



Aging Matters

New Hampshire State Commission on Aging

New Hampshire Commission on Aging

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Let's Have an Honest Conversation About What to Expect as You Age

By JUDITH GRAHAM, Navigating Aging, KFF Health News

How many of us have wanted a reliable, evidence-based guide to aging that explains how our bodies and minds change as we grow older and how to adapt to those differences?

Navigating Aging focuses on medical issues and advice associated with aging and end-of-life care, helping America's 45 million seniors and their families navigate the health care system.

Creating a work of this kind is challenging. For one thing, aging gradually alters people over decades, a long period shaped by individuals' economic and social circumstances, their behaviors, their neighborhoods, and other factors. Also, while people experience common physiological issues in later life, they don't follow a well-charted, developmentally predetermined path.

"Predictable changes occur, but not necessarily at the same time or in the same sequence," said **Rosanne Leipzig**, vice chair for education at the Brookdale Department of Geriatrics and Palliative Medicine at the Icahn School of Medicine at Mount Sinai in New York. "There's no more heterogeneous a group than older people."

I called Leipzig, 72, who works full time teaching medical residents and fellows and seeing patients, after reading her new 400-plus-page, information-packed book, "**Honest Aging**: An Insider's Guide to the Second Half of Life." It's the most comprehensive examination of what to expect in later life I've come across in a dozen years covering aging.

Leipzig told me she had two goals in writing this guide: "to overcome all the negatives that are out there about growing older" and "to help people understand that there are lots of things that you can do to adapt to your new normal as you age and have an enjoyable, engaged, meaningful life."

Geriatrician Rosanne Leipzig says a lot of health information for older adults isn't as useful as it should be. No person's aging process looks exactly like another's. So she's written a 400-plus-page guidebook called "Honest Aging: An Insider's Guide to the Second Half of Life." (SHARON DANIELS)

Why call it "Honest Aging"? "Because so much of what's out there is dishonest, claiming to teach people how to age backwards," Leipzig said. "I think it's time we say, 'This is it; this is who we are,' and admit how lucky we are to have all these years of extra time."

The doctor was referring to extraordinary gains in life expectancy

Honest, con't next page

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Next Commission on Aging Meeting Scheduled for Monday, September 16

There will be no Commission meeting during the month of August. On Monday, August 19, 2024 a state-wide summit on Long Term Care Policy will be held in Portsmouth from 9:00 AM–3:00 PM. Commission members will attend this summit in lieu of an August meeting.

**Aging Matters
welcomes all points
of view and invites
your submissions.
To send articles or to
add your name to our
mailing list, contact:
NHCOAnews@gmail.com**

Honest, con't

achieved in the modern era. Because of medical advances, people over age 60 live far longer than people at the dawn of the 20th century. Still, most of us lack a good understanding of what happens to our bodies during this extended period after middle age.

Several months ago, a medical student asked Leipzig whether references to age should be left out of a patient's written medical history, as references to race have been eliminated. "I told her no; with medicine, age is always relevant," Leipzig said. "It gives you a sense of where people are in their life, what they've lived through, and the disorders they might have, which are different than those in younger people."

What questions do older adults tend to ask most often? Leipzig rattled off a list: What can I do about this potbelly? How can I improve my sleep? I'm having trouble remembering names; is this dementia? Do I really need that colonoscopy or mammogram? What should I do to get back into shape? Do I really need to stop driving?

Underlying these is a poor understanding of what's normal in later life and the physical and mental alterations aging brings.

Can the stages of aging be broken down, roughly, by decade? No, said Leipzig, noting that people in their 60s and 70s vary significantly in health and functioning. Typically, predictable changes associated with aging "start to happen much more between the ages of 75 and 85," she told me. Here are a few of the age-related issues she highlights in her book:

- **Older adults often present with different symptoms when they become ill.** For instance, a senior having a heart attack may be short of breath or confused, rather than report chest pain. Similarly, an older person with pneumonia may fall or have little appetite instead of having a fever and cough.
- **Older adults react differently to medications.** Because of changes in body composition and liver, kidney, and gut function, older adults are more sensitive to medications than younger people and often need lower doses. This includes medications that someone may have taken for years. It also applies to alcohol.
- **Older adults have reduced energy reserves.** With advancing age, hearts become less efficient, lungs transfer less oxygen to the blood, more protein is needed for muscle synthesis, and muscle mass and strength decrease. The result: Older people generate less energy even as they need more energy to perform everyday tasks.

Honest, con't next page

IN THIS ISSUE

NH Long Term Care Summit Scheduled for August 19	4
NH DHHS Releases Roadmap 2024-2025	5
Vote to Honor a Veteran	5
How to Find a Good, Well-Staffed Nursing Home	6
Social Security Announces Changes to Accessing Online Services	8
UNH Research Study Seeks Input	8
Medicare Prescription Payment Plan Guidance Released	9
Immunizations Can Help You Live Well with Your Chronic Disease	10
NH AG Addresses Change Healthcare Data Breach	11
SCAM of the Month: Can You Spot an Investment Scam	13
NH Alliance for Healthy Aging Advocacy Improves with Age	14
Links to Learn More	15

You're Invited To Share Your Thoughts & Ideas

New Hampshire's older adults have a story to tell.

We welcome the opportunity Aging Matters gives you to share your story with others in hopes that your experiences will help, inspire and encourage someone else as we all look for answers and ideas on how to navigate the years ahead.

Please use Aging Matters as your way to share those personal experiences and your personal points of view on living in New Hampshire as an older adult.

We hope that in sharing a variety of different points of view, we are able to assist our readers in forming their own opinions.

There are two ways to send articles —or to add your name to our newsletter mailing list.

1. Email it to: NHCOAnews@gmail.com

2. Mail it to: NHCOA Newsletter, NH Commission on Aging, 117 Pleasant St., Dolloff Building, 4th Floor, Concord, NH 03301

We look forward to hearing from you soon!

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gmail.com**

RAISE YOUR VOICE!

Let us know what's on your
mind and what's
important to you.

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Honest, con't

- **Hunger and thirst decline.** People's senses of taste and smell diminish, lessening food's appeal. Loss of appetite becomes more common, and seniors tend to feel full after eating less food. The risk of dehydration increases.
- **Cognition slows.** Older adults process information more slowly and work harder to learn new information. Multitasking becomes more difficult, and reaction times grow slower. Problems finding words, especially nouns, are typical. Cognitive changes related to medications and illness are more frequent.
- **The musculoskeletal system is less flexible.** Spines shorten as the discs that separate the vertebrae become harder and more compressed; older adults typically lose 1 to 3 inches in height as this happens. Balance is compromised because of changes in the inner ear, the brain, and the vestibular system (a complex system that regulates balance and a person's sense of orientation in space). Muscles weaken in the legs, hips, and buttocks, and range of motion in joints contracts. Tendons and ligaments aren't as strong, and falls and fractures are more frequent as bones become more brittle.
- **Eyesight and hearing change.** Older adults need much more light to read than younger people. It's harder for them to see the outlines of objects or distinguish between similar colors as color and contrast perception diminishes. With changes to the cornea, lens, and fluid within the eye, it takes longer to adjust to sunlight as well as darkness.
- Because of accumulated damage to hair cells in the inner ear, it's harder to hear, especially at high frequencies. It's also harder to understand speech that's rapid and loaded with information or that occurs in noisy environments.
- **Sleep becomes fragmented.** It takes longer for older adults to fall asleep, and they sleep more lightly, awakening more in the night.
- This is by no means a complete list of physiological changes that occur as we grow older. And it leaves out the many ways people can adapt to their new normal, something Leipzig spends a great deal of time discussing.

A partial list of what she suggests, organized roughly by the topics above: Don't ignore sudden changes in functioning; seek medical attention. At every doctor's visit, ask why you're taking medications, whether doses are appropriate, and whether medications can be stopped. Be physically active. Make sure you eat enough protein. Drink liquids even when you aren't thirsty. Cut down on multitasking and work at your own pace. Do balance and resistance exercises. Have your eyes checked every year. Get hearing aids. Don't exercise, drink alcohol, or eat a heavy meal within two to three hours of bedtime.

"Never say never," Leipzig said. "There is almost always something that can be done to improve your situation as you grow older, if you're willing to do it."

About 'Navigating Aging'

Navigating Aging focuses on medical issues and advice associated with aging and end-of-life care, helping America's 45 million seniors and their families navigate the health care system.

Source: <https://kffhealthnews.org/news/article/navigating-aging-expectation-adjustment-change/>

NH Long Term Care Summit Scheduled for August 19 in Portsmouth

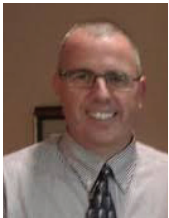
You're invited to join members of the New Hampshire State Commission on Aging at the NH Long-Term Care Summit scheduled for Monday, August 19 at the AC Hotel in Portsmouth, NH. The day-long event features speakers and discussions on some of the most challenging issues related to accessing Long Term Care in New Hampshire.

The morning kicks off with **Joanne Conroy**, MD, Chief Executive Officer and President, Dartmouth Health offering welcoming remarks while setting the stage for the Summit by examining both the challenges and the opportunities in the community-based, hospital, and healthcare system partnerships across NH.



CONROY

The first session will explore the challenges faced by medically-cleared patients in transitioning out of the hospital, particularly when their discharge hinges on securing services and supports for a safe discharge. The variety of care options and costs can leave patients and caregivers overwhelmed. Attendees will engage in interactive solution-mapping that fosters collaboration between the many stakeholders in long-term care. Panelists include **David Ross**, Administrator, Hillsborough



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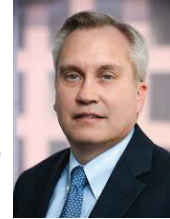
County Nursing Home; **Martha Dodge Leighton**, Senior VP - Patient

Care Services & CNO, Elliot Health Systems; and **Christine Santaniello**, Associate Commissioner, Department of Health & Human Services.

After lunch is a panel presentation and discussion supported by the NH State Commission on Aging. This session will begin a conversation on how long-term services and supports are financed in NH, growth in the older adult population, and how the State can prepare for public and family financing in the decades to come. This is a rare opportunity to hear from a national expert on the risks of needing and affording long term services and supports – as individuals and as a state. **Richard Johnson**, Senior Fellow and Director of Program on Retirement Policy at the Urban Institute will share his expertise during this panel. Other panelists include **Phil Sletten**,

Research Director, NH Fiscal Policy Institute; and **Margaret Franckhauser**, Senior Technical Consultant & Director of Aging Services, CHI/JSI.

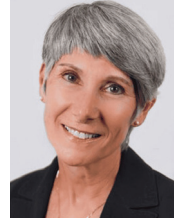
The day wraps up with a session focused on the challenges and opportunities of maintaining the direct care workforce that provides long-term



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services and supports in nursing facilities and in the community and addresses the question on how can we ensure a robust and resilient workforce to meet the growing demands of long-term care in New Hampshire? Session panelists include



LAVERS



LUCZKO

Richard Lavers, Deputy Commissioner, New Hampshire Employment Security and **Kate Luczko**, Senior Director, HealthForce NH will identify existing workforce challenges and actionable solutions such as innovative recruitment and retention strategies, workforce training initiatives, and policy recommendations aimed at bolstering the workforce pipeline.

Please consider attending this day filled with rich learning and conversation towards making New Hampshire an even better place to grow older.

More details and registration information can be found at <https://www.rumfordmanagementnh.com/lcsummit>.

Your Local Resources

- **ServiceLink** Not sure what resources exist in your community to help with an age- or disability-related issue? Contact your local ServiceLink Office. (866) 634-9412, servicelink.nh.gov



- **2-1-1 NH** is the connection for NH residents to the most up-to-date resources they need from specially trained Information and Referral Specialists. <https://www.211nh.org>



NH DHHS Releases Roadmap 2024-2025

Strategy Focuses on Supporting Thriving Communities

The New Hampshire Department of Health and Human Services (DHHS) has announced the release of the **DHHS Roadmap 2024-2025**.

Building on the success of the **DHHS Roadmap 2023**, the updated Roadmap was informed by extensive input from community partners and DHHS program areas. Roadmap 2024-2025 identifies initiatives and goals that will serve as a guide for the Department to advance key priorities over the next fiscal year and beyond.

“As we work to support and promote the health and well-being of all New Hampshire residents, it is critical for us to be able to state, share, and track the progress of our priorities and goals,” said DHHS Commissioner Lori Weaver. “This plan is the culmination of months of work with our partners and the people we serve to create a bold plan of action that will set us on the course to enhance key systems and policies to improve the health of our state.”

“This stakeholder-informed Roadmap puts DHHS in the driver’s seat to make New Hampshire even better,” said Governor Chris Sununu. “We will continue to find efficiencies in the system – streamlining our priorities, putting our citizens first, and delivering results. A win for everyone!”

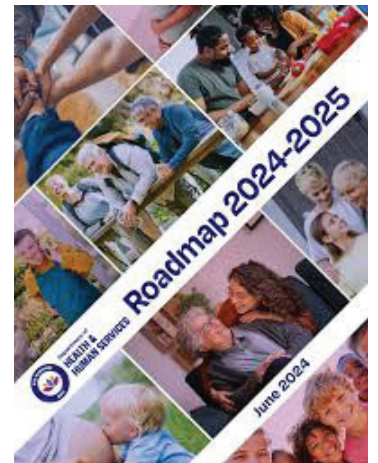
Work will center around three major commitments:

Invest in People and Culture, Promote Thriving Communities, and Improve Customer Service. The Department will fulfill these commitments through 15 initiatives and 43 goals designed to benefit all New Hampshire communities.

Plan initiatives include:

- Achieving **Mission Zero**, the Department’s plan to end emergency department psychiatric boarding
- Reducing health impacts from harmful exposures to such hazards as lead and PFAS
- Strengthening school-based services for children enrolled in Medicaid
- Increasing access to residential behavioral health services for children
- Building a System of Care for Healthy Aging

Read more at <https://www.dhhs.nh.gov/news-and-media/nh-dhhs-releases-roadmap-2024-2025>



Vote in Honor of a Veteran

Information on how to participate in the Secretary of State’s “Vote in Honor of a Veteran” program.

The Secretary of State’s Office is pleased to launch its “Vote in Honor of a Veteran” program, which gives New Hampshire voters the opportunity to recognize the veterans and service members in their lives who protect our most precious freedom – the right to vote.

To participate in the program, simply use the button below to submit the name of the veteran or service member you are voting in honor of and a short testimonial on what their service means to you. In exchange, the Secretary of State’s Office will mail you a “Vote in Honor of a Veteran” lapel pin designed by Navy veteran Jacob Aldridge that you can wear proudly on Election Day.

Your testimony may be posted on the program’s website.

Artist’s Biography

Our “Vote in Honor of a Veteran” pin was designed by Navy veteran Jacob Aldridge in 2024. Originally from Virginia, Mr. Aldridge joined the navy after graduating high school in 2010. Following his service as an auxiliary technician aboard the USS Cheyenne, he joined the USS New Hampshire. After a decade of dedicated service in the Navy, he worked as an engineering tech at the Portsmouth Naval Shipyard.

Mr. Aldridge, a recipient of five Navy & Marine Corps Achievement Medals, is currently pursuing a degree in Fine Arts at Great Bay Community College.

Sign up at <https://www.sos.nh.gov/vote-honor-veteran>



How to Find a Good, Well-Staffed Nursing Home

By JORDAN RAU, KFF Health News

Few people want to go into a nursing home, but doing so can be the right choice if you or a loved one is physically or cognitively disabled or recovering from surgery. Unfortunately, homes vary greatly in quality, and many don't have enough nurses and aides to give residents the care they need.

Q: How Do I Find Nursing Homes Worth Considering?

Start with Medicare's [online comparison tool](#), which you can search by city, state, ZIP code, or home name. Ask for advice from people designated by your state to help people who are older or have disabilities search for a nursing home. Every state has a "no wrong door" [contact for such inquiries](#).

You can also reach out to your local area agency on aging, a public or nonprofit resource, and your local long-term care ombudsman, who helps residents resolve problems with their nursing home.

Find your area agency on aging and ombudsman through the federal government's [Eldercare Locator](#) website or by calling 1-800-677-1116. Identify your ombudsman through the [National Consumer Voice for Quality Long-Term Care](#), an advocacy group. Some people use private placement agencies, but they may refer you only to homes that pay them a referral fee.

Q: What Should I Find Out Before Visiting A Home?

Search online for news coverage and for reviews posted by residents or their families.

Call the home to make sure beds are available. Well-regarded homes can have long waiting lists.

Figure out how you will pay for your stay. Most nursing home residents rely primarily on private long-term care insurance, Medicare (for rehabilitation stays) or Medicaid (for long-term stays if you have few assets). In some cases, the resident pays entirely out-of-pocket. If you're likely to run out of money or insurance coverage during your stay, make sure the home accepts Medicaid. Some won't admit Medicaid enrollees unless they start out paying for the care themselves.

If the person needing care has dementia, make sure the home has a locked memory-care unit to ensure residents don't wander off.

Q: How Can I Tell If A Home Has Adequate Staffing?

Medicare's comparison tool gives each home a rating of one to five stars based on staffing, health inspection results, and measurements of resident

care such as how many residents had pressure sores that worsened during their stay. Five is the highest rating. Below that overall rating is **one specifically for staffing**.

Be sure to study the annual staff turnover rate, at the bottom of the staffing page. Anything higher than the national rate — an appalling 52% — should give you pause.

You should also pay attention to the **inspection star rating**. The "quality" star rating is less reliable because homes self-report many of the results and have incentives to put a glossy spin on their performance.

Q: Does A Home With Three, Four, Or Five Stars Provide Good Care?

Not necessarily. Medicare's ratings compare the staffing of a home against that of other homes, not against an independent standard. The industry isn't as well staffed as many experts think it needs to be: About 80% of homes, even some with four and five stars, are staffed below the standards the Biden administration **will be requiring homes** to meet in the next five years.

Q: How Many Workers Are Enough?

There's no straightforward answer; it depends on how frail and sick a nursing home's residents are. Medicare requires homes to prominently post their staffing each day. The notices should show the number of residents, registered nurses, licensed vocational nurses, and nurse aides. RNs are the most skilled and manage the care. LVNs provide care for wounds and catheters and handle basic medical tasks. Nurse aides help residents eat, dress, and get to the bathroom.

Expert opinions vary on the ideal ratios of staffing. Sherry Perry, a Tennessee nursing assistant who is the chair of her profession's national association, said that preferably a nursing assistant should care for eight or fewer residents.

Charlene Harrington, an emerita professor of nursing at the University of California-San Francisco, recommends that on the day shift there be one nurse aide for every seven residents who need help with physical functioning or have behavioral issues; one RN for every 28 residents; and one LVN for every 38 residents. Patients with complex medical needs will need higher staffing levels.

Staffing can be lower at night because most residents are sleeping, Harrington said.

Nursing home industry officials say that there's no

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Nursing Home, con't

one-size-fits-all ratio and that a [study the federal government published](#) last year found quality improved with higher staffing but didn't recommend a particular level.

Q: What Should I Look For When I Visit A Home?

Watch to see if residents are engaged in activities or if they are alone in their rooms or slumped over in wheelchairs in hallways. Are they still in sleeping gowns during the day? Do nurses and aides know the residents by name? Is food available only at mealtimes, or can residents get snacks when hungry? Watch a meal to see whether people are getting the help they need. You might visit at night or on weekends or holidays, when staffing is thinnest.

Q: What Should I Ask Residents And Families In The Home?

Are residents cared for by the same people or by a rotating cast of strangers? How long do they have to wait for help bathing or getting out of bed? Do they get their medications, physical therapy, and meals on time? Do aides come quickly if they turn on their call light? Delays are strong signs of understaffing.

Medicare requires homes to allow residents and families to form councils to address common issues. If there's a council, ask to speak to its president or an officer.

Ask what proportion of nurses and aides is on staff or from temporary staffing agencies; temp workers won't know the residents' needs and likes as well. A home that relies heavily on temporary staff most likely has trouble recruiting and keeping employees.

Q: What Do I Need To Know About A Home's Leadership?

Turnover at the top is a sign of trouble. Ask how long the home's administrator has been on the job; ideally it should be at least a year. (You can look up administrator turnover on the Medicare comparison tool: It's on the staffing page beneath staff turnover. But be aware the information may not be up to date.) You should also ask about the tenure of the director of nursing, the top clinical supervisor in a home.

During your tour, observe how admissions staff members treat the person who would be living there. "If you walk in to visit with your mom and they greeted you and didn't greet your mom or focused all their attention on you, go somewhere else," advised Carol Silver Elliott, president of the Jewish Home Family, a nonprofit in Rockleigh, New Jersey.

Q: Does It Matter Who Owns The Home?

It often does. Generally, nonprofit nursing homes provide better care because they can reinvest

revenue back into the home rather than paying some of it to owners and investors.

But there are some very good for-profit homes and some lousy nonprofits. Since most homes in this country are for-profit, you may not have a choice in your area. As a rule of thumb, the more local and present the owner, the more likely the home will be well run. Many owners live out of state and hide behind corporate shell companies to insulate themselves from accountability. If nursing home representatives can't give you a clear answer when you ask who owns it, think twice.

Finally, ask if the home's ownership has changed in the past year or so or if a sale is pending. Stable, well-run nursing homes aren't usually the ones owners are trying to get rid of.

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Source: <https://kffhealthnews.org/news/article/nursing-home-shopping-staffing-resources-red-flags>

Vast Majority of Adults 50+ Favor Policies Supporting Dementia Patients and Their Caregivers

The John A. Hartford Foundations (JAHF) commissioned a survey of 1,000+ Americans aged 50 and older to understand their views on dementia care and support. Adults 50+ overwhelmingly want the government to provide caregiving and workforce benefits for older adults with dementia and their caregivers. They are also looking for support from health care and social service providers to meet their needs. Key findings include:

- 92% of adults 50+ support caregiver training, 91% support payment for in-home assistance or respite care and 84% want caregiver support groups.
- More than half (56%) would consult their primary care provider first if they had concerns about memory issues.
- 90% say being able to remain in their home would be important to them if diagnosed with dementia.
- 96% indicate that not being a burden on family and friends is important to them.
- 95% of women are concerned about the emotional stress of caregiving, compared to 81% of men.

Learn more Age-Friendly Insights at <https://www.johnahartford.org/dissemination-center/view/age-friendly-insights-poll-adults-50-on-dementia-care>

Social Security Announces Upcoming Changes to Accessing Online Services

Agency Transitioning Authentication Services to Login.gov

The Social Security Administration has announced that customers who created an online account (e.g., *my Social Security* account) before September 18, 2021, will soon be required to transition to a Login.gov account to continue access to their online services. Over five million of these account holders have already transitioned to Login.gov.

The agency is making the changes to simplify the sign-in experience and align with federal authentication standards while providing safe and secure access to online services.

“my Social Security is a safe and secure way for people to do business with us,” said Social Security Commissioner Martin O’Malley. “We’re excited to transition to Login.gov to access our online services, streamlining the process and ease of use for the public across agencies.”

Account holders are encouraged to sign-in now. When the user logs in, they will be presented with an option to easily transition to Login.gov. Once their account is successfully linked, a confirmation screen will appear, and they will have immediate access to their personal *my Social Security* services or other service that they were attempting to access.

Existing Login.gov or ID.me account holders do NOT need to create a new account or take any action.

my Social Security accounts are free, secure, and provide personalized tools for everyone, whether receiving benefits or not. People can use their account to request a replacement Social Security card, check the status of an application, estimate future benefits, or manage the benefits they already receive. For more information visit <https://www.ssa.gov/myaccount/create.html>.

For more information about Login.gov, including their 24/7 customer phone and chat support, visit <https://login.gov/help/>.

Source: <https://blog.ssa.gov/changes-are-coming-to-how-you-access-social-securitys-online-services>



UNH Research Study Seeks Input About Social Security Administration Customer Service

Rural New Hampshire residents are invited to participate in a research study being conducted by the Institute on Disability at the University of New Hampshire. Researchers are looking for volunteers to provide information about the communication-related barriers they experience when trying to access information related to Social Security Administration programs such as Social Security retirement income, Social Security Disability Insurance (SSDI), or Supplemental Security Income (SSI).

You may be eligible to participate if you are at least 18 years of age, primarily speak English at home, reside in a rural area of New Hampshire, and meet one of the following three descriptions: 1) have a cognitive, communication, mental health, physical, or sensory (hearing/vision) disability which limits your ability to work; or (2) are a family member of a person with intellectual and developmental disabilities who receives Social Security benefits; or (3) are near or in retirement age.

Your participation would involve participating in one in-person hour-long focus group. A focus group brings together 5-10 people to respond to questions posed by researchers. The researchers will record the answers and use that information for their study. Those selected for the study who complete the focus group will receive a \$50 gift card.

In addition to in-person focus groups, a virtual focus group will be held via Zoom on August 22 from 12:00-1:00pm.

For more information or to volunteer, contact Stacia Bach at stacia.bach@unh.edu or 603-862-4320, or visit <https://iod.unh.edu/blog/2024/05/seeking-your-input-about-social-security-administration-customer-service>.

Help Us Spread the Word!

If you like Aging Matters, please share it with your family, neighbors, friends, and colleagues and encourage them to sign up for their own copy at

<https://www.nhcoa.nh.gov/>

Guidance on Inflation Reduction Act's Medicare Prescription Payment Plan Released

By **CASEY SCHWARZ**, Medicare Watch

Recently, **CMS released** additional guidance regarding Medicare Prescription Payment Plan (MPPP) outreach and education. The MPPP, sometimes referred to as “smoothing,” was established in the Inflation Reduction Act (IRA) and allows Medicare beneficiaries with Part D to opt into an alternative payment structure for their cost-sharing for covered Part D medications.

Starting in 2025, people enrolled in a Part D plan will have the option to spread their out-of-pocket Part D costs over the calendar year rather than paying directly at the pharmacy counter. It is critical to keep in mind that the program does not reduce or increase a person's Part D cost-sharing obligations—it only shifts them. This program launches at the same time as other Part D restructuring changes included in the IRA, most notably the establishment of a \$2,000 out-of-pocket cap.

As described by the IRA and CMS, when someone opts into the MPPP, their plan will communicate that election to their chosen pharmacy as part of their payment transaction. At the point of sale, the person will not be charged. Instead, the plan will pay the beneficiary's cost-sharing obligation—deductible, coinsurance, or copay, depending on their plan details—to the pharmacy. Then, using a formula set forth in the IRA statute, the plan will send the beneficiary a monthly bill. Opting into the program does not change how enrollees move through the Part D benefit or what counts toward their deductible or \$2,000 out-of-pocket cap.

Whether the MPPP will be a good choice for a particular beneficiary will depend on a variety of individual circumstances and preferences. In the most recent guidance, CMS requires plans to identify and conduct outreach to individuals who are likely to benefit from the program—those who incurred \$2,000 in Part D cost-sharing expenses between January 1 and September 30 of 2024, and those who, in 2025, incur out-of-pocket costs for a single prescription that equal or exceed \$600. The guidance also provides some examples of beneficiaries who are less likely to benefit from the MPPP. For example, people who have relatively low or stable Part D cost-sharing across the plan year as well as those who are unlikely to reach the \$2,000 cap could see a less even distribution of costs under the MPPP, with higher bills in the later months of the year. This is due to the cumulative effect of one's prescription drug costs and

the MPPP's monthly billing structure. The guidance also notes that people are unlikely to experience significant benefit from opting into the program late in the year, since their costs could only be spread over the remaining calendar months and directs plan outreach to focus on pre-plan year and early month education.

CMS also released **model materials** and a MPPP timeline. This and previous guidance is available on the CMS page devoted to the **Inflation Reduction Act**, under the “Part D Improvements” tab. CMS **also announced** that Medicare Plan Finder will feature a cost preview feature that incorporates the MPPP as an option, as well as plans for trainings for SHIPs and other partners to take place this summer and in early fall.

Read more about the MPPP **here**, including the most recent guidance, **here**.

Source: <https://www.medicarerights.org/medicare-watch/2024/07/25/guidance-on-inflation-reduction-acts-medicare-prescription-payment-plan-released>

How to Find Unclaimed Money from the Government

If a business, financial institution, or government agency owes you money, it's considered unclaimed. These funds could be from:

- An old bank account
- Overpayment on a medical bill
- An undelivered tax refund
- A matured savings bond that stopped paying interest

Whatever the case, it's free to find out if unclaimed money that was never recovered is available for you.

There isn't one central location for tracking down potential unclaimed funds. But you can check individual databases to see if there's money available to recover like:

- Your state's unclaimed property office
- Former employers
- Financial institutions
- Insurance agencies

Find more information at <https://www.usa.gov/unclaimed-money>

Immunizations Can Help You Live Well with Your Chronic Disease

By **RACHEL S. EICHENBAUM, RN, MSN**, Clinical Consultant, Southern NH Area Health Education Ctr.

Do you have a chronic disease or condition such as diabetes, heart disease or COPD? Did you know you are at greater risk of not only getting vaccine preventable diseases but being hospitalized for them?

If you answered yes to having a chronic condition, it is especially important to get the immunizations you need. As we age, our immune systems become less effective. Chronic conditions are an added burden for our body making it more important to become immunized. But which ones do we need?

The number of vaccines available has increased. It can be a challenge to figure out which are important for you. The CDC has developed a tool that will help you determine which vaccinations you need. There are 12 questions, including a list of chronic conditions, that help you figure out what you need based on CDC recommendations. You can access this tool at <https://www2.cdc.gov/nip/adultimmsched/>.

Here are the basic vaccines you need as an adult over 65: every fall, you will need a new flu and Covid vaccine. RSV was recommended last year for adults but is not needed annually at this time. Pneumovax and Tetanus vaccines last for 10 years. Pharmacies and provider offices will have a record. Check with either your pharmacy or provider to make sure you don't need these immunizations.

There is so much to do to manage day to day when you have a chronic disease. There are provider appointments to schedule, medications to take daily and on time, testing your blood sugar or taking

your blood pressure. Understanding your chronic condition and knowing what to do can be a struggle. Remembering to keep up to date with immunizations makes it an even greater challenge. It all can feel overwhelming.

The Well-Being Action Network (WBAN) offers workshops that will help you feel less overwhelmed and more confident about managing your chronic conditions.

The Chronic Disease self-management program was developed as part of a rigorous research project at Stanford University. The research showed that the program increases understanding of chronic conditions and your confidence in managing day to day. Stanford University also developed programs for people living with diabetes and chronic pain. These programs were also developed using research and were found to be successful.

WBAN offers all 3 programs either in-person or online. We also offer a program developed by the Arthritis Foundation called Walk with Ease. This program helps those with arthritis start walking and gradually increase how much you walk over the course of 6 weeks. Check out all of our upcoming classes at <https://www.snhahec.org/upcoming-workshops1.html> and be sure to register today!

The information in this article was provided by the Southern New Hampshire Health Education Center. SNHAHEC programs are crafted using the latest research to ensure participants receive effective strategies for growth and development. Learn about programs at <https://www.snhahec.org/>



Monday, August 19, 2024 · 9am-3:30pm EDT
AC Hotel by Marriott Portsmouth Downtown/Waterfront
299 Vaughan Street, Portsmouth, NH 03801
Summit Tickets \$40/\$50

The NH Long-Term Care Summit will bring together the various provider groups, advocacy organizations, regulatory and payer representatives who lead NH's long-term care system for a focused public policy conference. The Summit will feature speakers and panel discussions that address the needs and challenges for long-term care policy, explore innovative solutions, and craft a working policy agenda.

Elevating long-term care policy is a key part of future legislative agendas. The Summit's goal is to foster a broad coalition and craft a vision for the future of long-term care that can tackle emerging demographic realities and workforce and economic challenges. The emerging system of care legislation offers a strong foundation to build on and establishes a statewide policy agenda for long-term care.

More information and registration information can be found at
<https://www.rumfordmanagementnh.com/lcsummit>

NH AG Addresses Change Healthcare Data Breach

Attorney General John M. Formella has announced that in February 2024, Change Healthcare, a unit of UnitedHealth, the nation's largest electronic data clearinghouse, experienced a significant cyberattack. Change Healthcare is the nation's largest electronic data clearinghouse used by tens of thousands of providers, pharmacies, and insurers to verify insurance, confirm pre-authorization of procedures or services, exchange insurance claim data, and perform other administrative tasks essential to the delivery of health care.

The February cyberattack interrupted operations for thousands of doctors' offices, hospitals, and pharmacies. It also resulted in Americans' sensitive health and personal data being leaked onto the dark web - a hidden portion of the internet where cyber criminals buy, sell, and track personal information. Although the actual number and identity of affected patients are currently unknown, Change Healthcare has publicly stated that the data breach could impact up to 1/3 of all Americans. This was an unprecedented data breach.

Typically, when there is a data breach impacting New Hampshire residents, consumers receive an individualized letter or email if their data was impacted. However, Change Healthcare has not yet provided individual notice to consumers. In April, Attorney General Formella joined other attorneys general in sending a letter to UnitedHealth Group, Inc. — the nation's largest health insurer and the parent company of Change Healthcare — urging the corporation to take more meaningful action to better protect providers, pharmacies, and patients harmed by the recent breach.

Given the delay between the data breach and notification to those impacted, Attorney General Formella is publicizing not just the breach, but also resources, including the offer that Change Healthcare has provided to the public. Attorney General Formella is sharing consumer protection reminders and raising awareness about the availability of free credit monitoring and identity theft protection services following Change Healthcare's February data breach.

Change Healthcare is offering all New Hampshire residents who believe they may have been impacted free credit monitoring and identity theft protections for two years. The dedicated website and call center will not be able to provide individuals details about whether their data was impacted but can guide them through getting set up for the free credit monitoring and identity theft protections. Since Change Healthcare has not yet provided notice to individuals and the impact is very significant, the safest course of action is for everyone to assume that their information has been involved.

- For information visit [Change Healthcare Consumer support page - UnitedHealth Group](#).
- To enroll in credit monitoring through IDX use the link at: [Change Healthcare Consumer support page - UnitedHealth Group](#) or call **1-888-846-4705**.
- For additional support from Change Healthcare call **1-866-262-5342**.

New Consumer Newsletter Launched

Attorney General John M. Formella has announced the launch of *NH Consumer Insight*, a newsletter for consumers that will be published by members of the Consumer Protection and Antitrust Bureau of the Department of Justice. *NH Consumer Insight* will be released to media outlets throughout the state and posted on the Department of Justice website.

Each installment of *NH Consumer Insight* will highlight a relevant consumer protection issue and provide basic information that consumers can use to identify risks and protect themselves in the marketplace. The goal of *NH Consumer Insight* is to start a statewide conversation about important consumer protection issues.

"Outreach and education are some of the most powerful and effective tools that my office utilizes to prevent consumer harm," said Attorney General Formella. "Basic awareness of scams and related issues can make all the difference for consumers who otherwise may fail to recognize the warning signs in a particular situation and lose large sums of money or valuable personal identifying information. I am excited about this new opportunity for my office to help provide the citizens of this state with the knowledge they need to protect themselves when engaging in trade or commerce."

The first edition focuses on the risks associated with hiring a home contractor. It can be found at <https://www.doj.nh.gov/citizens/consumer-protection-antitrust-bureau/nh-consumer-insight-newsletter>.

Data Breach, con't next page

Data Breach,con't

Consumers should be aware of potential **warning signs that someone is using their medical information**. The signs include:

- A bill from their doctor for services they did not receive.
- Errors in their Explanation of Benefits statement like services they never received or prescription medications they do not take.
- A call from a debt collector about a medical debt they do not owe.
- Medical debt collection notices on their credit report that they do not recognize.
- A notice from their health insurance company indicating they have reached their benefit limit; or
- They are denied insurance coverage because their medical records show a pre-existing condition they do not have.

If consumers are concerned that their data may have been impacted but prefer not to use the free resources provided by Change Healthcare, they can also consider **freezing their credit**.

A credit freeze prevents creditors—such as banks or lenders—from accessing individual's credit reports. This will stop identity thieves from taking out new loans or credit cards in consumer's names because creditors will not approve their loans or credit requests if they cannot first access their credit reports. By law, a credit bureau must allow you to place, temporarily lift, or remove a credit freeze for free.

When consumers freeze their credit with each bureau, the bureaus will send them a personal identification number. The consumers can then use that PIN to unfreeze their credit if they want to apply for a loan or credit card. Consumers can also use the PIN to freeze their credit again after they have applied for loans or a new credit card.

Individuals will have to freeze their credit with each bureau: Experian, Equifax, and TransUnion.

- Equifax | <https://www.equifax.com/personal/credit-report-services/credit-freeze/> +1 (888) 766-0008
- Experian | <https://www.experian.com/freeze/center.html> +1 (888) 397-3742
- TransUnion | <https://www.transunion.com/credit-freeze> +1 (800) 680-7289

Cyberattacks in the healthcare sector have increased in both frequency and severity in recent years. Data breaches involving PHI are required to be reported to the **U.S. Department of Health & Human Services - Office for Civil Rights (hhs.gov)** by HIPAA-covered entities. Since the beginning of this year, the portal shows data breaches impacted the PHI of nearly 38 million individuals.



Let's Get Social

The NH State Commission on Aging has a Facebook page. Please follow the NHCOA at <https://www.facebook.com/NHCommissiononAging/> to stay up-to-date on the latest Commission news, as well as insights, resources and information from across the field of aging.

Prefer a Printed Copy of Aging Matters?

The Commission on Aging has a limited ability to provide printed copies of Aging Matters to individuals who are unable to connect to the Internet to read a copy online or download it from the Commission's website. Email your request to NHCOAnews@gmail.com or send it to NHCOA Newsletter, NH Commission on Aging, 117 Pleasant St., Dolloff Building, 4th Floor, Concord, NH 03301.

Check Out Past Editions of AgingMatters

<https://www.nhcoa.nh.gov/newsletters.aspx>

Your Local Resources



ServiceLink. Not sure what resources exist in your community to help with an age- or disability-related issue? Contact your local ServiceLink Office. (866) 634-9412, servicelink.nh.gov



2-1-1 NH is the connection for NH residents to the most up-to-date resources they need from specially trained Information and Referral Specialists. <https://www.211nh.org>

SCAM of the Month

Can You Spot an Investment Scam?

By **TERRI MILLER**,
Consumer Education Specialist, FTC

Investment scammers claim you'll get big returns investing in a hot new money-making "opportunity" — maybe something like cryptocurrency. Some scammers say you'll likely make a lot of money if you follow their proven system or method. But will you?

We know that there are plenty of scammers hawking phony investment opportunities. In 2023, people told the FTC that they lost \$4.6 billion to investment scams — more than any other category. And military consumers reported high median losses to investment scams: \$7,000. What do you need to know to avoid investment scams?

One big red flag is if someone pressures you to commit quickly. Scammers want you to act fast and might tell you that space is limited or that you're getting a special deal that will expire soon. They don't want you to take time to research them or their offer. Here are some steps to take if you're considering an investment opportunity.

Do some homework. Search online for the name of the company or program and words like "review," "scam," "fraud," or "complaint." Other people's experience with the company can alert you to possible problems. Visit [Investor.gov](https://investor.gov), a U.S. Securities and Exchange Commission (SEC) website, for more advice on investing and avoiding fraud.

Verify investment claims on your own. Never put money into an investment based only on what someone claims or what you read in an online newsletter, review, or blog. Scammers will often invent stories or testimonials about how successful people are at making money with their investment offer.

Know the risk. There are no guaranteed returns — and no investments without risks. Don't trust anyone who plays down the risk of an investment or who acts like risk disclosures are just a formality or something you don't need to worry about.

Source: <https://consumer.ftc.gov/consumer-alerts/2024/07/can-you-spot-investment-scam>

AGING IS LIVING

THERE'S NO SUCH THING AS "TOO EXPERIENCED"

EVERY AGE IS THE RIGHT AGE

RETIREMENT IS NOT A REQUIREMENT

LONGEVITY IS THE BEST THING TO HAPPEN IN AGES

AGE IS NOT THE PROBLEM;

AGEISM IS THE PROBLEM

OldSchool.info

GrowingAndOlder.com

NH Alliance for Healthy Aging Advocacy Improves with Age

By JUDITH JONES and MARTHA McLEOD, New Futures

New Hampshire Alliance for Healthy Aging (NHAHA) Advocacy is now ten years old. During the last ten years we built a strong coalition of stakeholders that includes advocates, policy makers, providers, and older adults interested in advancing state and local healthy aging policies. We developed a system to support our members through monthly advocacy meetings and regular updates that highlight key issues and request calls to action. During this period, NHAHA Advocacy was pivotal in securing significant legislative successes including the creation of the State Commission on Aging in 2019 and the passage of the System of Care for Healthy Aging in 2023.

As we celebrate ten years, we are also looking forward. In 2024 we have made some exciting changes. We have formally partnered with New Futures, welcomed a new staff member, and updated our web page.

Partnering with New Futures allows NHAHA Advocacy to benefit from the expertise and infrastructure of an organization that has advanced policy solutions in New Hampshire for over 25 years. Like NHAHA Advocacy, New Futures promotes policy through education, civic engagement and building partnerships. More information about New Futures and how the organization solves problems through policy change is available on the web: new-futures.org/about-us.

Attorney Judith Jones joined the New Futures staff in June as the healthy aging policy coordinator. Judith began her legal career in New Hampshire in 1998 with the New Hampshire Legal Assistance Senior Citizens Law Project (now known as the Justice in Aging Project). She later worked at small law firm concentrating on legal issues impacting older adults and disabled individuals. More recently, Judith shifted her effort to systemic policy change. Her work is informed by over twenty-five years of advocacy in New Hampshire and her experience as a family caregiver. Learn more at <https://new-futures.org/meet-the-team>.

The NHAHA Advocacy web page update (nhaha.info/advocacy/) includes new links that allow browsers to learn about our policy success from 2014 through 2023 and highlight our advocacy priorities for 2024 through 2029. Helpful advocacy tips are available through a link that brings you to the New Futures website. The web page also includes a way to sign up for NHAHA Advocacy emails.

What can NHAHA Advocacy do in the next ten years? Share your ideas with Martha McLeod mmcleod@new-futures.org or Judith Jones jjones@new-futures.org and join our email update list.

This column is a regular feature of Aging Matters. We thank the New Hampshire Alliance for Healthy Aging and New Futures for the information they provide to keep readers informed on activities with the NH State Legislature. New Futures and the Alliance for Healthy Aging welcomes Judith Jones to the Healthy Aging Advocacy team. Martha can be reached at mmcleod@new-futures.org; Judy can be reached at jjones@new-futures.org

Contact Information for NH Members of the U.S. Congress

U.S. Senator Maggie Hassan,
(202) 224-3324

<https://www.hassan.senate.gov/content/contact-senator>

U.S. Senator Jeanne Shaheen, (202) 224-2841

www.shaheen.senate.gov/contact/contact-jeanne

U.S. Rep Ann Kuster,
(202) 225-5206

<https://kuster.house.gov/contact/>

U.S. Rep. Chris Pappas,
(202) 225-5456

<https://pappas.house.gov/>

Who is My Legislator?

Use this link to find and contact your

- State Representative: <https://www.gencourt.state.nh.us/house/members/>
- State Senator: <https://www.gencourt.state.nh.us/senate/members/wml.aspx>

Visit your town or city's website to find contact information for your local elected officials.

Aging Matters welcomes all points of view and invites your submissions. To send articles or add your name to our mailing list, at: NHCOAnews@gmail.com

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Links to Learn More

The following is a sample of information regarding older adults that came across our desk this month. We thought our readers might find this information interesting. Please follow the links or type the URL address into your browser for the complete story.

In the Granite State, We Live Free + Eat Local

If you've been looking for local food in New Hampshire, look no further. NH Eats Local is the NH Food Alliance's initiative to promote and celebrate food grown, caught, and produced in the Granite State. Our primary celebration: NH Eats Local Month.

NH Eats Local Month is a month-long celebration of local food. From August 1-31, the NH Food Alliance and its NH Eats Local Month Partners connect Granite Staters directly to the farmers, fishers, restaurants, food producers, markets and farm stands, co-ops and grocery stores, and other food-related businesses to rally around the bounty of our vibrant food system through the Live Free + Eat Local Challenge, local food events, and more. Join in and learn more about NH Eats Local Month at <https://nheatslocal.com/nh-eats-local-month/2024-2/>.



Share Your Thoughts on the National Plan for Aging

The Administration for Community Living's (ACL) Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities is seeking input on the [Strategic Framework for a National Plan on Aging](#). The U.S. Department of Health and Human Services (HHS), through ACL, released the Strategic Framework in May.

The National Plan on Aging Community Engagement Collaborative, which is comprised of three ICC partners – [West Health](#), [The SCAN Foundation](#), and [The John A. Hartford Foundation](#) - is seeking input from both individuals and organizations on the [Strategic Framework and key aging issues](#).

By completing a short online survey, you can help shape the national plan on aging.

Deadline for taking the survey is September 15, 2024. It can be found at <https://westhealth.org/nationalplanonagingsurvey/>

August Medicare Minute

"Medicare Minutes" are short, engaging presentations on current Medicare topics hosted by the Medicare Rights Center. The presentation is streamed live using a Medicare interactive profile.

August Topic: Common Fall Open Enrollment Notices

- Thursday, August 15, 2024 • 3:00 - 3:30 PM

In the month or two leading up to Fall Open Enrollment, expect some important letters about your Medicare! These notices will tell you how your coverage and costs are changing for the next year. During this Medicare Minute, you'll learn what to look for in these notices so that you can evaluate how well your coverage will meet your needs in 2025.

Visit <https://www.medicareinteractive.org/medicare-minute-login> to register.

7 Ways to Avoid Becoming a Misinformation Superspreader

The problem of misinformation isn't going away – and may be getting worse, in the wake of the assassination attempt on former President Donald Trump. Internet platforms like Facebook and X have taken some steps to curb its spread and say they are working on doing more. But no method yet introduced has been completely successful at removing all misleading content from social media. The best defense, then, is self-defense.

Emerging psychology research has revealed some tactics that can help protect our society from misinformation. H. Colleen Sinclair, Associated Research Professor of Social Psychology, Louisiana State University shares seven strategies you can use to avoid being misled, and to prevent yourself – and others – from spreading inaccuracies in this article published in *The Conversation*. Read the story at <https://theconversation.com/7-ways-to-avoid-becoming-a-misinformation-superspreader-when-the-news-is-shocking-157099>

A Cautionary Tale: Prepaying Medical Bills

Some health care providers are asking patients to pay the deductible on their insurance before being treated, but patients are not legally bound to do so. Learn more about this current trend and what it could mean for you in this article written by Mary Gatta for Next Avenue. Read the story at <https://www.nextavenue.org/a-cautionary-tale-prepaying-medical-bills/>