with meals?

The staff of the home should have a positive and encouraging attitude toward the residents. Notice if residents are treated with dignity and respect. Observe the residents, their actions and how they are dressed. Talk with some of the residents to see if they are satisfied with the care they receive.

Nursing Home Checklist

It is important for you and your family members to visit the nursing home to make sure that it meets your needs, as well as those of your family. A few things to consider when choosing a nursing home are listed here.

- Is the nursing home accepting new residents?  Yes_____ No_____
- Is the nursing home easy to visit for family and friends? Yes_____ No_____
- Does the nursing home use hospitals where my doctor practices? Yes_____ No_____
- Does the nursing home have the services I need? Yes_____ No_____
- Does the nursing home have a variety of activities I might enjoy? Yes_____ No_____
- Do residents appear clean and well groomed? Yes_____ No_____
- Do the residents have the same staff on a daily basis? Yes_____ No_____
- Does the staff respond quickly to residents’ calls for help? Yes_____ No_____
Does the nursing home have an active resident and/or family council? Yes______ No______

Is the nursing home clean and pleasant? Yes______ No______

Is the nursing home certified by Medicare and Medicaid? Yes______ No______

Are the nursing home and current administrator licensed? Yes______ No______

How much is the cost of care in this nursing home? ______________________

- What services are included in this price? ______________________
- What additional costs will I have to pay? ______________________

Also, ask to see the nursing home’s last annual state inspection report (survey). Did the report find any problems? Ask how the problems were fixed.

Resident’s Rights

Residents’ Rights are guaranteed by the federal 1987 Nursing Home Reform Law and the S.C. Code Ann. § 44-81-20. These laws require that long-term care facilities “promote and protect the rights of each resident” and place a strong emphasis on individual dignity and self-determination. A person living in a long-term care facility maintains the same rights as an individual living in the community.

All facilities are required to provide services and activities to attain or maintain the highest practicable physical, mental and psychosocial well-being of each resident in accordance with a written plan of care. The family should monitor and provide input into the plan of care for the resident. Particularly important is the question of monitoring medications prescribed for the patient. The resident may be prescribed medication that constitutes “chemical restraints” in order to make the resident more docile and easier to manage. The facility must give each resident or resident’s representative a written and oral explanation of the rights, grievance procedures, and enforcement provisions before or at the time of admission. An understanding of these rights by either the resident or a family member can help protect a resident from inappropriate treatment or a wrongful discharge.

A Residents’ Rights Poster must be posted in prominent locations in all facilities. As a resident of a long-term care facility you have the following rights:

The Right to Be Fully Informed of

Available services and the charges for each service; Facility rules and regulations, including a written copy of resident rights; Address and telephone number of the State Ombudsman and state survey agency; State survey reports and the nursing home’s plan of correction; Advance plans of a change in rooms or roommates Assistance if a sensory impairment exists Residents have a right to receive information in a language they understand (Spanish, Braille, etc.).

Right to Complain

Present grievances to staff or any other person, without fear of reprisal and with prompt efforts by the facility to resolve those grievances; To complain to the ombudsman program; To file a complaint with the state survey and certification agency.

Right to Participate in One’s Own Care:

Receive adequate and appropriate care; Be informed of all changes in medical condition; Participate in their own assessment, care planning, treatment, and discharge; Refuse medication and treatment; Refuse chemical and physical restraints; Review one’s medical record; Be free from charge for services covered by Medicaid or Medicare.

Right to Privacy and Confidentiality

Private and unrestricted communication with any person of their choice; During treatment and care of one’s personal needs; Regarding medical, personal, or financial affairs.

Rights During Transfers and Discharges

Remain in the nursing facility unless a transfer or discharge:

- (a) is necessary to meet the resident’s welfare;
- (b) is appropriate because the resident’s health has improved and s/he no longer requires nursing home care;
- (c) is needed to protect the health and safety of other residents or staff;
- (d) is required because the resident has failed, after reasonable notice, to pay the facility charge for an item or service provided at the resident’s request.

Receive thirty-day notice of transfer or discharge which includes the reason, effective date, location to which the resident is transferred or discharged, the right to appeal, and the name, address, and telephone number of the state long-term care ombudsman.

Safe transfer or discharge through sufficient preparation by the nursing home.

Right to Dignity, Respect, and Freedom

To be treated with consideration, respect, and dignity; To be free from mental and physical abuse, corporal punishment, involuntary seclusion, and physical and chemical restraints; To self-determination; Security of possessions.

Right to Visits

By a resident’s personal physician and representatives from the state survey agency and ombudsman programs; By relatives, friends, and others of the residents’ choosing; By organizations or individuals providing health, social, legal, or other services. Residents have the right to refuse visitors.

Right to Make Independent Choices

Make personal decisions, such as what to wear and how to spend free time; Reasonable accommodation of one’s needs and preferences; Choose a physician; Participate in community activities, both inside and outside the nursing home; Organize and participate in a Resident Council; Manage one’s own financial affairs.
Advocates for Residents Rights
Where do you go for help if you’re concerned a facility is not honoring the rights of residents? Contact your regional or state long-term care Ombudsman. (Please refer to the Resource Directory at the end of this handbook for contact information.) The Long-Term Care Ombudsman Program is required by federal law to promote and protect the rights of residents in licensed long-term care facilities.

Alternatives to Residential Facility Care
Many families are not aware of services that may allow loved ones to stay at home. To learn more about resources available in your area contact the Lieutenant Governor’s Office on Aging and the local Area Agency on Aging. There are no public or private programs that will cover around the clock in-home care. The family may be able to keep a person at home by combining care provided by family members with community programs such as home delivered meals, home health services, homemaker services, adult day care programs and respite care. A plan of home based care should be reviewed by a health professional, discharge planner or geriatric care manager who is able to evaluate the adequacy of the care in light of the recipient’s needs.

Financing Nursing Home Care
Medicare generally doesn’t pay for long-term care. Medicare will help pay for skilled nursing or home health care for a short period of time but only if you meet certain conditions. (See the Medicare Section for more information.) You should not rely on Medicare to pay for your long term care needs. The cost of nursing home level of care, whether in a facility or at home, is substantial. According the Genworth 2012 Cost of Care Survey, the median cost of a nursing home semiprivate room in SC is $65,700 annually. The median cost for an Assisted Living Facility is $34,500.

Medicare Supplement Insurance is a private insurance that helps pay for some of the gaps in Medicare coverage, such as hospital deductibles and excess physicians’ charges above what Medicare approves. Medicare supplement policies do not cover long-term care cost. However Medicare supplement policies –Plans D, G, I and J will pay up to $1,600.00 per year for services to people recovering at home from an illness, injury or surgery.

The SC Medicaid Program sponsors payment of long term care for people who reside in licensed and certified nursing facilities. The Medicaid Program also pays for special long term care services for those people who participate in the home and community based program called Community Long Term Care (CLTC). CLTC offers a variety of programs for people who need nursing home care, but choose to stay at home. CLTC slots are limited and there is a waiting list. Contact the Community Long Term Care office in your area for more information.

In order to qualify for either the nursing home or community Medicaid Long Term Care (LTC) program, Medicaid LTC eligibility requirements must be met. There are two categories of eligibility requirements. The first is the non-financial category and the second category is financial. Generally a person must be a citizen of the US, a resident of South Carolina, age 65 or older, blind or totally and permanently disabled in order to qualify for Medicaid. For those under 65, disability is determined by using Supplemental Security Income (SSI) guidelines. You must be screened and certified by the state Community Long Term Care (CLTC) Program to determine the level of care you need, and your level of care must meet the criteria for Medicaid assistance.

There are two financial requirements that must be met in order to qualify for Medicaid- the income test and the asset test. The applicant may not receive more than $2,094 in income each month (for 2012), although the nursing home resident applicant may set up an “Income Trust” into which he/she can transfer some types of his/her income in order to meet the income test. In addition, the applicant may not own more than $2,000 in “countable assets” and if there is a spouse at home or in assisted living, he or she may not have more than $66,480 in countable assets. What is considered as “income” and “countable assets” are determined by federal and state regulations. There may be a delay or denial of benefits if the applicant has transferred assets or made “gifts” to anyone other than to a spouse or disabled child in the past five years. Medicaid eligibility rules are quite complicated and are not coordinated with other laws such as those for tax, VA benefits and Social Security matters. The investigation and eligibility determination for LTC Medicaid is made by a caseworker at the local DHHS office. Before making an application, or even after you have been told that you don’t qualify for benefits, you may want to consult with a lawyer who is knowledgeable about long term care issues and Medicaid and VA benefits. There may be federal or state tax or Veterans Benefits issues which should be considered before attempting to obtain Medicaid eligibility. Elder Law practitioners are often familiar with rules of the various public benefit programs and how they interact, as well as methods of attaining eligibility.

Long Term Care Insurance can help pay for many types of long-term care, including both skilled and non-skilled care. Medicare and Medicare Supplement Insurance does not pay a significant portion of nursing home expenses, therefore, it may be necessary to determine if long term care insurance is an appropriate method of financing long term care services. People with low incomes and few assets who have not made gifts of assets in the past five years will not need long term care insurance because of the entitlement programs discussed above that pay for Long Term care.

Long-term care insurance coverage can vary widely. Some policies may cover only nursing home care. Others may include coverage for a whole range of services such as care in an adult day care center, assisted living, medical equipment, and formal and informal home care. Some cover payments for care provided by family members. In choosing long term care insurance, there are a large number of options. Medical requirements and the waiting period needed to trigger payment of benefits, covered services, ability to pay family providers, daily and lifetime limits, escalators of benefit amounts each year, joint policies for husband and wife, consequences of letting the policy lapse and convertibility of unused benefits to life insurance are just a few examples of features and options.

Long-term care insurance premiums vary, depending on your age and health status when you buy the long-term care insurance policy and the coverage you choose. Premiums may be increased so long as the increase applies to the class of insureds rather than only to selected individuals.

Additionally, you must be in generally good health to pass underwriting when purchasing a policy. Different companies have different underwriting requirements so it pays to compare if you have medical issues. It may be better to buy long-term care insurance at a younger age when premiums are lower, especially if there is a concern about insurability later on. Periodic review is advised to make sure your policy covers your current and future long-term care needs. You may want to discuss the various alternatives with a financial advisor or an insurance agent who specializes in long term care to learn what is best for you.

You should not buy Long-Term Care Insurance if:

You can’t afford the premiums
You have modest assets

-You have modest assets
Your only source of income is a Social Security benefit or Supplemental Security Income (SSI). You often have trouble paying for utilities, food, medicine or other important needs. You are on Medicaid.

The cost of care, especially in nursing homes and assisted living facilities, varies from state to state. Make sure that the long-term care insurance policy you buy will cover the cost of care where you plan to use it. For example, the median cost of nursing home care in Connecticut is more than twice that for South Carolina.

Before buying a long-term care insurance policy, you may want to review a copy of “A Shopper’s Guide to Long Term Care Insurance” from the South Carolina Department of Insurance.

D. INSURANCE

Health Insurance

The first thing any new enrollee of Medicare should do is visit the Medicare website at https://www.medicare.gov. Here you can search for the most up-to-date plans, premiums, compare prescription coverage or search for Medicare acceptance providers as well as other valuable information. Or contact the Lieutenant Governor’s office as listed in Part Six of this publication.

Medicare covers many but not all health costs. There are two basic parts of Original Medicare, Part A (Hospital Insurance) and Part B (Medical Insurance). In 2006 Medicare added drug coverage (Part D) and revamped Managed Care Plans (Medicare Advantage). Medicare Advantage plans resemble an HMO or PPO and can include drug coverage and additional benefits that Original Medicare does not.

For Original Medicare you can supplement your coverage to help cover the costs of deductibles, co-insurance and co-pays by purchasing Medigap insurance from a private carrier. There are 10 standardized plans available labeled A – J. (A being the least expensive and J being the most.) If you choose a Managed Care Plan you will not need a Medigap policy as the plan’s benefits cover what the Medigap plan would cover over the original Medicare plans.

Whichever plan you choose (Original or Advantage) you will need to enroll in Medicare Parts A & B. Part A has no premium if you worked 40 or more quarters of Medicare-covered employment. Part B has a premium of $99.90 per month for 2012, with higher income earners paying more. If you have employer provided drug coverage you may not need Part D. However for any of the issues above it NEVER hurts to ask questions and to research the medicare.gov website or contact the resources listed in Part 7.

Life Insurance

Most people buy life insurance either to provide financial protection for their dependents or as an investment. If you have policies you bought years ago or are thinking about starting another policy, there are some basic terms you should familiarize yourself with:

- **Term Insurance**: means that you get a certain amount of life insurance coverage for a specific period of time. There is no cash value for the policy and the coverage ends at the end of the term. For example, you may have a policy that insures your life until you reach age 65. At age 65 the policy terminates and you have no more coverage.

- **Whole-Life Insurance**: (also called straight-life or ordinary life) provides life insurance coverage for your entire life. There is a cash value that you may receive if you decide to terminate the policy. That value increases the longer the policy is in force. Typically, whole-life policies are more expensive than term insurance.

  - **Cash Value**: The value of the accumulated savings in the policy. You may surrender (cancel) the policy and receive the cash value (less any fees) or you can take out a loan against the cash value. You will not receive the face amount of the policy. If you want to surrender the policy, you must notify the insurance company immediately. Otherwise, if you just stop paying the premium, the company may continue your coverage by taking premiums out of your cash value for as long as it lasts.

  - **Face Value**: means the amount of the death benefit, before reductions for loans against the policy etc.

For example, if you are paying for a policy that has a face value of $5,000.00, your beneficiary will be paid $5,000.00 if you die while the policy is in force. Some policies provide additional coverage, such as double the face value, if you die from an accident, but usually only under certain conditions.

Type and Amount of Life Insurance

In deciding what type of life insurance you want, the first question is usually whether you need life insurance at all. Usually, as you get older, there is less need for life insurance. If purchasing life insurance, how much money would your dependents need if you died tomorrow? If you have no dependents or your dependents can get along without any financial assistance, you generally do not need to purchase any additional life insurance. Of course, you may want to benefit your friends and relatives who may have been supporting you for a period of time. However, the amount of benefit that would be given to them as a result of purchasing life insurance for their benefit might be outweighed by the amount of premiums that you would have to pay.

A term insurance policy provides insurance protection only. A cash-value policy provides both an insurance element and a savings element. These may be whole life, universal life, variable life policies depending on the investment structure. Under term insurance policies, premiums are usually lower to start, but increase as time goes by. On the other hand, premiums for cash-value policies are much higher, but usually remain the same.

Scams Involving Life Insurance

Beware of a new scheme called “Stranger Owned Life Insurance.” This is an arrangement whereby an Agent offers to sell you a policy, perhaps giving you an up-front signing fee bonus, arrange for someone to loan you the money to pay the premiums, and after two years you are expected to transfer the policy to the lender who forgives the loan. The lender is usually a group of investors who are wagering you will die soon. Another variation is where a senior is paid money to fill out a “Longevity Survey” which collects private health information about the senior which is then secretly used to purchase insurance on his life. These are illegal and/or hazardous arrangements.

Existing Life Insurance Policies

What if you already have life insurance that you no longer need? Should you keep paying the premiums on the policy or should you stop? First, you need to know which type of policy you have, term or cash-value. In the case of a term insurance policy, the policy may terminate automatically after the expiration of its term. You would not receive any money but you would no longer have to pay premiums. On the other hand, for a cash-value policy you will receive the cash value if you surrender the policy to the insurer. There may be termination or other fees, so be sure and understand what you will actually receive from the insurance company. There is another option if you have an unwanted cash value policy, and that is the “life settlement.”
A life settlement is a transfer of an ownership interest in a life insurance policy to a third party for less than the expected death benefit under the policy. A life settlement purchaser can pay you the policy holder more than the surrender value of the policy offered by the insurer, and you are relieved of the responsibility of making premium payments. The third party assumes the premium payments and holds the policy until your death, at which time the third party is paid the death benefit under the policy. Life settlements can be a favorable option for a senior to access the death benefit of a policy for which he or she no longer has a good economic need to keep in force. A life settlement is different from the Scams discussed above. The critical difference is that the insurance was initially purchased for a legitimate reason rather than as a syndicated investment.

Changing the Beneficiary

Life insurance does not pass under your Will if you have named a beneficiary. If you name your estate as Beneficiary, then the proceeds of the policy will have to go through your probate estate. If you would like to add or change a beneficiary of your policy, you should contact your life insurance agent or the life insurance company who sold you the policy to complete a change of beneficiary form. It is important that you keep a copy of your change of beneficiary request and ask the company to confirm they have made the change. Even if you think they are correct, it is a very good idea to check your policies to make sure that your designated beneficiary is not a minor (who can't own money outright), a deceased person or an ex-spouse and is still the person you want to be the beneficiary under the policy. If you have any questions about your current life insurance protection, you should contact the life insurance agent or the life insurance company that sold you the policy.

Annuities

An annuity is a contract in which an insurance company makes a series of payments to you at regular intervals in return for a premium. Annuities are insurance products but are usually sold for their investment features. There are two basic types. The first is the Immediate Annuity – you pay a single amount to the insurance company and they start making payments to you right away, either for a certain number of years or for the rest of your life depending on your contract. The second, and more common, is the Deferred Annuity, where money paid by you over a period of time into the policy account earns interest. You are deferring the conversion from the investment account to a stream of income payments, and you can defer until you die. With this type of annuity, during the deferral period you cannot draw from the accumulated amount without penalty for a certain number of years. The policy will usually allow some small percentage to be taken out without penalty each year. If you need more than that percentage, you will incur a penalty. You may choose to annuitize, which means that you no longer have access to the money in the account, instead you will receive periodic installment payments. This technique may be used when you retire in order to supplement your retirement income.

Annuities are heavily marketed to seniors, often by those who do not have your best interests in mind. They pay good commissions to the broker creating the incentive to sell them. The products are very complicated and a contract can run over a hundred pages. There are many legitimate annuities out there, but they are often an inappropriate investment, particularly for an elderly person. Features such as “guaranteed income” and “Lifetime payments” are very attractive to people on fixed incomes, but remember, if it sounds too good to be true, you can bet it is.

Insurance Hints

Keep your insurance policies all together in a safe place. Keep copies of your confirmed beneficiary designations as proof. It does happen that companies “lose” the beneficiary designations sent by you. Be very careful about buying annuities from unknown brokers, who often call themselves “Certified Senior Financial Advisors” or something similar.

Tell those close to you where your policies are kept.

Make a list of your insurance policies including policy number and names of companies. If the original policies get lost, you can get duplicates.

The South Carolina Department of Insurance can assist you with insurance questions you might have.

E. REVERSE MORTGAGES

Reverse Mortgages (RM) are loans administered by Housing and Urban Development (HUD), insured by FHA and provided through private approved lenders. RMs provide a way for homeowners, aged 62 or older, to gain access to a portion of the equity in their primary residence. This equity can be used for any purpose and the homeowner will not have to make any monthly mortgage payments. The accessed equity is available to the homeowner as a lump sum, monthly income, line of credit or a combination of these. These monies are tax-free and generally do not affect Social Security or Medicare eligibility. However, needs-based benefits, such as Supplemental Security Income (SSI) and Medicaid, may be impacted.

A RM, like a standard mortgage, is basically a lien that is secured by real property. The mortgage is a lien; therefore the homeowner, not the lender, is on title to the property as the owner. The real property securing the loan can be the homeowner’s current primary residence or a new primary residence purchased by the homeowner with a special RM (called a Home Equity Conversion Mortgage for Purchase).

RMs are non-recourse loans; this means that the loan is secured by the property only and the homeowner has no personal liability for the debt. The loan becomes due and payable under the following circumstances: (1) when the home has been sold; (2) within a year of the homeowner’s death (or, if multiple homeowner’s, within a year of the death of the last homeowner to die); (3) within a year of the home ceasing to be the homeowner’s primary residence; (4) if the homeowner is out of the home for more than twelve (12) consecutive months due to mental or physical illness, or (5) if they fail to pay their property taxes or insurance, or fail to keep the home in good repair. If, at the time it becomes due and payable, the loan balance exceeds the equity in the home, the mortgage insurance policy (which was purchased by the homeowner through the FHA at closing) will pay the difference. As such, neither the homeowner nor the homeowner’s heirs or devisees will ever be responsible for paying more than the fair market value of the home.

The percentage of equity a qualified homeowner can borrow under an RM increases on a sliding scale with the age of the borrower but this percentage does not typically exceed eighty percent (80%) of the home’s value. The following are additional factors that influence the amount of equity a homeowner can access: (1) the appraised value of the home; (2) the FHA lending limits in the area; and (3) the prevailing interest rates. Closing costs are financed into the loan which, in turn, further reduces the amount of equity that can be accessed but provides the benefit of reducing the up-front charges to the homeowner.

An example of the effect the RM has upon a subsequent resale: Homeowners Dick and Jane are both 67 years old. Their house is valued at $100,000.00. In this particular situation, based on their age and other factors, they are qualified to access sixty percent (60%) of the equity ($60,000.00). The fees associated with this loan can total as much as four percent (4%) of the home’s value ($4,000.00). This reduces their available equity to $56,000.00. Dick and Jane use the $56,000.00 over their lifetimes to pay for taxes, insurance,
credit card bills, etc. Dick and Jane, at 80, are sick of the South Carolina heat and want to move to Maine. They find a buyer for their property (Joe Buyer). At the closing of the sale of the property, the closing attorney will note on the closing statement a line item of fees owed to HUD as a result of the RM. This line item will consist of the following: (1) whatever portion of the $56,000.00 Dick and Jane used; (2) the closing costs at the time the RM was obtained ($4,000.00); (3) the interest that has accrued on the money accessed; (4) servicing fees, if any; and (5) mortgage insurance premiums. That total line item is paid to HUD upon the sale and the remainder of the proceeds (after deducting allowable closing costs incurred in this sale) is paid to Dick and Jane. If for some reason, the line item discussed above is greater than the value of the house, the FHA insurance policy will pay the difference.

There are a few perceived drawbacks of a RM. One is that the fees may be deemed excessive if the homeowner does not plan to live in the house for a minimum of 5 years. However, a new reverse mortgage has been created that has greatly reduced RM fees; it is called the Home Equity Conversion Mortgage (HECM) Saver. With a HECM Saver, the homeowner can opt to have much lower up-front costs in exchange for access to less equity. Another perceived drawback is regarding escrows for taxes and insurance. Homeowners may escrow funds for their insurance and taxes, but this will obviously reduce the amount of equity available to use for other expenses, since this money will be set aside. Either way, these items need to get paid whether the homeowner has a regular mortgage or a RM so it is hard to argue that this is still a drawback. Yet another perceived drawback is that the homeowner is spending the equity that would otherwise go to their heirs.

Conversely, the benefits that a RM offers can be numerous; no income tax is payable on the monies accessed, no regular monthly mortgage payments have to be made, loan qualification is not based on income or credit worthiness, and the money owed on the RM will never exceed the fair market value of the home. Pragmatically, it is a strategy that should be considered by all homeowners 62 or older who have equity in their home and desire to age in place.

Every reverse mortgage applicant is required to participate in independent counseling done by HUD trained counselors to make sure that the homeowner thoroughly understands the reverse mortgage payback provisions and requirements.

Regardless, it is strongly suggested that you further consult with a qualified attorney or estate planner before deciding to move forward with a reverse mortgage.

Part Two—Rights and Protections

A. HOUSING

In today’s world it is more than likely that almost everyone will find themselves in a landlord-tenant relationship at some point. Knowing one’s rights and responsibilities in such a situation can make the difference in having a pleasurable experience and controlling one’s own destiny and having a miserable experience and forfeiting such control.

Important Terms

• Landlord: The owner, lessor, or sublessor of a specific residence.
• Tenant: The person who rents or leases a specific residence to the exclusion of others.
• Rent: The charge for use of the premises.
• Tenancy: The period for which the residence is rented or leased.
• Lease: The oral or written agreement between the landlord and the tenant. If the agreement is for more than one year, it must be in writing. Even when a lease is for less than a year, it is best that the agreement be in writing so that all rights and responsibilities of the landlord and the tenant are clear.

In South Carolina, the landlord and tenant are generally free to set any terms they wish so long as the terms are not against the law. Once you have agreed to certain terms, no matter how burdensome, you are obligated to abide by them. For this reason be sure to read all written leases very carefully before you sign them.

The South Carolina Residential Landlord Tenant Act governs the duties of both the landlord and the tenant and provides each with certain protections. For example, the tenant is required to pay the agreed upon rent within the specified time frame and to abide by all the terms of the lease. The landlord is required to maintain the residence, especially anything that would affect the health and safety of the tenants, and to make essential repairs. The landlord is also responsible for keeping common areas, such as halls and stairs, reasonably safe and for maintaining heating, plumbing, and appliances that are provided. The tenant cannot waive or give up protections of the Act under a lease provision (27-40-350).

Considerations for a Residential Lease

• Rent: The lease should say exactly how much the rent will be, where it is to be paid, when it is to be paid and whether or not late charges will be added if it is paid late.
• Term: The lease should say exactly how long the lease will run. In addition, it should say whether it can be renewed and, if so, it should tell you what steps must be taken to renew it. Also, the lease should specify when and how the landlord or the tenant can break the lease prior to its end date.
• Deposits: The lease should spell out the amount of deposit that will be required. (Under current law there is no limit to the amount that can be charged. Note that the landlord will not have to pay you interest earned on your deposit.) When the lease is up and you have moved, the landlord has 30 days to return your deposit after you make a written demand and provide a forwarding address. The landlord can deduct
unpaid rent and damages from your deposit. He must give you an itemized statement of the expenses that were deducted.

- **Utilities:** The lease should clarify which utilities are the responsibility of the landlord and which are the responsibility of the tenant.

- **Landlord’s Right to Enter the Residence:** The lease should specify when the landlord can enter the residence during the term of the lease.

- **Tenant’s Rights:** The lease should be clear about a tenant’s right to keep pets, have other persons live in the residence, and whether or not the tenant can sublease the residence.

- **Repairs:** The lease should specify what repairs are the responsibilities of the landlord and tell you how to request repairs be made. Also, the lease should specify what repairs are the responsibilities of the tenant.

Under current law, the landlord and tenant can agree to put almost anything in a lease except provisions that are considered unconscionable, a waiver of rights and remedies under South Carolina law, a confession of judgment, or a limitation of liability.

**Lease Provisions to Avoid**

- Landlord is not responsible for repairs;
- Tenant is responsible for repairs, even if tenant is not at fault;
- Unreasonable right of landlord to enter leased premises;
- Acceleration of rent in event of tenant’s breach of lease;
- Tenant will pay landlord’s attorney’s fees;
- Termination of lease for late payment of rent without notice and opportunity to pay;
- Waiver of tenant’s right to jury trial, service of process or other rights;
- Tenant accepts premises “as is” (this is particularly true when tenant has not had an opportunity to adequately inspect the premises).

**Absence of Lease**

When there is no oral or written lease, the Landlord Tenant Act will govern the landlord/tenant relationship. This can happen if the parties fail to make an agreement or when a tenant remains in the residence after the valid lease has expired.

In such a case, the tenant is generally considered a tenant-at-will. The tenant could be considered a tenant for a certain term if the circumstances indicated that the parties intended that this would be the case. The term is considered to be month-to-month under current law. For example, if the parties had an ongoing relationship based upon a six-month term, the court could imply a tenancy for a term of six months.

Under these circumstances, the terms of the act prevail and the tenant has the duty to comply with housing and building codes, keep his/her unit safe and clean, dispose of all waste sanitarily, keep plumbing fixtures clean, avoid destruction of property and avoid disturbing others. The landlord has the same general duties as previously discussed. Both the landlord and the tenant would have to abide by the duties and responsibilities set out in the Landlord Tenant Act.

**Tenant’s Remedies**

If your lease is not specific, you must send the landlord written notice to request repairs that are the landlord’s responsibility and allow him 14 days to complete or at least start the repairs. If repairs are needed for essential services such as heat or water and the landlord does not make the repairs within the 14 days or at least start them in good faith, you may be able to terminate your lease and recover actual damages. In most instances you cannot withhold rent – it is always advisable to consult an attorney before withholding rent under any circumstances.

If the landlord’s actions or failure to act are willful, the tenant may be able to recover reasonable attorney’s fees. You want to always consult an attorney when contemplating a law suit.

**Landlord’s Remedies**

If a tenant breaks the terms of the lease, the landlord can bring a cause of action for eviction in the Magistrate’s court where the residence is located and may recover the costs associated with bringing an eviction action.

**Reasons to Evict**

- **Non-Payment of Rent**
  Landlord can evict you for non-payment of rent after five days from when the rent is due. Before you can be evicted, your landlord must give you a written notice about the non-payment, unless your lease states the five day rule or your landlord gave you a written notice on another occasion. The fact that you lost a job or were hospitalized will not keep the landlord from being able to evict you. If you see that you are going to be late with your rent, you should immediately contact your landlord to see if you can reach an agreement about paying the rent late. Any agreement you reach should be put in writing. (If there is no agreement, the tenant is generally considered a tenant-at-will. When there was a lease but it has expired, the term will be considered to be what had been previously agreed to, for example, if you paid month to month, you would continue to owe month to month.)

- **Breaking the Rental Agreement**
  Landlord can bring an eviction action against you if you break your rental agreement by not following the rules set out in your lease, the South Carolina Landlord Tenant Act, and any other rules that may apply. The rules in your lease must be reasonable. Most rules about keeping the property clean and safe will be considered reasonable. (The landlord must give you 14 days to correct any rule violations before he asks the Court to have you evicted.) Even if one rule is found to be illegal, the rest of the agreement may still be enforced.

- **Keeping the Property Clean and Free of Damage**
  Even when your lease does not specifically address health or safety hazards, you must keep the premises free of any health or safety hazards and if you do not do so, the landlord may give you a written notice giving you 14 days to clean the property or pay for any damages. If you do not do so, then the landlord can ask that you be evicted.

- **Landlord Access**
  Your landlord may enter your property with your consent to make repairs or inspections during reasonable hours, after giving you notice, unless it is an emergency and then the landlord does not have to give notice or obtain your consent. If you unreasonably refuse to let the landlord in the premises, he can try to evict you. The landlord must knock and identify himself except in emergencies. The landlord can enter without your consent to perform services on a regular schedule or to provide services requested by the tenant.
• Use of the Property
You can be evicted for certain activities on the property, whether or not your lease says so, such as using the property for anything other than a living space or for criminal activity.

• End of Lease Agreement
If you do not leave at the end of the term of a lease, and you have not renewed your lease, the landlord may evict you, even if all rent has been paid.

Eviction Tips
• Your landlord must file an action in Magistrate’s Court to have you legally evicted and will have to serve you with a Rule to Show Cause. *(If you are served with a Rule to Show Cause, you should call a lawyer as soon as possible.)*
• Once you are served a Rule to Show Cause saying why you should be evicted, you have 10 days to file an answer to the charges with the Magistrate. You can also request a hearing within those 10 days as well as request a jury trial.
• If you have paid part of the rent, the judge may make the landlord accept the rest of the rent instead of evicting you.
• If you have a hearing before the magistrate, you can tell him about any problems that were having such as no hot water or heat and the judge may consider those in deciding whether to evict you or not.
• If the landlord says that you broke rules and should be evicted, he must first give you 14 days to correct the violations.
• If you think that the landlord has not renewed your lease because of complaints you have made, you should call a lawyer.
• If you believe that the rules have not been followed by the landlord in evicting you, you should tell the judge.
• If you lose your eviction case, and do not appeal, the Magistrate may issue a Writ of Ejectment within 5 days of the hearing which says that you either have to move or the sheriff will remove you and your belongings from the property. Once you receive the ejectment in person or find it posted to your door, you will have 24 hours before the sheriff comes to put you and your family out on the street.
• If you or family member is sick or old, you can ask the sheriff to give you more time to move; however, please note, the sheriff does not have to give you more time.
• Even if you are evicted, you should request your security deposit back. The landlord can deduct any unpaid rent or cost of damages from the deposit, but, he must give you an itemized statement of the expenses he deducted. Ordinary wear and tear cannot be deducted.

Manufactured Home Park Tenancy Act (S.C. Code Ann. Section 27-47-10)
Many persons who own manufactured/mobile homes lease a lot keep the home on. These leases are governed by the Manufactured Home Park Tenancy. These laws were enacted to clarify the rights and obligations of owners of manufactured homes and owners of manufactured home parks and to encourage maintaining and improving the quality of housing.

Exclusions
• Tenancies in which both a manufactured home and a manufactured home lot are rented or leased by the same resident;
• Lots that are rented primarily as temporary living quarters for recreational camping or travel use that have their own motor power or is mounted on or drawn by another vehicle;
• Manufactured home parks with fewer than five lots for rent/lease.

Written rental agreements are required when a lot covered by this act is offered for rent/lease. The agreement must comply with the act and include the duration of the lease as agreed upon between the owner of the manufactured home and the owner of the manufactured home park. If the agreement can be renewed, the amount of rent to be paid before the agreement is actually renewed must be stated.

Requirements of Rental Agreement
• Location and size of lot to be leased;
• Monthly rental rate;
• Date payment is due;
• Place payment to be made;
• Personal property, services, and facilities to be provided by the Park Owner;
• Rules governing residency which, if violated, may be cause for eviction;
• Statement of any amounts to be paid by the resident including security deposits, service fees, installation charges, and any other amounts;
• Improvements, if any, which the resident may make to the lot including landscaping;
• Improvements, if any, which are required to be made by the resident;
• Restrictions, if any, regarding pets, children, number of occupants and vehicle storage;
• Notice required to exercise option for renewal or to terminate tenancy.

Manufactured Home Park Owner’s Obligations
• Park Owner must give resident his/her name and address or the name and address of a person authorized to act as his/her agent and keep that information current;
• A person authorized to enter into a rental agreement on behalf of a Park Owner who fails to comply with the act with regard to a rental agreement entered into on behalf of the Park Owner becomes his agent for purposes of the rental agreement for service of process and receiving notices and demands;
• A person authorized to enter into a rental agreement on behalf of a Park Owner who fails to comply with the act with regard to a rental agreement entered into on behalf of the Park owner becomes his agent for the purposes of that rental agreement for performing the obligations of the owner under the law and the rental agreement;
• Park Owner must give the resident at least 30 days advance notice of the effective date of new rental rate when the tenancy is to continue beyond the original term;
• Park Owner has the burden of proving a manufactured home located in the park is unsafe or unsanitary or fails to meet the park’s aesthetic standards. A resident must not be forced to make an aesthetic change to his home’s original design that would create undue financial hardship and that is contrary to the terms of the rental agreement during the term of the rental agreement;
• Purchaser of a manufactured home may not become a resident of a manufactured home park without the approval of the owner. Approval by the owner must not be withheld unreasonably. The purchaser has the
burden of proof as to whether approval or disapproval is unreasonable;

• Park Owner has to provide access to the common areas of the park at reasonable times and must maintain the utility connections and systems in proper working condition;

• Park Owner does not guarantee the safety of residents or their guests but he/she shall exercise due care to keep the premises under his/her control in a reasonably safe condition;

• Park Owner must take reasonable steps to maintain the cleanliness and appearance of the common areas of the park;

• New Park Owner must notify residents of the change in ownership within thirty days after the date of closing of the sale;

• Park Owner who applies for rezoning of a park, must post a notice of the proposed rezoning at least five days before the public hearing on the rezoning.

Resident’s Obligations

• Residents must comply with building, housing and health codes;

• Residents are to keep their manufactured home lot clean;

• Residents and their guests are to comply with regulations and the rental agreements and ensure that they and guests conduct themselves in a manner that does not disturb other residents unreasonably;

• Residents are to keep their rent current;

• Residents are to give written notice to the Park Owner whether they want to continue the tenancy beyond the original term within 30 days of receiving notice of a new rental rate;

• Residents must provide the Park Owner with a forwarding address so that their security deposit or prepaid rent can be returned to them, less amounts withheld for accrued rent or damages. Deductions from the deposit must be itemized.

Evictions from Manufactured Home Park

As with private residences, a Park Owner can have a renter evicted for failure to pay the rent when due or for breaking the rules of the lease.

Reasons to Evict

• Failure to comply with local, state, or federal laws governing manufactured homes after resident receives written notice of noncompliance and has had a reasonable opportunity to remedy the violation;

• Resident engages in repeated conduct that interferes with the quiet enjoyment of the park by other residents;

• Resident is in noncompliance with a provision of the rental agreement or park regulations and fails to remedy the violation within 14 days after written notice from Park Owner;

• Resident does not pay rent within five days of its due date;

• Resident is in noncompliance with a law, provision in the rental agreement, or park regulations affecting the health, safety, or welfare of other residents in the park or affecting the condition of the park;

• Resident willfully and knowingly makes a false or misleading statement in the rental agreement or application;

• Taking of the park or the part of it affecting the resident’s lot by eminent domain;

• Other reasons sufficient under common law.

B. CONSUMERISM

In this section we will discuss the rights and obligations of senior citizens who purchase goods and services as consumers. We’ll include considerations prior to a purchase, the consumer’s rights if something goes wrong, the creditor’s rights if the consumer defaults, and several special problems.

Your best protection against fraud as a consumer is for you to be well-informed and a careful buyer. A smart consumer should be knowledgeable about his or her legal rights, be cautious of product exaggerations (or “puffing”) and unafraid to demand satisfaction for the price of his or her purchase.

This section is designed to help you become a more alert consumer and less likely to be taken advantage of by fast-talking sales people or misleading advertising.

An attempt is made in this section to provide you with general information that will assist you in consumer purchases, specific things you should know about particular types of purchases, and a description of remedies at your disposal if something goes wrong with a purchase.

The consumer should learn all she can about a tradesman before doing business with him. The best way to learn about someone’s reputation is through friends, relatives or others in the community that have had dealings with the merchant. You can also request a report from the Better Business Bureau. Many regional offices of the Better Business Bureau maintain a web site where you can obtain information regarding local merchants and businesses. For more information and links to local branches of the Better Business Bureau, visit their web site at www.bbb.org or call their regional office. Consumers may also contact the South Carolina Department of Consumer Affairs at www.sccomputer.gov.

Credit Cards

Credit card buyers who pay for their goods or services within 30 days of their charges may avoid finance charges on those items (depending on the terms of the contract with their credit card company). If you have a bankcard, like Visa or Mastercard, the card issuer must include on its billing statements the name, address, and phone number of its billing department.

Many banks and credit card companies now offer “online banking” services which allow you to regularly check on your account(s) from your computer.

The “Fair Credit Billing Act” requires that bank and credit card lenders must acknowledge within 30 days any complaint that has been received unless the complaint has been resolved. Your complaint must be mailed out by you within 60 days after the first bill containing the error was mailed. Send your complaint via certified mail, return receipt requested, so that you can have a record of when the creditor received your complaint. In any event, the lender has to correct the error, if there is one, within the shorter of 60 days or two billing cycles after receiving your complaint. If the lender does not correct the mistake within the proper time period then the amount in question must be forfeited by the creditor.
People often worry what can happen if their credit cards are lost or stolen or used by an unauthorized person. You are only liable if somebody else uses your card if you have signed and accepted use of the card. In addition, you are only liable for $50, but if you have given notice of the loss of the card to the card issuer, you will only be liable for the amount charged prior to your notice (if it is under $50). You therefore have a possible liability of $50 per credit card if you have been given notice of such liability by the card issuer. You can avoid most liability by giving prompt notice of any loss or theft and regularly checking and reviewing your account statements when you get them in the mail.

Further, under the Equal Credit Opportunity Act (ECOA), it is against the law for a creditor to deny credit or terminate credit because of your age. More information regarding the ECOA is available from the Federal Trade Commission website at www.ftc.gov.

**Truth in Lending**

A consideration in buying goods or services on time is the extra costs that are usually involved. Under the Federal Truth in Lending Act, the creditor must disclose the finance charge. This figure tells exactly the difference between the cash price and the cost of buying goods and services on credit. In addition, an interest figure called the annual percentage rate, or "APR" must also be disclosed.

**Credit Discrimination**

No longer can a creditor discriminate against an applicant for credit by reason of sex, age, race, color, religion, national origin, marital status, or public assistance income. Also, explanation must be given when credit is denied. The notice of refusal should be given within 30 days of rejection of the application and the rejection must be accompanied with an explanation of why the application was refused. Further, under the Equal Credit Opportunity Act ("ECOA"), each creditor shall promptly furnish an applicant, upon written request made within a reasonable period of time of the application, a copy of the appraisal report used in connection with the applicant's application for a loan that is or would have been secured by a lien on residential real property.

Your credit account cannot be terminated for any of the following reasons: race, sex, marital status, age attained (provided the applicant has the capacity to contract) or retirement status.

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**Sales and Loan Contracts**

Because of a special rule of law, a court will not usually except any oral testimony regarding promises, agreements, or modifications made in relation to a written contract that is "outside" the terms of the written contract itself.

Therefore, if a seller makes a promise not contained in the written agreement, make him or her put it in writing. If he or she refuses to do so you run the risk that those promises will not be enforceable. Because of this rule, it is very important to read and understand a contract before you sign it.

Most installment contracts give the creditor the right to charge extra when a payment is late. Or, the creditor can refuse to accept the late payment and demand the entire balance. If you cannot pay, the seller can sue for the total amount owed on the contract. However, the creditor may not demand the entire balance until after he or she has sent a special letter called the "Consumer's Notice of Right to Cure." This notice allows you 20 days to catch up on all your late payments or "cure". If you do not make the payment, or if you make the payment and fall behind later on during the loan, the creditor can demand payment of the entire balance in full.

You get only one "Consumer's Notice of Right to Cure," unless you are paying on a revolving charge or credit card account. Those accounts require one Notice of Right to Cure per year.

A judgment for default will usually include attorney's fees and court costs in addition to the payment of the unpaid balance. For this reason, it is vital to make payments on time. If you must be late, make arrangements ahead of time. Call the seller before payment is due and maintain contact with creditors and provide them with updated addresses and telephone information.

**Basic Contract Do's and Don'ts**

**Do** insist that the sales person allow you to take the contract home with you before you sign it.

**Don't** deal with any salesman who refuses to let you take home a filled-in contract before you sign it.

**Do** show the contract to a friend that you trust, family member or a lawyer if there's any question about some provision of the contract.

**Don't** sign anything unless you have had time to read it carefully (or have it read to you) and you fully understand what it says.

**Do** insist that all terms, promises, guarantees and warranties be put in writing as a part of the contract.

**Don't** sign a contract with blank spaces that are to be filled in later by the sales person.

**Do** keep copies of all contracts, payment records and complaint letters in a safe place.

**Door to Door Sales**

The first thing you should remember about door to door salesmen is that you do not have to talk to them. If you do not want to buy anything, all you have to do is ask the salesman to leave.

A South Carolina law allows you three days to cancel a home solicitation sale and a Federal Trade Commission (FTC) rule allows you three days to cancel a cash purchase of $25.00 or more.

If you decide to cancel the sale or rescind the contract, you must do so by following the instructions in the contract, usually sending written notice to the company or business before midnight of the third business day after you had the chance to consider the contract and to cancel. Discard all previous legal commitments to the contract before you decide to cancel. Therefore, if a seller makes a promise not contained in the written agreement, make him or her put it in writing. If he or she refuses to do so you run the risk that those promises will not be enforceable. Because of this rule, it is very important to read and understand a contract before you sign it.

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day after the date of the transaction. Keep a copy of this letter for your records.

South Carolina law sets forth a specific form for sending your notice to cancel. The FTC rule involves a Notice of Cancellation which the sales person is required to give to you, along with copies of the receipt or sales contract.

Once the merchant receives the notice or letter of cancellation, he has 10 days to refund any money that he has received, return any documents that you may have signed, return any goods or property that you've traded in, and inform you that he will pick up or let you keep any items that were left with you. Products left with you must be available to the seller in the same condition as you received them. It is not your responsibility to ship the items back to the seller or pay postage expenses for such shipping. The seller must pay the return postage expenses.

Complaints
Complaints are most effective when they are accompanied by receipts, contracts and other documentation that helps to explain your case. If you are contacting the store or business by mail, send your complaint letter by registered or certified mail, and keep a copy for your records. Never send originals of any receipt, contract or documentation—send copies. If you are making your complaint in person, try to remain calm, but be firm and make sure that what you are told makes sense to you.

When a direct complaint to store or business does not satisfactorily resolve your problem, contact the Better Business Bureau or the Department of Consumer Affairs.

If you are dissatisfied with a product or service, the first thing you should do is to notify the company, in writing, of your complaints. If they do not satisfy your complaint, you may want to contact a lawyer. Do not assume you can stop paying just because you are dissatisfied. Get the advice of a lawyer first. An attorney may be able to get you out of a bad bargain.

Dealing with a Lawyer
Unfortunately, many older persons are afraid to consult with a lawyer when they think they might have a legal problem. Many fear that the lawyer's fees will be too high or that the lawyer will be intimidating. Frequently older individuals do not know a lawyer and are unaware of any means of initiating contact with a lawyer. If you recognize some of these worries as your own, you should know that many of them are myths.

First, if you do not know a lawyer you should know that the South Carolina Bar Lawyer Referral Service at (800) 868-2284. Second, if you are eligible for free legal services. This will probably be true only if your income and assets are minimal. The Legal Aid Telephone Intake Service (LATIS) (800) 868-346-5592 handles the screening for S.C. Legal Services. You may contact LATIS at 1-868-346-5592.

If you already are aware of a lawyer you wish to consult, or if you have the names of several lawyers, you should not be afraid to make a phone call to learn whether there will be a charge for an initial conference. Many lawyers may charge a reduced fee for the first conference or that conference might be free of charge. On your initial visit with the lawyer be sure to inquire what his or her charges will be and ask to have those charges formalized in a written agreement if you agree to hire the lawyer. All parties should sign such an agreement and you should be given a copy. Whenever you visit with your lawyer do not be afraid to ask questions—you deserve to have answers to your questions.

If you have a case that might generate a money recovery, you might ask the lawyer if he is going to take it on a contingency basis. That means that the lawyer will take a percentage of the recovery if there is one, but will receive no fee if you are not successful. If you have no money to pay hourly legal fees, a contingency arrangement can frequently be desirable. Note however that a lawyer is generally not allowed to accept a contingency fee for representing you in a domestic matter. You will be responsible for some of the out-of-pocket expenses, such as filing fees, even if you don't win.

You should also be aware that certain consumer laws provide that the business may have to pay the attorney fees of the consumer who wins. If pursuing such a claim, it is wise to inquire of the possibility.

When debating the value of paying a lawyer to prepare a will (or a similar document) keep in mind the relative cost of preparing the will with the probate expense that could arise after your death if your will has not been properly prepared. Ask your lawyer if your bill might be paid in installments.

In any event, lawyers should not be feared, but should be viewed as individuals who can help you with your problems or concerns and help you achieve all the rights to which you are entitled.

Breach of Warranty
There are generally two sorts of warranties, those in a written contract (express warranties), and those given to you automatically by law (implied warranties). Federal law requires simple and easily understood explanations of most written warranties, including any special conditions which will be imposed, and whether the warranty is full or limited.

Some goods carry no warranty at all. However, in order for the seller to remove the automatic or “implied” warranties, he or she must disclose this fact conspicuously on the contract in bold, clear language. In any warranty situation, assume that the written contract controls, no matter what promises the seller may have made to you verbally.

If the seller wrongfully fails to honor a warranty, the buyer may sue for damages, or in some cases, even cancel the contract and get his or her money back. If cancellation is not possible, damages will usually be figured by subtracting the actual value of the goods from the warranty value, and offsetting this amount against the balance still owed to the seller.

Creditor and Debtor Rights
If someone obtains a judgment against you, or if you obtain a judgment against someone else, it is important to know how the judgment can be collected. There are certain things that can be reached by a creditor who obtains a judgment, and there are other things that cannot be reached.

Once a judgment has been obtained and becomes part of the circuit court records a lien may be placed by the creditor against all real estate owned by the debtor. The lien is effective in the county where the judgment is recorded.

Some personal property may also be vulnerable to collection.

However, some items are exempt from collection. Consultation with an attorney who specializes in debtor/crdeitor law or bankruptcy is recommended in order to protect your property. They will be able to tell you which items are subject to collection.

Bad Credit Ratings
If you learn that your credit has been damaged, you are authorized under the Fair Credit Reporting Act to
C. BANKRUPTCY AND DEBT ADJUSTMENT

If a consumer has too many outstanding debts to manage, the consumer might consider bankruptcy. There are two choices for consumers: Chapter 7 [liquidation] and Chapter 13 [debt adjustment]. Congress has recently made both choices much more difficult for consumers: you should consult with a bankruptcy specialist before considering either option, as there are many provisions that could prevent your obtaining bankruptcy protection. In both chapters, before you can file, you will have to complete a credit counseling course; and before you receive your discharge (that is, before your debts are erased), you will have to take a full course on credit management.

Filing for Chapter 7 liquidation requires that the debtor pass a “means test,” showing that he cannot afford to go into a Chapter 13. If you qualify for Chapter 7, this will cancel most consumer debts; however, it will not erase tax debts, most student loan debts nor debts due to a divorce, including alimony and child support. Of course, in a Chapter 7, all exemptions previously described are applicable. Chapter 7 will not cancel most security interests, such as mortgages on your house or a lien on your car.

A Chapter 13 debt adjustment allows the consumer to keep part of his income – the portion that Congress has determined is realistic – and dedicate all surplus income the consumer earns during the life of the Chapter 13 Plan to repay his creditors for a period of up to 60 months. In a Chapter 13, the consumer can “cure” (catch up overdue) mortgage payments. The surplus payments are the total that unsecured creditors will receive – whether it is 10% or 100%. While under a Chapter 13 plan, the consumer’s property cannot be attached without permission of the Bankruptcy Judge.

D. SPECIAL CONSUMER ISSUES

Drugs
South Carolina has a generic drug law that allows for substitution, in most circumstances, of the generic equivalent of a prescription drug for the name brand of that drug, if it is available. (S.C. Code Ann. § 39-24-10, et seq.)

Utilities
The elderly and people with a disability on fixed incomes are often the least able to afford rate increases and hefty utility charges.

Under South Carolina law, no utility, electric cooperative or municipality may interrupt service to any residential customer for non-payment of a bill until 25 days from the billing date have elapsed.

Further, during certain months of the year or extreme weather, residential utilities cannot be disconnected if the consumer can show that they are unable to pay their bill(s) and disconnection of the utility would be dangerous to their health.

Home Repair or Improvement
Some con-artists are in the “business” of home repair or improvement. It is important for you to know the reputation of any contractor with whom you deal. Be particularly wary of repairmen who go door-to-door offering services that don’t seem necessary or “too good to be true.”

If a repairman fails to do the necessary work, it is difficult to recover damages. You may have to hire a second contractor to make an estimate and testify in court. Depending on the amount of money and damages in controversy, you may have to seek relief in magistrate’s court.

Also, if the contractor you hired has not paid for labor and materials used on your house, the laborers or suppliers may be able to obtain a lien against your property. You might end up paying double for the same work.

One of your best protections is to know with whom you are dealing. Before signing the contract, you might want to check to see if the contractor is licensed in South Carolina (www.llr.state.sc.us) or if complaints have been made against the contractor with the Better Business Bureau. Also, don’t be afraid to ask for referrals.

Whenever it is necessary for you to hire someone to do work on your home, get multiple estimates and shop around. Don’t feel obligated to sign a contract where you have specifically agreed that the contractor would provide you with an estimate before beginning work. Make sure you get all promises in writing.

Hearing Aids
Too often, elderly consumers do not go to a doctor or a trained audiologist but go instead to a hearing aid sales center. Dealers in hearing aids often provide free hearing tests to attract customers. Naturally, consumers like to save on doctor’s fees. Perhaps you can, but the loss might be greater. You should always have a medical examination before investing in a hearing aid.

Federal regulations and the Food and Drug Administration govern the hearing aid industry to help protect against unscrupulous salespersons. These rules require a physician’s statement that the device may help and a medical evaluation, less than 6 months prior to the sale, before a hearing aid is sold. Furthermore, each
hearing aid must have a detailed brochure that tells what the device does, how it works and how it is to be used. This brochure must be provided by the manufacturer and given to the customer. It is prohibited to use high pressure solicitation, make unexpected calls and to utilize any misleading or unfair practices in the sale of hearing aids.

The federal government has set forth specific guidelines for determining misleading or unfair practices and violation of these guidelines can result in severe penalties. In most cases, the hearing aid can be refused and the contract cancelled up to 30 days after receipt of the hearing aid if you are not satisfied.

In addition to these remedies, a number of other rights and remedies exist to combat the unscrupulous hearing aid salesperson. Such remedies include laws governing home solicitation, false advertising, consumer fraud, uniform deceptive trade practices, consumer credit and sales warranties.

Prepaid Funeral

To make things easier for relatives, some persons purchase pre-paid funeral plans. It is important to know whether you are buying a service or insurance.

For example, a person picks out the type of funeral wanted – a certain kind of casket, service, marker, and so on. After services are bought, the extras are provided at no additional cost if the plan has been fully paid for at time of death.

The real problem arises when you pick out a plan today (which costs $1,000) and pay insurance premiums toward that amount. By the time of death, the price of the same service may have doubled. This puts your relatives in a difficult spot. A funeral director may pressure them to follow the deceased’s wishes to have a particular service. To do so could cost an extra $1,000. The funeral director might play on their guilt and grief. (All we have for $1,000 is our welfare casket.)

Pre-payment to a funeral home can create more problems than it solves. What if you move or change your plans and they won’t return your money? If you want to set aside funds to cover funeral costs, a third-party trust or special bank account can be a safer way to go.

Although pre-paying is not recommended, pre-planning is. To obtain help with planning, you might wish to turn to a memorial society, which is a non-profit association set up to obtain dignity, simplicity, and economy in funeral practices.

The South Carolina Department of Consumer Affairs regulates the pre-need funeral contracts. You can find more information on the department’s website at www.sccomconsumer.gov.

FTC Funeral Rule:

The Federal Trade Commission has developed a trade regulation rule that concerns the funeral industry. It is called the funeral rule and is intended to enable consumers to obtain information about funeral arrangements.

In general, the rule provides for the following consumer rights:

- You have the right to choose the funeral goods and services you want (with some exceptions).
- The funeral provider must state this right in writing on the general price list.
- If state or local law requires you to buy any particular item, the funeral provider must disclose it on the price list, with a reference to the specific law.

- The funeral provider may not refuse, or charge a fee, to handle a casket you bought elsewhere.
- A funeral provider that offers cremations must make alternative containers available.

Fraud or Deception:

If something seems too good to be true, it probably is. Bargains are limited, and anything better than a bargain is practically non-existent. The best way to avoid being fleeced is to spot an illegal scheme or deception before you become a victim. And as always, the best protection you have against rip-off schemes is your own knowledge. Here are some of the prevalent frauds, schemes, rip-offs and con games which are used to defraud the public of billions of dollars each year. As with many business transactions, a good source for checking on any history of past complaints against businesses or sales agents is the Better Business Bureau.

Dance instruction frauds do not usually involve the dance lessons themselves when are often taught by well-qualified instructors. However, some studio personnel use unethical high-pressure salesmanship and questionable selling techniques to entice the unwary. These include bogus contests, fanciful testimonials and sales techniques in which teams of salespeople work in relays to batter down sales resistance.

Death vultures fraud is possibly one of the lowest forms of all con games. People visit close members of a bereaved family and attempt to raise sums of money for items which they maintain were purchased by the deceased before death. Sometimes they render bills when nothing is owed, or claim partial payment has been made by the deceased and attempt to collect the alleged balance.

Investment rip-offs are prevalent at inflationary times when gold, silver, diamonds and other precious metals and stones seem to offer investment stability. But if you are offered diamonds or precious stones by mail or phone, you are more likely to get cheap gemstones that have little or no resale value. Reputable diamond dealers may advertise, but they seldom, if ever, sell valuable stones by mail. Don’t buy if the dealer won’t allow you to get an appraisal from another source first. Gold requires careful analysis. Buy gold only from legitimate dealers and only if you are really knowledgeable about gold investments. There are also phony land and oil lease investment schemes that promise you great wealth very quickly. Never ignore the normal safeguards used by business people in checking out investment opportunities.

Pest control fraud is prevalent in the South where you have more problems with insects. This con-game usually takes the form of a termite inspector who appears and informs you that termites have infested your home but if you contract for his or her services today, you will receive a discount. Always avoid such pressures. It is extremely doubtful that your house will start tumbling down around your ears that very day. Besides not applying pesticides properly, the pest control con-man may not use a recognized or effective pesticide. As a matter of fact, he or she may apply nothing but some chemically smelling liquid. Don’t deal with door-to-door pest control operators. If you need their services, check the yellow pages, then call them and ask for an estimate based on your needs.

The “pigeon-drop” is a “con” or fraud that is designed to rob people—particularly elderly persons—of their savings. Usually a pleasant, “nice” person introduces himself or herself and informs the victim that he or she has recently found “a large sum of money.” This person wants to give some of the money away to a “deserving and honest” person because he or she and his or her spouse “do not need all of it.” The victims are told that proof of their “good faith” is needed before they can get the money. This “proof” that the “nice” person wants is cash, called “good faith” money. An amount is agreed upon and the victim obtains it and delivers it to the “nice” person. What follows is either (1) an exchange for a box which supposedly contains the large amount of money the “nice” person is giving away; or (2) a robbery when the victim gives his or her money to the thief and expects to receive his or her windfall “later or tomorrow,” but doesn’t. These “cons” sometimes sound believable, but they never are. When in doubt, call the police or the Better Business Bureau.
Envelope Stuffing Fraud usually begins with an ad in the Business Opportunities section of a Newspaper or magazine. The headline usually jumps out at you. “We’ll pay you 25 cents for each envelop you stuff and return to us” or for the reader to “Earn $250.00 for stuffing 1,000 envelopes.” Such advertisements are deceptive and misleading and should be ignored by consumers. Envelope stuffing schemes are essentially like pyramid schemes or chain letters.

**Franchise Frauds** come in a vast array of guises. There are many franchise operations which can give a person the independence of owning a small business plus the advantage or help from an experience company. The advertising literature for some franchises make their offers irresistible through promises of “high” profits from small investments and other misrepresentation. Approach franchise opportunities with extreme caution and investigate thoroughly “before” you invest.

**Deceptive Sales Practices**

Beware of merchants or salespersons who use high-pressure tactics or unusual ploys. Hundreds of variations of such tactics or gimmicks are used, but some of the most common are:

- **Bait and Switch.** A store may advertise a special low price. When the consumer asks about that item, the salesperson will try to switch the consumer’s attention to a more expensive article.

- **High Pressure Tactics.** A salesman will forcefully try to pressure you into buying something. The salesman is trained to make the deal sound irresistible and you might well buy something without thinking the matter through. In such a situation, you should insist on a delay. Take time to get the opinion of a friend or relative in order to gain time to “cool off” and consider the purchase more carefully. If the salesman is legitimate and believes in his or her product, he or she will not object to a delay. If he or she persists strongly, back off. Don’t be a sucker.

- **Referral Sales.** These schemes operate by promising you a fee for each new customer referred to the seller. In theory, if you send the store enough business, the item you want to buy is practically free.

In reality the process is much like a chain letter. All prospective customers meeting the seller’s requirements are soon used up, leaving most customers to pay the full price. In addition, goods are usually marked up, so you gain little or nothing from any discounts you receive.

This kind of scheme is now illegal in South Carolina. But if you should get drawn in by a similar flim-flam, you gain little or nothing from any discounts you receive.

Most of the practices described under the Fraud or Deception Section are crimes. Other crimes you should watch out for, and some things you can do to help protect yourself from them, are described in the section entitled “protection from crime.”

**Unsolicited Consumer Telephone Calls**

There is something you can do about unwanted telephone calls made to you for purposes of selling you something. Live telephone solicitors must identify themselves, their business and the object of the call and, within 10 seconds after beginning the conversation, state the purpose of the call and allow you the opportunity to respond. If you say you are not interested, the solicitor must discontinue the call and remove your name and telephone number from the list if you ask not to be called again. Live telephone solicitation calls may not be made after 9:00 p.m. or before 8:00 a.m. and must disclose the cost of merchandise or method of estimation; payment plan; and extra or special charges like shipping, handling, and taxes. You should contact the Department of Consumer Affairs if you have any complaints about the violation of this law. The department can impose a monetary penalty and injunctive relief against the telephone solicitor, if necessary. Violation of this law can also be prosecuted as a crime.

**National Do Not Call Registry**

Additionally, the FCC has also established a national Do Not Call Registry. Once your residential or cellular telephone number has been listed on the registry for 30 days, telemarketers are prohibited from calling that number. You can report any violations directly to the FCC. To register for the national Do Not Call Registry, go to [www.donotcall.gov](http://www.donotcall.gov) or call (888) 382-1222.

**E. PROTECTION FROM CRIME**

**Robbery and Assault**

Do not carry large sums of money. Credit cards and checks can be replaced. Currency cannot be replaced.

Do not discuss your financial affairs in public or around strangers. Letting the wrong person hear where you bank, when and where you cash your check, and similar information could set you up for a robbery.

Do not flash large bills or large amounts of money when you pay for things when shopping.

Do not give a door key under the doormat, behind the shutter or in a mailbox. If you need an extra key, leave it with a trusted neighbor.

Be sure to lock your doors when you’re home as well as when you leave. Install a peephole in your door and check the identity of all callers, including repairmen, deliverymen or salespersons. Don’t let strangers in to use the phone. Offer to make the call for them.

If you must go out at night, tell a friend where you are going, what route you will take, and when you plan to be back.

Take a taxicab at night rather than walk. Ask the driver to wait until you are safely inside.

Stay away from dark, out-of-the-way places at night. Avoid lonely and deserted places even during the day.

Attempt to be with another person when you walk. If you must walk alone, a dog is a good companion.

When walking at night, take the most direct route and stay in lighted and well-traveled areas as much as possible.

If you think you are being followed, do not necessarily go directly home. Head toward the closest well-lighted area and try to find a store or gas station that is open.

Always act as if you know where you are going or that you are meeting someone.

Carry a whistle. When you are walking home, to work, or to your car, have your keys and whistle in hand so you can get inside quickly if necessary.

Avoid empty laundromats, bus stations and taxi stands at night. When you call a taxicab, wait inside until it arrives.

Keep a firm hold on your purse, especially in crowds. Do not leave it lying somewhere while you shop. If you go to a dressing room to try on clothes, take your purse with you. Keep your wallet in your front pocket, or inside coat pocket rather than a back pants pocket if possible. If you must place your wallet in your back
Get help from your family, clergy, friends, or a rape crisis center. You will need emotional support.

Rapists are repeaters. If you do not report the crime, the rapist may hurt someone else.

Do not change clothes, clean up, or bathe before you report the crime or before you go to the hospital. Your venereal disease.

Go to the hospital or the doctor’s office, even if you are not physically hurt. You need protection against venereal disease.

If you are sexually assaulted:

- Never leave your keys in an unattended car, even while running a quick errand, and always lock your car.
- Never list your first name in the phone book or on a mailbox.
- Never advertise that you are alone.
- Do not give out any personal information over the phone to strangers. Don’t give your name or addresses to strange callers and never tell anyone you’re home alone.
- Do not click a login link on an email that is supposedly sent from your bank. Banks do not send these types of emails out ever, and it is a scam opportunity that looks like your real bank.
- If your automobile becomes disabled while you are driving, put your hood up, turn on the flashers, and tie a cloth to the antenna. Then get in the car, roll up the windows (as long as it does not get too hot inside the car) and lock the doors. When someone stops, only roll your window down enough to ask them to phone for help.
- Always lock your doors when driving or riding in a car and when you leave your car, even for short periods. Put parcels in the trunk. Do not leave them in plain view inside the car where they will encourage theft.
- Check the back seat and floorboard before getting into your car. Never pick up hitchhikers.
- Park in safe, well lighted areas near your destination.
- In the event of a holdup, don’t resist, especially if the person has a weapon. Robbers must be considered dangerous. If a purse is snatched, let it go. Duplicate identification is easy to obtain.

Rape

Sexual assaults can happen to anyone, anytime, anywhere, and at any age. Statistics show that most rapes are committed not by strangers but by acquaintances of the victim. Most rapes occur at the victim’s home.

If you are sexually assaulted:

- Report the crime to the police or sheriff.
- Go to the hospital or the doctor’s office, even if you are not physically hurt. You need protection against venereal disease.
- Do not change clothes, clean up, or bathe before you report the crime or before you go to the hospital. Your clothes and body may contain evidence of the rapist’s identity.
- Rapists are repeaters. If you do not report the crime, the rapist may hurt someone else.
- Get help from your family, clergy, friends, or a rape crisis center. You will need emotional support.

Auto Theft

Never leave your keys in an unattended car, even while running a quick errand, and always lock your car.

Never attach a tag with your name and address to a key ring. If the keys are lost or stolen, the tag will lead the thief directly to your car – and your home. If lost keys are turned in, shopper cards like the Bi-Lo Bonus card will cover postage, identification, and return to you without your personal information being public.

Only leave the ignition key with a parking attendant. A dishonest parking lot attendant may have house keys duplicated and sell them, along with your name and address, for a tidy profit.

At night, park in well-lighted areas with pedestrian traffic. Auto thieves don’t like working in spots where they are clearly visible.

Lock all doors and roll up windows whenever leaving the car unattended. Be sure vent windows, a favorite means of entry for car thieves, are shut tight.

When you park the car, remove your CDs, any removable electronics or other valuable possessions from the car. These items tempt thieves and should be locked in the trunk. If possible, also remove the CB antenna and stow it in the trunk.

Never leave the automobile registration or your driver’s license inside the car. Carry these items in your wallet. If you don’t, thieves will be able to produce legitimate documents when stopped by the police.

Consider the purchase and installation of security devices, such as a locking gas cap; an alarm device which will kill the ignition switch of the car, activate a siren, horn or lights – or all four – to frighten the thief away before he is able to steal your car.

Burglary

Install lights at all entry points to eliminate dark areas in which burglars can work unnoticed.

Trim trees and bushes so your doors and windows can be observed by neighbors and police patrols.

Ask your local law enforcement department Crime Prevention Through Environmental Design. Many departments will send out a specially trained officer free of charge to conduct a safety audit of your residence. This will include looking at all areas around your home that either promote or deter criminal opportunity.

Then act accordingly based upon the police recommendations.

Equip your doors with one-inch throw deadbolt locks.

Lock your doors whenever you leave the house – even if you will only be gone a few minutes.

Lock your windows with key-operated auxiliary locks. You can also, and less expensively, “pin” your windows shut by drilling through the sash into the frame and inserting nails in the holes.

Patio doors should be secured with a strip of wood placed in the bottom track (to prevent sliding) and screws placed in the top track (to prevent the door from being lifted out).

Use large, visible house numbers so that police can quickly locate your house in an emergency.

If you are going on an extended vacation, ask a neighbor to mow your lawn, and in the winter ask your neighbor to shovel your walk in case of snowfall.

Be a good neighbor in return. Watch your neighbor’s house for any suspicious activity. If suspicious activity occurs, call the police. If your neighbor is home, be sure to call him also.
Don’t keep excess cash or jewelry or other gold and silver items around your home. These items belong in a safe deposit box.

Turn on some lights when you are away. A dark home is an invitation to burglars. Try to leave lights on in the kitchen and living room because these are the two most used rooms at night. However, you should not leave the same lights on every time you are out. When away for a long time, notify the police.

Keep all doors and windows in good repair. Many home burglaries occur because the burglar was able to enter through already broken doors and windows. A police officer passing by may notice something wrong when he or she sees a damaged door or window and knows that your property is usually well kept.

Keep emergency numbers near your telephone.

Record all serial numbers of your appliances, motor vehicles, televisions, cameras, and so on. Keep this record in a safe place and keep a copy of it somewhere away from your home.

Photograph your jewelry, silver, antique and art objects. Keep these photos in a safe place.

An empty garage is a dead giveaway that you are not home.

Keep garage doors closed and locked, as people are very willing to walk into a garage and help themselves to tools and other items left in the open.

Keep a dog. A barking dog is still an effective burglar alarm.

Where it isn’t cost prohibitive, an alarm should be the silent type which is directly connected to a law enforcement office or direct monitoring company.

In isolated areas, use the type of alarm that makes a loud noise.

Neighborhood Protection

The following information describes a more or less formal program which has proved to be highly effective. However, many of these ideas can be adopted even if a formal Neighborhood Watch program doesn’t come about.

Looking out for your neighbor’s house while they look out for yours is a good way to help protect your neighborhood.

The Neighborhood Watch program is designed to make you and your neighbors aware of what you can do together to make your homes safer.

To start a successful Neighborhood Watch, talk with your neighbors and exchange information. Be familiar with every member of their family and the cars they drive. Then you can easily spot strangers or suspicious activities around their house. They will do the same for you.

Get to know your neighbors and become familiar with their routines. You’re going to become partners in watching the activities on your block.

Be suspicious. Report unusual or suspicious behavior to the police. Write down descriptions of the person(s) and license numbers of any vehicles involved.

Establish a meeting time and place convenient to all neighbors.

Draw a diagram appropriate for your neighborhood. Each neighboring house depicted should contain the house number, occupant names, and home and work telephone numbers. The emergency number of your police or sheriff’s department should be placed prominently on the diagram.

Keep a trusted neighbor informed if your house will be unoccupied for an extended period. It’s important to leave him or her a way of reaching you if an emergency should arise.

Credit Card Protection

Here are some ways to minimize the risk of becoming a credit card scam victim:

1. Rip out the carbon paper along with your receipt. Throw it away at home, not in a public trash can.
2. When possible, watch the clerk to ensure that extra impressions of your card aren’t made.
3. Reconcile your monthly bill with receipts to guard against phony charges.
4. Don’t reveal your card number over the phone or the internet. A common ploy is for the caller to say he or she is taking a survey, representing the credit card company or retail store. When your card is returned, check that it hasn’t been switched.
5. Tear up receipts and expired cards before discarding them. They contain your name and number.

Other Tips

Conduct A Security Survey (Crime Prevention Through Environmental Design):

Your local law enforcement officer may be able to help you conduct a home security survey.

In addition to the tips provided in the above sections on protection against robbery and burglary, you will want to check the following:

- Are any openings to your home (sky-light, crawlspaces, or vents) unprotected?
- Does the basement door have extra protection, such as a padlock?
- Does the garage door lock?
- Does the garage entrance to your home have a deadlock lock (with a minimum one-inch throw)?
- Are all exterior doors (including the garage) strong enough to withstand excessive force?
- Are sliding doors and windows secure against forced lock and/or lifting out of their frames?
- Are hinges pinned to prevent removal?
- Is there a peephole viewer (180 degrees) on the main entrance door?
- Are double-hung windows secured with a pin or extra lock to discourage lock picking?
- Are panes in louver windows well-fastened to the metal retainers? Are they reinforced with metal screening or grating on the inside?
- Do the basement window latches work properly, without excess play?
- It is also a good idea to establish a security closet inside your house for storing valuables. The closet door should be as secure as your exterior door, with a deadlock lock and pinned hinges on a solid wood door.

Senior Citizen’s Call-In Program

Many local sheriff’s offices and city police have a crime prevention unit. As part of their services, a senior citizens call-in program may be offered to people in the community. This program may require you to call in to your local law enforcement center by a certain hour to ensure that you are all right. Some units now have the capability to initiate calls so they can call you at home, pass on information and record replies to inquiries you may have. Contact your local sheriff’s office or city police office for more information.

Reporting Crime

Report the crime by calling the police or sheriff in your community as soon as possible. You may dial 911 or you should have the number posted conspicuously by your phone. If you cannot find the number in
your telephone directory, call information or the operator. If you don’t have a phone, use a friend’s or have someone take you to the police station.

When you are reporting a crime, you will be asked your name, where you are calling from, what crime you are reporting, where it happened, how many people were involved, and what the people committing the crime looked like. Try to remember everything you can about the crime and the criminal’s appearance and describe it to the police.

Victim’s Rights
As a victim of a crime you have certain legal rights.

If you receive physical threats or are harmed in any way in connection with your case, notify your local law enforcement.

Victims have a right to be informed concerning the criminal justice process. If your incident results in prosecution, the Solicitor’s Office will inform you as to procedures and court policies.

Victims who suffer physical injury during the commission of a crime may be eligible for compensation in some cases.

To be eligible the crime must have been reported to the proper authorities within 48 hours of the occurrence. Contact the South Carolina Crime Victims Compensation Board for more information. You may find more information about your rights if you are a victim of crime on the S.C. Crime Victim’s Council (http://scvc.org) or the S.C. Victim’s Assistance Network (www.scvan.org) websites.

Domestic Abuse
South Carolina’s Protection from Domestic Abuse Act is a set of laws that protect people from physical harm, threats of harm, or criminal sexual conduct. These laws protect the following people: wives, husbands, non-married parents that have children together, former spouses, boyfriends or girlfriends that live together now or have lived together in the past.

The Family Court and Magistrate’s Court can help by providing an Order of Protection or a Restraining Order. There are two types of protective orders that can be issued in South Carolina. An order of protection and a restraining order. These orders are designed to help protect you from being hit, threatened, harassed, or stalked by another person.

An Order of Protection is an Order issued by the Family Court. An Order of Protection can temporarily prevent the alleged abuser from abusing, or threatening to abuse, from communicating with, or from molesting the person being harmed by the abuser. The court may also grant temporary custody, child support, and/or alimony, use of the family home, and property shared by the parties.

A Restraining Order is an order issued by the Magistrate’s Court. Restraining Orders are similar to Orders of Protection, except that Magistrates do not have authority to give the victim child support, alimony, use of the family home, or property shared by the parties. The Magistrate’s Court may issue an Order of Protection after Family Court business hours in an emergency situation.

Where can I get an Order of Protection or Restraining Order?
An Order of Protection may be obtained from the Family Court in any county. You can get the forms from the Clerk of Family Court. Petitions for a restraining order can be filed at the Magistrate’s office in your county. Forms are usually available at the Magistrate’s Office. You can get help in filling out the forms from your local domestic abuse shelter or a law enforcement victims’ advocate.

F. BASIC RIGHTS

Voting Rights
In order to vote, South Carolina law requires a person to register. To register, you must:

• Be a United States citizen
• Be at least 18 years old on or before the next election
• Be a resident of the state, county and precinct at the address you give on the application
• Not be under a court order declaring you mentally incompetent
• Not be confined in any public prison as a result from a conviction of a crime
• Have never been convicted of a felony or offense against the election laws. If you have been convicted, once the sentence is completed including probation or parole, or you have received a pardon, you can register.
• There is no length of resident requirement to register to vote

If you are not registered to vote, contact your county registrar’s office which is listed under your county’s government section in the telephone book under Voter Registration or Registration and Election Commission. Sometimes voter registration is conducted in public places such as shopping centers. Under certain circumstances, you can even register by mail, if you plan to vote by absentee ballot or if you are physically disabled.

You no longer have to present your voter’s registration card to vote in your precinct. As long as you are registered, you can vote upon showing a valid driver’s license or Highway Department photo I.D.

If you need assistance because of blindness, disability or inability to read or write, you can take anyone into the voting booth with you except your employer or an agent of your employer or an officer or agent of your union.

No patient of a nursing home, including those operated by the State Department of Mental Health, can be denied the right to register to vote, unless he has been found to be incompetent by the Probate Court.

A voter who is physically disabled, illiterate or blind may receive assistance in casting a ballot. A voter who is disabled or unable to access the polling place may vote in their vehicle. In some polling places, voters us a vehicle-height call button system placed at a designated parking area, which when pressed, notifies poll managers of the voter’s arrival. At others, poll managers monitor the designated parking area to look for curb side voters. The portability of the voting machine allows it to be brought to the vehicle. Additional information may be found on the South Carolina Election Commission website at http://www.scvotes.org/. They may be contacted at SC Election Commission, 2221 Devine Street, Suite 105, Columbia, SC 29205 or by phone at (803) 734-9060.

Jury Duty
Jury duty is an important civic responsibility and can be interesting. You can be exempt from jury duty if you are over 65. The exemption is not automatic and you must be excused by the Court. On the other hand, legal blindness does not automatically disqualify you as a juror.

Your employer cannot legally interfere with your service of jury duty or penalize you for serving as a juror.

If you are summoned as a juror and fail to attend, without sufficient excuse, you are subject to a fine. A telephone call to the appropriate clerk of court’s office will often help with any confusion you have with regard to the summons.
G. AGE DISCRIMINATION

Do you as an older worker have recourse against an employer who unfairly discriminates against you because of your age?

Yes. The Federal Age Discrimination in Employment Act (ADEA) protects certain applicants and employees 40 years of age and older from discrimination on the basis of age in hiring, promotion, discharge, compensation, or terms, conditions or privileges of employment. The ADEA is enforced by the Equal Employment Opportunity Commission (EEOC).

Under the South Carolina Human Affairs Commission (SCHAC) enforces state regulations.

The following employers are subject to the federal law: private employers with 20 or more workers; federal, state, and local governments; all employment agencies that serve employers who are subject to the law; and most labor organizations of 25 members or more. The South Carolina law applies to any employer who has fifteen or more employees for each working day in each of twenty or more calendar weeks in the current or preceding calendar year.

It is not unlawful to take action under the state law that is otherwise prohibited “…where age is a bona fide occupational qualification reasonably necessary to the normal operation of the particular business or where the differentiation is based on reasonable factors other than age.” (S.C. Code Ann. § 1-13-80).

Also, nothing in the state law may be construed to prohibit compulsory retirement of an employee who has attained sixty-five years of age and who, for the two-year period immediately before retirement, is employed in a bona fide executive or high policymaking position, if the employee is entitled to an immediate non-forfeitable annual retirement benefit from a pension, profit sharing, savings, or deferred compensation plan or a combination of these plans of the employer which equals in aggregate at least forty-four thousand dollars.

Actions that may constitute age discrimination include an employer dismissing, deterring, or refusing to hire, interview, or consider you for employment or promotion because of your age.

It is generally unlawful for apprenticeship programs, including joint labor-management apprenticeship programs, to discriminate on the basis of an individual’s age. Age limitations in apprenticeship programs are valid only if they fall within certain specific exceptions under the ADEA (Age Discrimination in Employment Act) or if the EEOC grants a specific exemption.

The South Carolina Human Affairs Commission (SCHAC) enforces state regulations.

If you believe that you have been discriminated against because of an unlawful reason, you should file a complaint with the EEOC at either their Greenville Local Office or their Savannah Local Office. You should also file a complaint with the SCHAC office in Columbia. Your complaint will be investigated by a specialist, who will try to resolve the problem. If that is not possible, the EEOC or SCHAC may begin court action. Few complaints are pursued in court by the EEOC or SCHAC, however. In most instances, you will have to take your own case to court with your own lawyer.

The foregoing discussion of age discrimination is general in nature and any individual questions should be directed to a lawyer, the EEOC or SCHAC.

The Americans With Disabilities Act

The Americans With Disabilities Act gives civil rights protection to individuals with disabilities which guarantees equal opportunity for individuals with disabilities in employment, public accommodations, transportation, public services, state and local government services, and communications.

Under the Americans With Disabilities Act it is improper for a private employer, state or local government, employment agencies and labor unions to discriminate against qualified individuals because of a disability. A qualified individual with a disability is an individual with a disability who, “with or without reasonable accommodation, can perform the essential functions of the employment position that such individual holds or desires.”

An individual with a disability is a person who:

- Has a physical or mental impairment that substantially limits one or more major life activities;
- Has a record of such an impairment; or
- Is regarded as having such an impairment.

An employer is required to make an accommodation to the known disability of a qualified applicant or employee if it would not impose an “undue hardship” on the operation of the employer’s business. “Undue hardship” is defined as an “action requiring significant difficulty or expense” when considered in light of a number of factors.

An employer is not required to lower quality or production standards to make an accommodation, nor is an employer obligated to provide personal use items such as glasses or hearing aids.

Charges of employment discrimination on the basis of a disability may be filed at any office of the U.S. Equal Employment Opportunity Commission.

H. SMALL CLAIMS COURT

Small Claims Courts are known as Magistrate's Courts in South Carolina. (Larger cities also have Municipal Courts which handle a limited type of criminal and traffic offenses.)

These courts handle small claims in a quick, less formal manner that the Courts of Common Pleas (civil) and General Sessions (criminal). Their purpose is to allow citizens of the state prompt access to an adjudicating body so that claims and disputes not large enough to justify the time and expense required in the Common Pleas and General Sessions Courts do not go unresolved.

Magistrate's Courts are located throughout the state on a county-wide basis. The number in each county varies with the population and the size of the county. To find the magistrates courts in your county, look in your telephone directory under county government.

Magistrate's Courts And Their Jurisdiction

The Judge, or magistrate, is appointed by the Governor and approved by the State Senate to be a magistrate for a particular district. Although his/her powers are somewhat limited due to the nature of the Court, a magistrate does have the right to hear and decide all cases over which he/she has jurisdiction, conduct certain
preliminary hearings in criminal cases, make arrests in certain cases, compel witnesses to appear at trial for the purpose of giving testimony, and punish persons guilty of contempt in certain cases.

Magistrate’s Courts have county-wide personal jurisdiction but can handle only cases involving persons who live in the county where the court is located.

They handle a number of different civil and criminal cases. They have jurisdiction over civil cases in which the punishment generally does not exceed a fine of $500, or imprisonment for not more than 30 days, or both (However, they sometimes preside over cases with higher fines and sentences).

Included in these offenses are such crimes as assault and battery, larceny, receiving stolen goods, or obtaining property under false pretenses. They also handle cases involving traffic offenses such as speeding, driving under the influence (first offense), and driving without a license.

Magistrate’s Courts handle civil cases when the amount sued for does not exceed $7,500 including cases arising on contracts for the recovery of money, actions for damages for personal injury or property damage, claim and delivery actions actions to have specific property taken or returned), and cases involving landlords and tenants.

Magistrate’s Court Process
All actions in Magistrate’s Courts are instituted by the filing and service of what is known as process. In a criminal action, this process is a warrant, which is issued by the magistrates and served upon the alleged offending party. In a civil case, this process is a Summons and Complaint, which is filed with the court and served on the defendant.

A party who is served with either a warrant or Summons and Complaint has the opportunity to respond to the charges or claims made against him or her. However, there are time limits which have to be met so as to protect your rights in court. A failure to meet these time limits may result in the giving up of the right to contest the charge — civil or criminal—brought against you. If you ever receive a warrant or Summons and Complaint, you should take action immediately.

Your Action
The action you need to take depends upon the nature of the charge or claim. In a criminal case, you have the right to appear at a certain time and answer the charge against you. In a civil case, you have the right to answer, either orally or in writing, the claim made against you. These rights are important and should never be voluntarily abandoned.

Following the filing of the appropriate legal documents, a trial date will be set. Prior to this trial, either party has the right to request that the trial be held before a jury rather than the magistrate. This request must be made in advance of the trial so that the Court has ample opportunity to have the jury selected and notified.

The Jurors
The jury is drawn from a pool of qualified electors (registered voters), who live in the area where the Magistrate’s Court is located.

The Trial
At trial for either a civil or criminal case, each side has the opportunity to present evidence to the magistrates or jury concerning his or her position. This evidence may be in the form of witnesses who actually come in and testify. If you need help in compelling these witnesses to appear, the magistrate can help you.

Evidence can also be documents which a party feels support his or her claim, which would include pictures of the dog that bit you and the coat with the holes in it; demonstrative evidence such as a drum similar to the one the policeman took away from you in the middle of the night; or scientific evidence such as the result of an experiment showing that the policeman’s radar was actually focused on a fast truck rather than your car when he gave you the speeding ticket.

Since the purpose of Magistrate’s Court is to provide a streamlined, less expensive way to resolve small claims, the rules of evidence — although applicable — are generally not as strictly applied. Additionally, the magistrate is more than willing to help a party in presenting his or her claim. Thus, you should not hesitate to offer any evidence which you have that supports your position.

The Right to Appeal
As is true with the Court of Common Pleas and General Sessions, there is a right to appeal from Magistrate’s Court in both civil and criminal cases. A party who feels that a decision rendered against him/her was wrong may appeal to the Circuit Court and ask that the presiding judge there review the case and decide whether the decision was correct. There are certain time limits which must be met and followed in an appeal, and you should familiarize yourself with them should you decide to appeal.

If There is No Appeal
If no appeal is made following a decision of the Magistrate’s Court, that decision becomes final and enforceable. In a criminal matter, if you are found guilty and sentenced to pay a fine, you will have to do that.

There are equally serious results on the civil side of Magistrate’s Court. When a judgment is rendered against a party, the magistrate — after a request from the winning party — is required to have a transcript, or record, filed in the office of the Clerk of the Circuit Court. Thereafter, a Writ of Execution may be issued on that judgment at any time within three years thereafter. “Execution” is a legal term which involves the levying of property for the purpose of satisfying a judgment. Such an execution could result in the taking of property from the person against whom the judgment is rendered for the purpose of having the property sold to satisfy the judgment.

No Time to Go to Court
Although Magistrate’s Courts handle only relatively small claims, their impact can, nevertheless, be quite substantial. As mentioned, these courts have the authority and jurisdiction to hand down certain criminal sentences which include payment of a fine and/or imprisonment and also have jurisdiction to render judgments against parties in civil cases in amounts up to $7500. An unjustified failure to appear may result in this happening. Therefore, if you are ever summoned to any court, no matter how small the claim, you should immediately contact the court, find out what is going on and take whatever action you need to take to protect your rights.

Appearing Without a Lawyer
Magistrate’s Courts are meant to be informal and are designed to provide a process for resolving small claims in an informal and prompt manner. Additionally, magistrates are charged with the responsibility of assisting persons who do not have lawyers to make sure that their rights are fully protected. Thus, it is possible to appear in Magistrate’s Court without a lawyer. Sample forms needed to pursue and respond to claims are available from the Magistrate Court.
The S.C. Bar has a publication, Your Guide to Magistrate’s Court, which includes forms and instructions. The guide is available on the Bar’s website at [http://www.scbar.org/PublicServices/FreePublications.aspx](http://www.scbar.org/PublicServices/FreePublications.aspx).

Nevertheless, it is not advisable to appear without a lawyer. Lawyers are trained to know the law and apply it to a particular situation. Their expertise can be invaluable in any court proceeding.

If you don’t know an attorney, call the Lawyer Referral Service of the South Carolina Bar at 1-800-868-2284 and ask for an attorney who handles your type of legal problem. A lawyer will meet with you to discuss your case and charge a consultation fee of $50.00 for the first 30 minutes.

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Part Three—Protective Services

A. REPRESENTATIVE PAYEES

What is a “Representative Payee”?

Sometimes people who are eligible for Social Security benefits—“beneficiaries”—need help managing those benefits. The person that the Social Security Administration (SSA) appoints to provide that help is called a “Representative Payee.” The SSA then sends the beneficiary’s monthly check to the Representative Payee, instead of directly to the beneficiary, and the Representative Payee is responsible for spending that money on behalf of the beneficiary, in the beneficiary’s best interest.

It is important to recognize that just because someone shares a bank account with you or has a power of attorney in your name that does not mean they are your representative payee for Social Security purposes. Similarly, the appointment of someone as your representative payee does not make them your legal guardian or conservator. Legal guardianship or conservatorship requires a court proceeding before a judge, and is explained in more detail elsewhere in this handbook.

How does a Representative Payee get appointed?

The law requires most minor children and all adults who have been adjudicated “legally incompetent” to have representative payees. Otherwise, you are presumed capable of managing your benefits. If there is some evidence that you might be unable to manage your benefits, though, the SSA may investigate and determine on their own to appoint a representative payee for you.

In some situations people can ask that a representative payee be appointed for someone else. If you are a resident in a facility, such as a nursing home or Community Residential Care Facility (often called an “assisted living” facility), the facility may ask to act as your representative payee. While often convenient, that can sometimes lead to conflicts with the facility management over how your benefits are spent, and you may prefer to ask that someone else act as your payee instead.

If you feel that a friend or family member of yours needs a representative payee, you can make that recommendation to your local Social Security office. You can also apply yourself to be a representative payee for someone else. Remember that representative payees have a long list of legal duties and (except in the case of pre-approved organizational payees) cannot collect any fee from the beneficiary in exchange for serving as a representative payee.

If you are a beneficiary and have been told that you need a Representative Payee, remember that you have some rights in the process. If the SSA decides you need a Representative Payee, you have up to sixty days to appeal that determination and argue to retain control over your benefits. (You can contact your local SSA office for more information on making such an appeal). You also have some input into who will be your representative payee. If there is some particular person—a friend, family member, legal guardian, or attorney—who you trust and would prefer to have as your representative payee, you should let the Social Security administration know that. Alternatively, there are several independent private organizations in South Carolina that will act as your representative payee in exchange for a small monthly fee.

I just became or want to become a Representative Payee. What do I have to do?
Representative payees are responsible for everything, related to benefits, that the beneficiary would do for themselves if they could. As a representative payee, you must determine the beneficiary’s needs and use the his or her payments to meet those needs, save money for them as appropriate, report any changes or events which could affect the beneficiary’s eligibility, keep and maintain records of all payments received and money spent, help the beneficiary get medical treatment as necessary, provide information to organizations that serve the beneficiary, complete written reports accounting for the use of funds, and return any payments to which the beneficiary is not entitled. You must also notify the Social Security Administration of any changes in your circumstances that would make it difficult for you to perform your duties.

It is also important to be aware of what a Representative Payee cannot do. A representative payee does not have authority over income from sources other than Social Security. A representative payee also cannot use the beneficiary’s money for the representative’s personal expenses, charge the beneficiary for services (unless specifically authorized as an organizational payee), put a beneficiary’s Social Security money in a bank account belonging to the representative payee or a third party, or keep money from the beneficiary’s account when no longer the representative.

As above, acting as representative payee is not the same thing as holding legal guardianship, conservatorship, or power of attorney. Unless the representative payee also falls into one of those categories, they may not sign legal documents, other than Social Security documents, on behalf of a beneficiary.

If you are concerned about the complexity of the rules governing representative payees, and feel it may be too much for you to handle, you may want to consider asking an organizational payee to step in and handle matters for you. You can find out information about organizational representative payees in your area by asking at your local Social Security office.

I’m Having Problems with My Representative Payee

Your representative payee has to use your money to help you and pay for what you need. If you think your representative is not doing that, you should talk with them about it and ask them to explain where your money is going.

If you think your representative payee is taking advantage of you stealing your money, you should call your local Social Security office and tell them. You can also call the Social Security Administration directly at 1-800-772-1213.

If you believe you no longer need a representative payee and can handle your own affairs, you can ask Social Security to re-evaluate you. If you are receiving Social Security Disability benefits, however, you may not want to do this. The Social Security Administration determines that your condition has improved sufficiently, they may re-evaluate your eligibility for disability payments, and you could end up losing your check entirely.

For more information

Most of the information in this chapter comes from the Social Security Administration’s web page on the Representative Payee program, online at http://www.ssa.gov/payee. If you have more questions, or want more detailed information, you may be able to find the answers there. You can also call the Social Security Administration at 1-800-772-1213.

For information about authorized representatives under SNAP, see: https://dss.sc.gov/content/library/manuals/snap.pdf

For information about “Protective Payees” under the South Carolina Family Independence Program, see: http://www.state.sc.us/dss/fi/fi_manual.pdf

B. ADULT ABUSE, NEGLECT AND EXPLOITATION

A major concern to many vulnerable adults and their families is the danger of abuse, neglect, or exploitation. Abuse is not always easy to recognize, and it isn’t always easy to figure out what to do if you if you suspect abuse may be occurring.

How to Recognize Abuse, Neglect, and Exploitation

The first problem is recognizing abuse, neglect, and exploitation when they occur. Extreme cases may be easy to recognize, but others may not be so obvious. This section should help you familiarize yourself with some definitions and examples so that you know what to look for.

“Abuse” can mean physical brutality (punching, biting, slapping, choking) but it can also include such things as sexual assault, psychological abuse (threats, harassment, humiliation), forced confinement, or over-medicating (doping someone into insensibility rather than providing reasonable medical care).

The most obvious indicator of abuse may be when someone says they have been abused by a caregiver, or when they flee from a caregiver or refuse to return to their home because a caregiver is present. Other indicators can include unexplained bruises, broken bones, or burn marks, repeated or frequent “accidental injuries” or references by the abused person to a caregiver’s “anger” or “temper.”

“Neglect” can be harder to spot. Generally, it means any situation where a responsible caregiver has failed to provide the medical care, goods, or services that were necessary to ensure the neglected person’s health or safety. Sometimes neglect is deliberate, but sometimes it happens because caregivers don’t know how to provide the care people need, don’t know what care is appropriate, or are simply overwhelmed.

Some “red flags” that may help you recognize someone may be a victim of neglect are untreated sores or rashes, inadequate or inappropriate clothing for the weather, an unkempt appearance, soiled or stained clothes, an absence of such necessaries as food, water, heat, or shelter, the presence of rotting or decayed food, or (in extreme cases) individuals left lying in urine or feces.

Similarly, if you are speaking with a caregiver and that person seems disinterested in the individual’s care, makes statements that underestimate or trivialize the individual’s injuries, will not allow you to talk to the individual alone or answers questions before the individual can answer for themselves, is clean and well-dressed while the individual is obviously uncared for, or talks extensively about the pressure they are under and what a burden the individual is, that caregiver may be neglecting to appropriately care for their charge.

“Exploitation” can be the most difficult of the three to spot. Stated simply, it means taking advantage of the individual. It can include forced labor, theft of an individual’s property or misuse of their credit cards, forced co-signing of loans, or the coerced purchase of goods or services for the benefit of the exploiter.

Watch for excessive or unexplained activity in an individual’s bank account, the isolation of an individual from other family members or sources of support, unexplained nonpayment of bills, a disparity between the individual’s assets and their living conditions, or sudden changes in wills, powers of attorney, or guardianship status.
Reporting
If you know or suspect that abuse, neglect, or exploitation may be occurring, you should report it to the appropriate authorities. The simple answer is “if you suspect that someone may be abused, neglected, or exploited, report it.” You’re never going to go wrong reporting suspected abuse. If you know or believe that abuse, neglect, or exploitation may be occurring, and you fail to report it, that abuse may continue, and people who could have been saved may end up severely injured as a result. You may even be opening yourself up to liability for failure to report (for more information on who is required to report, see S.C. Code § 43-35-25).

So, again, if you see or suspect abuse, report it to the appropriate authorities. Who that appropriate authority is can get complicated, though; it varies depending on where the alleged abuse, neglect, or exploitation occurred.

If the alleged incident took place in a residential facility contracted with or operated by the South Carolina Department of Disabilities and Special Needs or the South Carolina Department of Mental Health, then you need to report the incident directly to the Vulnerable Adult division of the South Carolina Law Enforcement Division (SLED). Their phone number is 1-866-200-6066. Examples of such facilities are Bryan Psychiatric Hospital, C. M. Tucker Nursing Care Center, or any of the local Centers run by the Department of Disabilities and Special Needs (Midlands, Coastal, Pee Dee or Whitten).

If the alleged incident took place in a private facility, such as a private nursing home or a community residential care facility (often referred to as “assisted living” facilities), then you need to report the matter to the South Carolina Long Term Care Ombudsman’s Office. You can use their state hotline at 1-800-868-9505. (For more information on the LTCO, see Section C).

If the alleged incident took place in a foster home or a private residence, you should report the matter to the South Carolina Department of Social Services. You can either report it to your local county DSS office or to the central State hotline at (803) 898-7318. Contact information for local county DSS offices can be found at https://dss.sc.gov/content/about/counties/index.aspx.

Finally, you can always report abuse, neglect, or exploitation by calling your local law enforcement agency (911).

After you have reported the incident to the appropriate authority, you may want to also call South Carolina Protection & Advocacy for People with Disabilities, a private non-profit that provides legal and other assistance to individuals with disabilities. They can be reached via a toll-free hotline at 1-866-275-7273, or on the web at http://www.pandasc.org/.

The information in this section was gathered from the following sources, which you may want to consult for more detailed information:

The Omnibus Adult Protection Act, S.C. Code §43-35-5-set, seq., which sets forth the definitions for criminal abuse, neglect, and exploitation and the various reporting requirements.

The “South Carolina Access” website, which has a very useful FAQ on abuse, neglect, and exploitation of vulnerable adults, available online at: http://scaccess.agis.com/AGModules/LearnAbout/ArticleView.aspx?mid=3018&tabid=0&articleid=2094&categoryrelationarticleid=10146

For a concise flyer that summarizes the relevant law on abuse, neglect, and exploitation, visit http://aging.sc.gov/SiteCollectionDocuments/S/SpotAbuseBrochure.pdf.

C. PROTECTIVE ORGANIZATIONS

State Long Term Care Ombudsman
The South Carolina Long Term Care Ombudsman is made up of the State Long Term Care Ombudsman, located in the Lieutenant Governor’s Office on Aging, and ten regional ombudsman programs located in the Aging and Disability Resource Center. The Ombudsman’s Office serves as an advocate for residents in long term care facilities such as nursing homes and community residential care facilities (often referred to as “assisted living” facilities) and can help facility residents in a number of ways. The Ombudsman’s Office does not charge for its services.

The Ombudsman’s office can be a powerful resource for information about your rights as a facility resident. If you have a complaint about a facility, and haven’t been able to get the facility to listen to you, sometimes they’ll listen to the Ombudsman’s Office. Try calling the Ombudsman’s Office and asking them to investigate your complaint and advocate for you. There is no charge for services provided by the Ombudsman’s Program.

In addition to acting as an advocate for facility residents, the Ombudsman’s Office is also the mandated investigator of all reports of suspected abuse, neglect, or exploitation in private long term care facilities. If you are aware of or suspect that abuse, neglect, or exploitation is occurring in a long term care facility, you should report it (you may even be legally required to report it) to the Office of the Ombudsman.

The Ombudsman Program is not a regulatory agency and has no direct enforcement authority. If appropriate, however, the Ombudsman’s Office can refer the results of their investigation to the appropriate regulatory, law enforcement or prosecutorial authorities.

The Ombudsman Program accepts help from volunteers. If you would like to volunteer with the Ombudsman, call the state office at 1-800-868-9095.

You can find contact information for your regional Ombudsman’s office in the following chart:

| REGION 1: Appalachia Greenville, SC | (864) 242-9733 (800) 434-4036 (outside Greenville County) | Serving: Anderson, Cherokee, Greenville, Oconee, Pickens and Spartanburg counties |
| REGION 2: Upper Savannah Greenwood, SC | (864) 941-8070 (800) 922-7729 (outside Greenwood County) | Serving: Abbeville, Edgefield, Greenwood, Laurens, McCormick and Saluda counties |
| REGION 3: Catawba York, SC | (803) 329-9670 (800) 662-8330 (outside York County) | Serving: Chester, Lancaster, York and Union counties |
| REGION 4: Central Midlands Columbia, SC | (803) 376-5389 (866) 394-4166 (outside Richland County) | Serving: Fairfield, Lexington, Newberry and Richland counties |
| REGION 5: Lower Savannah Aiken, SC | (803) 649-7981 (866) 845-1550 (outside Aiken County) | Serving: Aiken, Allendale, Bamberg, Barnwell, Calhoun and Orangeburg counties |
| REGION 6: Santee-Lynches Sumter, SC | (803) 775-7381 (800) 948-1042 (outside Sumter County) | Serving: Clarendon, Kershaw, Lee and Sumter counties |

(All numbers listed above do not charge for its services.)
You can make a complaint either over the telephone to (803) 545-4370 or in writing to
DHEC Health Licensing
2600 Bull St.
Columbia, SC 29201
(803) 545-4212 (Fax)

The Division of Health Licensing has authority over facility licensing and, if violations are found, can issue fines, require facilities to take corrective action, and even, in extreme cases, shut down facilities by revoking their license to operate.

Be aware that, because they receive a very high volume of complaints, it can sometimes take a very long time for DHEC to respond and investigate, and if an investigation does find a regulatory violation, it can take yet more time for DHEC to address the issue with the facility.

In some situations, such as those where there is an immediate danger of criminal abuse, neglect, or exploitation, you may need to report problems directly to law enforcement rather than to DHEC (although reporting to DHEC also may well be a good idea). For more information on reporting cases of abuse, neglect, or exploitation, refer to that section of this handbook.

D. GUARDIANSHIPS AND CONSERVATORSHIPS

IMPORTANT: The following discussion is very broad and should not be viewed as anything but a general overview of the guardianships and conservatorships. This discussion is not intended to replace advice from an attorney or other qualified professional when dealing with legal and other issues addressed.

There are cases where an adult person has lost the ability to provide for his or her own physical needs such as food, shelter, or clothing, or can no longer manage their financial affairs adequately. These situations may be a result of accident, physical or mental illness, or merely as a result of conditions associated with advanced age. When this happens, it may become necessary for family members or some other person interested in their welfare to intervene and seek the appointment of a guardian or conservator in order to ensure that the impaired person and their property is protected.

The terminology and laws used in appointing guardians or conservators are fairly complex, and the discussion below is intended to give you a general idea of what is involved with a guardianship or a conservatorship.

Some Common Terms

Guardianship—A court ordered legal relationship where a competent adult is appointed to care for and make personal decisions on behalf of a minor or incapacitated person (the ward). These decisions are essentially those traditionally made by a parent and include where the ward will live and the medical care the ward will receive. Guardianship proceedings for minors are in the Family Court, and guardianship proceedings for incapacitated adults are in the Probate Court. These proceedings may become necessary for an adult when the person, due to advanced age or physical or mental incapacity, becomes unable to make important decisions on his or her own behalf.

Guardian—The competent adult appointed by the court to carry out the duties of a guardianship. (A natural or adoptive parent is considered the natural guardian of a minor child, and that relationship exists without a
court order. A guardian would typically be appointed for a minor only when there is no living parent willing or able to care for the child.)

Protected Person—The minor or the incapacitated person for whom a conservator has been appointed.

Ward—The minor or the incapacitated person for whom a guardian has been appointed.

Conservatorship—A court ordered legal relationship where a competent adult or entity is appointed to make financial decisions for a minor or incapacitated adult (the protected person) and care for and manage the property or estate of that person. These decisions typically include all decisions regarding the protected person’s property, bank accounts, and bills. Unless a guardian has also been appointed, the protected person is otherwise free to make his or her own decisions concerning personal matters.

Conservator—A person appointed by the probate court to make financial decisions for and manage the property or estate of a protected person.

Guardian ad Litem—A person appointed by the court who is authorized to represent the alleged incapacitated person’s interest in a matter being heard before a court or other official forum, including proceedings seeking the appointment of guardians and conservators for that person. Oftentimes a court will appoint an attorney to act as both the guardian ad litem and attorney for a minor child or incapacitated adult in a particular matter which is being heard in court.

Testamentary Guardian—A person appointed as guardian of a minor child or incapacitated adult pursuant to a provision in their parent’s will.

Obtaining a Guardianship or Conservatorship

The probate judge has the authority to appoint conservators for minors or incapacitated adults, and guardians for incapacitated adults. As explained previously, guardians for minors are appointed in the family court.

The appointment of a guardian for an incapacitated adult is started by filing the proper petition with the probate court in the county where the incapacitated person is present or resides. The probate court will often appoint an attorney to act as guardian ad litem for the purpose of protecting the ward’s interest during the legal proceedings and to insure that all due process rights are protected. Due process rights can include representation by counsel, notice of the proceedings, opportunity to cross-examine witnesses, and the opportunity to present evidence at the proceedings. A probate judge hears all cases in probate court. There is no jury.

The person bringing the action (the petitioner) generally has some relationship to the alleged incapacitated person, such as a parent, custodian, or relative. Any person interested in the welfare of alleged incapacitated person may file a petition. Under some circumstances, a state agency or hospital may petition for the appointment of a guardian for someone in its care and custody when there is an immediate need and no family member is available or willing to assist the incapacitated person.

At the hearing, clear and convincing evidence must be presented to demonstrate or prove that the alleged incapacitated person needs a guardian. If the person is incapacitated to the extent that he or she cannot make or communicate responsible decisions, the court will need evidence to prove this. Such evidence usually comes from qualified medical or nursing professionals.

If the probate court finds it is necessary or desirable to have someone provide or assist with the care and supervision for the incapacitated person, the judge will appoint a guardian. In most cases the court appoints the ward’s parent or other close relative, if they are competent, available and willing to serve, unless it is shown that someone else would better serve the ward’s interest. If the judge finds that the ward is totally incapacitated, the guardian will have full guardianship powers. If the judge finds that the ward is partially able take care of himself and make some responsible decisions, the guardian may be given limited guardianship powers.

The appointment of a conservator for an alleged incapacitated person is also started by filing the proper petition with the probate court in the county where the incapacitated person resides or has property. The procedures for the appointment of a conservator are very similar to those for the appointment of a guardian.

A conservator will be appointed where the court finds that the person to be protected is incapable of managing his or her property or financial affairs.

Conservator and Guardian Duties

The positions of conservator and guardian involve a fiduciary relationship. These are positions of the very highest trust and loyalty, and they involve obligations to act in good faith and solely in the best interest of the protected person or ward. The conservator and guardian are not permitted to gain any personal profit or advantage from dealings with the ward or the ward’s property or estate.

A conservator must file a bond with the probate court, unless the court for good cause shown waives the bond. For instance, a court might waive bond if the assets are held in an approved protected account in a manner that prevents their unauthorized disposition.

The conservator must report to the court, on an annual basis, all transactions affecting the protected person’s estate. Although it might not be necessary to get the court’s approval prior to spending money from the protected person’s estate, the conservator may wish to get court approval before spending large sums of money. The conservator can be held personally liable for improper expenditures, and a conservator may be removed for cause if they fail to act in the best interest of the protected person. A conservator may also be found in contempt of court for intentionally failing to properly account for the protected person’s estate.

The guardian must also report to the court on an annual basis. This report includes answers to questions concerning the ward’s living arrangements, medical condition and health care providers.

Guardianship Alternatives

Sound legal advice should be sought when considering whether conservatorship or guardianship is necessary for your impaired relative or friend. Serious consideration should be given to the alternatives to such appointments. Some other approaches to assisting an impaired person are a trust, a durable and health care power of attorney, a representative payee, living will, in-home and community based services available from local service providers, or the use of the range of other protective services available through the Department of Social Services. These alternatives are discussed in other parts of this handbook. For your own estate planning purposes, you should investigate these services and alternatives now while you still have the required mental capacity to execute certain documents including a valid durable power of attorney, living wills or trust should you wish to use one of these estate-planning tools.

E. CIVIL COMMITMENTS

Civil Commitment is the process by which treatment can be imposed upon an individual who does not consent voluntarily to treatment. The commitment process is typically conducted through the authority
of the Probate Court. All of South Carolina’s 46 counties have a Probate Court. Some counties have information on the Internet on the commitment process and how to initiate that process. Typically the commitment process will begin by contacting your Community Mental Health Center. If you know someone who has a mental illness or is addicted to drugs or alcohol and is endangering himself or others and is unwilling to voluntarily get help, contact your local Mental Health Center. If there is an emergency, contact 911.

In addition to the Probate Court and mental health providers, civil commitment also frequently involves law enforcement. An individual, who does not wish to be committed or to be examined for potential commitment, may have to be picked up by law enforcement and transported to an examination. The individual is NOT under arrest, and only a medical doctor can determine whether someone meets the criteria for an emergency admission. Only a Judge can order someone to treatment.

In South Carolina there are four types of civil commitment:

• Commitment to mental health treatment for adults. S.C. Code §§ 44-17-410 through 900.

• Commitment to mental health treatment for children. S.C. Code §§ 44-24-10 through 280.


• Commitment (or involuntary admission) to facilities, programs, or services provided by the Department of Disabilities and Special Needs (“DDSN”). S.C. Code §§ 44-20-450 through 460.

All forms of commitment represent severe restrictions on an individual’s liberty and should only be used as a last resort. Commitment involves a number of procedural protections, which are common to most forms of commitment. Some of the protections include:

• Emergency admission requires both a sworn statement (an Application or an Affidavit) and a Certificate completed by a licensed medical doctor. These documents must show an immediate need for inpatient treatment to prevent “serious harm.” S.C. Code §§ 44-17-410; 44-24-60; 44-52-50.

• An individual can only be admitted for emergency treatment (detained) for up to 24 hours without being seen by a medical doctor. S.C. Code §§ 44-17-430; 44-24-70; 44-52-50.

• If an individual remains detained after seeing a doctor, the Probate Court must review the affidavit and the report of the examining doctor (Certificate) to see if there is probable cause to continue emergency detention of the individual. This review must be done within 48 hours (excluding Saturdays, Sundays, and Holidays) of receiving the documents. S.C. Code §§ 44-17-410; 44-24-60 (F); 44-52-60 (B).

• The right to notice of the hearing. S.C. Code §§ 44-17-420; 550; 44-24-100; 44-52-80.

• The right to an attorney. If an individual does not have an attorney, the Court will appoint an attorney. S.C. Code §§ 44-17-530; 44-24-90 (C)(D); 44-52-60 (E).

• An individual should only be committed if there is clear and convincing evidence that they meet the criteria for commitment. S.C. Code §§ 44-17-580 (A); 44-24-140 (B); 44-52-110.

• The right to further Court review or appeal. S.C. Code §§ 44-17-620; 44-24-180.

Mental Health Commitment–Adults
Commitment to mental health treatment is the most common form of commitment. The law in South Carolina lays out two processes for mental health commitment: (1) emergency and (2) judicial. S.C. Code §§ 44-17-410 through 620. The law also creates a process for voluntary admission to a psychiatric hospital. S.C. Code §§ 44-17-310 through 340. If involuntarily committed, an individual may be committed to inpatient treatment or outpatient treatment or both. S.C. Code § 44-17-580 (A)(2). Inpatient treatment occurs in a psychiatric hospital, and outpatient treatment is with a mental health center or a private mental health professional. For more information on mental health commitments, please look at the Fact Sheet found in the Appendix to these materials.

Mental Health Commitment–Children
A child, who is under the age of 16, can receive mental health treatment with the consent of the child’s parent or legal guardian. S.C. Code § 44-24-4(A)(2). If a child will not cooperate with treatment, or the child is over 16, the law lays out a process for commitment of children. The process includes the same procedural protections for children as for adults.

Commitment to Drug and Alcohol Treatment
Like adult mental health commitments, commitment to treatment for drug and alcohol abuse may be through an emergency process or a judicial process. In either case, the individual must be found, by clear and convincing evidence, to be “chemically dependent.” S.C. Code § 44-52-110. “Chemical dependency” means a chronic disorder manifested by repeated use of alcohol or other drugs to an extent that it interferes with a person’s health, social, or economic functioning. . . . S.C. Code § 44-52-10 (1). An individual may be found to be in need of emergency commitment if she “poses a substantial risk of physical harm to [herself] or others if not immediately provided with emergency care and treatment.” S.C. Code § 44-52-10 (2). Involuntary commitment for either the judicial or emergency process is only appropriate when an individual is found chemically dependent and in need of involuntary commitment.

“Chemically dependent person in need of involuntary commitment” means a person who is suffering from chemical dependency as demonstrated by:
(a) recent overt acts or recent expressed acts of violence;
(b) episodes of recent serious physical problems related to the habitual and excessive use of drugs or alcohol, or both;
(c) incapacitation by drugs or alcohol, or both, on a habitual and excessive basis as evidenced by numerous appearances before the court within the preceding twelve months, repeated incidences involving law enforcement, multiple prior treatment episodes, or testimony by family or by members of the community known to the person relating to a lifestyle adversely affected by alcohol or drugs, or both.

S.C. Code § 44-52-10 (1).
Again, an individual being committed to treatment for chemical dependency is entitled to most of the same protections as an individual being committed to treatment for mental illness.

Involuntary Admission (Commitment) to Programs or Services Operated by DDSN
DDSN provides services to individuals with intellectual disabilities, related disabilities, head injuries, and spinal cord injuries. S.C. Code § 44-20-240. Anyone can apply for services from DDSN. However, the Probate Court and the Family Court both have jurisdiction to conduct proceedings to involuntarily admit an individual to a facility, program, or services operated by or provided by DDSN. S.C. Code § 44-20-450.
Involuntary admission is initiated by the filing of a verified petition. “Verified” means that the petition is signed under oath. Only certain interested parties may file a petition. For example, a relative may file a petition, but not a friend. Notice has to be sent to a list of various interested persons. Whether the individual must be notified is a matter the Judge gets to decide. However, the Judge must ensure the individual is represented by an attorney. A Guardian ad Litem may also have to be appointed in some cases. S.C. Code § 44-20-450. Whether an individual is involuntarily or voluntarily admitted to their programs, DDSN must evaluate all their clients and recommend and provide “the least restrictive level of care possible.” S.C. Code § 44-20-480.

Part Four—Financial Planning:

IMPORTANT: This publication is intended to provide only a general overview of issues raised and addressed herein, and is not intended to take the place of legal and financial advice from trained professionals, including attorneys, certified public accountants, and specialists certified in estate planning who are able to take into account federal and state tax issues and pertinent probate and estate laws and statutes.

A. ESTATE PLANNING

It is important for everyone to have an estate plan in place. In addition, there are reasons or changes in circumstances that would lead you to review or revise your current estate plan. Some of these reasons could be a change in marital status, your retirement, the birth of a new grandchild, or a move to a new state. Such changes in your personal circumstances call for review of an existing will or estate plan or for making a will or estate plan. In addition, there are legal changes that would necessitate a review or update of your estate plan. For example, changes in the federal and state tax laws, as well as changes in the state inheritance and probate laws should remind you to review your estate plan, or to make one. Without a proper estate plan in place, you are unable to make decisions yourself concerning your property, health care wishes or financial decision making.

Each estate plan should be tailored strictly for you and your particular circumstances. There are simple steps you can take in beginning to formulate an estate plan that involve you gathering together information on your assets, debts and family members.

The first step would be to gather information concerning your assets or property. It is a good idea to list on a piece of paper the following: family home or other real estate, bank accounts, certificates of deposit, stocks, bonds, business interests, life insurance (be sure to include group insurance), pension plan death benefits, IRAs or Keogh plans, profit sharing benefits, and other things of value. This is good information to keep together for your family in the event something was to happen to you.

Next, subtract your liabilities such as mortgages, loans, and credit card debts. The results will be your “net estate.” Even if this number is small or a negative, you still need an estate plan. If the net estate exceeds a certain value set by the federal government, you may be subject to estate taxes. In 2011, the estate tax only affects estates that are valued over $5 million dollars. This number is subject to change and in the past has ranged from $1 million to $3.5 million. Elsewhere in this handbook is a section on estate and gift taxes which you should read carefully if your estate may be affected.

After you have listed your assets and liabilities, list your family members and their relationship to you. Do you want your family to inherit your property? Are there special circumstances such as the need for a special needs trust for a beneficiary or is there a particular family member that would not be able to handle any property if you left it outright to him or her outright? This could signal the need for a trust of some sort.

It is important to think about who will be in charge of your estate to collect your assets, pay your debts, and make sure that whatever property is left is delivered to those persons specified in your will. This is a fiduciary responsibility and in South Carolina we call this individual the Personal Representative. The Probate court
B. WILLS

You accomplish two principal objectives in your will. In a will you can (1) dispose of your property as you see fit, subject to some exceptions, and (2) you can nominate a personal representative to administer your estate.

In your will, you can give everything you own, including land, automobiles, household items and money, to anyone you want. However, if you are married, under the South Carolina elective share law your surviving spouse has a right to claim as much as 1/3 of the property disposed of by your will, whether the will contains any provisions for spouse or not. If you leave less than 1/3 of your estate to your spouse, your spouse can claim additional property equal to the difference between one third and the amount bequeathed to the spouse in the will. If you leave more than one third of your estate to your spouse, your spouse cannot claim any additional property.

However, the 1/3 elective share can be waived in writing by the beneficiary spouse after full disclosure of assets. This is a complicated process that requires an attorney represent both parties.

There are several parts to a will, but the primary sections that deal with giving away the property are called specific bequests, general legacies and the residuary. A specific bequest is a gift of a particular or specific thing, such as a lamp, table, ring or watch. A general legacy is a gift of a group of things that meet a particular description, such as a gift of all your stock. A cash legacy is a general legacy. A residue provision is a gift of all your remaining property not otherwise specifically disposed of in your will.

In addition, your will can provide that in the future (after you sign your will) you may make a written or signed memorandum in which you specify how certain kinds of personal property items such as household furniture, jewelry, personal effects, china, silver, tools, automobiles, etc. are to be disposed of. The written memorandum must be signed and dated (the will can also refer to a written or signed memorandum already in existence before the will is signed). If the will contains such a statement, then later, you may write out and sign such a memo and it will be legally effective to dispose of such items. This procedure may be used only for tangible personal property and not real estate, nor can it be used to give away money bequests, evidences of indebtedness, documents of title, stocks and bonds or other securities, or property used in a trade or business.

If you die without a will, your estate will be distributed according to a scheme set out in the statutes known as the Intestacy Statutes. A person dying without a will is said to die “intestate.” The intestacy distribution scheme is roughly as follows:

- If there is a surviving spouse and no surviving children, then the spouse takes the entire estate.
- If there is a spouse and children, the spouse takes half and the children divide the other half among themselves.
- If there are children but no spouse, then the children divide the entire estate among themselves.
- If a child predeceased the deceased person but left children or other lineal descendants (or issue) of the decedent, then the issue take their share.
- If there is neither spouse nor children or other issue, the estate passes to parents, and if none, then to issue of parents, and if none, then to grandparents, and if none, then to great-grandparents, and if none, then to issue of great-grandparents.

Personal Representative

Another objective your will can accomplish is to nominate a person to serve as your personal representative. The work of the personal representative falls into three categories. The personal representative must (1) collect your assets, (2) pay your debts and funeral expenses, and (3) distribute your property as provided in your will, or if you have no will, then according to the intestacy scheme (see above).

A personal representative, to be appointed as such by the probate court, must be over the age of 18 years at the time of appointment. With certain exceptions, all personal representatives of persons who die without a will must post bond. If the Personal Representative of a person who dies without a will is also the sole heir of that person, or if all the heirs consent, no bond is required. You may waive the bond requirement in your will.

Frequently, a spouse is nominated as a personal representative. Adult children are often the next choice. Banks having trust departments can serve as personal representative. Attorneys, accountants and other persons may be logical choices but you are free to nominate whomever you wish. You should not only name a primary personal representative, but also some alternatives to serve if the primary representative cannot serve or dies in office.

To make a will, you must be of “sound mind,” over age 18 and the will must be in writing, signed by you and witnessed by two witnesses. The witnesses should be persons who will not receive property under the will. Otherwise, they may forfeit their legacies under the will. The other provisions of the will remain valid, however, under such circumstances.

The exact procedure in South Carolina to sign and witness a will is strict and a failure to follow the rules exactly can result in an invalid will. Therefore, it is strongly suggested that you consult with an attorney. Simple wills are not expensive, and it is easy to make mistakes or leave out important points in writing your own will.

You can change or revoke your will at any time before you die, so long as you are “of sound mind.” By making a will, you do not lose the right to change your mind at a later time and revoke the will and make another will.

If you have a will, you should not write on the will any changes that you might like to make. Such writings in general cannot make a change in your will but the writing may revoke the entire will or parts of it without replacing the will or the revoked parts. The very best way to alter or cancel a will is by another will or codicil. A “codicil” is an amendment or change to a will that must be prepared and executed just like a will, and signed by you at a time when you are of “sound mind.”
A will can be revoked by you at any time by tearing it up or by making a new will that says it revokes the old. In addition, certain things you can do, unrelated to your will, can revoke or change a part of your will. For example, if you obtain a divorce, South Carolina law automatically revokes those provisions in your old will relating to your divorced spouse. If you make a will and then get married, it is possible that your new spouse may be entitled to your entire estate, or half of your estate if you are survived by issue.

Finally, some do’s and don’ts in making a will:

DO choose witnesses who are younger than you and who are likely to remain in close physical proximity to you.

DO have the witnesses write their addresses next to their signatures.

If you leave specific items of property to anyone, do describe these items as clearly as possible.

DO provide the full names and addresses of those persons to whom you leave anything so that your Executor will be able to find those persons more easily.

DO NOT choose as a witness anyone to whom you are leaving something in the will.

DO NOT sign a will that contains erasures, insertions, or marked out words or that is torn or illegible.

DO NOT write a will in pencil.

**Joint Property Ownership**

With or without a will, your family will be faced with a Probate Court delay before your property is legally distributed following your death. Real property in joint ownership with right of survivorship and joint accounts or payable on death accounts do not pass through probate. Although jointly owned property is not part of your probate estate, it is part of your taxable estate, and therefore cannot be ignored when making an estate plan. Because property held in joint ownership with survivorship does not pass through probate, you may be tempted to use joint ownership to distribute your estate instead of a will, with the idea of sparing your family the delay of probate court proceedings. This may or may not be prudent depending on your personal circumstances. It may be better to set up a trust to handle the property and help avoid probate.

Joint ownership is a fixed and rigid system that does not allow for changes in circumstances. It may give another person equal control during your lifetime over whatever property you decide to place in joint ownership. For example, a joint owner of your bank account can write checks and use all the money in that account while you are still living without your permission, even though you may intend for that person to have the money in that account only after your death.

If you put real estate in joint ownership with the right of survivorship, you must do so by a deed, and South Carolina is very strict as to exactly what words must be used in making such a deed. Once the real estate is in joint names with right of survivorship, if you ever decide to sell or mortgage the real estate, you must have the permission of the other person whose name you put on the survivorship deed.

Adding a name to a title or deed to create a joint ownership of real estate may negatively affect your Medicaid or other benefit eligibility, since the property will be treated as an asset for each owner. A husband and wife who own everything jointly will still need a will in the event they die simultaneously or to dispose of assets on the survivor’s death.

Additionally, if you use a will to leave your property to someone, you can always change the will or sell the property. Once you have deeded the property to be owned jointly with or without survivorship, you must have the consent of the joint owner to sell the property. Moreover, you cannot leave such property in your will to anyone unless you survive the co-owner.

Keep in mind that using joint ownership as a means of helping your family avoid probate after your death may result in causing you considerate problems in your lifetime. Used in addition to a will, however, joint ownership can be a useful device in helping distribute your estate after you die, but be certain that you know the consequences of joint ownership.

Again, as with any aspect of estate planning, you should consult with an attorney and other qualified professionals before making any final decisions.

**Life Insurance**

Life Insurance benefits are payable to the beneficiary named in the policy. If on a life insurance beneficiary designation, you name a specific person or persons as your life insurance beneficiaries, then at your death the proceeds of the policy will be paid to that specific person or those persons (called the beneficiaries). If you later attempt to bequeath those same proceeds in your will to someone else, such a bequest may not be effective. To change the beneficiary of a life insurance policy, you should use the written form issued by the insurance company or you can make the insurance policy proceeds payable to your estate. If you do that, then you can specify in your will the beneficiary who is to receive those proceeds.

You should consult with an attorney before naming your estate as the primary beneficiary of life insurance proceeds as the funds in your estate will be subject to creditor claims against the estate.

If the beneficiary of one of your life insurance policies should die before you do, then in some cases, under the terms of the policy, the proceeds may be payable automatically to your estate. For that reason, you may wish to place an alternate beneficiary on the beneficiary designation form. In addition, you may also wish to provide in your will what is to happen to the insurance proceeds if all of the named beneficiaries of your policies die before you do.

In South Carolina, life insurance proceeds payable to someone other than your estate are not subject to probate costs or delays, although they must be reported to the probate court. However, all life insurance proceeds, no matter to whom payable, will be counted as part of your estate for tax purposes if you owned such policies at the time of your death.

**Trusts**

A trust is a flexible estate planning tool by which a person (or bank, called the “trustee”) owns and manages the assets of one person (sometimes called the “Settlor” or “Grantor”) for the benefit of another person (the “Beneficiary”).

Trusts have a variety of purposes. In some cases, they are used to provide money management to a person unable to effectively manage finances. In other cases, the principal purpose of a trust may be to minimize estate or gift taxes. Common types of trust that are useful tools when planning for incapacity include testamentary living (or inter vivos), discretionary, luxury, sprinkling, and life insurance.

Because the laws governing trusts are complex, require thorough investigation and careful drafting, you should consult with an attorney before establishing a trust.
C. MEDICAL DECISION MAKING

Recent advances in medical technology have presented patients and their families with numerous choices regarding the patient's care. These choices are difficult enough to face when the patient is mentally alert and able to make, or at least participate in, these decisions. When the patient is no longer capable of making decisions or communicating his wishes, these decisions can be agonizing for remaining family members.

You have the right to make all decisions about the health care you receive. At some point, you may be unable to make or communicate those decisions yourself. The best way to help ensure that your wishes are followed is to sign a document that expresses your desires. Such a document is generally called an “advance directive.”

The living will and the health care power of attorney are two kinds of advance directives that are widely recognized. Forms for both documents are in state law. Blank copies may be obtained from the Commission on Aging, Aging and Disability Resource Center, Local Service Providers, the Joint Legislative Committee on Aging and the Long Term Care Ombudsman’s Office. Hospitals and other health care institutions also have these forms.

**Patient Self-Determination Act**

The Patient Self-Determination Act requires all Medicare and Medicaid provider organizations (specifically hospitals, nursing facilities, home health agencies, hospices, and prepaid health care organizations) to do essentially six things:

1. Provide written information to patients at the time of admission concerning the right to formulate advance directives, right to refuse or accept medical or surgical treatment and rights under South Carolina law.
2. Maintain written policies and procedures with respect to advance directives (living wills and health care powers of attorney) and to provide written information to patients.
3. Document in the person’s medical record whether or not the person has signed an advance directive.
4. Ensure compliance with the requirements of state law (whether statutory or as recognized by the South Carolina courts).
5. Provide for education for staff and for the community on issues concerning advance directives.
6. Never discriminate against a patient based on whether or not they have an advanced directive.

**Note:** While signing an advance directive is a good idea, the act does not require that you have an advance directive or that you sign one before being admitted.

**Living Wills**

Of concern to many people is the thought of being placed on life support systems and being kept alive only because of a machine. Some feel this would be dehumanizing because it involves loss of dignity. In response, the South Carolina Legislature adopted the Death with Dignity Act permitting individuals to sign a document called a “Declaration of Desire for Natural Death,” often known as a “Living Will.”

The living will is the most widely known advance directive. It is a document that you sign while competent in which you permit your attending physician to withdraw life-sustaining treatment if you are terminally ill or permanently unconscious. Some trusted family member, friend or even your doctor should be given custody of the declaration after you have signed it. When using the form set forth in the Death with Dignity Act, you must follow the instructions very carefully in regard to the number of witnesses and those persons who can serve as witnesses. The declaration does require notarization. After signing, you can revoke the living will by tearing it up, by signing a written revocation, or by telling your attending physician.

**Health Care Power of Attorney**

A durable power of attorney for health care decision making gives an agent the power to make health care decisions for you when you are unable to make those decisions for yourself. Such powers may be very broad, covering all medical decisions, or may be limited to specific medical matters.

The person you appoint (your “agent”) should be someone you trust who knows how you feel about your health care. You should also name an alternate in case your agent is unavailable or unable to serve. Talk to the persons you choose in order to be sure they are willing to serve and to ensure they know how you feel about your health care.

When using the state form, at least two persons must sign the document as witnesses. Like the living will, certain persons cannot serve as witnesses. You do not have to file your health care power of attorney in the public records for it to be valid.

**Five Wishes Document**

A non-profit organization called Aging with Dignity introduced a document called Five Wishes to citizens of Florida in 1997. Since then Five Wishes has been used by many around the nation to allow people to express how they want to be treated if seriously ill and unable to speak for themselves. It addresses not only medical decisions, but also personal, emotional and spiritual wishes. Five Wishes is valid in South Carolina if it is notarized and if it meets the witnessing requirements of a health care power of attorney.

**Adult Health Care Consent Act**

The Adult Health Care Consent Act (S.C. Code Ann. § 44-66-10, et seq.) provides a process for making health care decisions for a patient who is unable to consent, but who did not sign an advance directive. “Unable to consent” means the patient is unable to appreciate the nature and implications of the patient’s condition and proposed health care, to make a reasoned decision concerning the proposed health care, or to communicate that decision in an unambiguous manner. A patient’s inability to consent usually must be certified by two licensed physicians.

The law establishes an order of priority for those who may make health care decisions for a patient who is unable to consent. Basically the Adult Health Care Consent Act puts into law our ideas on “next of kin.” The first priority is given to a court-appointed guardian; second, to an agent under a durable health care power of attorney; third to the person’s spouse; fourth, to the person’s parents and adult children; fifth, to the person’s adult siblings, grandparents, and adult grandchildren; sixth, to any other relative by blood or marriage who reasonably is believed by the health care professional to have a close personal relationship with the patient. In addition, the Act provides for exceptions; health care may be provided without consent where there is serious threat to the health of a patient or to relieve suffering.

D. PROBATE AND ADMINISTRATION

When a person dies, there is a process for paying the decedent’s debts and distributing the estate to the beneficiaries named in the will or, if there is no will, to the decedent’s heirs. This process of estate administration is generally done through the probate court in the county in which the decedent was living at
the time of death. Although the probate court supervises the administration of the estate, someone needs to be appointed to handle the process. That person, called a personal representative, has the duty to perform the work necessary to settle the estate.

When a decedent leaves a will, the original will needs to be presented to the probate court within 30 days of death. It can then be proved, or probated. This is done by an order of probate. In some cases, the probate court may require the testimony of a witness, but generally, if there is no will contest or dispute, such testimony is not required. In most cases, the will is proved, or probated, at the same time that the Personal representative is appointed by the probate judge.

The personal representative is responsible for collecting any monies due the decedent or the estate and for collecting and valuing the assets the decedent owned at the time of death. The Personal representative will report those assets, showing the fair market value as of the date of death, on an inventory form filed with the probate court within 90 days of the personal representative’s appointment.

The personal representative must also ensure that an advertisement or notice is published in the newspaper giving notice to any creditors of their opportunity to file claims against the estate. Creditors generally have one year from the date of death to file claims against the estate. If there is a question about the validity of a claim, there is a process in the probate court where either the creditor or the personal representative can ask the probate judge to determine if a claim is valid. The personal representative has a legal duty to pay all valid claims.

The personal representative also has obligations to taxing authorities. The personal representative must file income tax returns for any year for which the deceased person did not file these returns. If the value of the decedent’s property that is counted for estate tax purposes is over the amount set for the year in which the decedent died, then a federal estate tax return must also be filed within 9 months of death. If the estate earns income from estate assets during the administration of the estate, the Personal representative must also file income tax returns for the estate.

After all valid estate claims and all taxes have been paid, the Personal representative can then distribute the estate. If the deceased person left a valid will, then the remaining assets must be distributed as provided in the will. If there was no will, the remaining assets are distributed to the heirs according to the intestacy statutes. (See Will, Section B above.) The Personal representative must also file an accounting showing the collection of estate assets and income, the payments made and the distribution of the remaining assets.

When all these responsibilities have been completed, the estate is considered to be settled, and the probate court will enter an order closing the estate and terminating the appointment of the Personal representative. If there is a dispute between the personal representative and the beneficiaries or among the beneficiaries, a final hearing is sometimes required before the judge will enter the order closing the estate. However, in the majority of cases a final hearing is neither requested nor necessary.

In administering an estate, the Personal representative may need to obtain help from a qualified attorney. This is advisable when the estate has complex issues, when it involves transfer of title to real estate, or when it is fairly sizeable. The probate court will often let you know when the assistance of an attorney is needed. Certain attorneys are certified by the South Carolina Supreme Court as specialists in probate issues. You can obtain a list of those attorneys from the probate court or from the South Carolina Bar.

E. POWERS OF ATTORNEY

A power of attorney is a written document in which one person (called the “principal”) authorizes another person (called the “attorney-in-fact” or the “agent”) to act for him. A power of attorney can be a very useful tool in the event you become unable to conduct your own personal business. If you find it difficult to go to the bank to deposit or cash checks or to take care of other business because of physical illness, disability, or lack of adequate, convenient transportation, you may appoint a trusted person to act for you by using a power of attorney.

The power of attorney is not usually given not to an attorney at law but to a friend or relative. Great care should be exercised in choosing the agent because the power of attorney can be misused by a negligent agent or abused by an unscrupulous agent. In such cases, you may lose money and your only remedy might be a costly and difficult lawsuit against the agent to recover your money or property. That is a situation you certainly want to avoid.

The principal must sign the power of attorney when the principal is competent to understand and execute contracts. If the proposed principal is not competent to sign the power of attorney the only alternative may be to have a conservator appointed in the probate court. (See Part 3 D–Protective Services, Guardianship and Conservatorship.)

Through the power of attorney, the principal can give the agent general power—the ability to conduct all the principal’s business, or special powers—the ability to transact only a particular type of business for the principal. No matter whether the power of attorney is general or special, it should specifically state the powers granted to the agent. If the language in the power of attorney is too vague, it may not be honored by banks or other institutions and could lead to abuse by the agent.

The acts of the agent are binding upon the principal so long as the power of attorney is effective. The principal can revoke the power of attorney at any time. The revocation should be in writing and communicated to the agent and to all persons or institutions who have been doing business with the agent. A power of attorney also terminates upon the incapacity or death of the principal.

Durable Powers of Attorney

Although the power of attorney discussed above terminates upon the incapacity of the principal, there is a power of attorney that remains effective even after the principal becomes incapacitated. It is called a “durable power of attorney,” and contains the following language or similar words showing the principal’s intent that the agent’s authority is to continue even in the event of the principal’s disability or incompetence:

“This power of attorney shall not be affected by physical disability or mental incompetence of the principal which renders the principal incapable of managing his own estate.” A durable power of attorney is generally effective when it is executed. However, you can execute what is called a “springing durable power of attorney.” This is a durable power of attorney that is effective only upon the disability or incompetence of the principal. If the power of attorney is springing, the document itself should specify how to determine if the agent’s authority has become effective. Keep in mind that even a durable power of attorney terminates upon the death of the principal.

The durable power of attorney must be executed and witnessed by two witnesses and must include an acknowledgement by a notary public. In addition, it must be recorded in the office where deeds are recorded in the county in which the principal resides. This will be either the Office of the Register of Deeds or with the Office of the Clerk of Court, depending on the county.

The durable power of attorney is an extremely useful document to deal with problems arising from possible
future incapacity. A durable power provides instructions to an agent about the principal’s desires concerning the principal’s business affairs, finances, and health care at a time when the principal becomes mentally incapacitated. The durable power of attorney can serve as a guide for the agent and the family in making property, medical, financial and personal decisions. A durable health care power of attorney (See Medical Decision Making, Part C above) can be used by the principal to indicate what medical treatment he or she wishes to receive if the principal is unable to make those decisions at that time.

The advice and assistance of an attorney is recommended when preparing and executing any powers of attorney.

F. EMPLOYMENT PAST RETIREMENT

Driven by the aging of the “baby boom” generation and the tremendous popularity of our state as a retirement destination, South Carolina is at the leading edge of a nationwide trend towards an older workforce. South Carolina’s 60-and-over population is expected to double over the next two decades to over 1.3 million. Many of these people, either through necessity or by choice, may continue working well into their sixties, seventies or even longer.

There is no question that employers in South Carolina—as in the rest of the country—will need to begin implementing strategies to attract and retain older workers. By the year 2030, it’s estimated that 76 million baby boomers will have retired in the United States, but only 46 million new workers will enter the labor market. This should create opportunities for older workers who do want to continue working to supplement their retirement income. Currently, only one program in South Carolina—described below—is focused specifically on retraining older workers. Another potential avenue for older workers seeking job re-training is South Carolina’s public universities and technical colleges. Our state-supported institutions of higher education can offer free tuition to individuals over 60, so long as they are not employed full-time and meet other admission requirements.

Part Five—Financial Assistance

A. TAX RELIEF

This section will give you a brief overview of tax advantages made available to senior citizens. Because tax laws are complicated and change frequently, it is highly recommended that you consult with a professional tax advisor, such as a certified public accountant and/or a lawyer experienced with income tax or estate planning.

Federal Income Tax

Who Must File

The amount and source of income you receive will determine whether you must file an income tax return. By way of example, the chart below, which covers filing requirements for 2010, can give you a general idea of who was required to file for 2010.

(Important: The following requirements are subject to change for each tax year and are only provided here as an example of requirements for 2010, the most recent tax year this publication was updated.)

You must file a return for 2010, even though you owe no tax, if:

• You were single for all of 2010 and were:
  o Under age 65 with an income of at least $9,350 or
  o Age 65 or older with an income of least $10,750;

• You were married filing a joint return and were living with your spouse at the end of 2010 or on the date your spouse died and:
  o Both were under age 65 with an income of least $18,700;
  o One spouse 65 or older with an income of at least $ 19,800; or
  o Both spouses 65 or older with an income of at least $20,900;

• You were married filing a separate return or married but you did not share the same household at the end of 2010 (or on the date your spouse died) with an income of at least $ 3,650;

• You were considered Head of Household and:
  o Under age 65 with an income of at least $12,050; or
  o Age 65 or older with an income of at least $13,450;

• You were a qualifying widow or widower with a dependent child and:
  o Under age 65 with an income of at least $15,050; or
  o Age 65 or older with an income of at least $16,150.

• Also, you must file regardless of income if you received any advanced earned income credit (EIC) payments from your employer(s) during 2010. Beginning in 2011, the advance payment option for EIC is no longer available.

• If you were self-employed and your net earnings from this work were at least $400, then you must file a return to pay self-employment tax. You are self-employed if you carry on a trade or business as a sole proprietor, a member of a partnership, or an independent contractor. This includes certain part-time work
that you do at home or in addition to your regular job. This rule applies regardless of your age; whether you are receiving Social Security benefits; and even if you are otherwise not required to file a federal tax return. Notably, if income tax over the amount of tax owed was withheld from your pay, then you should file a return so that you can claim a refund of the tax withheld.

Exemptions from Federal Income Tax

Certain types of income are taxed while others are not. Taxable income includes wages from a job, annuity payments from certain types of pension plans, tips, dividends, and interest paid to you. Under certain conditions, part of your Social Security benefits may be taxed. Non-taxable sources of income include veterans' benefits and certain insurance benefits.

Social Security Benefits

Your Social Security benefits may or may not be exempt from taxation, depending on the amount of other income you received. If your "provisional income" (modified adjusted gross income plus one-half of your social security benefits received) for the tax year exceeds either of the two tiered threshold amounts, you are taxed on a portion of your social security benefits received in the tax year as follows:

Tier I: If your provisional income exceeds a "base amount," you must include in gross income the lesser of: (1) 50% of the social security benefits received in the tax year; or (2) 50% of the excess of provisional income over the base amount. Again, provisional income is the sum of your modified adjusted gross income plus one-half of your Social Security benefits. The "base amount" is $32,000 for married persons filing jointly; $0 for a married person filing a separate return who doesn’t live apart from their spouse for the entire tax year; and $25,000 for all other persons and filing statuses.

Tier II: If your provisional income exceeds an "adjusted base amount," you must include in gross income the lesser of: (1) 85% of the social security benefits received in the tax year; or (2) 50% of the excess of provisional income over the "adjusted base amount." The "adjusted base amount" is $44,000 for married persons filing jointly; $0 for a married person filing a separate return who doesn’t live apart from their spouse for the entire tax year; and $34,000 for all other persons and filing statuses.

Pensions and Tax

Federal tax on pension income depends upon whether the pensions are financed in part by contributions from workers. Pension income from pensions funded totally by employers (as is the case with most private pensions) is completely taxable. In those cases where individuals contributed to the cost of their pension plan, taxation depends upon the amount of their contributions and the time period in which the workers' contributions have been paid back in benefits. Once a beneficiary has received payments which equal their contributions, the pension income becomes fully taxable. Payments under military and government disability pensions may be excludible from income.

Lump-Sum Distributions

Some participants in qualified plans may be able to take a lump-sum distribution of the balance remaining in their qualified plans. Special rules apply to these distributions, so it would be wise to consult a tax advisor if you are considering receiving a lump sum distribution, especially if you were born before 1936 (The Tax Reform Act of 1986 made substantial changes to how lump-sum distributions are taxed and provided transition rules for those reaching age 50 before 1986. Specifically, someone who has attained age 50 before 1986 can elect to tax one lump sum distribution under ten-year averaging under rates in effect before the 1986 Act or under five-year averaging using rates in effect under the 1986 Act.)

Personal Exemptions

Under the federal tax code, all taxpayers and dependents receive a personal exemption. The amount of personal exemption for each family member (in 2010) is $3,650.

Standard Deduction

The amount of the standard deduction in 2010 is $5,700 for persons with a filing status of single or married filing separately; $11,400 for married couples filing a joint return; and $8,400 for persons electing a filing status of head of household.

An additional standard deduction of $1,100 is available to taxpayers or their spouses who are over the age of 65 by the end of the tax year and/or blind (unmarried or head of household taxpayers may claim $1,400 instead of $1,100). For example, a husband over the age of 65 and a wife over age 65 who is blind would have a standard deduction for 2010 of $14,700:

- $11,400 standard deduction for married filing jointly
- $1,100 additional exemption for husband, who is over 65
- $1,100 additional exemption for wife, who is over 65
- $1,100 additional exemption for wife, who is blind

If a taxpayer is claimed as someone else’s dependent, their standard deduction is generally limited to the greater of $950 or their total earned income plus $300 (but not to exceed their nondependent standard deduction).

NOTES: If the total of your itemized deductions is greater than your standard deduction, you may deduct the total amount of your itemized deductions instead of the standard deduction. Also, there may be provisions for increased standard deduction in a tax year for expenses such as real estate property taxes or net disaster losses. If your filing status is married filing separately and your spouse itemizes deductions, you cannot take the standard deduction.

Medical Expenses

If you decide to itemize your personal deductions, you will want to include medical expenses. Those expenses which are deductible include doctor and hospital bills, medical and hospital insurance costs, medicines, drugs (only prescribed drugs or insulin), hearing devices, nursing expenses, equipment such as home elevators for the physically disabled, transportation costs to and from medical care, nursing home expenses (if placement in the home is necessary for medical care), and lodging expenses incurred during specialized medical treatment away from home. Transportation costs, if you drive your own car are deductible up to nine cents per mile.

Parking and tolls may be added to the amount.

Medical expenses that exceed more than 75 percent of your adjusted gross income may be deducted. You may not take a deduction if your expenses are less.
If Medicare or some other insurance program pays for a portion of your medical costs, you can only deduct that amount that you pay. You can deduct the amount you pay each month for your Medicare Part B coverage and other hospital or medical insurance you carry.

Other Deductions & Exclusions
You do not have to pay federal income tax on money or property you receive as a gift or as inheritance or as life insurance proceeds because of someone's death.

Sale of Your Personal Residence
Generally, the sale of an asset that has increased in value would produce gain, which would typically be subject to tax. However, you may exclude from your gross income some or all of your gain from the sale or exchange of your principal residence, if you meet certain age, ownership, and occupancy requirements at the time of the sale or exchange. You may be able to exclude up to $250,000 of gain ($500,000 for joint filers) from the sale of your home if you owned and lived in it as your primary residence for two of the five years before the sale. For more detailed information, see IRS Publication 523, which describes the procedures and forms to be used in reporting the sale of your principal residence.

Individual Retirement Arrangements (IRAs)
If you are not an active participant in an employer-sponsored retirement plan, you may be able to make annual deductible contributions of up to $5,000 to an IRA, depending on your adjusted gross income (AGI) (If you are over 50 or over, you may deduct up to $6,000). This applies even if you are married and file a joint return, provided that your spouse is not also covered under an employer's plan (if you file separate returns, one spouse's participation in the plan will not affect the other spouse).

If you do participate, or if you file a joint return and your spouse participates in an employer's retirement plan, the dollar limit on your IRA deduction may be reduced, depending on the amount of your adjusted gross income and whether that income falls within a "phase-out" level. There is also a "saver's credit" which is available for certain Qualified Retirement Savings Contributions made in the tax year based on income and filing status. Be sure to ask your tax professional about this credit to determine if you qualify.

Please be advised that rules concerning IRA can be complicated, so you should consult a tax professional with questions in this area. Also, there are many other types of retirement investment plans available and the rules regarding contribution limits vary based on age and income limits, so be sure to consult with a tax professional for information about your specific situation.

Earned Income Tax Credit
The earned income credit (EITC) is a tax credit for people who work and have earned income within a certain range, based on whether or not you claim a deduction for qualifying children, up to three. If you have no qualifying children, you may be eligible for up to a maximum credit of $457 in 2010. The EITC is a refundable credit, which means that it can result in a refund to you if it exceeds your tax liability.

To claim the EITC on your tax return, you must have earned income from employment or from self-employment, and you must meet other requirements. You must be a U.S. citizen or resident alien all year, or a nonresident alien married to a U.S. citizen or resident alien and filing a joint return, and you must have a valid Social Security Number. In addition, your filing status cannot be married, filing separately.

If you do not have a qualifying child, you must be age 25 but under 65 at the end of the year, live in the United States for more than half the year, and not qualify as a dependent of another person. If you are married filing a joint return, either you or your spouse must be at least age 25 but under age 65 at the end of 2010. It does not matter which spouse meets the age test, as long as one of the spouses does.

Child & Dependent Care Tax Credit
This tax provision is designed to assist working adults who are caring for a dependent, such as a child or a disabled spouse, and incur dependent-care expenses in order to be gainfully employed.

Several eligibility criteria must be met in order to qualify for the credit: The person receiving the care must live with the taxpayer for more than half of the year. The care recipient must be in the taxpayer's home at least eight hours a day; and the caregivers must be working or seeking work.

The amount of employment-related expenses that may be claimed is between 20% and 35%, depending on the taxpayer's adjusted gross income with no limit. However, for two spouses filing jointly, the credit is based on the smaller of the two earned income amounts. For any taxpayer, the maximum amount of this non-refundable credit that may be claimed is $3,000 for one qualifying individual and $6,000 for two or more individuals. The credit is claimed on IRS Form 2441.

Elderly Disability Income Credit
A tax credit is available to those who are age 65, as well as those who are under 65 and (1) who are retired with a permanent and total disability and (2) who receive disability income from an employer. “Permanently and totally disabled” means that the individual is prevented from engaging in any substantial gainful activity because of a medically determinable physical or mental impairment that can be expected to result in death, or that has lasted, or is expected to last, for a continuous period of more than a year.

If you qualify, you may be able to reduce the tax you owe by taking the credit for the elderly or disabled which is figured on Schedule R. If you are under age 65 you must have your physician complete a statement certifying that you were permanently and totally disabled on the date you retired. The credit equals up to 15 percent of the first $5,000 of income for single persons or $7,500 for married couples filing jointly. These amounts are reduced by the amount of Social Security, Railroad Retirement, or other tax exempt pension income received by the beneficiary and by one-half of the taxpayer's adjusted gross income over $7,500 for individuals and $10,000 for married couples filing a joint return.

South Carolina Income Taxes
South Carolina taxes individual income at rates between 0% and 7%, depending on income level. The state's income tax structure generally conforms to the federal income tax laws. Your federal taxable income is the starting point in determining your state income tax liability. South Carolina accepts the adjustments, exemptions and deductions allowed on your federal return with few modifications.

Retirement Income Deduction
An individual taxpayer who is the original owner of a qualified retirement account may deduct up to $3,000 of retirement income from South Carolina taxable income until reaching age 65. After reaching age 65, the taxpayer may deduct up to $10,000 of retirement income annually.

A surviving spouse is allowed a deduction for income received from his or her retirement plan, if any, and totally disabled income from an employer. "Permanently and totally disabled" means that the individual is prevented from engaging in any substantial gainful activity because of a medically determinable physical or mental impairment that can be expected to result in death, or that has lasted, or is expected to last, for a continuous period of more than a year.

There is also a “saver’s credit” which is available for certain Qualified Retirement Savings Contributions made in the tax year based on income and filing status. Be sure to ask your tax professional about this credit to determine if you qualify.

Please be advised that rules concerning IRA can be complicated, so you should consult a tax professional with questions in this area. Also, there are many other types of retirement investment plans available and the rules regarding contribution limits vary based on age and income limits, so be sure to consult with a tax professional for information about your specific situation.
Deduction for Taxpayers 65 and Older
Residents who reach age 65 by the end of the tax year can claim a deduction of up to $15,000 against any South Carolina income. This is reduced by any retirement income deduction (see previous section); however, amounts deducted as a surviving spouse do not reduce the deduction. Taxpayers filing a joint return are allowed a deduction of up to $15,000 when only one spouse is 65 or over and up to $30,000 when both spouses are 65 or older.

Credit for Nonresident Retirement Contributions
If the right to receive retirement income by a taxpayer who is allowed the retirement income deduction was earned by the taxpayer while residing in another state that imposed state income tax on the employee’s contributions, a credit is allowed against the taxpayer’s South Carolina income tax liability in an amount sufficient to offset the taxes paid the other state. Taxes paid on qualified retirement income contributions while residing in a state other than South Carolina may qualify for a credit. This credit must be claimed over the taxpayer’s lifetime. The Department of Revenue specifies the amount of the annual credit based on the taxpayer’s life expectancy at the time the taxpayer is allowed the South Carolina retirement income deduction described above. The total credit allowed may not exceed an amount determined by multiplying the contributions taxed in each year by the marginal South Carolina individual income tax rate for that year.

Disability Retirement Income Deduction
If a person may not qualify for the homestead exemption because of total and permanent disability, that person may deduct the amount of income received for disability retirement due to permanent and total disability.

Capital Gains Deduction
Up to 44% of capital gain recognized is deductible from South Carolina taxable income. This includes capital gains and losses from partnerships and S corporations.

Exclusion of Social Security Benefits
Social Security benefits are not taxed in South Carolina.

Credit for Dependent Care Expenses
A taxpayer may claim a credit for expenses paid for household services and care of a disabled spouse incapable of self-care or a disabled person incapable of self-care claimed as a dependent. The expenses must be incurred while the taxpayer works or looks for work during the tax year. The credit is similar to the federal dependent care credit; however, the credit amount is seven percent and is limited to a maximum of $210 ($420 for two or more children). Further, only expenses that are directly attributable to items of South Carolina gross income qualify.

Credit for Nursing Facility or In-Home Care
Up to 20% of expenses paid by a taxpayer for his own support or for the support of another for nursing facility care may be claimed as a credit against income, up to a limit of $300. The care may also be provided as in-home or community care for persons determined to meet nursing facility level of care criteria as certified by a licensed physician.

Credit for Married Wage Earners
A two-wage earner credit allows married couples to take a credit if both spouses work. Married individuals filing a joint return a credit against South Carolina income tax equal to seven-tenths of 1% (.007) of the lesser of (1) $30,000 or (2) the South Carolina qualified earned income of the spouse with the lower qualified earned income.

Credit for Income Taxes Paid to Another State
South Carolina provides an income tax credit to residents for taxes paid to another state on income which also is subject to tax in South Carolina. The credit is allowed for taxes paid to the other state on income derived from sources within the state, which is taxed under the laws of that state irrespective of the residence of the taxpayer.

Property Tax
Generally, all real property and personal property in South Carolina is subject to property taxes unless an exemption applies. For property tax purposes, real property means not only land, but also things therein attached to the land, also known as fixtures. For example, docks, greenhouses, mobile homes, and sprinkler systems are considered real property. Personal property consists of things other than real estate that have any monetary or pecuniary value, such as automobiles, boats, boat motors, and recreational vehicles.

Exemptions from Property Tax
Some types of property exempt from South Carolina property taxes include intangible personal property; household goods and furniture used in the owner’s home; apparel; and watercraft trailers.

Assessment and Collection of Property Taxes
Property taxes are generally assessed and collected by local governments, and most property taxes are used to support public education. Property located in a county is taxed by that county. Also, municipalities and special purpose districts may levy property taxes on property located within their boundaries.

The amount of property tax due is based upon three elements: (1) the property value, (2) the assessment ratio applicable to the property, and (3) the millage rate imposed by the taxing jurisdiction.

Valuation
Most real property (other than agricultural use real property) is appraised at fair market value. Real property is typically reassessed every five years. Motor vehicles, boats, and airplanes are valued in accordance with nationally recognized publications of value (except that the value may not exceed 95% of the prior year’s value). Discounts are allowed for motor vehicles with high mileage.

Assessment Ratio
The assessment ratios range from 4% to 10.5%. A person’s primary residence is assessed at 4%, other personal use real property is assessed at 6%, and personal motor vehicles (other than certain motor homes) are assessed at 6%. The value is multiplied by the applicable ratio to produce the “assessed value” of the property.
Millage

Annually, each taxing entity, including each county and municipality, determines the amount of money it needs to operate the following tax year. The total assessed value of property subject to tax within its jurisdiction is then multiplied by whatever number of mills required to raise the money necessary to operate. (A mill is a unit of monetary value equal to one-thousandth of a dollar or .001.)

Assessment of Residential Property

A person’s primary residence and up to five contiguous acres is taxed at an assessment of 4% of the fair market value. (A second home or vacation home is taxed at an assessment ratio equal to 6%). A motor home may qualify as a primary or secondary residence for property tax purposes. To ensure that your primary residence is taxed at the 4% rate, you must inform the county assessor that the property in question is your primary residence. This rate is for primary residences whether the owner/occupier is over 65 or not. If you are not sure that you are being assessed at the correct rate you may obtain a legal residence application from the county assessor.

Exemptions for Residential Property

There are several exemptions for real and personal property tax providing certain South Carolina homeowners and residents tax relief in various circumstances. They are listed below.

Homestead Exemption for Elderly, Blind, or Disabled

If you are 65 or older, totally disabled or legally blind and have lived in South Carolina for at least one year, you may qualify for the homestead exemption. The homestead exemption excludes the first $50,000 from the fair market value of your legal residence. Application for the homestead exemption should be made to the county auditor’s office in the county of your residence and where the home is located.

Exemption for certainly Military Veterans, Law Enforcement Officers, Firefighters, Paraplegics and Hemiplegics

A house and up to one acre of land on which the house is located is exempt from property tax for:

- veterans who are totally disabled from a service-related disability or the surviving spouse;
- the surviving spouse of a military person killed in the line of duty;
- a former law enforcement officer who is permanently and totally disabled as a result of a law enforcement service-connected disability;
- a former firefighter, including volunteer firefighters, who is permanently and totally disabled as a result of a firefighting service connected disability;
- paraplegics, hemiplegics or their surviving spouses

Additional personal property exemptions, such as automobiles, may be available for Medal of Honor recipients, former prisoners of war, or individuals required to use wheelchairs. For more information, visit the S.C. Department of Revenue website at www.sctax.org. A list of frequently asked questions about exemptions can be found at www.sctax.org/TaxInformation/Property+Tax/Exempt+Property+FAQs.htm.

Sales and Use Tax

The State of South Carolina imposes a sales and use tax of five percent, and proceeds are used exclusively to fund the public school system. The sales tax applies to the retail sale, lease, or rental of tangible personal property, and the use tax applies to the storage, use, or consumption of tangible personal property purchased at retail in another state. (A credit is given against the use tax due in South Carolina for any state and local sales or use tax due and paid in another state.) Prescriptions, dental prosthetics and hearing aids are exempt from the sales tax. A maximum sales tax of $300 is imposed on the purchase of motor vehicles, including recreational vehicles, boats, motorcycles and airplanes. Generally, service labor charges are not subject to this tax, nor any type of unprepared food that lawfully may be purchased using USDA Food Coupons or SC EBT card funds.

Additionally, local governments in South Carolina may also levy local sales and use taxes, local accommodations taxes, or local hospitality taxes on sales of prepared meals. For example, in certain counties, a local option sales and use tax of 1 percent is imposed in addition to the 5 percent state rate.

Estate Tax

South Carolina’s estate tax is calculated in an amount equal to this federal credit for state death taxes. (Most other state estate tax laws follow the same structure, which allows the states to receive estate taxes that would have otherwise gone to the federal government.) There is no estate tax when an estate is left to the deceased person’s spouse. Federal estate tax laws are subject to change annually; consult with a tax professional for current advice regarding this matter.

Gift Tax

The state gift tax was repealed effective December 31, 1991. Be sure to consult with a tax professional regarding federal taxation of gifts you may have made with a value of more than $13,000 (for the 2010 tax year).

Resources for Additional Tax Information

Internal Revenue Service

If you have questions specifically relating to your Federal taxes, you may obtain free information from the Internal Revenue Service (IRS). The IRS maintains a toll-free tax assistance telephone number (1-800-829-1040), a website (www.irs.gov), and local offices to assist individuals with their taxes.

AARP

The AARP also offers tax counseling for the elderly at more than 10,000 sites nationwide each filing season through its Tax-Aide counseling program. The AARP phone number is 1-888-687-2277. The AARP Tax-Aide counseling program website is www.aarp.org/money/taxes/aarp_taxaide.

South Carolina Department of Revenue

More detailed information on South Carolina Income Taxes may be found on the South Carolina Department of Revenue’s website (www.sctax.org). The Department of Revenue also maintains six offices to assist South Carolina taxpayers:

Charleston Service Center:
1 Southpark Circle, Ste. 300
Charleston, SC 29407
(843) 852-3600 / Fax: (843) 556-1780

Columbia Main Office:
301 Gervais St.
P.O. Box 125
Columbia, SC 29214
(803) 898-5000 / Fax: (803) 898-5822

Charleston Service Center:
1 North Naughty Lane, Ste. 120
Charleston, SC 29407
(843) 852-3600 / Fax: (843) 556-1780

Columbia Main Office:
301 Gervais St.
P.O. Box 125
Columbia, SC 29214
(803) 898-5000 / Fax: (803) 898-5822
Volunteer Income Tax Assistance (VITA) Program
Each year during tax season, low income, elderly and disabled taxpayers can receive free income tax return help through the IRS and South Carolina Department of Revenue’s Volunteer Income Tax Assistance (VITA) services. This service is available at many locations throughout the state on a first come, first serve basis and runs from mid-January through mid-April. VITA volunteers receive training to help prepare basic tax returns for qualified taxpayers. While volunteers are available to prepare state and federal long and short form taxpayers with more complicated needs may be referred to a professional.

Taxpayers wishing participate in the VITA program should bring the following:

- Photo identification
- Social Security Numbers for you, your spouse and dependents
- Birth dates for primary, secondary and dependents on the tax return
- Current year’s tax package if you received one
- Wage and earning statement(s) Form W-2, W-2G, 1099-R, from all employers
- Interest and dividend statements from banks (Forms 1099)
- A copy of last year’s Federal and State returns, if available
- Bank routing numbers and account numbers for direct deposit
- Other relevant information about income and expenses
- Total paid for day care and the day care provider’s identifying number

To file taxes electronically on a married filing joint tax return, both spouses must be present to sign the required forms.

Additional VITA sites are located throughout the state in malls, churches, libraries and many other convenient locations. Many locations offer electronic filing, allowing taxpayers to receive a state or federal refund in about two weeks. To learn more about additional VITA sites located throughout the state, please call the IRS at (800) 829-1040.

B. SOCIAL SECURITY
Social Security has been a basic part of American life since 1935. It is more than a retirement program. It is known as the “American’s Family Protection Plan” for those who have paid for coverage through payroll deductions or self-employment taxes. It provides a base of economic security in today’s society through three basic categories of benefits: retirement, disability and survivor benefits. Rules, payment schedules, and qualifications for each are distinct. The following are brief highlights of each program.

Retirement Benefits
Individuals and their dependent family members are eligible for retirement benefits if the worker has earned enough work credits. When you work and pay Social Security taxes, you earn “credits” toward Social Security benefits. The number of credits needed to get retirement benefits depends on when you were born. If you were born in 1929 or later, you need 40 credits (10 years of work). No retirement benefits can be paid to the worker until he or she has the required number of credits. You first become eligible to claim retirement benefits as early as age 62 if retiring before full retirement age, but benefits will be permanently reduced. The “full retirement age” is 65 for those who were born before 1938. But because of longer life expectancies, the Social Security laws have changed to gradually increase the full retirement age until it reaches age 67. This change affects people born in 1938 and later.

Disability Benefits
Social Security pays benefits to individuals who cannot work because they have a medical condition that is expected to last at least one year or result in death. Federal law requires this definition of disability and a favorable medical decision before benefits are paid. While some programs give money to people with partial disability or short-term disability, Social Security does not.

Benefits are only payable to individuals and their family members when enough work credits have been earned to qualify. The number of work credits required depends on an individual’s age when he becomes disabled. Two different earnings tests must be met:

1. A “recent work” test based on your age at the time you became disabled; and
2. A “duration of work” test to show that you worked long enough under Social Security.

Survivor’s Benefits
Social Security not only provides benefits to the worker, but also to his or her family when the worker dies. The number of credits needed for a family to be eligible for the worker’s survivor benefits depends on the age of the worker when he dies. However, not every surviving family member can collect these benefits. Among those eligible are:

- Widows or widowers can receive full benefits at age 65 or older (if born before January 2, 1940) or reduced benefits as early as age 60. (The age for receiving full benefits is increasing for widows and widowers born after 1939 until it reaches age 67 for people born in 1962 and later.) Disabled widow or widower can apply for benefits at age 50.
- Widows or widowers can receive benefits at any age if caring of the worker’s child entitled age 16 or younger or who is disabled.
- Unmarried children under age 18 (or up to age 19 if attending elementary or secondary school full time). Disabled children any age if disabled before age 22 and remain disabled. In some cases benefits are paid to stepchildren and grandchildren.
- Surviving divorced spouse age 60 or older (50-60 if disabled) if marriage lasted at least 10 years.
- Surviving divorced spouse at any age if caring for minor or disabled natural or legally adopted child of the worker.
- Dependent parents age 62 or older. (For parents to qualify as dependents, the worker would have had to be providing at least one-half of their support before death.)

Survivor’s benefits paid to a divorced spouse will not affect the benefit rates for other survivors receiving benefits.
One-time death payment
There is a one-time payment of $255 that can be made when the worker dies if he or she has worked long enough. This payment can be made only to the spouse or minor children if they meet certain requirements.

How much are benefits?
The amount a family can receive from Social Security depends on the average lifetime earnings of the worker. That means the more an individual earns, the more their benefits will be. Each year, about three months before your birthday, every worker age 25 or older, will receive a Social Security Statement. It can be a valuable tool to help plan a secure financial future. It provides a record of your earnings and gives estimates of what Social Security benefits would be at different retirement ages.

It also gives an estimate of the disability benefits that could be received if an individual becomes disabled before retirement, as well as estimates of the survivor benefits Social Security would provide a spouse and eligible family members when an individual dies.

Medicare
Medicare is our country’s health insurance program for people age 65 or older. Certain people younger than age 65 can qualify for Medicare, too, including those who have disabilities and those who have permanent kidney failure or amyotrophic lateral sclerosis (Lou Gehrig’s disease). The program helps with the cost of health care, but it does not cover all medical expenses or the cost of most long-term care.

Medicare is financed by a portion of the payroll taxes paid by workers and their employers. It also is financed in part by monthly premiums deducted from Social Security checks.

The Centers for Medicare & Medicaid Services is the agency in charge of the Medicare Program.

Medicare has four parts:
• Hospital insurance (Part A) that helps pay for inpatient care in a hospital or skilled nursing facility (following a hospital stay), some home health care and hospice care.
• Medical insurance (Part B) that helps pay for doctors’ services and many other medical services and supplies that are not covered by hospital insurance.
• Medical Advantage (Part C) formerly known as Medicare + Choice plan is available in many areas. People with Medicare Parts A and B can chose to receive all of their health care services through one of these provider organizations under Part C.
• Prescription drug coverage (Part D) that helps pay for medications doctors prescribe for treatment.

You can get more detailed information about what Medicare covers by calling the Medicare toll free number, 1-800-MEDICARE (1-800-633-4227), or go to www.medicare.gov.

If you are deaf or hard of hearing, you may call TTY 1-877-486-2048.

C. SUPPLEMENTAL SECURITY INCOME
Supplemental Security Income (SSI) is a federal benefit program designed to make monthly payments to individuals who have low income and few resources. To get SSI, one must be 65 or older, blind or disabled. Children as well as adults may qualify for SSI disability payments.
some people, the possibility of collecting both Railroad Retirement and Social Security benefits. Railroad Retirement annuities are reduced by the amount of the Social Security benefit that the beneficiary receives.

Benefits and Eligibility Criteria:
Under the Railroad Retirement Act (RRA), monthly cash retirement and disability benefits are paid to railroad workers with at least 10 years (120 months) of service. Retirement and certain disability benefits are also payable to workers with 5 years (60 months) of service if such service was performed after 1995.

Full age benefits are payable at age 60 to workers with 30 years of service. For those with less than 30 years of service, reduced benefits are payable at age 62 and unreduced benefits are payable at full retirement age. Full retirement age ranges from age 65 for those born before 1938 to age 67 for those born in 1960 or later, the same as Social Security.

Disability
There are two types of disability benefits under the RRA. Both require a 5-month waiting period before the benefits begin.

Occupational disability benefits are available at age 60 if the worker has at least 10 years of railroad service, or at any age if the worker has at least 20 years of service. An occupational disability is one that prevents a person from performing the job with the railroad. It does not necessarily prevent work of some other kind. It is required that the person must also have a current connection with the railroad industry for an occupational disability. The current connection requirement is generally met if the employee’s last regular employment before retirement or death was in the railroad industry.

Total disability benefits are based on permanent disability for all employment and are payable at any age to employees with at least 10 years of railroad service, and under certain conditions to employees with 5 years of service after 1995.

Survivor Benefits
Annuities are payable to widows, widowers, and unmarried children. In certain cases benefits are also payable to parents, remarried widow(er)s, grandchildren and surviving divorced spouses. Eligibility for survivor benefits depends on whether the railroad employee was “insured” under the RRA at the time of death. An employee is insured if he or she has at least 10 years of railroad service, or 5 years performed after 1995, and a “current connection” with the railroad industry.

Applying for Benefits
For additional information and application for benefits, you should contact the nearest Railroad Retirement Office.

Appeals
Persons who believe that their claims have not been adjudicated correctly may ask for a reconsideration by the Board’s Office of Programs. If not satisfied with that review, the applicant may appeal to the Board’s Bureau of Hearings and Appeals. Further appeals can be carried to the three-member board itself, and beyond the Board to federal courts. The Board’s district personnel will explain these appeals procedures and the time limits on filing appeals to those seeking reconsideration of their claims.

E. VETERAN BENEFITS
The Veterans Administration (VA) operates a number of programs providing financial, medical, and other assistance to veterans. A number of veteran service organizations not only are available to assist veterans as they apply for benefits, but also have offices in the VA Regional Office in Columbia.

The VA Regional Office in South Carolina is located in Columbia at 6437 Garners Ferry Road and can be reached by calling 1-800-827-1000. Additionally, the VA website, which can be found at http://www.va.gov, is a valuable resource for information.

Disability Compensation
Disability compensation is a monthly benefit paid to veterans who are disabled by an injury or disease that was incurred or aggravated during active duty military service. These injuries or diseases are considered to be service connected and result in assignment of a disability rating between 0% and 100%. The rating is based on a VA schedule of disabilities and indicates the amount of the monthly benefit. For instance, for a single veteran without children, a 10% rating is equal to $108 whereas a 100% rating is equal to $2,597. Additional amounts may be available if the veteran is homebound or needs aid and attendance as a result of his service connected disabilities. The payment of military retirement pay, disability severance pay, and separation incentive payments affect the amount of compensation paid.

Proving a service connected disability will usually require: 1) showing a current disability exists, 2) medical or lay evidence of an in-service occurrence or aggravation of a disease or injury, and 3) a medical link or nexus between the current disability and the in-service occurrence. Some conditions carry a presumption of service connection. To apply, complete VA Form 21-526, or file online through the Veterans Online Application form found on the VA website.

Pension Benefits
Pension benefits are available to veterans with limited income who had 90 days or more of active military service, at least one day of which was during wartime period. The veteran must also be either 65 years of age or permanently and totally disabled with a disability that is not from willful misconduct. To be eligible in 2011, the yearly income of a veteran without spouse or children must be less than $11,830. However, many forms of public assistance such as Supplemental Security Income are excluded as income. Additionally, unreimbursed medical expenses can reduce countable income. To apply, complete VA Form 21-526.

Health Care
The VA maintains a system of hospitals and clinics which provide medical, psychiatric, and limited nursing home care. A veteran is eligible if they have active duty service and were discharged under conditions other than dishonorable. An additional eligibility criteria applies to veterans who enlisted after September 7, 1980 or officers who entered active duty after October 16, 1981. These veterans must have served for 24 continuous months or the full period for which they were called to active duty. Priority is given to veterans needing care because of service connected disabilities. Other veterans are considered for treatment on a first come, first serve basis.

South Carolina has VA Medical Centers in Columbia and Charleston and outpatient clinics in Aiken, Anderson, Beaufort, Florence, Goose Creek, Greenville, Myrtle Beach, Orangeburg, Rock Hill, Spartanburg, and Sumter. Applying for health care benefits is done by completing VA Form 10-10EZ, this can be done at any VA Medical Center or outpatient clinic.
Education Benefits and Home Guaranty

A number of VA education plans cover veterans depending on when they served. They typically expire either 10 or 15 years after active duty service. In some instances, benefits can be used by a veteran’s spouse or children.

The VA administers a home loan guarantee program for veterans and unmarried surviving spouses of veterans which among other attributes does not charge private mortgage insurance. Most lenders can assist a veteran in obtaining a required certificate of eligibility; otherwise a veteran may obtain one by complete a VA Form 26-1880.

Survivors and Dependents

Dependency and Indemnity Compensation (DIC)

DIC is available to a survivor if the veteran’s death resulted from: 1) a disease or injury incurred or aggravated in the line of duty while on active duty or active duty for training, 2) an injury, heart attack, cardiac arrest or stroke incurred or aggravated in the line of duty while on inactive duty for training, or 3) a service-connected disability or condition directly related to a service-connected disability.

DIC may also be available if a veteran was totally disabled from service connected conditions at the time of death, even if the death was not caused by those disabilities. The survivor is eligible under this theory if the veteran was: 1) continuously rated totally disabled for a period of 10 years immediately before death, 2) continuously rated totally disabled from the date of discharge and for a period of at least 5 years immediately before death, or 3) a former POW of who died after September 30, 1999 and who was continuously rated totally disabled for a period of at least one year immediately prior to death.

The basic monthly DIC rate is $1,154.

Death Pension

A death pension is available for low income surviving spouses and unmarried children. A death pension is available if the veteran had 90 days or more of active military service, at least one day of which was during wartime period. To be eligible in 2011, the yearly income of a surviving spouse without children must be less than $7,933. However, many forms of public assistance such as Supplemental Security Income are excluded as income. Additionally, unreimbursed medical expenses can reduce countable income. To apply, complete VA Form 21-526 or apply online through the VA’s website.

Educational Assistance

The VA provides education assistance to spouses or children of a servicemember or veteran who died of a service-connected disability, or who has a permanent and total service connected disability or who died while such disability existed. Educational assistance is also available to spouses and children of active duty servicemember in certain instances, ex., listed for more than 90 day as currently MIA or hospitalized for a total and permanently disabling disability.

Medical Care

Benefits are available through the Civilian Health and Medical Program of VA (CHAMPVA) to a spouse or child of a veteran: 1) who is permanently and totally disabled due to a service connected disability, 2) who died from service connected disability or at the time of death was rated permanently and totally disabled, or 3) who died in the line of duty not due to misconduct. However, to be eligible, an individual cannot be eligible for TRICARE. A surviving spouse who remarries before age 55 also loses CHAMPVA benefits and those survivors entitled to Medicare have CHAMPVA secondary to Medicare. Most VA Medical Centers and clinics provide CHAMPVA care on a space-available basis.

Burial and Memorial Benefits

A veteran may be eligible for burial benefits if they are on active duty and die while on active duty or are discharged under conditions other than dishonorable. If they enlisted after September 7, 1980 or entered as an officer after October 16, 1981, they also must have served for 24 continuous months or the full period for which they were called to active duty. A Reservist or National Guard member is eligible if they die while hospitalized for injury or disease related to service or if at the time of death they are entitled to retirement or would be if they were 60 years of age. Spouses and children may be also eligible.

Burial benefits may include a gravesite in a national cemetery subject to available space, opening and closing of the grave, perpetual care, a Government headstone or marker, a burial flag, and a Presidential Memorial Certificate. Burial benefits available for Veterans buried in a private cemetery include a Government headstone or marker, a burial flag, and a Presidential Memorial Certificate. A veteran’s family may also be entitled to a one time burial allowance of either $2,000 or $300 depending on whether the veteran’s death was service related or not.

Your funeral home will be able to assist you with receiving burial benefits. The burial allowance may be applied for by completing VA form 21-530.

Replacing Medals and Records

A veteran or next of kin can request replacement medals, decorations and awards. Air Force and Army veterans should write to the National Personnel Records Center at 9700 Page Avenue, St. Louis, MO 63132-5100. Navy, Marine Corps and Coast Guard veterans should write to the Navy Personnel Command at Liaison Office Room 5409, 9700 Page Avenue, St. Louis, MO 63132-5100. The veteran or family member should use a VA Form SF 180 or can apply online through the National Personnel Records Center webpage.

F. OPTIONAL SUPPLEMENT PROGRAMS

Food Assistance Programs (Department of Social Services)

A variety of programs is available through the Department of Social Services to assist residents with ensuring that they have nutritionally adequate diets. Information about all the programs is available on the DSS website at https://dss.sc.gov/content/customers/food/index.aspx. Available programs include:

- Supplemental Nutrition Assistance Program (SNAP) – The Supplemental Nutrition Assistance Program, formerly known as the Food Stamp Program, serves as the foundation of America’s national nutrition safety net, working to end hunger and improve the health of low-income people by helping families buy the food they need for a nutritionally adequate diet.
- Electronic Benefits Transfer (EBT) – EBT is the method South Carolina uses to issue Supplemental Nutrition Assistance Program benefits.
- South Carolina Combined Application Program (SCCAP) – SCCAP is a program that DSS provides in conjunction with Social Security Administration. Under SCCAP, if you are eligible for SSI, you are eligible to receive SNAP benefits without applying at the DSS office.
- Elderly Simplified Application Project (ESAP) – ESAP is designed to simplify the SNAP benefit application process for elderly households.
- Summer Food Service Program – The Summer Food Service Program was created to ensure that children in low-income areas could continue to receive nutritious meals during long school vacations, when they do not have access to school lunch or breakfast.
monthly expenses.

If you are applying for food stamps, the amount of benefits you receive will depend upon the number of people in your food stamp “household,” your “household’s” total monthly income, and certain “household” expenses.

The Emergency Shelters Food Program – The Emergency Shelter Program (ESP) provides reimbursement to emergency and homeless shelters to ensure that each child participating in their program receives healthy, nutritious meals.

The Emergency Food Assistance Program – TEFAP helps to supplement the diets of low-income Americans, including elderly people, by providing them with emergency food and nutrition assistance at no cost.

The Senior Farmers Market Nutrition Program – The SFMNP provides fresh, nutritious, unprepared, locally grown fruits, vegetables, and herbs from farmers’ markets, roadside stands and community supported agriculture programs to low-income seniors.

The Child and Adult Care Food Program – The Child and Adult Care Food Program is a federally funded program that gives meal reimbursements to childcare centers and adult day care centers for serving nutritious meals.

The information that follows discusses only those programs that are specific to senior citizens.

Program Information

For over 30 years, the Food Stamp Program has served as the foundation of America’s national nutrition safety net, working to end hunger and improve the health of low-income people by helping families buy the food they need for a nutritionally adequate diet.

In South Carolina over 100,000 households depend on the Food Stamp Program each month to get the food they need for good health.

For children, a better diet means better learning in school. For adults, it means better performance on the job or a better foundation for developing the job skill that can give them and their family’s independence.

For seniors, it means access to a balanced diet vital to their nutritional well-being.

For everyone, participation in the Food Stamp Program can help stretch limited budgets, improve nutrition, and reduce the risk of diet-related health problems.

Families, people living alone, and people living with roommates use food stamps. People who are homeless can get food stamps, too. People of all ages use food stamps.

You do not need to be receiving Family Independence or to be out of work in order to get them. People who are working or have regular income from other sources than work, such as Social Security or a retirement pension, disability benefits, child support, or unemployment can often get food stamps.

If you are applying for food stamps, the amount of benefits you receive will depend upon the number of people in your food stamp “household,” your “household’s” total monthly income, and certain “household” monthly expenses.

You may complete an application form for food stamps at your local Department of Social Services (DSS) or you may use the application form found on the DSS web-site and deliver, mail or fax the application to your local DSS office.

Food Stamp Program benefits give a person or family more buying power at the grocery store. The benefits are not intended to cover all of a family’s food costs, but will lessen the amount of income that must be used toward groceries each month.

Food Stamp Program eligibility and benefits are based on several factors including:

• The number of people who live in a household and buy food and prepare meals together; and

• How much money your family has left from its monthly income after certain household expenses are subtracted.

Once household eligibility is determined, your approved food stamp benefits will be deposited into an account each month. The account is accessed by using an Electronic Benefits Transfer (EBT) card. The EBT card acts as a debit card. Each time you use your card, your account will be reduced by the cost of the groceries you buy.

For more information concerning the Food Stamp Program, contact your county DSS office.

The South Carolina Elderly Simplified Application Project (ESAP)

The South Carolina Elderly Simplified Application Project (ESAP) is designed to reinvent the SNAP process for elderly households who have traditionally proven to be our most stable population, on fixed income, with few reportable changes in household composition or deductions. ESAP is handled by an Agency centralized eligibility unit at the DSS State Office who process all applications, continuing eligibility and maintenance functions for this caseload. The household does not have to complete an interview.

You may be eligible for ESAP:

• If all household members who purchase and prepare their food together are elderly (age 60 or older);

• These household members do not have earned income; and

• These household members do not receive SNAP benefits under the South Carolina Combined Application Project (SCCAP).

To receive SNAP benefits under ESAP, you must:

• Complete the DSS-16176, ESAP Application

• Mail it to ESAP, South Carolina Department of Social Services, PO Box 100229 Columbia, SC 29202.

• If you are eligible, you will receive benefits beginning the date your application is received. You will be notified in writing of the decision on your case.

Once on ESAP, you only report required changes to the ESAP office at the above address or toll-free telephone at 1-800-616-1309.

You are not required to pay tax on food purchased with SNAP benefits.

The Emergency Food Assistance Program

TEFAP helps to supplement the diets of low-income Americans, including elderly people, by providing them with emergency food and nutrition assistance at no cost.
Who can receive these services?
In South Carolina, low-income residents with an income at or below 150% of the Federal Poverty Income guidelines can qualify to receive services under TEFAP.

How are the services provided?
USDA makes commodity foods available to State Distributing Agencies. The amount of food that each state receives out of the total amount of food that is provided nationally is based on the number of unemployed persons and the number of people with incomes below the poverty level in the state. The food is provided to local agencies usually food banks, which in turn, distribute the food to local organizations such as soup kitchens and food pantries that directly serve the public.

What services are offered?
Eligible recipients can benefit from the program through organizations like soup kitchens that provide prepared meals, or they may receive food from pantries that distribute commodities to individuals that may be taken home and prepared for consumption.

How can you find a local distribution in your area?
Contact the Local Agency listed below serving your county to locate the nearest distribution site. Proof of identity, is required to complete the eligibility determination process.

Golden Harvest Food Bank
Counties Served: Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Edgefield, Greenwood, McCormick, Oconee, Pickens
(803) 648-0752

Harvest Hope Food Bank
Counties Served: Chester, Chesterfield, Calhoun, Clarendon, Darlington, Dillon, Fairfield, Florence, Greenville, Kershaw, Orangeburg, Laurens, Lee, Lexington, Marlboro, Marion, Newberry, Richland, Saluda, Sumter
(803) 254-4432

Lowcountry Food Bank
Counties Served: Beaufort, Berkeley, Charleston, Colleton, Dorchester, Georgetown, Hampton, Horry, Jasper, Williamsburg
(843) 747-8146

Second Harvest Food Bank
Counties Served: Cherokee, Lancaster, Spartanburg, Union, York
(704) 376-1785

Seniors Farmer’s Market Nutrition Program
The SFMNP provides fresh, nutritious, unprepared, locally grown fruits, vegetables, and herbs from farmers’ markets, roadside stands and community supported agriculture programs to low-income seniors. The program also seeks to increase the consumption of agricultural commodities by expanding, developing, or aiding in the development and expansion of domestic farmers’ markets, roadside stands, and community supported agriculture programs.

Who can receive these services?
Individuals who are at least 60 years old and who have household incomes of not more than 185% of the federal poverty income guidelines are eligible. The SFMNP is not available in all South Carolina counties.

How are the services provided?
SFMNP benefits are distributed locally through a network of community organizations, usually Council on Aging offices that have agreed to serve as local agencies in the SFMNP.

What services are offered?
Eligible recipients receive benefits that may be used to purchase fresh, nutritious, unprepared fruits and vegetables at authorized farmers markets and roadside stands.

How to apply?
Applicants must go to a Local Agency distribution site to apply and receive benefits. SFMNP benefits are distributed during the summer months on a first come first served basis until all benefits have been exhausted.

Local Energy and Utility Providers
Often, energy and utility service providers have programs in place to assist lower income families in times of need. Contact your local utility service provider, or visit their website if you have internet access to determine if the service provider participates in any community or need based assistance programs.

Additionally, the LIHEAP program referred to above may be able to refer you to a local need based assistance program or to a program that your service provider participates in.
A. STATE OFFICE ON AGING OVERVIEW
The Lieutenant Governor's Office on Aging is South Carolina's "State Unit on Aging." This office administers the federal funds received through the Older Americans Act. The Office on Aging has been under the Lieutenant Governor since July 1, 2004. It works with a network of organizations throughout the state to create and manage programs and services designed to improve the quality of life of South Carolina's older citizens and help them remain independent in their homes and communities.

The mission of the Lieutenant Governor's Office on Aging is to enhance the quality of life for seniors through advocating, planning, and developing resources in partnership with state and local governments, non-profit, the private sector, and individuals and advocates to meet the present and future aspirations of the growing senior population.

The goals of the Lieutenant Governor's Office on Aging are to improve the quality and length of healthy life for South Carolina's senior population and to improve protections for South Carolina's adults.

Divisions:
• Planning and Education
   This Division is responsible for state planning activities including the various area plans and the State Plan on Aging. The division collects, analyzes, and publishes statistical data on older citizens of South Carolina through the Advanced Information Manager (AIM) system and Mature Adults Count. This Division also develops and implements statewide education and information for the public, program administrators, and regional sub-grantees/contractors.

• Disability and Aging Services (DAS)
   This Division is responsible for many program services designed to enhance the quality of life for older persons and their caregivers. It also assists the Aging and Disability Resource Centers in carrying out their responsibilities. Services include consulting services in nutrition, evidence based programs, home and community-based services, health and wellness, employment, housing and transportation. It is also responsible for the statewide Senior Medicare Fraud Patrol project, the I-CARE insurance counseling program, the Family Caregiver Support Program and the Alzheimer's Resource Coordination Center (ARCC). The DAS Division is also responsible for other State funded programs including Geriatric Loan Forgiveness, ElderCare Trust Fund, and the Alzheimer's Resource Coordination Center (ARCC).

• Elder Rights Division
   The State Long Term Care Ombudsman directs the activities of the Elder Rights Division. This division oversees the Long Term Care Ombudsman Program at the Aging Disability Resource Centers, statewide. Under SC law, this program also handles non-criminal abuse, neglect, and exploitation complaints from residents of Department of Mental Health facilities and residents of Department of Disabilities and Special Needs facilities.

   The division is also responsible for the development of legal assistance services statewide. The legal services program provides education on legal issues and abuse prevention, ensures that callers are referred to the appropriate person or agency for assistance with legal issues, and promotes the use of Advance Directives including Living Wills and Health Care Powers of Attorney.

Programs and Services of the Aging Network:
The Lieutenant Governor's Office on Aging and the Regional Aging and Disability Resource Centers (ADRC) coordinate and fund various other programs. (ADRCs used to be called “Area Agencies on Aging”)

ADRC's provide a single source for information and access to services for seniors, caregivers, and adults with disabilities who are seeking long term care. Their goal is to minimize confusion, improve individual choice, and help seniors get the information they need to make good decisions. ADRCs make it easier for seniors and their families to learn about services and supports that are available in the community and to access those services.

County Councils on Aging and other agencies provide many services in local communities. Under contracts with the federal government, funding is provided for services through each of the Regional Aging and Disability Resource Centers. The services that are funded with federal tax dollars must go through an open bidding process to ensure that taxpayer dollars are being spent efficiently.

For more information or help finding the services listed in this section of the handbook, call the Regional Information Referral and Assistance program at the ADRC that serves your county. A directory with those telephone numbers can be found in the back of this guide. You can also call the Lieutenant Governor’s Office on Aging at 1-800-868-9095.

• Advance Directives Program
   The Office on Aging provides information on advance directives. South Carolina law provides both the living will and the health care power of attorney to help people plan in advance for end-of-life care. If you are in a hospital or long term care facility and want to make a living will, the law says that a long term care ombudsman witness must witness the living will. The State Long Term Care Ombudsman Program oversees this program and trains volunteers who are designated as Living Will Witnesses by the State Long Term Care Ombudsman.

• Adult Day Services
   These services are offered from 4 to 14 hours daily in community settings. They support and encourage personal independence as well as social, physical, and emotional well-being. These services help adults who require daytime supervision when their caregivers are employed or need a break from care giving responsibilities. SC Department of Health and Environmental Control licenses these providers.

• The Alzheimer's Resource Coordination Center (ARCC) is a state-funded program that provides grants to community organizations to help them create innovative approaches to Alzheimer's education.
and respite care. These programs assist caregivers of persons with Alzheimer’s disease. More information on these grants can be obtained from the Lieutenant Governor’s Office on Aging at (800) 868-9095. The center also maintains resource materials on Alzheimer’s disease and other dementias. These materials are available for organizations who serve persons with Alzheimer’s disease and/or their caregivers. Technical assistance and training is provided through the center.

- **Disease Prevention and Health Promotion**—These activities help seniors maintain and/or improve their health status. The goals of the activities are 1) to reduce risk factors associated with illness, disability, or disease; 2) delay the onset of disease; 3) preserve functional ability, and 4) manage chronic disease. Activities include things like routine health screenings; nutritional assessment, counseling and follow-up; health promotion programs; physical fitness programs; and accident prevention activities. These activities occur in a variety of community settings, including senior centers.

- **Elder Abuse Prevention**—the Lieutenant Governor’s Office on Aging works to improve understanding of factors related to abuse through training and public awareness, and assists caregivers of seniors to prevent abuse.

- **Eldercare Trust Fund**—All gifts and contributions to the Fund are used to help older persons remain in their homes and communities for as long as possible. Seed grants are awarded to not-for-profit community organizations. New programs and innovative services are established to support the independence, dignity, and vitality of our older citizens. Not-for-profit organizations can submit grant applications in early April each year.

- **Employment Services**—Title V of the Older Americans Act provides funds for the Senior Community Service Employment Program. This program offers training to low-income people who are 55 and over to help them in entering the job market or moving to other types of employment. Enrollees receive training and experience by working for nonprofit organizations.

- **Evidence Based Programs** are programs that use tested, proven methods to help people manage their health and experience by working for nonprofit organizations.

- **Family Caregiver Support Program (FCSP):** Caregivers need two main things: information and short breaks away from caregiving (respite). The FCSP at each regional Aging and Disability Resource Center provides a specialist, the Family Caregiver Advocate, who offers one-on-one assistance with care planning and management, and who can suggest ways to take a break from caregiving. The Advocate also offers support groups, classes, information, and other services designed to make caregiving a little easier, less stressful, and more rewarding. Limited respite and supplemental services may also be available to unpaid family caregivers of frail or disabled adults age 60 and over; caregivers of adults with Alzheimer’s disease; grandparents (55 or older) raising a grandchild under 19; and grandparents or relatives 55 and older caring for an adult with a disability.

- **Geriatric Loan Forgiveness** program provides limited funds to assist physicians in repaying student loans. In return, these doctors agree to remain in South Carolina for five years and care for the state’s ever increasing senior population.

- **Group Dining** provides a nutritionally balanced meal five days a week to older adults at senior centers or other designated places. The program includes nutrition education and other activities designed to promote health and wellness.

- **Homebound Support** activities provide social contact for seniors who live alone or who are isolated. These activities provide seniors with an opportunity for socializing and are also a way of checking on their safety and well-being.

- **Home Care Services** include a broad range of activities. The services are based on the level of need of the individual and that individual’s primary caregiver. Home care aides may provide services including: housekeeping, shopping, meal preparation, medication management, personal care assistance with activities of daily living (e.g., bathing, dressing, and toileting), and temporary respite for caregivers.

- **Home-Delivered Meals** ensure that seniors who are homebound receive at least one nutritionally balanced meal five days a week in their own homes so they can maintain a maximum level of health and independence, instead of moving to a care facility.

- **Information, Referral, and Assistance Specialists** provide information about resources and services that are available for older adults, adults with disabilities, and their caregivers. Each regional Aging and Disability Resource Center in South Carolina has a certified I&RA Specialist on staff to help individuals locate and access needed services.

- **Insurance Counseling, Assistance and Referrals for Elders (I-CARE) and Senior Medicare Patrol** assists people with issues related to Medicare, Medicare Supplements, Medicare Savings programs, Medicare Advantage Plans and Senior Medicare Fraud Programs. They also enroll individuals in Medicare Part D and train volunteers to provide free counseling related to health insurance and long term care insurance. The Senior Medicare Patrol program operates in partnership with the I-CARE program. I-CARE counselors are located in the 10 regional Aging and Disability Resource Centers around the state. Refer to the Aging and Disability Resource Center listings in the “Community Resources Directory” section of this handbook to locate the regional office that serves your county.

- **Legal Assistance Services**—These services are provided to low income seniors at no cost through the Aging and Disability Resource Centers when funding is available. The Lieutenant Governor’s Office on Aging is responsible for ensuring that older adults have access to the legal assistance through advocacy, advice, representation, information, and education, with the goal of protecting the older person’s dignity, rights, autonomy, and financial security.

- **Long Term Care Ombudsman Program** provides a statewide system for protecting the dignity and rights of vulnerable adults in long term care facilities. Ombudsmen investigate and resolve complaints that are made against facilities by the resident or on behalf of the resident. Complaints include allegations of abuse, neglect and exploitation, and issues of quality of care and resident rights. Regional Long Term Care Ombudsmen are located in the 10 regional Aging and Disability Resource Centers around the state. Listings of the Aging and Disability Resource Centers can be found in the “Community Resource Directory” section of this handbook and provide the contact information for the regional offices for each county. You may also contact the State Long Term Care Ombudsman in Columbia at 1-800-868-9095 for assistance.

- **Respite Services** provide assistance and relief from caregiving responsibilities. Services may be provided for individual caregivers in the home, in group home settings or, for overnight or lengthier respite, in long term care facilities.

- **Senior Center Activities** include a broad range of group activities, designed to meet the social, recreational, physical fitness and educational needs of a diverse older population. These activities go above and beyond the services specifically contracted by the Aging and Disability Resource Centers.
SC Access: SC Access, a program of the Lieutenant Governor’s Office on Aging, is an information, referral and assistance system that provides a web based service directory and regional Information and Referral Specialists who can help match individuals with programs and services designed to help them remain independent. SC Access has over 11,000 “Service Records” in its system. These are listings of specific services that include detailed program descriptions and information about cost, location, application procedures, contact telephone numbers and other valuable information—and more are being added every day.

- The SC Access database is available to anyone with access to the Internet at home, at a Senior Center, a public library, or elsewhere, simply by visiting the web site www.scaccesshelp.org. For individuals who do not have access to a computer, or who would rather speak to someone by phone, there are ten regional Information, Referral and Assistance Specialists available to provide assistance.

- Agencies that are listed in SC Access include government-sponsored, non-profit, and for-profit services in every county in South Carolina. SC Access lists everything from assisted living facilities to veteran’s benefits. There are many ways to search the system for information. Visit the website at www.scaccesshelp.org to find services in South Carolina or refer to the directory of regional Information, Referral, and Assistance Specialists listed by region in the back of this Senior Guide for telephone assistance.

Transportation—Seniors who do not have transportation may still be able to travel to and from important activities such as medical appointments, educational and social activities, shopping, meal sites and social service agencies. Several Aging and Disability Resource Centers have volunteer transportation programs for older persons who do not have alternative options available.

Veteran Directed Home and Community Based Services is a program for veterans of any age who meet nursing home level of care but who wish to remain at home and are willing to participate in directing their care. Participants in the program are assessed to determine what services and supports are needed. Then, a service plan and a budget are developed, and assistance is given in selecting providers, purchasing services and directing services. The program is being implemented in several areas of the state and service is available, based on funding.

Part Seven–Community Resource Directory

UNITED STATES SENATORS
Jim DeMint
167 Russell Senate Office Building
Washington, DC 20510
(202) 224-6121

Lindsey Graham
290 Russell Senate Office Building
Washington, DC 20510
(202) 224-5972

UNITED STATES HOUSE OF REPRESENTATIVES
Tim Scott
South Carolina-1st, Republican
1117 Longworth HOB
Washington, D.C. 20515
(202) 225-3176 / Fax: (202) 225-3407

Joe Wilson
South Carolina-2nd, Republican
2229 Rayburn House Office Building
Washington, DC 20515
(202) 225-2452 / Fax: (202) 225-2455

Jeff Duncan
South Carolina-3rd, Republican
116 Cannon HOB
Washington, DC 20515
(202) 225-5301 / Fax: (202) 225-3216

Trey Gowdy
South Carolina-4th, Republican
1237 Longworth HOB
Washington, DC 20515
(202) 225-6030 / Fax: (202) 226-1177

Mick Mulvaney
South Carolina-5th, Democrat
1004 Longworth HOB
Washington, DC 20515
(202) 225-5501 / Fax:(202) 225-0464

James E. Clyburn
South Carolina-6th, Democrat
2135 Rayburn House Office Building
Washington, DC 20515
(202) 225-3315 / Fax: (202)225-2313

STATE GOVERNMENT
The Governor
The Executive Office of the Governor
1205 Pendleton St.
Columbia, SC 29211
(803) 734-2100 / Fax: 803-734-5167

Governor’s Office of Ombudsman
1200 Senate St., Room 104
Columbia, SC 29201
(803) 734-5049 / Fax:(803) 734-1428

Office of the Lieutenant Governor
P.O. Box 142
Columbia, SC 29202
(803) 734-2080 or (866) 756-2855
Fax: (803) 734-2082

State Long Term Care Ombudsman
1301 Gervais St., Ste. 350
Columbia, SC 29201
(803) 734-9900 or (800) 868-9095

Region I LTC Ombudsman:
Serving Anderson, Cherokee, Greenville, Oconee, Pickens & Spartanburg
864-242-9733

Region II LTC Ombudsman:
Serving Abbeville, Edgefield, Greenwood, Laurens, McCormick & Saluda
(864) 941-8070 or (800) 922-7729
Region III LTC Ombudsman:
Serving Chester, Lancaster, York and Union counties
(803) 329-9670 or (800) 662-8330

Region IV LTC Ombudsman:
Serving Fairfield, Lexington, Newberry and Richland counties
(803) 376-5389 or (866) 391-1185

Region V LTC Ombudsman:
Serving Aiken, Allendale, Bamberg, Barnwell, Calhoun, Chesterfield, Clarendon, Darlington, Dillon, Florence, Kershaw, Lee, Lexington, Marlboro, Newberry, Orangeburg, Richland and Sumter counties

Region VI LTC Ombudsman:
Serving Clarendon, Kershaw, Lee & Sumter
(803) 508-7033 or (866) 845-1550

Region VII LTC Ombudsman:
Serving Chesterfield, Darlington, Dillon, Florence, Marion & Orangeburg
843-383-8632, ext. 167

Region VIII LTC Ombudsman:
Serving Georgetown, Horry & Williamsburg
(843) 546-8502 or (888) 302-7550

Region IX LTC Ombudsman:
Serving Berkeley, Charleston & Dorchester
(843) 884-0030

Region X LTC Ombudsman:
Serving Beaufort, Colleton, Hampton & Jasper
(843) 726-5536 or (843) 524-2625

South Carolina Legislative Manual
Clerk of the House
Charles F. Reid
Cost: $12.00
View online:

Legislative Information Systems
1105 Pendleton St.
Bldt Building, Room 223
Columbia, SC 29201
(803) 734-3143 / (800) 922-1539

HEALTH CARE
Alzheimer’s Association
National Headquarters
225 N. Michigan Ave., Floor 17
Chicago, Illinois 60601
(800) 272-3900

S.C. Alzheimer’s Association
P.O. Box 7044
Columbia, SC 29202
(800) 636-3346

Anderson (Main) Office:
4124 Clemson Blvd., Ste. L
Anderson, SC 29621
(800) 272-3900 / Fax: (864) 225-1387
Serves Abbeville, Anderson, Edgefield, Greenwood, McCormick, Saluda and Oconee counties

Greenville Area Office:
301 University Ridge, Ste. 5000
Greenville, SC 29601
(800) 272-3900 / Fax: (864) 250.0807
Serves Greenville, Laurens and Pickens counties

Upstate Chapter Alzheimer’s Association
521 N. McDuffie St.
Anderson, SC 29621
(800) 273-2555

American Hospital Association
155 N. Wacker Dr.
Chicago, IL 60606
(312) 422-3000

James F. Byrnes Center for Geriatric Medicine
2100 Bull St.
P.O. Box 119
Columbia, SC 29203
(803) 898-1935

Spartanburg Area Office:
901 South Pine St.
Spartanburg, SC 29302
(864) 272-3900
Fax: (864) 213-1529 (fax)
Part-time hours; please call for appointment.
Serves Spartanburg, Union and York counties

Medicare Rights Center
520 8th Ave., North Wing, 3rd Floor
New York, NY 10018
(212) 869-3850 / Fax: (212) 869-3552

Spartanburg, Union and York counties

Midlands Area Office:
3223 Sunset Blvd., Ste. 100
W. Columbia, SC 29169
(803) 272-3900
Fax: (803) 791-8388
Serves Aiken, Allendale, Bamberg, Barnwell, Calhoun, Chesterfield, Clarendon, Darlington, Dillon, Florence, Kershaw, Lee, Lexington, Marlboro, Newberry, Orangeburg, Richland and Sumter counties

Myrtle Beach Area Office:
1039 44th Ave., N., Ste. 201
Myrtle Beach, SC 29577
(843) 213-1516 (800) 272-3900
Serves Georgetown, Horry, Marion and Williams counties

American Hospital Association
155 N. Wacker Dr.
Chicago, IL 60606
(312) 422-3000

Blue Cross Blue Shield of South Carolina
General Operator: (803) 788-0222
Current Medicare Policy Holders: (800) 633-4227
Interested in Purchasing a Policy: (800) 444-0030

The Carolinas Center for Medical Excellence
246 Stoneridge Dr., Ste. 200
Columbia, SC 29210
(800) 922-3089

James F. Byrnes Center for Geriatric Medicine
2100 Bull St.
P.O. Box 119
Columbia, SC 29203
(803) 898-1935

National Medicare Hotline
1-800-MEDICARE (800-633-2273)
http://www.medicare.gov
To report Medicare fraud: (800) 447-8477

Nursing Home Compare:
www.medicare.gov/NHCompare/home.asp

To Report Medicaid Fraud:
(888) 549-0820

Department of Health & Human Services
South Carolina Medicaid Program
1801 Main St.
Columbia, SC 29202
(888) 549-0820
To Report Medicaid Fraud:
(888) 364-3224

Nursing Home Compare:
www.medicare.gov/NHCompare/home.asp
COMMUNITY LONG TERM CARE
State Offices:
Community Long Term Care
1801 Main St.
P.O Box 8202
Columbia, SC 29202
(803) 898-2590

Local Offices:
Area 1-Greenville
620 N. Main St., Ste. 200
Greenville, SC 29601
(864) 242-2211 or (888) 535-8523
CLTCArea1@scdhhs.gov
Serving Greenville and Pickens counties

Area 2-Spartanburg
1411 W.O. Ezell Blvd., Ste. 200
Spartanburg, SC 29301
(864) 587-4707 or (888) 551-3864
CLTCArea2@scdhhs.gov
Serving Cherokee, Spartanburg and Union counties

Area 3-Greenwood, IMS
617 S. Main St.
P. O. Box 3088
Greenwood, SC 29648
(864) 223-8622 or (800) 628-3838
CLTCArea3@scdhhs.gov
Serving Abbeville, Edgefield, Greenwood, Laurens, McCormick and Saluda counties

Area 4-Rock Hill
1890 Neely's Creek Rd.
Rock Hill, SC 29732
(803) 327-9061 or (888) 286-2078
CLTCArea4@scdhhs.gov
Serving Chester, Lancaster and York counties

Area 5-Columbia
7499 Parklane Rd., Ste. 164
Columbia, SC 29223
(803) 741-0826 or (888) 847-0908
CLTCArea5@scdhhs.gov
Serving Fairfield, Lexington, Newberry and Richland counties

Area 6-Orangeburg
191 Regional Pkwy., Building A
Orangeburg, SC 29118
(803) 536-0122 or (888) 218-4915
CLTCArea6@scdhhs.gov
Serving Allendale, Bamberg, Calhoun and Orangeburg counties

Area 6A-Aiken Satellite Office
2330 Woodside Executive Center
Aiken, SC 29803
803-641-7680 or 1-888-364-3310
CLTCArea6A@scdhhs.gov
Serving Aiken and Barnwell counties

Area 7-Sumter
30 Westmark Court
Sumter, SC 29150
803-905-1980 or 1-888-761-5991
CLTCArea7@scdhhs.gov
Serving Clarendon, Kershaw, Lee and Sumter counties

Area 8-Florence
201 Dozier Blvd.
Florence, SC 29501
(843) 667-8718 or (888) 798-8995
CLTCArea8@scdhhs.gov
Serving Chesterfield, Darlington, Dillon, Florence and Marlboro counties

Area 9-Conway
1601 11th Ave.
P.O. Box 2150
Conway, SC 29528
(843) 248-7249 or (888) 539-8796
CLTCArea9@scdhhs.gov
Serving Georgetown, Horry, Marion and Williamsburg counties

Area 10-Charleston
4130 Faber Place Dr., Ste. 303
N. Charleston, SC 29405
(843) 529-0142
CLTCArea10@scdhhs.gov
Serving Berkeley, Charleston and Dorchester counties

Area 10A-Point South Satellite
10175 S. Jacob Smart Blvd.
Ridgefield, SC 29936
(843) 726-5353 or (800) 262-3329
Beaufort Line: (843) 521-9191
CLTCArea10A@scdhhs.gov
Serving Beaufort, Colleton, Hampton and Jasper counties

Area 11-Anderson, IMS
3215 Martin Luther King Jr. Blvd., Ste. H (29625)
P. O. Box 947
Anderson, SC 29623-5947
(864) 224-9452 or (800) 713-8003
CLTCArea11@scdhhs.gov
Serving Anderson and Oconee counties

Services for Persons with Disabilities
Department of Mental Health
2414 Bull St.
Columbia, SC 29202
(803) 898-8581

S.C. Department of Disabilities and Special Needs
3440 Harden St. Ext. (29203)
P.O. Box 4706
Columbia, SC 29240
(803) 898-9600 or (888) 376-4636
Fax: 803-898-9653

South Carolina Developmental Disabilities Council
Office of the Governor
1205 Pendleton St., Ste. 450
Columbia, SC 29201
(803) 734-0465 or (803) 734-1147 (TTY)

S.C. School for the Deaf and Blind
Telephone Equipment Distribution Center
Outreach Services
101 Executive Dr., Ste. 120
Columbia, SC 29210
(803) 896-8337 or (800) 896-8334 TTY

South Carolina Association of Residential Care Homes
4721-D Sunset Blvd.
Lexington, SC 29072
(803) 951-3290 or (800) 862-2908
Fax: 803-951-2136

Consumer Issues
S.C. Department of Consumer Affairs
2221 Devine St., Ste. 200
P.O. Box 5757
Columbia, SC 29205
(803) 734-4200 or (800) 922-1594
Federal Trade Commission
www.ftc.gov

About a Company, Organization or Business Practice:
(877) 382-4357

About Identity Theft:
(877) 438-4338

Better Business Bureau
(Central South Carolina and Charleston)
1515 Burnette Dr.
Columbia, SC 29210
(803) 254-2525 / Fax: (803) 779-3117

Better Business Bureau
(Coastal Carolina)
1121 3rd Ave.
Conway, SC 29526
(843) 488-2227 / Fax: 843-488-0998

Better Business Bureau
(Upstate SC)
408 N. Church St., Ste. C
Greenville, SC 29601-2164
(864) 242-5052 / Fax: (864) 271-9802

Credit/Financial Counseling
Consumer Credit Counseling Services
Trident Area
4925 Lacross Rd., Ste. 215
Charleston, SC 29406
(843) 735-7802

Consumer Credit Counseling Services
Beaufort Area
69 Robert Smalls Pkwy., Ste. 2-B
Beaufort, SC 29902
(843) 379-2227

Family Service Center of S.C.
2712 Middleburg Dr., Ste. 207-A
Columbia, SC 29204
(803) 733-5450

Crime
S.C. Crime Victims’ Ombudsman (CVO)
1205 Pendleton St., 1st Floor
Wade Hampton Building
Columbia, SC 29201
cvo@oepp.sc.gov.
(803) 734-0357 or (888) 238-0607
(Crime victims only, please)

S.C. Victim Assistance Network
113 Executive Pointe Blvd., Ste 202
Columbia, SC 29210
803-750-1200 or (888) 852-1900
justin@svan.org

U.S. Department of Justice
Report a Crime:
FBI Columbia
151 Westpark Blvd.
Columbia, SC 29210-3857
803-551-4200 / Fax: (803) 551-4324

Age Discrimination
S.C. Human Affairs Commission
2611 Forest Dr., Ste. 200
P.O. Box 4490
Columbia, SC 29204
803-737-7800 or (800) 521-0725

Worker’s Compensation Commission
P.O. Box 1715
1333 Main St., Ste 500
Columbia, SC 29201
(803) 737-5700 / Fax: (803) 737-5768

American with Disabilities Act
South Carolina Vocational Rehabilitation Department
1410 Boston Ave.
P.O. Box 15
W. Columbia, SC 29171
(803) 896-6500

Civil Rights Division
Office of the Asst. Attorney General
950 Pennsylvania Ave., NW
Washington, DC 20530
(202) 514-0293, (202) 307-2572 or (202) 307-2839

Handicapped Discrimination Protection and Advocacy for People with Disabilities, Inc.
3710 Landmark Dr., Ste. 208
Columbia, SC 29204
(803) 782-0639

Low Country Office
1569 Sam Rittenberg Blvd.
Charleston, SC 29407

Pee Dee Office
1801 W. Evans St., Ste. D-101
Florence, SC 29501

Piedmont Office
545 N. Pleasantburg Dr., Ste. 106
Edgefield Building, Park Central
Greenville, SC 29607

Discrimination/Civil Liberties
American Civil Liberties Union of South Carolina
P.O. Box 20998
Charleston, SC 29413-0998
(843) 720-1423

Legal Aid/Legal Services
Charleston Trident Urban League
P.O. Box 20249
Charleston, SC 29413-0249
(843) 965-4037 / Fax: (843) 965-4039

Columbia Urban League, Inc.
1400 Barnwell St.
Columbia, SC 29201
803-799-8150

Urban League Spartanburg Office
201 Caulder Ave, Ste 220
Spartanburg, SC 29306
(866) 562-4400 / Fax: (864) 562-4403

Lower Savannah Council of Governments
P.O. Box 850
Aiken S.C. 29802
(803) 508-7033

Trident Area Agency on Aging
4500 Leeds Place W., Ste. B
N. Charleston, SC 29405
(843) 554-2275 / Fax: (843) 555-2284

South Carolina Legal Services
SCLS Intake Office-Statewide
(803) 744-9430 or (888) 346-5592

Columbia Office
2030 Carver Ave.
Charleston, SC 29405
(843) 720-7044 or (888) 720-2320
Serving: Beaufort, Berkeley, Charleston, Colleton, Dorchester, Hampton and Jasper counties

Columbia Office
2109 Bull St.
P.O. Box 1445
Columbia, SC 29201
(888) 799-9668
Open Monday through Friday, 8:30 a.m.-5 p.m.
Serving: Lee, Lexington, Kershaw, Richland and Sumter counties

Conway Office
1201 B Creel St., Wing A-1
P.O. Box 1231
Conway, SC 29526
(866) 597-0100
Serving: Georgetown, Horry, Marion and Williamsburg counties

Consumer Credit Counseling Services
Beaufort Area
69 Robert Smalls Pkwy., Ste. 2-B
Beaufort, SC 29902
(843) 379-2227

Family Service Center of S.C.
2712 Middleburg Dr., Ste. 207-A
Columbia, SC 29204
(803) 733-5450

Lower Savannah Council of Governments
P.O. Box 850
Aiken S.C. 29802
(803) 508-7033

Trident Area Agency on Aging
4500 Leeds Place W., Ste. B
N. Charleston, SC 29405
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P.O. Box 1445
Columbia, SC 29201
(888) 799-9668
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Serving: Lee, Lexington, Kershaw, Richland and Sumter counties

Conway Office
1201 B Creel St., Wing A-1
P.O. Box 1231
Conway, SC 29526
(866) 597-0100
Serving: Georgetown, Horry, Marion and Williamsburg counties
<table>
<thead>
<tr>
<th>County DSS</th>
<th>Address</th>
<th>City, State ZIP</th>
<th>Phone/Fax</th>
</tr>
</thead>
<tbody>
<tr>
<td>Florence County DSS</td>
<td>2685 S. Irby St.</td>
<td>Florence, SC 29505</td>
<td>(843) 669-3554</td>
</tr>
<tr>
<td>Georgetown County DSS</td>
<td>330 Dzeier St.</td>
<td>Georgetown, SC 29440</td>
<td>(843) 546-5134</td>
</tr>
<tr>
<td>Greenville County DSS</td>
<td>Greenville County Square 301 University Ridge</td>
<td>Greenville, SC 29603</td>
<td>(843) 467-7797 / (843) 467-7700</td>
</tr>
<tr>
<td>Greenwood County DSS</td>
<td>1118 Phoenix St.</td>
<td>Greenwood, SC 29468</td>
<td>(843) 229-5258</td>
</tr>
<tr>
<td>Hampton County DSS</td>
<td>102 Ginn Altman Ave., Ste. A</td>
<td>Hampton, SC 29924</td>
<td>(803) 943-3641 / Fax: (803) 943-4879</td>
</tr>
<tr>
<td>Harry County DSS</td>
<td>1951 Industrial Park Rd.</td>
<td>Conway, SC 29526</td>
<td>(843) 915-4700</td>
</tr>
<tr>
<td>Jasper County DSS</td>
<td>204 N. Jacob Smart Blvd.</td>
<td>Ridgegland, SC 29936</td>
<td>(843) 726-7753 / (843) 726-7747</td>
</tr>
<tr>
<td>Kershaw County DSS</td>
<td>110 E. Dekalb St.</td>
<td>Camden, SC 29020</td>
<td>(803) 432-7676 / Fax: (803) 425-7195</td>
</tr>
<tr>
<td>Lancaster County DSS</td>
<td>1837 Pageland Hwy.</td>
<td>Lancaster, SC 29721</td>
<td>(803) 286-7108 / Fax: (803) 285-4480</td>
</tr>
<tr>
<td>Laurens County DSS</td>
<td>93 Human Services Rd.</td>
<td>Laurens, SC 29360-2001</td>
<td>(864) 833-0100 / Fax: (864) 833-1681</td>
</tr>
<tr>
<td>Lee County DSS</td>
<td>Bishopville</td>
<td>Laurens, SC 29010</td>
<td>(803) 484-5376 / Fax: (803) 484-6435</td>
</tr>
<tr>
<td>Lexington County DSS</td>
<td>1070 South Lake Dr.</td>
<td>Lexington, SC 29973</td>
<td>(803) 785-7333 / Fax: (803) 785-2278</td>
</tr>
<tr>
<td>McCormick County DSS</td>
<td>215 N. Mine St., Hwy 28 N.</td>
<td>McCormick, SC 29835</td>
<td>(864) 465-2140 / Fax: (864) 465-2125</td>
</tr>
<tr>
<td>Marion County DSS</td>
<td>137 Airport Court, Ste. A</td>
<td>Mullins, SC 29574</td>
<td>(843) 423-4623 / Fax: (843) 423-2419</td>
</tr>
<tr>
<td>Marlboro County DSS</td>
<td>714 S. Parsonage St.</td>
<td>Bennettsville, SC 29512</td>
<td>(843) 479-7181 / Fax: (843) 479-6254</td>
</tr>
<tr>
<td>Newberry County DSS</td>
<td>P.O. Box 309</td>
<td>Newberry, SC 29108</td>
<td>(803) 321-2155 / Fax: (803) 321-2168</td>
</tr>
<tr>
<td>Oconee County DSS</td>
<td>223A Kenneth St.</td>
<td>P.O. Box 739</td>
<td>(864) 638-4400 / Fax: (864) 638-4444</td>
</tr>
<tr>
<td>Orangeburg County DSS</td>
<td>2570 Old St. Matthews Rd., N.E.</td>
<td>Orangeburg, SC 29116-1087</td>
<td>(803) 531-3101 / Fax: (803) 531-2045</td>
</tr>
<tr>
<td>Pickens County DSS</td>
<td>212 McDaniel Ave.</td>
<td>Pickens, SC 29671</td>
<td>(864) 898-5810 / Fax: (864) 898-5819</td>
</tr>
<tr>
<td>Richland County DSS</td>
<td>3220 Two Notch Rd.</td>
<td>Columbia, SC 29204</td>
<td>(803) 714-7300 / Fax: (803) 714-7301</td>
</tr>
<tr>
<td>Saluda County DSS</td>
<td>613 Newberry Hwy.</td>
<td>Saluda, SC 29138</td>
<td>(864) 445-2139 / Fax: (864) 445-7088</td>
</tr>
<tr>
<td>Spartanburg County DSS</td>
<td>630 Chesnee Hwy.</td>
<td>Spartanburg, SC 29303</td>
<td>(864) 596-3001 / Fax: (864) 596-3141</td>
</tr>
<tr>
<td>Sumter County DSS</td>
<td>105 N. Magnolia St.</td>
<td>Sumter, SC 29151-0068</td>
<td>(803) 773-5531 / Fax: (803) 778-2058</td>
</tr>
<tr>
<td>Union County DSS</td>
<td>200 S. Mountain St.</td>
<td>Union, SC 29379</td>
<td>(864) 429-1660 / Fax: (864) 429-1664</td>
</tr>
<tr>
<td>Williamsburg County DSS</td>
<td>1401 Eastland Ave.</td>
<td>Kingstree, SC 29556</td>
<td>(843) 355-5411 / Fax: (843) 355-0913</td>
</tr>
<tr>
<td>York County DSS</td>
<td>93 Heckle Blvd.</td>
<td>Rock Hill, SC 29732</td>
<td>(803) 684-2315 / Fax: (803) 684-8103</td>
</tr>
<tr>
<td>Veterans Affairs</td>
<td>6437 Garners Ferry Rd.</td>
<td>Columbia, SC 29209</td>
<td>(800) 827-1000</td>
</tr>
<tr>
<td>South Carolina Office of Veteran's Affairs</td>
<td>1205 Pendleton St., Ste. 463</td>
<td>Columbia, SC 29201</td>
<td>(803) 734-0200 / Fax: (803) 734-0421</td>
</tr>
<tr>
<td>Salvation Army</td>
<td>2001 Assembly St.</td>
<td>Columbia, SC 29201</td>
<td>(803) 765-0260</td>
</tr>
<tr>
<td>Low Income Home Energy Assistance Program</td>
<td>Office of Economic Opportunity</td>
<td>(803) 734-0356</td>
<td></td>
</tr>
<tr>
<td>Salvation Army</td>
<td>2001 Assembly St.</td>
<td>Columbia, SC 29201</td>
<td>(803) 765-0260</td>
</tr>
<tr>
<td>LOCAL COMMUNITY ACTION AGENCIES Aiken/Barnwell Counties Community Action Commission, Inc.</td>
<td>P.O. Box 2066</td>
<td>Aiken, SC 29802-2066</td>
<td>(803) 689-6886 / Fax: (803) 649-1588</td>
</tr>
<tr>
<td>Serving Aiken, Allendale, Bamberg, Barnwell, Calhoun, Greenville, Hampton, Lexington and Richland counties</td>
<td></td>
<td>(803) 689-6886 / Fax: (803) 649-1588</td>
<td></td>
</tr>
</tbody>
</table>
Satellite Office Locations:
Barnwell
Litchfield Apartment Complex
Barnwell, SC 29812
(803) 259-3145

Cayce
650 Knox Abbott Dr.
Cayce, SC 29033
(803) 794-6778 / Fax: (803) 794-7144

Beaufort/Jasper Economic Opportunity Commission, Inc.
P.O. Drawer 9
Beaufort, SC 29902-0009
(843) 470-4516 / Fax: (843) 470-4510
Serving Beaufort and Jasper counties

Satellite Office Location
Ridgeland
419 Jacob Smart Blvd.
Ridgeland, SC 29936

Berkeley-Dorchester Counties Economic Development Corporation
P.O. Box 609
Moncks Corner, SC 29461
(843) 761-8244 / Fax: (843) 719-3091
Serving Berkeley, Colleton and Dorchester counties

Satellite Office Locations
Moncks Corner
Trident United Way
325 E. Main St.
Moncks Corner, SC 29461
(843) 761-6033, ext.225

Satellite Office Locations
Moncks Corner
370 R.C. Dennis Blvd.
Moncks Corner, SC 29461
(843) 719-3200

St. George
201 Johnson St.
Kenneth Waggoner Service Building
St. George, SC 29477
(843) 563-9524

Summerville
200 Main St.
Summerville, SC 29481
(843) 821-4549

Carolina Community Actions, Inc.
138 S. Oakland Ave.
P.O. Box 933
Rock Hill, SC 29731-6933
(803) 329-5195 / Fax: (803) 329-5198
Serving Chester, Fairfield, Lancaster, Union and York counties

Satellite Office Locations
Chester
109 McAlliley St.
Chester, SC 29706
(803) 385-5205

Lancaster
2010 Pageland Hwy.
Lancaster, SC 29720
(803) 285-2034

Rock Hill
546 S. Cherry Rd., Ste. S.
Rock Hill, SC 29730
(803) 366-5537

Union
201 E. Main Street, Ste. A
Union, SC 29379
(864) 427-0336

Winnsboro
101 N. Congress St.
Winnsboro, SC 29180
(803) 635-3606

Charleston County Human Services Commission
P.O. Box 20968
Charleston, SC 29413
(843) 723-9285 / Fax: (843) 724-6787
Serving Charleston, Beaufort, Berkeley, Dorchester, and Jasper counties

Satellite Office Locations
Johns Island
3351 Maybank Hwy.
Johns Island, SC 29455
(843) 599-2458

Mt. Pleasant
1734 Hwy. 17 N.
Mt. Pleasant, SC 29464
(843) 884-5130

North Charleston
4790 Hasell St.
N. Charleston, SC 29406
(843) 554-1176

Chesterfield-Marlboro Economic Opportunity Council, Inc.
318-322 Front St.
Cheraw, SC 29520
(843) 320-9770 / Fax: (843) 320-9770
Serving Chesterfield, Darlington, Dillon and Marlboro counties

Satellite Office Locations
Bennettsville
105 E. Market St.
Bennettsville, SC 29512
(843) 479-2818

Pageland
405 Gum St.
Pageland, SC 29728
(843) 672-6723

Darlington County Community Action Agency
904 S. 4th St.
Hartsville, SC 29550
(843) 332-1135 / Fax: (843) 332-3971
Serving Darlington county

Satellite Office Locations
Darlington
223 Law Plantation Rd.
Darlington, SC 29540
(843) 393-4049

Lamar
Grooms Bldg.
528 Cartersville Hwy.
Lamar, SC 29069
(843) 326-5430

Society Hill
223 Hall St.
Society Hill, SC 29593
(843) 378-4571

GLEAMNS Human Resources Commission, Inc.
237 North Hospital St.
P.O. Box 1326
Greenwood, SC 29648
(864) 223-8434 / Fax: (864) 223-9456
Serving Abbeville, Anderson, Edgefield, Greenwood, Laurens, McCormick, Newberry, Oconee, Pickens and Saluda counties

Abbeville
105 W. Augusta St.
Abbeville, SC 29620
(864) 459-2100

Laurens
125 GLEAMNS St., Ste. A
Laurens, SC 29360
(864) 984-5123

Edgefield
231 N. Main St.
Edgefield, SC 29824
(864) 637-4030

McCormick
109 W. Augusta St.
McCormick, SC 29835
(864) 852-2662

Newberry
926 Suber Dr.
Newberry, SC 29108
(803) 276-2110

GLEAMNS Human Resources Commission, Inc.
904 S. 4th St.
Hartsville, SC 29550
(843) 332-1135 / Fax: (843) 332-3971
Serving Darlington county
Saluda
407 W. Butler Ave.
Saluda, SC 29138
(864) 445-2035

Lowcountry Community Action Agency, Inc.
319 Washington St.
Walterboro, SC 29488
(843) 549-5576 / Fax: (843) 549-2190
Serving Colleton and Hampton counties

Satellite Office Location
Hampton
602 Hoover St.
Hampton, SC 29924
(803) 943-3561

Orangeburg-Calhoun-Allendale-Bamberg
Community Action
1822 Joe Jeffords Hwy.
P.O. Drawer 710
Orangeburg, SC 29116-0710
(803) 536-1027 / Fax: (803) 536-4657
Serving Allendale, Bamberg, Calhoun and Orangeburg counties

Satellite Office Locations
Allendale
765 Bay St.
Allendale, SC 29810
(803) 584-3845

Bamberg
111 N. Main St.
Bamberg, SC 29013
(803) 245-5901

Bowman
820 Bowman Branch Rd.
Bowman, SC 29018
(803) 829-2701

Denmark
122 E. Coker St.
Denmark, SC 29042
(803) 793-4373

Holly Hill
891 Gilway & Railroad
Holly Hill, SC 29059
(803) 496-5370

St. Matthews
Calhoun Country Center
Lake Inspiration
St. Matthews, SC 29135
(803) 874-2936

Neeses
6914 Neeses Hwy.
Neeses, SC 29107
(803) 247-2691

Pee Dee Community Action Agency
2685 South Irby St.
P.O. Drawer 12670
Florence, SC 29505
(803) 678-3400 Fax: (803) 678-3404
Serving Dillon, Florence and Marion counties

Satellite Office Locations
Dillon
909 Hwy. 34, W.
Dillon, SC 29536
(843) 774-9038

Lake City
209 Graham Rd.
Lake City, SC 29536
(843) 394-7440

Marion
201 Witcover St
Marion, SC 29571
(843) 423-6711

Piedmont Community Actions, Inc.
300A S. Daniel Morgan Ave. (29306)
P.O. Box 5374
Spartanburg, SC 29304
(864) 585-8183 Fax: (864) 515-9397
Serving Cherokee and Spartanburg counties

Satellite Office Locations
Spartanburg
704 Howard St.
Spartanburg, SC 29303
(864) 327-1127

Gaffney
501 W. Rurledge Ave.
Gaffney SC 29341
(864) 489-3163

Sunbelt Human Advancement Resources, Inc.
1200 Pendleton St.
P.O. Box 10204
Greenville, SC 29603
(864) 269-0700 / Fax: (864) 295-6151
Serving Greenville, Oconee, Pickens and Anderson counties

Satellite Offices
Anderson
400 E. River St.
Anderson, SC 29624
Phone: (864) 224-7028

Easley
121 E. 1st St.
Easley, SC 29641
(864) 859-2989

Seneca
204 N. Fair Play St.
Seneca, SC 29678
(864) 882-3495

Waccamaw Economic Opportunity Council, Inc.
1261 Hwy. 501 E., Ste. B (29526)
P.O. Box 1467
Conway, SC 29528
(843) 234-4100 / Fax: (843) 234-4111
Serving Georgetown, Horry and Williamsburg counties

Satellite Office Locations
Aynor
621 S. Main St.
Aynor, SC 29511
(843) 358-1644

Conway
Hwy. 501 E., Ste. D
Conway, SC 29526
(843) 248-4208

Kingstree
112 Jackson St.
Kingstree, SC 29556
(843) 355-9922 / Fax: (843) 355-7084

Loris
929 N. Kings Hwy.
Myrtle Beach, SC 29577
(843) 626-7270

Waterloo Community Actions, Inc.
13 South Main St.
P.O. Box 1838
Sumter, SC 29128
(803) 775-4354 / Fax: (803) 773-7178
Serving Clarendon, Florence, Kershaw, Lee, Marion, Orangeburg, Richland and Sumter counties

Satellite Office Locations
Bishopville
1001 N. Main St.
Bishopville, SC 29010
(803) 484-5401
Camden
537 Rutledge St.
Camden, SC 29020
(803) 432-3411

Columbia (Richland County)
3220 Two Notch Rd.
P.O. Box 2688
Columbia, SC 29201
(803) 786-4250

C.R. Neal Dream Center
2430 Atlas Rd., Ste. 3 & 4
Columbia, SC 29209
(803) 783-4500

Manning
3 W. Boyce St.
Manning, SC 29102
(803) 435-4337

Aging Services in South Carolina Lieutenant Governor’s Office on Aging
1301 Gervais St., Ste. 350
Columbia, SC 29201
(803) 734-9900 / Fax: 803-734-9887

Region I–Appalachia Aging and Disability Resource Center (Serving Anderson, Cherokee, Greenville, Oconee, Pickens and Spartanburg)

South Carolina Appalachian Council of Governments
30 Century Circle
P.O. Box 6668
Greenville, SC 29606
(864) 242-9733 / Fax (864) 242-6957

Senior Solutions (Serving Anderson and Oconee counties)
(864) 225-3370

Senior Centers of Cherokee, Inc.
(864) 489-3868

Greenville Senior Action, Inc.
(864) 467-3660

Pickens County Seniors Unlimited
(864) 878-0172

Senior Centers of Spartanburg County, Inc.
(864) 596-3910

Region II–Upper Savannah (Serving Abbeville, Edgefield, Greenwood, Laurens, McCormick and Saluda counties)

Upper Savannah Council of Governments
222 Phoenix St., Ste. 200
P.O. Box 1366
Greenwood, SC 29648
(864) 941-8050 or (800) 922-7729
Fax: (864) 941-8090

Abbeville/Greenwood
Piedmont Agency on Aging
(864) 223-0164

Abbeville Senior Center
(864) 459-9666

Edgefield
Edgefield County Senior Citizens Council
(803) 637-5326

Laurens
Senior Options, Inc.
(864) 938-0972

McCormick County
Senior Center, Inc.
(864) 465-2626

Saluda County Council on Aging
(864) 445-2175

Region III–Catawba Aging and Disability Resource Center (Serving Chester, Lancaster, York and Union counties)

Catawba Aging and Disability Resource Center
P.O. Box 4618
Rock Hill, SC 29732
(803) 329-9670 / Fax: (803) 329-6537

Chester
Senior Services of Chester County
(803) 385-3838

Lancaster
Lancaster County Council on Aging
(803) 285-6956

Union
Union County Council on Aging
(864) 429-1682

York
York County Council on Aging
(803) 327-6694

Region IV–Central Midlands Aging and Disability Resource Center (Serving Fairfield, Lexington, Newberry and Richland counties)

Central Midlands Council of Governments
236 Stoneridge Dr.
Columbia, SC 29210
(803) 376-5390 / Fax: (803) 376-5394

Fairfield
Fairfield County Council on Aging
(803) 635-3015

Lexington
Irmo/Chapin Recreation Commission
(803) 345-6181

Lexington County Recreation Commission
(803) 356-5111

Newberry
Newberry County Council on Aging
(803) 276-8266

Richland
Senior Resources
(803) 252-7734

Region V–Lower Savannah Aging and Disability Resource Center (Serving Aiken, Allendale, Barnwell, Calhoun and Orangeburg counties)

Lower Savannah Council of Governments
P.O. Box 850
2748 Wagener Rd.
Aiken, SC 29802
(803) 649-7981 / Fax: (803) 649-2248

Aiken
Aiken Area Council on Aging
(803) 648-5447

Allendale
Allendale County Council on Aging
(803) 584-4350

Barnwell
Generations Unlimited
(803) 541-1249

Calhoun
Calhoun County Council on Aging
(803) 874-1270

Orangeburg
Orangeburg County Council on Aging
(803) 531-4663

Region VI–Santee Lynches Aging and Disability Resource Center (Serving Clarendon, Kershaw, Lee and Sumter counties)

Santee–Lynches Regional Council of Governments
P.O. Box 1837
36 W. Liberty St.
Sumter, SC 29151
(803) 775-7381 / Fax: (803) 773-9903
Laurens
Laurens Public Health Office
93 Human Services Rd.
P.O. Box 447
Laurens, S.C. 29360
(864) 833-0000 / Fax: (864) 833-6400

Lee
Lee County Public Health Department
810 Brown St.
Bishopville, SC 29010
(803) 484-6612

Lexington County
Lexington County Health Department
1070 S. Lake Dr., Ste. B
Lexington SC 29073
(803) 785-6550 / Fax: (803) 785-6555

Lexington County Health Department
Batesburg Health Clinic
229 W. Church St.
Batesburg, SC 29006
(803) 332-6236 / Fax: (803) 332-2706

Swansea Health Clinic
500 Charlie Rast Rd.
Swansea, SC 29160
(803) 785-3914 / Fax: (803) 785-4142

Marion
Marion County Public Health Department
206 Airport Court, Ste. B
Mullins, SC 29574
(843) 423-8295

Marlboro
Marlboro County Public Health Department
711 Parsonage St. Extension
Bennettsville, SC 29512
(843) 479-6801

McCormick Public Health Office
204 Hwy, 28
P.O. Box 27
McCormick, SC 29835
(864) 852-2511 / Fax: (864) 852-2827

Newberry County Health Department
2111 Wilson Rd.
Newberry, SC 29108
(803) 321-2170 / Fax: (803) 321-2300

Orangeburg County
Orangeburg County Health Department
P.O. Box 126
150 Carolina Ave.
Orangeburg, SC 29115
(803) 642-7543 or (800) 450-1687
Fax: (803) 533-7134

Holly Hill Health Department
932 Holly St.
P.O. Box 1250
Holly Hill, SC 29059
(803) 496-3324 / Fax: (803) 496-9653

Oconee
Walhalla Public Health Office
200 Booker Dr.
Walhalla, SC 29691
(864) 638-4170 / Fax: (864) 638-4173

Pickens
Pickens County Public Health and Home Health Services
200 McDaniel Ave.
Pickens, SC 29671
To make appointments: (864) 898-8019
Health Department Information: (864) 898-5965
Home Health Services: (864) 898-5839

Richland County Health Department
2000 Hampton St.
Columbia, SC 29204
(803) 576-2980

Saluda Public Health Office
613 Newberry Hwy.
Saluda, SC 29138
(864) 445-2141 / Fax: (864) 445-7668

Seneca Public Health Office
609 N. Townville St.
P.O. Box 488
Seneca, SC 29679-0488
(864) 882-2245 / Fax: (864) 885-9659

Spartanburg County Public Health and Home Health Services
151 E. Wood St.
P.O. Box 4217
Spartanburg, SC 29305
(864) 345-1020 or (864) 596-2227
Home Health Services: (864) 596-3347

Sumter
Sumter County Public Health Department
105 N. Magnolia St.
Sumter, SC 29150
(803) 773-5511

Union County Public Health and Home Health Services
115 Thomas St.
P.O. Box 966
Union, SC 29379
To make appointments: (864) 429-8004
Health Department Information: (864) 429-1690
Home Health Services: (864) 429-1692

Williamsburg
Williamsburg County Health
520 Thurgood Marshall Blvd., Ste. A
Kingstree, SC 29556
(843) 355-6012 / Fax: (843) 355-6012

York
York County Health Department
P.O. Box 149
N. Congress St.
York, SC 29745
(803) 909-7300 / Fax: (803) 909-7357

Rock Hill Health Center
1070 Heckle Blvd.
P.O. Box 3057 CRS
Rock Hill, SC 29732
(803) 909-7300 / Fax: (803) 909-7480

Home Health Offices
Fairfield, Newberry, Lexington and Richland counties
2111 Wilson Rd.
Newberry, SC 29108
(866) 888-2430 or (803) 576-2700
Fax: (803) 276-0168

Chester, Lancaster, & York Counties
1833 Pageland Hwy.
P.O. Box 817
Lancaster SC 29720
(800) 359-4468 or (803) 286-8441
Fax: (803) 286-1258

Local Numbers:
Chester: (803) 581-3815
Kershaw: (803) 475-7122
Rock Hill: (803) 909-7400
York: (803) 648-1038

Abbeville, Anderson and Oconee County
220 McGee Rd.
Anderson, SC 29625
(888) 260-5617 (24 hour availability)
Fax: (864) 260-4575

Edgefield, Greenwood, Laurens, McCormick
and Saluda County
93 Human Services Rd.
Clinton, SC 29325
(864) 833-5883 or (866) 247-8362 (24 hour availability)
Fax: (864) 833-5457

Community Mental Health Centers
Department of Mental Health
2414 Bull St.
P.O. Box 485
Columbia, SC 29202
(803) 898-8581

Mental Health Centers
Aiken-Barnwell Mental Health Center
(Aiken and Barnwell counties)
1135 Gregg Hwy.
P.O. Box 2266
Aiken, SC 29801
(803) 641-7700
Anderson-Oconee-Pickens Mental Health Center
(Anderson, Oconee and Pickens counties)
200 Magee Rd.
Anderson, SC  29625
(864) 260-2220

Beckman Mental Health Center
(Greenwood, Edgefield, Abbeville, Laurens, McCormick, Newberry and Saluda counties)
1547 Parkway Suite
Greenwood, SC  29646
(864) 229-7120

Berkeley County Mental Health Center
(Berkeley county)
403 Stoney Landing Dr.
P.O. Box 1030
Moncks Corner, SC  29461
(843) 761-8282

Catawba Community Mental Health Center
(Chester, Lancaster and York counties)
448 Lakeshore Pkwy., Ste. 205
Rock Hill, SC  29730
(803) 328-9600

Charleston Area Mental Health Center
(Charleston and Dorchester counties)
2100 Charlie Hall Blvd.
Charleston, SC 29407
(843) 852-4100

Coastal Empire Mental Health Center
(Beaufort, Allendale, Colleton, Hampton and Jasper counties)
P.O. Box 1044
1050 Ribaut Rd.
Beaufort, SC  29902
(843) 524-8899

Columbia Area Mental Health Center
(Richland and Fairfield counties)
2715 Colonial Dr.
P.O. Box 4440
Columbia, SC 29203
(803) 898-4800

Greenville Mental Health Center
(City of Greenville)
124 Mallard St.
Greenville, SC  29601
(864) 241-1040

Lexington County Mental Health Center
(Lexington county)
301 Palmetto Park Blvd.
Lexington, SC  29072
(803) 996-1500

Orangeburg Area Mental Health Center
(Bamberg, Calhoun and Orangeburg counties)
2319 St. Matthews Rd.
P.O. Drawer 1929
Orangeburg, SC  29118
(803) 536-1571

Pee Dee Mental Health Center
(Darlington, Florence and Marion counties)
125 East Cheves St.
Florence, SC  29506
(843) 317-4089

Piedmont Center for Mental Health Services
(Greenville, not including City of Greenville)
20 Powderhorn Rd.
Simpsonville, SC 29681
(864) 963-3421

Santee-Wateree Mental Health Center
(Clarendon, Kershaw, Lee and Sumter counties)
P.O. Box 1929
Sumter, SC  29150
(803) 775-9364

Spartanburg Area Mental Health Center
(Cherokee, Spartanburg and Union counties)
250 Dewey Ave.
Spartanburg, SC  29303
(864) 585-0366

Tri-County Mental Health Center
(Chesterfield, Dillon and Marlboro counties)
1035 Cheraw Hwy.
P.O. Box 918
Bennettsville, SC  29512
(843) 454-0841

Waccamaw Center for Mental Health
(Horry, Georgetown and Williamsburg counties)
164 Waccamaw Medical Park Dr.
Conway, SC  29526
(843) 347-5060

S.C. Commission for the Blind
State Office
1430 Confederate Ave.
Columbia, SC  29202
(803) 898-8731 or (800) 922-2222

Aiken District Office
855 York St., NE
Aiken, SC  29801
(803) 641-7658

Charleston District Office
1064 Gardner Rd., Ste. 109
Charleston, SC  29407
(843) 852-4225

Greenville District Office
620 N. Main St.
Greenville, SC  29601
(864) 241-1111

Greenwood District Office
2345 Hwy. 72
221 East
Greenwood, SC  29646
(864) 223-3334

Greer District Office
202 Victoria St.
Greer, SC  29650
(864) 877-2384

Rock Hill District Office
1020 Heckle Blvd.
Rock Hill, SC 29730
(803) 980-8140

Walterboro District Office
101 Maple T. Willis Blvd.
Walterboro, SC  29488
(843) 539-1156

S.C. State Library and Department for the Blind
1430 & 1500 Senate St.
Columbia, SC  29202
(803) 734-8666

ADULT EDUCATION
S.C. Department of Education
Office of Adult Education
1430 & 1500 Senate St.
Columbia, SC  29202
(803) 734-8666

AGING ORGANIZATIONS
American Association of Retired Persons (AARP)
1201 Main St., Ste. 1290
Columbia, SC 29201
(866) 251-4374

S.C. Adult Day Services Association
P.O. Box 1269
Columbia, SC 29202
(803) 808-2980 / Fax: (803) 996-0551
INVoluntary Mental Health Commitments

What is an Involuntary Mental Health Commitment?

An involuntary mental health commitment is the way that a Probate Court Judge can order you to have mental health treatment, even if you do not want treatment. Although most adults have a right to refuse medical treatment, the commitment process creates an exception. The Probate Court may order treatment if you have a mental illness, you need treatment, and you meet the legal commitment standards.

There are two processes for adult mental health commitment: (1) emergency and (2) judicial.

The emergency process is used when you are an immediate harm to yourself or to others. In an emergency, you may be taken into custody immediately and admitted for treatment against your will.

The judicial process is used when there is not an emergency, but someone (usually a family member) believes you need mental health treatment even if you do not want treatment. You do not have to be detained while you wait on the Court to decide in a non-emergency situation.

In both emergency and non-emergency situations, the Court must hold a hearing before finding that you continue to need mental health treatment.

This fact sheet outlines both emergency and judicial mental health commitment procedures for adults. It does not talk about commitment for chemical dependency (alcohol or drug addiction) or commitment procedures for children.

What Happens If You Have Immediate Need for Mental Health Treatment?

(Emergency Process for Commitment)

Who starts the process?

Any person may file an “Affidavit,” a writing signed under oath, stating (1) that he or she believes you have a mental illness and are likely to cause serious harm to yourself or others if not immediately hospitalized, and (2) the specific reasons why he or she believes that about you. S.C. Code § 44-17-410. Usually, this person is a family member or an emergency responder such as Emergency Medical Service (EMS), who must have observed your actions first-hand.

Serious harm means a substantial risk of physical harm or injury to you or to others. S.C. Code § 44-23-10.

If you are not already in a medical facility, such as a mental health center or a hospital, you may be detained. Usually that means that a member of law enforcement will take you to a hospital emergency room where you will be examined by a physician (medical doctor). You are not under arrest, but you cannot leave until you are examined by the doctor, and the doctor determines that you do not meet the standard for commitment. The hospital will release you if you do not meet the standard.

Is there anything else needed for Emergency Commitment?

Yes. A medical doctor must examine you. The doctor must certify in writing:

1. You have a mental illness;
2. Because of the illness, you are likely to cause harm to yourself or others unless you get treatment in a hospital; and
3. The specific reasons why you are likely to cause harm if you do not get treatment.

If you were detained by law enforcement, the doctor must examine you within 24 hours of being taken into custody. If the doctor finds all three criteria are met, the doctor must complete and sign a document called a “Certification.” Note: The doctor who signs the Certification must be different from the individual who signed the Affidavit.

If both the Affidavit and the doctor’s Certification are completed, they authorize you to be admitted involuntarily to a psychiatric hospital for further evaluation and possible treatment. In most cases, you will be transported to the psychiatric hospital from the emergency room by law enforcement. You are not under arrest, but cannot leave the hospital without permission. S.C. Code § 44-17-410(b) (2).

What if the doctor does not examine you within 24 hours or the doctor does not complete a Certification?

If the doctor does not examine you within 24 hours from the time you are taken into custody, you must be released. Even if it is a weekend or holiday, the doctor must examine you within 24 hours. If the doctor does examine you, but does not think you meet the standard, he or she will not fill out the Certification, and you must then be released. S.C. Code § 44-17-430.

If I am admitted involuntarily to a hospital, how long must I stay there?

Within 48 hours of your admission involuntarily to a psychiatric hospital, the Affidavit and Certification must be sent to the Probate Court. Within 48 hours of receiving these documents, the Court must review them to see if there is probable cause to continue your emergency involuntary hospitalization. (Saturdays, Sundays, and holidays do not count toward the 48 hours). Probable cause means there is a reasonable likelihood that the information in the Affidavit and the Certification is correct. In other words, the Affidavit and Certification must indicate that there are still good reasons for an emergency commitment. S.C. Code § 44-17-410.

What happens if the Court finds there is “probable cause”?

If the Court finds that there is probable cause, the Court will:

• Issue an order for your continued involuntary hospitalization (called the “Order for Continued Hospitalization,” this order is valid only until you are examined or until a hearing is held); and
• Issue an order appointing two mental health care professionals as “Designated Examiners” to examine you. One must be a medical doctor. The other one is usually the social worker working with you in the hospital.

If the Court determines that there is not probable cause, then it issues an Order for your immediate release from the hospital and for your case to be dismissed.

What Do the Results From the Exam Mean?

• The Designated Examiners (sometimes called “DEs”) must decide if you meet the standard of having a mental illness and being likely to cause serious harm to yourself or others.

Appendix A
The Court must have clear and convincing evidence (strong facts) to order treatment.

The Court must also find because of the mental illness either (1) you do not have the ability to make decisions or (2) you need treatment.

The Court can require treatment if you meet the following standard:

**How does the Court decide if I need treatment?**

- If you can, try to take notes during the hearing. If you want to appeal, an attorney is in a better position to help you if you have detailed notes of the hearing.

The Full Probate Court Hearing:

**What are my rights?**

- Before the hearing, your attorney should meet with you. Your attorney should explain your rights, review the DE reports with you, prepare to present any witnesses you have, and answer your questions.
- A full hearing must be held within 15 calendar days of your involuntary admission to the hospital. S.C. Code § 44-17-410.
- The Court must tell you the date and time of your hearing at least 5 business days before the hearing. S.C. Code § 44-17-420.
- You have a right to have an attorney with you. S.C. Code § 44-22-30.
- You have a right to be present at the hearing. S.C. Code § 44-17-570.
- You and your attorney have a right to bring witnesses and ask questions of them. S.C. Code § 44-17-570.
- You and your attorney can ask questions of any other witnesses. S.C. Code § 44-17-570.
- If you can, try to take notes during the hearing. If you want to appeal, an attorney is in a better position to help you if you have detailed notes of the hearing.

**How does the Court decide if I need treatment?**

- The Court can require treatment if you meet the following standard:
  - The Court must find you have a mental illness and you need treatment.
  - The Court must also find because of the mental illness either (1) you do not have the ability to make decisions or (2) you need treatment.
  - The Court must have clear and convincing evidence (strong facts) to order treatment.

S.C. Code § 44-17-580.

Can I appeal the decision the Court makes?

Yes. You have a right to appeal after the hearing. S.C. Code § 44-17-620.

- You may appeal any treatment or commitment order following the hearing. You appeal to the Circuit Court.
- You must tell both the Probate Court and the Circuit Court that you want to appeal and the reasons for the appeal within 15 calendar days of the date of the order. You must act quickly if you want to appeal.
- You must pay for filing the appeal, unless the Court finds that you cannot afford to.
- If you have questions about bringing an appeal, you may contact P&A. If you want to ask P&A to represent you in an appeal, you must contact P&A as soon as possible after the hearing.

What Happens After the Hearing?

- If the Probate Court finds you do not meet the standard, the court will dismiss your case. If you are in a hospital, you will be able to leave.
- If the Probate Court finds you meet the standard, the Court can order:
  - In-patient treatment at a public or private mental health hospital;
  - Out-patient treatment following in-patient treatment.

What Should I Do if I am Being Committed?

- Listen to your attorney and the health professionals around you. If you do not agree with them, explain why not.
- Follow the Court’s order. If you do not agree with the Court order, your only option is to file an appeal or other motion with the Court. If you are released from the hospital but have been ordered to receive out-patient treatment and do not attend that treatment, the facility must report you to the Court. The Court will have another hearing, and you can be re-committed or even sent to jail for not following the Court order.
- Learn about self-advocacy. P&A has brochures and is available to train individuals on how they can better advocate for their rights.

What Are My Rights to Be Released After Commitment?

- The facility can discharge you whenever your condition has improved to the point that you no longer meet the standard. S.C. Code § 44-22-70.
- If you disagree with the facility about whether you continue to meet the standard, you or any “interested person” can ask the Court for a re-examination. S.C. Code § 44-17-630.
- If an “interested person” is your parent, guardian, spouse, adult next of kin, or nearest friend.
  S.C. Code § 44-23-10(9).
- You can ask for re-examination every six months.
- The treatment facility must inform you and at least one other interested person of this right every six months. S.C. Code § 44-17-630.
What Is the Difference Between the Emergency Commitment Process and Judicial Commitment Processes?

In an emergency admission, anyone can start the process (for example, an EMS worker who is called to the scene). A judicial commitment is different because only an “interested person” or a superintendent of a mental institution can start the process. S.C. Code § 44-17-510. An “interested person” is your parent, guardian, spouse, adult next of kin, or nearest friend (someone who helps you do things you could not do on your own, such as drive you to doctors’ appointments). S.C. Code § 44-23-109.

Also different from the emergency process, is that in a judicial commitment, an interested person can ask the Probate Court to order you to have mental health treatment because he or she thinks you do not have the ability to make responsible decisions about your treatment. The document that is completed is a “Petition for Judicial Commitment.” In most counties, this Petition is prepared with an intake staff person at the local mental health clinic. This process does NOT start at the Probate Court since it would create a conflict of interest if the Court later hears your case.

In an emergency admission you are taken into protective custody to have an exam. A judicial commitment is different in that before a judicial commitment process can start, a medical doctor must examine you and tell the Court if he or she thinks you have a mental illness and should be committed. If you do not want to have the exam, the interested person can give the Probate Court a statement saying you do not want the exam. Then, the Probate Court can order a law enforcement officer to take you into custody to have an exam. The difference is that in a judicial commitment you can agree to have the exam in the community, instead of in a hospital.

Once you are judicially committed, it will be up to the doctor to determine if you should be released. You can ask the Court to be re-examined once every six months.

Where Can I Get Help?

The Department of Mental Health Client Advocacy Program has advocates who can give you information and may be able to help you if you are in a DMH facility. You can contact the Client Advocacy Program at (803) 898-8569 or Toll Free at (866) 300-9330.

If you believe that you have been abused or neglected in a DMH facility, contact the State Law Enforcement Division (SLED). Their telephone number is (866) 200-6066. You may also contact the Client Advocacy Program or P&A. If you believe that you have been abused or neglected in a privately-operated facility, contact P&A.

The S.C. Code sections mentioned in this brochure can be found on-line at http://www.scstatehouse.gov/code/title44.php. If you do not have access to the internet, you can ask your social worker to print a copy of the relevant sections of the S.C. Code. If your social worker cannot help you or if you have trouble finding what you need, contact P&A for help.
Notes