



Minnesota River Area Agency on Aging®, Inc.

MnRAAA NEWS

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Mark Your Calendars:

- September 7 - Labor Day Office Closed
- October 15 - Open Enrollment Start Date

The Older Americans Act: Aging Well Since 1965

The 1960s were a time of social and political change. In July 1965, President Lyndon Johnson signed three landmark pieces of legislation that together have shaped the lives of generations of American elders – Medicare, Medicaid, and the Older Americans Act (OAA). Medicare and Medicaid extended health insurance coverage to millions of Americans. The OAA created the foundation for a system of services and supports that enables millions of older adults to continue to live independently as they age. A vision was outlined for maintaining older Americans' dignity and sustaining their connections to their homes and communities – principles that continue to guide OAA programs to this day.



Today, OAA-funded programs play a vital role in helping to maintain the health and well-being of millions of older adults age 60 and older. In fact, OAA services reach one in five older adults. As a result of successive amendments to the original law, special emphasis is placed on serving the most vulnerable among the older population – people with low income, members of minority groups, those at risk for institutionalization, people living in rural areas and those with limited English proficiency.

Over the years, Congress has amended the Act several times, creating the infrastructure we now know as the national aging services network. At present, the network consists of 56 state units on aging, over 600 area agencies on aging and over 260 tribal organizations representing more than 400 tribes. Further, the network is supported by tens of thousands of service providers and volunteers. This system allows state, tribal and local entities the flexibility to provide the evidence-based interventions that best meet the needs of their specific communities.

The Older Americans Act clearly affirms our Nation's sense of responsibility toward the well-being of all of our older citizens. But even more, the results of this act will help us to expand our opportunities for enriching the lives of all of our citizens in this country, now and in the years to come. - President Lyndon B. Johnson

Visit www.acl.gov/oa50 for more information.

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.

White House Conference on Aging Listening Session

On June 3, MnRAAA sponsored a White House Conference on Aging Listening Session at the Redwood Area Community Center in Redwood Falls. Approximately 40 participants developed recommendations on issues related to elder justice, healthy aging, long-term services and supports and retirement security. These recommendations were forwarded to the Minnesota Board on Aging and incorporated into recommendations from nearly 450 other Minnesotans. Minnesota's recommendations were sent to the 2015 White House Conference on Aging. The White House has held a conference on aging each decade since the 1960's to identify and advance actions to improve the quality of life of older Americans.

To download a copy of the recommendations from MnRAAA's White House Conference on Aging Listening Session visit www.mnraaa.org.



Title III Spotlight Services: VINE's Helping Hands Outreach to Elders from Diverse Cultures

The mission of VINE Faith in Action is to promote quality of life and a culture of caring, sustained by volunteerism, community engagement and support for neighbors in need. In order to accomplish this mission, VINE provides a broad spectrum of services including caregiver support, chores, meals on wheels, transportation and many more.

During VINE's 20-year history, they have been awarded Title III grant awards from MnRAAA and from the Region Nine Area Agency on Aging (predecessor to MnRAAA) for several projects providing services to older adults. Most recently, VINE applied for and was awarded Title III-B Supportive Service funds to provide Special Access services in Blue Earth, Le Sueur and Nicollet Counties.

Special Access services are specifically targeted to older persons who are from diverse cultures and may be limited- or non-English speaking. The services link elders to community and government services that are not easily accessible due to language and/or cultural barriers.

VINE's Helping Hands Outreach to Elders from Diverse Cultures will provide racially diverse elders and their caregivers with culturally competent services such as information and referral, advocacy, outreach, phone contact, escort, translation, forms assistance and service coordination.

"Understanding the special needs of culturally and racially diverse elders has always been a priority at VINE," stated Executive Director Pam Determan. "We anticipate that VINE's Adult Community Center will become a melting pot of cultures that will enrich the lives of everyone involved."



To learn more about VINE's Helping Hands Outreach to Elders from Diverse Cultures or to become involved in this or any of VINE's other programs and services call 507.387.1666 or visit www.vinevolunteers.com.

Fact Sheet: The White House Conference on Aging

The White House Conference on Aging was held in Washington, D.C. on July 13. The national event included remarks from President Obama and panel discussions on five topics: Caregiving, Financial Security, Healthy Aging, Elder Justice and Technology.

The White House Conference on Aging represents an important step in working to ensure that Americans throughout the lifespan have the opportunity to learn and develop skills, engage in productive work, make choices about their daily lives, and participate fully in community life. In addition, the Conference is designed to assist the public and private sectors to be responsive to the

needs of a diverse aging population and to promote the dignity and independence of and expand opportunities for current and future generations of older persons and their families.

- Nora Super, *Executive Director*
White House Conference on Aging

Check out some of the highlights from the White House Conference on Aging on their blog at: www.whitehouseconferenceonaging.gov/blog/

Read the White House Conference on Aging Fact sheet for the key deliverables from this year's event at: www.1.usa.gov/1UUmqPw

Joyce's Story is Going to Washington D.C.

On July 30, 1965, President Lyndon B. Johnson signed into law legislation that started the Medicare and Medicaid programs. In honor of this anniversary, the Minnesota Board on Aging asked Minnesota Medicare beneficiaries to submit stories on how Medicare and/or Medicaid coverage has impacted their life. Stories were collected and sent to the Center for Medicare and Medicaid Services (CMS) for review.

We are proud to inform you that one of our MnRAAA volunteers, Joyce Borneke, had her story chosen to be highlighted. Joyce's story and photo will hang in the Great Hall in Washington D.C. later this month. Thank you Joyce for all you do to help Medicare beneficiaries in Minnesota! - MnRAAA Staff

Medicare is something that makes life easier and less stressful when dealing with medical issues. The first time that I needed treatment for cancer, my primary insurance was through my employer group health plan and the secondary insurance was Medicare. Mayo Hospital was out of network for my employer group health plan; which meant that out of pocket expenses were high. I was employed at that time and was able to earn enough money to cover those expenses.



Last year, 2014, the cancer returned with a vengeance. Medicare was my primary insurance and I had a Medicare supplemental policy. I did not have to be concerned about the Mayo Hospital in Rochester and Mankato being out of network. Having a life threatening diagnoses creates enough stress without being worried about how you are going to pay the extra out-of-pocket expenses. I am no longer employed and have no way to earn money. Knowing I would not have extra expenses helped to reduce my stress.

Medicare Part D has been even better for me. I did my research on the Medicare's Plan Finder tool. I entered the names of my medications and dosage amounts, along with the pharmacies closest to where I live. The program did the calculations and recommended which insurance companies would offer the best coverage for me. It also informed me as to which tier each prescription would be for each plan. The Plan Finder also recommended which pharmacy would provide the lowest cost with each plan.

Medicare has saved me many sleepless nights, helped eliminate high-blood pressure and other stress factors.

- Joyce Borneke



HAPPY 50th ANNIVERSARY - This July, MnRAAA Board members celebrated the 50th Anniversary of the Older Americans Act, Medicare and Medicaid.

Board members present for the event (from left to right): Mary Perry, Marvin Tinklenberg, Lisa Lange, Tom Loveall, Maureen Melgaard-Schneider, Rose Schlieman, Phil Schafer, Amy Wilde, DuWayne Underthun and Bob Roesler.

Recognition of The Return to Community Initiative

The Return to Community Initiative was chosen as one of the top three award winners for the Minnesota State Government Innovation Award. The award is sponsored by the Humphrey School of Public Affairs at the University of Minnesota and recognizes state government entities in innovation and service redesign.

To learn more about The Return to Community Initiative, visit dhs.state.mn.us.

Minnesota Adult Abuse Reporting Center

exploitation neglect financial verbal emotional abuse physical sexual

Minnesota has a new central system
for reporting suspected maltreatment of
vulnerable adults

- State-wide common entry point available 24/7
- 844-880-1574 is the toll-free phone number for the general public
- Website access for mandated reporters is mn.gov/dhs/reportadultabuse/

Effective July 1, 2015



Minnesota Department of **Human Services**

For more information go to mn.gov/dhs/adult-protection/

DHS-5722B-ENG 5-15

THE OLDER AMERICANS ACT: AGING WELL SINCE 1965

1960: 16.6 Million Older Adults Living in the U.S.

1961



1st White House Conference on Aging held in Washington, DC Led to key legislation, including the OAA

1965

OLDER AMERICANS ACT (OAA) ENACTED

Administration on Aging and state agencies on aging created

1970: 20.1 Million Older Adults Living in the U.S.

1972



Enacted: Congregate Nutrition Program

1973



Enacted: Area Agencies on Aging, Multi-purpose Senior Centers, and Community Service Employment Program

1978 New Requirement: Long-term Care (LTC) Ombudsman Services

Enacted: Home-delivered Nutrition Program



Enacted: Services for Native Americans Program



1980: 25.5 Million Older Adults Living in the U.S.

1987



Enacted: Disease Prevention, Health Promotion, and Elder Abuse Prevention Activities


1987



LTC Ombudsman Program received separate authorization of funds

1990: 31.2 Million Older Adults Living in the U.S.

1992



Separate authority for elder rights activities bringing together LTC Ombudsman; prevention of abuse, neglect, and exploitation; and state legal assistance development programs

1993

Commissioner on Aging elevated to Assistant Secretary for Aging

2000: 35 Million Older Adults Living in the U.S.

2000



Enacted: National Family Caregiver Support Program

2006



Enacted:

- Home and Community-Based LTC Development Activities
- Evidence-based Disease Prevention and Health Promotion Services

Authority to implement Aging and Disability Resource Centers in all states

2015: 47.8 Million Older Adults Living in the U.S.*

Learn more at <http://acl.gov/>



*2014 Census Projections for Americans 65+

Connect with MnRAAA

Do you use Facebook, Twitter or Pinterest? Connect with MNRAAA on social media for the latest events, news and opportunities for older adults, their caregivers and service providers.



Like us on Facebook:
www.facebook.com/MNRAAA27



Follow us on Twitter:
www.twitter.com/MNRAAA

We're now on Pinterest!



Find useful infographics and links to articles on topics such as:

- Fraud Prevention
- Safety
- Volunteers
- Elder Justice
- Caregiving
- Long-Term Services
- Retirement Security
- Healthy Aging
- Older Americans Act
- Dementia & Amnesia

Follow us or our boards on Pinterest:
www.pinterest.com/mnraaa

You can find this infographic (and others) on our Pinterest page!

Minnesota Area Agencies on Aging Receive Aging Innovations Award

On July 12, 2015, Minnesota Association of Area Agencies on Aging (m4a) received an Aging Innovations Award from the National Association of Area Agencies on Aging. The award commends m4a for their partner role in developing the ACT on Alzheimer's initiative and providing technical assistance and support to communities statewide—helping them assess, analyze and work to achieve community goals for becoming dementia friendly.

ACT on Alzheimer's



ACT on Alzheimer's is a volunteer-driven collaboration bringing Minnesotans together to create supportive environments for everyone touched by Alzheimer's disease and prepare Minnesota for its impacts.

As a statewide collaboration, ACT on Alzheimer's fosters collective ownership and accountability in preparing Minnesota for the personal, social and budgetary impacts of Alzheimer's disease and related dementias. The collaboration has more than 400 participants, including 60+ nonprofit, governmental and private organizations and works toward five goals while fostering a health equity perspective:

- Identify and invest in promising approaches that reduce costs and improve care.
- Increase detection of Alzheimer's disease and improve ongoing care and support.
- Sustain caregivers by offering them information, resources and in-person support.

- Equip communities to be "dementia capable" to support residents who are touched by Alzheimer's disease.
- Raise awareness and reduce stigma by engaging communities.

Community by community, as awareness of Alzheimer's grows, we can take action to create dementia-friendly environments. Creating an informed, safe and respectful community for people with dementia includes:

- Raising awareness and transforming attitudes about Alzheimer's Disease.
- Supporting caregivers and families.
- Being inclusive of diverse communities.
- Promoting meaningful participation in community life.
- Having supportive options that foster quality of life at home and work-life balance at work.

To learn more about how Mankato, North Mankato, Marshall, Redwood Falls and Willmar are becoming Dementia Friendly Communities, visit the ACT on Alzheimer's website at:

www.actonalz.org/minnesota-communities

The Launch of Dementia Friendly America

Minnesota's ACT on Alzheimer's has inspired a national project—the Dementia Friendly America initiative! The initiative was announced at the White House Conference on Aging on July 13, 2015.

Families and communities in every city, town and rural area in the U.S. are feeling the impact of Alzheimer's disease and other dementias. Over five million Americans—one in eight age 65 and older and one in three age 85 and older—is living with dementia. They are supported by 15.5 million family members and friends.

Building on the ACT on Alzheimer's community engagement model employed throughout Minnesota, the Dementia Friendly America initiative is fostering dementia friendliness in communities across the country. The initiative will be deployed through web-based resources and technical assistance.

Visit www.dfamerica.org for more information.



Medicare Basic Steps

Step 1:

Initial Medicare Enrollment Period

- 7 months (3 months before your 65th birthday, the month of your birthday and the 3 months after)
- Automatic enrollment if you are receiving Social Security or Railroad Retirement benefits
- If you are not already receiving benefits, you must contact Social Security to enroll

Step 2:

Choose Type of Medicare Coverage

- Cost – What can you afford to spend
- Coverage – How comprehensive is the coverage
- Convenience – Can you use your current medical providers

Step 3:

Choose Prescription Drug Coverage

- Coverage is optional
- If you have other creditable coverage, you do not need to enroll
- Penalties could apply for delayed enrollment without creditable coverage

Step 4:

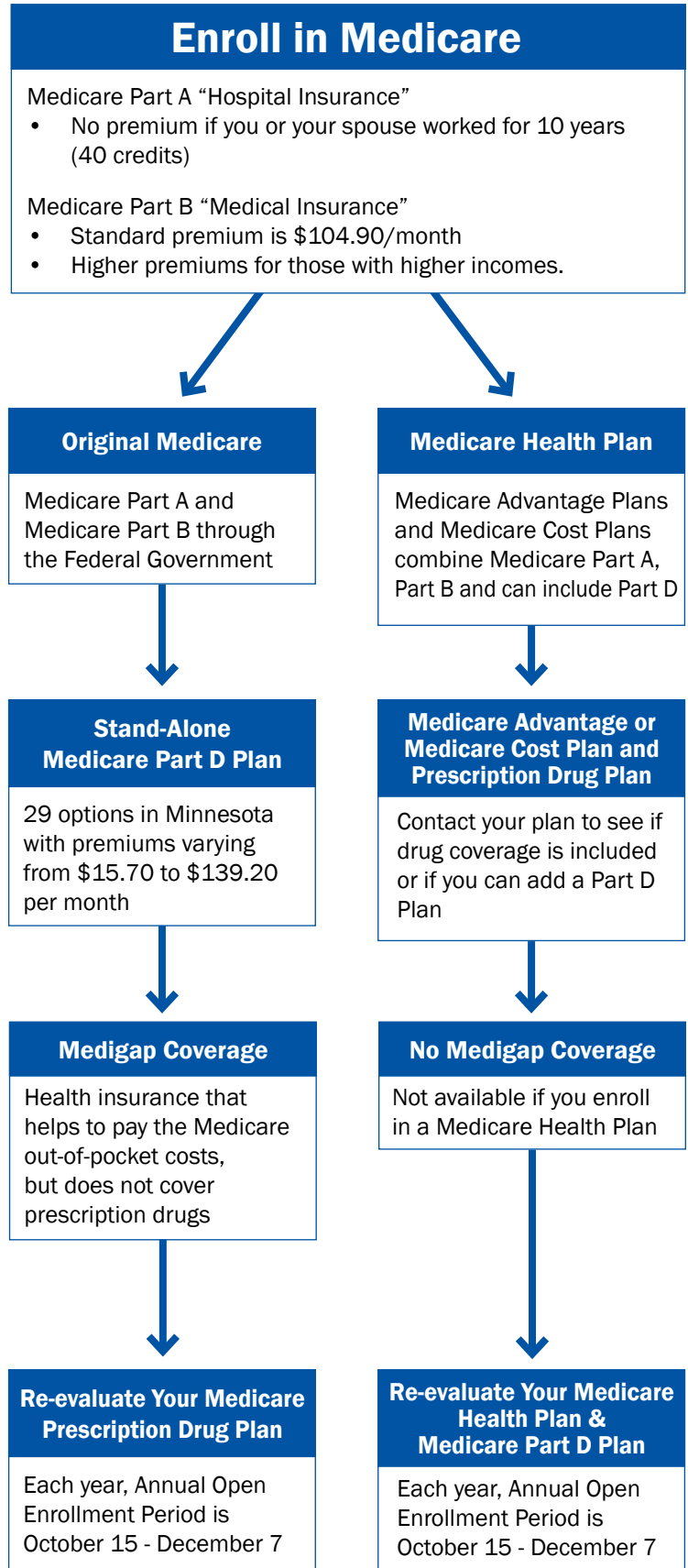
Adding Supplement Insurance

- Optional (Original Medicare only)
- Provided through a private company, employer plan or retiree plan
- Enroll during your Medigap Open Enrollment Period to guarantee eligibility (6 months – starts the month you enroll in Medicare Part B)

Step 5:

Annual Review of Medicare Health Plan and Part D plan

- Go to www.medicare.gov to review the Medicare Plan Finder Tool
- Call 1-800-Medicare (1-800-633-42273)
- Call the Senior LinkAge Line[®] at 1-800-333-2433



Caregiver Corner

Caregivers and Depression

Caring for an aging parent, ill spouse, child, partner or friend does not cause depression, however the physical and emotional demands of caring for another person can strain even the most capable person. In fact, family caregivers are twice as likely to suffer from depression as are non-caregivers. Caregivers experience a variety of emotions from joy, happiness, healing, frustration, anger or guilt. Could the sadness, exhaustion or anger you feel today be a warning sign of depression?

Everyone has negative feelings that come and go over time, but when these feelings become more intense and leave caregivers totally drained of energy, crying frequently or easily angered by their loved one or other people, it may well be a warning sign of depression. Depression is often an indication that something is out of balance.

People experience depression in different ways. Some may feel a low mood and sadness for months, while others suffer a more sudden and intense negative change in their outlook and anger. The symptoms vary by individual and can change over time.

- Have you felt down, depressed, chronically angry, or hopeless?
- Do you have little interest or pleasure in doing things you used to enjoy?

If you answered “yes” to these questions and have been feeling sad for more than two weeks, you may be suffering from a real medical condition. Talk to your doctor today.

Early attention to symptoms of depression through

exercise, a healthy diet, positive support of family and friends, or consultation with a trained health or mental health professional may help to prevent the development of a more serious depression over time.

Following are recommendations for dealing with depression:

- Set realistic goals in light of the depression and assume a reasonable amount of responsibility.
- Break large tasks into small ones, set some priorities, and do what you can as you can.
- Try to be with other people and to confide in someone; it is usually better than being alone.
- Participate in activities that may make you feel better, such as mild exercise, going to a movie or ballgame, or attending a religious, social or community event.
- Expect your mood to improve gradually, not immediately. Feeling better takes time.
- It is advisable to postpone important decisions until the depression has lifted. Before deciding to make a significant transition — career change, living arrangements — discuss it with others who know you well and have a more objective view of your situation.
- People rarely “snap out of” a depression. But they can feel a little better day-by-day.
- Remember, positive thinking will replace the negative thinking that is part of the depression. The negative thinking will be reduced as your depression responds to treatment.
- Let your family and friends help you.

If you would like more information on “Caregivers and Depression”, please contact the Senior LinkAge Line® at 1.800.333.2433.



A One Stop Shop for Minnesota Seniors

Become a “Community for a Lifetime”

Minnesota’s population is aging. By 2020 there will be more people over 60 than children in school. By 2030, one in four people will be over the age of 65. This phenomenon is commonly characterized as “The Age Wave” because the population not only ages, but also lives longer.

Communities throughout Minnesota can prepare for this demographic shift through intentional planning initiatives referred to as “communities for a lifetime.” Cities and their local leaders are critical in setting a vision for age-

friendly communities and creating effective policies, planning initiatives and citizen engagement opportunities. Municipalities are uniquely positioned to influence a wide spectrum of community domains such as: Public Safety; Government; Parks & Rec; Planning; and Development.

MNRAAA staff are available to help you learn about the significant and unique challenges and opportunities of an aging population.

Volunteers Needed.

What are the time commitments?

You can volunteer by committing as little as four hours per month.

Where will I volunteer?

You can serve in your own community or at your local MNRAAA office in Mankato, Slayton or Montevideo. There are many opportunities available throughout our service area in southwest Minnesota.

What are some examples of volunteer opportunities?

- Health insurance counseling
- Community outreach
- Basic computer skills instruction
- Office assistance
- In-person forms assistance

What kind of training is provided?

Volunteers receive education and up-to-date information about Medicare, social service programs and ways to help themselves, their family and members of their community to age in place.

How does volunteering benefit me?

Research has shown the older Americans who volunteer frequently live longer and report fewer disabilities.*

Volunteering provides physical, social and mental activity, but above all, it can provide a sense of purpose. The safety and health benefits of volunteerism reach beyond the individual volunteers.

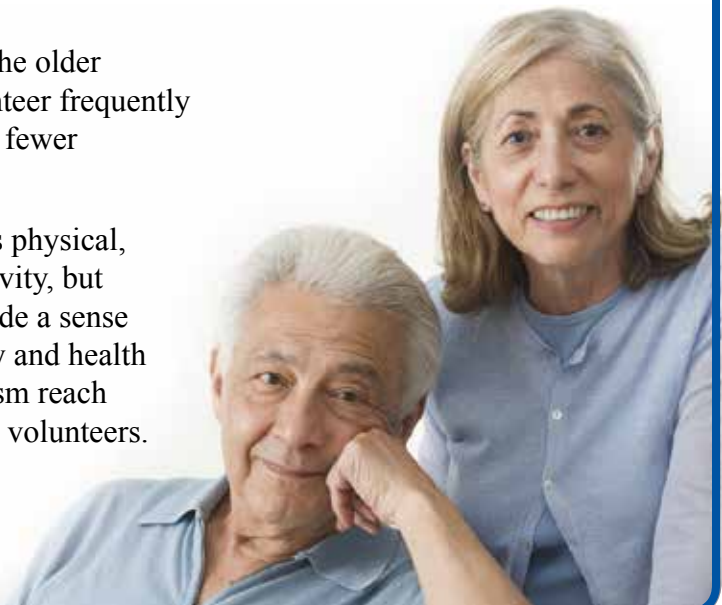
How do I get involved?

Please contact our volunteer coordinator, Sarah Reiman at 1.800.333.2433 ext. 82026 or email: sarahr@rncd.org

You can also find more information about volunteering on our website:

mnraaa.org/volunteer-opportunities

*<http://1.usa.gov/U7LLLc>



Staff Announcements

Paula Traphagen-Bossert joined MnRAAA in April as a Pre-Admission Screening Specialist working in the Mankato office. She had previously worked as a County Case Manager and a Contracted Case Manager for persons with developmental disabilities. Paula lives in Skyline with her husband Curt and has two adult sons, Shane and Devin.

Sara Tackett joined MnRAAA in April as a Pre-Admission Screening Specialist. Sara graduated with honors from the University of Wisconsin-Platteville with a B.S. in Psychology. She is on the Nursing Assistant Registry and has worked in the hospital, home care and Intermediate Care Facility settings. Sara also served in AmeriCorps as a counselor for people with disabilities. She volunteered at Family Advocates, a shelter for women and children, and at Orion Group Home, a facility for juvenile delinquent males. She lives in Madison Lake with her husband, Thor, and son, Hans. Sara works in the Mankato office.

Brenda Roemhildt joined MnRAAA in April as a Return to Community Specialist in the Mankato office. Before joining the agency, Brenda worked for several nonprofit organizations: Open Door Health Center as the Quality Improvement Coordinator, Partners for Affordable Housing as the Executive Director and CFO and Minnesota Valley Action Council as a Housing Program Specialist. Brenda served on several boards in the Mankato area and is active at the VINE Adult Community Center. Brenda lives in the Mankato area with her husband Kevin and has three daughters.

Kim Madsen joined MnRAAA in May as the Lead Program Developer and is serving the Willmar area. She has a Master's Degree in Adult Education, and for the past

year and a half worked as a Health and Wellness Advisor for Thrifty White Pharmacy, covering the southern half of Minnesota and all of Iowa. Prior to that, Kim worked for the American Cancer Society as a Community Relations Manager for nine years. Kim lives in Willmar with her husband Shawn, and their three boys: Zak, Mason and Tyler.

Heather Kirchner, based out of the Slayton office, joined MnRAAA in May as an Information & Assistance Specialist for the Senior LinkAge Line®. Heather has worked in the community services field for the past 14 years. Heather has experience working with various populations, including children and families, adult mental health, developmental disabilities, and minority populations. She also has experience in organizational and facility management in community service sectors. Heather lives in Dundee with her husband Philip and three children, Tyler, Mason and Brie.



A special congratulations to Denae Forstner who recently celebrated her wedding to husband Jeff in May in New Ulm AND passed her Licensured Social Worker (LSW) test in June!

Take Control

Take control of your life by staying fit and active. Live Well with Chronic Conditions and Matter of Balance classes are available in your area. For more information about these programs, contact Gail Gilman-Waldner, Program Development and Coordination at 507.389.8869 or via email ggwaldner@rncd.org.



Live Well with Chronic Conditions:
www.mnraaa.org/training-opportunities/cdsmtp/



Matter of Balance:
www.mnraaa.org/training-opportunities/matter-of-balance/

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Minnesota River Area Agency on Aging®, Inc.

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Return Service Requested

Your Opinion Matters!

Please share you 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@rndc.org or 507.389.8879.

Older Americans Act Trivia

1. The aging network serves an average of how many people per year?
 a) 500,000 b) 1 million c) 11 million d) 7 million
2. Between 2008 and 2012, the aging network served how many meals?
 a) 1.5 million b) 18 million c) 1 billion d) 55 million
3. Between 2008 and 2012, the aging network provided how many rides to doctors' offices, grocery stores, and other essential places?
 a) 50 million b) 75 million c) 2 billion d) 130 million
4. According to 2014 Census Projections for Americans 65+, how many people age 65+ are currently living in the U.S.?
 a) 20.1 million b) 25.5 million c) 47.8 million d) 31.2 million

Answers: 1. c., 2. c., 3. d., 4. c.

Our Board

Bob Roesler, <i>Chair</i>	Sherburn	Lisa Lange.....	Sherburn
Marvin Tinklenberg, <i>Vice Chair</i>	Edgerton	Mary Perry	Slayton
Maureen Melgaard-Schneider, <i>Secretary</i>	Atwater	Phil Schafer	Sherburn
Amy Wilde, <i>Treasurer</i>	Dassel	Tom Loveall	Winnebago
DuWayne Underthun.....	Willmar	Steve Rohlffing, <i>Alternate</i>	Madison Lake
Rose Schlieman.....	Holloway		