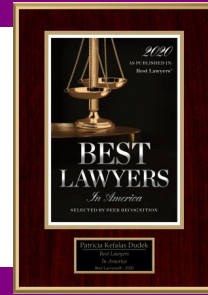


Patricia E. Kefalas Dudek & Associates

Passionate Advice and Advocacy for all
Stages of Life



September 2019



Protect Seniors' Access to SNAP

Tell USDA to Protect Seniors' Access to SNAP! (Justice in Aging)

The Trump Administration has [proposed a new rule](#) that would restrict broad-based categorical eligibility for the Supplemental Nutrition Assistance Program (SNAP). This dangerous proposal would take away vital food and nutrition from 3 million people, including over 600,000 seniors.

Specifically, the proposed rule eliminates the state option to use Broad Based Categorical Eligibility (BBCE), which is currently used by over 40 states to waive restrictive asset tests and ease administrative burdens. Congress rejected this proposed change by removing it from the last year's Farm Bill, but now the US Department of Agriculture (USDA) is trying to limit SNAP eligibility through regulations.

Tell the USDA's Food and Nutrition Service to protect SNAP for older adults and their families.

Use the [National Council on Aging's comment portal](#) to send a personalized comment opposing this proposed rule today! Organizations can use the resources below to [submit comments on regulations.gov](#).

The 60-day public comment period ends on September 23.

More Information and Resources:

[NCOA's Hunger and Nutrition Advocacy Toolkit](#)

[Center on Budget and Policy Priorities Report](#)

[Food Research and Action Center's Toolkit](#)

Justice in Aging
(202) 289-6976
info@justiceinaging.org
[View as webpage](#)

SUICIDE PREVENTION TRAINING OPPORTUNITY

OAKLAND COUNTY
Suicide Prevention
TASK FORCE



safeTALK

Monday, October 7, 2019: 8:30 a.m. – 12:00 p.m.

Wednesday, December 4, 2019: 1:00 – 4:30 p.m.

Monday, February 10, 2020: 1:00 – 4:30 p.m.

Monday, May 18, 2020: 8:30 a.m. – 12:00 p.m.

Oakland County Executive Office Building Conference Center
2100 Pontiac Lake Road Building 41 West, Waterford

****Register:** bit.ly/1cQsPd1 **

safeTALK is a half-day training that prepares anyone over the age of 15 to become a suicide-alert helper. safeTALK-trained helpers learn to recognize verbal and nonverbal signs from people with thoughts of suicide and take action by connecting them with life-saving intervention resources.

QUESTIONS? Contact Kat Polmear at 248-858-7171 or polmeark@oakgov.com

NURSE ON CALL PUBLIC HEALTH INFORMATION
800.848.5533 NOC@OAKGOV.COM
OAKGOV.COM/HEALTH



HELP IS AVAILABLE 24/7

Call/Text: 800.231.1127 • Chat: commongroundhelps.org

10-2019 07/19

Eldercare: How Does the United States Stack Up?

In my [prior article on eldercare earlier this week](#), I referenced a [Washington Post article](#) on the shortage of workers in the field in Maine. Here's a paragraph somewhere in the middle of the text:

"Other countries have responded to their aging populations with government-provided care, and many have beefed up the number of aides and providers. America and England are the only economically developed nations in the West that do not provide a universal long-term-care benefit, said Howard Gleckman, author of a book about long-term care and a senior fellow at the Urban Institute, a nonpartisan think tank."

Is it true that we're nearly alone in not having solved this problem? Since I'm a sucker for international comparisons, let's take a look at the data. (And yes, there's a lot of data to take a look at.)

[Click Here to Continue Reading](#)

MDHHS awarded \$1.66 million grant to transform health care for Michigan children with epilepsy

Michigan children with epilepsy will see improved outcomes through expanded services funded by a \$1.66 million grant that the Michigan Department of Health and Human Services (MDHHS) has received.

The 4-year-grant for \$416,000 annually from the Health Resources and Services Administration's Maternal Child and Health Systems Branch will fund the Michigan Pediatric Epilepsy Project.

The focus of the grant is to improve health outcomes for children and youth with epilepsy, especially those in Michigan's rural and medically underserved areas. This grant enables the Michigan Children's Special Health Care Services Division to expand upon current efforts to improve access to specialized pediatric epilepsy services.

"This new funding opportunity provides greater access to comprehensive services for children, youth and their families living with epilepsy," said MDHHS Director Robert Gordon. "By partnering with four of the major epilepsy centers in Michigan – Beaumont Children's hospital, Children's Hospital of Michigan, Helen DeVos Children's Hospital, and Mercy Health Hauenstein Neurosciences – epilepsy patients and their families will have better access to specialty care and more successful transitions to adult specialists to effectively manage their epilepsy."

[Click Here for the Full Press Release](#)

Michigan wins \$4 million CDC grant to improve monitoring of residents' toxic chemical exposure

The Michigan Department of Health and Human Services (MDHHS) is among six state health departments nationwide awarded a grant from the U.S. Centers for Disease Control and Prevention (CDC) supporting the expansion of statewide toxic chemical biomonitoring.

Biomonitoring is the measurement of environmental chemicals in body tissues or fluids, such as blood or urine, to determine the amount of chemical that actually enters the body. Data collected from biomonitoring helps identify at-risk population groups and assess the effectiveness of interventions to prevent harm.

MDHHS will use the CDC grant funding – about \$4 million over five years – to support two new programs. The first, the Michigan Chemical Exposure Monitoring program (MiChEM), will test for chemicals in a group of adults selected to represent Michigan adults statewide. These chemicals include per- and poly-fluoroalkyl substances (PFAS), polychlorinated biphenyls (PCBs), certain pesticides and heavy metals such as arsenic, mercury and lead.

The second program funded by CDC's grant will measure PFAS among Michigan firefighters to improve understanding of the ways they may be exposed to PFAS on the job. Data from recent scientific studies show that firefighters have levels of certain types of PFAS in their blood that are higher than the national average.

[Click Here to Read the Full Press Release](#)

Grandparents Raising Grandchildren May Qualify for the Earned Income Tax Credit

Raising a grandchild can be tough financially, but grandparents should be aware that there is a tax credit available that could help them. Working grandparents who are supporting their grandchildren may qualify for the earned income tax credit, which could reduce the amount they pay in taxes by thousands of dollars or allow them to receive a refund.

The earned income tax credit is a benefit for working people with low to moderate incomes and dependents, and this includes grandparents. (Taxpayers without a dependent may also qualify, but it is more difficult.) To be able to claim the tax credit, you must be raising a child who meets the following criteria:

[Click Here to for the Criteria & Full Article](#)

Medicare Plan Finder Gets an Upgrade for the First Time in a Decade

For the first time in a decade, the Centers for Medicare & Medicaid Services (CMS) today launched a modernized and redesigned [Medicare Plan Finder](#). The Medicare Plan Finder, the most used tool on Medicare.gov, allows users to shop and compare Medicare Advantage and Part D plans. There are more than 60 million people with Medicare coverage. The updated Medicare Plan Finder also provides them and their caregivers with a personalized experience through a mobile friendly and easy-to-read design that will help them learn about different options and select coverage that best meets their health needs. The new Plan Finder walks users through the Medicare Advantage and Part D enrollment process from start to finish and allows people to view and compare many of the supplemental benefits that Medicare Advantage plans offer.

[Click Here to Continue Reading](#)

New Rule May Make It Harder for Medicare Beneficiaries to Receive Home Care

It may become harder for Medicare beneficiaries to find home health care due to a new rule from the Centers for Medicare and Medicaid Services (CMS).

Starting in January 2020, Medicare will reimburse home health agencies at a lower rate when they care for patients who have not been admitted to a hospital first. CMS estimates that it will pay home health agencies approximately 19 percent more for a patient who hires the home health agency directly after leaving a hospital than a patient who was never in the hospital or was only an outpatient. (The Center for Medicare Advocacy calculates that the disparity could be as high as 25 percent.)

[Click Here for the Full Article](#)

One of Five: Unacknowledged and Unprotected.

March 25, 2019 Michigan Attorney General Dana Nessel held a press conference announcing a task force primarily charged with reforming a court system rooted in medieval English law.

According to state and national activists, it's a system that has been left unchecked for decades and is now so broken that it has led to unprecedented judicial overreach and the eradication of the constitutional, civil and human rights of thousands of Americans who suffer from resulting neglect, isolation, abuse, torture and theft on a massive scale, allegedly at the hands of the same individuals assigned to protect them.

Both in Michigan and nationwide, the system is called "guardianship" and/or "conservatorship." When an individual is declared unable to manage their own affairs by a probate or family court judge, he or she becomes a "legally incapacitated ward." Although they are complete strangers to each other, a court-appointed professional guardian or conservator assumes control over every aspect of their ward's life. That includes their homes, mail, bank accounts, retirement and social security income, IRAs, life and health insurance, wills and trusts, property, passports, driver's licenses and voter registration cards.

Guardians also dictate where their wards will live, whether they can own a cell-phone or a computer, where they may or may not go, who they are and are not allowed to see and what they are or are not allowed to eat. In fact, any personal, professional and medical decisions are no longer legally the ward's own, including requests to doctors to dispense or withhold medication, and whether a Do Not Resuscitate (DNR) order should be enabled and enforced.

Michigan's professional guardians and conservators are culled from a pool of county public administrators, estate and probate attorneys or private guardianship companies.

In as little as a year, wards have been rendered completely indigent and reliant upon social services and benefits such as Medicaid. Their homes are gone, as are their savings accounts, IRAs, investment accounts, cars, personal belongings, keepsakes, heirlooms, jewelry and even their clothing. Every dollar of their social security, disability income or pensions falls under the control of their guardians with the exception of an allowance as low as \$60 per month.

In Michigan, it is not only legal but shockingly easy for an individual to suddenly find themselves under a guardianship. It is a process that begins with a two-page petition filed in a county probate court with no corroborating medical evidence of incapacity and, often, without the knowledge of the prospective ward or their families.

[The Fortress Part One of Five: Unacknowledged and Unprotected.](#)

[The Fortress Part Two of Five: Protected in Hell](#)

[The Fortress Part Three of Five: Profiting from Protection](#)

[The Fortress Part Four of Five: The Consequences of Protecting Justice](#)

[The Fortress Part Five of Five: Protected by Secrecy and Ageism](#)

Dental Care Becoming More Disability Inclusive

Dental care rarely gets attention as a disability rights issue, but numerous people with disabilities suffer from inadequate and inaccessible dental care. According to a [2012 study](#) of more than 4,700 patients with intellectual and developmental disabilities, one-third had cavities and 80 percent had serious gum infections.

Among the culprits are dental practices and hospitals with inadequate equipment and staff uneducated on how to provide inclusive services, [according to a Kaiser Health News investigation](#).

Changes appear to be coming, however. In February 2019, the [American Dental Association](#) (ADA), the national governing body for dental education programs, amended its ethics policy to bar dental facilities from turning away people with disabilities. The ADA's [Code of Conduct](#) further specifies that if the facility lacks the resources to accommodate a certain patient, it must refer that person to a facility that can.

[Click Here to Access the Full Article](#)

A Young Woman, A Wheelchair And The Fight To Take Her Place At Stanford

Sylvia Colt-Lacayo is 18, fresh-faced and hopeful, as she beams confidence from her power wheelchair. Her long dark hair is soft and carefully tended, and her wide brown eyes are bright. A degenerative neuromuscular disease, similar to muscular dystrophy, has left her with weak, underdeveloped muscles throughout her body, and her legs are unable to support any weight. Each time she needs to get in or out of her wheelchair — to leave bed in the morning, use the bathroom, take a shower, change clothes — she needs assistance.

Throughout her young life, Sylvia has been told her disability didn't need to hold her back. And she took those words to heart. She graduated near the top of her high school class in Oakland with a 4.25 GPA. She was co-captain of the mock trial team at school, served on the youth advisory board of the local children's hospital, interned in the Alameda County District Attorney's Office and is a budding filmmaker. In April, Sylvia learned she had been admitted to Stanford University with a full scholarship for tuition, room and board.

To move out of her family home and into a dorm, her doctor determined she would need at least 18 hours of personal assistance each day to help with the daily tasks typically done by her mother. As she began to research options, Sylvia came to a startling conclusion: Despite the scholarship, her family wouldn't be able to afford the caregiver hours she would need to live on campus. And she would learn in coming months that she was largely on her own to figure it out.

[Click Here to Read the Full Story](#)

XBOX ADAPTIVE CONTROLLER COMING TO GAMESCOM 2019

Across the pond, big things are happening in the name of gaming accessibility. This year at Gamescom in Cologne, Germany, the renowned Xbox Adaptive Controller will make an appearance on the show floor! In the Indie Arena Booth, the newly featured “Accessibility Arena”, which is an offset of the main booth that features a more open floor plan for wheelchairs and height-adjusted tables.

The controller is designed primarily to meet the needs of those with limited mobility. It will even work with a range of devices, so players can connect external devices like switches, buttons, mounts and even joysticks to create custom controllers experience!

The Ablegamers charity, Cerebral Palsy foundation, SpecialEffect, Warfighter Engaged, and many others in the community helped to make this adaptive controller possible. Input helped shape the design, functionality, and packaging of the Xbox Adaptive Controller.

[Click Here to Keep Reading](#)

[Click Here for the ablegamers charity Website](#)

(Statement from Website)

“We give people with disabilities custom gaming setups including modified controllers and special assistive technology, like devices that let you play with your eyes, so they can have fun with their friends and family. We’re using the power of video games to bring people together, improving quality of life with recreation and rehabilitation.”

Electronic Visit Verification: CMS Offers Guidance on "Good Faith Effort" Extensions for States

The way the government calculates inflation affects eligibility for numerous programs that are relied on by people with disabilities. Now, the government is considering changing what some consider an already unfair calculation in a way that, over time, could result in millions of children, seniors and people with disabilities losing access to these programs, and mean less money for those who still qualify.

To measure inflation, the [Bureau of Labor Statistics \(BLS\) currently relies](#) on the [Consumer Price Index for Urban Wage Earners and Clerical Workers \(CPI-W\)](#). This index attempts to measure inflation based on the spending patterns of people living in 1) urban households, 2) for whom at least half of the household’s income comes from clerical or wage occupations, and 3) one of the household earners must have been employed for at least 37 weeks during the previous 12 months.

For people with disabilities, the measure has long been criticized as unrepresentative of their spending habits, resulting in a measure of inflation that is far lower than what they experience on a day-to-day basis.

[Click Here to Read the Full Article](#)

Five Questions to Ask Yourself When Choosing a Trustee for Your Special Needs Trust

If you are in the process of setting up a special needs trust, you must appoint a trustee. This is one of the most important decisions you'll make about the trust. The trustee must have the necessary expertise to manage the trust, including making proper investments, paying bills, keeping accounts, and preparing tax returns. Moreover, the trustee must have an understanding of how each distribution will affect the beneficiary's public benefits. Here are five questions to keep in mind when considering who will serve in this crucial role:

[Click Here to Continue Reading](#)

LTCCC Alert: The Most Poorly Rated Nursing Homes in the United States

Approximately half of all seniors will need nursing home care at some point. Despite this significant need, and the vulnerability of most nursing home residents, serious problems are widespread and persistent, including inadequate staffing, substandard care, abuse, and neglect.

To help the public gain insights into the quality and safety of facilities in their communities, LTCCC regularly publishes data on key indicators relevant to nursing home care. Today, we are publishing the latest data on [nursing homes that have received a one-star overall rating on Nursing Home Compare](#). One-star is the lowest possible rating in the federal Five-Star rating system, which bases its overall rating on staffing levels, health inspection outcomes, and a range of quality measures. While studies have shown that having a high rating does not necessarily mean that a nursing home is safe, substandard care in lower rated facilities has become a matter of increasing public concern.

[Click Here to See the Full Notice](#)

When Should You Consider Changing Your Special Needs Plan's Key Players?

You have completed and executed your plan for your special needs child. Everyone you've selected to serve—your guardian, your trustee, your health care proxy, your executor, and possibly a trust protector as well—has signed the paperwork. All set?

For now, yes. But it's a good idea to review these selections on a regular basis, because change is inevitable as time goes on. Your life will change, as will the lives of the people you have designated to serve in your plan. Here are three questions to ask yourself in regards to changing these important players:

[Click Here to Read about the 3 Questions](#)

Medicare and your retirement...or non-retirement!

(by Gleba & Associates)

Right out the gate, you can see how confusing Medicare can be! Many people feel that you must sign up for Medicare when you turn 65 (even though you are still working or your spouse is, etc.). One of the many myths that we work to combat on a daily basis!

Let's back things up to "pre-retirement" or "pre-turning 65". We like to talk about having "the conversation" at age 64.5. If you are approaching age 65, you know that insurance carriers and insurance agents are marketing you madly at this stage! See your mailbox for fliers, your phone records for a dozen agent calls a day and more. (Tip – never put your real phone number into a webform online! The number will be sold to agents in about ten seconds flat).

So, how can you navigate this time period successfully and why is it so important? We suggest getting with a firm that you can trust to give you good information and won't push you into a product just because you are turning 65. So, make an appointment at age 64.5 or put in a phone call so that you can ask "hey, here's my situation, what should I be doing?"

[Click Here to Continue Reading](#)

Medicaid's Asset Transfer Rules

In order to be eligible for Medicaid, you cannot have recently transferred assets. Congress does not want you to move into a nursing home on Monday, give all your money to your children (or whomever) on Tuesday, and qualify for Medicaid on Wednesday. So it has imposed a penalty on people who transfer assets without receiving fair value in return.

This penalty is a period of time during which the person transferring the assets will be ineligible for Medicaid. The penalty period is determined by dividing the amount transferred by what Medicaid determines to be the average private pay cost of a nursing home in your state.

Example: If you live in a state where the average monthly cost of care has been determined to be \$5,000, and you give away property worth \$100,000, you will be ineligible for benefits for 20 months ($\$100,000 / \$5,000 = 20$).

Another way to look at the above example is that for every \$5,000 transferred, an applicant would be ineligible for Medicaid nursing home benefits for one month. In theory, there is no limit on the number of months a person can be ineligible.

Example: The period of ineligibility for the transfer of property worth \$400,000 would be 80 months ($\$400,000 / \$5,000 = 80$).

[Click Here to Read More](#)

Will My Advance Directive Work in Another State?

Making sure your end-of-life wishes are followed no matter where you happen to be is important. If you move to a different state or split your time between one or more states, you should make sure your advance directive is valid in all the states you frequent.

An advance directive gives instructions on the kind of medical care you would like to receive should you become unable to express your wishes yourself, and it often designates someone to make medical decisions for you. Each state has its own laws setting forth requirements for valid advance directives and health care proxies. For example, some states require two witnesses, other states require one witness, and some states do not require a witness at all.

Most states have provisions accepting an advance care directive that was created in another state. But some states only accept advance care directives from states that have similar requirements and other states do not say anything about out-of-state directives. States can also differ on what the terms in an advance directive mean. For example, some states may require specific authorization for certain life-sustaining procedures such as feeding tubes while other states may allow blanket authorization for all procedures.

To find out if your document will work in all the states where you live, consult with an attorney in the state.

[Click Here for the Article](#)

For more news and information about Patricia and Patricia E. Kefalas Dudek & Associates please visit us online.

www.pekdadvocacy.com

www.pattidudek.typepad.com/



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