



Resourceful Thinking

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ANNUAL ENROLLMENT PERIOD FOR PART D & FREE PROGRAM; HOSPITAL CARE – SOME IMPORTANT INFORMATION

OPEN ENROLLMENT PERIOD

It's time to check into your Part D product and determine if this is still the best one for your prescription needs! Open Enrollment began on October 15 and runs through December 7 with coverage beginning on January 1. "Medicare and You 2015" should be coming off the presses and into your mailboxes now.

The US Department of Health & Human Services' CMS office tells us that specific to WV in 2015:

- 100% of people with Medicare have access to a Medicare Advantage plan
- 25 Medicare Advantage plans available
- 29 Medicare Prescription Drug Plans available
- 100% of people with Part D have access to a plan with lower premium than what they paid in 2014
- 36% of people with Medicare Part D get Extra Help (also called the low-income subsidy, or LIS)
- \$15.70 is the lowest monthly premium for a prescription drug plan.

Beneficiaries can go to www.medicare.gov to compare plans. Read your current plan's Evidence of Coverage to check on your meds. Have tier levels changed? Have drugs been added or dropped to your plan? What is your new premium? Have copays changed? What about the deductible? Have your needs changed? Have your meds changed? Can any meds be changed to a lower cost generic? The product you had last year may not meet your needs this year. The product that someone else has may not be a good match for your needs. Explore your options! Shop for the best fit for you! Are you eligible for extra help? Many people are eligible but do not apply. The Part D benefit provides financial assistance known as Extra Help to those with limited income and assets. If you are eligible for Extra Help, your Part D premiums, deductibles and copayments can be eliminated or significantly reduced. All states have SHIP programs which help beneficiaries with Medicare

questions, assist with plan comparisons, assist with Extra Help information, and provide important Medicare information. Call us for information on a SHIP office in your area!

PART D PROGRAMS!

We will offer four free programs on Part D products in November.

Janis Potts of the Health Plan will tell us about the Health Plan's Medicare Advantage products on November 3 and November 10. The programs will run from 1 pm – 2 pm with sign in starting at 12:30 pm.

On November 4 and November 18, John Forsyth of Citywide Insurance will be presenting informational programs on Part D products and Medicare Advantage products. Sign in will start at 12:45 pm and the programs will run from 1:15 pm-3:15 pm. You may attend either program.

All four programs will be in Fellowship Hall at First Christian Church (Disciples

of Christ), 1343 National Road, Wheeling WV. (An elevator is available.)

Call us at 304 243-0996 to reserve a seat for any of the four presentations.

PROGRAM on WEALTH MANAGEMENT

As a compliment to September's Estate Planning program, we are working on informational programs on wealth management. Our first offering will be a general program on Wealth Management: What is wealth management? What are planning options? Do I have enough wealth to manage? What do the terms mean? How do the laws affect me? Walker Holloway and Pete Holloway of Hazlett, Burt & Watson will be offering this free program that is open to the public. We will be at First Christian Church (DOC), Fellowship Hall (downstairs), 1343 National Road, Wheeling WV on November 19, 2014. Sign in will begin at 12:30 and the program will run from 1:00 pm – 2:00 pm. There will be a question and answer period. Call us at 304 243-0996 to reserve your seat!

***We hope to offer a few other programs on wealth management as we move into 2015. Keep an eye out for information on dates and times!

HOSPITAL CARE - WHAT YOU NEED TO KNOW

The more complicated healthcare and the system

become, the more important it is to be your own best health care advocate! When you go to registration, they ask about MRSA, C-dif, VRE and other 'bugs'. We hear about people being in the hospital under an 'obs' or 'observational' status. What does this mean? **BE INFORMED!** Here are some of the terms and what they mean:

MRSA - What Is MRSA?

Methicillin-resistant Staphylococcus aureus (MRSA) is a bacterium that causes infections in different parts of the body. It's tougher to treat than most strains of staphylococcus aureus -- or staph -- because it's resistant to some commonly used antibiotics. The symptoms of MRSA depend on where you're infected. Most often, it causes mild infections on the skin, like sores or boils. But it can also cause more serious skin infections or infect surgical wounds, the bloodstream, the lungs, or the urinary tract. Though most MRSA infections aren't serious, some can be life-threatening. Many public health experts are alarmed by the spread of tough strains of MRSA. Because it's hard to treat, MRSA is sometimes called a "super bug."

[Source: www.webmd.com]

C-DIF – What is C-dif?

Clostridium difficile is a bacterium that causes inflammation of the colon, known as colitis. People who have other illnesses or conditions requiring prolonged use of antibiotics, and the elderly, are at greater risk of

acquiring this disease. The bacteria are found in the feces. People can become infected if they touch items or surfaces that are contaminated with feces and then touch their mouth or mucous membranes. Healthcare workers can spread the bacteria to patients or contaminate surfaces through hand contact.

[Source: www.cdc.gov]

VRE – What is VRE?

Vancomycin-resistant enterococci (VRE) are a type of bacteria called enterococci that have developed resistance to many antibiotics, especially vancomycin. Enterococci bacteria live in our intestines and on our skin, usually without causing problems. But if they become resistant to antibiotics, they can cause serious infections, especially in people who are ill or weak. These infections can occur anywhere in the body. Some common sites include the intestines, the urinary tract, and wounds.

Vancomycin-resistant enterococci infections are treated with antibiotics, which are the types of medicines normally used to kill bacteria. VRE infections are more difficult to treat than other infections with enterococci, because fewer antibiotics can kill the bacteria.

VRE, like many bacteria, can be spread from one person to another through casual contact or through contaminated objects. Most often, VRE infections are spread from the hands of health care workers to a patient in a facility. VRE infections are not usually

spread through the air like the common cold or flu virus unless you have VRE pneumonia and are coughing, which is rare. If you are healthy, your chances of getting a VRE infection are very low. VRE infections typically only occur among people who have weakened immune systems, such as people who have long-term illnesses or people who have had major surgery or other medical procedures and have been treated with multiple antibiotics. Experts do not know exactly why some people become infected with VRE and others do not. But they do know that VRE infections are more likely to develop when antibiotics such as vancomycin are used often. If you take antibiotics when you do not need them, they may not work when you do need them. Each time you take antibiotics, you are more likely to have some bacteria that the medicine does not kill. These bacteria can change (mutate) so they are harder to kill. Then, the antibiotics that used to kill them no longer work. These bacteria are called antibiotic-resistant bacteria.

[Source: www.webmd.com]

OBSERVATIONAL STATUS – What is Observational Status?

Did you know that even if you stay in a hospital overnight, you might still be considered an “outpatient?” Your hospital status (whether the hospital considers you an “inpatient” or “outpatient”) affects how much you pay for hospital services (like X-rays, drugs, and lab tests)

and may also affect whether Medicare will cover care you get in a skilled nursing facility (SNF) following your hospital stay. You’re an inpatient starting when you’re formally admitted to a hospital with a doctor’s order. The day before you’re discharged is your last inpatient day. You’re an outpatient if you’re getting emergency department services, observation services, outpatient surgery, lab tests, X-rays, or any other hospital services, and the doctor hasn’t written an order to admit you to a hospital as an inpatient. In these cases, you’re an outpatient even if you spend the night at the hospital.

Note: Observation services are hospital outpatient services given to help the doctor decide if the patient needs to be admitted as an inpatient or can be discharged. Observation services may be given in the emergency department or another area of the hospital.

The decision for inpatient hospital admission is a complex medical decision based on your doctor’s judgment and your need for medically necessary hospital care. An inpatient admission is generally appropriate when you’re expected to need 2 or more midnights of medically necessary hospital care, but your doctor must order such admission and the hospital must formally admit you in order for you to become an inpatient.

[Source: www.medicare.gov]

COST OF CARING

A new survey from Caring.com examined the financial toll of caregiving on family caregivers. Among its findings, nearly half (46 percent) of family caregivers spent more than \$5,000 per year for their loved ones’ care, including medications, medical bills, in-home care, and nursing homes. In addition to the monetary toll, caregiving affects their daily lives and responsibilities. About one-third of people surveyed spend more than 30 hours per week on caregiving, rendering it almost a full-time job in and of itself. Fifteen percent believe they may need to leave the workforce due to caregiving, and nearly two-thirds (60 percent) say that caregiving has had a negative effect on their jobs. The majority of survey participants were women in their 50s and 60s.

[Source: Alzheimer’s Foundation of America, www.caring.com]

HOLIDAY HOURS

Alzheimer Resource & Referral Services offices will be closed on the following dates:

Thursday, November 27

Friday, November 28

Thursday, December 25

Friday, December 26

Thursday, January 1

Friday, January 2

Let us be your Gateway to Senior Care!

Call us with your aging & caregiving questions!