



The Bullthistle Bulletin

Chenango County Area Agency on Aging
5 Court Street
Norwich, NY 13815
607-337-1770



**Office for
the Aging**

October - November - December 2019 Issue

HEATING SEASON IS RIGHT AROUND THE CORNER!

HEAP (Home Energy Assistance Program) helps low-income people pay for their energy bills. If your bills are more than you can handle, HEAP may be able to help you heat your home. The Chenango County Area Agency on Aging handles applications for the 60 and older living in Chenango County. The program will start on November 12, 2019.

HEAP may be able to help you if your source of heat is:

- * Electricity * Propane * Natural Gas * Wood/Wood Pellet
- * Kerosene * Fuel Oil * Coal * Corn

For more information please call the Area Agency on Aging at 607-337-1770



Enchantment Under the Sea “Senior Prom”



Join us for an Evening Dinner at our Norwich Senior Center located at the Norwich Family YMCA in the Community Room

Thursday, October 24th

The Evening Begins at 5:30pm with Dinner at 6:00pm

Music and Dancing by DJ Rhino

Sponsored by the Chenango Youth Philanthropy Council

Our Menu

Roast Beef with Gravy

Twice Baked Potato

Tossed Salad, Green Beans with Red Peppers

Whole Wheat Rolls and Cheesecake

Senior Center Activities!

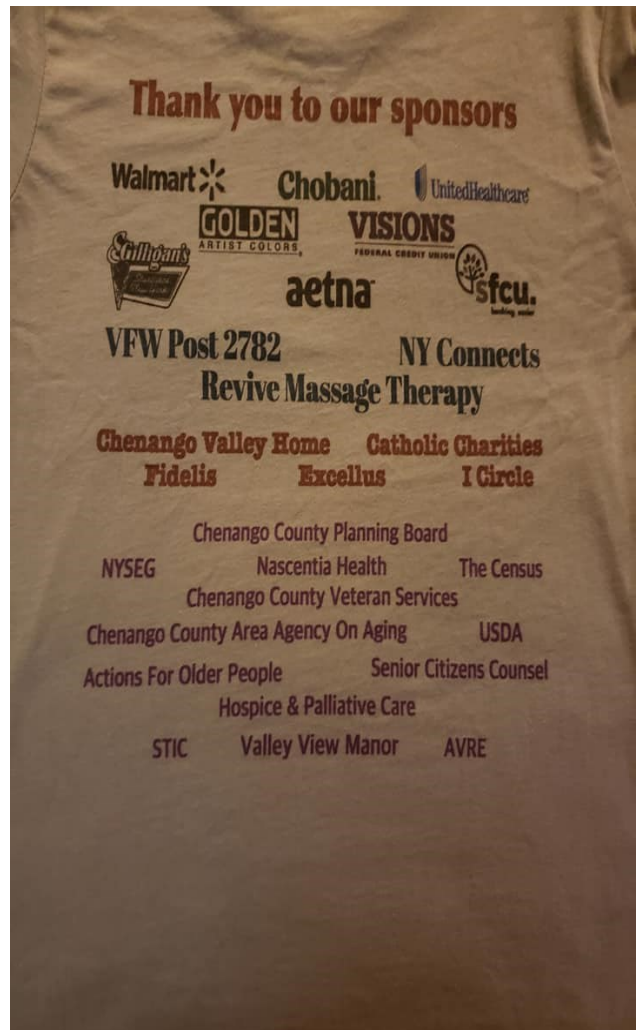


Senior Day at The Chenango County Fair 2019



SUMMER
FUN!

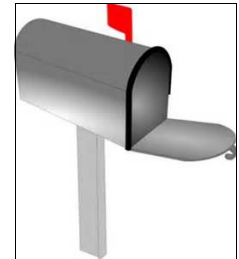




Dear Marci,

I applied for the Medicare Savings Program and just received a letter stating that I am eligible for the Qualified Medicare Beneficiary (QMB) level of the Medicare Savings Program. What benefits and protections are included with QMB?

-Jonah (Tampa, FL)



Dear Jonah,

Qualified Medicare Beneficiary (QMB) is one of three main Medicare Savings Programs (MSP's). The MSPs help pay your Medicare costs if you have limited income and savings. If you qualify for QMB, it will pay your Medicare Part A and B premiums and cost-sharing. Cost-sharing can include deductibles, coinsurance, and copayments. Federal law prohibits Medicare providers from billing people enrolled in the QMB program for any Medicare cost-sharing. This means that if you have QMB, Medicare providers should not bill you any Medicare-covered services you receive.

More specifically, if you have QMB and are enrolled in Original Medicare, you should not be billed when receiving a Medicare-covered service from either:

- A participating provider: A provider who accepts Medicare and always takes assignment. Taking assignment means that the provider accepts Medicare's approved amount for health care services as full payment.
- A non-participating provider: A provider who accepts Medicare but has not agreed to take assignment in all cases.

If you have QMB and are enrolled in a Medicare Advantage Plan, you should not be billed when receiving a plan-covered service from:

- In network providers, as long as you meet your plan's coverage rules, such as getting prior authorization to see certain specialist.

To protect yourself from improper billing, beware that:

- Original Medicare and Medicare Advantage providers who do not accept Medicaid must still comply with improper billing protections and cannot bill you.
- You keep your improper billing protections even when receiving care from Medicare providers in other states (Note: you can be billed if you are enrolled in a Medicare Advantage Plan and see an out-of-network provider, or if you have Original Medicare and see an opt-out-provider).
- You cannot choose to waive these protections and pay Medicare cost-sharing, and a provider cannot ask you to do this.

Note: some states may impose Medicaid copays for certain Medicare-covered services. Medicare and Medicaid should pay the majority of the cost, leaving you a nominal copay. Contact your local Medicaid office to learn more about Medicaid copays in your state.

Remember that if you have QMB, the Medicare providers you see must accept Medicare payment and any QMB payment as the full payment for any Medicare-covered services you received. Providers who violate improper billing protections may be subject to penalties. If you have issues with a provider who continually attempts to bill you, or if you have unpaid cost-sharing bills that have been sent to collection agencies, call 1-800-MEDICARE or contact your Medicare Advantage Plan.

- Marci

Emergency Food Packs



During the winter months, weather can be unpredictable due to freezing temperatures with wind, snow & ice. Dangerous driving conditions and road closures can prevent our volunteer drivers and First Transit Drivers from delivering meals to our Home Delivered Meal clients. Winter weather can also make it dangerous or impossible for our Senior Center participants to be able to get out to visit the centers.

Due to unpredictable weather we have emergency food packs available and the packs can be used in the case of inclement weather and road closures. Beginning in December each Home Delivered Meal client will receive an emergency food pack and can order emergency food packs throughout the winter as needed. Senior Center Participants can order Emergency Food Packs through the Senior Center Site Manager and the pack will be delivered to the Senior Center.

The emergency food packs include canned soup, canned tuna fish, canned fruit, juice, crackers and a dessert bar. A suggested contribution of \$3.00 per emergency pack is appreciated, however not required and no Senior will be denied an Emergency Food Pack for inability to pay.

EMERGENCY FOOD PACK FORM

NAME: _____

ADDRESS: _____

PHONE #: _____

Please check appropriate box:

Home Delivered Meal Participant OR Senior Center Participant

Senior Center Name _____

Emergency Food Pantry

Never Leave Your Cupboard Bare!!

Have a variety of nutritious foods on hand for quick easy meals when bad weather or illness keeps you home.

The foods listed do not need to be refrigerated, are economical, and require little preparation. Purchase several foods from each group. Use and replace item at least once every 6 months.

Meat and Meat Substitutes

Tuna Fish Spaghetti & Meatballs
Beef Stew Macaroni & Cheese
Canned Chicken Hearty or Chucky Soups
Condensed Soups (Split Pea, Minestrone or Chili Beef)
Peanut Butter Baked Beans

Milk and Milk Products

Instant Cocoa Mix
Pasteurized Process Cheese Spread
Non Fat Dried Milk or Evaporated Milk

Other Foods

Jam or Jelly Coffee or Tea Vegetable Oil
Instant Soups Egg Custard Mix

Fruits and Vegetables

Raisins Fruit Juice Dried Prunes
Instant Mashed Potato
Tomato or Vegetable Juice Bean Salad
Pickled Beets Canned Veg or Fruits

Cereals, Bread, Pasta

Rice Muffin Mix Bread Sticks Noodles
Whole Wheat Crackers Hot & Cold Cereal



It is important to keep some bottled water on hand. Combine foods from Emergency Food Shelf to make meals that provide protein, calories, vitamins and minerals. Variety is not only the spice of life, it is the key to good health. Be sure to include plenty of liquids.

Menu Suggestions for Breakfast, Lunch and Dinner from the Emergency Food Shelf:

Beef Stew
Pear and Cheese Salad
Graham Crackers
Milk

Hot Vegetable Juice
Macaroni & Cheese Dinner
Bean Salad Break Sticks and Fruit Salad

Chucky Soup over Mashed Potato
Green Beans
Muffin
Milk

Apple Juice
Split Pea Soup
Whole Wheat Crackers
Egg Custard With Raisins

Orange Juice
Oatmeal-Raisins-Milk
Hot Cocoa



Increased Protein Is Important As We Age

Debbie Zampetti, RD

In recent years, when people talk about nutrition, most of the emphasis has been on how fats and carbohydrates impact our health. Protein, the third of our major nutrients seems to have taken a back seat. Nutrition experts are now rethinking the role that protein plays in our health, especially for older adults.

We know that protein plays major roles in the following ways:

- It makes up part of the structure of hair, nails and skin.
- It is a necessary part of enzyme and hormone production, both important for running day-to-day functions of the body.
- It not only forms part of muscle structures such as the heart and all our internal organs, but also maintains them. For example, protein helps to keep the heart, which is our most vital organ muscle, strong for pumping blood and the diaphragm for breathing.
- Protein helps in fighting infection.

The current Recommended Dietary Allowance for protein is 55 grams for females and 65 grams for males. This level is assumed to be enough to cover the basic needs of a healthy adult and to prevent protein deficiency, but perhaps this level is inadequate for all the critical jobs that protein is expected to do as we age, especially if we have health problems.

Reasons why we might need more protein:

1. Type 2 Diabetes

A diet with a higher percent in protein and, therefore, lower percent in carbohydrates can help moderate blood sugar level after a meal by producing lower insulin response to the food composition. The result is an improved overall long term blood sugar control.

2. Heart Disease

A diet that is high in lean proteins may help reduce risk factors for heart disease simply by lowering blood pressure, cutting total cholesterol, elevating the good cholesterol (HDL's), and affecting the bad cholesterol (LDL's) so that they are less likely to damage arteries.

3. Bone Health

Although the connection between protein and our bones is not clear and more research needs to be done, a higher protein intake, when there is enough calcium in the diet, seems to be linked with greater body mass and fewer fractures.

4. Maintaining strong, large muscles

Eating more protein and doing routine strength training exercises have been shown to delay muscle loss in older adults. This gradual loss of muscle (called Sarcopenia) can affect our balance and increase the risk of falling.

Increased Protein Is Important As We Age (Continued)

5. Weight Management

Nutrition experts believe that a high protein meal can stave off hunger longer. To do this, we recommend that 30% of the calories from any meal come from protein. Protein stays longer in your digestive tract as it takes longer to breakdown, helping you stay full for a longer period of time. Protein foods also demands more energy (calories) from your body to perform the digestive process.

Remember that it is important to increase protein in our diet, but be careful of the overall calories. When protein in a meal is increased, the other parts (fat and carbohydrates- sugars and starches) must be reduced so that the overall calories will remain the same. Otherwise, excess calories whether they come from protein or not, when not needed by the body, will convert to fat and be stored. People who have kidney or liver function problems should check with their physician before modifying their diets. For that matter, always consult with your family doctor before making any changes to your diet especially if you have any health issues.

2019 Medicare Open Enrollment

October 15 - December 7th

Every year a Medicare Open enrollment Period, correctly referred to as the Annual Enrollment Period, is made available for people who qualify for Medicare benefits.

During this time, anyone who is eligible for Medicare Parts A and B can enroll in or make changes to their Medicare coverage. If you're happy with your current plan and all the changes for next year, then there's nothing you need to do! If you do make changes they will become effective on January 1, 2020.

Your insurance provider will send you a letter called the "Annual Notice of Change." It's important to take a few minutes to review this letter. This letter is sent out each year in September and will inform you of any changes to your plan such as premiums, copays, pharmacy networks, and drug formularies.

You want to change your plan if there is a significant premium increase, your doctor is no longer in your Medicare Advantage plan network, or your medications are no longer covered.

Beneficiaries on Medicare Advantage plans can change coverage during the open Enrollment Period from January 1st through March 31st. New policies go into effect the first day of the following month.

Knowledge is power; if you're aware of the opportunities available to you then there is a possibility for a better plan, financial savings and higher quality of health care for you.

Please call our office at 607-337-1770 to schedule an appointment with a counselor to have your current insurance checked to make sure it is the best plan for you!





VETERAN'S NEWS

Long-Delayed Western NY Veteran Cemetery Moves Forward

Construction will soon begin on a long-delayed veteran cemetery in Pembroke, NY, with the first burials taking place as early as November 2020. In a statement given by Sen. Chuck Schumer's office, announced that the Department of Veterans Affairs selected Global Urban Enterprise as the lead contractor for the initial, \$23 million dollar phase of construction, clearing the way for work to start on the Western New York National Veterans Cemetery.

The 132-acre site, located about 35 minutes from Buffalo, will initially include grave sites for 4,000 veterans, spouses and dependent children. The next closest national cemetery is in Bath, NY and veterans' groups have lobbied to establish a site closer to Western New York's roughly 96,000 veterans and family members.

Schumer said he would push for an additional \$10 million dollars in federal funds for the project. "(It) helps guarantee Western New York's military veterans will have a proper burial, at a site close to the homes, families, and the very communities they dedicated their lives to defend and serve," Schumer said.

Where are veterans buried?

The Department of Veterans Affairs (VA) National Cemetery Administration maintains 136 national cemeteries, one national Veterans burial ground and 33 soldiers' lots and monument sites in 40 states and Puerto Rico. Listed below are some of those sites.

Bath National Cemetery, Bath, NY

Gerald B.H. Solomon Saratoga National Cemetery, Schuylerville, NY

Cypress Hills National Cemetery, Brooklyn, NY

Calverton National Cemetery, Wading River, NY

Albany Rural Cemetery, Albany, NY

Woodlawn National Cemetery, Elmira, NY

Long Island National Cemetery, Wyandanch, NY

Sampson Veterans Memorial Cemetery, Romulus, NY

Calverton National Cemetery, Calverton, NY

**BEWARE OF PEOPLE
PRETENDING TO BE
FROM SOCIAL SECURITY**

Social Security is committed to protecting your personal information. We urge you to always be cautious and to avoid providing sensitive information such as your Social Security number (SSN) or bank account information to unknown people over the phone or internet. If you receive a call and aren't expecting one, you must be extra careful. You can always get the caller's information, hang up, and—if you do need more clarification—contact the official phone number of the business or agency that the caller claims to represent. Never reveal personal data to a stranger who called you.

There's a scam going around right now. You might receive a call from someone claiming to be from Social Security or another agency. Calls can even display 1-800-772-1213, Social Security's National Customer Service number, as the incoming number on your caller ID. In some cases the caller states that Social Security does not have all of your personal information, such as your SSN, on file. Other callers claim Social Security needs additional information so the agency can increase

your benefit payment, or that Social Security will terminate your benefits if they do not confirm your information. This appears to be a widespread issue, as reports have come from people across the country. These calls are not from Social Security.

Callers sometimes state that your SSN is at risk of being deactivated or deleted. The call then asks you to call a phone number to resolve the issue. People should be aware that the scheme's details may vary; however, you should avoid engaging with the caller or calling the number provided, as the caller might attempt to acquire personal information. Social Security employees occasionally contact people by telephone for customer-service purposes. In only a very few special situations, such as when you have business pending with us, will a Social Security employee request that the person confirm personal information over the phone.

Social Security employees will never threaten you or promise a Social Security benefit approval or increase in exchange for information. In those cases, the call is fraudulent, and you should just hang up. If you receive these calls, please report the information to the Office of the Inspector General at 1-800-269-0271 or online at oig.ssa.gov/report.

Protecting your information is an important part of Social Security's mission. You work hard and make conscious effort to save and plan for retirement. Scammers try to stay a step ahead of us, but with an informed public and your help, we can stop these criminals before they cause serious financial damage.

The Social Security Star June 2019



Medicare's new mobile app

Is your medical item or service covered by Medicare Part A and/or Part B? Now there's a quick way to check!

Download Medicare's official "What's Covered" app—available for free on the App Store and Google Play.

Use the app at the doctor's office, in the hospital, or anywhere you use your smartphone or tablet. Once it's installed, you can use "What's Covered" even when you're offline.

Search or browse in the app to learn what items and services are covered, how to get covered benefits, and basic cost information. Learn more about the new app at [Medicare.gov](https://www.medicare.gov).



Halloween Word Scramble

1. GEADYVRRRA
2. TRAET
3. NSEANFETKNIR
4. CTRIK
5. GSOTH
6. NHGITRAME
7. HUNEADT
8. NOLUCARD
9. RYOTA
10. OONM
11. UYMMM
12. OKLSNTEE
13. SONTEMR
14. NCDAY
15. EIPVRMA
16. COTESUM
17. WHCTI
18. FNICFO
19. RCASME



Prescription for a Healthy Holiday

Tips to Safeguard Your Medicines

For many people, the holiday season means extra visits with family and friends, creating fun memories, sharing traditions, and enjoying the warm glow of family.

With all the decorating and activities, it's easy to let safety slip off your To Do List. But this is an excellent time to make sure powerful medicines don't fall into the wrong hands.



Prescriptions and over-the-counter remedies we rely on can be dangerous to others, and not just to children. It is true that about 60,000 young children are taken to the emergency room each year because they got into medicines left within easy reach. Unfortunately, older kids and teens often experiment with drugs they find in someone else's medicine cabinet.

A surprising number of heroin users started abusing drugs by taking opioid pain killers stolen from a family member. In fact, drug addiction crosses ALL age groups, and it often starts with prescription medicines.

Six ways to safeguard your prescription drugs – and your loved ones:

1. Keep all medicines and over-the-counter items—especially cough syrup, sleep aids, and motion sickness medicine—locked up, or move them to a place where they won't be easily found.
2. Sort through all your medicines and get rid of old or unused ones. The label will tell you how to dispose of them. Before you put them in the trash, mix them with something that tastes bad, like cat litter or old coffee grounds, and then put them in a sealed bag or old container and place it in the trash. (Most medicine should not be flushed because it gets into creeks and rivers.) Ask the pharmacy or police department about “drug take-back” programs for an even safer method of disposal.
3. Keep track of your medicines on a regular basis (weekly), especially opioids or other pain killers, including how many pills you should have.
4. Check around your home for old medicines. Purses, coat pockets, kitchen cupboards, bureau drawers, and hall closets are common places to find old medicines.
5. If you take prescriptions with you when staying in someone else's home, quietly ask your host or another trusted adult to lock them up or find a secure place to store them. Suitcases and purses are not safe places to keep powerful prescriptions.
6. Keep the Poison Help number handy in case of emergencies: (800) 222-1222.

More information on how to avoid becoming and “unwitting supplier” of prescription medications is available from the [Food and Drug Administration](https://www.fda.gov).

Driving Safety and Alzheimer's Disease

Good drivers are alert, think clearly, and make good decisions. When a person with Alzheimer's disease is not able to do these things, he or she should stop driving. But, he or she may not want to stop driving or even think there is a problem.

As the caregiver, you will need to talk with the person about the need to stop driving. Do this in a caring way. Understand how unhappy the person may be to admit that he or she has reached this new stage.

Safety First

A person with some memory loss may be able to drive safely sometimes. But, he or she may not be able to react quickly when faced with a surprise on the road. Someone could get hurt or killed. If the person's reaction time slows, you need to stop the person from driving.

Here are some other things to know about driving and memory loss:

- The person may be able to drive short distances on local streets during the day but may not be able to drive safely at night or on a freeway. If this is the case, then limit the times and places the person can drive.
- Some people with memory problems decide on their own not to drive, while others may deny they have a problem.

Signs that the person should stop driving include new dents and scratches on the car. You may also notice that the person takes a long time to do a simple errand and cannot explain why, which may indicate that he or she got lost.

To find out if a person with Alzheimer's is still competent to drive, watch him or her drive at different times of the day, in different types of traffic, and in different road conditions and weather. If riding with the driver is not possible, follow the driver in another vehicle. Over time, a picture will emerge of things the driver can and cannot do well.

When Driving Becomes Unsafe

Here are some ways to stop people with Alzheimer's disease from driving:

- Try talking about your concerns with the person.
- Take him or her to get a driving test.
- Ask the doctor to tell him or her to stop driving. The doctor can write, "do not drive" on a prescription pad, and you can show this to the person.
- Hide the car keys, move the car, take out the distributor cap, or disconnect the battery.



Driving Safety and Alzheimer's Disease (Continued)

Finding Other Transportation Options

If a person with Alzheimer's can no longer drive, find other ways that the person can travel on his or her own. Contact your local Area Agency on Aging office or eldercare locator for information about transportation services in your area. These services may include free or low-cost buses, taxi service, or carpools for older people. Some churches and community groups have volunteers who take seniors wherever they want to go. Family and friends are another great resource.

If the person with Alzheimer's disease won't stop driving, ask your State Department of Motor Vehicles about a medical review. The person may be asked to retake a driving test. In some cases, the person's license could be taken away.

For More Information About Driving Safety and Alzheimer's

NIA Alzheimer's and related Dementias Education and Referral (ADEAR) Center

1-800-438-4380 (toll free)

adear@nia.nih.gov

www.nia.nih.gov/alzheimers

The National Institute on Aging's ADEAR Center offers information and free print publications about Alzheimer's disease and related dementias for families, caregivers, and health professionals. ADEAR Center staff answer telephone, email, and written requests and make referrals to local and national resources.

Eldercare Locator

1-800-677-1116 (toll free)

<https://eldercare.acl.gov>

www.nia.nih.gov



HALLOWEEN WORD SCRAMBLE ANSWERS

- | | | |
|-----------------|--------------|-------------|
| 1. GRAVEYARD | 7. HAUNTED | 13. MONSTER |
| 2. TREAT | 8. CAULDRON | 14. CANDY |
| 3. FRANKENSTEIN | 9. PARTY | 15. VAMPIRE |
| 4. TRICK | 10. MOON | 16. COSTUME |
| 5. GHOST | 11. MUMMY | 17. WITCH |
| 6. NIGHTMARE | 12. SKELETON | 18. COFFIN |
| | | 19. SCREAM |



WINTER WEATHER CLOSINGS

(ALSO ON TELEVISION NOW!)

It's that time of year when the MEAL PROGRAM may be closed due to the weather.

Please listen to the Norwich radio station WKXZ FM 94/ WCHN AM 970 and on television on WBNG TV 12. The closing will be announced as "Chenango County Senior Meals and Centers". This includes Senior Centers and all Home Deliveries. You may also call the Area Agency on Aging at 337-1770 after 8:30 AM if there is a question regarding closures.



*****NOTE*****

McDonough Evening Dines

Dinner will now be served at 5:00pm instead of 5:30pm

To Make a Donation, Subscribe or Change of Address

Please clip and send this coupon along with your contribution payable to or address change to:

**Chenango County Area Agency on Aging
5 Court Street
Norwich, NY 13815**

The Chenango County Area Agency on Aging appreciates and gratefully accepts financial contributions to help off-set needs beyond available resources.

Name _____
New Address _____
City _____ State _____ Zip _____
Phone _____
Email _____

I would like my contribution to go to:

- Home Delivered Meals
- Legal Services
- Health Insurance Counseling
- Where it is most needed
- In Memory of _____

The Mission of the Chenango County Area Agency on Aging is to advocate for, plan and provide a coordinated system of services designed to help county residents 60 years of age and older remain independent, secure and active in their community. The Chenango County Area Agency on Aging does not discriminate on the basis of race, color, creed, religion, age, sex, national origin or sponsor, or sexual orientation.