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
A Message from Susan Harris, JAAA Executive Director

This past year has been a year of change for Jayhawk Area Agency on Aging, with the retirement of our past executive director, along with changes in other staff positions. Through it all the staff and volunteers of Jayhawk have remained dedicated to our mission and the seniors we serve. I have said it before and I will continue to say that we have the greatest team of staff and volunteers any non-profit could ask for. Everyone is dedicated to making sure that we are providing top notch services to our customers.

The Medicare Open Enrollment season has ended and the 2017 enrollment period was another success. I would like to take the opportunity to thank the volunteers, staff at Jayhawk, and our community partners who worked tirelessly to help the Medicare beneficiaries in the communities we serve. During the 2017 Medicare Enrollment season, 1,806 beneficiaries were provided counseling on their Medicare Part D drug plans, Medicare Advantage Plans as well as other issues regarding Medicare coverage. That is a lot of people to help during a short 8 week time frame.

The work of a trained Medicare Counselor is not limited to the October 15 through December 7 time period.

Approximately 10,000 individuals become Medicare eligible nationally every day. A large part of the counselors’ work is done helping to counsel those individuals that are new to Medicare to help them understand the health benefits offered and provide information that will assist individuals with making informed choices about their Medicare and other health insurance coverage needs.

Jayhawk relies on volunteers to help provide this extremely beneficial service. We often receive feedback from those we have helped stating that there would be no way that they could understand the choices they are faced with making without having talked with one of our counselors. “I would have been lost without your help,” is often what we hear. As Jayhawk continues to grow this program to help meet the ever growing need for Medicare counseling, we encourage you to consider becoming a volunteer and join our team of Medicare superstars.

In this issue

One of JAAA’s goals is to educate and inform seniors and those who love them about matters they encounter as they age. This issue is devoted to providing you with important information you can use now or will need in the future.

You will find articles on the declining purchasing power of seniors who rely on Social Security and private pension plans, Kansas Spousal Impoverishment Law, Medicare Supplement Insurance (sometimes referred to as Medigap) and Operation Red File. I am also including a reprint of an article on reverse mortgages which was originally published in the Fall 2013 issue of Amazing Aging because the information therein is important for you to know.

This issue’s lead article is about a support group for parents who are estranged from or abandoned by their children … one of the life’s saddest problems. The group has facilitated the reconciliation of a few parents with their children. They hope to help many more. If you are an estranged parent or grandparent, give the group a try.

Marsha Henry Goff, Editor, Amazing Aging

Correction: In the last issue, Willard Epling was mistakenly identified as Willard Hladky in the lead article about the busy couple who co-chair Perry Senior Citizens. Though happily married, they have different last names. Correct names for each are Paula Hladky and Willard Epling. Paula says she answers to Paula Epling and Willard answers to Willard Hladky. No harm, no foul, but thought our readers should know.

Susan Harris

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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 Susan Harris at Jayhawk Area Agency on Aging, Inc.
Support group attempts to mend broken relationships between parents and their adult children

By Marsha Henry Goff

Parents of Estranged Adult Children Group was formed to assist parents who are hoping to reconnect and reconcile with their children. While that hope may never materialize for some members of the group, participation in the group has empowered and encouraged other members to take steps that have resulted in reconciliation with their children.

Jeff Landers, who started the group, reports, “One lady called and said the family got together and worked it out and she said it was all because of the group giving her ideas and the courage to confront the issue. Another lady just marched up to her daughter-in-law and they worked it out. I think the group just gives some people that little boost they need.”

Landers is the father of five children ranging in age from 17 to 40. He presently has a close relationship with four of his children, but has been estranged from his 40-year-old daughter since his divorce from her mother when their daughter was 16. While her parents have long ago moved on to new and happy relationships, the daughter remains estranged from her father in spite of his many efforts to reunite. He appears baffled by the situation, saying, “This wasn’t a knock-down divorce; we just had life changes.”

But divorce is one of the likeliest reasons for estrangement. Sometimes the custodial parent deliberately attempts to alienate the child from the other parent. They may intercept letters and gifts, causing the child to think the other parent has abandoned them. However, on occasion, without any nefarious attempt by the custodial parent, the child will simply decide to see one parent as victim, the other as villain.

In-laws are often a factor in the estrangement. Sadly, an in-law’s attempts to cut off ties to his or her spouse’s parents will frequently succeed. An even more heart-breaking problem for the abandoned parents may occur when grandchildren are involved. According to a 1991 article in the American Bar Association’s Family Law Quarterly, 75% of elderly Americans at that time were grandparents and about one million of their grandchildren experienced the divorce of their parents which often made it difficult for the grandparents to maintain a relationship with them. Those numbers have likely increased since then.

Kansas law gives grandparents a legal right to request court-ordered visitation with their grandchildren after a divorce, the death of a parent, or other child custody legal proceeding. For the court to order visits, grandparents must show they have a significant grandparent-grandchild relationship and that visitation is in the best interest of the children. Certainly, it is better for everyone if a costly and acrimonious legal battle can be avoided by a meeting leading to an agreement of the parties involved.

While Landers is open and candid about his estrangement, other group members choose to remain anonymous. One member, who is absolutely convinced that groups work, has come to terms with his child’s estrangement and feels he has gained all he can from the group, but stays involved to help others. “People come to group because they have burdens that they want to share with others and the one who carries the burden suffers the most,” he says. “So at the group they can shed their burdens and get advice and suggestions from the group for future actions.”

Landers worked for KPL/Westar Energy for 31 years and as retirement neared, he attended Washburn University so he could counsel people who had addictions. When he retired in 2009, he worked 20 hours a week for Valeo Behavioral Health Care as an addiction counselor. There he learned the importance of and positive benefits derived from groups. He left Valeo rather than accept the full-time job they offered.

So when his youngest son “left in a huff” after an argument and they did not see or speak to each other for seven months, Landers looked for a support group. Finding none on estrangement, he contacted Tina Gilbertson, a licensed professional counselor who blogs on estrangement between parents and adult children, and — with her encouragement — started his own group. He has found her handbook, Guide for Parents of Estranged Adult Children, particularly helpful in the group, as well as the writings of Ralph Marston. However, he admits that he ignored every rule in Gilbertson’s book and followed his own instincts when he poured out his heart to his son via email, “My son and I had been very close, so I wrote: ‘I’m crushed. I’m melting down. I miss you. I love you.’ And within a couple of days he was answering me, so this isn’t a one thing fits all.”

While Landers is grateful for his reconciliation with his son, he has about given up on ever reconciling with his daughter and having a relationship with his four grandchildren whom he has never met. “She’s not in my will. For 20 years, I reached out, I sent cards, letters and invites and finally I just decided if I’m in a car accident and lying there dying, I want to feel right that the kids who did acknowledge me, they’re not going to say, ‘Well, she got ....’”

Still, the hurt is obvious. He speaks of being at a parade, attended by thousands of people, and noticing his daughter and the grandchildren he had never met standing several rows behind him. “That’s not normal. The kids don’t know who I am so it wasn’t hard on them. But I wonder what the kids think when there is Grand-childGrandparent visitation.”

CONTINUED ON PAGE 11
Property tax relief is needed for Kansas seniors

By Marsha Henry Goff

On November 15, 2017, Kiplinger listed the ten most tax-friendly states for retirees and the ten least tax-friendly states. Want to know where Kansas ranked? Our state ranked in the ten least tax-friendly states, eighth from the bottom, meaning there were only seven states out of 50 that were less tax-friendly to seniors than Kansas.

In making their determination about our state's low ranking, Kiplinger notes: The state's combined state and local sales tax rate is the eighth-highest in the US. Property taxes are above average for the US, too. [While Kansas offers a Homestead rebate, given limitations, it is not helpful to many whose incomes, though low, are not low enough to qualify.]

I remember driving a visiting out-of-state cousin, who once lived with us, through the neighborhood where I grew up. "What happened to these houses?" she asked. "They used to be so well cared for and now they look shabby."

"It is because they are owner-occupied," I explained. "The owners have grown old and are no longer physically able to maintain their property and cannot afford to pay someone to do it."

That is the case in neighborhoods throughout our nation. However, in those states where senior homeowners' property taxes are capped, frozen or valuations adjusted, seniors may be able to afford to pay people to maintain their homes when they are no longer physically able to do it themselves.

In states where property tax is high and there is no relief for seniors — given their declining purchasing power for necessities — property taxes are, in many cases, confiscatory, causing seniors to lose their homes to tax sales. Others may be forced to sell and relocate to apartments, while some try to stave off the inevitable by taking out a reverse mortgage.

Kiplinger is not the only publication to note that Kansas is not tax-friendly to seniors. Money, published by Time, Inc., also ranks Kansas in that group of not tax-friendly states, writing: Property taxes tend to be especially burdensome in the least tax-friendly states.

According to the Mid-America Regional Council, serving the Kansas City area, 70 percent of seniors are spending 30 percent or more of their income on housing while 40 percent spend half; 70 percent of Medicare beneficiaries spend 10 percent of their income on medical expenses. Older, poorer seniors spend closer to 25 percent; 20 percent of those over age 65 will never be able to retire and 50 percent are one event away from being forced into economic hardship and bankruptcy.

The US Census in 2017 states that 15 percent of Kansans are 65 or older. As more Baby Boomers retire, that number is expected to double. Kansas seniors have lived productive lives. Many are veterans. All have worked hard to earn the benefits they have in Social Security and other pensions.

Kansas must do better for its seniors. A good place to start would be property tax relief which will allow them to stay in the homes they love.
What you need to know about Medicare Supplement Plans

Medicare Supplement plans allow you to control what you pay out-of-pocket for health care and medical treatment. Sometimes referred to as Medigap, these plans may be applied to expenses like co-pays, deductibles and coinsurance. You qualify for Kansas Medicare Supplement if you are 65 or older and enrolled in a Medicare Part A and B. Kansas also requires carriers to offer plans to those under 65 who are on disability.

Unlike Medicare Part D, the plan covering prescription drugs which, unless you are new to Medicare, has a set enrollment period, once you are enrolled in a supplement plan, you may change plans any time you choose. In Kansas, you have your choice of all ten Medigap plans.

The important thing to remember is that the plans offered by private insurance carriers are exactly the same (e.g., Plan F offers the same benefits regardless of carrier; the same is true for Plan N or any other supplement plan). And this is even more important to remember: the premiums may vary widely, not just between plans but for the same plan. That is why you need to compare the premium for the plan you choose with several different carriers.

While you can be denied coverage for disqualifying medical conditions, not all companies treat pre-existing conditions the same. You may still be covered by another carrier if you are rejected by one company because while a pre-existing condition can be treated as disqualifying by one carrier, it is not regarded that way by another.

You may compare plans online or, better yet, SHICK volunteers at Jayhawk Area Agency on Aging will do the comparison for you. For more information or answers to any questions you may have, please call 235-1367 in Topeka or 1-800-798-1366 outside the Topeka area.

Changes are coming to CHAMPSS

The popularity of JAAA’s CHAMPSS (Choosing Healthy Appetizing Meal Plan Solutions for Seniors) has necessitated some recent changes to the program. The suggested donation per meal has raised to $3.50 so the program can continue and grow. Also, any meals not used in a year will expire. Meals on your card as of January 1, 2018 will expire on January 1, 2019. Meals placed on your card after that will expire a year from the date ordered.

Call SHICK coordinator Michele Dillon today at 785-235-1367 to learn how you can volunteer! Or email Michele@jhawkaaa.org.
By Marsha Henry Goff

Move over those refrigerator magnets! It is time to make room for Red File, which just might save your life. Operation Red File is designed to help seniors keep their critical health information accessible in case of an emergency. First responders are trained to look for Red File — held in place by attached magnets — on refrigerators, and can use the information therein to:

• Instantly access medical history and medication records in an emergency;
• Avoid delays caused by trying to get information from a confused patient;
• Ensure that the family/responsible party will be notified quickly;
• Have a photograph available in the case of a Silver Alert.

Red File contains key medical information such as:
• A clear, recent color photograph of the participant;
• A medical form with all current medical information;
• An updated medication list;
• Medical insurance information;
• Copy of EKG (a doctor should comply with a request for a copy if informed it is for Red File);
• DNR (do not resuscitate orders) or living will if you have either;
• Contact information for family member or friend who should be notified in the event of emergency.

At a recent meeting of Perry Senior Citizens, 47 individuals had their pictures taken by Chris Merriweather, Medicare Grants Regional Manager, and were given Red Files distributed by Irina Strakhova, Medicare Grants Director. The meeting was also attended by Keith Jeffers, Jefferson County Emergency Management Director, and Ramon Gonzales, Perry Police Chief and former 47th District Kansas State Representative, who explained the important role of first responders in saving lives. According to Paula Hladky, co-chair of Perry Senior Citizens, this busy community-minded gentleman is currently enrolled in EMT classes.

All speakers stressed the importance of the Red File and one suggested that carrying critical health information when away from home, possibly in the envelope with your car registration, is essential. Hladky related a personal experience where she was so worried about her husband during a medical emergency away from home that she could not remember his medical information. She also reminded seniors that their picture needs to be current. “Your high school picture will not help in the event of a Silver Alert.” A Silver Alert, if you are not familiar with the term, is broadcast when a senior goes missing.

You may pick up your free Red File at Jayhawk Area Agency on Aging. The file has a necessary form for you to fill out and provides you with helpful information about SHICK (Senior Health Information Counseling for Kansas), SMP (Senior Medicare Patrol) which empowers seniors to prevent healthcare fraud, and MIPPA (Medicare Improvements for Patients and Providers Act).
You do the math. Seniors on Social Security received a 2% COLA (Cost of Living Adjustment) in 2018. That was virtually wiped out for many by the $134 Medicare Part B premium. The premium was the same in 2017 when the COLA was .03%, but that year’s premium was a 10% increase from the premium in 2016. Because of this year’s 2% raise, however, the $134 premium applied to a great many more seniors on Medicare.

Here’s the rub. Many Social Security recipients’ Supplemental Insurance plans rose. My husband's and mine each rose 10%, dental rose 11% and Part D Drug plans rose a whopping 20%. However, the Social Security COLA does not consider health insurance as one of the inflation factors for raising your benefit. According to the US Labor Department’s Bureau of Labor Statistics: Although medical insurance premiums are an important part of consumers’ medical spending, the direct pricing of health insurance policies is not included in the CPI. As explained below, BLS reassigns most of this spending to the other medical categories (such as Hospitals) that are paid for by insurance. The extreme difficulty distinguishing changes in insurance quality from changes in its price forces the CPI to use this indirect method.

If you have been grocery shopping recently, you know food costs are going up along with most retail items. My city of Lawrence recently raised its water, sewer and trash rates by $65/year for the average user. The city also raised its property tax mill levy by 1.25 mills, the county by 1.9 mills and an approved bond issue for school improvements will raise the school district’s budget by 2.4 mills.

Those mill figures may sound innocuous, but they can represent hundreds of dollars owed in property taxes by seniors who own their homes. Even those who rent may be affected when their landlords are forced to raise rent to pay their own property taxes. It is expected that other cities and counties also raised their property taxes and utilities. When is the last time your property taxes and utilities were lowered?

No wonder seniors are struggling to stay afloat. But not to worry. In 2016, USA Today ran an article with this helpful advice for seniors:

1. **Raise your income** by increasing the return on your investments or getting a job;
2. **Lower your expenses** by downsizing your house or taking out a reverse mortgage. (Be cautious about the latter; although reverse mortgages work for some, they are not right for everyone. See more about reverse mortgages in a reprinted article from 2013 on page eight).
3. **Do both — raise your income AND lower your expenses.** If only it were that easy.

In an interview published in the Fall 2017 issue of Topeka Senior Magazine, JAAA Executive Director Susan Harris addressed seniors’ financial difficulties by noting that many of them were working longer out of necessity: “In many cases, there is a need for the additional income. A lot of folks stop working and they’re limited to just their Social Security or their pensions or what they’ve been able to save. Oftentimes, that’s just not enough. So we see a lot of seniors where it’s really a financial need. They have to go back to work.”

The day you retire and start drawing Social Security and/or a company pension you are said to be on a “fixed” income. But the reality is you are actually on a “declining” income with regard to what the benefits you earned will buy.

What can seniors do to attract attention to their plight? Write your representatives in Washington! While you may be accustomed to hearing from politicians during elections when they may attempt to scare you into voting for them to preserve the Social Security payments you earned while you were working, do they ever hear from you? It is up to you to educate them with regard to the problems created after retirement when necessities raise by 10% while your income raises by 2%.

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The method of calculating COLAS are confusing to say the least. For example, COLAS offered by the government can vary widely as evidenced by the fact that FERS (Federal Employees Retirement Service) pensioners received a 4.8% COLA in 2009, while Social Security pensioners received 0.0%. Why? Logic tells us that inflation affects seniors the same regardless of whether they paid into Social Security or the Federal Employees Retirement Service.
Is a reverse mortgage right for you?

By Marsha Henry Goff

Editor’s Note: This article appeared in the Fall 2013 issue of Amazing Aging. The information is still applicable and important to know if you are considering a reverse mortgage.

Among the celebrities promoting reverse mortgages for seniors age 62 and older are Robert Wagner, Fred Thompson, Henry (the Fonz) Winkler and Pat Boone. If it seems odd that wealthy celebrities — who will never need such a mortgage — are encouraging their fellow and poorer seniors to take advantage of the program initially signed by President Ronald Reagan in 1988, remember this: These trusted celebrities are increasing their wealth by being well-paid for the ads in which they appear.

Undeniably, reverse mortgages may work well for some seniors who wish to remain in their homes and who have the discipline to do everything right. But, while ads imply that you cannot lose your home with a reverse mortgage, you should know that you can. Indeed, in 2012, one out of every 10 owners of reverse mortgages was in default. Here is what you need to know if you decide to apply for a reverse mortgage loan.

Your home’s equity is used as collateral for a reverse mortgage loan that generally does not have to be repaid until the last surviving homeowner permanently moves out of the property or passes away. Interest and handling fees are added to the loan each month. During the time the homeowners are in the home or temporarily away — for example, a brief stay in a nursing home — they are responsible for taxes, insurance and maintenance of the home. Failing to do so results in foreclosure.

When the last surviving homeowner moves permanently (12 months) out of the home or dies, the estate then has approximately six months to repay the balance of the reverse mortgage or sell the home to pay off the balance. Any remaining equity is inherited by the estate and the estate is not personally liable if the home sells for less than the balance of the reverse mortgage.

A reverse mortgage works best if the borrower is older and has no or a small mortgage on their home because any mortgage must be paid off first with proceeds of the reverse mortgage loan. As life expectancy has risen, more people are living into their 80s and 90s, many into their hundreds. It is easy to see how they can outlive the proceeds of the reverse mortgage loan, especially if they take the money in a lump-sum and are not disciplined about spending the money.

JAAA Executive Director Jocelyn Lyons is her family’s matriarch and chief caregiver. Her strong-willed grandmother, affectionately known as Gran, she initially withdrew $1,000 to host a Thanksgiving dinner for her entire, and very large, extended family. When added to the monthly fees and interest, that $1,000 grew to $12,000 in only four years. The rest of the loan money remained unspent. The family, especially Gran’s son who had purchased the house for her, thought that $12,000 would not be too much to pay off the loan if Gran died as it looked she might do at age 100 when she was very ill.

Happily, Gran did not die then and the bulk of the loan proceeds remained untouched until she entered a nursing home. Her savings, CDs and the rest of the reverse mortgage loan paid for her stay in the nursing home. Although Gran’s son had been required to remove his name from the deed so she could apply for the reverse mortgage loan, it was expected that the house would be returned to him upon her death, provided he purchased the house from HUD (US Department of Housing and Urban Development) by paying off the loan.

Sadly, after her money ran out, Gran was forced into applying for Medicaid because the lending company, without the approval of HUD, would not allow Jocelyn to use the remaining $13,000 of the loan to pay for her grandmother’s care. The attorney who assisted Jocelyn in applying for Medicaid for her grandmother also advised her to cease paying taxes, insurance and utilities on the house since Gran would never return to it. But Gran insisted that the utilities remain on so that visiting out-of-state relatives could stay without incurring hotel costs.

When Gran died at age 104, the son who purchased the house for her informed the lending agency of her death and said he would like to talk...
Reverse mortgage
CONTINUED FROM PAGE EIGHT

to them about paying off the mortgage to buy the house. They said they would “get back to him” but, in the meantime, required him to continue to pay the taxes, insurance, maintenance, utilities, interest and fees. Eighteen months later, they still had not “gotten back to him,” and he decided that — with 18 months of additional interest and fees — the amount of the loan exceeded the value of the house. He advised the lending agency that he was no longer interested in buying the house and that he planned to have the utilities turned off.

They informed him they would not accept release of the house until it had been thoroughly cleared and cleaned (vacuumed, mopped, walls and windows washed) and gave him 10 days to have the work completed. He called Jocelyn who told him that, in a foreclosure, the lender customarily took care of those duties and readied the house for sale. However, her uncle was worried that he would pay a penalty if he did not have it done, so Jocelyn (family matriarch and house cleaner) personally cleared and cleaned the house.

While her experience with Gran’s reverse mortgage loan was not positive, Jocelyn, when asked her opinion of such loans, says, “It depends on the situation. I would also want to learn more about a home equity loan.”

She also recommends that seniors thinking about taking out a reverse mortgage loan be cautious, investigate other options and carefully check out the lending agency. Clearly, some are better than others and, if you decide a reverse mortgage is right for you, you will want your lending agency to be the best you can find when it comes to treating you fairly and responding promptly.

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SENIORS VOTE!

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JAAA gets around!
Look for us!

Caregivers’ Support Groups
Baldwin Methodist Church, first Wednesday of each month, 1 p.m. - 2 p.m.
February 7 March 7 April 4
Topeka/Shawnee Library, second Monday of each month, 3:30 p.m. - 4:30 p.m.
February 12 March 12 April 9
JAAA, third Friday of each month, 12:00 noon - 1:00 p.m.
February 16 March 16 April 20

Medicare Monday, we’ll answer your Medicare questions, Topeka Public Library, 1 p.m. - 3 p.m.
February 5 March 5 April 2

Do It Yourself Medicare Part D, Topeka Public Library, second Wednesday of each month 9 a.m. - 10 a.m.
February 14 March 14 April 11

Grey Wolves in Meriden, Meriden United Methodist Church, third Thursday of each month, 11 a.m. for Jefferson County seniors: meal, fellowship, presentation.
February 15 March 15 April 19

WOW Fest in Eudora, Eudora Community Center March 24
Baker University Community Wellness Festival, Baker University April 7

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CHAMPSS Orientation Sessions
Lawrence: Lawrence Public Library, first Monday of each month at 2 p.m.
February 5 March 5 April 2

Shawnee County: JAAA, first Wednesday of each month at 1:30 p.m. Shawnee residents must call JAAA receptionist to register for an orientation.
February 7 March 7 April 4

Jefferson County residents may enroll in Topeka or Lawrence orientation sessions.
You may contact us at 235-1367 (Topeka); 1-800-798-1366 (outside Topeka)
Caregiving brings a lot of change. One of those changes is the way we think about vacations and travel.

The decision to travel or whether or not our loved one can accompany us can be the forefront of any travel plans. Here are a few tips from AgingCare.com when we want our careee to travel with us:

- Consult with your loved one's primary care physician regarding abilities and limitations, and special vaccinations and medications;
- Consider renting a larger, more comfortable vehicle that will accommodate any medical equipment;
- When booking hotels, request an accessible room. Even if they are ambulatory, wider, more open spaces are safer. Consider renting a cottage or house close to your destination;
- Allow plenty of time for rest between activities;
- Have essentials on hand. Pack supportive stockings to prevent blood clots, light clothes that can be layered, basic medical information, snacks and incontinence supplies are some examples of additional equipment. Always have plenty of water on hand.

If your loved one has dementia they can still travel with you, depending on the stage of the disease. In some situations it may be necessary to consider respite care or alternative in home caregiving options.

In some situations, their dementia may be at a stage where they would actually be happier not travelling. Too much stimulation can cause increased confusion and agitation. If you have chosen to travel together keep these tips from AgingCare.com in mind:
- Stick to their routine—Try to keep as close to their schedule as possible. Sticking with a mealtime, bedtime and medication schedule reduces stress, anxiety and fear;
- Bring along a few familiar objects, such as a cozy blanket, pictures, or a scented bath product, to create a sense of home;
- Before and during each activity, tell your loved one where you will be going and what you will be doing. Keeps things simple and uncomplicated;
- When planning activities plan things during no peak times. Keep crowds and noise to a minimum. Try to ensure that there is a quiet place nearby that you can retreat to, if necessary;
- Make a point of returning to the hotel room before it gets dark. Close the curtains and turn on the lights to minimize shadows and lessen the drastic change from day to night.

With some preplanning you can enjoy time away with your loved one but also remember that taking some time for yourself is also acceptable. It is sometimes the best way to recharge your batteries and reduce stress levels. You can then come home ready to tackle the next challenge with renewed strength and fresh ideas.

The ongoing adventures of Katie and Pat

Katie, 90-something, and Pat, 80-something, are two of the most active, quick-witted women you are likely to meet. Recently, when their furnace broke down in the middle of a bitterly-cold night, they called a repairman who arrived at their home at 4 a.m.

He worked on the furnace and finally got it functioning temporarily until he could obtain the parts necessary to fix it properly. As he was leaving, Katie gave him a box of protein bars, telling him that would suffice as his breakfast when he received such early morning calls. He thanked her and tried to open the front door. “It’s locked!” he said.

“Yes,” replied Katie, “when we get a man in here, we don’t let him out!”

Please call Kevin at (785) 841-9417 to place your display ad in the SPRING 2018 issue of Amazing Aging! The deadline is April 15.
Kansas offers Spousal-Impoverishment Law

Kansas is one of the states that offers a Spousal-Impoverishment Law when one spouse enters a nursing home and the other remains at home. Often called Division of Assets, the law requires the spouse in a nursing home to spend down his or her share to $3,000 before applying for Medicare and allows the community spouse to retain the following exempt property owned by the couple:

- The home and its contents;
- One car (per family);
- One burial plot, casket, etc. (per person);
- A funeral plan within certain limits;
- Personal possessions, such as wedding rings and clothes; and
- In some situations, property used in an on-going business.

The federal Spousal Impoverishment Law allows the community spouse to keep a portion of non-exempt assets (the greater of the first $24,720 of total non-exempt resources, or one-half of the total non-exempt resources owned at the time the spouse entered nursing home care. The maximum share the community spouse can keep is $123,600).

The spouse in the nursing home must spend down his or her share of the couple's assets until $3,000 is left, at which time that spouse may apply for Medicaid. However, if the community spouse is deemed to not have sufficient income, the spouse in the nursing home's monthly income may be shared with the community spouse.

By law, the State Medicaid agency has a first-class claim against the estate of the Medicaid recipient or the surviving spouse for benefits paid to the recipient. The Medicaid recipient must have been 55 years of age or older or in a nursing facility while on Medicaid. This claim arises only after the death of the recipient and the surviving spouse. No recovery would occur if there is a surviving minor or disabled child.

Betty Wade, JAAA Supplemental Services Coordinator and Case Management Supervisor, says that JAAA staff can explain the law to those who have questions and, in the event they cannot answer questions in complicated cases, will usually refer them to the Kansas Department of Health and Environment.

Because Kansas law holds the spouse in the nursing home responsible for the other spouse's medical bills, before division of assets was allowed, the assets of both spouses had to be spent down, thereby making paupers of the spouse in the nursing home and the community spouse. Each family's financial situation is different so this is neither a "one-size fits all" nor a "do it yourself" project.

Molly Wood, a partner in Stevens & Brand Law Firm in Lawrence and Topeka, limits her practice to long-term planning and is listed in the Best Lawyers in America in Elder Law. She suggests a good place to start asking questions is with a call to the Kansas Elder Law Hotline (888-353-5337), which is a free service. If more assistance is needed, you will be referred to a lawyer who specializes in that aspect of law. Wood cautions that you should not wait until you are in financial trouble to approach a lawyer, because many of your assets may be preserved if you plan early. This is definitely one situation where the money you save will be far more than the money you spend in lawyer's fees.

Support group

CONTINUED FROM PAGE THREE

parents Day at school, what their parents have said to them. ‘Do I have grandparents, Mommy?’ I wonder what the answer is. And it makes you wonder if there was a crisis, how hard-headed are they going to be? Are they going to let their child die when they could maybe come to you for money or a body part?”

His last attempt to reach out to his daughter was a card in which he wrote, “If you need anything, I’m here.” She did not respond. While Landers may never reconcile with his daughter, he continues to facilitate the group, celebrating each time another member successfully reunites with an estranged child. The group is small, ranging from six to 18 people, but Landers knows there are so many other parents who need the group and might be helped by participating in it.

Parents of Estranged Adult Children Group meets the third Tuesday of each month from 6:45 p.m. to 8:15 p.m. at the Topeka Public Library, second floor Anton Room 202. For more information, please contact Jeff Landers at 785-224-5946.

Amazing Aging strives to provide readers with the information they need to live independent and productive lives. We also seek to feature stories of seniors who are active as workers, volunteers or engaged in hobbies. If you know a senior you would like to see featured in a future issue, please contact editor Marsha Henry Goff at mhgink@netscape.net or write to her in care of JAAA, 2910 SW Topeka Boulevard, Topeka, KS 66611.
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