

PHARM Assist Education · Prevention · Access Medicine Chest

Volume 17. Issue 2 Spring 2013

Who cares for the caregiver?

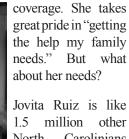
The Ruiz family agreed to share their story to "help spread the word and make sure others get the help they need."

In late 2011, Jovita Ruiz and her husband moved to Durham from Pennsylvania to be closer to their daughter. Relocations can be stressful. And if you have a chronic illness, the first task is often to find a doctor to ensure that you have good medical care.

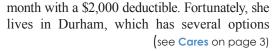
Mr. and Mrs. Ruiz were 62 and 59 respectively when they moved here. While Mr. Ruiz qualified for both Medicare and Medicaid, due to a disability and their limited income,

his wife was not eligible - and remains ineligible - for either program. Luckily for him, Mrs. Ruiz knows how to get things done.

She connected Mr. Ruiz with the Durham County Department of Social Services to apply for Medicaid and with Senior PharmAssist to ensure that he had adequate medical and prescription









Jovita Ruiz

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Setting the record straight on Medicare

At Senior PharmAssist, we believe that educating Medicare beneficiaries about their medicines and healthcare options makes them better advocates for their own health. Reliable information is especially critical today given the widespread confusion surrounding Medicare changes. Recently, the Kaiser Family Foundation announced the results of a nonpartisan study showing that 42% of Americans are unaware that the Affordable Care Act is the law of the land, including 12% who think that Congress has repealed the law.

The Patient Protection and Affordable Care Act of 2010 (ACA)

While much of the attention has been on coverage for those younger than 65 (the health insurance exchanges and potential Medicaid expansion), there are new benefits for Medicare beneficiaries. In addition, the way healthcare delivery is paid for by Medicare has been

redesigned. These Medicare changes due to the ACA are often conflated with proposed adjustments or cuts to the program that are tied to paying down our national debt. Of late, sequestration has further muddied the Medicare waters. So, let's clear things up by explaining what's being rolled out now and what changes *might* be coming down the pike.

The Affordable Care Act alters Medicare by:

- Decreasing the Part D coverage gap or "donut hole" over a decade
- Adding an annual wellness visit that includes preventive screenings immunizations with no cost-sharing (this is not an annual physical exam)
- Structuring Part D premiums like Part B; beneficiaries with higher incomes pay more

(see Medicare on page 2)

"I'm so happy with your help I could tap dance!"

- a participant helped during Medicare's annual election period

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Durham loses a beloved healthcare leader

On April 30th, **Thomas R. Howerton** left us at age 91. Durham-born and Duke-educated, Tom was a dear friend to our program but was also a pivotal figure in the integration of healthcare in our community. Tom began his career with the NC Medical Care Commission, building hospitals throughout the state, and later served as administrator of hospitals in Pinehurst and Wilson.

He returned to Durham in 1970 and was instrumental in the creation of the Durham County Hospital Corporation, eased the merger of Lincoln and Watts hospitals in the early 1970s and supervised the construction of Durham County General Hospital (now Duke Regional). Tom was actively involved with the Foundation for Better Health of Durham and the Coordinating Council for Senior Citizens, and was one of six "program developers" who helped give birth to Senior PharmAssist. He served as treasurer on our board for many years.

In 1999, Senior PharmAssist created **The Thomas R. Howerton Award for Leadership**, which is presented to "an individual or organization for providing exemplary leadership to help Durham senior adults lead healthier and more independent lives through medication assistance and other



preventive health measures." There have been seven recipients of this honor:

Richard Myers (1999) Vic Moore (2000) Margaret Keller (2001) Carolyn Robbins (2004) Lisa Nadler (2006) Andy Barada (2009) Dan Hudgins (2011)

Tom approached his work with Senior PharmAssist as he approached his entire career: merging a sharp business sense with a heart of gold. His imprint on our program and community are indelible, and we will miss him greatly.

Medicare

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- Paying some Medicare Advantage plans less and others more based on quality of care and patient outcomes
- Changing the payment formula for hospitals so they are paid less for higher-than-expected 30-day readmissions for certain conditions and lose Medicare reimbursement if they have poor inpatient quality ratings (e.g., due to high rates of hospital-acquired infections)
- Initiating pilot efforts to design new models of care that improve outcomes and lower costs

The recent federal sequestration "cuts" did not alter Medicare benefits. However, they did trigger an automatic 2% reduction in payments to Medicare providers, which may affect access to some providers over time. The current discussions brewing about how to control our federal "entitlement" spending may mean significant changes to Medicare. Several of the most likely scenarios for change include:

- Combining A and B deductibles and adding a catastrophic benefit to traditional Medicare
- Raising the age of eligibility (currently 65) over time
- Creating a surcharge on Medicare supplements (Medigap policies) that don't have Medicare beneficiaries sharing in medical payments beyond the premiums
- Having Medicare beneficiaries pay for services based more on a sliding fee scale determined by income

If enacted, some changes will affect current beneficiaries, while others might only impact future beneficiaries. It's tough to predict what the future holds, but we will do our best to keep you posted.

Cares

continued from page one

for obtaining free or low-cost medical care.

She currently sees a primary care physician who volunteers at the CAARE Clinic. Lincoln Community Health Center, which provides care to most of Durham's uninsured residents, is also an option for her. However, both of these clinics are under financial strain, and federal funding for community health centers is slated to plummet in 2016.

Mrs. Ruiz became eligible for Senior PharmAssist's prescription assistance in April 2012, when she turned 60, but didn't immediately seek our help. Like many caregivers, she was more focused on her

husband's needs than her own. When she came in to see us in March, she had gone six months without filling prescriptions to help control her blood pressure and cholesterol because of the cost. Luckily, her self-sacrifice didn't end in a medical disaster.

She is now enrolled in Senior PharmAssist and pays \$2 for each of her medications. We will see her every six months to ensure her medicines are working well and find out if the family has other pressing needs.

Please see "Out of options?" sidebar for more.

SHIIP christens Durham as County of the Year

On April 18th, the state Seniors' Health Insurance Information Program (SHIIP) named Durham its "SHIIP County of the Year." Senior PharmAssist is SHIIP's coordinating site in Durham County and was recognized for "providing high-quality prescription and health insurance counseling to more than 1,300 beneficiaries from April 1, 2012 to March 31, 2013."

Senior PharmAssist Community
Services Director Dyana Morgan,
our SHIIP coordinator, accepted the
award from Van Braxton, the new
SHIIP deputy commissioner at the NC
Department of Insurance. The award
was announced at the NC Association
on Aging Annual Training Conference in
Raleigh.

Dyana Morgan,
Van Braxton.

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We thank SHIIP for this acknowledgment and are especially grateful to all the SHIIP-trained volunteers who help us provide face-to-face Medicare insurance counseling.

The objective, reliable information we share with Medicare beneficiaries helps them make informed medical and



Dyana Morgan with SHIIP Deputy Commissioner Van Braxton

prescription coverage decisions. This counseling often leads to tremendous individual savings and can prevent financial ruin due to having inadequate medical and/or prescription coverage.

We will continue to improve the health literacy of Medicare beneficiaries in Durham and simply could not do it without terrific volunteers and generous supporters.

Current SHIIP volunteers are: Lynne Alexander, Shelley Beason, B.J. Boyarsky, Brittany Pierce, Winston Roberts, Joanna Simoni and Al Stone.

Out of options?

Jovita Ruiz averted potential catastrophes by reaching out for assistance. But what if she didn't live in Durham County? Would she have eventually suffered a stroke or heart attack because she couldn't afford her prescriptions? What would then happen to Mr. Ruiz? And who would ultimately pay for her hospitalization and related care?

Recently, state leaders declined to expand Medicaid in 2014, which could benefit 500,000 North Carolinians, including Jovita Ruiz. We hope that state officials will reconsider this decision and expand Medicaid in North Carolina to include a basic medical and prescription benefit for those under 65 who have limited incomes – regardless of their disability status.

Visit www.seniorpharmassist.org to read an opinion piece from Executive Director Gina Upchurch. A growing chorus of voices across North Carolina can ensure that politics does not trump sound business decisions or the humanity we share in the Tarheel State.

Medicare savings greater than ever in 2013

During Medicare's seven-week Annual Election Period for 2013, we helped 865 seniors and younger Medicare beneficiaries, a 72% increase from just three years ago.

For the fourth consecutive year, twothirds of those seen who had a Part D plan needed to switch coverage to save money. We helped "switchers" obtain an average projected savings of \$676 on prescriptions for 2013 (vs. \$547 last year).

Those who had never received our help with sorting Part D plans achieved an annual projected savings of \$897, with 81% needing to switch coverage!



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Noteworthy News

Our supporters love a good challenge – or two

From Nov. 1, 2012 through March 1, 2013, our program pursued simultaneous challenge grants. This unusual opportunity inspired board members – current and former – and many other donors to respond generously. We thank the **Fox Family Foundation** and **Stewards Fund** for providing the matching dollars and **our supporters** – **old and new** – **who gave in response to these efforts**. We raised \$90,223 in additional support with both challenges, which enables Senior PharmAssist to keep growing. Other fundraising highlights will be featured in our summer issue of the *Medicine Chest*!

Departure and arrival

Senior PharmAssist is pleased to welcome **Lisa Rist** as our new associate director. Lisa has been with Duke University Health System for 19 years, most recently as manager of marketing research. Prior to that she served as manager of clinical services planning and support. In an era of evolving healthcare services, Lisa brings a keen ear for listening and mind for effectively responding to the healthcare needs of seniors in Durham. Her undergraduate degree is from Duke, and Lisa received her MS in Health Planning/Administration from the University of Cincinnati. Lisa replaces **Rodney Murphy**, who left Senior PharmAssist in April to return to work in the HIV/AIDS community in San Francisco. His sense of humor, organizational skills and concern for our participants will be missed, and we wish him well.

Have you checked your inbox for a Pulse?

A perfectly reasonable question if you're on our e-news list. A few weeks ago we emailed the third issue of the *Senior PharmAssist Pulse* to over 1,200 subscribers. Email us at info@seniorpharmassist.org if you want to receive our e-news and please let us know if you would also like to go paperless.