

# The Family and Friends Newsletter

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Richland Center, WI 53581

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## The Benefits of Walking

A journey of a thousand miles begins with a single step.  
- Chinese proverb

**Before beginning any exercise program, please consult with your doctor.**

Walking is one of the healthiest things you can do. According to the U.S. Surgeon General's Report on Physical Activity and Health, regular physical activity performed on most days of the week reduces the risk of developing or dying from some of the leading causes of illness and death in the United States. Maintaining a daily walking routine can strengthen your heart, improve your body, and energize your life.

**Caution:** Before beginning any exercise program, you should get a complete physical examination and discuss any fitness plans with your doctor. Your doctor will help you develop a fitness program based on your age and health status, or, at the least, will recommend a suitable fitness trainer. If you have chest pain, feel faint or lightheaded, or become extremely out of breath while exercising, stop the activity at once and notify your doctor immediately.

### Walk to your heart's content

People who get regular exercise are less likely to have a heart attack and/or die from heart disease, according to the American Heart Association and the President's Council on Physical Fitness and Sports. Even modest levels of physical activity, such as walking, can result in significant increases in cardiovascular fitness as you age. In fact, if you *don't* exercise, your risk of heart disease is increased to the same extent as it would be if you smoked a pack of cigarettes every day!

### Regular exercise benefits your heart and blood vessels by:

- **Decreasing the heart's need for oxygen.** The heart can work more efficiently.
- **Strengthening the heart muscle.** The heart pumps fewer times while still meeting the body's demand for oxygen-rich blood.
- **Lowering blood pressure.** High blood pressure (hypertension) puts an added strain on the cardiovascular system. Low-intensity walking can significantly lower blood pressure in hypertensive adults.



What's inside?	Page
Exercise Improves Memory	2
Wiser Use of Over-the-Counter drugs urged	3
Dementia Caregivers: Need a Quick Break?	4
Black Tea may lower Bad Cholesterol (LDL)	4
About Leg Pain	5
2004 Social Security Changes	6
New Medicare Bill surprises	7
Interfaith Volunteers	8
Seniors Surfing the Web	8
Homestead Credit	9
Disconnection During the Heating Season	10
Richland County Nutrition Program Menus	12

(Continued on Page 2)

# Exercise Improves Memory

(CNN) -- "You're not getting older, You're getting better." New research shows this traditional compliment may be true when it comes to memory, especially for someone who stays in shape.

Recent studies indicate that a simple exercise routine helps put the brakes on memory loss. And one aspect of memory automatically improves with age, according to a new book.

## Like body, like mind

What you do to improve your physical health may actually go to your head, according to Dr. Antonio Convit of the New York University School of Medicine.

- **Reducing the levels of triglycerides and LDL ("bad") cholesterol.** Both of these types of blood fats have been associated with an increased risk of heart disease.
- **Increasing the level of HDL ("good") cholesterol.** Moderately high levels of HDL cholesterol have been identified as a protective factor against heart disease.
- **Helping to keep blood vessels clear.** Regular physical activity such as walking helps keep the blood vessels clear of blood clots and atherosclerotic plaque.
- **Fighting against atherosclerosis.** Walking can actually reverse the process of "hardening of the arteries," or atherosclerosis.

According to the Vascular Disease Foundation, walking is the most-recommended form of exercise for peripheral arterial disease patients with intermittent claudication (IC). In addition to its many direct cardiovascular benefits, walking offers the indirect benefits of helping to control diabetes and obesity, two conditions that strain the heart.

### Walking—it does the body good

Besides its numerous cardiovascular benefits, regular exercise such as walking can help you maintain your flexibility, strength, and endurance as you get older. A walking regimen builds and maintains healthy bones, muscles, and joints, which helps you become stronger and better able to move about without falling.

Take the first step now—and walk your way to a healthier life and future!

"We thought that we were born with a brain and that brain degenerated as we aged until we died," he says. "Now we know that there are many triggers that make parts of the brain regenerate themselves."

One of those triggers may be linked to your fitness level.

"Cardiovascular exercise that's done over a longer period of time will tend to reduce the amount of tissue you lose as you age," says Stan Colcombe, a researcher at the University of Illinois-Urbana.

That includes brain tissue, and losing less of it may mean keeping more precious memories.

Colcombe was part of a team of researchers at the University of Illinois who looked at MRI scans of people 55 or older and discovered dramatic differences in their brains. The people who were physically fit had gray matter in better shape.

NYU's Convit found that losing weight can also improve memory function.

"[Losing weight] will improve how you regulate your glucose, and we have shown that improved glucose regulation is associated with better memory."

Dealing with blood sugar poorly not only affects one's ability to remember but also the size of one area of the brain.

Convit found that individuals with poor glucose regulation had a smaller hippocampus, the part of the brain dealing with memory.

Bodybuilder Arnold Schwarzenegger may have

*(Continued on top of Page 3)*

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benefited twice from "total recall," but it doesn't take hours in the gym to improve your memory.

Moderate cardiovascular exercise, such as a brisk 30-minute walk a few times a week, should do the trick, according to the University of Illinois-Urbana study.

### **Improve with no effort**

Problems remembering names or appointments, while unpleasant, means trouble with only a small part of your memory, according to Dr. Barry Gordon of Johns Hopkins University School of Medicine.

"A much larger and more important kind of memory is the one that does our thinking for us," said Gordon, author of the book "Intelligent Memory."

"Intelligent memory" works in different parts of the brain from the memory that recalls a spouse's birth date or a friend's name. And intelligent memory grows with age.

Intelligent memory helps people figure things out faster and sparks creativity. It does this by storing memories and skills learned over time.

The brain then uses this knowledge to help it learn automatically by itself. This makes it easier to understand situations and solve problems very quickly -- sometimes even subconsciously.

As you age, intelligent memory increases because it has added a lot of data to a person's memory storage, Gordon says. So, getting older may mean getting wiser.

"It won't guarantee it, but it's the only way to make it happen," says Gordon. "Socrates said there are no boy philosophers. You cannot become wiser without experience."

Unfortunately, intelligent memory doesn't help you remember where you put your keys, says Gordon, but "it will teach you to put your keys in the same place every time."

## **Wiser use of over-the-counter drugs urged**

**Campaign suggests people read labels, seek advice**

WASHINGTON (Associated Press) - Pharmacist Stephen Setter regularly asks families of Alzheimer's sufferers what drug they use to help the often-agitated patients sleep better. Tylenol PM, many respond - not knowing, Setter says, that it contains an ingredient that can further confuse someone with dementia.

He also talks of a man who needed transfusions after the painkiller ibuprofen caused stomach bleeding. The man didn't know acetaminophen would have been a better choice for an elderly person who once had a stomach ulcer until Setter was called in for advice.

Over-the-counter medicines often are powerful drugs that patients don't know how to use correctly - picking the wrong one for their health problems, overdosing or inadvertently mixing them with prescription drugs in ways that can harm.

Now a new education campaign by the surgeon general and a mix of pharmacy and consumer groups aims to help patients become more savvy about self-treatment. "These are real medicines that must be taken responsibly," Surgeon General Richard Carmona warned.

The campaign, called "Be MedWise," comes at an important time: Americans buy more than 5 billion nonprescription drugs every year, and their over-the-counter choices are increasingly more complex to use.

Consider the latest entry to the nonprescription market, Prilosec OTC, a heartburn treatment.

It's not a simple acid-removing remedy for too much spicy food. It's for serious, frequent heartburn and comes in a prescription-strength dose packaged as a 14-day course of treatment. If heartburn returns

## Dementia Caregivers: Need a quick 15-minute break?

Caring for someone with memory loss problems is difficult. Finding activities for them and making sure they are safe is a full-time commitment. Often there just never seems to be any time for yourself. Sometimes, just a 10 or 15 minute break would be wonderful.

The Alzheimer's Early Recognition Telephone System (ALERTS) is a free, automated telephone system that might give you that break! Within ALERTS is a pleasant "activity call" that can engage and entertain people with dementia in a telephone conversation for about 15 minutes. The activity call can give your loved one something interesting and enjoyable to do, and it can give you a breather too.

To see if the ALERTS activity call is something that you and your loved one would enjoy, call 1-800-289-4974. Select the "I am a caregiver" option from the system Main Menu, and then choose the Caregiver tools and special features option. The activity call will be one of the options available to you. When you select it, listen to the instructions. When asked to press a key to start the activity call, just give the telephone to your loved one and let him or her enjoy a phone conversation about the things Wisconsin residents love, like the beautiful capitol building, cheese heads, sailing, brats, and football. ALERTS will listen while they talk and continue with pleasant topics when they stop. At the end of the conversation, about 15 minutes if they don't talk very much, the system will say good-bye and hang up.

In addition to the activity call, ALERTS offers extensive information about a wide range of topics of interest to caregivers, from tips about day-to-day care to current dementia treatments and things to consider when planning for the future. You can complete assessments that measure your mental health and caregiving burden, hear ideas about coping with stress, and find information about local and national caregiver resources.

ALERTS is available 24-hours a day. It is free and completely confidential.

Call 1-800-289-4974 today to take advantage of this free public service.

## Black tea consumption may lower bad cholesterol levels

WASHINGTON (Reuters) -- Black tea consumption may lower bad cholesterol levels and could one day be used to help reduce the chance of heart disease for those at risk, researchers reported.



Scientists with the U.S. Department of Agriculture said they found consumers who drank black tea for three weeks experienced a decrease of between 7 percent and 11 percent in their low-density lipoprotein (LDL), or so-called bad cholesterol.

Exactly what caused the LDL cholesterol level to drop in those who consumed tea was unknown, but tests are being conducted to determine if the beverage slows the body's ability to absorb LDL cholesterol, the scientists said.

There was no effect on the level of high-density lipoprotein, or the good type of cholesterol, according to the study of a small group of individuals.

"This may indicate that drinking tea regularly could have a beneficial effect if consumed regularly as part of a mixed diet for most people," said Joseph Judd, a chemist with the USDA, who led the study.

"We aren't talking about drinking tea over a lifetime, which we really can't study, but we have a short study and indications are very positive," he said.

The study was published in the October issue of the Journal of Nutrition.

Cholesterol is distributed in the body attached to proteins called lipoproteins. Studies suggest that high levels of HDL cholesterol reduce the risk of a heart attack, while high levels of LDL cholesterol increase the risk.

Possible health benefits are among several factors that have helped boost tea consumption in

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the last decade. Consumers also have been flooded with newer shapes, sizes and flavors that have made their way beyond traditional supermarkets and into drug and convenience stores.

According to the Tea Association of the U.S. A., total sales of tea in 2002 were \$5.03 billion, up from \$1.84 billion in 1990.

Judd and his colleagues placed 15 participants on a six-week, double-blind study. About half received five cups of black tea per day for three weeks while the others were given colored water that tasted like tea. The two groups then switched what they were given to drink after three weeks.

LDL levels dropped by an average of 7.5 percent during the three weeks when the individuals consumed tea rather than the placebo blend, the researchers said.

Separately, scientists also tested another group to rule out the effect of caffeine. In that group, 12 of the original 15 individuals were given water-flavored-like tea with caffeine levels similar to what is found in tea. Those who had regular tea saw their LDL levels drop about 11 percent compared with the caffeine placebo.

The study controlled the diets of the participants by supplying them with their daily meals.

"We had the same background diet for every subject throughout the whole study because these active ingredients [that lower cholesterol] occur in a lot of other foods" such as apples or onions, said Judd.

Scientists at the USDA's research division also are studying the bioactivity of tea compounds for use in treating a wide-range of diseases. Research is currently being conducted on the effect tea has on blood glucose levels, the body's metabolism and cancer.

## About Leg Pain

### **Where would you go if leg pain didn't hold you back?**

Some people mistakenly think that leg pain is a natural part of getting older. You might be surprised to learn that leg pain that develops during walking and goes away only with rest can be caused by intermittent claudication (IC), a potentially disabling yet treatable medical condition.

IC affects roughly 3 million people, most of them over the age of 55. Unfortunately, an estimated 75% of all IC sufferers fail to seek medical help, often because they don't realize that IC is a treatable medical condition.

Ask your doctor about leg pain and about possible treatment options that can help you reach your destination.

IC is a symptom of peripheral arterial disease (PAD). PAD—also known as "hardening of the arteries," or atherosclerosis of the legs—has been estimated to affect approximately 10% of people over age 55. PAD occurs when arteries in the legs become clogged with fatty deposits.

It's not uncommon for people who have PAD to also have atherosclerosis in other parts of the body—especially in the heart and brain. Atherosclerosis is a serious health problem that can lead to heart attack or stroke if left untreated.

The symptoms of IC may be felt in the:

- Calf
- Thigh
- Buttock

And the symptoms may be felt as:

- Aches
- Cramps
- Heaviness
- Numbness

IC symptoms may be felt in one or both legs, and may occur during walking or exercising. Once you stop walking or exercising, the symptoms subside within minutes. If you're experiencing any of these symptoms, see your doctor. He or she can diagnose your condition and suggest treatments that may help you walk farther without leg pain.



# “Red Tape Cutter” Pages

Presented by your local Elderly Benefit Specialist—Joanne Welsh with the Richland County Health & Human Services—Elderly Services Unit.

## 2004 SOCIAL SECURITY CHANGES

**Cost-of-Living Adjustment (COLA):** Based on the increase in the Consumer Price Index (CPI-W) from the third quarter of 2002 through the third quarter of 2003, Social Security beneficiaries and Supplemental Security Income (SSI) recipients will receive a **2.1** percent COLA for 2004. Other important 2004 Social Security information is as follows:

	<u>2003</u>	<u>2004</u>
<b>Tax Rate:</b>		
Employee	7.65%	7.65%
Self-Employed	15.30%	15.30%

**NOTE:** The 7.65% tax rate is the combined rate for Social Security and Medicare. The Social Security portion (OASDI) is 6.20% on earnings up to the applicable maximum taxable amount (see below). The Medicare portion (HI) is 1.45% on all earnings.

### Maximum Earnings Taxable:

	<u>2003</u>	<u>2004</u>
Social Sec. (OASDI only)	\$87,000	\$87,900
Medicare (HI only)	No Limit	

<u>Quarter of Coverage:</u>	<u>2003</u>	<u>2004</u>
	\$890	\$900

### Retirement Earnings Test Exempt

**Amounts:** As of January 2000, the Retirement Earnings Test has been eliminated for individuals at their full retirement (age 65 if born prior to 1938). A modified test applies for the year an individual reaches their full retirement age. (The Senior Citizens' Freedom To Work Act of 2000, signed into law by President Clinton on April 7, 2000.)

The Earnings Limit for months prior to attaining your full retirement (65 if born before 1938, 65 and 4 months if born in 1939) in 2004 is \$31,080. Earnings above \$31,080 will result in a loss of \$1 in benefits for every \$3 over the \$31,080 limit.

If you will not attain your full retirement age in 2004, your earnings limit is \$11,640 per calendar year or \$970 Per month. Earnings above \$11,640 will result in a loss of \$1 in benefits for every \$2 over the \$11,640 limit.

### Maximum Social Security Benefit:

	<u>2003</u>	<u>2004</u>
Worker Retiring at Age 65 and 4 months (May 2004) of:	\$1,741/mo.	\$1,825/mo.

### SSI Federal Payment Standard:

	<u>2003</u>	<u>2004</u>
Individual	\$552/mo.	\$564/mo
Couple	\$829/mo.	\$846/mo.

### SSI Resources Limits:

	<u>2003</u>	<u>2004</u>
Individual	\$2,000	\$2,000
Couple	\$3,000	\$3,000

### Estimated Average Monthly Social Security Benefits: Before and After the December 2003 COLA:

	<u>Before</u> <u>2.1% COLA</u>	<u>After</u> <u>2.1% COLA</u>
All Retired Workers	\$ 903	\$ 922
Aged Couple, Both Receiving Benefits	\$1,492	\$1,523
Widowed Mother and Two Children	\$1,865	\$1,904
Aged Widow(er) Alone	\$ 870	\$ 888
Disabled Worker, Spouse and One or More Children	\$1,412	\$1,442
All Disabled Workers	\$ 844	\$ 862

### Social Security Disability Thresholds

	<u>2003</u>	<u>2004</u>
Substantial Gainful Activity(SGA)		
Non-Blind	\$800/mo.	\$810/mo.
Blind	\$1,330/mo.	\$1,350/mo.
Trial Work Period (TWP) Month	\$570/mo.	\$580/mo.

For more information on Social Security or SSI, call toll-free, 1-800-772-1213 or visit us online at [www.ssa.gov](http://www.ssa.gov).

	<u>Medicare</u>	<u>2003</u>	<u>2004</u>
<b>Premium</b> Part A		\$316.00	\$343.00
Part B		\$58.70	\$66.60

### Deductibles

<b>Part A</b>		
1 <sup>st</sup> inpatient day thru 60 <sup>th</sup> day	\$840.00	\$876.00
61 <sup>st</sup> day thru 90 <sup>th</sup> day	\$210/day	\$219/day
91 <sup>st</sup> day thru 150 <sup>th</sup> day	\$420/day	\$438/day
Skilled Nursing Care, 21 <sup>st</sup> day thru 100 <sup>th</sup> day	\$105/day	\$109.50/day
<b>Part B</b>	\$100/year	\$100/year

For more information on Medicare call toll-free 1-800-633-4227 or visit them online at [www.hhs.gov](http://www.hhs.gov).

## New Medicare Bill Bars Extra Insurance for Drugs

By ROBERT PEAR

December 7, 2003

WASHINGTON, Dec. 6 — Medicare beneficiaries will not be allowed to buy insurance to cover their share of prescription drug costs under the new Medicare bill to be signed on Monday by President Bush, the legislation says.

Millions of Medicare beneficiaries have bought private insurance to fill gaps in Medicare. But a little-noticed provision of the legislation prohibits the sale of any Medigap policy that would help pay drug costs after Jan. 1, 2006, when the new Medicare drug benefit becomes available.

This is one of many surprises awaiting beneficiaries, who will find big gaps in the drug benefit and might want private insurance to plug the holes — just as they buy insurance to supplement Medicare coverage of doctors' services and hospital care.

Congress cited two reasons for banning the sale of Medigap drug policies. Lawmakers wanted to prevent duplication of the new Medicare benefit. They also wanted to be sure that beneficiaries would bear some of the cost. Health economists have long asserted that when beneficiaries are insulated from the costs, they tend to overuse medical services.

Gail E. Shearer, a health policy analyst at Consumers Union, said she had mixed feelings about the prohibition.

"I don't want a return to abuses of 1970's and 80's, when lots of confusing Medigap policies were sold to vulnerable seniors," Ms. Shearer said. But she added: "Many seniors and disabled people will face a huge gap in drug coverage. In a bill that's marketed as providing choice to consumers, comprehensive drug coverage is not really an option. That's a disappointment."

The new drug benefit would be the biggest expansion of Medicare since creation of the program in 1965. But patients would still face substantial costs.

Under the standard Medicare drug benefit, the beneficiary would be responsible for a \$250 deductible, 25 percent of drug costs from \$251 to \$2,250 and all of the next \$2,850 in drug costs. Private Medigap policies could not

cover any of those costs.

A Medicare drug plan could further limit coverage by establishing a list of preferred medicines known as a formulary. The list must include drugs in each "therapeutic category and class" — antihistamines, antidepressants and cholesterol-lowering agents, for example.

But Medicare would not have to pay anything for drugs left off the list. While patients could appeal a denial of coverage, they could not buy private insurance to cover the costs of such drugs.

Under the standard benefit, a Medicare recipient would pay \$3,600 of the first \$5,100 of drug costs. After that, Medicare would pay 95 percent of the cost of each prescription. In theory, the bill establishes a limit of \$3,600 a year on out-of-pocket costs.

But if a beneficiary bought drugs not listed on the formulary, the bill says, those costs would not be counted toward the \$3,600 limit.

Congress began regulating the Medigap market in 1990, as a way to protect consumers, many of whom had bought duplicative policies. The federal government and state insurance commissioners developed 10 standard policies, to replace thousands then on the market.

Three of the 10 Medigap policies cover drugs. Under the legislation, an old policy with drug benefits could be renewed — but only by a person who chose to forgo the new Medicare drug benefit. A person who enrolls in the new program could not buy or renew a Medigap policy to help defray drug costs.

Nearly 12 million retirees have drug coverage and other health benefits from former employers. If those retirees sign up for the Medicare benefit, the employers can help pay the beneficiaries' share of drug costs. But those payments would not count toward the \$3,600 limit on out-of-pocket spending.

Under the bill, low-income elderly people eligible for both Medicare and Medicaid, the federal-state program for low-income people, would receive their drugs through Medicare. Medicare drug plans will almost certainly cover fewer drugs than Medicaid now covers, state officials say. But the bill generally pro-

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*(Continued on Page 11)*

# Interfaith volunteers give older people chance to stay at home

By RACHEL McCORMICK (rmccormick@journalsentinel.com)

**Waukesha** - Living thousands of miles away, John McDermott was thankful someone in his family was close by to help his parents remain independent as they grew old.

And to honor that service, McDermott rakes leaves, mows the lawn, shovels snow, checks on smoke detectors and does other odd jobs to help Waukesha area senior citizens stay in their homes as long as possible.

"My parents lived in Florida and, thankfully, my brother-in-law lived near and was able to take care of them," McDermott said. "I feel that since he did that for my parents, this is my way of giving back since I couldn't be there for my parents."

McDermott is one of the volunteers working with the Interfaith Caregiving Network of Waukesha County, helping senior citizens avoid having to move to a nursing home.

Interfaith was established in 1991 by 30 congregations in Waukesha County to work with other social service agencies to meet needs of older adults and adults with disabilities, according to Kathy Gail, executive director at Interfaith.

Volunteers take clients to and from medical appointment and adult day care, pay bills and balance checkbooks, and perform yard work. Some volunteers make routine visits to homes to keep people company.

"I've been with one couple for three years. The husband is 93 and his wife is 87 and has Alzheimer's," McDermott said. "I've really gotten to know them. They have great stories.

"I drive by a few times a week to see what's going on with the house and to make sure everything looks OK," McDermott said. "There's a light in the back of their family room and if it's not on, I get worried."

In such a case, McDermott stops and rings the doorbell. If no one answers, he goes to the neighbor's house and asks them to call the couple.

## Seniors Surfing the Web? Here are some senior friendly sites!

<http://www.co.richland.wi.us/departments/hhs/elderlyservices/>

Richland County HHS—Elderly Services

<http://www.cnpp.usda.gov/ihei.html>

**Family Caregiver Alliance—National Center on Caregiving**  
Handbook for Long-Distance Caregivers

[http://www.caregiver.org/caregiver/jsp/content\\_node.jsp?nodeid=1034](http://www.caregiver.org/caregiver/jsp/content_node.jsp?nodeid=1034)

**"Suddenly Senior"** - A place for everyone who's become senior before their time.  
<http://www.suddenlysenior.com/>

"Frank Kaiser's the Andy Rooney of the internet, combining knee-slapping humor with useful information and genuine compassion." Retired.com

"These people give you more than what you give them," McDermott said. "They treat you like a member of the family in a lot of ways by taking an interest in you and your life."

McDermott, 59, retired early from GE Medical Systems and has been a volunteer with Interfaith since September 2000. He's volunteered about 250 hours, Gail said. He also helps out at the St. Mary's Catholic Church food pantry in Waukesha.

"It doesn't seem like that much time," McDermott said. "Someday I might be in the same situation. My kids live all over the country. You'll never know when you'll be in need."

From the Nov. 23, 2003 editions of the  
Milwaukee Journal Sentinel

# You Could Be Eligible for Homestead Credit

Wisconsin Residents who pay property taxes, or pay rent and whose income is below \$24,500 may be eligible for Homestead Credit. Richland County Elderly Services office will assist those 60 and older with their applications. You could qualify for a credit of up to \$1,160.00.

Appointments are necessary for us to assist you with the preparation of your Homestead Credit Claim. Please contact Elderly Services at 647-6226 to schedule an appointment at the office or request a home visit for those seniors who are homebound. Your confidential Homestead Credit interview will be scheduled with Joanne Welsh, Benefit Specialist or Linda Rohn, Assistant Benefit Specialist.

Please bring any of the following items that pertain to your situation for each household member (you and your spouse).

- Homestead Credit Booklet (if you received one in the mail)
- Social Security Number
- 1099 from Social Security stating the amount of Social Security received in 2003
- Verification of SSI income from 2003
- 1099s showing any interest, dividend, pension, IRA received in 2003 NOTE : We are required to report the interest earned on Irrevocable Burial Trusts.
- All W-2 wage and tax statements
- 2003 real estate and/or personal property tax bills
- 2003 rent certificate(s) completed by landlord(s)
- Previous year's (2002) Homestead Credit Claim form and/or Income Tax Return
- Previous month's Telephone Bill (all pages) - you may be eligible for a discount

Your appointment is for Homestead Credit Claims only. Should you need assistance preparing income tax returns, AARP representatives come to the Courthouse to complete the more complicated forms - i.e. State and Federal forms. The Elderly Services office schedules appointments for AARP beginning in January and continuing through approximately April 12th. If you file an income tax return, your Homestead Credit should be submitted at the same time. Please call our office if you have questions.

NOTE: If you owned and lived in your home for part of the year, sold your home and then rented for the remainder of the year, or sold any stocks or other property, we suggest you see either the AARP tax preparers (by calling our office) or a tax preparer of your choice. There may be tax implications involved that require filing an income tax return, even though there may be no income tax due.

There is a four-year period of time that Homestead Credit claims can be received and paid by the Wisconsin Department of Revenue. If we find a client who didn't realize they qualified for this benefit - we can go back four years and file for the credit (if eligible for all 4 years). Of course, we have to have good documentation of income for all claims filed.

Donations to offset postage and other office expenses are welcome to insure the continuation of this service. If you choose to make a donation, we can accept cash or you may make out a check to the Elderly Services Unit.

You may schedule an appointment by calling 647-6226 and ask the receptionist for a Homestead Credit appointment.

This newsletter is prepared and submitted six times yearly to the residents of Richland County by Health and Human Services.

Editor is Patrick Metz.

All questions regarding this newsletter should be addressed to:  
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To view this newsletter as well as past editions of this newsletter go to our website.

<http://co.richland.wi.us/departments/hhs/newsletter/index.html>

**Do you have a friend who cannot read this newsletter because of poor eyesight?**

**This newsletter is available on cassette tape and may be borrowed from the Elderly Services Unit.**

**For more information, call  
608-647-6226**

## Disconnection During Heating Season: Your Rights and Responsibilities

### Cold Weather Disconnection Rules:

Under the Wisconsin Administrative Code, cold weather residential utility disconnection rules are in effect **from November 1st to April 15th**. Despite cold weather, certain households are still subject to disconnection due to unpaid bills if the household's gross quarterly income is above 250% of the federal poverty level *and* the disconnection would not endanger the health and safety of any human occupant. According to the Administrative Code, disconnection for eligible households during cold weather should only be a last resort after all other legal means of recourse have been tried and proven unsuccessful.

### No Disconnection on Certain Days:

Service to an occupied residence cannot be disconnected on a day when utility company personnel are not readily available to the occupant 24 hours a day to negotiate restoration of service. Similarly, service to an occupied residence cannot be disconnected on the day before a day utility staff will be unavailable to discuss restoration of service with the affected occupant. *In practice, this means utility companies cannot disconnect service to an occupied residence on Friday, Saturday, Sunday, a holiday on which the utility office is not open for business or the day preceding such a holiday.*

### Notice Requirements:

In almost all disconnection actions, the utility must send a written notice to the residence **at least 10 calendar days** before the proposed date of disconnection. The notice must include reasons for the shut-off, the proposed date of shut-off, an explanation of deferred payment arrangements as an alternative to disconnection and how to contact the utility. If any occupant is seriously ill, frail, disabled or dependent on life support or other equipment, the utility should be contacted immediately to try to prevent disconnection. Before service is shut off, the utility must also make a reasonable attempt to contact the customer by phone or in person to verify the household is "eligible" for disconnection, to review the reasons for the pending disconnection and discuss what actions must be taken to avoid disconnection.

For cold weather disconnections, more stringent notice and follow-up rules apply. Both prior to and at the time of disconnection, a utility representative must meet personally

with an adult member of the household to determine if there are circumstances, which "deserve special attention." An in-person follow-up visit is also required to check on the "household's well being and to ensure there is no danger to human health or life." At the follow-up visit, alternative payment arrangements and shelter assistance information must be provided. If danger to human health or life due to the disconnection is observed, the utility must immediately restore service.

### Postponement of Disconnection:

If disconnection will aggravate an **existing medical or protective services emergency** for the occupant, the utility may postpone disconnection for 21 days to enable the occupant to arrange for payment. To obtain the postponement, the occupant must contact the utility and provide the utility with a licensed Wisconsin physician's statement or a notice from a public health, social services or law enforcement official identifying the medical or protective services emergency and the time period during which disconnection will aggravate the circumstances. During the 21 days, service must be continued and the utility and the customer must work together to develop resources and make reasonable payment arrangements to continue service on a permanent basis. If there is a dispute about an existing medical or protective services emergency, either the utility or the customer may request an informal review by the Public Service Commission. Utility service must be continued while the informal review is pending, provided the utility company has received a statement from one of the professionals listed above identifying the customer's emergency situation.

### Where to Go for Help or More Information:

First, contact the utility to try to solve the problem. If the utility cannot help resolve the problem, contact the Wisconsin Public Service Commission at (800) 225-7729. If you are speech, hearing or visually impaired and need assistance from the Public Service Commission, call (608) 266-5481 or TTY (608) 267-1479. You may also contact the Elderly Benefit Specialist in your county for assistance. If you are having a difficult time keeping up with your utility bills, contact the Richland County Benefit Specialist, Joanne Welsh for more information regarding the state's heating assistance programs at Richland County Health and Human Services - Elderly Services at 647-6226.

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within four months, patients are supposed to see a doctor to check for a serious disease - and the Food and Drug Administration will be watching to see whether consumers really follow those complex instructions.

Over-the-counter drugs are largely safe. But the FDA counts 178,000 hospitalizations a year associated with nonprescription drug use or misuse. Studies suggest many of those complications could be prevented by better consumer education.

Indeed, a recent survey by the National Council on Patient Information and Education found 48 percent of adults acknowledge that they've taken more than the recommended dose of a nonprescription drug.

Those are the intentional overdoses. People also unwittingly double-dose because the same medication can be in lots of products under different brand names, warns a "Be MedWise" TV ad to begin airing this month. Acetaminophen alone is in hundreds of medicines, from the Tylenol brand line to cold remedies such as Nyquil and even the prescription painkiller Percocet - and taking too much can cause serious liver damage. Elderly patients have special risks, added Setter, a Washington State University pharmacist who specializes in geriatric medicine.

Tylenol alone often is recommended for seniors because it doesn't have the ulcer risk of competing painkillers. But Tylenol PM causes drowsiness with an added ingredient, diphenhydramine, the antihistamine best known as Benadryl. That ingredient can cause confusion in the elderly, especially Alzheimer's patients, Setter said.

Setter seldom recommends cold relievers for any elderly patients, instead suggesting time-honored chicken soup and lots of fluids. In addition to antihistamine side effects, some decongestants can raise blood pressure.

Other self-treatment advice offered:  
Always read the drug's label, even if it's a

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brand you've bought before, because ingredients and dosage instructions can change. Ask the pharmacist which over-the-counter drug is best for your symptoms and risk factors.

Make sure you understand the drug's dose and how many days in a row it's safe to take before consulting a doctor.

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*(Continued from Page 7)*

hibits Medicaid programs from supplementing the Medicare drug benefit.

If state officials wanted to supplement the new Medicare drug benefit, they would have to pick up the entire cost of the extra coverage. States would not get the discounts and rebates they now receive from manufacturers under Medicaid.

Dr. Lynn V. Mitchell, the Medicaid director in Oklahoma, said she expected Medicare formularies to be "more restrictive" than the drug coverage policies of state Medicaid programs.

"If patients do not get optimal drug therapy," Dr. Mitchell said, "costs will balloon in other areas. Patients may need more inpatient hospital care."

House and Senate negotiators who worked on the Medicare bill encouraged the National Association of Insurance Commissioners to study the Medigap market, with a view to making major changes.

In a report accompanying the bill, the conference committee said Medigap policies should be revised to provide less upfront coverage and to require beneficiaries to pay more of the initial costs of hospital and physician services.

"Numerous studies have demonstrated that covering deductibles and coinsurance has led to higher Medicare spending because beneficiaries become insensitive to costs," the report said. "Beneficiaries with Medigap consume \$1,400 more in Medicare services than beneficiaries without supplemental coverage."

This, it said, "drives up costs for everyone — premiums of Medicare beneficiaries without Medigap coverage and costs to taxpayers."

# JANUARY, 2004

Occasionally, it is necessary to make changes in the menus. All meals are served with bread and milk. Please call the meal site for reservations at least one day in advance.

<b>Richland County Nutrition Program</b>			<b>1</b> <b>SITES CLOSED</b> <i>Happy New Year!!</i>	<b>2</b> Meatloaf, Baked Potato, Sour Cream, Corn, Whole Grain Bread, Mixed Fruit
<b>5</b> Ham, Sweet Potatoes, Green Beans, Whole Grain Bread, Pears	<b>6</b> Hamburger/Bun, Cheese Slice & Relishes, Potato Wedges, Baked Beans, Oatmeal Cookie	<b>7</b> Baked Chicken, Mashed Potatoes/Gravy, California Blend Vegetables, Whole Grain Bread, Fruit Crisp	<b>8</b> Bar-B-Q Ribs, Baked Potato with Sour Cream, Peas, Whole Grain Bread, Pudding with Slices Bananas	<b>9</b> Baked Fish, Parsley Buttered Potatoes, Beets, Whole Grain Bread, German Chocolate Cake
<b>12</b> Meatloaf, Baked Potato with Sour Cream, Stewed Tomatoes, Whole Grain Bread, Mixed Fruit	<b>13</b> Lasagna, Cheese Bread, Tossed Salad, Cheesecake & Fruit Topping	<b>14</b> Roast Pork, Cheesy Potatoes, Cabbage Salad, Whole Grain Bread, Applesauce Gelatin	<b>15</b> Chicken Pot Pie with Mixed Vegetables, Cottage Cheese, Whole Grain Bread, Pineapple	<b>16</b> Roast Beef, Mashed Potatoes, Gravy, Peas & Carrots, Whole Grain Bread, Gingerbread Cake w/Topping
<b>19</b> Baked Chicken, Stuffing, Beets, Cabbage Salad, Whole Grain Bread, Fruit Cocktail	<b>20</b> Chili with Cornbread & Honey, Cabbage Salad, Apricots	<b>21</b> Roast Turkey, Mashed Potatoes/Gravy, Squash, Cranberry Sauce, Whole Grain Bread, Pumpkin Bar	<b>22</b> Fish, Baked Potato w/Sour Cream, Green Beans, Whole Grain Bread, Chocolate Cake	<b>23</b> Beef Stroganoff, Noodles, Carrots, Whole Grain Bread, Fruited Jell-O w/Topping
<b>26</b> Salmon Loaf, Potatoes, Peas, Rye Bread, Applesauce	<b>27</b> Cook's Favorite Soup, Sandwich, Salad, Fruit, Cookie	<b>28</b> Chicken ala King, Biscuits, Mixed Vegetables, Cottage Cheese, Peaches	<b>29</b> Swiss Steak, Mashed Potatoes, Corn, Whole Grain Bread, Angelfood Cake with Strawberries	<b>30</b> Pork Chop, Potato Casserole, California Blend Vegetables, Whole Grain Bread, Lemon Bar

## Richland County Health & Human Services Elderly Services—Nutrition Program

**For information (or reservations) about the Nutrition Program, please call:**

**Germantown** - Judy Thompson @ 983-2786 @ 11:45 pm    **Gotham** - Tina Shaw @ 583-2763 @ 12:00 pm  
**Richland Hills** - Chris Young @ 647-2323 @ 11:45 am    **Viola** - Linda Walker @ 627-1869 @ 11:30 am  
**Boaz** - **Karen's Supper Club** - Serve on Wednesdays ONLY at 11:30 am - 536-3792  
**Hub City** - **Home Plate** - Serve on Thursdays ONLY at 12:00 pm - 647-6566

# FEBRUARY, 2004

Occasionally, it is necessary to make changes in the menus. All meals are served with bread and milk. Please call the meal site for reservations at least one day in advance.

<b>Richland County Nutrition Program</b>				
<b>2</b> Ground Hog (Ham) Loaf, Baked Potato with Sour Cream, Green Beans, Whole Grain Bread, Pineapple	<b>3</b> Swedish Meatballs, Noodles, Mixed Vegetables, Whole Grain Bread, Toll House Bar	<b>4</b> Baked Chicken, Mashed Potatoes/Gravy, Carrots, Whole Grain Bread, Fruit Cobbler	<b>5</b> Bar-B-Q Beef on Bun, Potato Wedges, Calico Beans, Mixed Fruit Cup	<b>6</b> Beef Stew with Vegetables, Baking Powder Biscuit, Tossed Salad, Pudding Torte
<b>9</b> Pork Cutlet, Sweet Potatoes, Cabbage Salad, Whole Grain Bread, Pears	<b>10</b> Open Face Hot Beef Sandwich, Mashed Potatoes/Gravy, Peas, Fruited Jell-O with Topping	<b>11</b> Spaghetti & Meat Sauce, Soft Bread Sticks, 7-Layer Salad, Juice, Almond Joy Cake	<b>12</b> Baked Fish, Au gratin Potatoes, Carrots, Whole Grain Bread, Applesauce Gelatin	<b>13</b> Bar-B-Q Chicken, Baked Potato/Sour Cream, Beets, Whole Grain Bread, Valentine Cookie
<b>16</b> (President's Day) Salisbury Steak, Mashed Potatoes, Mixed Vegetables, Whole Grain Bread, Cherry Torte	<b>17</b> Cook's Favorite Soup, Sandwich, Salad, Fruit, Cookie	<b>18</b> Roast Turkey, Mashed Potatoes & Gravy, Stuffing, Green Beans, Cranberry Salad, Whole Grain Bread, Pumpkin Torte	<b>19</b> Lasagna, Cheese Bread, Tossed Salad, Cottage Cheese, Pineapple	<b>20</b> Chili, Cheese Slice, Corn Bread, Honey, Cabbage Salad, Peaches
<b>23</b> Ham, Scalloped Potatoes, Carrots, Whole Grain Bread, Mixed Fruit	<b>24</b> Baked Chicken, Baked Potato with Sour Cream, Squash, Whole Grain Bread, Brownie	<b>25</b> (Ash Wednesday) Baked Fish, Potato Casserole, California Blend Vegetables, Whole Grain Bread, Fruited Jell-O with Topping	<b>26</b> Roast Beef, Mashed Potatoes/Gravy, Corn, Whole Grain Bread, Cook's Choice Cake	<b>27</b> Salmon Loaf, Potatoes, Peas, Rye Bread, Peaches