

ACCESS

Preparing for an emergency
Pages 4 & 5



Your Link To Community Resources

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Serving the counties of Livingston, Macomb, Monroe, Oakland, St. Clair and Washtenaw

Finding love later in life

When Pat McEvoy lost her husband Vince in 2010, she resigned herself to a single life. Married for 64 years, the couple raised four sons, Denny, 64, Patrick, 62, Tim, 57, and Brian, 48. Vince and Pat were blessed with ten grandchildren and now 9 great-grandchildren. "We shared a wonderful life together," Patricia said, centered on family, their Catholic faith and community.



Edgar and Patricia

Pat and Vince moved to an American House Senior Living facility in 2007 when Vince needed nursing care. He passed away just before his 90th birthday. Not wishing to go back to condo living alone, Pat moved into an independent apartment villa at American Village on the same site. "My life felt rich and satisfying with family nearby and so many wonderful residents to mingle with," she said.

Edgar Lesperance, arrived at the same American House for the summer from his winter residence in Spring Hill, Florida to be near family following the death of his dear wife Joan in May of 2011. They were married 54 years and had two sons, Mark, 54, and Ronald, 53. After raising boys, Edgar and Joan were blessed with two granddaughters.

The grieving process proved difficult for Patricia and Edgar. "I thought I'd be

content being alone," said Patricia. According to Edgar, "I was kind of in a different world when I was grieving."

As fate would have it, Patricia and Edgar ate at the same dinner table where conversation with one another began slowly and then advanced into walk/talk sessions. "There was a spark like I've never had before," Patricia confessed. "I began to grasp that life is a powerful gift."

It wasn't long before Patricia came to realize that life's powerful gift was Edgar.

"Ed and I would go walking around the perimeter of American House in the morning and then after supper too," said Patricia. "We became very close, very quickly and I found myself ready again to pursue a good relationship."

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Live independently at home with the help of AAA 1-B

Carol, 70, has lived on her own at home in Macomb County for years, but recently she experienced a few episodes of falling due to issues with her vision. Carol didn't realize help was available to prevent future falls until a homecare nurse paid a visit. "She mentioned the Area Agency on Aging 1-B's Home Injury Control (HIC) Program and recommended that I give them a call," stated Carol.

Trained Resource Specialists at the AAA 1-B provide information and assistance on services and resources available in the community to help older adults and adults with disabilities residing in Livingston, Macomb, Monroe, Oakland, St. Clair and Washtenaw counties.

When Carol contacted the AAA 1-B about the HIC program, a Resource Specialist was able to refer her to the local organization providing this service. The HIC program is designed to help minimize falls as an older adult remains in their home.

Rather than make arrangements regarding her needs by phone, Carol preferred to have a representative from the local HIC program come to her home and do a fall risk assessment. Following the visit, Carol learned that she needed to remove all rugs without a rubberized backing. Another recommendation was to install a rail on the opposite side of the stairwell leading to the basement. A third suggestion was to resize the existing bathroom and basement rails to suit Carol's height of 4'7".

"I contacted the organization given to me by the Resource Specialist and they came out that week to do the job. They did wonderful work and finished everything the same day," Carol said. "It's great to have rails adjusted to my height so that I can hang onto them when I'm going downstairs. Now I feel safer at home."

Carol recently called the AAA 1-B again to get additional help with other needs. She was referred to the Community Living Program and spoke with Kristy Mattingly, RN, BSN Community Living Consultant/Nurse Care Manager. "For many seniors, connecting to CLP and the resources we can offer through the program often prevents their circumstances from getting worse," Mattingly said. "In 2012 alone, we served 1,453 CLP recipients who live in the six counties the AAA 1-B serves."

In order to properly tailor services to an individual who calls in, Mattingly stated, "It's important for callers to tell us exactly what their needs are so that we can discuss solutions through all available resources and services within

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their county.” Carol learned from Mattingly that there are a number of Community Living services that would help make life easier. “There’s transportation assistance which could help me get to my doctor’s appointments and to the grocery store,” said Carol.

When Carol mentioned she had difficulty doing some household chores, Mattingly talked about homemaking and personal care services. “Kristy said that someone could come to my home for up to four hours per week to do chores that are hard for me to do, like washing floors and laundry. These blessings would make my life easier,” Carol said.

For Carol, falling is the issue that tops the list. “Kristy told me about the personal emergency response units and I explained that the reason I didn’t have one was that I couldn’t afford it. But Kristy assured me that based on my income, I was eligible to receive a unit,” said Carol. “I would feel safer in my own home knowing that I could just press a button and somebody would come right away if I fell.”

Carol was grateful for answers to many issues that posed challenges to her life at home. “When I got off the phone with Kristy, I felt that she really cared about what happens in a senior

citizen’s life. Kristy was understanding and very easy to talk to.”

Below is a detailed description of many of the programs the AAA 1-B can provide to help you or someone you love remain safe and independent.

Home Injury Control (HIC) Program

The AAA 1-B funds organizations in each of the six counties mentioned above to provide services and adaptive equipment to help reduce the risk of falling for adults age 60 and over. Services available through HIC may include a fall risk assessment of the home, and installation of equipment such as wall mounted grab bars, raised toilet seats, shower seats, hand railings and possibly smoke alarms and carbon monoxide detectors. The fee for the service is a donation or voluntary cost share to help cover the cost of the program and help other older adults benefit from HIC. As there is limited funding for this program, there may be a waiting list for services depending on where you reside.

Chore Services

The AAA 1-B also funds local organizations to provide services such as grass cutting, snow shoveling and gutter cleaning through the Chore program for older adults who are finding it difficult

to continue doing this work themselves. The staff at the AAA 1-B can provide the contact information for the organization providing this service in your area. Again, the fee for the service is a donation or voluntary cost share to help cover the cost of the program and help other older adults benefit from chore services. Also, availability for the program may be limited depending on funding and the number of seniors already receiving the service.

The Community Living Program (CLP)

For people 60 years of age and older who want information on how to remain living independently at home, the CLP can provide an independent living consultation over the phone, or in person. A caring professional consultant is available to help the individual or family caregivers navigate services and resources that are available in the community, identify insurance benefits that may cover costs, assist the person and family with budgeting, and explore optional services, which may be available free of charge, or paid by the individual at full or reduced cost. Services,

such as personal care, homemaking, medication management, personal emergency response units, legal aid, transportation assistance and more, can help individuals remain safe at home.

Meals on Wheels Program

Nutritionally balanced meals are hand-delivered to your home every week. In addition to being age 60 and older, to qualify for the program you must be homebound, physically or cognitively impaired, and unable to prepare meals on your own. A donation for service is suggested.

Homemaking and Personal Care Services

The AAA 1-B can provide you with a list of providers who offer assistance with activities of daily living, including grooming, bathing, dressing, meal preparation, housekeeping, laundry, and errands.

For more information about any of these services, call the AAA 1-B, Monday through Friday, between 8 a.m. and 5 p.m. at 800-852-7795 and speak to a Resource Specialist.

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Don't Miss the Area Agency on Aging 1-B's Living Well Radio Series!



“Living Well” is a radio series that can be heard on our five radio partners. This informational feature provides tips, resources and important information to family caregivers, who are often struggling to balance caregiving with work, family and other obligations. “Living Well” sponsorship opportunities are available. Please contact Bill Hayes at 248-644-1990.

Many thanks to our recent sponsors who have helped bring you “Living Well.”



Listen for “Living Well” on these stations:



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Finding love

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She continued, “This past summer, at one meal, Ed mentioned he was going to visit his wife’s grave at the cemetery and I asked if I might tag along.” Not only did they visit Joan’s grave, but Patricia and Edgar then visited Vince’s gravesite.

“I feel fortunate to have met Patricia,” said Edgar. “We get along great.” The pair learned they had a lot in common. Along with exercising together, they also enjoy taking computer classes, playing golf, and doing charity work at the church. Another commonality...Edgar’s birthday is November 6th, while Patricia’s is November 7th. “For one day, we’re the same age and I won’t say who the elder is,” Edgar laughed.

This past October, Edgar planned to return to Florida for the winter. “My daughter-in-law suggested to Patricia that she come down to Florida to visit me on my birthday,” said Edgar. So Patricia flew down with Mark and his wife. And it was on Patricia’s birthday, that Edgar proposed to her. “That was the first time I got down on my knee,” he said and quickly added, “I got up on my own, so that was good.”

“When Patricia and I first started going out, she said, ‘I’m too old to get married.’ After a while that changed and she said, ‘Maybe I’m not too old to get married.’ Then she said ‘yes,’” Edgar exclaimed and with a grin he added, “Never give up.”

On December 29th, Edgar and Patricia were married in their church



amidst 55 cherished family and friends. Their families have been very supportive. “We get along well and I know it’ll be a great marriage,” said Edgar. “We’re at an age now that we’re hoping for ten more good years.” Patricia added, “It’s a treasure to be given another opportunity like this, especially at the age of 85.”

Susan Brown, co-director of the National Center for Family and Marriage Research at Bowling Green State University, noted that about half of older adults who form a union choose to marry rather than cohabit. “There may be financial benefits to marriage or the couple may highly value marriage as a symbol of their love and commitment,” she said. For Patricia and Edgar, marriage honors their commitment to God.

“We hope to serve as good examples of what marriage is for those who love God first,” said Patricia. “We plan to reach out to the community here. Individually, we’ve probably always done that but now, together, we can do it better. It’s a bright future!”

ASK the expert

Essential Legal Documents for Care Planning *by Jamie Verdi*

What Are the Most Important Legal Documents for Planning Ahead?

Planning for the future care needs of yourself or a family member can be accomplished relatively simply through a variety of legal documents. Different types of legal documents have different purposes and must be prepared in accordance with state regulatory requirements. One of the most important documents everyone should have is a "Patient Advocate" designation. This document allows a person to give medical decision making authority to another trusted person in the event of a physical or mental incapacity. Michigan has strict requirements that must be followed in order for a Patient Advocate designation to be enforceable. For example, the Patient Advocate designation must contain certain language and must be signed by two witnesses at the time it is executed. The person receiving the Patient Advocate authority must sign an acceptance form in order for the designation to become valid.

Another type of document that is important in the event of a physical or mental incapacity is an advanced directive. This allows a person to direct their future medical decision maker (either a Patient Advocate, guardian or spouse) on how to make an end of life decision. For example, it can contain a "do not resuscitate" order or request heroic efforts to save one's life. Advanced directives are typically contained in wills or other estate planning documents.

What's the Difference between a Patient Advocate form and a Durable Power of Attorney?

A Durable Power of Attorney is a written legal document that allows you to appoint a trusted person to make health care decisions, manage your financial affairs, or conduct other business for you during your incapacitation. A Durable Power of Attorney stays in effect if you become incapacitated and unable to handle matters on your own. It is common to have two legal Durable Power of Attorney documents – A Durable Power of Attorney for Healthcare and a Financial Power of Attorney.

With respect to health care decisions, a Durable Power of Attorney for Healthcare and a Patient Advocate designation accomplish the same objective. Both documents transfer medical decision making authority to another in the event of physical or mental incapacity. If a person has both a Patient Advocate designation and a Health Care Durable Power of Attorney, it is important to make sure they do not conflict. They should both give medical decision making authority to the same person.

A Financial Power of Attorney can be made effective even when no physical or mental incapacity exists. This type of document can be used to allow a family member or other trusted person to control another's finances, i.e. pay bills, receive and manage Social Security payments, make investments, etc.

What can Happen if Someone Does Not Have a Patient Advocate form or Durable Power of Attorney?

If someone becomes incapacitated and does not have a Patient Advocate designation or Durable Power of Attorney for medical decisions, court intervention would be required for the appointment of a guardian. Guardianship proceedings can be time consuming, expensive and the decision of who should be guardian is left to the court's discretion.

Is a Will or Trust Sufficient without these Other Documents?

A will only becomes effective upon death. It merely directs how a person's assets should be allocated. It does not give anyone else decision making authority in the event of a physical or mental incapacity.

A trust can be used in place of a will to allocate assets upon death. It can also be used to allocate and manage assets before death. A trustee must manage the assets in accordance with the directions in the trust document. For example, a trust can direct a trustee to pay others a certain sum for a specified duration, or the trust can hold real estate and direct the trustee to sell or transfer the property to another upon death or other event. Whether one should have a will, trust or both depends on individual specific circumstances.

Jamie M. Verdi is a health care and elder law attorney who regularly represents caregivers. She is also a member of the AAA 1-B's Board of Directors. You can reach her at 248-410-4945 and www.mipalhealth.com.



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How about collaborate with the American House Choir Director. Join us on Facebook to share ideas and help create moments you will cherish for a lifetime. Or call to learn what else is possible at American House. We look forward to finding out what interests you.

Genesee County		Macomb County	
Grand Blanc	(810) 936-0520	East I	(586) 218-3639
North	(810) 936-0521	East II	(586) 439-3065
Oakland County		Lakeside	(586) 648-1699
Elmwood	(248) 237-3415	Sterling I	(586) 218-3211
Farmington Hills	(248) 809-1327	Sterling II	(586) 477-4566
Hazel Park	(248) 721-8929	Washtenaw County	
Milford	(248) 507-4973	Carpenter	(734) 408-4124
Oakland	(248) 605-8787	Wayne County	
Royal Oak	(248) 721-8930	Dearborn Heights	(313) 449-8719
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Stone	(248) 609-7631	Riverview	(734) 939-0500
The Village	(248) 237-3413	Southland	(734) 720-1858
Troy	(248) 721-8620	Westland Hunter	(734) 259-2469
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Are you prepared for an em

Take action with this user-friendly guide

In a nation where popular television shows like “Survivor”, “Survivor Man” and the newest “Doomsday Preppers” attract millions of viewers, you’d think Americans would be ready for the next emergency, given the valuable survival information you glean from these reality shows. However, following Hurricane Katrina, a Council for Excellence in Government study found that only 8% of Americans surveyed had adequately prepared for an emergency, with adults age 65 and older being the least prepared.

Every year, when tragic events unfold, we witness survivors manage under the stress of an emergency until help arrives, observing that all too often, assistance takes much longer than expected. Did you know that initial response to an emergency can take up to 72 hours because the system is set up to help the helpers first? This way they can proceed to help others. That’s why it’s important to be self-sufficient for the first three days.

Survivors from these and other events have come forward with valuable information to help the rest of us plan ahead. And if you’re a person who finds advance planning overwhelming, visit www.do1thing.us to gradually become prepared in easy and inexpensive ways.

By enacting a few simple measures now, you can ease anxiety later, should an emergency situation take place in your future. Here’s how to get started...

Step One: Get details down on paper

Start by creating a plan. The Federal Emergency Management Agency (FEMA) has a downloadable Family Emergency Plan you can tailor to meet the needs of those under your roof. FEMA also offers free, downloadable emergency cards for each person in your household to keep in their wallet. This comes in handy if you’re away from home when an emergency occurs. Visit www.FEMA.gov or locate similar information through the Red Cross at www.redcross.org/prepare/ECCard.pdf.

When filling out these documents, keep the following issues in mind:

1. The typical emergencies that tend to occur in your region of the country. Michigan residents, for example, might encounter a snow storm, ice storm, tornado, flood, fire, power outage, or an un-natural disaster. Learn more about these scenarios so you know how to respond as you develop your plan. Visit www.ready.gov for details.
2. Review your insurance coverage. What will you need to submit if filing a claim becomes necessary? Do you have adequate coverage?
3. When planning, consider the type of residence

you live in, whether that’s a single-family dwelling, condominium, apartment, etc. Take this into account and devise fire escape and evacuation plans. Establish a meeting place outside of your residence in case you need to leave home or in case you can’t get home.

4. Consider the age of each person, along with individual health conditions/concerns. If you have a family member who requires an uninterrupted power source, you’ll need a generator. The Red Cross recommends that you contact your local officials to find out what uninterrupted power source would be available in your area if an evacuation is necessary.
5. Plan for two scenarios: a) remaining at home b) heading out to a shelter, due to unsafe conditions at home.
6. Determine a contact person who lives outside of the area that everyone can contact to indicate that they’re safe. This number will be listed in each person’s wallet card. In addition, you can let family and friends know you’re okay by registering with the Red Cross at either 800-733-2767 or www.safeandwell.org.

Step Two: Assemble supplies for a Three-Day home stay or evacuation

FEMA and American Red Cross recommend every household create a fourteen-day emergency supply. Get started by creating a three-day supply of items that will get you through the first 72 hours of an emergency. Gathering materials together can be a gradual process. This is also what you’ll take with you if you are forced to leave home to take shelter.

Experts recommend you store these supplies for each member of your family in a designated place and have them ready in case you have to leave your home quickly.

Three-day Basic Emergency Kit

- Water (3 gallons per person)
- Three days of non perishable food, which can be a combination of canned goods, dried foods, and

protein drinks. Purchase products that will last a few years prior to the expiration date. Suggested items include canned and dried meats, fish, fruits (raisins and prunes are high in iron) and vegetables (esp high protein beans-read labels); nut butters if not allergic; granola and protein bars; boxes of milk (has a 7-month shelf life without refrigeration when unopened); and Gatorade to replenish electrolytes and ensure proper hydration. Dispose of canned goods that are swollen, corroded, or smell bad when opened.

- Cash and change
- Seasonal clothing for everyone in the household

Tools

- Hand-crank or battery operated National Oceanic and Atmospheric Administration (NOAA) Weather Radio with extra batteries and bulbs (can be purchased at electronics stores like Radio Shack, department, sporting goods stores like Dunham’s, boat/marine accessory stores, and online from retailers or manufacturers).
- Manual can opener
- Candles, lighters, strike anywhere waterproof matches
- Flashlight and extra batteries
- First aid kit
- A three day supply of medications/vitamins
- Wrench or pliers to shut off your utilities
- Whistle to signal for help
- Respirator dust masks to help filter contaminated air, chemicals, airborne germs. (Recommend N-95 NIOSH respirator dust mask; quantity of 20 costs \$8 through Amazon.com)
- Plastic sheeting, scissors and duct tape

Sanitation

- Aluminum foil, plastic bags, paper towels
- Baby wipes
- Antibacterial wipes and hand sanitizer

Copies of the following important family documents:

- Drivers license(s)
 - Insurance policies
 - Health Insurance ID Cards
 - Birth certificates/adoption papers
 - Marriage license/divorce papers
 - Social Security card
 - Passport/green card/naturalization documents
 - Bank account records/statements
 - Living will/power of attorney papers
- House these documents in a water-proof container.



Emergency?

Step Three: Present the plan at a household meeting

Sit down with all members of the household to discuss what you'll do if a disaster strikes. Hand out copies of the plan and wallet cards and review these documents. Show everyone where the supplies are located, along with the three-day kit.

Discuss evacuating to a shelter if...

- Your home is structurally damaged
- Police or local officials order an evacuation
- Your area is without power for an extended period of time
- Your home is threatened by flood water

Talk about what you'll need to do if evacuation is necessary:

- Wear sturdy shoes and adequate clothing
- Pack the three-day supply kit in a suitcase with wheels and an id tag for each member of the family
- Take the backpack survival kit (see sidebar to the right)
- Lock up your home
- Follow travel routes as conveyed by local officials

Step Four: Every six months, audit your plan, documents, supplies and conduct a drill

Make a note on your calendar, twice a year, to a) check through your supplies and rotate the seasonal clothing from your three-day survival kit; b) check expiration dates and restock; c) review the plan and make any necessary changes; d) check your equipment to make sure everything works; e) test your smoke alarms and carbon monoxide alarms and change out the batteries annually (replace units every 10 years); f) read through your documents and edit accordingly; g) hold an evacuation drill to make sure everyone knows what to do.

By taking time to prepare for an emergency, you'll feel better knowing that you have a plan of action for everyone in your household, if a crisis strikes.

Set Your Phone on ICE

Enter emergency contacts on your cell by naming the contact ICE (in case of emergency) followed by the person's name. Emergency personnel will attempt to get in touch with ICE contacts first.

Backpack Survival Kit

A backpack with survival materials in it can be a tremendous aid to you if you need to be mobile during an emergency. This would contain the essential survival tools in case you a) are unable to transport a suitcase; b) need to travel from home; or c) need to temporarily leave the evacuation center. Place the following essentials in an ID tagged backpack:

- Bottle of water
- Water purifying tablets
- Dried food
- Cell phone(s) with car or solar chargers
- NOAA hand crank/solar radio
- Flashlight with extra batteries
- Water-proof strike anywhere matches
- Small first aid kit
- Eating utensils
- Hand sanitizer
- Utility knife
- Emergency blanket
- Magnifying glass
- Duct tape
- Local map and compass
- Cash and change
- Paper and writing tool
- Cards, books, games
- Whistle
- Work gloves
- Emergency documents (listed in the three-day kit)

Helpful Websites:

- Download a free "Household and Personal Property Inventory Book" at http://web.aces.uiuc.edu/vista/pdf_pubs/houseinv.pdf
- Make planning for an emergency easier with a visit to www.do1thing.com
- Check out www.ready.gov to learn more about what you can do to be prepared.
- Download a free Emergency Financial First Aid Kit (EFFAK) visit www.operationhope.org/images/uploads/Files/effak2.pdf Call 888-388-4673 to speak with a specially trained HOPE Coalition America representative who can answer questions and provide assistance as you complete your kit.
- Got pets? Get prepared by visiting www.michiganhumane.org/site/DocServer/Disaster_Brochure_Combos.pdf?docID=1321

The First Aid Kit

You will want to include a variety of bandage sizes; sterile oval eye pad; rolled gauze; triangular bandages; abdominal sterile pad; sterile gauze pads, elastic bandage and clips; hypoallergenic adhesive tape; utensils (scissors, pointed tip tweezers, needle); thermometer with covers; instant ice packs; antibiotic ointment; burn relief cream; box of cotton balls; sting relief ointment; insect repellent; sunscreen; rubbing alcohol; hydrogen peroxide; medical-grade vinyl gloves; artificial respiration pocket mask; ibuprofen and acetaminophen; cough syrup and throat lozenges.



OAKLAND COUNTY

Senior Advocate

Dedicated to the Well-Being of Oakland County Seniors

Meet Your Oakland County Senior Advisory Council



Members from left to right: Ivan Johnson, Sally Jo Swayne (Chairperson), Rock Abboud, Rev. Willie Anderson, Carolyn Morrison and Cameron McClure. **Members not pictured:** Joyce Anson, Gene Buchan, Don DeCenzo, George Graunke, Marjorie Grassman, Robert Kenning, Anthony Stafford McDonald, Francis McFall, Dore McGowan, Jim Milford, Abram Powell, Karen Roach, Diane Smith, Pat Thomas and Celia Todd.

Protect Yourself Against Shingles Get Vaccinated

Almost 1 in 3 people will develop shingles during their lifetime and risk increases as you get older. If you are 60 years of age and older, you should get vaccinated against this painful disease.

Shingles causes a painful, blistering skin rash that can last 2 to 4 weeks. Some people may develop severe nerve pain that can last for months or even years after the rash goes away. This is the most common complication of shingles and often seen in older adults. Shingles can also lead to other serious complications, including eye problems.

Shingles is caused by the varicella virus, the same virus that causes chickenpox. If you have had chickenpox in the past, then the shingles virus is inside you. It never leaves your body and stays in a dormant state. For reasons that are not fully known, the virus can reactivate years later, causing shingles.

The only way to reduce your risk of developing shingles is to get vaccinated. Adults age 60 years or older can receive a single dose of the shingles vaccine called Zostavax®.

Oakland County Health Division offers the shingles vaccine, Zostavax®, for \$154 at their Pontiac and Southfield clinics. For directions and hours, please visit www.oakgov.com/health or call 1-800-848-5533. You can also like the Health Division on Facebook at www.facebook.com/publichealthOC for up-to-date public health information.



Message from L. Brooks Patterson, Oakland County Executive

Welcome all Senior Advocate readers of Oakland County to this first edition. Glad you joined us. I recently delivered my 2013 State of the County address Feb. 7 in the Performing Arts Center at Detroit Country Day School in Beverly Hills. As anyone who has attended my annual speech will attest, among my administration's goals is to ensure Oakland County residents have a quality of life that is second to none. That includes promoting Oakland County as a destination for world-class health care, great senior activities, and protection of vulnerable residents.



It is forecasted that Oakland County's senior population will double by 2030. That means seniors will comprise one-quarter of our residents. To address this opportunity, my Senior Advisory Council continues to meet monthly to raise awareness about the services that allow seniors to remain vibrant and active in Oakland County. This information is shared with my administration so we can develop innovative ways to ensure our seniors the best quality of life possible.

Oakland County cannot maintain a top notch quality of life without offering seniors an active lifestyle. Oakland County has a world-class parks system with 13 parks, 68 miles of biking and hiking trails, five county-operated golf courses, and well-preserved open spaces and waterways. To learn more about what our parks have to offer, go to www.DestinationOakland.com.

Oakland County has 100,000 individuals working in health care, life science research, and medical device manufacturing. We employ more people in these fields than the Mayo Clinic and Cleveland Clinic regions combined. To harness the county's largest economic sector, I launched my Medical Main Street branding initiative in 2008. Building on the foundation provided by great hospitals like Beaumont, Henry Ford, McLaren, and others, Oakland County is attracting top health care and life science companies. That means our seniors have access to some of the finest doctors and leading-edge researchers and medical trials in the U.S.

In addition to attracting the best health care has to offer, Oakland County has programs to make health care more affordable to qualifying seniors. The county has a prescription discount card and discount dental programs to help seniors defray some health care costs that may not be covered by insurance. Plus, **Oakland County Health Division has a Nurse on Call number where seniors can speak with registered nurses about health issues. Just dial 248-858-1406.**

Among our premiere quality of life events is The Brooksie Way Half Marathon and 5k Race, named in honor of my late son, Brooksie. It is open to runners and walkers of all skill levels and ages. The real success story from The Brooksie Way is that the private proceeds from the race fund minigrants of up to \$2,000 which are awarded to Oakland County organizations that promote healthy and active lifestyles, including in the senior community. For instance, Presbyterian Village in Holly received a grant for its version of the Senior Olympics - the Victory Village Cup: A Day of Senior Health and Wellness. Brooksie Way Minigrants also funded the Farmington Hills Senior Adult Division "Getting Strong Now" program. Minigrants also helped a wellness program at Lourdes Senior Community in Waterford. To apply for one, visit www.TheBrooksieWay.com.

At least 80,000 seniors in Michigan have been victims of abuse in some form. To help prevent elder abuse, Oakland County has the S.A.V.E. Task Force. It was created in 2005 as a partnership among service agencies and businesses serving the senior population, law enforcement, and Oakland County Health & Human Services to protect the rights and safety of vulnerable adults.

In addition, the Sheriff's Office has a senior cell phone program to reach 911 in an emergency, the Prosecutor's Office has a special victims unit to prosecute those who abuse the vulnerable, and the Clerk/Register of Deeds has a program to prevent mortgage deed fraud so seniors are not victims of scams where they lose ownership of their homes.

Oakland County also has many resources to help remove barriers to self-sufficiency as one ages. Its Community & Home Improvement Division offers low and no-cost loans to assist with home repairs. The Senior Resource Directory is full of organizations and their contact information. Oakland County has many more programs and initiatives. To view them all, go to www.OakGov.com/seniors.

One final note, Oakland County enjoys a great partnership with the Area Agency on Aging 1-B. Many of the initiatives we undertake are possible because of input and support from its staff and volunteers. If you have not done so already, I urge all our seniors to utilize the resources offered by the AAA 1-B. Just go to www.AAA1B.com.



Medicare's Coverage of Hospice Care – A Benefit Worth Knowing About

The Medicare Medicaid Assistance Program (MMAP) receives several calls throughout the year from people asking for more information about Medicare's coverage of hospice services. If you are caring for someone with a terminal illness, you may be interested in knowing how this benefit works.

What Is Hospice Care?

Hospice care offers a team-oriented approach to medical care, pain management, and emotional and spiritual support for people who are terminally ill. The focus is on providing comfort, not on curing the person's illness. For patients who qualify, Medicare will pay for this kind of comprehensive end-of-life care delivered at home or in a hospice facility.

Who is Eligible for Medicare Hospice Benefits?

You can get Medicare hospice benefits when you meet all of the following conditions:

- You are eligible for Medicare Part A (Hospital Insurance).
- Your doctor and the hospice medical director certify that you're terminally ill and have six months or less to live if your illness runs its normal course.
- You sign a statement choosing hospice care instead of other Medicare-covered benefits to treat your terminal illness. (Medicare will still pay for covered benefits for any health problems that aren't related to your terminal illness, such as an injury due to an accident)
- You must get care from a Medicare-approved hospice program. (90 percent of the more than 2,500 hospices in the United States are certified by Medicare.)

What Does Medicare Cover?

Medicare will pay for a hospice physician to consult with terminally ill patients who are not yet in a hospice. The consult, which could occur in a hospital, nursing home, other facility, or at home, may include a pain assessment as well as counseling on care options and advance care planning. You don't need to choose hospice care to take advantage of this consultation service.

Medicare will cover any care that is reasonable and necessary for easing the course of a terminal illness. The following hospice services are covered by Medicare:

- Doctor services
- Nursing care
- Medical equipment (such as wheelchairs or walkers) and supplies (such as bandages and catheters)
- Drugs for symptom control or pain relief (copay may be required)
- Hospice aide and homemaker services

- Social worker services
- Dietary counseling
- Grief and loss counseling for you and your family
- Short-term inpatient care (for pain and symptom management)
- Short-term respite care (may need to pay a copay)
- Any other Medicare-covered services needed to manage your pain and other symptoms related to your terminal illness, as recommended by your hospice team

Services are considered appropriate if they are aimed at improving the patient's life and making the person more comfortable. Physical, occupational and speech therapy, and even chemotherapy, may be covered if they are for comfort, not cure.

Respite Services

A terminally ill person can get inpatient respite care from a hospice if the patient's usual caregiver needs a rest. During this time, your loved one will be cared for in a Medicare-approved facility, such as a hospice inpatient facility, hospital, or nursing home. There may be a copayment required for the time the person spends in the in-patient facility.

What Medicare Won't Cover

Medicare won't cover any of the following for people receiving hospice care:

- **Treatment intended to cure the terminal illness**
If your loved one decided to get treatment to attempt to cure the illness, then hospice care is not covered. Hospice patients have the right to stop hospice care at any time.
- **Prescription drugs to cure the illness, rather than treat symptoms**
Only drugs intended for pain relief and symptom control are covered by Medicare's Hospice program.
- **Care from any hospice provider that wasn't set up by the hospice medical team**
All care must be given by or arranged by the hospice medical team. Your loved one can't get the same type of hospice care from a different provider, unless you change the selected Medicare-approved hospice provider.
- **Room and board**
Medicare doesn't cover room and board for hospice care. It does not cover the cost of rent or fees for a home, nursing home or assisted living. However, if the hospice medical team determines that your loved one needs short-term inpatient or respite care services that they arrange, then the stay in the nursing home or assisted living facility is covered. If your loved one's permanent home was already in the nursing home,



hospice care is covered. Your loved one may have to pay a small copayment for the respite stay.

- **Emergency care**
Care in an emergency room, inpatient facility care, or ambulance transportation, is not covered, unless

it's either arranged by the hospice medical team or is unrelated to the terminal illness. For more information about Medicare and Medicaid benefits, contact MMAP at 800-803-7174.

(Information provided by www.medicare.gov.)

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Calendar of Events

Monroe County Caregiver Summit

For individuals caring for an older adult or disabled loved one.
Wednesday, May 15, 2013
4:00 p.m. to 8:00 p.m.

LaRoys Hall
12375 S. Telegraph Road
LaSalle, MI

Registration required by May 1
Call 734-240-7363

Exhibitors, door prizes & special presentation by Dr. Sears.

Dinner included (suggested \$5 donation per person at the door)

Creating Confident Caregiver™ Workshops:

Free, six-week workshop series sponsored by the AAA 1-B and the Alzheimer's Association – Greater Michigan Chapter to help those caring for a loved one with dementia or Alzheimer's Disease.

Registration is required. For more information and to register, call the Area Agency on Aging 1-B at 800-852-7795.

Upcoming workshops:

Be Our Guest Adult Day Services
2020 East Grand River Ave.
Suite 103, Howell, MI 48843
Tuesdays, March 5, 12, 19, 26 and April 2 and 9, 2013
4:00 p.m.-6:00 p.m.

Waterford Senior Center Encore Adult Day Service
3621 Pontiac Lake Road,
Waterford, MI 48328
Thursdays, March 14, 21, 28 and April 4, 11 and 18, 2013
10:00 a.m.-12:00 p.m.

Visiting Nurse Association (VNA)
1430 Military Street, Suite A
Port Huron, MI 48060
Mondays, April 8, 15, 22, 29 and May 6 and 13, 2013
6:00 p.m.-8:00 p.m.

Dorothy & Peter Brown Jewish Community Adult Day Program at Jewish Senior Life Services
6710 W. Maple Road
West Bloomfield, MI
Fridays, April 26 and May 3, 10, 17, 25 and 31, 2013
10:00 a.m.-12:00 p.m.

Frenchtown Senior Citizen Services
2786 Vivian Road, Monroe, MI 48162
Tuesdays, June 11, 18, 25 and July 9, 16 and 23, 2013
1:00 p.m.-3:00 p.m.

NEWSPAPER SURVEY We Want Your Feedback about ACCESS!

The Area Agency on Aging 1-B is committed to providing an interesting, informative newspaper for our readers. If you have suggestions, story ideas, or constructive criticism, we want to hear from you!

In this issue of ACCESS you will find a postcard inserted into the paper. Please take a few minutes to fill it out and mail it back to us. No postage is required. If the postcard is missing from this issue, or you would prefer to complete the survey online, please log

onto www.surveymonkey.com/s/AccessReaderSurvey

We truly appreciate your time and input. We want to continue to produce a newspaper you find interesting, helpful and engaging.

If you have questions, or would like to sign up to receive ACCESS delivered to your home free of charge, please call the Area Agency on Aging 1-B at 800-852-7795, or email us at access@aaa1b.com.



The Area Agency on Aging 1-B enhances the lives of older adults and adults with disabilities in the communities we serve.

Vision

The Area Agency on Aging 1-B will be the agency of first choice for advocacy, action, and answers and drive community engagement to ensure that older adults, adults with disabilities, and caregivers reach their full potential and highest quality of life.

Services

Home Care Services

Personal care (bathing, dressing, etc.), homemaking, home-delivered meals, respite care, chore assistance, home injury control.

Community-Based Services

Adult day services, transportation, congregate meal sites, home delivered meals, out-of-home respite, legal assistance, employment for older workers, elder abuse prevention, services for vision and hearing impaired, long-term care ombudsman, resource advocacy, counseling, and volunteer caregivers.

Information and Assistance Service

Resource specialists can quickly answer questions and access information for callers using a computerized database listing over 5,000 senior services and 2,000 providers in southeast Michigan. Call toll-free, 800-852-7795. Hours are 8 a.m.- 5 p.m., weekdays. You can also visit www.aaa1b.com

AAA 1-B Access Centers

Livingston/Washtenaw County
734-213-6704
Macomb County 586-226-0309
Monroe County 734-241-2012
Oakland County 248-357-2255
St. Clair County 810-388-0096

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