

# Resourceful Thinking

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## NATIONAL ALZHEIMER'S AWARENESS MONTH; MEDICARE PART D OPEN ENROLLMENT

### **FREE ALZHEIMER'S PROGRAM in NOVEMBER**

Once again, November has been designated as National Alzheimer's Awareness Month. The WV Alzheimer's Association will join us at the Altenheim Resource Center on November 15 for two special programs that focus on Alzheimer's Disease. "Caregiver Stress" will be discussed and includes a light lunch. Another area of concern for caregivers will be addressed when West Virginia Medical Institute follows "Caregiver Stress" with a brief presentation on electronic information and how to protect your data. The afternoon session will run from approximately 12noon - 2:30 pm. The evening session which will run from 6pm - 7:30pm, will focus on "What's New in Alzheimer's Research". Snacks will be served for this session. These programs are **FREE** and **OPEN TO THE PUBLIC.** Join us to learn about two very important areas of Alzheimer's care. We will also have door prizes at both sessions! Parking is available at the Resource Center. Call us at 304 243-

0996 to reserve your seat! There is a flyer in the back of this newsletter. Please share the information with your friends, family and colleagues and post it on any bulletin boards so people know about this program! Thanks for your help in getting the word out!

### **FREE PROGRAM ON PART D PRODUCTS**

Citywide Insurance Company will be at the Resource Center on November 28 from 12 noon to 2 pm for a free program that includes lunch to talk about Part D products that are available to Medicare beneficiaries. Citywide has a number of products to offer which allows comparison shopping and a better fit for a beneficiary's specific needs. Doug Clatterbuck and Mike Perring will be presenting information and will be available to answer questions on their products. A light lunch will be provided for attendees while they learn about Medicare Part D products and the choices that Citywide has to offer Medicare beneficiaries. To register for this free

program with lunch, call Janice at Citywide at 304 242-7500 by November 27.

### **MEDICARE PART D INFORMATION**

The open enrollment period for Medicare Part D will begin on November 15 and run through December 31, 2007 with services for the beneficiary's chosen product beginning January 1, 2008. It is recommended that changes be made by December 8 to insure coverage by January 1. Products continue to evolve as the prescription drug benefit enters its third year. Some companies have changed their formularies; some companies are no longer participating providers. Beneficiaries need to consider the following when selecting a product:

- \*the amount of the monthly premium;
- \*whether the plan formulary (list of a plan's covered drugs) includes the particular drugs needed by the Medicare beneficiary;
- \*the costs / co pays of your prescriptions;
- \*whether the plan offers supplemental benefits that are important to the individual;

\*and, does the beneficiary need or want a Medicare Advantage plan.

Not all drugs will be covered and each plan can set and change its own formulary as long as its coverage is considered at least equivalent to the standard benefit outlined by Medicare. (Beneficiaries also want to be aware that the total cost of the medication counts toward the coverage gap not just the beneficiary's co-pay amount.)

Medicare beneficiaries may want to go to [www.medicare.gov](http://www.medicare.gov) to use the following tools:

**\*Compare Medicare prescription drug plans** – by entering personalized information, you can find and compare the prescription drug plans available to you that meet your personal needs, and, enroll in the plan that you select.

**\*Formulary Finder** – by entering personalized information about the specific medications you take, you can get information to help you find the plans available to you that match your prescription drug needs.

For information, you may contact your State Health Insurance Information Program (SHIP) or your county SHIP counselors. West Virginia's Medicare Call Center continues to assist West Virginia beneficiaries. The toll free number is 1 877 987-4463. You may also call us at 304 243-0996 or email [akoegler@verizon.net](mailto:akoegler@verizon.net) to find a resource or SHIP in your area.

### **QUALIFY FOR EXTRA HELP WITH PART D PLANS**

Extra help with drug costs is available for many people with limited income and resources, regardless of the state in which they live.

People with the lowest income and resources pay no premiums or deductibles and have small or no co-payments. Those with slightly higher incomes pay no or a reduced premium, have a reduced deductible and pay a little more out of pocket. Those people with Medicare who receive full Medicaid benefits, get Supplemental Security Income (SSI) or get help from Medicaid paying Medicare premiums may automatically qualify. Others with low income and limited resources must apply to qualify for benefits. In 2007, the extra help could be worth approximately \$3700\* per year. Federally, the 2007 guidelines are as follows:

\*Annual income below \$15,315\* for an individual or \$20,535\* for a married couple living together,

\*Resources limited to \$11,710\* for an individual or \$23,410\* for a married couple living together. (Resources include but are not limited to bank accounts, stocks and bonds.) The primary residence and car do not count as a resource.

Even if your annual income is higher, you may still be able to get some help with your monthly premiums, annual deductibles and prescription co-payments. For example, your income may be higher and you

could still get extra help if you support other family members who live with you, have earnings from work or live in Alaska or Hawaii. If you have not applied for extra help or are not getting the extra help automatically, you can apply online at [www.socialsecurity.gov](http://www.socialsecurity.gov); apply over the phone by calling Social Security at 1 800 772-1213 or to request that an application be sent to you; or apply at your local Social Security office. After you apply, Social Security will review your application and send you a letter to let you know if you qualify for extra help. If you are eligible, you can enroll in a plan until December 31, 2007 and you will not pay a penalty.

\*Amounts will be adjusted in 2008.

### **MEDICARE PART B RATE & SOCIAL SECURITY COLA**

The Centers for Medicare and Medicaid Services has announced that the standard rate for Medicare's Part B premium will be \$96.40 in 2008, an increase of \$2.90 or 3.1%. Premiums may be higher based on a beneficiary's income and IRS filing status. Monthly Social Security and Supplemental Security Income benefits will increase 2.3 percent in 2008 according to the Social Security Administration.

### **CAREGIVING: REACHING OUT FOR HELP**

Not only do we observe National Alzheimer's

Awareness Month in November, we also observe National Family Caregiver Week. Caregiving is one of the most challenging jobs that family members and friends undertake - and one of the riskiest. Many recent studies show that caregivers are at a much higher risk for a host of mental and physical illnesses, many of which originate with stress. Caregivers are more likely to get infectious diseases, they are slower to heal from wounds and they have elevated levels of a chemical that is linked to chronic inflammation. This puts caregivers at an increased risk of heart disease, arthritis, diabetes, cancer and other diseases. Janice Kiecolt-Glaser, PhD, Director of the Division of Health Psychology at Ohio State University in Columbus OH, reports that these levels are still high three years after caregiving duties end, especially among caregivers over 65 years. There is also a higher risk of anxiety and depression, and, increased mortality rates. According to a 2004 study completed by AARP and the National Family Caregivers Association, nearly 23 million households are home to a caregiver, most often a female who is caring for someone 50 years or older. Approximately 43% of these caregivers are 50 years or older themselves. Caregiving crosses all ethnic, religious and social lines. Medicaid, Medicare and private insurances cover very little of caregiving assistance so the majority of the cost of caregiving is an out-of-

pocket expense. Many caregivers give up jobs, decrease work time, decline transfers or promotions, eliminate vacations, abandon hobbies and forego relationships because of the time needed to care for a loved one. Many caregivers don't think of asking for help (thinking they can do it by themselves) while some lack the energy or the resources to seek assistance. Many times, caregivers just don't know where to turn to ask the basic questions. The emotional impact of caring for someone can run through a range of feelings: rage, guilt, frustration and some caregivers feel inept believing they should be able to do the task all by themselves. (After all, Mom took care of 6 of us without any help.) But caring for an adult who is declining is worlds away from caring for a child who will grow and develop and become an independent adult. There is also the omnipresent dynamic that THIS IS your mother or father when one is caring for a parent. As the next article points out, we're living longer. Medical technology isn't necessarily keeping up, however, and quality of life becomes an issue for many. Many care receivers are dependent for supervision, meals, personal care – many of the activities of daily living increasing the physical and emotional burden. Caregivers need to be attentive to caring for themselves while caring for a loved one. Ask for help. Pay attention to health care: have a check up, get

your cholesterol and blood pressure checked, and take some time away from your care receiver. AARP: The Magazine suggests “9 Ways to Make It Better”; [Resourceful Thinking adds some comments, too]:

**\*COMPROMISE:** Work hard to avoid family fights or resentments with siblings or relatives. Don't let old issues get in the way. This is the time to stick together. [You have to realize that no one can “make” your brother or sister or other family member do tasks for the care receiver. If they will not help in one way, suggest another task that will offer you some relief. They may not sit with Mom but they may pay for some in home services or adult day service assistance. Or, they may help with the paper work that is necessary to complete. Or they still may refuse to be involved. You may have to accept this.]

**\*COORDINATE:** Try to help prepare for when an illness becomes more severe or fatal. [Families often avoid this topic. Work out a plan and be your family's care manger. Does the care receiver still have the capacity to grant medical power of attorney and / or financial power of attorney and have Advance Directives been completed? Find out where important papers are kept, make a list of the locations, keep important contact information handy such as Veteran's papers, funeral homes, long distance relatives, etc. Where are safe deposit box keys? Where is the Will? The Resource Center has a

document locator form and other helpful forms for caregivers.]

**\*ENCOURAGE:** The caregiver may need professional support. There are support groups, private therapists and also on-line chat rooms for caregivers. [Encourage the caregiver to **HELP THEMSELVES!** It is often hard to garner the energy to do something, but it is necessary to get the help you need. Also, friends can help by being cheerleaders for caregivers.]

**\*FACILITATE:** Use a “third party” to act as a negotiator in a stressful situation with family or health care professionals. A social worker or the family minister may be helpful. [Sometimes, information is received more positively from someone outside the family.]

**\*INVESTIGATE:** Find information that can help caregivers learn about the illness that affects the care receiver or learn about services. [The Resource Center has videos, DVDs, books and pamphlets on a number of aging and caregiving issues. We will meet with you to discuss your situation – at no charge – and objectively try to guide you to the most appropriate **CHOICES** of services or the best information on your care receiver’s problem. Come to our community programs or attend other community programs for more information.]

**\*ORGANIZE:** Make a list of people who can be called on for different duties. [Try to use volunteer

services, other in home assistance, family members and friends to assist your care receiver. Don’t forget that your care receiver needs socialization and often would welcome a “change of face” giving you and the care receiver a bit of time.]

**\*DISCUSS:** Ask the care receiver to tell his / her story. Keep a journal. Writing things down can be a release and may help others understand the care receiver’s needs. [There is also a Values History Form which helps care receivers express their values, the ethical legacy they want to leave their families, and also speaks to the care they want to receive as they move to the end phase of their lives. Another helpful form is the Five Wishes Form which also elaborates on a care receiver’s advance directives. Both are available from the Resource Center. Journaling can be cathartic for caregiver and care receiver. Reminiscence is another tool to use with a care receiver. A caregiver can have quality time, learn about their loved one and note information on the care receiver to pass on.]

**\*PLAN:** Think about services. Be clear when asking for help from someone. [Think about what you need. Break down your care receiver’s needs and be specific with agencies or friends. If someone offers assistance, determine how they can assist and tell them what you need. Let them help!]

**SOCIALIZE:** Try to be involved in social activities, family gatherings and other

events. [So often, people stop visiting. They may not know what to say or how to be encouraging. How can conversation be guided – scrapbooks, photo albums, old postcards? Look into Adult Day Services for your care receiver so you can have time away to be involved with friends, your church family or others. This affords an opportunity for socialization for you and the care receiver.]

Call us. We’ll be happy to talk to you about your situation and try to make it a bit less difficult.

[Source: AARP: The Magazine, Nov-Dec 07, “Caring for the Caregiver”]

### **SERVICES THAT MAY HELP**

There are a number of services that are helpful to caregivers and care receivers. Support groups, help in the home, volunteer assistance and alternative housing may be helpful to you. Have you considered in home assistance? There are several agencies that offer the assistance of in home service workers to provide companionship, light housekeeping or personal care assistance. Does your care receiver need food? Home delivered meal programs will bring meals to homebound care receivers. Some have a fee; some are donation based. There are also congregate meal sites for seniors who want socialization and are able to get to the meal site. Do you or your care receiver need alternative housing? There are options ranging from high rise apartments to assisted living to nursing home care.

Some facilities offer a continuing care community with care ranging from independent housing to nursing home care on the same campus. Call us for a booklet entitled "Long Term Care: A Range of Resources". The booklet explains the services that are generally available to care receivers or seniors. We can also offer you more specific resource choices to meet your needs.

### **LIFE EXPECTANCY GOES UP**

The life expectancy for Americans is nearly 78 years according to figures recently released by the National Center for Health Statistics. That age is still lower than the life span in more than three dozen other countries. Andorra, a tiny country between France and Spain, has the longest life expectancy at 83.5 years. Life expectancy for women in the U.S. is about 5 years longer than that of men. Although age-adjusted death rates dropped for heart disease and stroke, there were 5% increases in the rates for Alzheimer's Disease, the Number 7 leading cause of death and for Parkinson's Disease which ranked Number 14.

[Source: The WV Central Newspaper, Sept-Oct 07, "Life Expectancy of Americans Climbs to 78 Years"]

### **WV GOVERNOR'S SUMMIT ON AGING HELD AT MOUNTAINEER GAMING**

The West Virginia Governor's Summit was held September 18-21 at

Mountaineer Gaming in Chester. WV Bureau of Senior Services Commissioner Sandra Vanin and WV Governor Joe Manchin III opened the conference. Governor Manchin highlighted his goals across the age continuum, reflecting that he has the best job in the state of WV. Governor Manchin expressed support for West Virginia's "experienced citizens" through programs such as the FAIR (Families with Alzheimer's In Home Respite) program, the Lighthouse program (a sliding scale fee in home service program) and other aging services. The conference was expanded this year with the first day's focus on aspects of Seniors and Suicide. The topic was addressed by professionals Eric Rankin, PhD; John Vanin, MD; and, Amy Fiske, PhD. Once again, the conference offered valuable information on topics of interest that included "Sexuality After Sixty", "Medicare Advantage Plans", and "Removing the Barriers Between Nursing Homes and Hospice". New programs were explained in the "Personal Options" session and Sharon D'Eusanio offered an inspiring program on victim services with "Anyone, Anywhere". As ever, networking opportunities were afforded throughout the conference. We are fortunate to have a quality conference offered annually with a diverse focus. Chuck Conroy, WV BoSS, told us that next year's conference will be in

the southern region of the state and the opening day focus will be on Alzheimer's Disease. Thank you Chuck and planning committee for another great year!

### **NEW WEBSITE AT ACTIVEAMERICANS.COM**

As mentioned previously, networking is one of the valuable components of the Governor's Summit on Aging. This year, I had the opportunity to meet Joyce Sawyer of ActiveAmericans.com, a website focusing on aging Americans. The mission of ActiveAmericans.com is to improve the quality of life of those 50 and over, and offers information and articles on a number of issues. They are working on a Calendar of Events that they hope will encompass events in a variety of geographic locations. Visit [www.activeamericans.com](http://www.activeamericans.com) to see what they have to offer. Registration is free at this time.

### **NEED A SPEAKER?**

Would you like to learn more about us? We would be happy to arrange a time to speak to your group about the Altnheim Retirement Home and the Altnheim Resource Center. Additionally, we offer programs on General Aging Issues, Caregiving Challenges, Alzheimer's Disease and Dementia, Behavioral Challenges with Dementia, Resources for Caring, and many other areas. Call us at 304 243-0996.

**CAREGIVER SUPPORT FAIR**  
**'08 PLANS**

Plans for the Ninth Annual Caregiver Support Fair are underway! The planning committee has been meeting and we are in the process of planning another informative and fun event for our area caregivers! Call Ann at 304 243-0996 to make sure your agency is on the mailing list and will be represented at the Fair. Keep May 6, 2008 open so you can participate in the Caregiver Support Fair!

**CAN YOU BELIEVE IT WILL BE**  
**2008??!!**

Just yesterday – it seems - I was writing '2007'! Now we have come to the end of another year. We lost a dear friend and supporter when Joyce Farmer died in February; and, we've seen other changes taking place with agencies closing and staff members changing. We began a new web page this year, developed by Van Egmont International and many thanks go to our Webmaster for his expertise and ability to translate our vision into a user-friendly site. Check out our website at [www.careforaged.com](http://www.careforaged.com)!

The Resource Center continues to offer free programs to the community as well as quality workshops for our professional caregivers. We appreciate those professionals who've presented at our programs and also to the professionals on our workshop planning committee. I've met new

people, renewed contacts and developed relationships with our "sister" agencies. I've had the privilege of assisting many of you with information on services, caregiving or other aging issues at presentations and at consultations at the Resource Center. I would like to say thank you for your support of the Resource Center and your assistance! Our success is facilitated by the networking and shared vision and ideas of our colleagues in the area, in the state and in other parts of the country. Whether you've donated your time, money or talents we want to say a heartfelt "Thank you for all you do!"

Also, many thanks to George Dakovic our Executive Director, the Altenheim Board of Trustees, Marylee Smith (my right hand person), Resource Center volunteers, the Altenheim staff, our colleagues and the community for your support. We continue to offer information without regard to geographic location and information is offered at no charge. Our goals are to increase public awareness of the agencies and services that are available to caregivers and the elderly, offer information on illnesses that afflict the elderly, assist consumers in making appropriate CHOICES of services that are available, provide education and training for professional caregivers to enhance practice standards, and, help seniors and caregivers (family and professional) be better equipped to deal with

the challenges of caregiving. We begin our 13<sup>th</sup> year of service in 2008 and would like to thank all of you for the support you have offered! We couldn't do what we do without all of you! We plan to continue the tradition of caring, and to help seniors and their caregivers with support, information, and education. Please call the Altenheim Resource Center if we can be of assistance.

**RESOURCE CENTER HOLIDAYS**

The Resource Center will be closed on the following days:

Thanksgiving Holiday

November 22 & 23 - closed

Christmas Holiday

December 24 & 25, 2007 closed

New Year's Holiday

December 31 2007 & January 1, 2008 closed

**OFFICE COVERAGE:**

Please do not hesitate to call us to make sure someone will be available to assist you. Even if we're not in the office, Ann or Marylee checks our voice mail for messages. Sometimes we are in but cannot get to the phone as we are with a caregiver or on another line. We will get back to you as soon as possible to help with your questions or to schedule an appointment for you to visit!



**GO STEELERS !**



**LET'S GO 'EERS!**