Alaska Senior Benefits Reauthorized!

Alaska's legislative session adjourned on May 13, Mother's Day, at 1:55 a.m. While the first year of the 30th Legislature was perhaps one of the least productive in state history as measured by the number of bills passed, legislative action this year changed all that. By the end of legislative session, more than 120 bills had passed with some very significant pieces of legislation passing the last 24 hours of session.

This session, the Alaska Commission on Aging (ACoA) tracked a total of 50 bills for policy and budget items that may affect seniors in some way. We thank all of the senior centers and other senior organizations who participated in the Commission's biweekly Senior Legislative Advocacy Teleconferences. These meetings provide information regarding bills and budget items of interest to seniors and provide an opportunity for public members to voice their opinions about proposed legislation that informs the Commission's advocacy actions during legislative session.

Passage of the Reauthorization of the Alaska Senior Benefits Program, HB 236, sponsored by Representative Kawasaki was must have legislation for seniors and senior advocates this session and was ACoA's top legislative advocacy priority. This bill was signed into law by Governor Walker on May 10, 2018 at the Fairbanks North Star Borough (FNSB) Senior Recognition Day, an event sponsored by the FNSB Senior Advisory Commission. HB 236 reauthorizes the Senior Benefits program for six years (instead of four) and includes full funding for FY2019 (beginning on July 1, 2018).

Beginning on July 1, 2019 (FY2020), HB 236 authorizes increased funding for Senior Benefits that (1) allows for a 2% projected annual growth in the Senior Benefit recipient population as projected by the Division of Public
Assistance, and (2) restores funding for monthly payments of the upper income tier from $76 per person to $125 monthly as proposed in the original Senior Benefits legislation. Further, Senate Finance included language in the fiscal note that protects funding for Senior Benefits explaining that the appropriated funds cannot be used for any purpose other than Senior Benefits if benefits to seniors are prorated. According to the Division of Public Assistance, there are more than 11,400 Alaskans who receive Senior Benefits representing almost 14% of the 65+ population in Alaska.

Other important bills that affect seniors and passed this legislative session include:

- **Food Donations, HB 186**, sponsored by Representative Talerico removes the risk of liability of businesses to donate their excess unsold food items to charitable organizations, like food banks, in order to address the problem of hunger in Alaska and reduce food waste. Many seniors and senior centers rely on donated foods from food banks.

- **Regulation of Smoking, SB 63**, sponsored by Senator Micciche provides for statewide smoke-free workplaces and public spaces in order to protect public members from second-hand smoke. The research is clear – second hand smoke causes lung cancer.

- **Civil Legal Services Fund, HB 106**, sponsored by Representative Claman secures a sustainable funding source for the Civil Legal Services Fund that provides free or low-cost civil legal services for low-income Alaskans, veterans, and older adults using a percentage of the court filing fees paid annually by the Alaska Court System to the Civil Legal Services Fund. This legislation allows the Legislature to appropriate up to 10% of court filing fees to this Fund and adds a $300,000 annual appropriation. Alaska Legal Services and Disability Law Center utilize funding from the civil legal services fund to provide civil legal assistance for eligible Alaskans.

- **Medicaid Behavioral Health Coverage, SB 169**, sponsored by Senator Giessel improves access to behavioral health services by (1) expanding options to meet the clinical supervision oversight for mental health therapists to include “physicians” as well as psychiatrists to serve as supervisors and (2) allows providers to use telehealth and other communication devices to provide remote consultation/telemedicine when necessary, which are important to rural-based practices. Access to behavioral health care is a growing need for Alaska seniors.

- **New Drugs for the Terminally Ill, HB 43**, sponsored by Representative Grenn offers terminally ill patients who have exhausted all other available treatments the “right to try” investigational treatments and provides immunity for their prescribing physicians, even for treatments that have not received federal approval.

- **Public Health Fees, HB 215**, sponsored by House Finance allows the Division of Public Health to collect fees for certain professional services that do not impact the provision of patient health care services as a means to offset recent budget reductions for the division so that they may continue to provide preventative health care services used by many seniors and other Alaskans.
Marital/Family Therapy License and Medical Service, SB 105, sponsored by Senator Wilson improves access to behavioral health services by addressing workforce shortages (1) including marital and family therapists to the list of approved Medicaid providers and (2) allowing physicians along with psychiatrists to serve as supervisors for marital and family therapists. Moreover, provisions from HB 123, Disclosure of Health Care Costs, sponsored by Representative Spohnholz were rolled into SB 105 requiring health care providers to disclose the undiscounted costs for their most commonly provided services in order to enhance consumer awareness about the costs of health care. Provisions from HCR2, Respond to Adverse Childhood Experiences, were also included in SB 105 that require the state to recognize the lifelong impacts from childhood trauma.

The Legislature approved, and Governor Walker signed into law, a $10.4 billion State Operating Budget for FY2019. Through Conference Committee, the FY19 budget includes Medicaid funding at the level requested by the Governor, less $30 million. Additional funding was approved for the Division of Public Assistance for 20 new positions to address the backlog of applications and high caseloads experienced in public assistance; seven new Public Guardian positions for the Office of Public Advocacy; and increased funding for the Division of Behavioral Health to help hospitals better serve adults with acute mental health conditions and to improve hospital safety for staff and patients.

The Capital Budget included $1 million for the Alaska Pioneer Homes to construct a new Alzheimer’s Disease and Related Dementia wing at the Anchorage Pioneer Home; $1 million for Alaska Housing Finance Corporation’s (AHFC) Senior Citizen Housing Development Fund and $3 million for AHFC’s Weatherization Program; as well as $500,000 for Public and Community Transportation Funds to leverage federal funding for transit services for seniors and disabled persons.

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!

Until next time...
Gordon Glaser, ACoA’s New Chair

Like many of you over 65, I am retired. Like 80% of our age group my wife and I have a chronic disease that may kill us. We live well. We travel within the state, down to the lower 48, and usually a trip overseas each year. I bike and do Tai Chi year-round. My wife does Yoga and succeeds much better than me in controlling her weight. We work to control our diseases and not allow the diseases to control us. Our daughter and community help. I believe we help our daughter and community as well. Our grown daughter may sometimes disagree.

My wife got me involved with my local Senior Center. I ended up being past president of the board of directors. That experience as board president moved me into an increased involvement with the challenges of our aging population. I had worked as a program manager with the Alaska’s Division of Public Health for a number of years. My focus was on the prevention of childhood injuries. Ironically, when we look at our aging population the issues of fall prevention, auto and pedestrian safety, and making our homes safe show remarkable similarities. Similarly, the medical needs of children and older adults change as they age. However, unlike children, when “helpers” think they know what we want, we can and should be able to say no.

Those sixty years and older are the fastest growing segment in America. We are 17% of Alaska and growing. We are a golden opportunity and resource for our state. We have the experience, wisdom and work skills needed in our community. Many of us are at least part time caregivers of grandchildren. Some of us still need to help our children in this difficult economy. We provide a sizeable portion of care for many older relatives or spouses. Some of us help in the schools or our houses of worship. Older Alaskans make up the backbone of groups like Kiwanis, Rotary, Masons, Knights of Columbus and the ever-present Lions.

Our retirement funds and medical needs are increasing key factors in the Alaskan economy. We will make the change on how care will be given, transportation needs met, and new ways to deliver nutrition. We need to reframe and rebrand so that our programs and people are viewed as a resource not as a liability.

A significant minority of us will continue to need government help. We can help direct that assistance so that it is cost effective, and respects those who receive that help. Many older Alaskans contributed so much to develop our state. They deserve our respect. Most of us will never be in a nursing home, the Pioneer Home or ever qualify for Senior Benefits. Most of us will use Medicare and others will also need Medicaid. These government programs need to remain strong and become more effective. Some of us want or need to work. We must ensure that the Mature Alaskans Seeking Skills Training (MASST) program and age discrimination

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Former ACoA Chair David Blacketer (center) passes the gavel to Gordon Glaser (right), as ACoA’s new Chair. Mary Shields (left) will serve as ACoA’s new Vice Chair.
prevention policies are strengthened. The social, medical safety net for the aging must remain viable even though most of us will hopefully never need it.

We need to find fresh alternative to institutional care. Most of us wish to remain independent and live in our own homes. We will find workable solutions to transportation, medical care access, nutrition, housing, and preventing social isolation.

On behalf of the Alaska Commission on Aging board, we seek your creative solutions, input and help. I welcome this opportunity for us to build a better, more age friendly Alaska together.

**Alaska State Plan for Senior Services, FY2020-FY2023**

**Make Your Voice Heard!**

Every four years, Alaska has the opportunity to define the direction that will guide the provision of senior services over the next four years. That time is now! The Commission on Aging is conducting several needs assessment activities as part of the state planning process for the Alaska State Plan for Senior Services, FY2020-FY2023.

Through the Senior Survey, Elder-Senior Listening Sessions, and the Senior Provider Survey, the Commission is asking Alaskans age 55+, their families, and care providers how we can make Alaska a better place to live and grow old.

The Senior Survey, available in both paper and on-line formats, collected input from people age 55+ from May 1 through July 13. We thank the Senior Voice for publishing the senior survey in their May edition as well as AARP for posting a Facebook ad about the senior survey featuring ACoA Commissioners Gordon Glaser and Mary Shields.

The top concerns identified in the 2014 senior survey were access to health care, financial security, and housing. Other issues deemed important by seniors were having access to healthy foods; housing modification for accessibility and weatherization; need for additional services to help seniors stay in their homes; transportation; and fear of falling. It will be interesting to see if these concerns have changed.

Elder-Senior Listening Sessions are ongoing. The Commission has conducted sessions in Wrangell, Anchorage, Mat-Su, and the Fairbanks North Star Borough. We thank our senior center partner agencies for hosting these community forums. While each community has identified differing concerns, the need for access to affordable health care; the continuum of senior housing, including assisted living; and transportation are issues identified most pressing by seniors to date. Upcoming sessions are planned for Juneau and Nome.

The Senior Provider Survey will be conducted in September through November. The Provider Survey will ask providers about their perceptions regarding needs of seniors they serve as well as the challenges they experience providing services for Alaska’s growing senior population.

The State Plan satisfies a requirement of the Older Americans Act of all states which provides federal funding for a range of senior programs including senior meals, transportation, in-home supports, elder safety, senior vocational training, and much more.

Public input is critical to the development of this Plan as seniors are the recipients of services and understand first-hand what works well for an older person. Of utmost importance, Alaska’s older people prefer to remain living independently in their own homes and communities for as long as possible close to their family, friends, and cultural traditions.
Older Americans Month in Alaska

“Engage at Every Age” was the theme for the 2018 May is Older Americans Month in Alaska as cited in the Governor’s Executive Proclamation. Older Alaskans Month (OAM) celebrations were held statewide in Anchorage, Fairbanks, Mat-Su, Homer, and for the first time, Juneau, among other locations.

Celebrating Alaskan Centenarians in May 2018

As part of this year’s OAM festivities, the Alaska Commission on Aging (ACoA) partnered with the Governor’s Office to celebrate Alaskan Centenarians, people who are age 100 years and older. Using data from the Permanent Fund Division, ACoA identified 50 centenarians of whom 23 provided consent to be publicly recognized. The oldest living Alaskan is a man 110 years old who lives in a remote area of the state near a salmon fishery. We think he may eat plenty of salmon and wild berries, which have probably contributed to his longevity. In 2016, the Commission identified 38 Centenarians based on data from the Permanent Fund Division. In just two years, Alaska gained 12 Centenarians! Each Centenarian received an original OAM Proclamation signed by the Governor and an Executive Centenarian Citation signed by Governor Walker and Lieutenant Governor Mallott. Below are photos of a few of the Centenarians celebrated during this year’s Older Americans Month in Alaska as well pictures from the 2018 OAM events held in Anchorage, Fairbanks, Homer, and Juneau.
Introducing
Larry Johnson

Hi – I’m Larry, I am employed by the State Department of Labor Mature Alaskans Seeking Skills Training (MASST) Program, and am currently assigned to the Alaska Commission on Aging. I have been in this office since the first week of November 2017.

Formerly, I worked for the Alaska State Troopers, as a commissioned Police Officer, and also with the Alaska State Troopers Juneau and the Juneau Police Department as a Police Dispatcher. More recently, I was employed as an Office Assistant II in the Department of Labor and Workforce Development, Division of Business Partnerships, and briefly for the Council on Domestic Violence and Sexual Assault.

My work at the Commission has involved helping with the Alaskan Centenarian project, tracking the numerous senior surveys coming in, and doing other administrative tasks. I am learning new skills and for the most part, enjoy the challenge. A lot of work to be done for a great cause for the Alaska senior population!

Guard Your Card

This is the theme from the Medicare office to let people know how important it is to look for your new Medicare card in the mail. Why are they sending you a new card? The new Medicare card will have a number that is unique only to you instead of your social security number. This will help protect you against identity fraud. The new Medicare cards are already showing up in Alaska and most will be delivered in a few months. If you are interested to know when your card will arrive, go to Medicare.gov/NewCard and sign up to get email alerts from Medicare.

When you receive your new card in the mail:

- **Destroy your old Medicare card.** Make sure you destroy your old card so no one can get your personal information.
- **Start using your new Medicare card right away!** Your doctors, other health care providers and facilities know that it’s coming, so carry it with you when you need care. Your Medicare coverage and benefits will stay the same.
- **Keep your other plan cards.** If you’re in a Medicare Drug Plan, keep using that Plan ID card whenever you need care or prescriptions. However, you should carry your new Medicare card too — you may be asked to show it.
- **Protect your Medicare Number just like your credit cards.** Only give your new Medicare number to doctors, pharmacists, other health care providers, your insurer, or people you trust to work with Medicare on your behalf.

Defrauding the Federal Government and its programs is illegal. Committing Medicare fraud exposes individuals or entities to potential criminal and civil liability, and may lead to imprisonment, fines, and penalties. Criminal and civil penalties for Medicare fraud reflect the serious harms associated with health care fraud and the need for aggressive and appropriate intervention. Providers and health care organizations involved in health care fraud risk exclusion from participating in all Federal health care programs and risk losing their professional licenses.

If there has been fraud from a medical provider, please call the Medicare fraud hotline at 1-800-447-8477. One can also report fraud to Medicare another way by faxing to 1-800-223-2164.
Marie Darlin: Senior Advocate, Historian, and Citizen Activist

It is with deep sadness that the Alaska Commission on Aging announces the passing of Hilda “Marie” Darlin on June 6, 2018. Marie served as the Commission’s Vice Chair and Chair of the Legislative Advocacy Committee for FY2017 and FY2018. Over the years, Marie served at least once on every ACoA committee. She was first appointed to the Commission on June 1, 2010 by Governor Parnell, reappointed on September 1, 2011, and again on November 25, 2015 by Governor Walker. Marie served almost eight years on the Commission in the public member seat. She was a Juneau resident.

Marie’s attendance at ACoA board and committee meetings was almost perfect. She clearly understood that the important work of any worthy cause could not be accomplished without a fully engaged board. As the long-time Chair of the ACoA Legislative Advocacy Committee, who facilitated the biweekly Senior Legislative Advocacy teleconferences during legislative session, Marie missed only one meeting.

The 30th Legislature recognized Marie Darlin with a Legislative Citation in 2018 sponsored by Representative Sam Kito for her passion, exemplary citizen action, and generous community service to Alaska. Marie personified the power of aging and the importance of elders through her demonstration of leadership, wisdom, skills, and passion helping Alaskans of all ages. Marie was a loving mother, grandmother, and friend to many. Marie is a powerful inspiration for us all and will be greatly missed.

In remembrance of Marie Darlin with her great grandchildren
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 agendas will be posted on the website 10 days before each meeting. www.alaskaaging.org

- ACoA Rural Outreach
  September 12-15, 2018 and September 18, 2018 (Nome, Alaska)
  Site visits are scheduled for September 14.

- Winter ACoA Board Meeting
  Tuesday, December 6, 2018
  (Videoconference and Teleconference)

- Legislative Advocacy Meeting
  February 11-13, 2019
  (Face-to-Face and teleconference in Juneau)

- Older Alaskans Month Meeting
  May 1, 2019
  (Videoconference and Teleconference)

2019 Legislative Teleconferences

The Alaska Commission on Aging legislative meetings will be accessible by videoconference and teleconference.

- January 24
- February 8
- February 21
- March 7
- March 21
- April 4
- April 18

Meeting agendas will be posted on the website 10 days before each meeting at www.alaskaaging.org.

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Tips for Reducing Your Risk for Falling

Famous Fallers

The world has some famous fallers. Falls are the number one cause of injury, trauma-related hospital visits, loss of independent living, and death from an injury for those age 65 and older. The good news is that you can prevent falls.

A simple google search will give you a long list of famous fallers who required a trip to the Emergency Department. If you have fallen, you are in company of: John Glenn, American astronaut; Dr. Robert Atkins “weight-loss” guru; William D Bechill, first Commissioner on Aging; Supreme Court Justices Sonia Sotomayor and John Roberts; Nancy Reagan and Ed McMahon, Beyoncé and Paula Abdul, The Queen of England and Barbara Walters. The list goes on.

Why did they fall?

There are many reasons people fall. In this article we will discuss natural aging factors that you and the famous fallers share and what you can do to keep your body healthy to prevent a fall.

Natural Aging

We used to believe that a fall is due to aging, however it is not age that increases the risk of falls—rather it’s natural aging AND the occurrence of other diseases or conditions (referred to as “co-morbidity”). The most significant aging conditions are muscle weakness, balance changes and vision changes. Co-morbidities include the addition of chronic and acute illnesses. The good news is that you have control how you age. Below are some fall risks and prevention strategies.

1. **Muscle weakness** and reduced physical fitness is one of the most common risk factors for falling. A loss of muscle strength, balance, flexibility and coordination can lead to a fall.

2. **Balance changes** is another factor leading to instability and falls. Age-related changes in the nerves, senses and muscle systems can lead to inability to stand upright for extended period of time or the way in which we react to a sudden loss of balance (e.g., a slip, trip or push).

3. **Vision changes** can contribute to falls. Eyes change as we age and so does vision.

4. **Chronic illness** has been associated with an increased risk of falling. Hypotension (low blood pressure), arthritis, diabetes, strokes. Osteoporosis (low bone mass and break down of bone tissue), does not increase risk of fall but does increase risk of a broken bone from a fall.

5. **Acute illness** such as a cold or the flu can cause weakness, fatigue or dizziness, and short period of immobility. Even a short period of immobility is enough to lead to muscle weakness.

What can famous fallers and you do to prevent age-related falls?

Here are some strategies to reduce your risk of falling. Whatever you do should be easy, simple, and enjoyable. Think about it as an opportunity to improve stamina, strength, balance, and flexibility.

1. **To prevent muscle weakness** and loss of balance, participate in regular physical activity such as walking, taking a fitness class, doing home exercises or something active outside like hiking or skiing.

   a. **Stamina**
   Aerobic activities that increase your breathing, heart rate, and stamina. Examples include: brisk walking, yard work, dancing, jogging, swimming, biking, climbing stairs or hills, tennis or basketball.
b. **Strength**
   Even small increases in muscle strength can make a big difference in your ability to stay independent and carry out everyday activities such as climbing stairs and carrying groceries. Strength exercises include: Lifting weights and using resistance bands.

b. **Carry items, do more manual chores like vacuuming or gardening and take the stairs.**

c. **Stand on tip toes, walk on an uneven trail with a walking stick until your balance improves.**

d. **Stretch while in waiting lines and bend over to touch your shoes a couple times a day.**

**c. Balance**
   Balance exercise help prevent falls. Many lower-body strength exercises also improve your balance. Exercises to improve your balance include: standing on one foot, Tai Chi and Yoga.

**d. Flexibility**
   Stretching can help your body stay flexible and limber, which gives you more freedom of movement for your regular physical activity as well as for your everyday activities: To increase your flexibility, try stretching or yoga.

2. **Everyday activities** are good for fall prevention too.

   a. **Walk or bike to destinations whenever possible, take the dog, spouse or a friend for long walks.**
   b. **Carry items, do more manual chores like vacuuming or gardening and take the stairs.**
   c. **Stand on tip toes, walk on an uneven trail with a walking stick until your balance improves.**
   d. **Stretch while in waiting lines and bend over to touch your shoes a couple times a day.**

3. **Talk with your health professional** to identify and treat medical concerns that might increase your risk of falling.

   a. **Discuss any previous falls with your health professional, fear of falling and review your medications with them.**
   b. **Have your vision checked at least once a year. Be assessed for cataracts, near or far sightedness, or new prescription glasses.**
   c. **Stay current on immunizations to prevent acute illness such as the flu, pneumonia, or shingles.**
   d. **Ask your health profession about taking Vitamin D to help keep your bones strong.**

**What’s new on the 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.

- FY2017 Alaska Commission on Aging Annual Report
- 2018 Centenarian Project
- 2018 Legislative and Congressional Letters of Support for current Legislative Bills and Advocacy Priorities
- 2018 Alaska Senior Survey

Learn more at: www.alaskaaging.org.
Save the Date: Calendar of Events

November: Family Caregiver Month
November: Alzheimer’s Disease Awareness Month
September: Personal Fall Prevention Month
September: Alzheimer’s Disease Awareness Month
Family Caregiver Month
September: Senior Fall Prevention Month

Site visits scheduled for:

- September 12-13 and 18, 2018
- September 14, 2018

Alzheimer’s Disease Awareness Month:
November 2018

Family Caregiver Month:
November 2018

Senior Fall Prevention Month:
September 2018

Alaska Commission on Aging Members