

Trending Healthy

March 2024

Longing for Spring

Spring is officially less than two weeks away as I write this. My neighborhood is starting to erupt in cherry blossoms and daffodils, little pops of color against the otherwise-dreary, damp gray landscape.



It can't come fast enough. I've been missing the sun and days walking the beach. Winter has its perks, but the blanket of clouds and nearconstant rain leave many feeling tired, depressed, and low on energy and motivation.

As we get ready to welcome the warmer, (hopefully) drier weather, a lot of other things are happening too. In this issue, we take a look at what's going on at O3A and beyond. Change is constant, as they say. Spring is a reminder that change can be a lovely and welcome thing.



Editor's Note: Hello! My name is Michelle Fogus, and I can be reached at <u>michelle.fogus@dshs.wa.gov</u> if you have any comments or suggestions about stories you'd like to see. It's a great pleasure to work on Trending Healthy! I look forward to hearing from you.

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Wondering what services are available for older adults and caregivers? <u>Call us or stop in!</u>

Call or stop by one of our offices to learn more about the many resources available in each of the communities we serve.



Clallam County: Forks Office (360) 374-9496

Sequim Office (360) 452-3221

Grays Harbor: Aberdeen Office (360) 532-0520

Jefferson County: Port Townsend Office (360) 385-2552

Pacific County: Long Beach Office (360) 642-3634

Raymond Office (360) 942-2177

Or visit our website: www.03A.org

\$35 Medicare Insulin Cap Helps Many Stay Healthy

The 2022 Inflation Reduction Act capped out-of-pocket expenses for insulin at \$35.00 per month under Medicare Part D. But according to a survey conducted



by the Kaiser Family Foundation, fewer than half of older adults know about the cap. 1 They may still be rationing insulin because of that.

In the past, many people who could not afford insulin rationed it, reducing or skipping doses, so they could afford other basic expenses. Here's one story from our SHIBA (State Health Insurance Benefits Advisors) staff:

"L is a 75-year-old living in Sequim on limited income. Even though she lives in senior housing, her monthly bills eat up most of her income. She is on two kinds of insulin and many other expensive drugs. Before the

Inflation Reduction Act capped the monthly price of insulin at \$35.00, L was unable to afford to buy her insulin as prescribed and would end up in the hospital about every other month. Since the price cap, she hasn't had to call 911 once and is living a healthier and more independent life."

Another feature of the Inflation Reduction Act went into effect this January. People enrolled in Medicare Part D plans will have a lower cap on their out-of-pocket costs for prescription drugs—eliminating the 5% coinsurance requirement after costs reach the "catastrophic threshold." The new cap is \$3,300 per year for all brand-name drugs. This is a significant decrease. The Kaiser Family Foundation looked at one example of three drugs prescribed to treat cancer: Lynparza, Ibrance, and Xtandi. Retail prices for each are over \$100,000 per year. In 2023, Medicare Part D enrollees paid a median amount of \$12,500 for these drugs.

In 2025, these out-of-pocket costs will be reduced even further, to \$2,00 (indexed annually). Medicare is also negotiating prices on several prescription drugs, with the new prices scheduled to take effect in 2026.

¹ https://www.kff.org/policy-watch/the-new-help-for-medicare-beneficiaries-with-high-drug-costs-that-few-seem-to-know-about/



Looking for a Fun Way to Stay Active? Try Bingocize!

New Group Starts April 8th. Participate online!

Bingocize combines Bingo, education, and exercise in a fun, interactive way to maintain and improve health.

One participant said, "I've seen improvements in my strength and flexibility." Another said, "There is a lot of laughing, it's fun and engaging."

Sessions are held online twice a week for 10 weeks, on Mondays and Wednesdays, from 10-11 a.m. over Zoom. (*Must have an Internet connection. If you need help downloading Zoom, please contact the instructor, below.*) The class includes information about techniques to reduce falls as well as exercises to improve strength, balance, and range of motion. Bingocize is evidence-based, meaning there is measurable data showing that it improves health.

Bingocize is sponsored by O3A and is free to older adults in Jefferson, Clallam, Grays Harbor, and Pacific Counties.

For more information or to register, contact Mary Stewart of Warm

Heart Family Yoga at 360.747.7372.

MAV Expands to 23 Sites, Delivering Food, Supplies, and Resource Connection

The MAV (Mobile Assistance Van) added five new sites in March: Brinnon, Quilcene, Taholah, Bay Center, and Pacific Beach.



With those additions, the MAV is now serving 23 sites in our four-county region, taking food, supplies, and resource connection to outlying areas. (Visit <u>o3a.org/mav</u> for the full schedule.) The MAV also participates in one-time events such as health fairs, Project Homeless Connect events, veterans' stand-downs, and more as capacity and funding allow.

The service model helps us reach people in the more remote areas of our region. Many of them do not have reliable transportation options to get into areas where services are typically available. Many also do not have Internet access, so they are unable to find and apply for services online. Mobile services are a way to get into food and service deserts and provide that access.

The MAV is a partnership among O3A, the North Beach Senior Center (which operates the vans and provides the food through its donations and distribution network), and the Arc of Grays Harbor (which provides a bilingual/bicultural outreach specialist to assist Spanish speakers). It also leverages a wide range of community partners, from tribes to faith-based organizations to volunteer-run food banks and many more.

Funding for the MAV is provided by the US Centers for Disease Control and Prevention through a grant from the Washington State Department of Health. The funds are designated for rural areas, to address inequities caused or exacerbated by the pandemic. The grant will end May 31st.

We hope to identify additional funding. We are looking at a variety of ways we might fund the project going forward. It may look different, we may not be able to serve as many sites, but we know the need has not gone away, so we are committed to continuing to provide mobile services for as long as possible.

See the MAV in action. Video: https://www.youtube.com/watch?v=09YEJVuu06M



Medicare Offers Preventive Benefits to Help Keep You Healthy

In the world of healthcare, taking care of your health before problems they pop up is very important. That's where Medicare comes in. Medicare is health insurance. It's not just about fixing health issues when they happen -

it's also about stopping them before they get serious

Original Medicare (Part A and Part B) covers certain preventive services, such as vaccinations, screenings, and counseling to help prevent or detect medical conditions early. Additionally, Medicare Part B includes an Annual Wellness Visit, which is a yearly appointment with your healthcare provider to discuss your health and create a personalized prevention plan.

Medicare's preventive benefits can be worthwhile because they help better health outcomes and lower healthcare costs in the long run. Here are some reasons why these preventive benefits are valuable:

- 1. Early Detection: Preventive services, like screenings and vaccinations, can help catch health conditions in their early stages when they are more treatable and manageable.
- 2. Cost Savings: Preventing health problems or catching them early can reduce the overall cost of healthcare. It may prevent the need for more expensive treatments down the road.
- 3. Improved Quality of Life: Preventive care can help you maintain better health and well-being, leading to a higher quality of life as you age.
- 4. Peace of Mind: Regular check-ups and preventive care can provide peace of mind, knowing that you are taking proactive steps to protect your health.
- 5. Medicare Coverage: Many preventive services are covered by Medicare at no cost to you, meaning you won't have to pay deductibles, copayments, or coinsurance for these services.

It's essential to discuss your healthcare plan and preventive care options with your healthcare provider to create a personalized approach that meets your specific needs and preferences. Keep in mind that coverage details can change, so it's a good idea to check with Medicare at 1-800-633-4227 or your healthcare provider for the most up-to-date information.

If you have questions or need help with Medicare, contact Statewide Health Insurance Benefits Advisors (SHIBA) volunteers. We're a free program offered through the Washington State Office of the Insurance Commissioner. Through the SHIBA program, the Olympic Area Agency on Aging provides free, unbiased, and confidential Medicare help

navigating Medicare in Clallam, Grays Harbor, Jefferson, and Pacific Counties.

- In Jefferson and Clallam Counties, bring your Medicare questions to a SHIBA walk-in, first-come-first served enrollment. Get our clinic schedule by going to our website calendar at https://www.o3a.org/news/events-calendar/
- For Grays Harbor and Pacific Counties, please call 1-360-532-0520.
- For assistance in **Forks**, please call 360-374-9496 x2.
- Email us at shiba.o3a@dshs.wa.gov.

Call SHIBA at 1-800-562-6900.

Wellness Corner: COVID Updates The Importance of Early Treatment for COVID



As of January, the number of COVID cases was on the rise again, with 1,500

Americans dying each week.¹ The risk of serious complications and death is significantly decreased when people take Paxlovid within five days from the onset of symptoms. And yet, only about 15% of people who are eligible take the drug, according to a study by the National Institutes of Health (NIH).

The study indicated that people are avoiding Paxlovid due to concerns about interactions with other drugs and the potential for a rebound case. There are also regional differences, with high-risk individuals in "red" areas less likely to use it. Cost can also be a factor: the medication is available free through 2024 for those with Medicaid and Medicare coverage, but subject to a copay for others.

Paxlovid cut the risk of death by 73%, according to the NIH study. The study concluded that 48,000 deaths could have been prevented during the time period covered. It also concluded that about 135,000 hospitalizations could have been prevented.

Those at high risk, for whom Paxlovid is recommended, include people 65 and older and those with certain conditions, such as diabetes, asthma, or obesity.

¹ https://www.nytimes.com/2024/01/04/health/paxlovid-covid-treatment.html

Building Dementia-Friendly Communities

The Olympic Area Agency on Aging (O3A) has received state funding as a pilot site to help and support people with possible



or diagnosed dementia to live their best lives and stay at home as long as possible. The program, known as the Dementia Resource Catalyst program, is designed to support people with dementia, including those in the early stages, to stay active, socially engaged, and in their own homes. Supporting

family caregivers is a key component to this program, ensuring that family members can stay healthy and continue to help their loved ones with dementia to stay at home.

With the coming "age wave"—a significant increase in the average age of the population nationally, in Washington, and locally—there will be more people experiencing dementia, while there will be fewer paid and unpaid caregivers. O3A supports options that help people stay safe and independent in their homes for as long as possible if that is where they choose to live. Alzheimer's disease is the fourth leading cause of death in Washington State, according to the Department of Health, and its prevalence increases with age after 65 years.

Bri Buchanan has joined us as the new Dementia Outreach Development Coordinator. Buchanan brings 15 years of hands-on dementia experience and has held dementia related management positions, performed community outreach and training, and served families in need. Her extensive knowledge of community education and training, creating and managing dementia-based programs, and caring for those living with dementia will help bridge local gaps. Her goals include building relationships between community services, first responders and our medical community in a comprehensive way that will help us support individuals and families who are dealing with dementia.

"Those living with dementia are still living. It's important to honor them and their journey by showing compassion and supporting them in areas they need," Buchanan said. "We also can't forget the importance of supporting the family members who are at home caring for their loved ones with dementia. Training, education, respite, and emotional support must be options that these caregivers can get quick access to." Her first project will be to design and implement a Dementia Training specific to staff and community professional needs. She will also be working to promote a Dementia Friendly Region that supports our communities in protecting the dignity and independence of those living with dementia and of their caregivers.

"We need stronger, more accessible community programs to support those who financially are not in a position to afford memory care environments and for those who wish to age in place," Buchanan added. "Building a dementia friendly Peninsula means everyday citizens have a base level knowledge and awareness of dementia—especially those working in service industries. We want to educate as many people as possible so caregivers and those living with dementia can come out of isolation and live socially healthy lives for as long as possible."

Why WA Cares Matters in Rural Coastal Washington

By Laura Cepoi, Executive Director

The wild beauty of our rural coastal region comes with certain costs: we give up ready access to specialty health



care, we travel longer for personal care services and food, and face unpredictable ferry schedules, Hood Canal closures, or road repair along the way. In addition, rural Americans are older on average than those in urban areas, and rural America has experienced the most rapid increase in disability rates over the past decade, according to the CDC.

These challenges can make it more difficult to age in place—to remain in our own homes when we face illness or disability or can no longer drive. But now we have more control over how we navigate long-term care disability so that we can continue to live where we want to live. WA Cares is a public long term care insurance program, the first of its kind in the nation. Working Washingtonians began contributing a small percentage of their income into the fund this past July. When you need care, you can access your earned benefit of \$36,500 (adjusted up to inflation) to pay for services beginning in July of 2026.

Rural residents in Washington have higher rates of disability among working aged adults, 18 - 64-year-olds, than our urban neighbors, which is compounded by our lack of access to diagnostics and preventative care. The rate of long-term disability among working aged adults hovers just above 14% in coastal Washington, but in Seattle it is 6.5% (U.S. Census Bureau Quick facts 2022).WA Cares provides freedom in how we manage the initial phases of a long-term disability by allowing us to choose which services make sense for us, such as hiring a family member to provide care and assistance or paying for equipment that will help you move within your own home without being dependent on someone else.

In our region, as in much of rural America, self-sufficiency is valued and goes hand in hand with preparation to ensure survival. Just as we need to understand weather related events and travel interruptions due to geographic isolation in order to manage travel, we also must account for medical emergencies and long-term disability in order to manage our future well-being.

But it isn't only older adults who need to be aware and plan for their needs. Tragically, many young people are seriously injured because of traumatic events. serious medical conditions such as cancer or traumatic brain injury can affect younger people too. A sobering fact for 20-year-olds is that more than 1 in 4 of them becomes disabled before reaching retirement age. We are legally required to carry car insurance and home insurance (if we carry a mortgage), regardless of the age of the car or house, to protect against accidents. If we want choices and want to be able to pivot in the event of an emergency, we need long term care insurance that we can count on too. Unexpected change happens, regardless of age.

Choosing where we live shouldn't take a toll on our longevity; yet rural residents live on average 2 years less than urban residents. Rural hospitals on the peninsula are more dependent on Medicare and Medicaid than non-rural areas, which also means that health care needs are different. WA Cares helps delay entry into Medicaid, allowing the beneficiary to use their benefits to fund long term care needs at home. Once you have met the contribution requirement, you can access your benefit when you need care, defined as requiring assistance with certain activities of daily living, such as transferring to a chair, bathing/showering, going to the toilet, eating, or managing medication.

We can use our WA Cares benefits to pay a family member to provide care, make our homes safe by adding grab bars, get food delivered or pay for wheelchairs, scooters and more to support us in how we want to live. WA Cares allows us to use the long-term care benefit to take care of ourselves sooner, rather than depleting our savings to qualify for Medicaid to pay for those services down the road. WA Cares keeps us independent and in control of the situation so we can choose to build the ramp or pay family member for care, or perhaps both-- it's up to you.

Learn more about the WA Cares Fund at https://wacaresfund.wa.gov/

This article first appeared in the Daily World, January 20, 2024 and was reprinted in Lifelong Journeys, an advertising insert for the Peninsula Daily News and Sequim Gazette, in February 2024.

Thank You, Grays Harbor Community Foundation!

O3A is grateful for the recent grant of \$25,000 from the Grays Harbor Community Foundation (GHCF). The grant funds Senior Emergency and Minor Home Repairs for seniors on the Harbor who have a one-time emergent need.



Funds have been used in the past to pay utility bills, purchase wood pellets for heating, repair and replace broken appliances, fix unsafe porches and railings, install grab bars, and much more.

A huge thank you to GHCF for its support!

TRENDING HEALTHY

SPOTLIGHT

Food Insecurity for Seniors May Get Worse Without Legislative Action

Food insecurity is a significant problem across our state, and it's especially critical in rural areas. In fact, three of the four counties in O3A's service region are among the five counties experiencing the highest rates of food insecurity in the state:
Clallam County (#5), Grays Harbor (#4), and Pacific (#3). The top two counties, Okanogan and Ferry, are rural counties in north central Washington.

At the same time, senior nutrition funding is on the cutting block. Unless the legislature approves additional funding in the new budget, senior nutrition faces a 39% cut. This funding pays for congregate meals at senior centers, home-delivered meals for those who are housebound or have no transportation, mobile food pantries, and the senior farmer's market program, which provides fresh, healthy produce.

Per an action alert last month, "These programs are on the brink of losing funding that helps them serve nearly 1.4 million meals for 18,686 seniors and people with disabilities." (Washington Association of Area Agencies on Aging/W4A) Advocates are asking legislators to include \$15 million in funding for Area Agencies on Aging, which fund these critical services. At the time of this writing, it is unknown whether the new budget will include the requested funds. Without it, many more seniors will be without access to enough nutritious food and will be at increased risk for poor health outcomes.

In Clallam County, 14.6% of the population is food insecure (33.9% higher than the national average). In Grays Harbor, the number is 14.7% (34.9% higher than the national average). For Pacific County, it's 15.2% (39.4% higher).

O3A contracts with several congregate and home-delivered meal providers, but many of the most remote areas lack the economies of scale necessary to support those services. Some of these areas are served by the MAV (Mobile Assistance Van), which takes shelf-stable food and frozen protein to 23 sites across the four counties as well as doing one-time events when there is capacity. (For a schedule of MAV events, please visit o3a.org/mav)

O3A will issue an RFP (Request for Proposals) this spring, allowing new contractors to apply. The hope is that some smaller local providers may be able to provide congregate and/or home-delivered meals to a more localized area that can't easily be served by larger regional providers.

In addition to the nutrition benefits, congregate and home-delivered meals provide social contact and help alleviate social isolation and loneliness. That contact also helps ensure that someone sees the individual regularly and can offer assistance if there is reason to believe the person's health or safety is in jeopardy.

Senior nutrition is an important part of healthy aging. O3A is committed to advocating for the best options possible to support the availability of nutritious food and increasing availability for those who are struggling to get access because of mobility, income, transportation, and/or other barriers.

¹ <u>https://stacker.com/washington/counties-highest-rate-foodinsecurity-washington</u>
² op. cit.

Editor's Invitation:

Is there a topic related to healthy aging that you want to learn more about? If so, let us know!

Please send comments to michelle.fogus@dshs.wa.gov



www.o3a.org