

Fall, 2005

# Amazing Aging!

## For Seniors and Those Who Love Them



*Jayhawk Area Agency on Aging, Inc.*  
**THE Agency On Aging**  
*For Shawnee, Jefferson and Douglas Counties*

### Our Mission

Jayhawk Area Agency on Aging, Inc., advocates on aging issues, builds community partnerships and implements programs within Shawnee, Jefferson, and Douglas counties to help seniors live independent and dignified lives.

- Is a 501 (C)3 non-profit organization
- Is funded by tax-deductible contributions, federal funds, under state general funds and funds through local governments
- Does not discriminate on the basis of race, color, sex, national origin, age, religion, or disability

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## Important Facts You Should Know Regarding The New Medicare Prescription Drug Coverage

- All people with Medicare will be able to enroll in plans that cover prescription drugs.
- You will choose a prescription drug plan and pay a premium of about \$37 a month or less depending on which plan you select.
- You will pay the first \$250 (called a "deductible").
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- You will pay 100% of the drug costs above \$2,250 until you reach \$3,600 in out-of-pocket spending.
- Medicare will pay about 95% of the costs after you have spent \$3,600.
- Some prescription drug plans may have additional options to help you pay the out-of-pocket costs.
- Extra Help is available for people with low incomes and limited assets. An application must be completed through the Topeka Social Security Administration. Call 295-0100.
- For more information contact JAAA at (785) 235-1367 or (800) 798-1366.

## Studies Endorse Area Agency Care Services

Two new studies affirm that case management and caregiving directed by Area Agencies on Aging is an effective and cost-efficient way of caring for older Kansans.

Kansas Legislative Post Audit (KLPA) examined the Medicaid waiver for the Frail and Elderly. It concluded that Area Agencies on Aging save the state money by assessing needs, developing plans of care, and arranging for in-home care supplemented by volunteer family and friends to provide in-home services.

A separate study by the University of Kansas School of Social Welfare looked at the use of Medicare home health services for skilled care, Home and Community Based Services for the Frail Elderly (HCBS-FE), the Senior Care Act (SCA), and federal Older Americans Act (OAA) services aimed at helping the elderly remain in their homes.

Case management by Area Agencies on Aging (AAA) was a focus of the University of Kansas study. KU researchers urge public information campaigns to help establish AAAs as the “single point of entry” for community-based options, information and referral. Researchers say this would reduce confusion and uncertainty among family members well before the need arises for long-term care services.

On average, it costs state taxpayers nearly \$2,500 each month for every Medicaid customer in a nursing facility, according to the Department on Aging. Nursing facility care is an entitlement under Medicaid. A customer with similar care needs could be kept in their residence with Medicaid HCBS-FE for less than \$900 per month.

The Frail Elderly waiver is the third largest waiver program in Kansas. In fiscal year 2004, about \$45.6 million was spent on community services for the 6,800 clients on the frail elderly list, according to KLPA. Ninety-six percent of that money was spent on attendant-care services, which include help with dressing, bathing, shopping, cooking and other everyday tasks.

Lawmakers have said they are likely to look at ways of controlling Medicaid costs, including services to maintain the Frail Elderly in their own homes, when the Kansas Legislature convenes in January. An interim study committee is examining evidence this month.

Case Managers from the 11 Area Agencies on Aging in Kansas visit with elders and assess their needs to determine whether an individual is functionally eligible to receive home-based services. A score of 26 or higher on the state’s Uniform Assessment Instrument makes a person functionally eligible.

After this eligibility is determined, the case manager develops a “Plan of Care” that specifies which services are needed, and who will provide them. Paperwork is forwarded to the Department of Social Rehabilitation Services (SRS) which determines whether the person’s income and assets are low enough to qualify for Medicaid, and if so, whether a co-pay will be required.

Once someone is determined to be eligible for Medicaid-funded waiver services, he or she can choose to have attendant-care services provided by a home-health agency or can elect to self-direct, where they are responsible for hiring, training and supervising their own attendees.

In developing clients’ Plans of Care, case managers ask whether people living with the client—such as family members—can voluntarily provide services. Volunteers may include an adult child or friend who could help with some of the housework, laundry, or meals.

The KU study identified 599 older Kansans who had applied for potential placement in a nursing facility. An Area Agency on Aging staff member performed a Client Assessment, Referral and Evaluation (CARE)

*continued on page 4*

## Kansas Legal Services Column for Seniors

### Long-Term Care Insurance by Emily Haverkamp

**Question: Why should I consider long-term care insurance?**

**Answer:** While long-term care insurance is not the best solution for everyone, it is a possibility for long-term care planning that should be investigated. Nursing homes and other types of long-term care are extremely expensive, and sometimes even expansive savings and assets cannot cover the full amount of long-term care needed for family members. As with most insurance policies, one pays a premium for a benefit that may never be needed. However, when long-term care is required, long-term care insurance can provide broader choices in care.

Medicaid can provide for nursing homes for many people. However, in order to qualify the applicant must have virtually no assets remaining. If the applicant is without assets and qualifies for Medicaid, then often the only long-term care assistance available is a nursing home. This is one of the biggest advantages of long-term care insurance: the policies will often include in-home care as an option, allowing for the person to continue living with family members. This can give family members the assistance they need in caring for loved ones.

**Question: What should I look for in a long-term care plan?**

**Answer:** Below are several key components of a typical plan:

**1. Strength of the company:**

Long-term care insurance is a long-term investment. Be sure to investigate the strength of the company, as you could run into difficulties if the company you select goes out of business. Look at the contract to see what the terms are should the company no longer be in business once you need assistance.

**2. Waiting/Elimination Period:**

Most plans will have what is called either a waiting or elimination period. This is the period of time that the purchaser must wait upon requiring care before the policy pays for coverage. This period can be anywhere from one day to one year. The longer the wait period, the lower the premium for the policy is likely to be.

**3. Maximum Daily Benefit:**

This is the maximum amount that the policy will pay daily for coverage. It is best to select a plan that is equal to the current cost of daily care.

**4. Maximum Benefit Period:**

This is the maximum number of years that the policy will pay for long-term care.

**5. Covered care:**

It is important to know what types of care are covered by

the plan. Some plans may cover only nursing home care, while others may also cover in-home care and other options. It is important to know what is covered under the plan.

**6. Benefit triggers:** Different plans have different triggers that dictate when coverage begins.

Premiums for long-term care insurance become increasingly expensive the older the purchaser is. This can make it difficult for many to afford the premiums. It is important to purchase premiums that you will always be able to afford, because if you find you cannot pay the premium at a later date, the money paid toward the premium will be wasted.

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## What My Grandparents and Grandchild Mean to Me Essay Winners

Indeed, one of the few blessings of growing older is grandchildren. Who else would ask me to help catch a gecko in my backyard or plant a whirlybird in the flower garden? What better reason to scrub the kitchen floor than having baked chocolate chip cookies with my grandson? Why would anyone want to rake a huge pile of leaves in the Fall just to have them scattered all over the yard again by a diving, laughing grandchild? ... and then do it all over again? Who else crawls up in your lap with hugs and sloppy kisses and wonderful fantastic whispered secrets? My special blessings number four, all of whom I was privileged to spend the first couple of weeks with at birth. Three of these live in Virginia, but it would be lovely if they were closer. The fourth I have grown with from birth to now and that grandson is now entering middle school. I don't pretend to understand Yu-Gi-Oh but I do listen when he tries to explain it to me. Me, I love being a grandparent.

*Betty Jo McHenry*  
*Shawnee County*

My grandparents mean a lot to me. They held me the day I was born, and watched me while my mother and father were at work. They take me to school everyday. They pick me up from school when I am sick. They would do anything for me.

I love my grandparents!

*Kelsey Henning*  
*Jefferson County*

My grandparents mean a very lot to me, because they have been in my life as long as my parents have. They have been there for me since birth. I have to admit, they do give great gifts at Christmas, but sometimes things like that aren't the most important thing. My grandma is always ready to come down to my house when I'm sick, and my grandpa is always eager to teach me a few more pointers in pool.

*Olivia Marshall*  
*Douglas County*

This paper is not just about my grandparents. It is about my grandparents and me. It's about what they mean to me. What do my grandparents mean to me? It's too much to say! It would take me more than a day to write it all! Did I mention that there are too many good things about them? All I can say, is that I must be the luckiest grandchild in the world, because my grandparents have given me the best things ever! Those very important things are love and memories. Thanks Grandma & Grandpa!

My grandparents mean the world to me!. If I ever need anyone to talk to or a shoulder to lean on in times of struggle, my grandparents are always there for physical and emotional support. I think it is good to have someone in your life you can fall back on, during trials and tribulations. Who could be better for that position, than your grandparents?

Who never forgets about your birthday, all the important holidays, your graduation and all the other important events in your life? Why your grandparents, of course! Just when I'm all alone and think no one cares about me or everyone has forgotten me, my grandparents always seem to show up and brighten my day and put a BIG smile on my face! Every little thing that my grandparents do, show me that there are still good, kind-hearted people in the world.

My grandparents are very special to me and I love them with all my heart. When I was younger and growing up, my grandparents were always taking me to the park, playing games with me and buying me stuff that I wanted. Discipline goes along with all that too, I had to earn the things that I wanted. They set rules for me to obey, so I would grow up in a structured atmosphere and be prepared, for the real world and all it's hard-ships. They tried to prepare me for the joys and pains of life and I love them for that! This is what my grandparents mean to me!

*Larry R.*  
*16 yrs old*  
*Shawnee County*

## From a Client's Perspective: By Rex Ellebracht, Case Manager

August 18, 2005, Congressman Dennis Moore visited Delores Barnes, of Eudora, in her home. Case Manager Rex Ellebracht, of Jayhawk Area Agency on Aging, Inc. helped coordinate this meeting. Mr. Moore asked many questions of Delores Barnes regarding the in-home services that are provided to her through Jayhawk Area Agency on Aging.

Mr. Moore discussed issues regarding seniors and the new prescription drug program that will take effect in January 2006. Mr. Moore was given the first hand perspective on how Medicaid and Medicare affect constituents in his district.

Ms. Barnes is a senior who lives on a limited income and uses a medical card from the State

of Kansas. She receives assistance in her apartment through Trinity Respite Care to assist her completing tasks, such as housecleaning, going to the store, and assisting with visits to the doctor. Ms. Barnes stated to the Congressman, "This is a very valuable program and I do not know what I would do without it." Ms. Barnes is very concerned about the new prescription drug program that will take effect January 2006. "There is not much information out there for seniors, who are relying on this new program." said Ms. Barnes. Mr. Moore replied, "The details are still being worked out."

Mr. Moore was pleased to have been invited to speak with Delores Barnes, a senior from his district. He felt it was a good learning experiencing to get first hand knowledge of what types of things the senior population deals with on a daily basis and how his decisions effect the elderly population.●



(left to right )JAAA Case Manager, Rex Ellebracht, Congressman Dennis Moore, and JAAA Client, Delores Barnes.

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## Excerpts From As We See It Start Considering Your Drug Plan Now by William D. Novelli, AARP

If you are a Medicare beneficiary, or have a beneficiary in your family, October 1 begins an important period of decision making. You will decide whether or not to sign up for the new Medicare prescription drug coverage (known as Part D) and determine which plan best suites your needs. October 1 is when private insurers will start sending you marketing materials on drug plans that Medicare has approved.

The insurance is voluntary. If you don't want it, you don't have to enroll. But if you're already a Medicare beneficiary and do want coverage it is a good idea to sign up for it during the first enrollment period, which runs from November 15 through May 15, 2006. If you delay, you may have to pay more for it when you join at a later point (there are some exceptions, such as enrolling later after losing employer drug coverage).

There is talk about how complicated the new drug coverage is, and it's true there are some twists and turns. But it is well worth going through the information, comparing plans and making an informed decision. About two thirds of all Americans on Medicare would save money from the new benefit.

To get the coverage, you must sign up, enrollment is not automatic. The plans vary but each one must meet a minimum standard benefit determined by law.

What factors should you weigh in deciding whether or not to sign up? Cost is certainly one of them, but so is your health status. You will want to consider the amount of your current coverage- and whether you can count on it long-term.

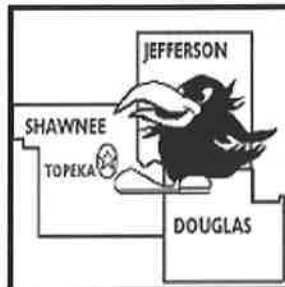
While your current needs are of course important, it's useful to think about the future, too. Like any insurance, Medicare coverage gives you protections against high costs if and when you need it. On average, people ages 75 to 79 spend 25 percent more on drugs than those 65 to 69.

If you decide to sign up, you will need to choose a plan in your area.

Deciding whether to enroll is about getting help now. But don't forget to think about what your health status and medical costs may be in the future. No one likes the thought of having to take a lot of medications-or expensive ones-but knowing that you have some protection against the high cost of those drugs can ease the burden in case you do. It's about peace of mind.

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You are encouraged to write us at  
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Diane McDermed, Editor  
Our thanks to the volunteers who helped  
assemble the newsletter



Jayhawk Area Agency on Aging does not discriminate on the basis of race, color, national origin, sex, age, or handicap. If you feel you have been discriminated against, you have a right to file a complaint with the Agency. In accordance with ADA regulations, every effort will be made to accommodate people with disabilities. If you need special assistance, please call

Jocelyn Lyons at Jayhawk Area Agency on Aging, Inc.

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