



MINNESOTA RIVER AREA AGENCY ON AGING®, INC.

MNRAAA NEWS

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Volume V, Issue II 4.24.14

Dear Readers,

May is Older Americans Month – “Safe Today, Healthy Tomorrow”

Older adults have made countless contributions and sacrifices to ensure a better life for future generations. Since 1963, communities across the country have shown their gratitude by celebrating Older Americans Month each May. This celebration recognizes older Americans for their contributions and demonstrates our nation’s commitment to helping them stay healthy and active.

This year’s theme “Safe Today, Healthy Tomorrow” focuses on injury prevention and safety to encourage older adults to protect themselves and remain active and independent for as long as possible.

Unintentional injuries to the older adult population result in at least 6 million medically treated injuries and more than 30,000 deaths every year. With an emphasis on safety during Older Americans Month, the Minnesota River Area Agency on Aging®, Inc. encourages older adults to learn more about the Matter of Balance classes we offer. These classes address falls, one of the leading causes of injury (see related article on page 6).

We encourage you to join the Minnesota River Area Agency on Aging®, Inc. in recognizing and celebrating the value older adults contribute to our communities, and to help ensure they have a “Safe Today, Healthy Tomorrow”!

Sincerely,

Linda Giersdorf



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Mission Statement

The Minnesota River Area Agency on Aging®, Inc. is the gateway to resources for older adults, caregivers and service providers in the twenty-seven counties of southwest Minnesota.

Look Here, We Need You!



The Minnesota River Area Agency on Aging®, Inc. is seeking interested persons to fill the following three-year term vacancies for the Advisory Councils on Aging (ACA) effective immediately:

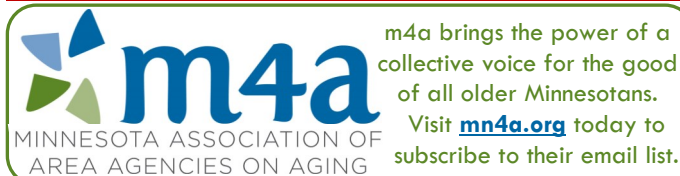
Northern ACA (Willmar Office)

- Big Stone County 60+
- Chippewa County 60+
- Kandiyohi County 60+
- McLeod County 60+
- Swift County 60+

Southeast ACA (Mankato Office)

- Sibley County 60+

To obtain an application, please contact Erica at 507.389.8879 or erica@rndc.org.



The Minnesota River Area Agency on Aging®, Inc. (MNRAAA) is seeking interested persons to fill a three-year term, at-large vacancy on its Board effective immediately. The vacancy is for an individual of minority status who represents the ethnic/racial diversity of south central/western Minnesota. Applicants must reside and/or be employed in Big Stone, Blue Earth, Brown, Chippewa, Cottonwood, Faribault, Jackson, Kandiyohi, Lac qui Parle, Le Sueur, Lincoln, Lyon, Martin, McLeod, Meeker, Murray, Nicollet, Nobles, Pipestone, Redwood, Renville, Rock, Sibley, Swift, Waseca, Watonwan or Yellow Medicine Counties.

The Board provides governance to MNRAAA. **Applications are due by Friday, May 16, 2014.**

To request an application, or for more information, contact Erica at 507.389.8879 or erica@rndc.org.



The Medicare "Improvement Myth"

In 2013 the U. S. District Court approved a settlement agreement in the case of Jimmo v. Sebelius, in which the plaintiffs alleged that Medicare contractors were inappropriately applying an "Improvement Standard" in making claims determinations for Medicare coverage involving skilled care (i.e., the skilled nursing facility (SNF), home health (HH), and outpatient therapy (OPT) benefits). The settlement agreement was intended to clarify when skilled services are required in order to provide care that is reasonable and necessary to prevent or slow further deterioration, coverage cannot be denied based on the absence of potential for improvement or restoration. Medicare published the revised Medicare Policy Manuals on December 6, 2013.

As CMS states in the Transmittal announcing the Jimmo Manual revisions:

No "Improvement Standard" is to be applied in determining Medicare coverage for maintenance claims that require skilled care. Medicare has long recognized that even in situations where no improvement is possible, skilled care may nevertheless be needed for maintenance purposes (i.e., to prevent or slow a decline in condition). The Medicare statute and regulations have never supported the imposition of an "Improvement Standard" rule-of-thumb in determining whether skilled care is required to prevent or slow deterioration in a patient's condition. Thus, such coverage depends not on the beneficiary's restoration potential, but on whether skilled care is required, along with the underlying reasonableness and necessity of the services themselves.

Medicare coverage for nursing home care is limited



Some change in memory is normal as we grow older, but the symptoms of Alzheimer's disease are more than simple lapses in memory. People with Alzheimer's experience difficulties in communicating, learning, thinking and reasoning – problems severe enough

to have an impact on an individual's work, social activities and family life.

The Alzheimer's Association believes that it is critical for people with dementia and their families to receive information, care and support as early as possible. To help family members and health care professionals recognize the warning signs of Alzheimer's disease, the Association has developed a list of common symptoms.

Memory Loss: One of the most common early signs of dementia is forgetting recently learned information. While it is normal to forget appointments, names or telephone numbers, those with dementia will forget such things more often and not remember them later.

Difficulty Performing Familiar Tasks: People with dementia often find it hard to complete everyday tasks that are so familiar we usually do not think about how to do them. Those with Alzheimer's may not know the steps for preparing

a meal, using a household appliance or participating in a lifelong hobby.

Problems with Language: Everyone has trouble finding the right word sometimes, but a person with Alzheimer's often forgets simple words or substitutes unusual words, making his or her speech or writing hard to understand. If a person with Alzheimer's is unable to find his or her toothbrush, for example, the individual may ask for "that thing for my mouth."

Disorientation to Time and Place: It's normal to forget the day of the week or where you are going. But people with Alzheimer's disease can become lost on their own street. They may forget where they are and how they got there, and may not know how to get back home.



Poor or Decreased Judgment: No one has perfect judgment all of the time. Those with Alzheimer's may dress without regard to the weather, wearing several shirts in warm weather or very little clothing in cold weather. Those with dementia often show poor judgment about money, giving away large sums to telemarketers or paying for home repairs or products they don't need.

Problems with Abstract Thinking: Balancing a checkbook is a task that can be challenging for some. But a person with Alzheimer's may forget what the numbers represent and what needs to be done with them.

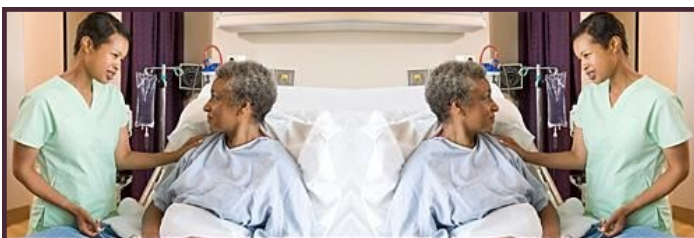
Misplacing Things: Anyone can temporarily misplace a wallet or a key. Persons with Alzheimer's disease may put things in unusual places like an iron in the freezer or a wristwatch in the sugar bowl.

Continues on Page 4



April is Volunteer Appreciation Month!

We are so thankful for our volunteer's countless efforts and commitment to assisting older adults and caregivers in our service area. Thank you!



Observation or Inpatient?

Hospital Status and Medicare Reimbursement

Medicare beneficiaries can stay overnight in the hospital as an “inpatient” or as an “outpatient”. Whether a Medicare beneficiary is admitted to the hospital as an inpatient or as an outpatient under Observation Status can make a big difference to your pocket book. Many people are not aware that admission as an outpatient can affect how much Medicare will pay. It also has an impact on whether Medicare will pay, should you need to go to a skilled nursing facility after the hospitalization.

If you are hospitalized as an inpatient your Medicare Part A benefits covers your stay. Generally, you pay a one-time deductible for all services for the first 60 days you are an inpatient in the hospital. If you are hospitalized as an outpatient under observation your Medicare Part B will be billed for your outpatient hospital and doctor services. If you have Original Medicare you will be charged a 20% copayment for each individual service after paying the Part B deductible. The copayment for a single outpatient service cannot be more than the inpatient hospital deductible. In addition, self-administered medications are not covered under Medicare Part B. Therefore, you may have to pay out-of-pocket for your medications and then submit a claim to your Medicare Part D plan. Your plan will likely reimburse you at a lower rate.

If you need post-hospital care in a skilled nursing facility Medicare Part A will only cover this care if you have a three day Medicare “qualifying hospital in-patient stay”. Therefore, if your time in the hospital was as an outpatient, regardless of the length of stay, Medicare Part A will not cover this stay. As skilled nursing care is not covered under Medicare Part B, you would be responsible for the cost of time spent in a skilled nursing facility, if your hospital stay was as an outpatient.

Medicare beneficiaries and their families should pay attention to the hospital admission status and

understand how this can affect their out-of-pocket costs. You can contact the Senior LinkAge Line® if you would like more information about hospital status and Medicare reimbursement. The Senior LinkAge Line®: A One Stop Shop for Minnesota Seniors is a free statewide service of the Minnesota Board on Aging and Area Agencies on Aging. Specialists provide one-to-one assistance with helping older adults age well and live well. The Senior LinkAge Line® is the federally-designated State Health Insurance Assistance Program (SHIP) for Minnesota and is the place to call for Medicare and health insurance issues. Call 1-800-333-2433 for assistance Monday through Friday from 8:00am to 4:30pm or visit www.MinnesotaHelp.info® to chat with a specialist during business hours. ■



A One Stop Shop for Minnesota Seniors

Alzheimer's Awareness continued from Page 3

Changes in Mood or Behavior: Everyone can become sad or moody from time to time. Someone with Alzheimer's disease can show rapid mood swings, from calm to tears to anger, for no apparent reason.

Changes in Personality: Personalities ordinarily change somewhat with age, but a person with Alzheimer's can change dramatically, becoming extremely confused, suspicious, fearful or dependent on a family member.

Loss of Initiative: It is normal to tire of housework, business activities or social obligations at times. The person with Alzheimer's disease may become very passive, sitting in front of the television for hours, sleeping more than usual or not wanting to do usual activities.

If you recognize any of these warning signs in yourself or a loved one, the Alzheimer's Association recommends consulting a physician. Early diagnosis of Alzheimer's disease or other disorders causing dementia is an important step to getting appropriate treatment, care and support services. ■

Planning for Retirement

In recent years there has been a great deal of attention paid to planning for your financial well-being prior to retirement. However, planning for retirement is more than just making sure you have your fiscal ducks in a row. Many people put little thought into what kind of health insurance they will need after they turn 65 or when they retire and leave the workforce. In the past many people retired at age 65 and went onto Medicare. In the last few years we have seen a trend where more and more people are delaying retirement and working past age 65.

There are many things to consider when you plan to work past your initial Medicare Open Enrollment Period. You typically have a 7 month window to enroll into Medicare. This starts three months before the month you turn 65, the month of your 65th birthday and three months after. If you plan to work past age 65 or plan to keep health insurance through your employed spouse there are things you need to consider.

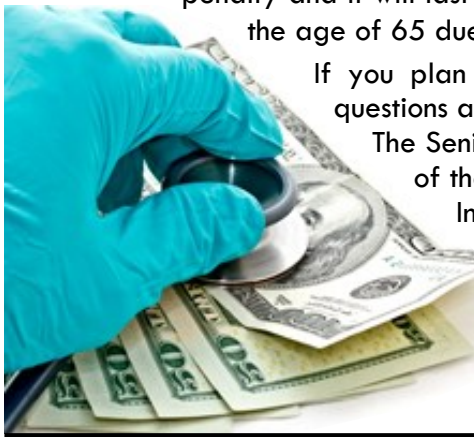
Whether Medicare would be primary or secondary coverage depends on your current employer based coverage. If you are eligible for Medicare because of age and you work for a company that has 20 or more employees, your employer insurance coverage is primary. However, if you work for a company that has fewer than 20 employees Medicare is primary. If you are eligible for Medicare because of a disability and work for a company that has 100 or more employees, your employer insurance coverage is primary. However, if you work for a company that has fewer than 100 employees Medicare is primary.

Primary insurance pays first and secondary insurance pays after primary insurance has paid their portion. Generally, secondary insurance will not pay toward a claim unless the primary insurance was billed and paid their portion.

If Medicare is your primary coverage and you delay enrollment you will be subject to a late enrollment penalty when you enroll at a later date. The penalty for late enrollment is an additional 10% of the premium for every 12 months you were eligible but not enrolled. There is no cap on this penalty and it will last as long as you are on Medicare. If you are eligible for Medicare before the age of 65 due to a disability and have a penalty, this will end when you turn 65.

If you plan to work past your Medicare initial open enrollment period and have questions about Medicare and your insurance coverage, call the Senior LinkAge Line®.

The Senior LinkAge Line®: A One Stop Shop for Minnesota Seniors is a free service of the Minnesota Board on Aging. The Senior LinkAge Line® is the State Health Insurance Assistance Program (SHIP) and Senior Medicare Patrol for Minnesota. Specialists provide one-to-one assistance with all Medicare and health insurance issues and also provide in-depth long-term care options counseling. Call 1-800-333-2433 for assistance or go to www.MinnesotaHelp.info to chat live with a Senior LinkAge Line® specialist. ■



Senior LinkAge Line® Referral Site Changes

The Minnesota Board on Aging has made a number of improvements to the online referral site professionals use to submit referrals to the Senior LinkAge Line®. Improvements include:

1. Pre-Admission Screening
2. MDS Section Q
3. Moving Home Minnesota
4. Hospital and Health Care Home (people discharging to community)
5. Other referrals for consumers who would benefit residing in community setting

Examples of changes to the PAS fields include:

- Out-of-state facilities may be entered as the admitting nursing facility
- Additional language provided to clarify medical diagnosis information
- Non-critical fields were removed
- Ordering of fields has changed on the Health and Functional Needs at Discharge screen

Please see the step-by-step posted on the referral site located at, <https://mnhelpreferral.revation.com/>, for specific information on these changes. ■

DO YOU HAVE **concerns** about falling?

A Matter of Balance emphasizes practical strategies to manage falls.

YOU WILL LEARN TO:

- view falls as controllable
- set goals for increasing activity
- make changes to reduce fall risks at home
- exercise to increase strength and balance

WHO SHOULD ATTEND?

- anyone concerned about falls
- anyone interested in improving balance, flexibility and strength
- anyone who has fallen in the past
- anyone who has restricted activities because of falling concerns



**A MATTER OF
BALANCE**

MANAGING CONCERNS ABOUT FALLS

Many older adults experience concerns about falling and restrict their activities.

A MATTER OF BALANCE

is an award-winning program designed to manage falls and increase activity levels.

Classes are held either twice a week for 4 weeks or once a week for 8 weeks.

Classes are 2 hours each.

For more information please call the Minnesota River Area Agency on Aging®, Inc. at:

Mankato - 507-389-8869

Slayton - 507-836-1642

Willmar - 320-235-8504, x. 251

"Myth" continued from Page 2

(up to 100 days per benefit period). However, coverage can no longer be denied to someone with a chronic condition, who is in need of services to maintain their condition. There are certain requirements that must be met for an individual to receive Medicare skilled nursing facility coverage. These requirements include:

1. A physician must certify that the patient needs SNF care; and
2. The beneficiary must generally be admitted to the SNF within 30 days of a 3-day qualifying hospital stay; and
3. The beneficiary must require daily skilled nursing or rehabilitation; and
4. The care needed by the patient must, as a practical matter, only be available in a SNF on an inpatient basis; and
5. The SNF must be a Medicare-certified provider.

You can contact the Senior LinkAge Line® if you would like more information about eligibility for Medicare skilled care. The Senior LinkAge Line®: A One Stop Shop for Minnesota Seniors is a free statewide service of the Minnesota Board on Aging and Area Agencies on Aging. Specialists provide one-to-one assistance with helping older adults age well and live well. The Senior LinkAge Line® is the federally-designated State Health Insurance Assistance Program (SHIP) for Minnesota and is the place to call for Medicare and health insurance issues. Call 1-800-333-2433 for assistance Monday through Friday from 8:00am to 4:30pm. ■

Save the Date!



Naomi Feil

The Chesley Center on Aging is excited to announce Naomi Feil, an internationally known speaker, will be coming to Mankato September 4, 2014. Naomi is the founder of the

Validation Training Institute, Inc. and developer of Validation Therapy for use with persons suffering from dementia. Caregivers will learn the tools they need to provide care to people with dementia through validation, dignity and respect.

This day long event will be held at the Verizon Wireless Civic Center, Mankato. Visit www.mnsu.edu/chesleycenter/ for additional information.



**We make a living
by what we get,
we make a life
by what we give.**

Winston Churchill

Girlfriendology.com

50+ LifeStyle Expo

at Verizon Wireless Center, Mankato

Tuesday, May 13

1:00 - 7:00 PM

Keynote Speaker, Joan Steffend,
HGTV Host and author.

**This event is FREE and open to
the public!**

Our Staff

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Mankato, MN 56002-3323

Ph: 507.389.8879 • Fx: 507.387.7105 • Hrs: 8 AM - 4:30 PM, M-F

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Return Service Request

Your Opinion Matters!

Please share your feedback with us. If you would like to read about specific topics in future

MnRAAA News or to request **MnRAAA** News by email, contact us at:

erica@rmdc.org or 507.389.8879



Our Board

- | | | | |
|--|--|----------------------------------|---|
| •DuWayne Underthun, <i>Chair</i>
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Mankato | •Rosie Rogers
Worthington |
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