

MCOA News

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Notes from the Executive Director: May 2010

Please Circulate to Your Staff

Enclosed in This Mailing:

- **Legislative Update: FY11 Budget Update – House Budget Complete – Maintains \$7/elder/Year but adds troubling Outside Language**
- **A Message from DMH Commissioner Barbara Leadholm**
- **May is Older American's Month: President Obama's Proclamation**
- **MCOA Briefs including News You Should Use, UpComing Events, Member Requests, and Personnel Updates**
- **MCOA's Call for Nominations for MCOA's 2010 Awards**
- **Older Americans' Mental Health Week: May 23-29, 2010 – Flyer**

House Finalizes FY11 Budget Proposal- Action Needed

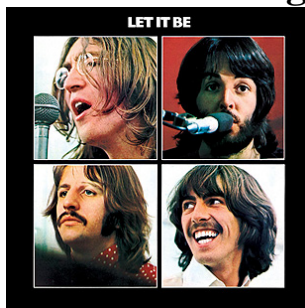
1. Call your Senators and state: "Given the fiscal outlook for FY11, we accept the House proposal of **\$8,215,068 for Line Item #9110-9002** even though it eliminates most of the competitive Incentive Grant Program; **because it maintains the \$7/elder/YEAR**". Note: It is roughly equal to FY10 post '9c' cuts, but it is 4.8% lower than FY10 GAA. **Ask for their support of \$7/elder.**
2. **Thank your Reps:** Find several public ways to say thank you: your newsletter, a letter to the editor, an announcement at lunch, or an event. Look for a photo op. Say thank you frequently!

The Spring 2010 edition of *Focal Points* is in the mail and every member COA will receive 5 hard copies to distribute within your town. We suggest you hand deliver them to Board Chair, Mayor/Town Council, Select Board/City Council, and Finance Committee. State Legislature and member so the Administration as well as other elder advocacy organization will receive their own copy by mail. MCOA also requests that you mention in your next local COA newspaper of its availability online for everyone to read at www.mcoaonline.com

Call for Presentation 2010

MCOA is actively soliciting ideas and presenters for our fall conference scheduled October 6-8th at the Sea Crest Resort in Falmouth. Proposals should be submitted as soon as possible, because the decision making process is set to begin. Instructions can be found at <http://www.mcoaonline.com/content/pdf/2010-CALL-FOR-PRESENTATIONS-0421-FINAL.pdf> We need your suggestions and ideas as well. What do you want us to offer?

Under the Category of Where Does the Time Go



By **Daniel Kreps**
May 07, 2010 6:03 PM EDT

Forty years ago this weekend, the greatest band of all time gave the world their final album together: On May 8th, 1970, the Beatles released *Let It Be*, the Phil Spector-produced LP that featured hits like the title track, "The Long and Winding Road" and one of John Lennon's most famous compositions, "Across the Universe." While the album was recorded during the band's caustic final days, *Let It Be* would go on to become one of their most celebrated records: it ranked Number 86 in *Rolling Stone's 500 Greatest Albums of All Time*.

MCOA Legislative Alert:

For the Up to the Minute FY11 Budget Proposals go to MCOA's Website

<http://www.mcoaonline.com/content/legislative/index.php>



HOUSE PASSES \$27.8B BUDGET, SENDS DEATH PENALTY TO STUDY

By Michael P. Norton and Jim O'Sullivan STATE HOUSE NEWS SERVICE

STATE HOUSE, BOSTON, APRIL 30, 2010.The House ratified a \$27.8 billion budget on a 132-25 vote Friday, adding what budget chief Charles Murphy called \$13 million to the bottom line of a committee draft, after a grueling, weeklong debate that keyed largely on policy matters as the state continues to grapple with a fiscal storm that prodded members to approve a \$234 million cut in aid to cities and towns and \$132 million less for higher education. Passing a spending plan that House leaders said could lead to 1,500 state workers losing their jobs, members opted to adopt no election-year tax hikes and turned aside bipartisan efforts to repeal recent sales tax increases.

Members of both parties criticized House leadership's management of the budget debate, calling parliamentary tactics to prevent direct votes on amendments undemocratic and reminiscent of previous regimes. "The process is by definition difficult," Murphy told the News Service. "There's no perfect way to get this week done. You know, being a little biased here, I thought we did a good job. Members had an opportunity to be heard ... We're always improving on the process."

The budget increases overall state spending by 3.2 percent. It now moves to the Senate, which plans its budget debate in late May. A conference committee in June will be charged with developing a budget accord by July 1.

Just before passing the budget, the House voted 105-52 to send a proposal reinstating the death penalty to a special commission for study. All 16 House Republicans voted against the budget, which passed without the traditional concluding remarks from supporters and opponents of the budget.

DeLeo's office pointed out after the budget was approved that it did not include any tax increases, including Gov. Deval Patrick's proposed increases on candy and soda and his plan to limit tax credits extended to the film industry. The budget also did not include any tax cuts, with members avoiding votes on repealing last year's sales tax increase and alcohol tax in favor of studying the issues – both proposals are on track for binding votes on the ballot in November.

The House budget uses about \$1.55 billion in one-time federal funds and does not make withdrawals from the state's rainy day fund, which House officials estimate is down to \$658 million but which once held a balance of roughly \$2.2 billion. The budget calls for \$300 million in savings through state debt restructuring, reduces spending in the trial court system by \$30 million and will lead to an estimate 1,500 layoffs of state workers.

With little in the way of new revenue to spend, debate for most of the week centered on whether to attach legislative proposals to the budget. Critics of the legislative process said too many ideas are bottled up in committees late in the session and are unlikely to surface for floor votes. House leaders, under Speaker Robert DeLeo, defended the process. "I suspect a lot of members' frustration is a result of the difficult fiscal circumstances," Murphy said.

Joining the GOP in voting against the budget were several Democrats, including former House budget chief Rep. John Rogers and current Health Care Financing Co-chair Rep. Harriett Stanley. Other Democrats who voted against the bill included Reps. Jennifer Callahan, Christine Canavan, Steven D'Amico, James Fagan, Colleen Garry, James Miceli, Robert Rice, and Thomas Stanley.

MCOA Legislative Alert: continued



HOUSE PASSES \$27.8B BUDGET: continued

Rogers, who lost a speakership fight to DeLeo last year, said his vote against the budget was not a personal shot at DeLeo or Murphy and said it reflected “no disrespect to those who put it together.”

But the Norwood Democrat said he found fault with three areas of the budget. Rogers said earmarks were accommodated by leadership in public safety line items but not for the state prison at MCI-Cedar Junction in Walpole. On revenue-sharing, Rogers said, “I felt as though local aid could have been and should have been level funded.”

He also ripped the process of handling hundreds of disparate amendments in single amendments.

“The process excluded members from speaking up for their districts with the super-amendment structure,” Rogers said. “Many of the members complained about the process being extremely confusing so it was not exactly member-friendly. There were scrums to the right of the rostrum but there was very little give and take.”

“It was a long week, very long week. I certainly wouldn’t want to be Charley Murphy or the speaker during this week,” House Rules Committee Chairman Rep. John Binienda (D-Worcester) said after the vote. “All budgets are easy to do when revenues are flowing in heavy and consistent but when revenues have been the way they have been the last couple of years it makes the budget process pretty cut and dried before you even get into it.”

As members grew weary from a full week of public and private deliberations, Rep. James Miceli forced a floor discussion late Friday about reinstating capital punishment in Massachusetts, but denied he had tried to leverage that vow to secure millions in hospital funds.

Miceli said House leaders had promised him a later debate on the issue, sure to draw attention during an election year, but he told the News Service he doubted that carrot would materialize.

“Today they’re promising everything, but that piece of legislation coming out of Rules Committee would never happen,” the 17-term Wilmington Democrat said. “It’ll never see the light of day. And I’ve talked about this for weeks.” Flagging lawmakers said they hoped any debate would be brief. Miceli said he briefly proposed to Murphy, the Ways and Means chair, dropping his death penalty push in exchange for a home rule bill permitting a Tewksbury land exchange, but told the News Service, “I would never have done it.”

Murphy told the News Service Miceli had, in fact, offered to drop the effort in exchange for \$2.2 million in public health hospital funds, and that Miceli had told Murphy he had no interest in the Tewksbury land transfer.

Also Friday, the House voted to preserve an amendment authorizing county sheriffs to impose a fee of up to \$5 a day fee on inmates, an assessment that supporters said would instill accountability and responsibility upon prisoners. The amendment was adopted 106-51 Thursday night and re-approved on a vote of 93-62 Friday afternoon.

Asked about plans to spend a \$49 million surplus in Lottery revenues that Treasurer Timothy Cahill announced this week, Murphy said, “We’ll take a look at that next week.”

The House did not conduct the traditional valedictory speeches by both parties, when Republicans routinely offer criticism and Democrats frequently praise the just-completed spending plans.

“Most members wanted to wrap it up, go home. So we chose to cut it short,” Murphy said.

-END-
04/30/2010

MCOA Legislative Alert: continued

FY 2011 Line Item Comparisons: House Final mirrors HWM Proposal

FY 2010 Budget Request (in Millions)	FY 2009	FY 2009 Final after 9c cuts Oct 08	FY 2010 Final after 9c and impoundments	FY 2011 Gov H- 2	FY 2011 HWM= House Final
1599-6901 Salary Reserve	\$ 23.0	\$ 23.0	\$ 0	\$ 0	\$ 0
4000-0600 LTC Options screening	\$.270	\$.270	\$ 2.5 (not funded)	\$ 0	\$ 2.5
4000-0650 Community First	\$ 6.5	\$ 6.5	\$ 0	\$ 0	\$ 0
4000-0640 NF Bed tax	\$ 288.5	\$ 288.5	\$ 288.5	\$ 288.5	\$ 288.5
9110-0100 EOE Admin	\$ 3.741	\$ 3.641	\$ 2.120	\$ 2.062	\$ 1.994
9110-1455 Rx Advantage	\$ 57.533	\$ 50.633	\$ 40	\$ 31.515	\$ 31.542
9110-1500 ECOP	\$ 48.199	\$ 48.199	\$ 45.789	\$ 45.789	\$ 45.789
9110-1630 purchased services	\$ 106.716	\$ 102.747	\$ 100.3	\$ 100.3	\$ 100.243
9110-1633 CM & ASAP operations	\$ 40.368	\$ 37.568	\$ 36.068	\$ 36.068	\$ 36.068
9110-1640 Mental Health	\$.225	\$.125	\$ 0	\$ 0	\$ 0
9110-1650 Family Caregivers	\$.250	\$ 0	\$ 0	\$ 0	\$ 0
9110-1900 Meals on Wheels	\$ 6.804	\$ 6.602	\$ 6.279	\$ 6.277	\$ 6.275
9110-1604 Supportive Housing	\$ 4.203	\$ 4.153	\$ 4.014	\$ 4.014	\$ 4.014
9110-1660 Congregate Housing	\$ 2.789	\$ 2.161	\$ 1.503	\$ 1.503	\$ 1.503
9110-1700 Homeless	\$.450	\$.153	\$.136	\$.136	\$.136
9110-1800 Housing Prog/Homeless	\$ 7.442	\$ 6.467	\$ 0	\$ 0	\$ 0
9110-1636 protective services	\$ 16.246	\$ 16.246	\$ 15.252	\$ 15.249	\$ 15.25
9110-9002 Councils on Aging	\$ 8.615	\$ 7.543	\$ 8.115	\$ 8.115	\$ 8.215

Outside Section the House added in Consolidated Amendment B - A Very Troubling Last Paragraph

SECTION XX. Notwithstanding any general or special law to the contrary, the executive office of health and human services shall make all reasonable efforts to renegotiate the commonwealth's 1115 waiver to permit passive opt-out enrollment for the senior care options plan as expeditiously as possible.

The following appeared on Boston.com: **Headline: Fight grows over shift of seniors' health plan**

"Legislation that could push more than 100,000 low-income senior citizens in Massachusetts into managed care health plans spurred intense lobbying yesterday, as consumer advocates argued the measure would strip patients of their freedom to stay in traditional Medicare, while proponents said it could save the state significant money."

http://www.boston.com/yourtown/waltham/articles/2010/04/28/fight_grows_over_shift_of_seniors_health_plan/?s_campaign=8315

MCOA Joins a Coalition led by Mass Home Care and AARP

Forcing Seniors To Join Health Plans They Don't Want Is Bad Public Policy, and Widely Unpopular

Forcing low-income seniors into health plans they did not freely choose is just wrong.

It's so bad, it has to be called by another name: "passive enrollment with an opt-out."

The House has included an outside section in the FY 2011 budget that is opposed by every major elderly rights group in the Commonwealth. It allows 'passive enrollment' that would force 130,000 elders into health programs not of their choosing. I hope you will read the attached letter to see why all the elderly rights groups oppose passive enrollment. Freedom to choose your health delivery system should be at the center of all health care reform. When the Senior Care Options (SCO) law was written in the late 1909s, all parties involved in drafting that bill insisted that enrollment in a SCO should be voluntary. Coerced enrollment into ANY plan, robs seniors of their freedom of choice. Consumers should not be forced into a plan that their doctor chose not to join, or their hospital. If you have any questions about the attached letter, please contact me at 978-502-3794.

Please help us ensure that no forced enrollment is put into the Senate budget. SEE ATTACHED LETTER

Al Norman, Mass Home Care

Open Letter to the Massachusetts Senate

May 3, 2010

Dear Senator,

The freedom to choose your own health plan---and the right to easily disenroll from that plan and choose another--- should be a key provision in any health care reform design.

An **amendment to the FY 2011 budget** has been adopted in the House that would force older people, who are eligible for Medicare and Medicaid, to be enrolled into a managed health care program they did not freely choose. Here is the language from the House budget:

“Notwithstanding any general or special law to the contrary, the executive office of health and human services shall make all reasonable efforts to renegotiate the commonwealth’s 1115 waiver to permit passive opt-out enrollment for the senior care options plan as expeditiously as possible.”

“Passive opt-out enrollment” is a euphemism for automatic assignment or forced enrollment. Under this amendment, state government would automatically enroll more than 130,000 low-income seniors on Medicare and Medicaid into Senior Care Options (SCO) plans—taking away consumer access to Medicare fee-for-service (FFS). Currently, Massachusetts has only 4 Senior Care Options plans. These seniors would then have to actively disenroll themselves to get out of plans they did not pick.

We are strongly against forced health care enrollment for the following reasons:

- This would rob seniors of their fundamental freedom to choose their own health care delivery program.
- This change may disrupt the current arrangements and established relationships that dually eligible seniors have with their health care providers. If enrollees do not have a relationship with a provider and cannot access their services in a timely manner they may seek care at higher cost-settings, such as emergency rooms, or may not seek care at all.
- This amendment would nullify the voluntary enrollment and disenrollment feature of the SCO law (Chapter 118E: Section 9D) which says: “The division shall ensure that enrollment in the program is voluntary. No disincentives for selecting a fee-for-service delivery system shall be included as part of any agreement or waiver regarding the program. The division shall ensure that all enrollees in a SCO have the right to disenroll from the program in any month upon submitting a notice of disenrollment to the division or contracted entity.” This language was agreed to by all the groups that helped draft this legislation in the late 1990s.
- This amendment would cost the Commonwealth \$989.26 million if implemented under current federal cost sharing law for the period 2010 to 2024, according to a 2008 study by The Lewin Group. (1) Federal law does not allow Medicare savings to accrue to the state, therefore any savings gained by passive enrollment would need to be returned to the federal government; Massachusetts would not see a financial gain in the first 14 years of the program.
- Under federal law Medicare beneficiaries must always have the choice of Medicare fee for service plans on a continuous basis. (2) There is no Medicare waiver allowed to this policy. The Executive Office of Health and Human Services cannot “renegotiate the commonwealth’s 1115 waiver” to passively enroll Medicare beneficiaries into a managed care plan as the House amendment instructs; rather it would require Congress to make a fundamental change to Medicare laws.
- It is possible to seek a waiver from CMS to passively enroll people on Medicaid into managed care organizations---but if those people happen to be dually eligible for Medicare---they can’t be forced to give up Medicare FFS.
- If Massachusetts seeks to force elderly Medicaid enrollees into managed care, while their Medicare benefits remained fee for service, it would create absolute chaos for elders and their providers. Any hope of improving coordination of their care would be lost despite the improvements achieved through the current voluntary SCO program. It would be difficult for providers to administer and nearly impossible for consumers to understand.
- There are hospitals and doctors’ practices that have not agreed to be part of the SCO network. SCO networks need to be specialized and closely integrated with the SCO’s staff working to coordinate care. If elders are forced to enroll, they will either need to discontinue their relationship with their physician or hospital, or SCO programs will be forced to work with networks of providers that are not committed to the SCO program. In areas where there is some SCO penetration there may be only a few primary care physicians participating in a program. This means that tens of thousands of elders would have to involuntarily change primary care providers, or worse, not have a primary care provider at all.
- Passive enrollment will create significant barriers to access to care for large numbers of elders. In many parts of the Commonwealth, there are either no SCO plans, or only one SCO plan. This is true not just in rural areas like Western Massachusetts and the Cape---there are many pockets of unserved cities and towns in suburban and urban areas as well.
- If passed into law, the provisions of this amendment would suddenly swell SCO enrollment from 14,000 to 130,000 recipients. Thousands of seniors would seek to disenroll from plans that do not have their doctor, or specialists, or hospitals in the network. The patient ‘churning’ that would be created by this dynamic would be incredibly costly to the state and to the SCO programs, and are counterproductive to the goal of efficient, effective use of taxpayer money.

- Seniors may not even realize they have been passively enrolled in the program until an acute need arises. Elders may show up at their doctor's office and learn for the first time that they have been enrolled in a managed care network that their doctor does not belong to. This is a situation we must seek to avoid at all costs.
- Elders need to fully understand what it means to be in a managed care plan, the concept of a network, the role of the care manager, and the need for them to be active in the design of their care plan. All of this work requires 'informed consent' by the elder and cannot be accomplished by automatic enrollment in a SCO plan.
- Mandatory enrollment in SCO plans would effectively shut down other valuable programs currently working with dual eligibles. The PACE and Community Choices programs, which are targeted exclusively to divert people from nursing homes, could end if all referrals go directly into SCOs. Programs like PACE, Choices and SCO should all be options available to consumers as part of a continuum of long term care supports.

Our objections to this amendment do not mean that we oppose the SCO program. The coordination of health and long term care services provided through the use of SCOs collaborating through an innovative collaboration with Aging Services Access Points (ASAPs) is an important option for elders. Many of us were involved in the multi-year drafting of the SCO law, and one of us is a current SCO program provider.

What we object to is forcing low-income people to enroll in this model as an automatic default. We believe that seniors are smart enough consumers to be able to pick their own health care delivery approach--without having the General Court forcing them into one.

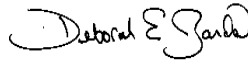
The Lewin study has suggested: "Dual eligibles themselves have little incentive to voluntarily enroll in managed care organizations. In the FFS setting, dual eligibles receive an extraordinarily comprehensive benefits package at essentially no cost." (3) The plan that will be most attractive to seniors on MassHealth is the plan that offers them the best set of benefits. This is true for all consumers--and we respect the right of elders to respond to programs that best address their needs. We should not steer consumers away from programs that they believe are the most advantageous for them.

We urge you to reject any efforts to add "passive enrollment" language into the Senate budget—and to aggressively oppose such language in Conference Committee. We look forward to working with the General Court and SCO plans to come up with other solutions to inform seniors of the full range of health and long term care plans that are available to them, as long as they have the right to choose an approach without coercion.

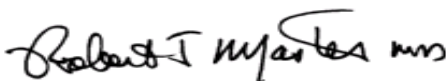
Thank you for your consideration.




Al Norman
Mass Home Care



Deborah E. Banda
AARP Massachusetts



Robert J. Master, MD
Commonwealth Care Alliance



Bob Wakefield
Elder Service Plan of the North Shore/ PACE



Chet Jakubiak
Mass Association of Older Americans



Carolyn Villers
Mass Senior Action



Amy Whitcomb Slemmer
Health Care For All

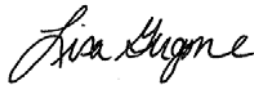


David P. Stevens
Mass Councils on Aging

Open Letter to the Senate P3



Bill Allan
Disability Policy Consortium



Lisa Gurgone
MA Council for Home Care Aides Services



Sean Caron, Esq.
Coalition For Senior Housing



Lisa Krinsky
LGBT Aging Project

Footnotes:

- (1) “Increased Use of the Capitated Model for Dual Eligibles: Cost Savings Estimates and Public Policy Opportunities.” The Lewin Group, November, 2008. Table 9.
- (2) 42 USC 1395w-21(a)(1) (Medicare); 42 USC 1396u-2(a)(2)(B) (Medicaid); 42 USC 1315 (Medicaid waivers). See attachment below
- (3) The Lewin Group, op.cit. p.1.

Medicare law citations

Medicare:

Part C—MEDICARE+CHOICE PROGRAM³¹⁴ ELIGIBILITY, ELECTION, AND ENROLLMENT

Sec. 1851. [42 U.S.C. 1395w–21] (a) Choice of medicare benefits through medicare+choice plans.—

(1) In general.—Subject to the provisions of this section, each Medicare+Choice eligible individual (as defined in paragraph (3)) is entitled to elect to receive benefits (other than qualified prescription drug benefits) under this title—

(A) through the original medicare fee–for–service program under parts A and B, or

(B) through enrollment in a Medicare+Choice plan under this part,

and may elect qualified prescription drug coverage in accordance with section [1860D-1](#).

Medicaid:

PROVISIONS RELATING TO MANAGED CARE

Sec. 1932. [42 U.S.C. 1396u–2] (a) State Option to Use Managed Care.—

(1) Use of medicaid managed care organizations and primary care case managers.—

(A) In general.—Subject to the succeeding provisions of this section, and notwithstanding paragraph (1), (10)(B), or (23)(A) of section [1902\(a\)](#), a State—

(i) may require an individual who is eligible for medical assistance under the State plan under this title to enroll with a managed care entity as a condition of receiving such assistance (and, with respect to assistance furnished by or under arrangements with such entity, to receive such assistance through the entity), if—

(I) the entity and the contract with the State meet the applicable requirements of this section and section [1903\(m\)](#) or section [1905\(t\)](#), and

(II) the requirements described in the succeeding paragraphs of this subsection are met; and

(ii) may restrict the number of provider agreements with managed care entities under the State plan if such restriction does not substantially impair access to services.

(B) Definition of managed care entity.—In this section, the term “managed care entity” means—

(i) a medicaid managed care organization, as defined in section [1903\(m\)\(1\)\(A\)](#), that provides or arranges for services for enrollees under a contract pursuant to section [1903\(m\)](#); and

(ii) a primary care case manager, as defined in section [1905\(t\)\(2\)](#).

(2) Special rules.—

(A) Exemption of certain children with special needs.—A State may not require under paragraph (1) the enrollment in a managed care entity of an individual under 19 years of age who—

(i) is eligible for supplemental security income under title XVI;

(ii) is described in section [501\(a\)\(1\)\(D\)](#);

(iii) is described in section [1902\(e\)\(3\)](#);

(iv) is receiving foster care or adoption assistance under part E of title IV; or

(v) is in foster care or otherwise in an out-of-home placement.

(B) Exemption of medicare beneficiaries.—A State may not require under paragraph (1) the enrollment in a managed care entity of an individual who is a qualified medicare beneficiary (as defined in section [1905\(p\)\(1\)](#)) or an individual otherwise eligible for benefits under title XVIII.

(C) Indian enrollment.—A State may not require under paragraph (1) the enrollment in a managed care entity of an individual who is an Indian (as defined in section 4(c) of the Indian Health Care Improvement Act of 1976 (25 U.S.C. 1603(c)^[188]) unless the entity is one of the following (and only if such entity is participating under the plan):

(i) The Indian Health Service.

(ii) An Indian health program operated by an Indian tribe or tribal organization pursuant to a contract, grant, cooperative agreement, or compact with the Indian Health Service pursuant to the Indian Self-Determination Act (25 U.S.C. 450 et seq.).

(iii) An urban Indian health program operated by an urban Indian organization pursuant to a grant or contract with the Indian Health Service pursuant to title V of the Indian Health Care Improvement Act (25 U.S.C. 1601 et seq.).

MCOA Legislative Alert: continued



Massachusetts Business Taxes: How Our State Compares to the Nation

April 6, 2010 National studies have examined both the level of business taxation in Massachusetts and the "tax climate." These studies have consistently found that the overall level of business taxation is significantly lower in Massachusetts than in most states. An update of one prominent study, produced regularly by the Council on State Taxation (COST), ranks Massachusetts 43rd for its overall business tax level in Fiscal Year 2009, placing Massachusetts among the states with the lowest business taxes nationally. This *Facts at a Glance* examines this updated study and discusses the implications of its findings for Massachusetts.

The full fact sheet, *MA Business Taxes: How Our State Compares to the Nation*, is available at www.massbudget.org or by clicking on http://www.massbudget.org/documentsearch/findDocument?doc_id=721

MassBudget provides independent research and analysis of state budget and tax policies, as well as economic issues, with particular attention to the effects on low- and moderate-income people.

STATE HOUSE NEWS SERVICE

ADVANCES: WEEK OF MAY 9, 2010 SHNS "THE LEGISLATIVE PROCESS IS A TOUGH ONE"

Heading into the final weeks, there's no certainty that any of the top legislative priorities will make it into law, other than the budget, and a high likelihood that the menu of big bills will become entwined in high stakes deal-making, which in an election year is often aimed at ensuring all elected depart the session with something to highlight. But don't underestimate the ability of the Legislature, and the legislative process, to generate twists and pitfalls. Here's a few. The electorate is in a bad mood over the economy and appears to want government to pay almost singular attention to job creation efforts. Legislators can't always agree even when most of them agree on a bill – the hung-up transgender rights bills is a good example of this, as well as so-called kayak safety bills that the branches surprisingly sent to a conference committee since they couldn't reach a resolution more informally. The budget – the state is still mired in its seemingly never-ending fiscal crisis, which means there's little if anything to spend on new priorities. Vetoes – while there's not much new money, \$27.8 billion is a lot of money and veto overrides in recent years have occasionally monopolized legislative attention in the final weeks and days of formal sessions in July. Current events – just as a tragic teen suicide helped send an anti-bullying bill onto the state's lawbooks, other unforeseen events will play a role in policy making. But the news is not always enough to provide policy momentum. Massachusetts endured record floods and a major disruption of its drinking water supply while an allegedly critical disaster preparedness bill remained stalled in conference committee, apparently out of gas. Politics are also a factor. The fact that two of the three leading candidates for governor are slamming the transgender rights bill, for instance, is helping to make passage of that proposal a heavier lift for its supporters. Hurt feelings and dissatisfaction can become factors – members unhappy about the process or their own bills can affect the flow of other bills, behavior that can take on extra significance as the session winds down. Lastly, don't forget the governors are coming – Gov. Deval Patrick from July 9 – 12 will host all of his counterparts at a National Governors Conference in Boston that will provide an immense distraction. Veteran Rep. Liz Malia (D-Jamaica Plain), while predicting victory on CORI reform this week, cautioned activists pushing the bill to stay tuned in to the bill's progress. "The legislative process is a tough one," said Malia.

STATE CAPITOL BRIEFS – THURSDAY, MAY 6, 2010

STATE HOUSE NEWS SERVICE SENATE BUDGET RELEASE SET FOR MAY 19

The Senate Ways and Means Committee plans to release its fiscal 2011 budget bill on Wednesday, May 19, according to a committee spokeswoman. The Senate on Thursday agreed to a budget amendment filing deadline and a date to begin floor debate on the plan. Debate will begin on Tuesday, May 25 and amendments will be due by noon Friday, May 21. The \$27.8 billion House budget approved last week featured the use of \$1.6 billion in one-time federal revenues and \$1.4 billion in savings and spending cuts, including a \$234 million local aid reduction.

MCOA News You Can Use:

The White House

Office of the Press Secretary

For Immediate Release

April 28, 2010

Presidential Proclamation — Older Americans Month

A PROCLAMATION

Older Americans have lived through momentous and trying times in our history, and they have strengthened our national character. Their experience and wisdom connect us to the past and help us meet the challenges of the present. During Older Americans Month, we show our support and appreciation for these treasured individuals who have contributed so much to our Nation.

This year's theme for Older Americans Month, "Age Strong, Live Long," recognizes the efforts of people of all ages to promote the well-being, community involvement, and independence of senior citizens. As Americans live longer, healthier, and more productive lives, many are starting second careers and continuing to be involved in their communities. Dedicated older Americans are also answering the call to serve through the Corporation for National and Community Service's Senior Corps.

My Administration is committed to ensuring older Americans can age strong and live long. By strengthening Medicare and Medicaid, while protecting Social Security, we help ensure all Americans can age with dignity. The recently enacted Affordable Care Act strengthens Medicare by providing free preventive care starting next year, enhancing care coordination, and gradually closing the "donut hole" gap in prescription drug coverage. In addition, this law includes provisions to help prevent and eliminate elder abuse, neglect, and exploitation. Along with the Middle Class Task Force's Caregiver Initiative, we are investing in wellness and prevention programs to help seniors remain healthy and close to their loved ones. The Administration on Aging's network of State and local organizations provides services to older Americans that help prevent unnecessary hospitalization or institutionalization. We must also protect seniors by expanding efforts to fight fraud, waste, and abuse in Medicare and Medicaid through national and State efforts, as well as community-based programs that empower retirees to detect and defend against health care fraud.

Many of our Nation's older men and women have worked tirelessly and sacrificed so their children could achieve something greater. Their passion and experience inspire us all and we are privileged to honor and care for the generations whose legacy continues to enrich our Nation and shape our future.

NOW, THEREFORE, I, BARACK OBAMA, President of the United States of America, by virtue of the authority vested in me by the Constitution and the laws of the United States, do hereby proclaim May 2010 as Older Americans Month. I call upon citizens of all ages to honor older Americans this month with appropriate ceremonies and activities.

IN WITNESS WHEREOF, I have hereunto set my hand this twenty-eighth day of April, in the year of our Lord two thousand ten, and of the Independence of the United States of America the two hundred and thirty-fourth.

BARACK OBAMA

CDSMP Grants: Please be aware of these new Chronic Disease Self Management Program (CDSMP) grant opportunities. These funds are available on a competitive basis in the following counties: Details are posted on MCOA's website at <http://www.mcoaonline.com/content/grants/index.php>

Western MA counties:

- Franklin
- Hampden
- Hampshire
- Berkshire

Southeastern MA counties:

- Bristol
- Plymouth
- Barnstable
- Dukes & - Nantucket

“By Friday, May 14th, 2010, please provide a one-page **letter of intent** to express your interest in becoming a Better Choices, Better Health CDSMP partner with MDPH.”

Applications should be submitted via postal mail or email to Linn no later than 4:00 pm on Friday, May 28, 2010. If you have questions regarding the application, please contact her at 617-624-5965.

DPH Capacity Grant: MCOA has qualified for DPH's Capacity Building for Local Policy, Systems and Environmental Change grant (#100217) pending meeting some final conditions. This 'award' puts us on a short list of potential bidders to be considered first for DPH grants and streamlines the application process. More details to follow.

Three from Paul J. Lanzikos, Executive Director, North Shore Elder Services

- Excellent interview and related resources on Alzheimer's:
<http://speakingoffaith.publicradio.org/programs/2010/alzheimers>
- The Department of Public Health has released “Health of Massachusetts,” a very comprehensive, user-friendly report that compiles data from over 50 sources and covers topics such as “Community Assets,” “Mortality,” Health Care Access,” Health Care Quality,” Natality and Early Childhood,” “Infectious Disease,” “Wellness and Chronic Disease,” “Environmental Health,” “Occupational Health,” “Alcohol, Tobacco, and Other Drug Use,” “Unintentional Injury,” Suicide and Self Injury,” “Violence,” and “Mortality.” It also incorporates Health Disparities and policy perspectives throughout. This is a valuable reference resource, especially when preparing grant proposals. To access it go to: The Department of Public Health or directly to: www.mass.gov/dph/healthofmassachusetts
The regional dialogues that Commissioner Auerbach has scheduled around the Commonwealth this spring feature highlights from this report. See the attached PDF for a flyer with dates and locations for the remaining sessions.
- A new research study by The Hartford Financial Services Group, Inc. and ComPsych Corporation reveals that "the demands of balancing a full-time job and caring for an injured or ill family member is a major source of stress for many Baby Boomers and is impacting their productivity and their health." The study, which surveyed ComPsych employees who had accessed the company's Employee Assistance Program, found that "younger Baby Boomers, ages 45 to 54, are carrying the largest burden of family care responsibilities, with more than half saying they've taken time off from work due to their caregiving responsibilities." The article offers recommendations to employers on how they can help relieve the pressure felt by working caregivers. For more information, visit:

The Hartford:

[http://www.thehartford.com/servlet/Satellite?pagename=GBD Internet/HLI03Article/NewsArticle&cid=1150853632671&c=HLI03Article&p=1248974913369](http://www.thehartford.com/servlet/Satellite?pagename=GBD+Internet/HLI03Article/NewsArticle&cid=1150853632671&c=HLI03Article&p=1248974913369)

MCOA News You Can Use: continued

And Three From Emmett Schmarsow, EOEAE

1. **Survey Request:**

This email asks your assistance in helping clarify a topic that affects many, if not virtually all COAs: how and when municipal agencies act in concert with COAs to create a more effective (or most effective) approach to meeting elder needs. This survey was created by Susan Carp, a grad student in the UMass gerontology program, and me to help clarify the mostly anecdotal information available regarding community cooperation. There are some excellent models in the network and we hope to be able to find some similarities and practices that can be shared with the network. The survey is brief and your input will be most helpful. Please go to this link and complete this questionnaire **no later than the close of business on Tuesday, May 11th**. **Thank you in advance for your support!**

<https://www.surveymonkey.com/s/6PCPRB6>

If you have any questions, please feel free to email or call me at 1-800-698-9723.

2. The New York Times recently carried a positive article regarding the “modern middle aged brain” (from 40 to 65). This follows research the author conducted on the teen-age brain; all is not lost!
<http://well.blogs.nytimes.com/2010/04/30/the-talents-of-a-middle-aged-brain/?hpw>

3. **Articles of Interest from the CDC**

- **Advance Care Planning Improves End of Life Care and Reduces Stress for Relatives**
(By Emma Dickenson, British Medical Journal via EurekAlert!, March 23, 2010)
http://www.eurekalert.org/pub_releases/2010-03/bmj-acp032210.php
- **Study: 1 in 4 Seniors Need Health Care Decisions Made for Them**
(By Anonymous, Associated Press via USA Today, April 1, 2010)
http://www.usatoday.com/news/health/2010-04-01-elderly-living_N.htm
- **Advance Directives for End-of-life Care Result in Preferred Treatment**
(By Shari Roan, Los Angeles Times, March 31, 2010)
<http://articles.latimes.com/2010/mar/31/science/la-sci-end-of-life1-2010apr01>
- **Study Shows Strong Interest in Palliative Care Programs, Services and Integration Vary Across Nation**
(By Julie Penne, University of Texas M.D. Anderson Cancer Center via EurekAlert!, March 17, 2010)
http://www.eurekalert.org/pub_releases/2010-03/uotm-sss031710.php
- **Numerous Factors Weighed When Patients Cannot Make Their Own Decisions**
(By Cindy Fox Aisen, Indiana University School of Medicine via EurekAlert!, March 22, 2010)
http://www.eurekalert.org/pub_releases/2010-03/iuso-nfw032210.php
- **Stressful but Vital: Picking a Nursing Home**
(By Walecia Konrad, The New York Times, March 18, 2010)
<http://www.nytimes.com/2010/03/20/health/20patient.html>
- **Maintaining Regular Daily Routines is Associated with Better Sleep Quality in Older Adults**
(By Kelly Wagner, American Academy of Sleep Medicine via EurekAlert!, April 1, 2010)
http://www.eurekalert.org/pub_releases/2010-04/aaos-mrd031810.php
- **Adult Day Programs: A Reprieve for Families and the Elderly**
(By Paula Span, The New York Times, March 31, 2010)
<http://newoldage.blogs.nytimes.com/2010/03/31/a-reprieve-for-caregivers-and-the-elderly-alike/>
- **Self-esteem Declines Sharply Among Older Adults While Middle-aged are Most Confident**
(By Audrey Hamilton, American Psychological Association via EurekAlert!, April 1, 2010)
http://www.eurekalert.org/pub_releases/2010-04/apa-sds040110.php
- **A Snapshot Along the Path of Alzheimer's Progression**
(By Anonymous, USA Today, April 4, 2010)
http://www.usatoday.com/LIFE/usaedition/2010-04-05-blackwells05_ST_U.htm?csp=34
- **Middle-aged Americans Reporting More Mobility Related Disabilities, Study Finds**
(By Warren Robak, RAND Corporation via EurekAlert!, April 6, 2010)
http://www.eurekalert.org/pub_releases/2010-04/rc-mar040210.php

And Three From Emmett Schmarsow, EOE- Articles continued

- **Grouping All Asians Together Could Be Bad For Health**
(By Paul Kleyman, New America Media, April 5, 2010)
http://news.newamericamedia.org/news/view_article.html?article_id=015fb08939d8b0e72e1ab66356f77031
- **New Survey Finds Grandparents Play Key Role in Lives of Children With Autism**
(By Megan Lustig, Kennedy Krieger Institute, April 6, 2010)
http://www.kennedykrieger.org/kki_news.jsp?pid=8729
- **Report: More Seniors to be Homeless by 2020**
(By Brent D. Winstrom, The Wichita Eagle, March 30, 2010)
<http://www.kansas.com/2010/03/30/1247226/report-more-seniors-to-be-homeless.html>
- **Walking Associated with Lower Stroke Risk in Women**
(By Bridgette McNeill, American Heart Association via EurekAlert!, April 6, 2010)
http://www.eurekalert.org/pub_releases/2010-04/aha-waw040210.php
- **Aging Motorcyclists Hit the Road, But at Greater Risk of Injury, Death**
(By Emily Butler, University of Rochester Medical Center, April 5, 2010)
<http://www.urmc.rochester.edu/news/story/index.cfm?id=2813>
- **Some Older ER Patients are Getting the Wrong Medicines, U-M Study Finds**
(By Bruce Spiher, University of Michigan Health System via EurekAlert!, March 12, 2010)
http://www.eurekalert.org/pub_releases/2010-03/uomh-soe031210.php
- **Gay Seniors Come Out Late, Start Second Lifetime**
(By Matt Sedensky, Associated Press via Boston.com, March 15, 2010)
http://www.boston.com/news/nation/articles/2010/03/15/gay_seniors_come_out_late_start_second_lifetime/
- **Poets of Dementia**
(By Paula Span, The New York Times, April 9, 2010)
<http://newoldage.blogs.nytimes.com/2010/04/09/poets-of-dementia/>
- **Unemployment Rate Doubles For Older Women**
(By Gloria Hillard, National Public Radio, March 15, 2010)
<http://www.npr.org/templates/story/story.php?storyId=124532069>
- **Do You Know How Much to Save for Retirement?**
(By Michelle Singletary, The Washington Post, March 21, 2010)
<http://www.washingtonpost.com/wp-dyn/content/article/2010/03/19/AR2010031905579.html?sid=ST2010032003289>
- **More Multigenerational Families Living Together**
(By Hope Yen, Associated Press via Boston.com, March 18, 2010)
http://www.boston.com/news/nation/articles/2010/03/18/more_multigenerational_families_living_together/
- **Drug Assistance Programs Keep Seniors on Track**
(By Susan Jaffe, Kaiser Health News via USA Today, March 22, 2010)
http://www.usatoday.com/news/health/2010-03-22-medication-seniors_N.htm
- **Dance and Drama Workshops Helping Dementia Sufferers**
(By Barbara Lantin, The Times Online, March 16, 2010)
http://www.timesonline.co.uk/tol/life_and_style/health/mental_health/article7062937.ece

Discussion of issues for the public health and aging services networks [HEALTHYAGING-LIST@LISTSERV.CDC.GOV], courtesy of Stephanie Vachirasudlekha at the federal Centers for Disease Control. www.cdc.gov/aging

Links to non-Federal organizations are provided solely as a service to readers. Links do not constitute an endorsement of any organization by the CDC or Federal Government, and none should be inferred. The CDC is not responsible for the content of the individual organization web pages found at this link.

Website addresses occasionally are broken due to the text wrapping from one line to the next. In order to fix the broken link, please copy both lines of text into your web browser without spaces in between. Website address will usually end with ".html", ".htm", or ".asp". Due to copyright restrictions on most articles, we are unable to paste them into the body of this e-mail.

MCOA News You Should Know

Ageism and/or Poor Reporting

A recent article by the **MetroWest Daily** the reporter Evan Lips commenting on the role of COAs stated:

“The Council on Aging executive director is responsible for overseeing the senior center and organizing events for seniors such as cribbage, bingo, yoga, and Zumba dance classes.”

The article was reporting the decision by Mayor Stevens of Marlborough not to renew Amy Loveless’s contract as COA Director. The complete article can be found at

<http://www.metrowestdailynews.com/news/x1195009408/Marlborough-parts-ways-with-Council-on-Aging-director>

This last paragraph set off a firestorm of protest culminating in this Letter to the Editor from Cindy Chesmore, Director, Hopkinton Senior Center. On behalf of the network thank you for your response.

Evan Lips can be reached at 508-490-7461 or elips@cnc.com

Hi all,

I sent the following editorial into the MetroWest news. Don’t know if they’ll print it but I feel better having hit the send button.

Letter to the Editor

I, and many other Senior Center directors, found the last paragraph of the article in the May 1 MetroWest Daily News by Evan Lips, “City parts ways with council director”, a bit insulting. If you have not made use of a Senior Center or know what’s offered, you would be led to believe (by the article) that offering games and exercise are the highlights of our abilities.

Games and exercise are a very small part of the offerings at a well run Center. It’s transportation, nutrition, socialization, education, wellness clinics and seminars, on and on and on ... that we provide. We are responsible for building the programs that provide services for seniors such as transportation to the doctors, stores and Center programs; providing services or access to services the assist seniors in their homes, knock on your door when no one has seen you as usual, provide help obtaining tax rebates, SSI, fuel assistance, health insurance counseling. It is our responsibility as directors to see that our towns support our senior services, get funding from other sources when our town budgets can’t go as far as we need, and that seniors receive the recognition and care they have earned. We also work with families of seniors and are often the access point to services for younger residents. We guide our staff, watch over our volunteers and keep peace among the masses. We are facility and property managers. It is not an easy job. We do serious work, usually far more than compensated for. Please do not demean Senior Centers or the staffs. We could all use a pat on the back. Please visit our web site: hopkinton seniorcenter.org for more information on what’s going on in our corner of the world.

Cindy Chesmore
Director
Hopkinton Senior Center

MCOA News You Can Use: continued

Message from DMH Commissioner Barbara Leadholm, M.S., M.B.A April 27, 2010

As part of the DMH Redesign I am announcing the Department's new Area configuration and the senior staff assignments that accompany the new organizational structure.

Since my initial announcement on April 14, I have heard from many staff, consumers and stakeholders. We will be working with unions and management throughout the process and will make changes in a way that minimizes disruption to employees, consumers, families and the provider community. I appreciate your continued hard work and cooperation through this process.

Currently DMH is configured into six Areas. With the Redesign plan, we are consolidating the Areas to three and reconfiguring them as follows:

- Metro Boston-Southeastern Area
- Metro Suburban-North East Area
- Western and Central Mass. Area

This represents a change in the Area configuration as previously announced on March 23, 2010.

As announced last week, Elizabeth Sullivan, former Western Mass. Area Director, resigned from the Department; and Peter Evers, who served as Area Director for the Southeastern Area, also left the Department to join The Home for Little Wanderers. We thank both Elizabeth and Peter for their service and dedication to individuals with mental illness and to the mental health community.

Ron Dailey, who is currently the Southeastern Area Operations Manager, was appointed the interim Area Director for the Southeastern Area; and Susan Sprung, who currently serves as the Western Mass. Area Director of Community Services, was appointed the interim Area Director for Western Mass. These appointments will ensure the successful and seamless continued operation of the Areas and ensure leadership from each of the Areas is an integral part of developing and implementing the redesign plan. The effective date for these interim appointments was April 16, 2010.

As part of the Area consolidation the remaining Area Directors are reassigned as follows:

The current Area Director for Metro Boston, Clifford Robinson, will lead the new Metro Boston-Southeastern Area. Cliff will work with Ron Dailey and the Southeastern Area staff to transition to one Area, with Cliff leading the merger of the new Area leadership team.

The current Area Director of the North East Area Susan Wing will serve as the Area Director for the Metro Suburban-Northeast Area. Susan will assume responsibility for bringing together the Metro Suburban and North East Areas.

The current Area Director of the Metro Suburban Area Theodore Kirousis will be assuming the responsibilities of leading the consolidation of Central and Western Mass Areas and will continue on as Area Director of this new consolidated Area.

The current Area Director of the Central Mass. Area Ann Scott will be assuming the responsibilities of the Director of the Business Bureaus. Ann brings the unique experiences of being both an Area Director and an

MCOA News You Can Use: continued DMH Commissioner Leadholm p.2

Area Operations Manager within the Department. Her keen ability and understanding of the intersection between program and fiscal aspects of DMH, and the importance of their integration is integral to the success of this position. As she works with staff to define and develop the functions of the Business Bureaus, the Department will increase its effectiveness and efficiency in contract oversight and monitoring, management of state-owned facilities and fiscal accountability.

We will post the Director of Inpatient position. This position will have overall administrative oversight of our inpatient facilities. The DMH hospitals will continue to be managed by Chief Operating Officers/Directors of Nursing/Facility Medical Directors.

Another change in reporting structure involves the Training division which will now be part of the Mental Health Services division and will report directly to Ellie Shea-Delaney, Assistant Commissioner of Program Development and Interagency Planning.

The effective date for the four reassignments of the Area Directors is June 1, 2010. The Department remains committed to service Sites based on meeting geographic need of the populations served.

At this time we are not making any changes that impact bargaining unit employees. The entire redesign plan will be implemented in Phases with full implementation targeted for December 2010. As decisions regarding personnel are made I will provide regular updates.

Although I understand the anxiety related to change, it is important to remember the following principles about the DMH Redesign plan:

1. We don't expect to close or move any local Sites. The organizational change is administrative, combining positions when possible to achieve savings. The new structure will eliminate duplication; support improved communication within our agency; promote stronger collaboration within and across divisions; and advance the use of data and measures to monitor results.
2. The Department's restructuring will focus on strengthening the system as we adjust to anticipated budget challenges in FY2011. Although we will not know our final budget until the end of June, the Redesign positions us to meet the budget efficiencies we must achieve.

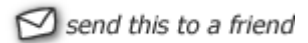
I will keep you apprised of each Phase of the Redesign plan as we move forward. We will be working with unions and management, our Citizen Boards and other stakeholders throughout this process, and I will communicate the plans and decisions as they evolve. To ensure that we continue hear your thoughts or comments, please send them to DMHCommissionersOffice@dmh.state.ma.us. You can send them anonymously or provide your contact information so that we can respond.

Thank you for your continued dedication to the adults, children, adolescents and families we serve as we strive to transform and become stronger.

Commissioner Leadholm

MCOA News You Can Use: Seniors of Color Face Severe Economic Insecurity

If you're having trouble viewing this email, you may [see it online](#).



Institute on Assets and Social Policy

Informing policies and practices that broaden wealth, reduce inequality,
and improve the social and economic well-being of American households.

May 5, 2010

The Institute on Assets and Social Policy and Demos are pleased to bring their newest report in the "Living Longer on Less" series to your attention. This report demonstrates the great challenges that seniors of colors face during their retirement years.

Based on the Senior Financial Stability Index (SFSI) described in our previous reports, 91% of both African American and Latino seniors face long-term financial vulnerabilities. The major sources of economic risk include the lack of sufficient financial assets, and expenses for housing and health care.

The report discusses a number of policies that need to address decreasing incomes and escalating costs for seniors. It calls for strengthening social security and pension provisions, enhancing asset building opportunities through the life course, promoting flexible employment arrangements for seniors, addressing the Medicare crisis as part of the overall healthcare crisis, and instituting long-term care insurance for all. These actions are especially critical to affirm our social contract not only with our current elderly population, but for all of us who expect to retire one day with security, dignity, and respect in older age.

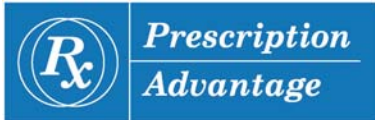
On behalf of the co-authors, we hope you find this report of interest.

[Click here for the full report http://iasp.brandeis.edu/pdfs/SFSI.pdf](http://iasp.brandeis.edu/pdfs/SFSI.pdf)

Thomas M. Shapiro, Director
Tatjana Meschede, Research Director

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MCOA News You Can Use: continued



TO: Outreach Partners and Interested Parties

FROM: ***Prescription Advantage***

DATE: May 6, 2010

BULLETIN

This bulletin is one in a series of routine updates regarding Prescription Advantage. These notices are designed to inform a broad network of outreach partners and other interested parties about Plan updates affecting both current and future Plan members.

2009 Blue Cross Part D Premium Billing Error

Blue Cross and Blue Shield discovered an error with their 2009 Part D premium billing. This error affected Prescription Advantage members in the S1, S2 and S3 categories who were enrolled in the Blue Cross stand-alone Part D plans during 2009. This error resulted in both over billing and under billing members. Adjustments have been made to member accounts and will be reflected in the April 2010 premium invoice scheduled to be mailed by May 7th.

Approximately 5000 Prescription Advantage members in Blue MedicareRx (S2983) will receive an invoice reflecting the 2009 additional premium amount that they were not billed for in 2009 and another 750 members will receive an invoice reflecting a credit balance. In addition, there are 100 members who are no longer enrolled in a Blue MedicareRx plan and they will be issued a refund check within approximately 30 days of the April invoice mailing

Although a letter of explanation will accompany the bills and refund checks, Blue Cross Blue Shield of Massachusetts/Blue MedicareRx recognizes that there may still be some confusion. Members should be encouraged to call Blue Cross Blue Shield of Massachusetts/Blue MedicareRx directly for a more detailed explanation.

Blue Cross Blue Shield of Massachusetts/Blue MedicareRx Customer Service can be reached at: 1-888-543-4917. TTY/TDD should call 1-866-236-1069.

MCOA News You Can Use: continued

Regionalization Advisory Commission

The Joint Legislative Committee on Municipalities and Regional Governments, Lieutenant Governor Timothy Murray, and the Massachusetts Association of Regional Planning Agencies **Invite municipal officials and citizens to attend hearings to provide feedback on the Final Report of the Regionalization Advisory Commission.** Town Meetings held **Tuesday 4 May / Tuesday 11 May / Friday 14 May / Tuesday 18 May / Friday 22 May** See: <http://www.mcoaonline.com/content/civic/index.php>

SBA Disaster Loans Available

The Small Business Association can help home owners renters and non-farm business of all sizes as well as private non-profit organizations with property damaged by disaster. The filing deadline to return applications for physical property damage is **May 28, 2010**. The deadline to return economic injury applications is **December 29, 2010**. See: <http://www.mcoaonline.com/content/grants/index.php>

New & Old Disaster Scams in MA

“In the newest scam, con artists pose as insurance specialists or expeditors able to convince FEMA to increase home repair damage aid or the insurer to pay a larger settlement.”

More : <http://www.mcoaonline.com/content/consumer/scams.php>

Thanks to Emmett H. Schmarsow, EOE A

2009 Municipal Finance Law Changes pertains to Work-off Program

DOR Legislation 2009-22B includes Property Tax Workoff on pp. 3-4
<http://www.mcoaonline.com/content/consumer/property-tax.php>

FY 2010 Budget — Property Tax Work-off — Outside Section 24 site
http://www.mass.gov/bb/gaa/fy2010/os_10/hdefault.htm

National Center for Creative Aging

The National Center for Creative Aging is dedicated to ensuring that older people have access to artistic excellence. As such, each year we provide thousands of professionals in the fields of aging, health care, social work, education and the arts with highly interactive trainings that wed theory and practice. In addition, we distribute essential materials and publications for those serving older adults. IT IS FREE TO SUBSCRIBE TO CREATIVE AGING, our email newsletter.

Simply email us to sign up — info@creativeaging.org

Thanks to Linn Morrill, Mass Department of Public Health.

Funding Available for Pedestrian Workshops

Funding available for pedestrian workshops with a focus on older adults http://www.hsrc.unc.edu/news_room/2010-03-25_older_ped.cfm

CHAPEL HILL, NC — Funding is now available to organizations interested in teaching pedestrian safety workshops focused on older adults in their communities.

The Highway Safety Research Center (HSRC) is seeking proposals to fund up to 12 organizations to teach “Pedestrian Safety Workshop: A Focus on Older Adults.” This national course, developed with funding from the National Highway Traffic Safety Administration (NHTSA), engages communities in addressing pedestrian safety issues that older adults face and provides strategies for improving walking conditions.

Each selected site will be provided \$2,500 as well as technical assistance from pedestrian safety experts. To download the RFP, please visit www.walkinginfo.org/psw

Only government agencies and other not-for-profit organizations are eligible to apply. Project funds are not payable to individuals.

Completed proposals are due Friday May 7, 2010 by 5 PM ET. Applicants should use the Web-based submission process available at www.walkinginfo.org/psw/rfp HSRC anticipates selecting the awarded communities in mid-July 2010.

- Funding for this project is provided by the NHTSA. The intent of the project is to broaden dissemination of the workshop and better understand how the workshop helps communities improve pedestrian safety and walkability for older adults.

•UpComing Events:

Jim Hightower at MSAC Dinner 5/21

We are pleased to inform you that on **Friday, May 21, 2010** we will hold our annual dinner to celebrate 29 Years of Senior Action!, with Jim Hightower as our keynote speaker. Our celebration will take place from 5:30pm – 8:30pm at Freeport Hall (IBEW Local 103), 256 Freeport Street, Dorchester, MA. This promises to be a delightful evening to celebrate the hard work and success of our members and we hope you can join us! (If you have already heard about the evening, perhaps you could forward this to others - thanks!)

See: <http://www.mcoaonline.com/content/conferences/index.php>

Aging With Dignity Conference Tuesday, June 8, 2010

Preventing and Responding to Substance Use Problems Among Older People

A conference for health and human service professionals. College of the Holy Cross, Worcester, MA0.

Registration brochure will be mailed six weeks before the conference. If you would like additional information, please contact AdCare Educational Institute, Inc. at 508-752-7313; TTY: 508-754-0039

SAVE THE DATE Mass Home Care's 27th Annual Meeting Monday, June 21, 2010

11:30 am Luncheon At the Burlington Marriott Keynote Speaker Michael J. Widmer, President Mass

Taxpayer's Foundation. Info contact info@masshomecare.org

“SAVE THE DATE” The MA SMP Program is pleased to announce its *first* MA SMP Program Statewide Conference for *service providers* from all sectors of the aging service delivery network. This *free* conference will take place at the Holiday Inn, Taunton, MA **Friday, May 21, 2010, from 8 a.m. to 3 p.m.** This conference aims to broaden the reach and visibility of the SMP Program and create momentum among service providers to encourage healthcare consumers, in particular Medicare and Medicaid beneficiaries, to become actively engaged in their healthcare and understand the critical role they have in preventing healthcare errors, fraud and abuse. The conference will also focus on the best practices of reaching and serving culturally diverse communities and much more. ***Please see Attachment and Share with your Networks. Conference Brochure and Registration to Follow!*** If you have any questions about the conference, please do not hesitate to contact Pat Sadre at 978-946-1352. *Thanks so much!* Lucilia Prates, Director, Massachusetts SMP Program *Empowering Seniors to Prevent Healthcare Errors, Fraud and Abuse* Elder Services of the Merrimack Valley **Samaritans Elder Workshops – ongoing** "Taking Care of Yourself and Others" — Workshops and a Flyer: <http://www.mcoaonline.com/content/wellness/index.php>

Suicide Prevention Across the Lifespan Suicide Prevention Across the Lifespan: A Strategic Approach for Your Community **Tuesday/Wednesday 18-19 May 2010**

The Best Western Royal Plaza, Marlborough MA Brochure & Registration Flyer:

<http://www.mcoaonline.com/content/conferences/index.php>

FY11 Formula/ Incentive Grant Training

22 April to 20 May — This is an opportunity to share and learn about practices and ideas regarding COA programs...regardless of whether they are funded with Elder Affairs Formula (or Service Incentive) Grant dollars. Emmett H. Schmarsow, Program Manager for COAs and Senior Centers, Exec. Office of Elder Affairs

See: <http://www.mcoaonline.com/content/conferences/index.php>

Senior Medicare Patrol Conference

Friday 21 May 2010, 8am – 3pm, Holiday Inn at Taunton MA

Announcement Flyer: <http://www.mcoaonline.com/content/conferences/index.php>

UpComing Events: continued

21st Annual Elder Care Conference for Western Massachusetts Tuesday, May 18

8:15 am - 4:00 pm Mass Mutual Center Springfield, MA **REGISTER NOW** go to

<https://mphaweb.wufoo.com/forms/2010-western-ma-elder-care-conference-registration/>

As in past years there are 21 workshops over three sessions. Keynote speaker is educator and humorist, Dr. Steve Sobel. In 2009 there were more than 35 exhibitors who were in the main halls for the entire day and exhibit space was sold out. This conference is a program designed for Elder Care Providers, Administrators, Educators and Policy-makers. CEUs available for Nurses, Nursing Home Administrators and Social Workers, Mental Health Counselors, Psychologists and Substance Abuse Counselors. (*Other CEU credit may be possible*) For information on Exhibiting or Sponsoring contact Kate Ward at: kward@mphaweb.org or (617) 524-6696, Ext.110. Check the Massachusetts Public Health Association website for conference updates- at <http://www.mphaweb.org/ElderCareConference.htm> **Workshops to be offered:**

- A1. Elder Suicide: Assessment and Prevention
- A2. Understanding and Recognizing Problem Gambling in Older Adults
- A3. Addressing the Disparities in Men's Health
- A4. UTI's in Frail Elders
- A5. Diabetes: When You Should Ask for Help
- A6. Health Care Proxy Law
- A7. REGALE: Recognize and Embrace Gay and Lesbian Elders
- B1. Community Based Mental Health Services for Older Adults
- B2. Effective Communications: Working with Persons with Hearing Loss
- B3. "Who Says She Can't?" "Who Says He Can't?": Exploring Ageism in our Work
- B4. Dealing Positively with Alzheimer's Disease
- B5. Just In! Promising Developments in Elder Oral Health
- B6. Road Scholar: The Registry of Motor Vehicles Mature Driver Program
- B7. Conflict Resolution: Using Effective Conflict Resolution Skills to Manage Disputes Involving Elders and Their Families
- C1. *The Game of Life* Retirement Version
- C2. Latino Services: Creating a Partnership with Agencies that Support the Latino Community
- C3. Reminiscence: An Important Task For Older Adults and End of Life Care
- C4. Self-Neglect: A Cry for Help
- C5. Lobbying for Success
- C6. Healthy Eating for Successful Living: An Evidence-based Nutrition Program
- C7: Ten Steps to Effective, Free Publicity, and Long-Term Media Relationships

Webinars on Depression Management Monthly Webinar Dates — February through May

<http://www.mcoaonline.com/content/pdf/Save-the-Date-DrugSeries.pdf>

MCOABriefs: Job Opportunities

MCOA Briefs: Job Opportunity — Southampton Director/Van Administrator

The Town of Southampton is seeking qualified applicants for the position of Council on Aging Director/Van Administrator. The pay rate is \$12.42 per hour for 23 hours a week plus a \$155 monthly stipend. Please email councilonaging@town.southampton.ma.us or visit the Council on Aging at the Edwards Public Library, 30 East Street, Southampton for a complete job description and application. Applications must be submitted by June 1, 2010. The start date of the position is July 1, 2010.

Jennifer Peloquin, Southampton Council on Aging, PO Box 102, Southampton MA 01073

413-529-2105 — councilonaging@town.southampton.ma.us

MCOA Briefs: Job Opportunity —Marlborough Director: As we go to press, the position of COA Director for the city of Marlborough has not yet been posted, but we expect to receive a listing by mid-month. Check MCOABriefs and our website at <http://www.mcoaonline.com/content/jobs/index.php>

MCOABriefs: Personnel Update

Belated Welcome: MCOA welcomes Donna Burton who has assumed the position of COA Coordinator for the town of Ashburnham. Donna has replaced Mary Lee Muessel

In Memoriam — Peter Kirwin Many of our LOHSC members had the honor and pleasure to work with Peter Kirwin over the years and know that he was the recipient of the LOHSC Distinguished Service award just 2 weeks ago. Peter was the Director of Human Services for the town of Falmouth until his retirement two years ago. Peter passed away last week after a courageous battle with cancer.... Our prayers and thoughts are with Peter's friends and family.

In Memoriam — Elizabeth Jope Memorial Service, Sunday 6 June 2010 at 1pm, Woburn Senior Center, 144 School St., Woburn MA... From John Jope: My dear Elizabeth passed from our care Thursday night (4/22) at 10:44 PM. I was bedside. Her transition was gentle, peaceful, and swift; she simply stopped breathing. She has touched so many in her life in such quiet and positive ways. I am blessed to have had her in my life, and to have been present when she made the transition. I will be arranging a memorial service in about a month's time, and will get the particulars out when I can. — John

Make your donation payable to the Winchester Hospital Foundation:
Winchester Hospital Foundation c/o Cancer Care Foundation
611 Main Street, Winchester, MA 01890-1902

In the memo space: Cancer Care Center

In a note with your donation, please let the Cancer Care Center know you are giving this donation in memory of Elizabeth Jope. If you would also like to have your donation acknowledged to John, please state that you want him to know. Best regards, Janiece — Janiece Leach, MCOA Financial Manager, janiece@mcoasonline.com

MCOABriefs: Member Request

Interdepartmental Mergers / Reorg ?

Would you please ask MCOA members to let me know if their departments have been part of any interdepartmental mergers or reorganization? I want to know how that has worked out for them. Our Town Manager is considering merging our Leisure Services, Health and Senior Center depts. into one Community Services Dept under one (non-human service) director. Thank you so much. Nancy Hirsh Pagano, Director, Amherst Senior Center, 70 Boltwood Walk, Amherst MA 01002 Phone: 413-259-3114 — Fax: 413-259-2413 — Email: paganon@amherstma.gov

Board Member Liability Insurance ?

I'm interested in getting board member liability insurance for the Friends of the Arlington Council on Aging. Do you have any idea how to approach this? Any idea of parameters and good companies to approach for this? Thank You, Art — Friends of the Arlington COA Arthur Budnik — agbud@msn.com

2003 Dodge Ram Van B3500 for Sale

2003 Dodge Ram Van B3500 with wheelchair lift for sale. 119,000 miles. Good condition. Has been used strictly for transporting the elderly in and around local communities. 8 cylinder/11 passenger. Asking \$4,500. For more information, call Trudy at the Wenham Council on Aging – 978-468-5529

Large Twin Hospital Bed Available

A generous donor has offered a large twin hospital bed with a fully encased mattress. It needs to be picked up from a home in Lexington; it has been dismantled for moving purposes. It has wheels that lock ; the height is adjustable. Interested party/ies should contact Angela Smith (978-371-2895) who will get you in touch with the generous donor. Angela Smith, Carlisle COA Outreach Coordinator, 66 Westford Street, Carlisle MA 01741 — 978-371-2895

Volunteer Coordinator job descriptions ?

Looking for volunteer coordinator job descriptions and senior center emergency evacuation policies. Please forward to Becky Moriarty, Executive Director, Hampden Senior Center, 104 Allen Street, Hampden, MA 01036 or fax to 413-566-2103 or email at coa@hampden.org Thank you.

MCOA Awards 2010

A Call for Nominations

Submit your nomination and any supplemental material by September 3, 2010

- Nominate someone from a COA/Senior Center

MCOA Director of the Year,

whom you feel achieves, articulates, brings together, exemplifies leadership in the field of aging as well as in senior center development, operations, and marketing.

- Nominate an individual or group for

MCOA Advocate of the Year,

whom you feel by the way of message, achievement, legislation, coalition-building, speaking up for seniors, helping seniors to speak up, courage, patience, and persistence has helped seniors find empowerment, enrichment and fulfillment. P.S. When appropriate this award can be referred to as the MCOA Legislative Advocate of the Year Award.

- Nominate an individual or group for

MCOA Innovator of the Year Award,

whom you feel has come up with an idea or design, invention or variation, a program, a service or a model that might help senior centers serve seniors and their families according to need, compatible with dreams and adaptable to other communities.

Submit by September 3, 2010

Be sure to include this basic information below and augment as you see necessary.

MCOA 2010 Awards Nomination Form

I, _____ from _____

nominate _____ from _____ for the MCOA

_____ of the year Award. I believe he/she/they deserve(s) this award because:

Supplement this application with any appropriate materials you deem necessary, including a one-page summary of why this individual or organization should be considered for the award you have specified.

Mail nomination to: MCOA, 116 Pleasant Street, Room 306, Easthampton MA 01027, Fax to 413.527.7138 or email to david@mcoaonline.com Thank you for you time with this matter.