

Program Name: Alzheimer's Association **Service type:** _____

Contact person: Ann Thayer **Telephone:** 607-547-1650

Director (if available): Ann Thayer, Program mgr. **TDD:** _____

Email address: ann.thayer@alz.org **Fax:** 607-547-1651
<http://www.alz.org/northeasternny/>

Website: _____
Address: The Alzheimer's Association, The Meadows, Suite 2
140 County Highway 33 W., Cooperstown, NY 13326

Hours of operation: Mon-Friday
9am-4:30 PM **After hours availability:** 1-800-272-3900
(connected to closest open office at time of call)

Population served: Anyone with Alzheimer's disease, their family, friends, caregivers, and professionals. Anyone requesting info.

Fee structure/payor sources accepted: All services are free except for caregiver's conferences. There is a fee to cover cost of food and supplies.

Eligibility requirements: No disqualifiers

Documentation needed to enter program: none

Languages offered: Via 800- helpline, over 200 languages offered

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:

Adult/Aging Services, Educational Services, Health Services, Helpline, Information/Referral, Volunteer Opportunities, Support Groups, safe return ID bracelets,

Program Name: Cobleskill Regional Hospital **Service type:**

Contact person: Susan Cimino-Cary **Telephone:** (518) 254-3456

Director (if available): Eric Stein **TDD:**

Email address: Susan.ciminocary@bhsc.org **Fax:** (518) 234-4839

Website: <http://www.cobleskillhospital.org/>

Address: 178 Grandview Drive, Cobleskill NY 12043

Hours of operation: 24 hrs/ 7 days **After hours availability:** Emergency services, Lab, X-Ray

Population served: Medical-surgical, sub-acute patients, outpatients, emergency care

Fee structure/payor sources accepted:

Eligibility requirements:

Documentation needed to enter program:

Languages offered:

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:

See next pages

Cobleskill Regional Hospital is a 40-bed not-for-profit hospital founded by the people of Schoharie County in 1956. The hospital provides a broad range of inpatient and outpatient services, including an emergency department staffed around-the-clock by highly qualified physicians, inpatient care for medical conditions, outpatient surgery, short-stay inpatient rehabilitation, outpatient rehabilitative services (including physical therapy), open MRI and state-of-the-art medical imaging, comprehensive laboratory services, a sleep lab, and 19 specialty clinics in areas such as cardiology, women's health, orthopedics, and more.

Emergency Services The doctors and nurses of Cobleskill Regional Hospital's Emergency Department care for more than 12,000 patients per year. . Patients are entitled to a medical screening in the Emergency Department regardless of ability to pay. Patients of all ages, with all types of illnesses or injuries, are treated,. About one in three of our patients requires high-level emergency care, so we're accustomed to dealing with medically complex emergencies

For most cases, we provide total diagnosis, care, and treatment on site. For those who need the highly specialized services of a major medical center, Cobleskill Regional Hospital serves as a gateway to the appropriate level of needed services. In many instances, our affiliation with Bassett Healthcare facilitates access to advanced services and follow-up at Mary Imogene Hospital in Cooperstown and with Bassett Healthcare specialists.

- 24/7 physician staffing
- Fully certified nursing staff
- The most up-to-date treatments and diagnostics
- Experienced care for people of all ages -- parents can count on us when it comes to caring for children.
- Affiliation with Bassett Healthcare ensures access to specialized services, advanced technology, and expert medical specialists
- Close working relationship with area EMS and paramedic services
- Disaster preparedness and response for our community

Inpatient Services are available for adults who require hospitalization for medical conditions. Patients are admitted by physicians in the community or through the Emergency Department. Cobleskill Regional Hospital's inpatient unit is staffed by a team of experienced registered nurses, licensed practical nurses and certified nurse's aides who provide caring and personalized care. Contact for information: Clinical Nurse Manager 518-254-3326 or main hospital phone 518-254-3456.

Short-Stay Rehabilitation Program The hospital offers comprehensive short-term inpatient care for patients who are unable to recover from an injury or illness at home. Patients and their families often turn to this program following a brief hospital stay or in place of full-scale

hospitalization for a major health problem. This program stresses continued recovery and assists patients with returning to a more independent level of functioning. Many of the patients in the Short-Stay Rehabilitation Program are over age 65 and have healthcare coverage through Medicare. In general, to be covered under Medicare the patient must

- Have been hospitalized for 3 or more nights within the past 30 days
- Have partially recovered
- Require skilled care on a daily basis (includes intravenous medication, complex wound care and dressing changes, post-surgical follow-up care, monitoring of new/changed medications, and rehabilitative therapies for strengthening and endurance)
- The contact person for admission is the Clinical Nurse Manager, 518-254-3326

Access to Medical Specialists: The Hospital provides access to medical specialists in the following areas:

Heart (Cardiology) * Cancer (Oncology/Hematology) * Bones and Joints (Orthopedics) * Lungs/Breathing/Sleep (Pulmonary Medicine) * General Surgery * Urology * Diabetes, Thyroid, and other Gland-related Diseases (Endocrinology) * Hearing (Audiology) * Brain/Nervous System (Neurology and Neurosurgery) * Ear-Nose-Throat (Otolaryngology) * Foot Health (Podiatry) * Arthritis (Rheumatology) * Plastic Surgery and Hand Surgery * Digestive System (Gastroenterology) * Eyes/Vision (Ophthalmology) * Vascular Surgery * Women's Health (Obstetrics/Gynecology)

Services are available from 8:00 a.m. to 5:00 p.m., Monday through Friday. Contact for information and to make appointments: 518-254-3317.

Surgical Services Same-day surgery is offered at Cobleskill Regional Hospital. Among the physicians who perform surgical procedures at CRH are general surgeons, orthopedic specialists, gynecologists, ear-nose-throat specialists, and gastroenterologists. These specialists, as well as the surgical team's anesthesiologists, are affiliated with Bassett Healthcare. Foot surgery and procedures performed by podiatrists are also available. The hospital's surgical team also includes a group of highly skilled and experienced OR nurses. Recovery generally takes place right in the surgical suite for same-day surgery and the emphasis is on preventing complications following surgery and ensuring appropriate follow-up care. The surgical suite is located on the hospital's ground floor. For more information on the surgical procedures available at Cobleskill Regional Hospital, please call 518-254-3456.

Women's Health Center Services are available from 8:00 a.m. to 5:00 p.m., Monday through Friday: contact 518-254-3307. Women's services are provided by a physician specialist in obstetrics/gynecology, a Physicians Assistant, and a certified nurse midwife:

- Prenatal Care
- Postpartum Care
- Annual Exams

- Gynecology Conditions
- HIV Pre and Post Test Counseling

Out-patient Rehabilitation Services

- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Hand Therapy

Our fully licensed and certified therapists offer a complete range of outpatient physical therapy services designed to help patients restore strength, movement, and functioning and to prevent disability due to disease, injury, or aging. The Department is open from 7:30 a.m. until 7:30 p.m. from Tuesday through Thursday, and from 7:30 a.m. until 5:30 p.m. on Mondays and Fridays. Occupational therapy and speech therapy are also available during extended hours by special arrangement.

Laboratory The hospital operates a main laboratory at the hospital on Grandview Drive in Cobleskill and a satellite blood work station at 1 Cooley Drive in Delanson. Each year, the BHSC laboratory processes in excess of 175,000 tests. The lab employs approximately 22 people, including technologists and phlebotomists.

The Cobleskill Regional Hospital laboratory has earned the Joint Commission's Gold Seal of Approval. The award of accreditation is for a two-year period ending in July 2008.

Laboratory outpatient services are available at both sites without appointments. The Delanson site is open Monday, Tuesday, Thursday, and Friday, from 8:30 a.m. to noon. The main laboratory, located at the hospital on Grandview Drive in Cobleskill, is open Monday through Friday, from 7:30 a.m. to 6:00 p.m. In addition, the main laboratory is open Saturday from 9:00 a.m. to 11:00 a.m.; however, an appointment is necessary. To make an appointment, call 518-254-3341.

Medical Imaging

- Diagnostic Radiology
- Computed Tomography
- Ultrasonography
- Mammography – screening and diagnostic
- Fluoroscopy
- Bone Densitometry (DEXA)
- Open MRI

We recently upgraded its MRI to a MAGNETOM Espree – the most spacious and powerful MRI on the market today. A mobile MRI is stationed at our hospital at least one day per week, giving Schoharie County residents access to a non-invasive diagnostic tool that helps doctors detect developing diseases earlier than ever before.

Appointments: 518-254-3350

Emergency and Inpatient Services: 24 hours/day, 7 days/week

Outpatient Services: 8:00 a.m. – 4:30 p.m., Monday – Friday

CT Scan Outpatient: 7:00 a.m. – 4:30 p.m.

Bone Densitometry: 8:00 a.m. – 4:30 p.m. Tuesday & Wednesday, Friday mornings

Mobile MRI - Wednesdays

Sleep Lab The comfortable four-bed Sleep Lab is located on the upper level, next to our newly renovated Ambulatory Care Center. It is staffed by an experienced technician, with support from a patient access specialist and a secretary. It is open three nights per week for sleep studies, which are used to diagnose sleep disorders, such as sleep apnea and periodic limb movement disorder. Call 518-254-3317 for information.

Social Work Services provides a wide-range of services to all clinical areas of the hospital. Assessments and referrals for all psychological and psychosocial issues are provided, including but not limited to, child abuse, sexual assault, domestic violence, mental illness, chemical dependency, and adjustment to chronic or terminal illness by referral. HIV counseling and testing are provided by referral. Discharge planning for patients going home, to adult homes and nursing homes is routinely provided.

Support Groups are offered in cancer support for patients and family members/loved ones and Alzheimer's support for caregivers.

Lifeline is a personal response service that allows people to live independently and ensures those living at home receives quick assistance when they need it. Once activated a Lifeline professional responds, assesses the situation calls for help, be it a loved one, neighbor or an ambulance. Call 518-254-3210 for information.

Community Service Program The hospital provides care to many people each year who do not have health insurance and are unable to pay their bill. Through this program, patients who do not have insurance and have been denied coverage by Medicaid during the past six months may qualify for free care. Others may qualify for a discount on care. Discounts are made on a sliding scale depending on income. Patients must fill out an application for the Community Services program and provide proof of Medicaid denial within the past six months, and provide proof of income to qualify for free care.

Program Name

Department	Contact Person	Phone Number
Administration		254-3270, 3244
Administration fax		254-4839
Ambulatory Care		254-3317,3354
Ambulatory Care		254-3313
Business office-M'Care/Swing		254-3272
Business office-Insurance bill.		254-3274
Business office-billing/data		254-3279
Business office- Fax		254-3328
ER –Main number		254-3300,-3336,-3337
ER- Fax		254-3316
Help Desk		254-3408
Laboratory		254-3342, -3341
Laboratory Fax		234-8630 (NOTE the prefix of 234)
Lifeline		254-3275
Medical Imaging-Scheduling		254-3349,-3350,-3495
Medical Imaging Fax		254-3360
Medical-Surgical Nursing		254-3356
Medical-Surgical Fax		254-3301

Program Name

Department	Contact Person	Phone Number
Occupational Therapy		254-3207
Physical Therapy		254-3261
OT/PT Fax		254-3335
Pain Management		254-3371
Pharmacy		254-3278
Progressive Care(Swingbed)		254-3325, -3332
Rehabilitation Services mgr.		254-3267
Social Services Liason		254-3271
Women's Health Center		254-3307
Women's Health Center Fax		254-3133

Program Name: Capital District Developmental Disabilities Services **Service type:**

Contact person: Pat Sainsbury **Telephone:** (518)295-8192

Director (if available): David Slingerland **TDD:**

Email address: Patricia.Sainsbury@omr.state.ny.us **Fax:** (518)295-8148

Website: www.nys/omrdd

Address: P.O.Box 670 289 Main Street, Suite 1 Schoharie, New York 12157

Hours of operation: Mon-Fri 8am-5pm **After hours availability:** For consumers receiving services only

Population served: Individuals with developmental disabilities and mental retardation

Fee structure/payor sources accepted: Medicaid, Medicaid waiver

Eligibility requirements: Developmental disability on or before age 22

Documentation needed to enter program: Documentation of the disability

Languages offered:

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:
Service to individuals with developmental disabilities and mental retardation. We provide Medicaid Service Coordination, assist individuals and their families in securing Waiver services. We have a large family care program which provides individuals with residential services in certified homes in the county and can assist with referrals outside the county as well. Recreation and behavioral intervention. State operated IRA (Individual residence alternative) located in Middleburgh.

Program Name: Catholic Charities of Schoharie County **Service type:**

Contact person: Diane Szabo **Telephone:** (518) 234-3581

Director (if available): Tom Mayer **Hotline:** (518) 234-2231

Website: www.ccrda.org **Fax:** (518) 234-8423

Email address: tomm@catholiccharitiesofschoharieco.org

Address: 489 West Main Street Cobleskill, New York 12043

Hours of operation: Mon-Friday 8:30am -4:30pm **After hours availability:** 24-hr hotline see # above

Population served:

Fee structure/payor sources accepted:

Eligibility requirements:

Documentation needed to enter program:

Languages offered:

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:
Crisis Intervention, Emergency Services, Hotlines/Infolines, Information/Referral, Advocacy for Domestic Violence, Volunteer Opportunities, Pantry/Buying Club, Thrift Shop, Food/Food Stamps

Program Name: Catskill Area Hospice and Palliative Care **Service type:**

Contact person: Penny Mulder, RN **Telephone:** (518)234-7611

Director (if available): Lesley Deleski **TDD:**

Email address: nursing@cahpc.org **Fax:** (518)234-7612

Website: www.cahpc.org

Address: 327 West Main Street, Suite 3 Cobleskill, New York 12043

Hours of operation: Mon-Fri 8AM -5 PM **After hours availability:** 5PM-8AM on-call nursing staff for phone support and visits as needed

Population served: Patients with advanced illness and their families

Fee structure/payor sources accepted: Medicare, Medicaid, Insurance, self-pay, sliding fee, No one is denied service because of inability to pay.

Eligibility requirements: Advanced illness for which cure is not a goal of treatment

Documentation needed to enter program: Physician certification of illness

Languages offered: Arranged as needed

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:

Adult/Aging Services, Consultation, Counseling, Spiritual Care and Support, Health Services, Information/Referral, Bereavement groups for adults, Children's bereavement camp, Volunteer Opportunities.

Program Name: Catskill Center for Independence **Service type:** _____

Contact person: Laurene Reichardt **Telephone:** 607-432-8000

Director (if available): Chris Zachmeyer **TDD:** 607-432-8000

Email address: laurener@stny.rr.com **Fax:** 607-432-6907

Website: www.ccfi.us

Address: P. O. Box 1247 Oneonta, New York 13820

Hours of operation: M-F 9am-5pm **After hours availability:** _____

Population served: Community at large, people w/ disabilities

Fee structure/payor sources accepted: All services are free

Eligibility requirements: Any person with a disability &/or disability issue

Documentation needed to enter program: none

Languages offered: ASL (American Sign)

Translator available: No **Access to public transportation:** Yes

Services Provided:

Provide a variety of disability related services, Adult/Aging Services, Business, Children's Services, Consultation, Disability Services, Educational Services, Employment Assistance & Training, Home & Consumer Services, Information/Referral, Youth Services

Program Name: CCSI-Coordinated Children's Service Initiative **Service type:** _____

Contact person: Melodie Swanson **Telephone:** 518-295-2016

Director (if available): Melodie Swanson **TDD:** _____

Email address: melodieswanson@co.schoharie.ny.us **Fax:** 518-295-2025

Website: www.schohariecounty-ny.gov

Address: 113 Park Place, Suite 1, Schoharie, NY 12157

Hours of operation: Mon-Fri 8:30-5:00 **After hours availability:** _____

Population served: Schoharie County children at risk, families and service providers

Fee structure/payor sources accepted: _____

Eligibility requirements: _____

Documentation needed to enter program: _____

Languages offered: _____

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:

Preventive initiative designed to coordinate services for children at risk, involving their families in every step of the planning process. CCSI acts as the information resource system for families and service providers in order to develop a seamless system of care.

The Single Point of Access Committee reviews all youth entering the service delivery system in order to assess need and offer service options to families. This review process works hand-in-hand with the CCSI process. All youth-serving agencies are part of the system of care.

Children's Services, Information/Referral, Parenting support, Skill-building classes, Mentoring project, and Camp sponsorships.

Program Name:

Children w/Special Health Care Needs- a program of the Schoharie County Health Department

Service type:

Contact person:	Mary Ann Purak	Telephone:	295-8705
Director (if available):	Kathleen Strack, Director Public Health	TDD:	
Email address:	purackm@co.schoharie.ny.us	Fax:	295-8435
Website:	www.schohariecounty-ny.gov		
Address:	PO Box 667, 276 Main Street, Schoharie, NY 12157-0667		
Hours of operation:	8AM-5PM Mon-Fri	After hours availability:	none
Population served:	Children birth to 21, some programs to age 18		
Fee structure/payor sources accepted:	Usually services are free, insurance billed, or Medicaid		
Eligibility requirements:	Varies with program call for details		
Documentation needed to enter program:	Varies with program		
Languages offered:			
Translator available:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Access to public transportation:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Services Provided: <u>Physically Handicapped Children's Program</u> is voluntary, and is utilized mostly for orthodontia, funded by NYS. Client must be denied by M'Aid. <u>Early intervention program</u> is mandated, and involves intermittent screening and referral for correction of developmental delays, etc. <u>Children with special health care needs</u> does not involve money; is an information and referral service for children with unusual situations or adaptive needs.			

Program Name: Gentiva Home Care **Service type:** _____

Contact person: Jennifer Johnson **Telephone:** 518-459-0222
1800-675-8921

Director (if available): Jennifer Johnson **TDD:** _____

Email address: _____ **Fax:** 518-459-1114

Website: www.gentiva.com

Address: 1272 Central Avenue, Albany, NY 12205

Hours of operation: Mon-Fri 8A-5P **After hours availability:** 5PM-8AM On call: 518-459-0222

Population served: All ages

Fee structure/payor sources accepted: Insurances, Medicaid, Private Pay – NOT Medicare

Eligibility requirements: Referral fro MD, agency, or self-referral according to needs

Documentation needed to enter program: Physican Orders

Languages offered: English – none other in Schoharie County

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:

Home Care services for all ages: Home Health Aide, Personal care aides for personal care, housekeeping, companionship, shopping, assist with personal needs. Skilled nursing care upon Physician referrals.

Program Name: Hearing Enhancing Devices **Service type:** _____

Contact person: Shelley Hundley **Telephone:** 295-2001

Director (if available): Carol Coltrain **TDD:** _____

Email address: ofa@co.schoharie.ny.us **Fax:** _____

Website: www.schohariecounty-ny.gov

Address: 113 Park Place Suite #3, Schoharie, NY 12157

Hours of operation: 8AM-5PM Mon-Fri **After hours availability:** _____

Population served: Schoharie County residents aged 60+

Fee structure/payor sources accepted: This is a loan closet for several types of hearing devices

Eligibility requirements: None –there is a 2-week “tryout” period for devices see below

Documentation needed to enter program: None

Languages offered: _____

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided: This is a loan closet for several types of hearing devices to enhance hearing at public events, such as church or meetings, also telephone amplification, and conversation clarity. Devices available also include personal devices and those for TV amplification. Loan is available for 2 weeks to see if this device will meet your needs. Assistance is then available for ordering your own device.

Program Name: Leukemia & Lymphoma Society **Service type:**

Contact person: Raechel Hunt or Susan Kobrel **Telephone:** (518)438-3583

Director (if available): Maureen O'Brien-Thornton **TDD:**

Email address: susan.kobrel@lls.org **Fax:** (518)438-6431

Website: www.leukemia-lymphoma.org

Address: 5 Computer Drive W. Suite 100Albany, New York 12205

Hours of operation: M-Th 8:30-4:30 **After hours availability:**
Fri 8am-4 pm

Population served: Patients with blood cancers and their families

Fee structure/payor sources accepted: None – public donations accepted. Financial assistance for transportation, meds, and co-pays

Eligibility requirements: Diagnosis of blood cancers, including but not limited to hodgkins, myeloma, myelospastic syndrome, lymphomas, leukemias

Documentation needed to enter program: Physician cert of illness – LLS provides the form

Languages offered:

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:

The Leukemia & Lymphoma Society is the world's largest voluntary health organization dedicated to funding blood cancer research, education and patient services. The Society's mission: Cure leukemia, lymphoma, Hodgkin's disease and myeloma, and improve the quality of life of patients and their families.

First Connections- a phone support program for newly diagnosed patients and families

(Leukemia/Lymphoma Society, Continued)

COVERED EXPENSES (*detailed description*)

The program will reimburse you up to \$500 for costs not covered by your insurance, related to the care, treatment, or control of leukemia, Hodgkin and non-Hodgkin lymphoma, myeloma and other blood cancers.

REIMBURSABLE EXPENSES

- Chemotherapy drugs and other medications prescribed to treat your cancer and side effects (a list is enclosed)
- Drug administration fees
- Radiation therapy including administration fees
- Blood and marrow transfusion and testing costs, as follows:
 1. Compatibility typing and pre-transplant screening
 2. Processing, typing, screening, cross-matching, and antibody testing of whole blood and blood components related to blood or marrow transfusion
 3. Infusions of marrow, cord blood, or stem cells
 4. HIV (HTLV-III) and HTLV-I antibody test
 5. Transfusions (platelets, whole blood, red blood cells etc.)
 6. Administrative fees for processing the above
- Transportation costs to and from the doctor's office, treatment center, hospital, clinic and support groups, as follows:
 1. Mileage at the rate of 5 cents per mile
 2. Air travel tickets
 3. Public transportation (including charges for bus, train, taxi, ambulance, subway or ferry)
 4. Tolls
 5. Parking fees (must be from the treatment center/hospital parking lot)

To be reimbursed you must submit original detailed receipts and for travel use the "Request for Transportation Reimbursement" form signed by a representative from the treatment facility

NON-REIMBURSABLE EXPENSES

While the Society assists in many treatment-related costs, there are some expenses that it is unable to reimburse at this time. These include the following:

- Diagnostic procedures (such as bone marrow aspiration, bone marrow biopsy and lumbar procedures)
- Hotel rooms
- Rental cars
- Gasoline bills
- Hospital costs (room charges and fees)
- Medical Supplies (such as syringes and bandages)
- Healthcare professional fees for check-ups and consultations
- Homecare and housing expenses
- Non-prescription medications
- Blood or lab fees (unless listed above)

The Leukemia & Lymphoma Society Co-Pay Assistance Program

PLEASE NOTE: THIS IS A SEPARATE PROGRAM FROM OUR PATIENT FINANCIAL AID PROGRAM, BASED ON INCOME LEVEL. PLEASE SEE GUIDELINES ON BACK TO SEE IF YOU QUALIFY. THANK YOU!

The Leukemia & Lymphoma Society's Co-Pay Assistance program offers financial assistance to patients who are having difficulty paying their insurance premiums or co-pays for medications. Support for Co-Pay Assistance is based on the availability of funds and provides fund amounts according to diagnosis to patients who reside in the United States, meet a financial eligibility criteria and have a diagnosis of:

- **Myeloma**- assistance is available up to \$1500
- **Hodgkin Lymphoma**- assistance is available up to \$2500
- **Non-Hodgkin Lymphoma**-assistance is available up to \$2500
- **Acute Myelogenous Leukemia**-assistance is available up to \$1500
- **Myelodysplastic Syndromes**)-assistance is available up to \$1500

Unlike the Society's Patient Aid Program, the Co-Pay Assistance Program is based on income. Patients whose income is at or within 400% above the [United States Federal Poverty guidelines](#) are eligible for assistance. (Refer to the chart below). In most cases, the payment will be sent directly to the patients' pharmaceutical supplier, hospital, doctor, insurance provider, and less commonly, directly to the patient. Patients will be required to complete an application and provide supporting documentation. All documentation will be kept confidential and is viewed solely for approval into the program.

For an application or more information, please visit us online at www.LLS.org/copay Or call our Information Resource Center at 877-557-2672

2007 HHS Poverty Guidelines		
Persons in Family	48 Contiguous States and D.C.	500% above Poverty Level
1	\$10,210	\$58,750
2	13,690	78,750
3	17,170	98,750
4	20,650	118,750
5	24,130	138,750
6	27,610	158,750
7	31,090	178,750
8	34,570	198,750
For each additional person, add	3,480	

Program Name: Life Line (PERS) **Service type:**

Contact person: Colleen Benson **Telephone:** 518-254-3275

Director (if available): Colleen Benson **TDD:**

Email address: colleen.benson@bhsc.org **Fax:** 518-234-4722

Website: www.cobleskillhospital.org

Address: 178 Grandview Drive, Cobleskill, NY 12043

Hours of operation: 8A-4P Mon-Fri **After hours availability:** Leave message at 518-254-3275

Population served: Residents of Schoharie, no age restrictions

Fee structure/payor sources accepted: Private pay, Medicaid pre-approval, also Senior Council provides limited number of units at no/low cost (LTC & other insurance does not cover this cost at this time)

Eligibility requirements: none

Documentation needed to enter program: If Medicaid, pre-approval is needed. No Contract, no eligibility requirements. Requestor must provide at least 2 responders for emergency contacts.

Languages offered:

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided: Lifeline - (Personal Emergency Response System) services, including set up, teaching, monitoring and maintenance of unit, and billing. There is an installation fee and monthly fee.

Lifeline is answered through an answering service. The client is called when the alarm is triggered. If no answer, the listed responders are contacted to go to the residence and check on the client.

Program Name: Marchand Manor Home for Adults/ALPS **Service type:** _____

Contact person: Betty Pessolano **Telephone:** 518-284-2357

Director (if available): Betty Pessolano **TDD:** _____

Email address: marchandmanor@nycap.rr.com **Fax:** 518-284-9207

Website: _____

Address: 121 Main Street, Sharon Springs, NY 13459

Hours of operation: Office hours 9AM-3PM **After hours availability:** 518-284-2357 leave message

Population served: Men and women who need assistance and supervision with ADL's (usually elderly)

Fee structure/payors: Medicaid

Eligibility requirements: Person in need of supervision or assistance with ADL's – people with severe dementia or mental health issues are not usually considered

Documentation needed to enter program: PRI, documentation of need by MD

Languages offered: English

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided: This is an ALPS program, funded by Medicaid, for people who need some supervision or assistance with ADL's and health care issues, but who do not qualify by PRI for nursing home care.

Marchand Manor works with other community agencies to provide needed services such as Hospice, Public Health, skilled nursing services, physical therapy, etc, as needed by the client.

Program Name: Medical Supply loan closet-OFA **Service type:**

Contact person: Crystal McCance **Telephone:** 295-2001

Director (if available): Carol Coltrain **TDD:**

Email address: **Fax:**

Website: <http://www.schohariecounty-ny.gov/CountyWebSite/OfficefortheAging/ofahome.jsp>

Address: Location is at OFA Cobleskill Meal site

Hours of operation: 8:00AM-5PM Mon-Friday **After hours availability:** none

Population served: Open to anyone who needs temporary medical devices

Fee structure/ None.

Eligibility requirements: none

Documentation needed none

Languages offered:

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided: This is a loan closet that is available to all residents for smaller medical devices that have been donated by previous users. Examples are wheelchairs, walkers, canes, crutches, commodes, etc.

Beds and larger items are handled through the Lions Club – Mr. Blackmere. Please call OFA at 295-2001 for more information

Program Name: Northeast Parent and Child Society **Service type:**

Contact person: Carol Beaudin-prevention evaluation Sue Mullarkey- therapeutic foster care **Telephone:** (518)725-1516

Director (if available): Holly Sorenson Bill Marszalek **TDD:** 518-370-3127

Website: www.neparentchild.org **Fax:** (518) 725-5455

Email address: carol.beaudin@neparentchild.org, sueann.mullarkey@neparentchild.org

Address: 40 North Main St., Suite 11 Gloversville, New York 12078

Hours of operation: M-F 8:30-5 PM **After hours availability:** For families receiving services

Population served: Children at risk of being removed, or removed from, their natural homes due to abuse, neglect, mental illness, substance abuse, etc

Fee structure/payor sources accepted: funding comes from county social service departments, The remainder of our resources is privately raised through corporations, foundations, and individuals,

Eligibility requirements: Must be a family working with the local department of social services.

Documentation needed to enter program: Referrals made through the department of social services

Languages offered: English

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:
Services provided through our Gloversville Office include the Intensive Aftercare Prevention Program (IAPP), PINS – Initiative Schoharie and Therapeutic Foster Family Program (TFFP). Additional prevention services, residential services, educational services and career development services are offered through our network of offices/facilities in Schenectady and throughout the Capital Region. Northeast Parent & Child Society is committed to our mission of protecting children, preserving families and strengthening the communities we serve.

Program Name: NY Connects **Service type:** _____

Contact person: Kathleen Slater, **Telephone:** 295- 8353

Director (if available): D. France C. Coltrain **TDD:** _____

Email address: kathyslater@co.schoharie.ny.us **Fax:** _____

Website: www.nyconnects.org

Address: 2nd Floor County Offc Bldg PO Box 687, Schoharie, NY 12157

Hours of operation: 9AM- 4 PM **After hours availability:** Answering machine for messages only

Population served: Residents of Schoharie County and their caregivers

Fee structure/payor sources accepted: none

Eligibility requirements: None – information is provided to anyone who asks

Documentation needed to enter program: None - information is provided to anyone who asks

Languages offered: English

Translator available: Yes No **Access to public transportation:** _____

Services Provided: Information, assistance, referrals on services available in Schoharie County for seekers of long term care for any age.

Kathy Slater # 295-8711

Program Name: Rehabilitation Support Services (RSS) **Service type:** _____

Contact person: Kim Palmer-Herzog **Telephone:** 518-234-8291

Director (if available): Kim Palmer-Herzog **TDD:** _____

Email address: N/A **Fax:** 518-234-8288

Website: <http://www.rehab.org/rssinfo.htm>

Address: PO. Box 758, 121 Burgin Drive, 2nd Floor, Cobleskill, NY 12043

Hours of operation: Monday-Friday 9AM- 4 PM **After hours availability:** M-F 4pm-8pm warmline –see below

Population served: Severe and persistently mentally ill adults

Fee structure/payor sources accepted: SSI, SSD, Medicaid

Eligibility requirements: psychiatric disability needed to qualify for programs.

Documentation needed to enter program: Referral needed from mental health professional

Languages offered: _____

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:

Residential Treatment-community residence, supervised apartment program and supported housing. Socialization – coffee house/social club.

Warmline – a person to talk to when feeling sad, lonely or to talk 4PM-8PM. Local # 234-3356 or 1-888-WARMLINE (927-6546) **Not a Crisis Hotline!**

Vocational Training: Catered Affairs Unlimited. VESID. Respite bed – for adult consumer who needs extra support on a temporary basis – up to 2 weeks.

Program Name:

ARC - Schoharie County ARC
(Adult Rehabilitative Center)

Service type:

Contact person: Peggy Himes **Telephone:** 518-295-8130

Director (if available): Tony Alvarez **TDD:** _____

Email address: himespeg@schohariearc.org **Fax:** 518-295-8969

Website: www.schohariearc.org

Address: PO Box 307 Opportunity Drive, Schoharie, NY 12157

Hours of operation: Admin Mon-Fri 8AM- 4PM **After hours availability:** _____

Population served: individuals with mental retardation and development disabilities

Fee structure/payor sources accepted: _____

Eligibility requirements: individuals with mental retardation and development disabilities

Documentation needed to enter program: _____

Languages offered: _____

Translator available: Yes No

Access to public transportation: Yes No

Services Provided:

A private non-profit organization dedicatd to the provision of services that enable individuals with mental retardation and development disabilities in becoming members of the community by offering a continuum of integrated vocation, education, and socialization services.

Adult/Aging Services, Children's Services, Disability Services, Employment Placement & Training, Evaluations/Examinations, Home & Consumer Services, Information/Referral, Parenting Support, Volunteer Opportunities

Program Name: **Head Start** (Schoharie County Child Development Council) **Service type:**

Contact person: Colleen Mahar **Telephone:** 518-234-7521

Director (if available): Judith McLaughlin **TDD:** _____

Email address: _____ **Fax:** 518-234-4320

Website: <http://www.schohariechamber.com/display.asp?id=1697>

Address: PO Box 612, Cobleskill, NY 12043

Hours of operation: Mon-Friday 8AM- 4PM **After hours availability:** _____

Population served: children and their families from birth to five years and senior citizen respite program serving people with Alzheimer's.

Fee structure/payor sources accepted: _____

Eligibility requirements: _____

Documentation needed to enter program: _____

Languages offered: _____

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:
Head Start and daycare children's services, parent education.
Developmental, education mental health and health screenings.
Nutritious meals, volunteer opportunities, staff training programs, and senior respite services.

Program Name: SCCAP (Schoharie County Community Action Program) **Service type:** _____

Contact person: Barbara Rivenburgh **Telephone:** 518-234-2568

Director (if available): Barbara Rivenburgh **TDD:** _____

Email address: barbararivenburgh@sccapinc.org **Fax:** 518-234-3507

Website: www.sccapinc.org

Address: 795 East Main Street, Suite 5, Cobleskill, NY 12043

Hours of operation: Mon-Fri 8:00-4:30 PM **After hours availability:** _____

Population served: Schoharie County residents

Fee structure/payor sources accepted: Most programs free or very low cost, exception is weatherization

Eligibility requirements: Most programs have some age or financial eligibility requirements, but all are open to Schoharie County residents.

Documentation needed to enter program: Varies with program

Languages offered: _____

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:
Services provided are: Advocacy, Budget counseling, Emergency assistance, including Family Partner Mentoring program, Child Care Resource and Referral, Family Development and Youthful Offender Program; Facilitated Enrollment medical insurance including Child Health Plus/Family Health Plus and Medicaid; Women, Infants and Children nutrition program including Breastfeeding Peer Counseling, and Weatherization

SCCAP Departments and Services

Department or Service	Contact Person or Phone #	Notations
Community services	Nancy Dingee	Emergency assistance, budget counseling, tax assist, food pantry/holiday baskets, Coats for Kids, Citizen Corps, referrals and advocacy
Child Care resources/ referral	Meg Parsons	Information re: child care options, family day care training, work with local employers re: child care needs/ services
Youthful offender	Michelle Johnston	Mandated community restitution for Youthful Offenders (Probation Dept.)
Facilitated Enrollment Project	Denelle Baker	Enroll families in Child Health+/Family health+, Medicaid, (co-location for DSS intake)
Family Development	Rebecca Thillet	Holiday Train(Toys for Tots) Family development credential training, supportive case management
WIC – Health, Nutrition, Safety assistance	Kathryn Palmer	Supplemental nutrition program for income eligible pregnant and breast feeding women, infants, children, breast pumps, prenatal smoking cessation, nutrition and health education, Health Dept. immunization program
Weatherization and Energy services	Carl Jackson	Heat loss calculation/energy efficiency audits of heating systems, determine necessary repairs and replacements, insulation, window, door repair or replacement, furnace repair, CO ₂ detection. Fee for Home Energy Consultant
Workforce Services	Melissa Klein	NYS Displaced Homemaker program – career readiness training, job placement, job development and post-employment consultation. Employment readiness training through contract with DSS.

SCCAP Departments and Services

Department or Service	Contact Person or phone #	Notation
Family Support Project	Jodi Gregory	Wrap community services around families, avert placement of children with social or behavioral challenges, facilitate strength-based family meetings, promote mentoring/camp, liason with community service providers, provide education and training for families and service providers.
Co-Located Services	ACCESS Center/ BOCES Educat. and Training	518-234-7188
Co-Located Services	SCCASA- Schoharie County Council on Alcohol and sub- stance abuse	518-234-8705
Co-Located Services	Workforce Solutions Center	518-234-4254
Co-Located Services	NYS Department of Labor	518-234-4254
Co-Located Services	VESID-Vocational and Educational services for individuals with Disabilities	1-800-272-5448

Program Name: Senior Council—Schoharie County Council of Senior Citizens **Service type:** _____

Contact person: Christine Kraemer **Telephone:** 518-295-8089

Director (if available): William J. Karlau **TDD:** _____

Email address: seniorcouncil@co.schoharie.ny.us **Fax:** 518-295-2015

Website: <http://www.schohariecounty-ny.gov/CountyWebSite/OfficefortheAging/ofaoffice.jsp>

Address: 113 Park Place, Suite 3, Schoharie, NY 12157

Hours of operation: Mon- Fri 8:00-3:00 PM **After hours availability:** _____

Population served: Senior Citizens in Schoharie County

Fee structure none

Eligibility requirements: None, information is available to all residents of Schoharie County

Documentation needed to enter program: Varies with program

Languages offered: _____

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:
 Cultural, social and recreational activities and help meet the physical needs of the senior citizens in Schoharie County. Thrift shops provide clothing at reasonable cost. Open 10:00 a.m. – 3:00 p.m.
 --333 Main St, Middleburgh (518) 827-4548 or
 --1471 Route 7, Warnerville (518) 254-0181
 Accepting new and gently used items during business hours only

Program Name: DSS –Schoharie County Dept. of Social Services **Service type:** _____

Contact person: Paul Brady, Commissioner **Telephone:** 518-295-8334

Director (if available): Paul Brady, Commissioner **TDD:** _____

Email address: _____ **Fax:** 518-295-8499

Website: www.schohariecounty-ny.gov

Address: PO Box 687, Schoharie, NY 12157

Hours of operation: Monday-Friday 8:30-5:00 PM **After hours availability:** Emergencies through Sheriff 911

Population served: Schoharie County residents

Fee structure/payor sources accepted: _____

Eligibility requirements: Varies with program

Documentation needed to enter program: Varies with program

Languages offered: _____

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:

County governmental agency charged with the provision of social and economic services to residents meeting State and Federal guidelines. Services provided include: child and adult abuse and neglect investigations; child foster care; child preventive services; adoption; adult services; temporary assistance; food stamps; emergency food/shelter/utility/clothing; employment services; energy assistance, day care assistance; Medicaid; child support enforcement and paternity establishment.

Program Name: Schoharie County Health Department (Public Health) **Service type:**

Contact person: Kathleen Strack **Telephone:** 518-295-8365

Director (if available): Kathleen Strack **TDD:**

Email address: health@co.schoharie.ny.us **Fax:** 518-295-8786

Website: www.schohariecounty-ny.gov

Address: PO Box 667, Schoharie, NY 12157

Hours of operation: Mon-Fri 8:30-4:30 **After hours availability:** 24/7 for home health care services

Population served: Schoharie County residents

Fee structure/payor sources accepted: Public health programs free, other programs accept insurance, pvt pay, Medicaid. Some programs funded under State or Federal grants.

Eligibility requirements: Varies with program, but generally Schoharie County resident

Documentation needed to enter program: Varies with program

Languages offered:

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:

Community health services to Schoharie County residents. Major programs include: Family Health, Disease Control, Home Health Agency, Environmental Health, Public Health Education, Preschool Special Needs/Early Intervention Program and Community Health Assessment. Physically Handicapped Children's Program, Emergency Preparedness.

Program Name: Schoharie County Mental Health Clinic/ ICM/SCM **Service type:**

Contact person: Linda Meineker **Telephone:** 518-295-7200 for ICM/SCM
295-8336 for other services

Director (if available): Joe Patterson **TDD:**

Email address: mhealth@co.schoharie.ny.us **Fax:** 518-295-8724

Website: <http://www.schohariecounty-ny.gov/CountyWebSite/MentalHealth/mhhome.jsp>

Address: PO Box 160, 284 Main Street, 3rd floor, Schoharie, NY 12157

Hours of operation: Mon-Thur 8:30-5PM **After hours availability:** Crisis 518-295-8114, messages 295-8336
Wed 8:30-7:00 PM

Population served:

Fee structure/payor sources accepted:

Eligibility requirements:

Documentation needed to enter program:

Languages offered:

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:

A variety of supportive, therapeutic mental health services to the residents of Schoharie County. The Case Management program is regulated by OMH and is a service of the Clinic.

Individual, group, and medication therapies; psychological testing. Crisis Services are available 24 hours a day. Staff includes: psychiatrists, social workers, caseworkers, nurse practitioner and psychologists.

Program Name: Sharon Manor Adult Home

Service type:

Contact person: Crystal Stone **Telephone:** 518-284-2041

Director (if available): Betty Pessolano **TDD:**

Email address: marchandmanor@nycap.rr.com **Fax:** 518-284-2041

Website:

Address: P.O. Box 450 State Route 20 Sharon Springs, NY 13459

Hours operation: Office Hours 9AM-3PM **After hours availability:** 518-284-2357
leave message

Population served: Men and women who need assistance and supervision with ADL's, meals, etc.

Fee structure/payor sources: SSI, private pay

Eligibility requirements: Must be in need of supervision or assistance with ADL's, but ineligible for nursing home by PRI screen

Documentation needed to enter program: Call for application

Languages offered: English

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided: 24 hour supervision and care of adults with need for supervision and assistance with ADL's and other daily activities, including meals and laundry.

Program Name: OFA –Schoharie County Office for the Aging **Service type:** _____

Contact person: Carol Coltrain **Telephone:** 518-295-2001

Director (if available): Carol Coltrain **TDD:** _____

Email address: ofa@co.schoharie.ny.us **Fax:** 518-295-2015

Website: www.schohariecounty-ny.gov

Address: 113 Park Place, Suite 3, Schoharie, NY 12157

Hours of operation: M-F 8:00-5:00 PM **After hours availability:** _____

Population served: Schoharie County residents aged 60+ and their caregivers

Fee structure/payor sources accepted: Most services are provided free or a nominal cost

Eligibility requirements: Must be age 60+ or caregiver for same

Documentation needed to enter program: Information, referrals, and assistance open to all residents of Schoharie County and their caregivers

Languages offered: _____

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:

Assisting and advocating for our county's residents aged 60 and over, and their caregivers, through programs and services designed to promote health, safety, dignity, and independence.

Services include Caregiver support, Educational, Emergency, Employment Placement & Training, Energy Assistance, Legal, Financial, Health&Nutrition, Long Term Care insurance information/HIICAP, Information/Referral/Case management, EISEP personal care services, Transportation, Volunteer Opportunities, Home Delivered Meals, congregate meals, loan closet for small medical items, loan closet for hearing enhancing devices. Ombudsman advocate program.

Program Name: Residential Resources

Service type:

Contact person: Todd Delmarter **Telephone:** 518-234-0060

Director (if available): Todd Delmarter **TDD:**

Email address: tdelmarter@resresources.com **Fax:** 518-234-7851

Website: www.resresources.com

Address: 573-1 Main St. Cobleskill, NY 12043

Hours of operation: Mon–Fri 8A-5P **After hours availability:** 518-234-1017

Population served: Adults w/ Traumatic Brain Injury (TBI)

Fee structure/payor sources accepted: Private pay and Medicaid

Eligibility requirements: TBI, enrolled in the NYS Dept of Health HCBS Waiver

Documentation needed to enter program: Proof of injury and Medicaid eligibility

Languages offered:

Translator available: No **Access to public transportation:** No

Services Provided:

Service coordination, direct support, independent living skills, structured day program.

Program Name: Support Groups –Cobleskill Regional Hospital **Service type:** _____

Contact person: Susan Cimino-Cary **Telephone:** 518-254-3271

Director (if available): Eric Stein **TDD:** _____

Email address: Susan.ciminocary@bhsc.org **Fax:** 518-254-3415

Website: <http://www.cobleskillhospital.org/>

Address: 178 Grandview Drive, Cobleskill NY 12043

Hours of operation: Varies with group **After hours availability:** _____

Population served: _____

Fee structure/payor sources accepted: No charge

Eligibility requirements: _____

Documentation needed to enter program: _____

Languages offered: _____

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided: These support groups meet at various times of the month depending on the particular group. See the next page for listing of support groups and details of meetings.

Support Groups Cobleskill Regional Hospital

Group	Meets	Supports
Alzheimer's Support	7-8:30 first Wed of month	Caregivers of people diagnosed with Dementias
Cancer Patient Support	10AM-12 Noon second Tues of month	People diagnosed with cancer from diagnosis through aftercare
Cancer Patient & Family Support	10AM- 12 Noon fourth Tues of month	Patients and their loved ones from diagnosis through aftercare
Stroke Support –Contact Ann Boland at 254-3207	2-3:00 PM first Wed of month	Stroke survivors, caregivers, and family members
AA/ Al-anon***	***For AA/Al-Anon and N/Anon see also the directory entry “ AA District 8 Meeting Schedule ”	Alcohol abuse and recovery; family support
N/ Anon***	Help line 518-448-6350 website http://abcdrna.org/ or www.na.org	Narcotics and drug abuse recovery
N/ Anon	6-7:15 Friday reformed church annex Schoharie, 2 nd floor	Narcotics and drug abuse recovery
Chemical Dependency- this is an AA group	7:00 PM Wednesdays at 113 Park Place Suite #1 Schoharie	Open meeting

AA Support Groups – Schoharie County

Day of week	Location & time	Note
Sunday - Covered Bridge Group	North Blenheim 6 PM United Methodist Church Route 30	O-Open BB-Big Book NS-Non-smoking
Sunday –Bridge Over Troubled Water Group	Central Bridge 7 PM Bethany Lutheran Church, Church Street	O-Open St -?unknown abbreviation
Monday - Schoharie Recovery Group	Schoharie 12 Noon Reformed Church – Main Street	O-Open D- Discussion
Monday - It Works Group	Middleburgh 8 PM- St. Mark’s Lutheran Church – Main Street	C-Closed BB-Big Book D-Discussion NS –nonsmok (alternating weeks)
Tuesday -Schoharie Recovery Group	Schoharie 12 Noon Reformed Church – Main Street	O-Open D- Discussion
Tuesday - Stepping to Serenity Group	Schoharie 7:30 Pm Reformed Church, Main Street	C-Closed B-Beginners St -? unknown abbreviation
Tuesday –Cobleskill Group	Cobleskill 8PM United Methodist Church Chapel Street	O-Open D- Discussion NS -Nonsmoking
Wednesday -Schoharie Recovery Group	Schoharie 12 Noon Reformed Church – Main Street	O-Open D- Discussion
Wednesday - Back to Basics Group	Middleburgh 7 PM Middleburgh Reformed Church House -Middle Fort Road	O-Open B-Beginners
Wednesday - Covered Bridge Group Schoolhouse	North Blenheim 7 PM Route 30, East Side Road	O-Open B-Beginners NS -Nonsmoking
Thursday -Schoharie Recovery Group –2 mtgs!	Schoharie 12 Noon and 7:30 PM Reformed Church – Main Street	O-Open D- Discussion

Program Name:

Schoharie County TRIAD

**Service
type:**

Contact person: Carol Coltrain **Telephone:** 518-295-2001

Director (if available): Carol Coltrain **TDD:**

Email address: sheriffofc@co.schoharie.ny.us
ofa@co.schoharie.ny.us **Fax:** 518-295-2015

Website: None – this is an agency partnership

Address: 113 Park Place, Suite 3, Schoharie, NY 12157

Hours of operation: Mon-Fri 8:00-5:00 P **After hours availability:**

Population served: Schoharie County Residents Age 60+

Fee structure/payor sources accepted:

Eligibility requirements:

Documentation needed to enter program:

Languages offered:

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided:

TRIAD is a partnership between Senior Citizens, Senior Providers, and Law Enforcement, that strives to reduce victimization of the elderly.

Adult/Aging Services, Educational Services, Information/Referral

Program Name: Van Aller's Adult Home **Service type:** _____

Contact person: Joanne Van Aller **Telephone:** 518-827-4347

Director (if available): Joanne Van Aller **TDD:** _____

Email address: jvalleyview@midtel.net **Fax:** _____

Website: _____

Address: 246 Ecker Hollow Road, Middleburgh, NY 12122

Hours of operation: 10AM -8PM **After hours availability:** yes

Population served: Elderly men and women requiring adult home care

Fee structure/payor sources accepted: private pay

Eligibility requirements: Client must be able to walk with a walker

Documentation needed to enter program: Physician certification

Languages offered: English

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided: family-type adult home providing room, board, personal care, health care oversight and access to medical care when indicated.

Program Name: Visiting Nurses Home Care **Service type:** nursing

Contact person: Sherry Wayman **Telephone:** 518-234-4516

Director (if available): Mary Shafer, Coordinator **TDD:** _____

Email address: sheway@vnahc.com **Fax:** 518-234-1065

Website: www.vnhc.com

Address: 513 W. Main St. #3, Cobleskill, NY 12043

Hours of operation: 8-4:30 **After hours availability:** For clients only

Population served: Residents of Schoharie County and bordering counties

Fee structure/payor sources accepted: MC, MA, insurance, private pay

Eligibility requirements: Require assist with personal care or skilled nursing procedures

Documentation needed to enter program: Physician's order/statement of need for care

Languages offered: _____

Translator available: Yes No **Access to public transportation:** Yes No

Services Provided: nursing care and personal care for in-home patients. LPN's, RN's, and Home Health Aides available