Funding for Seniors Protected!

The Alaska Legislature has gavelled out after passing the operating and capital budgets, which fortunately averted a statewide government shutdown, the hard work remains to develop a long-term fiscal plan. Congressional efforts to repeal and replace the Affordable Care Act have been set aside for now. If passed, the proposed legislation could have resulted in significant changes to the way in which older people, persons with disabilities, and other vulnerable Alaskans receive health care and long-term support services that they desperately depend on every day. Please see articles inside the Commission's newsletter for a listing of state legislation passed last session that affect seniors and information about the national debate on health care reform.

State Legislative Update: Operating Budget Outcomes for Senior Services

“Preserving the Senior Safety Net,” the Commission’s #1 advocacy priority this year, was achieved with passage of the FY2018 operating budget. This “Net” provides critical home and community-based long-term support services to vulnerable older Alaskans which promote senior health, provide family caregiver support, and reduce the need for expensive out-of-home placement. We thank Governor Walker and the Legislature for supporting full funding for senior grant-funded services, personal care services, and services provided by the Alaskans Living Independently Waiver.

There were several differences in the operating budget items proposed by the House and Senate in HB 57, the state’s operating budget bill, which required deliberation by the Conference Committee, a House-Senate Committee charged with resolving disparities in the state budget. The conferenceable items affect programs used by seniors as well as education...
The Conference Committee for HB 57, co-chaired by Senator Lyman Hoffman and Representative Paul Seaton, also included Representative Neal Foster, Representative Lance Pruitt, Senator Anna MacKinnon, and Senator Donald Olson.

Funding for the Alaska Pioneer Homes was one of the most controversial senior budget items addressed by the Conference Committee. The Pioneer Homes serve 418 residents across its six homes with more than half of the residents receiving Level III, the highest level of care. Initially, the Senate proposed two reductions in two separate actions for the Pioneer Homes – 2.75% reduction ($818,500) for personal services and a 12.7% reduction ($5.7 million) for the Pioneer Homes. If approved, these reductions which totaled $6.5 million could have resulted in the loss of direct care staff, elimination of beds, increased wait time for people on the active waitlist, as well as closure of the Palmer and Juneau Homes.

These proposed reductions resulted in a huge uproar from the senior community, including a community rally organized in the Mat-Su Valley to show support for full funding of the Pioneer Homes (see photo below). The Senate passed a declaration on the Senate floor titled the “Sense of the Senate” directing the Department of Health and Social Services to spread that amount across the department to avoid closing any Pioneer Home.

The Governor also sent a letter assuring Pioneer Home residents, their family members, and Pioneer Home staff that no Home would be closed under his administration. Fortunately, the Conference Committee, with approval from the Legislature and Governor Walker, rescinded the $6.5 million reduction slated for the Pioneer Homes and the Department of Health and Social Services in the final budget.

The Conference Committee also approved continued funding at current levels for Medicaid Adult Preventative Dental Services and Medicaid Prescription Drugs, programs used by many seniors. The Senior Benefits Program, which provides cash benefits to more than 11,000 seniors who are income-eligible, has a $43,200 reduction for the upcoming year however, this amount is considerably less than the $5 million+ cut proposed last year.

The FY2018 operating budget also includes reductions for public assistance and public health nursing that may affect seniors using these services. The Conference Committee agreed to fully fund public schools, grades K-12, at the same level as this year, and to pay Permanent Fund dividends in the amount of $1,100 to all eligible Alaskans. The total FY2018 state operating budget passed by the Legislature, signed by the Governor, is $9.6 billion, including all federal and state funding sources, and will draw an estimated $2.4 billion draw from the Constitutional Budget Reserve.

MatSu Community Rally for the Pioneer Homes held on April 15, 2017.
May is Older Americans Month in Alaska

Governor Walker signed the official Executive Proclamation recognizing May 2017 as Older Americans Month in Alaska. The theme for this year is “Age Out Loud” to focus attention on what getting older looks like today. More seniors are working, striving to maintain good health by eating healthy and exercising, as well as being active with their families and in their communities.

The Anchorage Senior Advisory Commission, the Fairbanks North Star Borough, and the City of Palmer celebrated Older Americans Month (OAM) in Alaska during the first week of May through a Mayoral proclamation and activities honoring local seniors that included a special meal. On May 3, the Anchorage Senior Advisory Commission awarded Anchorage resident, Karen Hunt, with the “Ron Hammet Award” for distinguished community service that includes improving the quality of life for seniors and other public members. Ms. Hunt, who served on the Board of Directors for the Anchorage Senior Activities Center, was also the first woman from Anchorage appointed to serve as a Superior Court Judge. In addition, Ms. Hunt served as president of four professional law organizations, as well as faculty for the National Judicial College and trained more than 200 judges hearing federal Medicare appeals, among other life achievements.

Banarsi Lal was recognized as the Outstanding Senior Volunteer by the mayors of the Fairbanks North Star Borough, City of Fairbanks, and the City of North Pole at the Senior Recognition Day event on May 4 that was hosted by the Fairbanks North Star Borough (FNSB) Senior Advisory Commission with support from the FNSB Parks and Recreation Department. Mr. Lal, Chair for the FNSB Senior Advisory Commission, currently serves on the statewide Alaska Commission on Aging and the Governor’s Council on Disabilities and Special Education. He is the former Chair for the Alaska Pioneer Homes Advisory Board. Mr. Lal holds an honorary doctor of law degree awarded by the University of Alaska, Fairbanks.

The Mat-Su Valley also honored seniors as part of OAM festivities. In the Mat-Su Valley, Palmer Mayor, Edna DeVries, read the City of Palmer Proclamation at the Palmer City Council meeting on May 9 and the Governor’s Proclamation was read by ACoA Commissioner and Palmer Council Member, Linda Combs, on May 10 at Mat-Su Senior Services.

Please take time to enjoy the beauty and bounties of the seasons!

Thank you for celebrating Older Americans Month with us!
Legislative Update: Bills Passed, Bills Pending

Several important bills were introduced this session. “Extend the Alaska Senior Benefits Program,” HB 236 sponsored by Representative Scott Kawasaki (Fairbanks) and co-sponsored by Representatives Spohnholz, Fansler, Tuck and Ortiz, seeks to extend the program four years to June 30, 2022. HB 236 has two committee referrals in House Health and Social Services and House Finance. The Senior Benefits Program is scheduled to sunset on June 30, 2018, if continuing legislation is not passed. Senior Benefits serves more than 11,400 income-eligible Alaskans age 65+. HB 236 was heard and held in House Health and Social Services this past session. The interim plan proposed by House Health and Social Services will be to establish a legislative committee to outreach to seniors, their families, providers, and other public members to find ways to sustain and strengthen the Senior Benefits Program over time.

Other pending bills of interest include HB 123 “Disclosure of Health Care Costs,” sponsored by Representative Ivy Spohnholz (Anchorage), to improve consumer awareness about the costs of common health care services; HB 106 “Civil Legal Services,” sponsored by Representative Zach Fansler (Bethel), to provide a sustainable funding source for Alaska Legal Services that offers free and low-cost civil legal assistance for seniors, veterans, and low-income Alaskans; and HB 186 “Food Donations,” sponsored by Representative Talerico (Healy), to remove the risk of liability for businesses to donate their excess unsold food items to charitable organizations, like food banks, which also serve senior centers.

Three bills were introduced and passed this legislative session of interest to seniors. HB 16 “Driver’s License Requirement, Disability, ID and Training,” sponsored by Representative Steve Thompson (Fairbanks) was signed into law in order to increase safety for people with impairments not physically apparent (such as those having hearing difficulties, memory problems, persons with intellectual and developmental disabilities, as well as persons who have a tendency to wander) by providing training to peace officers to increase their ability to recognize these impairments and respond appropriately to these public members in addition to other bill provisions.

“Fiduciary Access to Digital Assets,” HB 108, sponsored by Representative Claman (Anchorage), modernizes inheritance law by providing a means to manage and dispose of a principal’s digital assets by their designated fiduciary. Digital assets include on-line financial transactions (Medicare, Social Security, and retirement benefits deposited electronically), bank accounts, personal emails, Facebook accounts and other personal items. This legislation is of importance to seniors as many are becoming on-line users. Reportedly, women are the fastest growing age demographic of Facebook users between the ages of 50 to 70 years old. Governor Walker signed HB 108 into law on August 2nd in Wasilla.

“Protect Vulnerable Adults/Long-Term Care,” SB 83, a Governor’s bill, was passed signed into law on August 2nd in Anchorage. This legislation brings Alaska’s statutes of the Office of the Long-Term Care Ombudsman into alignment with federal changes from the Administration on Community Living. See more about these changes in the enclosed article from the Office of the Long-Term Care Ombudsman.
As Long Term Care Ombudsmen for Alaska, our mission is to meet with residents of assisted living homes and nursing facilities to see if they have any issues they need assistance in resolving. Established by the Older Americans Act, the Long Term Care Ombudsman program is mandated to provide independent oversight and advocacy services to seniors in Alaska’s long term care facilities. The Long Term Care Ombudsman program is designed to protect the rights, health, safety, and welfare of Alaskans living in long term care facilities. In Alaska, the Long Term Care Ombudsman program also provides advocacy to seniors with complaints about their residential circumstances.

In 2016, the Older Americans Act was reauthorized and new regulations for Long Term Care Ombudsman were created. As a result, the federal Administration for Community Living reviewed all states to ensure compliance with these changes. Through this review, two Alaska statutes were identified as being out of alignment with the reauthorized Older Americans Act and Long Term Care Ombudsman regulations. The Governor introduced Senate bill 83 to amend provisions of Alaska statute 47.62 Office of the Long Term Care Ombudsman and 47.24 protection of vulnerable adults to ensure alignment with the Older Americans Act and its implementing regulations. Currently, SB 83 is awaiting signature by the Governor after passing the House and Senate. Briefly, this bill:

- Aligns state statutes with federal statutes and regulations to ensure Office of the Long Term Care Ombudsman only shares resident information with informed consent and to ensure Office of the Long Term Care Ombudsman can obtain records to investigate and make referrals when resident is unable to provide informed consent.
- Removes (due to a conflict of interest) the option for mandatory reporters to meet reporting requirements by submitting report to the Office of the Long Term Care Ombudsman.
- Clarifies the separation of the role of the Long Term Care Ombudsman from the role of Department of Health and Social Services (Adult Protective Services and long term care licensing).
- Clarifies that Office of the Long Term Care Ombudsman may serve residents in long term care facilities under the age of 60.

All the changes in SB 83 will help the Long term Care Ombudsmen do their job more efficiently and more effectively. If you have 3 hours a month to share with an elder Alaskan, we would love to have you volunteer for our program. Call Kathryn Curry at 334-2535 or apply online at http://akoltco.org/volunteer/.
Vitamin D and Senior Health

Vitamin D, also known as the Sunshine Vitamin, is associated with a number of health benefits for older adults that are important for strong bones and may contribute to overall good health.

Our skin synthesizes vitamin D3 after sun exposure when it is transformed by the liver and kidneys into a biologically-useable form. Vitamin D3 is then used by the small intestines to absorb calcium, zinc, iron, and other important minerals. Vitamin D is unique in that no other vitamin requires this extensive process of activation before it can be utilized by the body.

While the sun is the best source of vitamin D, extensive sun exposure can increase the risk of skin cancer. Many doctors recommend obtaining vitamin D through dietary sources such as cod liver oil, salmon, swordfish, tuna, sardines, and foods fortified with vitamin D such as milk, orange juice, and yogurt or through vitamin supplements.

Older adults in particular are at increased risk for vitamin D deficiency for several reasons. According to the American Journal of Clinical Nutrition, decreased dietary intake, less exposure to sunlight, reduced skin thickness, a decreased capacity of the skin to synthesize vitamin D, and impaired intestinal absorption, among other factors all contribute to lower vitamin D levels for seniors. Seniors who consume the recommended daily amounts of vitamin D benefit from reduced risk for falls, fractures and osteoporosis; enjoy improved muscle strength and mobility; and as a result are less likely to require early nursing home admission due to fractures from falls (http://ajcn.nutrition.org/content/75/4/611.full).

As is true with all vitamin and medications, it is strongly recommended that patients, regardless of age, talk with their doctors first about the risks and benefits before taking any vitamin and mineral supplements, especially if they are on other medications. Vitamin D toxicity is a rare but serious condition caused by taking mega-doses of vitamin D supplements that may result in poor appetite and nausea as well as weakness and kidney problems.

“Older adults in particular are at increased risk for vitamin D deficiency for several reasons.”
What’s new on the Commissions’ Website?

The Alaska Commission on Aging’s website is a great source of information on aging issues. The website is updated often and contains publications, advocacy materials, web links to resources, in addition to state plan documents, ACoA newsletters, and annual reports. You may find the website at www.alaskaaging.org.

What’s new on the ACoA website?

- FY2016 Alaska Commission on Aging Annual Report

- May is Older Americans Month: Governor Walker’s Proclamation

- 2017 Legislative and Congressional Letters of Support for current Legislative Bills and Advocacy Priorities

- Alaska Commission on Aging Senior Snapshot: Older Alaskans in 2015/16


- Implementation Guide for Alaska’s Roadmap to Address Alzheimer’s Disease and Related Dementias (ADRD), December 2016

www.alaskaaging.org
Seniors and Opioid Dependence

Night after night we hear or read the news about the abuse and deaths of thousands of young people who are addicted to opioids. What we don’t hear are stories about the millions of senior adults who are also addicted. Forty percent of the prescription drugs sold in the United States are used by seniors. Many of the opioid-based drug types are prescribed for chronic pain, perhaps after knee or hip surgery. According to the National Clearinghouse for Alcohol and Drug Information, there are as many as 17% of older adults (age 60+) who abuse prescription drugs. Narcotic pain killers, sleeping pills, and tranquilizers are common medications of abuse. Almost one-third of all Medicare patients – nearly 12 million people - were prescribed opioid painkillers by their physician. When does the medication use stop being medically necessary and transform into an addiction? The answer is when a person starts using the medication for non-intended purposes.

According to the Physicians for Responsible Opioid Prescribing (June 2017), dependence on prescribed opioids can set in after just a few days of use. Dependence occurs when the patient feels some discomfort or side effects when they stop using the medication. Governor Walker proposed House Bill 159 as part of the state’s effort to fight the surge of the number of deaths linked to opioid overdoses. This bill, carried by Senator Micciche and Representative Spohnholz, was signed into law on July 25 in Wasilla and includes the following provisions:

1. Provide an option for patients to execute a “Voluntary Non-opioid Directive” that allows patients to make clear their desire not to be administered an opioid;

2. require health care licensing boards to adopt regulations requiring medical care professionals (including physicians, dentists, nurses, physicians, optometrists and other medical professionals) to obtain continuing education training in pain management, opioid use, and addiction; and

3. limit initial prescriptions for an opioid to no more than a seven day supply for adult patients for outpatient use.

Another program that the state has adopted is Project HOPE (Harm reduction, Overdose Prevention and Education) response program which will supply, train, and provide opioid overdose rescue kits to qualified individuals (e.g., family members, friends, and associates of opioid users; treatment program and transitional housing staff; and first responders— those most able to assist someone at risk of dying from an opioid overdose when emergency medical services are not immediately available). The Division of Public Health, within the Department of Health and Social Services, plan to train up to 5,000 individuals in 2017 on the signs of an overdose and how to use a Project HOPE opioid overdose rescue kit.

In addition to Project HOPE, the Division of Public Health has secured bags that will safely dispose of unused medications. This project called “Deterra Drug Deactivation System,” provides medication disposal pouches to public members allowing them to safely dispose of unwanted or expired prescription painkillers at home. A person using the drug deactivation system simply puts their medication in a bag containing carbon that bonds to the pharmaceutical compounds when water is added. The person adds water and shakes it up to neutralize the active ingredient in the drug. The biodegradable bag can then be placed into the trash.

For more information on these programs please visit http://dhss.alaska.gov/dph/director/pages/heroin-opioids/narcan.aspx or call 334-2593.
Governor’s Bill to Combat the Opioid Epidemic: HB 159 Timeline

July 25 – Gov. Walker signed HB 159 into law

July 9 – Gov. Walker donated $11,000 of his salary towards Wasilla PD drug dog fundraiser

June 19 – Gov. Walker signed SB 55 into law

May 15 – Gov. Walker announces winners of drug dog-naming contest

May 12 – Gov. Walker announced kickoff of contest to name drug dogs

April 20 – Gov. Walker announced Alaska’s receipt of $2 million in federal STOG funds

April 17 – Gov. Walker announced Alaska’s participation in CDC-NGA project

March 21 – Gov. Walker signed SB 91, life-saving naloxone bill, into law

March 10 – Gov. Walker filed SB 91 to extend disaster declaration

March 6 – Gov. Walker filed legislation (HB 159/SB 79) to change how opioids are prescribed & monitored

February 16 – Gov. Walker issued Administrative Order 283, directing state departments to prioritize resources to combat the opioid epidemic and apply for federal grants to fund prevention, treatment and enforcement

February 14 – Gov. Walker issued a 30-day disaster declaration to allow statewide naloxone distribution

Dispose of expired or unused medicine safely. Prevent the misuse of prescription drugs and keep our community safe.

Don’t throw your unused medicine in the trash or flush it down the toilet. Deactivate your medication safely at home with a free medication disposal bag.

Free Disposal Bags Available At:
ProjectHOPE@alaska.gov

An opioid/heroin overdose reversal drug is available for those at risk.

Contact us to learn more about Project HOPE kits
ProjectHOPE@alaska.gov

Learn about Narcan and Project HOPE at www.opioids.alaska.gov.
Federal Advocacy Update: Health Care, Medicaid Reform and the Impact for Alaska Seniors

The U.S. Congress pushed forward full speed to overhaul the nation’s health care law, but for now the Affordable Care Act remains intact. The House passed the American Health Care Act (AHCA, H.R. 1628) in May. Based on the AHCA, the Senate proposed the Better Care Reconciliation Act (BCRA). Both bills are complex and would have proposed significant changes to the Medicaid program, established more than fifty years ago. At the end of July, the U.S. Senate voted down the repeal of the Affordable Care Act as well as the modified “skinny repeal” legislation that would have removed mandates for individual and employer paid health care insurance in addition to funding for Planned Parenthood.

Medicaid is a partnership between federal and state governments with matching federal and state funds. Medicaid, the insurer of last resort, provides insurance for health care and long-term support services to qualifying low-income seniors, persons with disabilities, children, and families using a combination of federal and state funds.

Nearly half of those enrolled are children (Department of Health and Social Services, 2017).

Medicaid is an important program for Alaska. Approximately 185,000 Alaskans receive Medicaid services, or one in four residents, including seniors, persons with disabilities, children on Medicaid, and other vulnerable Alaskans.

More than 8,000 Alaskans age 65+ receive Medicaid-funded services (Department of Health and Social Services, June 2017, http://dhss.alaska.gov/News/Documents/press/2017/impactBCRA.pdf). While many seniors are insured by Medicare for medical services, Medicaid pays for services not covered by Medicare – such as vision, dental, and long-term care. Medicaid, not Medicare, covers a significant portion of the long-term care bill.

In FY2016, Medicaid paid for Personal Care Services ($59.3 million) and Alaskans Living Independently Waiver services ($46.9 million) for more than 4,600 qualifying older Alaskans. Medicaid also paid for 607 seniors living in nursing homes at a total cost of $95 million or $153,099 per person annually. (The median annual private pay cost for nursing home care in Alaska is closer to $300,000 per person, according to Genworth Cost of Care Survey 2016.)

FY16 Medicaid Payments: Alaska

<table>
<thead>
<tr>
<th>Service</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Care Services</td>
<td>$59.3 million</td>
</tr>
<tr>
<td>Alaskans Living Independently Waiver Services</td>
<td>$46.9 million</td>
</tr>
<tr>
<td>Seniors living in nursing homes</td>
<td>$95 million</td>
</tr>
</tbody>
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On average, six in ten nursing home residents rely on Medicaid funding as few people are able to afford the full cost of these services long-term.

Alaska is the state with the highest costs of health care insurance and medical care in the nation due to our low population density, high transportation costs, and complicated health care delivery system. Alaska has the fastest growing population of seniors of any state, which is expected to increase over the next twenty years with the aging of baby boomers. In addition, Alaska has the highest projected growth rate of people age 85 and older that is expected to increase 135% by 2030, the largest increase in the nation (Kaiser Family Foundation 2017).
Despite some variations, the federal health care reform bills proposed to:

1) Implement per-capita federal reimbursement caps for long-term support services for seniors, persons with disabilities, and other identified groups;

2) phase-out Medicaid expansion, now serving approximately 34,000 Alaskans, which would limit the number of eligible young seniors (age 50 to 64) able to qualify and have access to primary and preventative health care;

3) modify the amount of tax credits which are used to purchase health care insurance on the exchange establishing payments based solely on “age” (AHCA) or “age and income” (BCRA) and would allow insurance companies to charge five times more for premiums for persons age 50 years and older;

4) repeal a variety of taxes that are now used to sustain Medicare and Medicaid; and

5) eliminate the 6% higher federal reimbursement for personal care services under the Community First Choice option identified as a health care reform initiative in legislation passed last year.

As people age, they are more likely to need health care and long-term care, especially in late life. Medicaid funds services critical to senior health and safety across the continuum of care. The Commission on Aging supports efforts to preserve Medicaid funding and affordable health care insurance for seniors and all Alaskans. Please visit ACoA’s website, [www.alaskaaging.org](http://www.alaskaaging.org) under the advocacy button to read more about the Commission’s advocacy efforts regarding health care reform or call us at 907-465-3250.

Please contact Alaska’s Congressional delegation to express your views on policy and budget items. They want to hear from Alaskans! For a complete Congressional directory, including local contacts, go to [http://alaska.gov/CongressDelegation.html](http://alaska.gov/CongressDelegation.html).

- **U.S. Senator Lisa Murkowski**
  202-224-6665, phone
  [https://www.murkowski.senate.gov/contact/email](https://www.murkowski.senate.gov/contact/email)

- **U.S. Senator Dan Sullivan**
  202-224-3004, phone
  [https://www.sullivan.senate.gov/contact/email](https://www.sullivan.senate.gov/contact/email)

- **Congressman Don Young**
  202-225-5765, phone
  202-225-0425, fax
  [https://donyoung.house.gov/contact/](https://donyoung.house.gov/contact/)
The 6th Leading Cause of Death in Alaska

Can you guess what this cause would be?
While stroke is the 6th leading cause of death in Alaska for persons of all ages, stroke is the 4th leading cause for Alaskans age 65+. In 2014, stroke was the 4th leading cause of death in women and 5th leading cause of death in men in the U.S. Every year, more than 795,000 seniors (age 60+) in the United States have had a stroke. About 610,000 of them are first-time stroke victims. In 2015, according to the Alaska Health Analytics and Vital Records, there were a total of 142 deaths of Alaskans age 60+ caused by stroke. Most strokes occur when a blood clot blocks an artery or a blood vessel breaks. This blockage interrupts blood flow in an area of the brain causing cells to die and brain damage occurs. Every moment that lapses before medical help arrives can lead to more severe damage.

According to the American Stroke Association, anyone can have a stroke and everyone should be ready. Over 80 percent of strokes are preventable. It is so important to keep a normal blood pressure reading below 120/80. Most people who have a first stroke have high blood pressure. It is important to eat well, lose weight, not smoke, limit alcohol intake, and exercise at least 30 minutes each day.

Women have more strokes than men, and stroke kills more women than men. Women are at higher risk for stroke because they live longer than men, and advanced age increases stroke risk. One in five women is at risk for having a stroke. African-Americans are more impacted by stroke than any other racial group within the U.S. There is some good news. More than seven million Americans are stroke survivors.

Unfortunately, fewer than 50% of 9-1-1 calls are made within one hour of symptom onset because callers are not familiar with the signs of stroke, especially people under the age of 45. Learn the signs of a stroke, as shown in the graphic below. If someone shows any of these symptoms, even if the symptoms go away, call 9-1-1 and say, “I think this is a stroke” to help get the person to the hospital immediately. Time is important! Don’t delay, and also note the time when the first symptoms appeared. Emergency responders will want to know.

Recognizing stroke symptoms is critical and can be easily remembered if you think F.A.S.T. For more information visit the American Stroke Association at www.strokeassociation.org.

Unsure? Call 9-1-1 anyway. Don’t wait. You could save a life!
Supporting Nutrition through a Lifetime
Julie Walker, Assistant Manager
State of Alaska Family Nutrition Programs

The State of Alaska Family Nutrition Program’s mission is to support Alaskan families in making nutrition decisions for life-long health and wellbeing. As part of the Department of Health and Social Services, Division of Public Assistance, Family Nutrition Programs works closely with other health and wellness programs statewide to ensure adequate nutrition for income-eligible families.

Family Nutrition Programs for Seniors

The Commodity Supplemental Food Program (CSFP) works to improve the health of seniors at least 60 years of age by supplementing their diets with nutritious USDA commodity foods. Monthly food boxes include a variety of shelf stable foods, such as dry or ultra-high temperate (UHT) fluid milk, juice, oats, cereal, rice, pasta, peanut butter, dry beans, canned meat, poultry, or fish, and canned fruits and vegetables. CSFP is currently administered by two grantees, Fairbanks Community Foodbank and the Foodbank of Alaska – both of which continue to expand service throughout the state through an expansive web of partner agencies. These partners sign seniors up for the program, distribute food boxes, and may help with transporting food boxes. Agencies interested in providing CSFP boxes to seniors should contact the State CSFP Coordinator at 907-465-3100 for more information.

Also available to seniors is the Senior Farmers’ Market Nutrition Program (SFMNP), which provides low-income seniors with coupons that can be exchanged for fresh Alaska-grown fruits, vegetables, fresh-cut herbs and honey at farmers’ markets, and authorized farms and roadside stands from June 1 to October 31.

Other Family Nutrition Programs

Women, Infants, and Children

The Special Supplemental Nutrition Program for Women, Infants and Children, or WIC, provides nutritious foods and nutrition education to pregnant, postpartum and breastfeeding women, infants, and children up to age five. Approximately 11,700 Alaskan households per month receive WIC benefits across the state. WIC provides breastfeeding support and vouchers to purchase locally grown fruits and vegetables at approved farmer’s markets.

SNAP-ED

Alaska’s Supplemental Nutrition Assistance Nutrition Education and Obesity Prevention Program (SNAP-ED) program provides nutrition education and obesity prevention activities for SNAP (food stamp) eligible infants to adults. This may include work with partners such as grocery stores, schools, farmers markets, primary care clinics, after school programs, child care centers, senior centers, food pantries, local WIC and public assistance offices to deliver evidence based classes and programs. They also work with partners in their communities to promote changes to policies, systems and the environment that support Alaska’s SNAP-Ed goals.

To find out more about Family Nutrition Programs and services provided please contact 907-465-3100 or visit our website.

http://dhss.alaska.gov/dpa/Pages/nutri/
In Fond Remembrance of Ella Craig

Long-time senior advocate and former ACoA Commissioner Ella Craig passed away on Saturday, June 17, 2017.

Ella Craig was a passionate and vocal advocate for both seniors and youth during her long, distinguished life. Ella was a social worker by training and received her Masters of Social Work from the University of North Carolina, Chapel Hill. She moved to the Territory of Alaska in 1953 and was hired by the Bureau of Indian Affairs to help set up a social services program in Kodiak and assist families during the tuberculosis epidemic. Many people died from this disease, including parents of young children. Ella traveled from village to village to find foster placement for these kids when they were too young to care for themselves. Ella also served with the Red Cross overseas during World War II. She continued to actively volunteer with the Red Cross on disaster assessments into her 80s.

Later in life, Ella served on a variety of boards and commissions to improve senior care. Ella served as an ACoA Commissioner during her tenure as Chair for the Pioneer Home Advisory Board. Most recently, she served on the Anchorage Senior Advisory Commission and was a member of the State Plan for Senior Services Advisory Committee. Ella also worked with the University of Alaska and community members to establish the UA Geriatric Education Center, dedicated to providing health care professionals with training in elder care.

The family requests that donations, in lieu of flowers, may be sent to the University of Alaska Anchorage Ella Craig/National Association of Social Workers Alaska Chapter Scholarship, Volunteers of America or to a senior advocacy program benefitting Alaska seniors. The memorial service was held on Thursday, June 29 at the Alaska Native Heritage Center in Anchorage.
Commission Meetings

The Alaska Commission on Aging quarterly board meetings will be accessible by videoconference and teleconference. Congregate meeting sites will be posted as information is confirmed.

For public members living outside communities hosting these meetings, please call in using the toll-free number 1-800-315-6338, pass code 53250#.

Meeting agenda’s will be posted on the website 10 days before each meeting

www.alaskaaging.org

• Fall ACoA Board Meeting
  Thursday, September 14, 2017
  (Videoconference and Teleconference)

• Winter ACoA Board Meeting
  Tuesday, December 12, 2017
  (Videoconference and Teleconference)

• Legislative Advocacy and
  Southeast Rural Outreach Meeting
  February 5-9, 2018
  (Face-to-Face and teleconference in Juneau)

• Spring ACoA Board Meeting
  To be determined, May 2018
  (Videoconference and Teleconference)

ACoA Commissioners meet four times a year, with one meeting being face-to-face, and all others held by videoconference and teleconference. This year, ACoA met in Juneau for the February meeting.
Save the Date: Calendar of Events

Next ACoA Meeting:
September 14, 2017
1-800-315-6338, 53250#

Senior Fall Prevention
Awareness Day:
September 22, 2017

National Family Caregiver Awareness Month:
November 2017

Alzheimer’s Disease Awareness Month:
November 2017