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Aging Alert

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A NEW BEGINNING IN LANSING

Anticipation is running high with a new Governor and a new Legislature on deck in January. Republicans are now in the driver's seat, with the Governor, Attorney General, Secretary of State, Supreme Court, House of Representatives and Senate all under GOP control.

Continuing budget woes will be one of the first challenges they face. Michigan confronts a minimum \$1.6 billion deficit for the 2011 fiscal year. That amount will double if the Michigan Business Tax is changed as promised during the campaign season.

To date, the budget crisis has taken a severe toll on frail elders. Over the past three years, services like meals-on-wheels and home care have seen cuts totaling \$10 million. "I don't get it," says Mary Ablan, Director of the Area Agencies on Aging Association. "Meals and other services keep frail seniors at home, out of nursing homes, and off the Medicaid rolls. These cuts will cost us in the long run."

Governor Rick Snyder hit the ground running by naming several key appointments in late 2010, including the Director of the Department of Community Health – Olga Dazzo. Dazzo earned an

MBA from Michigan State University and has recently been a health care consultant and managed care executive in Florida. She was formerly the CEO of Physicians Health Plan (PHP), a Lansing-based HMO. Dazzo will advise the new Governor on health issues, and will oversee the Medicaid program, including the MI Choice Medicaid

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Waiver.

Governor Snyder has promised to deliver his State of the State address early - in mid-January - and plans to chart new territory by recommending a two-year budget covering fiscal years 2012 and 2013.

NEW LAWS OF INTEREST TO OLDER MICHIGANIANS

In 2010, more than 200 bills made it all the way through the legislative process and were signed into law. Here are some of the new laws affecting older adults. For more information, go to www.michiganlegislature.org and click on Public Acts.

PRESCRIPTION DRUGS (Public Act 3) Allows a physician to provide multiple prescriptions for Schedule 2 controlled substances on one form, and allows the scripts to be filled up to 90 days after they are written. Introduced as Senate Bill 689, sponsored by Senator Tom George, M.D. Effective February 4, 2010.

FLU VACCINE (Public Acts 21 & 23) Requires hospitals to develop a flu vaccine policy to identify those 65+ and other high risk patients and offer the shot during flu season. Introduced as House Bill 4172 (Robert Jones, sponsor) and Senate Bill 722 (Roger Kahn, M.D., sponsor). Effective 3/25/2010.

DISABLED VETERANS (Public Act 22) Requires the state to give preference to disabled veterans in awarding contracts for construction, repair, remodeling or demolition. Introduced as House Bill 4512, sponsored by Rep. Gino Polidori. Effective 3/25/2010.

REUSE OF MEDICAL DEVICES (Public Acts 25 & 26) Makes it a crime for professionals to reuse medical devices intended for a single use, such as syringes, sutures, scalpels, gloves, etc. Introduced as Senate Bill 528 (Bill Hardiman, sponsor) and House Bill 5825 (Dian Slavens, sponsor). Effective 3/26/2010.

STATE PARK PERMIT (Public Act 35) Repeals the current \$24 motor vehicle State Park permit and replaces it with a \$10 fee paid with vehicle registrations. Introduced as Senate Bill 389, sponsored by Sen. Ray Basham. Effective 10/1/2010.

SCHOOL RETIREES (Public Act 75) Makes a variety of changes to the public school retirement system, including an incentive for early retirement, and a new requirement for employees to contribute 3% of salary into a retirement health care account. Introduced as Senate Bill 1227, sponsored by Sen. Jud Gilbert. Effective 5/19/2010.

MEDICAL EXAMINERS (Public Act 108) Allows medical examiners to retain body parts to establish cause of death or evidence of a crime, as long as relatives are notified and asked about disposition. Introduced as House Bill 4893, sponsored by Rep. Mary Valentine. Effective 7/1/2010.

COTTAGE FOODS (Public Acts 112 & 113) Allows for the sale of homemade foods not requiring temperature control without obtaining a state license if annual sales do not exceed \$15,000. "Cottage foods" include jams, jellies, dried fruits, candy, baked goods, etc. Introduced as House Bill 5280 (John Proos, sponsor) and House Bill 5837 (Pam Byrnes, sponsor). Effective 7/12/2010.

COMPLETE STREETS (Public Acts 134 & 135) Requires the state to develop a "complete streets" policy as part of its master plan for roadways that will accommodate drivers, pedestrians, bicycles and mobility aids. Also directs the state to develop model policies for adoption by counties and localities. Introduced as House Bill 6151, sponsored by Rep. Jon

Switalski. Effective 8/2/2010.

SINGLE POINTS OF ENTRY (Public Act 173) Discontinues funding for Single Point of Entry pilot programs, eliminated by Governor Granholm in Executive Order 2009-22. Introduced by Rep. George Cushingberry. Effective 9/30/2010.

STATE RETIREES (Public Act 185) Makes a variety of changes to the state retirement system, including an incentive for early retirement, and a new requirement for employees to contribute 3% of salary into a retirement health account through FY 2013. Introduced as Senate Bill 1226, sponsored by Sen. Mark Jansen. Effective 9/30/2010.

COMMUNITY HEALTH BUDGET (Public Act 187) Appropriates state and federal funds for a wide variety of health-related programs, including the MI Choice Waiver and services funded through the Office of Services to the Aging (OSA) for the 2011 fiscal year beginning October 1, 2010. Includes a \$30 million increase in MI Choice for nursing home transitions and a \$2.3 million cut in OSA services including meals-on-wheels, care management, in-home care, adult day care, volunteer programs, etc. Introduced as Senate Bill 1152, sponsored by Sen. Roger Kahn, M.D. Effective 10/1/2010.

DOMESTIC VIOLENCE (Public Act 199) Requires landlords to release tenants from rent obligations if the tenant is in danger from a spouse, partner or stalker and needs to relocate. Introduced as Senate Bill 185, sponsored by Sen. Valde Garcia. Effective 10/5/2010.

SAVE THE DATE

**OLDER MICHIGANIANS DAY
JUNE 15, 2011
EAST LAWN, STATE CAPITOL
www.oldermichiganiansday.com**

HELP FOR PAYING HEATING BILLS AVAILABLE!

If you think you might have trouble paying your heating bills, call your utility company NOW – there are a lot of programs that can help, especially if you plan ahead.

Both homeowners and renters can apply for a tax credit to reimburse a portion of their heating bills. Residents of nursing homes, adult foster care homes and homes for the aged do not qualify. To be eligible, a person must be low-income, or receive public assistance/unemployment, and have high heating costs. Use Form MI-1040CR-7 available at www.michigan.gov/treasury after January 1st, or call (517) 636-4486. Forms can be submitted between January 1 and September 30, 2011 for 2010 bills.

DID YOU KNOW?

Legal Rights of Older Michigianians

- **HOSPITAL DISCHARGE:** If you are a hospital inpatient on Medicare and think you are being discharged too soon, you have the right to appeal the decision. Immediately ask hospital personnel for a notice that explains why they think you should leave. The “Notice of Non-Coverage” will explain how to appeal, but you need to appeal by noon on the first business day after you get it. You will be allowed to stay in the hospital until your appeal is processed. Appeals are heard by the Michigan Peer Review Organization at 1-800-365-5899.

- **ORIGINAL MEDICARE COVERAGE DENIAL:** If you are on original Medicare and it will not pay for care you received, you have the right to appeal the decision. First, ask your doctor to check that the billing codes were correct. Your next step is to appeal; appealing is easy and many people win. The Medicare Summary Notice you receive by mail will have instructions. Make sure you appeal within 120 days of receiving the Notice. If you have questions, call the Michigan MMAP program at 1-800-803-7174 or 1-800-MEDICARE.

- **MEDICARE ADVANTAGE COVERAGE DENIAL:** If you are on a private Medicare Advantage plan and the plan refuses to pay for care that you need but have not received, you have the right to appeal. Have your doctor call or send a fax to the plan asking for an “expedited reconsideration.” The plan is required to do an expedited review if your doctor requests it (but not if you request it). If your plan is refusing to pay for care you’ve already received, the plan must send you a written denial notice. The notice will explain how to appeal - you have 60 days from the date on the notice to appeal. For help call MMAP at 1-800-803-7174 or 1-800-MEDICARE.

- **MEDICARE DRUG PLAN COVERAGE DENIAL:** If your drug plan refuses to pay for a drug you need, you have the right to appeal. First make a written request to the plan asking them for an exception. Include with your request a letter from your doctor saying that you need the drug (it is medically necessary), other drugs haven’t worked as well, or other drugs are likely to be ineffective or harmful. If it’s an emergency, your doctor should ask for a fast decision. Call your plan to find out where to send or fax your written request and the doctor’s letter. For help call MMAP at 1-800-803-7174 or 1-800-MEDICARE.

- **LONG TERM CARE IN MOST INTEGRATED SETTING:** Individuals on Medicaid who need long term care services have the right to receive those services in the most “integrated setting,” in other words, in their own home if that’s what they prefer. People who are forced to enter a nursing facility to receive the services they need can file a complaint with the Office of Civil Rights (OCR) in the U.S. Dept. of Health & Human Services. There is also a state “diversion” program that can help. Call the AAAAM office for more information at (517) 886-1029, extension 14.