



Aging and Veteran Services Advisory Council

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The DAVS Aging and Veteran Services Advisory Council is seeking new members. Council members advise DAVS about how to best serve seniors, their families and caregivers, and veterans and their dependents. If you would like to be considered for this vital role, contact **Janet Long**, 503-615-4651 or Janet.A.Long@state.or.us.

In This Issue

- Physical Fitness for Older Adults 2
- Seasonal flu shot 2
- Gatekeeper Program 3
- Low-Income Seniors Get Help to Buy Farm Fresh Produce! 4
- Oregon Food Stamp Facts 4
- Caregiver Advisory 5-8
- Can Buying \$4 Prescription Drugs Help Me? 9
- Veterans View 10-11
- Are Plastic Containers Safe? 11
- Contesting a Will 12
- Calendar of Events 12

September is National Preparedness Month!

Emergency Preparedness for Seniors and People with Disabilities

Without much warning, emergencies and/or disasters can strike quickly and cause you to evacuate your neighborhood or confine you to your home. Local officials and relief workers can be on the scene soon after the disaster, but they will not be able to reach everyone right away.



This is why it is important to prepare a plan for your safety as you are best able to know your functional abilities and needs during and after an emergency or disaster situation. Knowing what to do is your best protection.

Identify your Support Network

Your network of people should include those people where you spend the most time. Include relatives, caregivers, neighbors, groups of friends, and/or congregation members. These people should be aware of your capabilities and needs, and be able to provide help within minutes. Be sure to include a minimum of three people in your network.

Make a Plan

- **Talk to your support network and communicate your plan** as well as all the information you have gathered and share it with them.
- **Choose an “Out-of-State” contact.** Following a disaster, family members should call this person to tell them where they are located and if they are OK. It has been found that after a disaster, long distance calls are easier to make than local calls where the disaster has originated.
- **Identify meeting places.** Choose a place right outside your home in case of a sudden emergency, like a fire. Also, make sure to choose a location outside your neighborhood in case you can't return home.
- **Make a Communications Plan.** This plan should include contact information for family and members of your support network. Include your out-of-state contact and the meeting locations you've selected. Make sure each family member has a copy of your plan and post it in plain view such as on your refrigerator or near your telephone.
- **Note your Evacuation Routes.** In a fire, you may need to evacuate on a moment's notice, so be ready to get out fast. In the event of an earthquake, if you are in a bed or sitting down, do not get up. If you are standing, drop, cover and hold on to protect yourself from falling debris.
- **Plan for your Pets.** If you must evacuate, take your pet(s) with you. In addition to your human disaster kit, prepare a disaster kit for your pet(s). Normally, pets are not allowed in emergency public shelters for health reasons (except for service animals), so it's recommended that you prepare a list of boarding facilities, veterinarians, and “pet-friendly” hotels that could shelter your pet in an emergency.

continued on page 3

Physical Fitness for Older Adults

(Edited from “Wellness by Design Compendium of Physical Activity Best Practices for Older Adults”, by HealthTrust, 2009; a tool offered under the Healthy Aging Initiative to help enhance physical activity programs for older adults)

Older adults are a varied group. Between the ages of 60-90, adults experience an average decline of 10 percent of physical functioning each decade. Every older adult has experienced some loss of function, but many have experienced only slight physical activity limitations due to aging. 41% of adults over age 65 with arthritis report difficulty walking short distances, climbing stairs, stooping, bending, kneeling, or attending social activities.

Active adults experience half the loss of physical functioning of inactive adults. Frail seniors ages 80 and up can progress from using a walker to using canes after doing simple muscle-building exercises.

Falls are the leading cause of injuries among older adults, and regular physical activity incorporating balance and strength building can significantly reduce falls and promote better function.

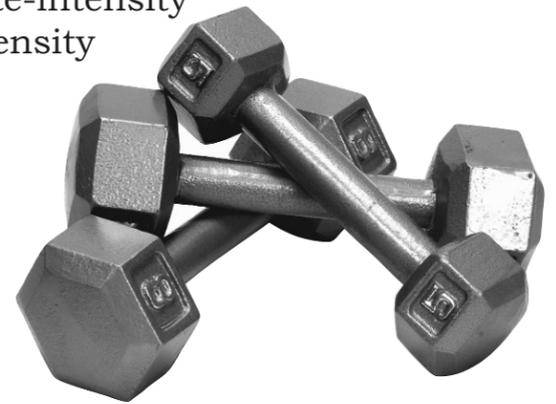
Guidelines for physical activity in older adults take baseline health and ability levels into account. The following recommendations are for physical exercise above and beyond the activities that are part of daily life.

Adults ages 18-64:

- 2 hours and 30 minutes a week of moderate-intensity, or 1 hour and 15 minutes a week of vigorous-intensity aerobic physical activity, or an equivalent combination of moderate-and-vigorous-intensity aerobic physical activity.
- Aerobic activity should be performed in episodes of at least 10 minutes, preferably spread throughout the week.
- Greater health benefits result from increasing to 5 hours a week of moderate-intensity aerobic physical activity, or 2 hours and 30 minutes a week of vigorous-intensity physical activity, or an equivalent combination of both.
- Muscle-strengthening activities that involve all major muscle groups performed on 2 or more days per week.

Adults aged 65 and older:

- Follow the adult guidelines. If this is not possible due to limiting chronic conditions, be as physically active as abilities allow.
- Avoid inactivity.
- Older adults should do exercises that maintain or improve balance if they are at risk of falling.



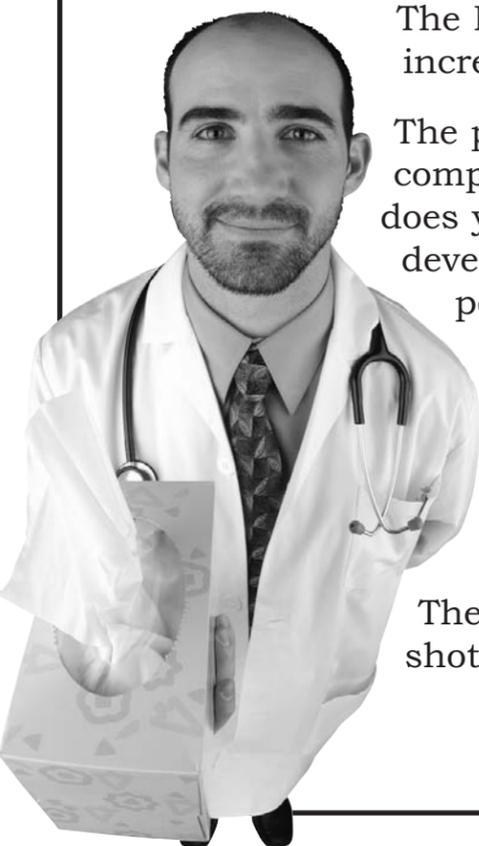
Seasonal flu shot still the most important for Seniors – H1N1 Flu (swine flu) Update

The H1N1 (swine) flu is still circulating and the number of cases is expected to increase this fall. Five U.S. pharmaceutical houses are making a vaccine against it.

The people who suffer most from H1N1 flu are young people. For a reason not completely understood, this new flu does not attack people over 65 as virulently as it does young people. With many years of experience with flu, people over 65 may have developed a kind of immunity that protects them from the H1N1 flu. That is why people over 65 are NOT high priority candidates to receive the H1N1 vaccine when it becomes available.

The regular seasonal flu that circulates each year is something seniors need to be careful about. Each year, more than 36,000 people die of the seasonal flu varieties. Typically, it infects those that are very young and the elderly. That is why people age 65 and older need to get their annual seasonal flu shots.

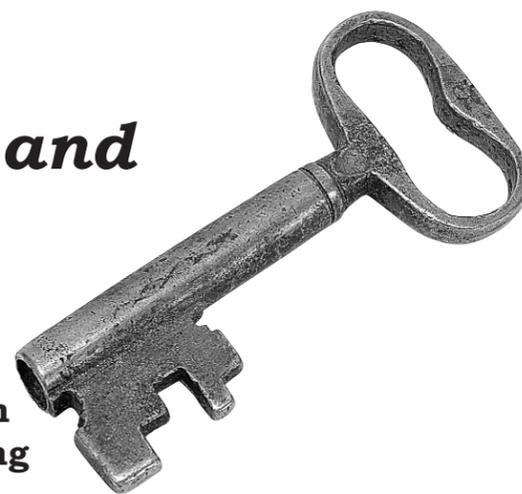
There are two types of flu shots this fall: Seasonal flu shots and H1N1 (swine) flu shots. People age 65 and older need the seasonal flu shot. Be sure to get yours.



APS/Elder Safe

Gatekeeper Program

Working to keep vulnerable Seniors and People with Disabilities safe in Washington County



The Gatekeeper Program is designed to assist vulnerable people who need help, but may be unable to get it for themselves. Each year, our vulnerable population grows. In fact, people over 65 make up the fastest-growing segment of our population. Most are healthy, active people involved with family and friends, church or community groups. But many others are not so fortunate. They live alone and have little contact with others. If they become ill or unable to function independently, they can easily go unnoticed and unattended.

The Gatekeeper Program seeks to remedy the problem by enlisting the help of people who, in the normal course of their jobs, may have contact with the elderly or those with disabilities. A Gatekeeper might be a supermarket clerk, bank teller, pharmacist, utility worker, customer service representative, mail carrier, or newspaper deliverer — the list is virtually endless.

These are the Gatekeepers who can help open the gates between vulnerable people and the social service agencies that can help them. All a Gatekeeper needs to do is to learn to recognize certain danger signals — a change in appearance or behavior, signs of confusion or disability. By making

a referral to **Washington County Disability, Aging & Veteran Services**

Division (DAVS) an elderly person or person with a disability may get connected with appropriate community services that can make it possible for them to receive assistance.

Washington County Disability, Aging & Veteran Services Division (DAVS) offers many programs, services and resources. Simply call **(503) 640-3489** and we will direct the referral to the appropriate office. That office will contact the individual, assess their needs, and assist in providing whatever help is required from the appropriate health or social service organizations. This may include medical care, food preparation or delivery, help with household chores, transportation, or other services.

For more information on the Gatekeeper Program, you may also visit our website at www.co.washington.or.us/HHS/DAVS and click on "Abuse and Adult Protective Services."

The Gatekeeper Program can, and has saved lives. At the very least, it gives older people and those with disabilities a new lease on life by enabling them to maintain their dignity and independence.

Emergency Preparedness continued from page 1

For questions about how to prepare or respond to an emergency, below are the emergency managers for Washington County.

Washington County Emergency Management – Steve Muir (503) 642-1194

City of Beaverton – Mike Mumaw (503) 642-1183

City of Hillsboro – Sharon Kennedy (503) 681-6412

City of Tigard – Mike Lueck (503) 718-2593

Tualatin Valley Fire and Rescue – Jeff Rubin (503) 642-1199

Remember, Prepare Today for Emergencies Tomorrow! For more information and tips, check out www.take5tosurvive.com.

In our next issue, look for helpful ideas and tips of what to put in your Emergency Preparedness Kit!

Medicaid



Low-Income Seniors Get Help to Buy Farm Fresh Produce!

The Oregon Senior Farm Direct Nutrition Program gives help to buy fresh fruits and vegetables from local farmer's markets and farm stands.

To be eligible, seniors must have turned 60 by April 1, 2009, and receive Food Stamps or Medicaid, have a monthly income below \$1038 for an individual, and live in their own home or rental unit.

The program runs annually from June 1 through October 31. **Hurry! You must sign up before September 15th.** For more information on this program, contact your local Department of Human Services, Seniors and People with Disabilities Division.

Hillsboro SPD Offices (503) 640-3489
Beaverton SPD Offices (503) 627-0362
Tigard SPD Offices (503) 968-2312

Oregon Food Stamp Facts for Seniors 60+

Income Facts

- Monthly income includes any income you receive, such as wages, pensions, SSI, retirement, interest income, rental properties, etc.
- The food stamp office will DEDUCT some of your medical expenses when calculating eligibility, which may help you qualify.
- Maximum income: Household of one: \$1,670, Household of two: \$2,246 (Note: the income limits are raised each January)

Common myths about food stamps

- Using food stamps is charity – Fact: 51% of all American's will use food stamps at some time (USDA). Food assistance is no more charity than using social security – you pay into it and, when needed, reap the benefits.
- Using food stamps hurts the economy – Fact: Food stamps bring more than \$580 million federal food dollars into Oregon each year, supporting grocers and local agriculture. If every Oregonian who was eligible received food stamps, an additional \$100 million in federal dollars would enter our economy.
- Other people need them more than I do – Fact: The program expands and contracts with need. If you are eligible but don't get them, you are not "saving" them for someone else.
- If I own a car or home I won't qualify – Fact: For nearly all households, assets such as a home, car or savings account is NOT calculated when determining eligibility.
- It is embarrassing to use food stamps – Fact: The old "food stamps" no longer exist. Food dollars come on a debit card, which you can use at most grocery stores. You swipe it and then enter a PIN. And, if you are 65+ and live in Washington County, "cash out" can put money directly into your bank account.
- I know someone who applied and only got \$10 – Fact: the average benefit for a Washington County senior household is \$93 per month. Some people only get the minimum, which as of 2009 went up to \$16. However, qualifying for food stamps also brings you other types of assistance. For example, many seniors can automatically qualify for telephone assistance and Farmers' Market vouchers when they sign up for food stamps.

Information:

Call Oregon SafeNet at 1-800-SAFENET (723-3638) Monday-Friday 8AM to 8PM, for questions about getting and using food stamps and other resources.

Online:

Visit www.oregonhelps.org for a private, confidential self-screening tool.

If you are 60 + or disabled, contact Dept. of Human Services, SPD office:

Hillsboro

133 SE Second Ave
503-640-3489

Beaverton

4805 SW Griffith Dr.
503-627-0362

Tigard

11515 SW Durham Rd Suite E-5
503-968-2312

If you are under 60 years, contact:

1-800-723-3638 (SafeNet) for a list of local Self Sufficiency offices.



This information provided by the Oregon Hunger Task Force. Contact: Judith Auslander at 503-318-9343.

“Caring For You ...Caring For Others”

**Welcome to the
Family Caregiver
Advisory.**

If you're a caregiver – a family member, friend, or neighbor who helps care for an elderly individual or person with a disability who lives at home – this section is for you. Here, you'll find information about:

- finding supportive services in our community;
- caregiving resources;
- where to find help;
- ways to take care of others and yourself;
- joining a caregiver support group; and
- other useful resources and ideas.

Caregiving may be one of the most important roles you will undertake in your lifetime. It is typically not an easy role, nor is it one for which most of us are prepared. The DAVS Family Caregiver Program offers a variety of resources to help. For more information, call us at 503-615-4676.

In This Issue

- Talking to a Stroke Survivor 6
- Understanding Alzheimer's 6
- “Lighten Up” 6
- Free Family Caregiver Training 6
- In a World of Hurt 7
- Another Reason Not To Smoke 7
- Medications and New Symptoms 7
- Family Caregiver Conference 7
- Pain in Alzheimer's 8

Better Communication

Communication Is Not Just Speaking

As much as 90% of our communication is nonverbal. When the person in your care can no longer communicate with words, you can still tell him you care. The tone of your voice speaks volumes and a hug speaks more clearly than words. Music and dancing are also communication. People with Alzheimer's disease may be able to sing along with you, even though they can no longer speak. Dancing together can communicate your affection for each other.

If you think the person in your care has difficulty understanding written directions, say, “A lot of people have trouble reading and remembering these materials. How can I help you?”

Note:

At the doctor's office, remember that less than half of the information provided to people during each visit is retained.

Source: National Adult Literacy Survey (NALS)

Always treat the person with dignity and respect. Avoid talking down or talking to others as if he or she is not present.

- **Be aware of tone and body language.** Don't use the high-pitched voice that people sometimes use when speaking to children; lower your pitch.
- **Don't be intimidating** or stand over the person if he is sitting down. He may not understand your words, but he will respond to the tone of your voice or your posture.

Being Heard

Make sure the person has proper glasses or a hearing aid. A skilled audiologist can suggest listening devices for a confused person. Loss of hearing can make people seem slow or not interested, when, in fact, they simply can't hear what others are saying or may not have their hearing aid turned up. Rather than risk startling the person, it is best to say who you are as you approach.

To make sure you can be heard:

- **Approach the person from the front** and tell him who you are. Call the person by name.
- Stand, sit or squat so you are at **eye level** with the person.
- Make sure **your face is in the light**, so that your lips and facial expressions can be seen.
- **Use simple sentences.** For example, “Do you want to eat?”
- Ask **one question at a time.**
- **Don't interrupt the person** while he is talking.
- **Use body language** such as nodding or pointing and lots of facial expressions.
- **Speak in a normal tone** facing the person, and making eye contact. Do not shout.



Talking to a Stroke Survivor

People who have had a stroke can lose the ability to speak or to understand others. Often, however, their ability to think is the same as before the stroke. Encourage other modes of communication (writing, drawing, yes/no responses, choices, gestures, eye contact, facial expressions) in addition to speech.

- Get the person's attention by lightly touching an arm if it is acceptable to them.
- Speak slowly and simply. Don't use baby talk.
- Ask direct questions that only require a yes or no answer.
- Use pictures instead of words. Have a pencil and paper handy.
- Give the person time to respond.
- Let the person express frustration. Listen carefully. (This takes lots of practice.)

Understanding Alzheimer's

Learning how to communicate with someone with Alzheimer's can be challenging. These people have their own reality, so do not try to reason with them. The most important thing to remember is respond to their emotions—not to their behavior. By remaining calm, you calm them, too.

To improve your chances of being understood:

- **Reduce background noise.** (Loud noises can actually cause pain to someone with Alzheimer's.)
- **Establish eye contact.** If the person is standing, stand; if the person is sitting, sit or squat down.
- **Address the person by name** and remind her of your name.
- **Explain what you are going to do** before you do it using one-step commands. Point to the object you are discussing. For example, say, "Do you want your sweater?" not "Do you want this?"
- **Avoid expressions that may cause confusion.** Don't say, "Jump into bed." Instead, say, "Get into bed."

FREE FAMILY CAREGIVER TRAINING

For family members or other non-paid caregivers providing care in the home

Next Training:

Thursdays, October 1, 8, 15, 22 & 29
1:00 p.m. - 4:00 p.m.

No Worries In-Home Care
8285 SW Nimbus Avenue, Suite 150, Beaverton, OR

Training consists of five, 3-hour classes and will feature presentations by:

Melinda Reed, RN, No Worries In-Home Care
Matt McCann, McCann's Medical
Kirsten Stensland, J.D., Elder Law Attorney
Deborah Letourneau, MSW, WCDAYS
Glen Patrizio, MD, Providence Hospice
Mike Kimoto, Family Memorial Services

CALL TODAY TO REGISTER: 503-615-4676

Taking Care of Yourself

"Lighten Up" and Live Longer

In a recent study of postmenopausal women, researchers found that optimists had lower rates of death and chronic diseases than pessimists, as did women who were more trustful of people compared to hostile people.

Defining optimism as expecting good rather than bad things to happen, they found that optimistic women were 30% less likely to die from coronary heart disease than their pessimistic counterparts. These results were even more pronounced among the 8,000 black women in the study.

Researchers think that optimistic people tend to be healthier in general. They were less likely to be overweight, more likely to be physically active and less likely to smoke, according to a report in *Scientific American*. Optimists are more likely to stick to diets recommended by their doctors, and to seek medical advice and follow it. They have strong social relationships, which helps them manage stress, a risk factor for heart disease. **So looking at the bright side of things pays off!**

Source: University of Pittsburgh School of Medicine news release



Tip

Before starting a conversation, announce what you are going to talk about. For example, say, "John, let's talk about our trip to the doctor's office." When you change the subject, say so—for example, "John, now let's talk about lunch."

Recognizing Pain or a Worsening Condition

In a World of Hurt

Older adults tend to wait to report pain until the intensity is unmanageable. Don't assume that the person in your care doesn't have pain if he doesn't mention it. Ask periodically if anything hurts. Pay attention to the answer. Many elderly persons may simply say "It's just sore."

At times, it is difficult to pin down a specific physical cause for pain. But that does not lessen the suffering. Pain is an individual experience that is tied to both physical and mental states. Fatigue, depression, and anxiety make pain harder to tolerate. Even noise can contribute to pain. (Lying in bed does not lessen pain, although it may appear that the person is comfortable and relaxed.)

Types of Pain

Acute—short-term pain from illness or injury, which can be managed with prescribed narcotics and subsides when the injury heals

Chronic—pain that begins with an illness, is long term and is controlled with medications

Resource for You

American Chronic Pain Association (ACPA)
www.theacpa.org • 800-533-3231

The ACPA provides education to help people better manage their plan and live more satisfying, productive lives.

Washington County Family Caregiver Conference

Spotlighting Resources and Strategies for Taking Care of Yourself and Your Loved Ones

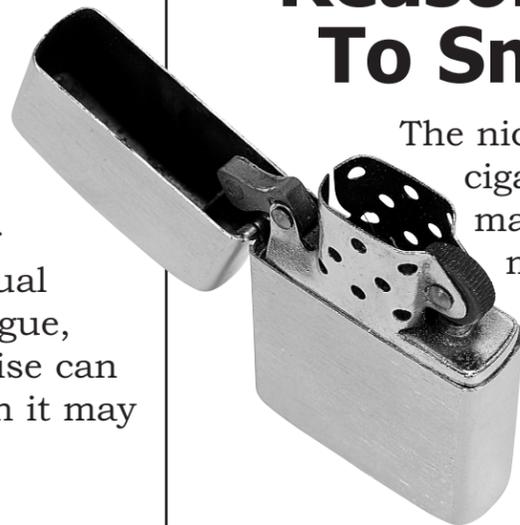
November is National Family Caregiver Month. An estimated 44.5 million American relatives take care of adults at home. In the U.S., unpaid family caregivers provide nearly 80 percent of the care to adults at home. There are approximately 420,000 family caregivers in Oregon.

On Friday, November 20, 2009, the Washington County Family Caregiver Support Program, along with Tuality Healthcare and the OSU Extension Service, will offer a FREE conference for family caregivers. The conference is held at the Tuality Education Center at 334 SW Eighth Avenue in Hillsboro from 9:00am to 2:00pm.

According to Deborah Letourneau, Family Caregiver Support Program Coordinator, the conference will feature an excellent offering of presentations and community resources of interest to family caregivers. "Our goals for this conference are helping caregivers prepare their homes to provide care, protect their health and finances, and find the help they need." Free lunch is provided.

While the conference is free, Letourneau recommends interested caregivers call 503-615-4676 for more information and to save their space.

Another Reason Not To Smoke



The nicotine in cigarettes can make some medicines less effective. Smokers also have more pain than nonsmokers.

Source: American Academy of Family Physicians, www.familydoctor.org

Medications and New Symptoms

It is also very important to let the doctor or nurse know if the person in your care has new symptoms after a new medication is started. The person in your care may not be able to tolerate the medicine or dose prescribed, so the doctor will need to make changes that allow the person in your care to tolerate the medication better.

If the person in your care is experiencing extreme difficulty, call an ambulance immediately. Some people with heart failure have a sudden change in their symptoms that requires immediate attention, like sudden onset of shortness of breath or a fainting spell. If you feel it is urgent, DO NOT WAIT for the doctor or nurse to get back to you, CALL 911 immediately.

Note

Although good nutrition will not relieve pain, it promotes healing by strengthening the body."

Pain in Alzheimer's

It can be difficult to figure out whether someone with dementia is in pain, and what is causing the pain. People with dementia may not be able to tell you in words that they are in or even where the pain is. Sometimes they can be in great pain, but unable to communicate this directly.

Signs of pain

- verbal cues—crying or moaning
- rubbing or protecting one part of the body
- facial expression, grimacing
- decreased activity level
- trouble sleeping
- a stiffened upper or lower body that is held rigidly and moved slowly
- increased agitation, aggressive behavior, pacing or rocking
- increased confusion
- Each person has his own pain signature. Because you know this person, you know what behavior is typical. You can recognize when a change in behavior occurs and perhaps when that change indicates pain.

Source: The Comfort of Home for Alzheimer's Disease

Changes to Report

If there is a change in the condition of the person in your care, the doctor should be contacted. Report exactly any unusual symptoms or changes in condition.

Fever may be caused by an infection and should always be reported. The doctor should be contacted right away if the following changes occur:

Ability to move

- falls, even if there is no pain
- leg pain when walking
- painful or limited movement or inability to move

Diet

- extreme thirst or lack of thirst
- weight loss for no reason
- loss of appetite
- pain before or after eating
- difficulty chewing or swallowing
- pain in the gums or teeth
- frequent gum infections

Behavior

- unusual tiredness or sleepiness
- seeing or hearing things that aren't there (hallucinations)
- sudden or increasing anxiety
- increased confusion
- depression (fatigue, sadness)
- inappropriate or unusual emotions for the individual (sadness, anger)



Bowel and bladder

- feeling faint during bowel movements
- vaginal discharge (report color, odor, amount)
- sores or pain in the penis area
- pain on bowel/bladder movements or unusual color, amount, or odor
- having to go to the toilet frequently
- frequent bladder infections
- blood in the urine
- pain in the kidney area

Skin

- changes in the color of lips, nails, fingers, and toes
- unusual appearance of surgery incisions
- skin rashes, bumps or itching
- pressure sores

Bones, muscles, and joints

- swelling in the arms and legs or around the eyes
- twitching or movement that cannot be controlled
- tingling or numbness in hands, feet, and other parts of the body
- redness, or warm, tender joints
- unusual positioning of arms, legs, fingers, or toes

Chest

- chest pain or rapid pulse
- breasts — lumps, discharge, or soreness
- painful breathing — wheezing, shortness of breath or unusual cough
- unusual saliva or mucus — report color and consistency

Abdomen

- stomach pain or vomiting

Head

- dizziness or headaches
- ear pain, discharge, or change in hearing
- eye pain, discharge, redness, blurry vision, or being bothered by light
- mouth sores
- nose pain, bleeding, mucus with bad odor

Inspiration

Courage is being scared to death—
and saddling up anyway.

~John Wayne

Can Buying \$4 Prescription Drugs Help Me Avoid the Coverage Gap?

written by Darlene McMacken, Certified SHIBA Volunteer

The answer is *sometimes*. Usually buying \$4 prescription drugs can postpone the coverage gap or “doughnut hole” rather than avoid it. In order to take advantage of purchasing \$4 prescription drugs, it helps to understand how the Medicare Prescription Drug Plan works. The example below demonstrates the minimum coverage a Drug Plan must provide. It shows the cost distribution on a generic drug during the Initial Coverage Period when most members pay a 25% co-payment.

Medicare Prescription Drug Plan

Actual Cost of Prescription Drug	Amount Drug Plan (Medicare) Pays	Your Cost or Co-Payment
\$17.50	\$13.13	\$4.37
<i>This amount counts toward the \$2,700 in drug costs that triggers the coverage gap. (2009 amount)</i>		<i>This amount counts toward the \$4,350 out-of-pocket expense that triggers catastrophic coverage. (2009 amount)</i>

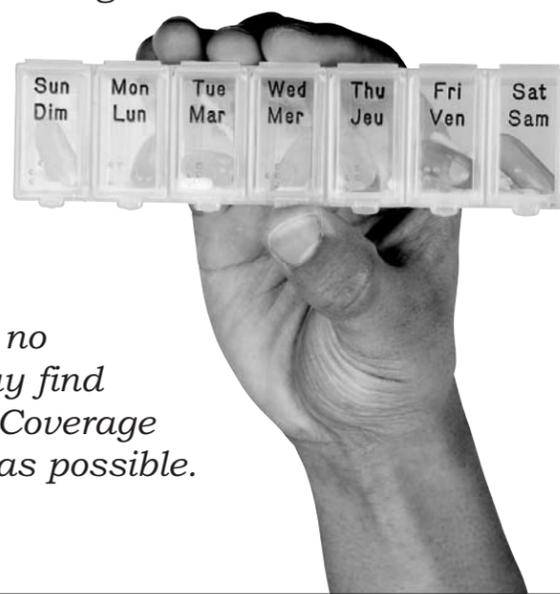
In order to postpone or avoid the coverage gap, you must reduce the Actual Cost of your prescription drugs recorded by your Prescription Drug Plan (\$17.50 in the above example). When you buy \$4 prescription drugs you are not using your Prescription Drug Plan so the \$17.50 does not get added to your Actual Drug Cost total.

It has been reported that some pharmacists and/or pharmacy assistants do not understand that the Actual Drug Cost of \$4 should not be reported to your Prescription Drug Plan. Each time you purchase a \$4 prescription drug it is important to check with your pharmacist or pharmacy assistant to be sure the Actual Drug Cost is not recorded with your Prescription Drug Plan.

When using the above example, it appears you are only saving 37¢ by purchasing a \$4 prescription drug. You are also, however, avoiding \$17.50 in Actual Drug Costs that would move you more rapidly toward the coverage gap. Whether you postpone or avoid the coverage gap is determined by the number of \$4 prescription drugs whose Actual Drug Cost isn't added to your \$2700 limit. It is also impacted by the Actual Cost of prescription drugs you do purchase through your Prescription Drug Plan. The Actual Cost of those drugs does get added to your \$2,700 limit.

Help is available if you want to determine whether \$4 prescription drugs can save you money. You can use the Doughnut Hole Calculator developed by AARP. The web address is <http://doughnuthole.aarp.org>. You can also ask for help from a SHIBA volunteer by calling 503-615-4696. SHIBA stands for Senior Health Insurance Benefits Assistance.

NOTE: A Medicare recipient who has very expensive drugs for which there is no effective alternative may find \$4 prescription drugs of little value. He/she may find his/her annual drug costs will be lower by moving quickly through the Initial Coverage Period and the coverage gap in order to reach Catastrophic coverage as soon as possible. Catastrophic coverage requires greatly reduced co-payments.



Medicare 101 Training

These informative classes cover the basics of Medicare. This class is for anyone getting ready to turn 65 or those who are already on Medicare and want to learn more. *(Note that these classes are in two parts.)*

October 14th and 21st from 5:30pm - 7:30pm

Elsie Stuhr Center – 5550 SW Hall Boulevard, Beaverton, OR 97005

"To register: call 503-439-9400 or on-line www.thprd.org/activities key word: *Medicare 101*

October 28th and November 4th from 6:00pm – 9:00pm

PCC Capital Center – 18624 NW Walker Road, Beaverton, OR 97005

To register: call 503-977-8888 or on-line www.pcc.edu/schedule key word: *Medicare 101*

Veterans View

Honoring Service, Honoring Sacrifice

Veterans Frequently Asked Questions:

At one time or another we have questions that we would like to get answered. But, where do we go for the answers?

Washington County Disability, Aging & Veteran Services is the source for questions and answers concerning Veterans, Veterans' benefits, services, and more.

Take a look at some of the recent Veteran questions our office has answered. If you have other questions not listed here, call us at 503-640-3489 and we will be happy to provide you with the most up-to-date information.

Recent Questions:

Q. I receive some VA Benefits, namely disability compensation for a knee problem. Is that money taxable, and must I report it on my 1040?

A. The short answer is, No. Do not include in your income any Veterans' benefits paid under any law, regulation, or administrative practice administered by the Department of Veteran Affairs (VA). The Veteran will not receive a 1099 or any other tax forms from the VA. See IRS publication 907 (Tax Highlights for Persons with Disabilities)

Q. I have heard that Veterans should not have our discharge, DD-214 recorded as it leads to identity theft. Yet we are told to get the DD-214 recorded and certified because it is needed to apply for benefits. What should I do?

A. Get it recorded. Also, get the two free certified copies. Then keep the original in a safe place, such as a safe deposit box. Use the certified copies when proof of service is needed.

Oregon has a new law that removes discharge documents, usually the DD-214, from the classification of "Public Records." Under most conditions, only the Veteran can get access to the record. If the Veteran is deceased, immediate family can request a copy. The request must be in writing.

Q. There is a new GI Bill, part of the name is Post 9/11. How can I apply?

A. The bill is called The Post 9/11 Veterans Education Assistance Act of 2008. The provisions of this bill went into effect on August 1, 2009. There will be no payments for training before this date. The VA is accepting applications for assistance under this bill. Information is available at www.gibill.va.gov. Call our office at 503-640-3489 for additional information.

Q. If I sign up for the VA Health Care Program, must I drop my other health plan? Also, what is the amount I have to pay for this insurance?

A. The VA Health Care program is not insurance. It is a program that provides health care. As such, you do not need to drop any other programs, it runs parallel to other coverage you have. Access is income-based, there may be co-payments for certain services, but there is no premium to pay as with insurance programs.

Q. I heard that VA payments can not be garnished, is that correct? A credit agency is threatening my brother who receives a VA Pension.

A. VA Compensation payments are exempt from claims of creditors. With certain exceptions, the payments are not assignable and are not subject to attachment, levy or seizure except as to claims of the United States.

Yes, that means if you owe the US Government money, they can, and they do, garnish your VA payments.





Social Security Benefits for Wounded Warriors

Military service members can receive expedited

processing of disability claims from Social Security. Benefits available through Social Security are different than those from the Department of Veterans Affairs and require a separate application.

The expedited process is used for military service members who become disabled while on active military service on or after October 1, 2001, regardless of where the disability occurs.

For more information on this program, go to: <http://www.ssa.gov/woundedwarriors/>.

If you are a wounded warrior, or know of a wounded warrior, send them to the above web site for more information.

If you were wounded and need to apply for Veterans benefits, contact **Washington County Disability, Aging & Veteran Services at 503-640-3489.**

Oregon Ranked First in Veteran Pension Benefits (Taken from The Hillsboro Argus, Thursday, August 4, 2009)

WASHINGTON – The U.S. Department of Veterans Affairs has released its 2008 state rankings for benefits, and Oregon is ranked first in the nation in Veteran pension benefits and sixth in the nation for Veteran disability compensation benefits.

The VA rankings are based on the average monthly benefit amount for service-connected disability compensation and non-service connected pension.

Oregon's Veterans receive an average monthly pension payment of \$1,017. This is \$266 more than the national average. Additionally, Oregon Veterans receive an average of \$1,016 per month in service-connected disability compensation, or \$161 more than the national average.

"I am very proud of the work done by our county veterans service officers, our state veterans service officers and our national service officers in providing, excellent service to Oregon veterans," said Oregon Department of Veterans' Affairs Director Jim Willis.

"The partnership we have is obviously one of the best in the nation because we focus on our mission of serving veterans, their survivors and dependents." Oregon has consistently been ranked among the top 10 states providing veterans benefits. In 2007, Oregon ranked third in pension and sixth in compensation benefits.

To learn more about what veteran benefits you may be entitled to, contact **Washington County Disability, Aging & Veteran Services at 503-640-3489.**

Are Plastic Containers Safe?

Bisphenol A otherwise known as BPA is found in many types of hard plastic. It is used to make water cooler bottles, baby bottles, plastic coatings inside food cans, dental sealants, plastic utensils, CD's and medical devices. The question remains if it is safe.

Dozens of animal studies have raised questions about the safety of BPA. The effects on rats and mice have been associated with altered behavior as well as harm development of their brains and reproductive organs. But scientists aren't sure that the animal studies are valid as the human body may process and break down BPA differently. Scientists have found that small amounts of BPA can leach out of the plastic containers into foods and drinks.

Two of the most recent U.S. government reports come from the Food and Drug Administration (FDA) and the National Toxicology Program. Based on the available data, the report concluded that our exposure to BPA in foods is too low to affect our health. The FDA will continue research to rule out any possible health affects.

There are alternatives to help reduce your exposure.

- Don't microwave polycarbonate plastic food containers.
- Reduce the use of canned foods.
- Where possible, opt for glass, porcelain or stainless steel containers for hot food or liquids.

- Taken from News in Health November 2008 issue



Contesting a Will

You had a great relationship with your father, and in the event of his death he promised that he would leave everything to you. But after he died, you discovered that he had rewritten his will and left everything to the next door neighbor. What does it mean to contest a will? Contesting a will is a challenge to a will, usually initiated by a family member or a beneficiary who feels left out of the loved ones choice of property distribution. If you feel that the will is not valid, you can contest it; however proving a will invalid is difficult. A will can be contested in certain circumstances, and you must have evidence that there is something wrong.

Mental incapacity

You may contest the will if you believe that your loved one did not have the mental capability to write the will. The best way to prove this is to have a written statement from a doctor who examined your loved one close to the time that the will was actually written. You can also use medical records and witnesses.

Fraud

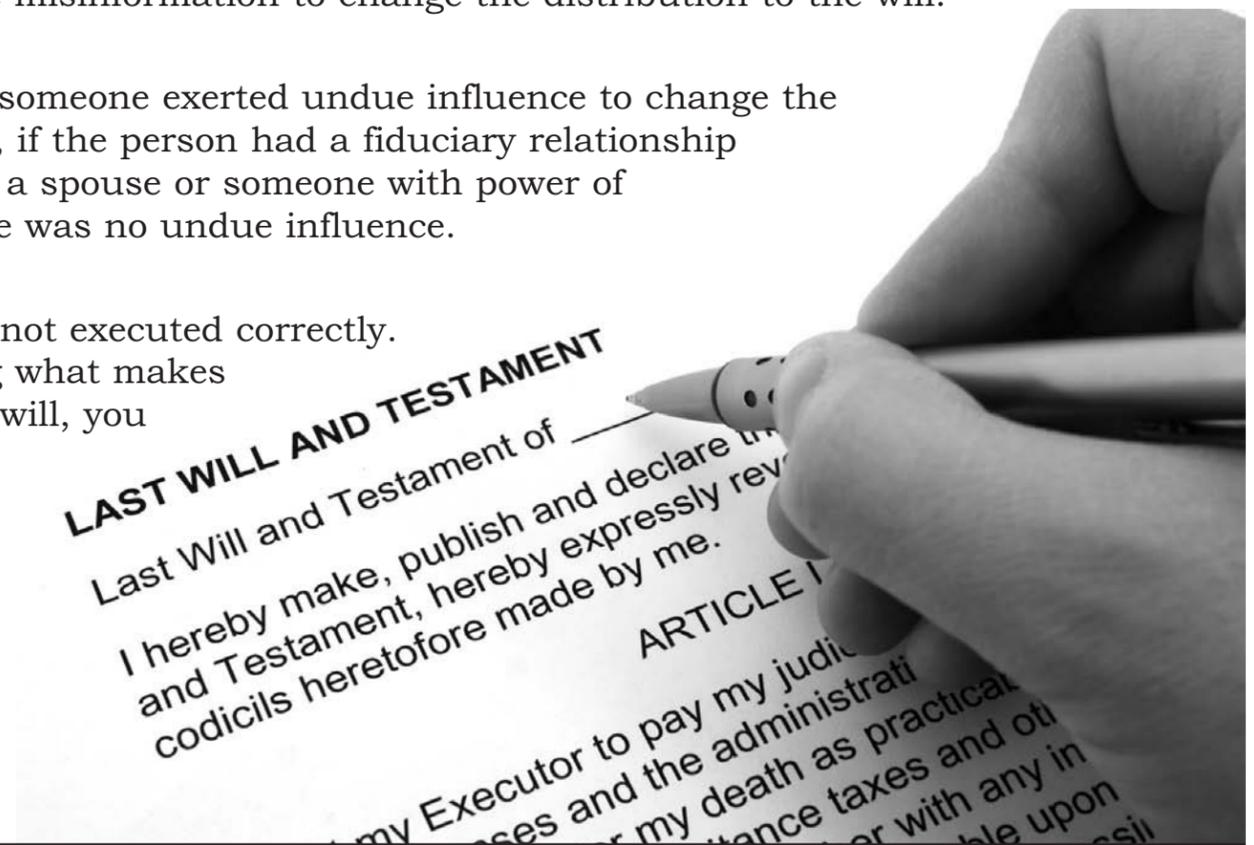
You can argue that your loved one was fraudulently persuaded into signing his or her will as another way to contest a will. Fraud can occur if your loved one signed a will without realizing it was a will. It can also occur if someone gave your loved one misinformation to change the distribution to the will.

Undue influence

You may contest a will if you believe someone exerted undue influence to change the distribution under the will. However, if the person had a fiduciary relationship with your loved one, such as a child, a spouse or someone with power of attorney, they will have to prove there was no undue influence.

Invalid will

Lastly, a will may be invalid if it was not executed correctly. Each state has its own laws dictating what makes a will valid. If you want to contest a will, you should contact a lawyer immediately as you will need to file a claim to the court.



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Calendar of Events

Aging and Veteran Services Advisory Council
Thursday, September 24th , 9:00 a.m. – Noon
Washington County Disability, Aging and Veteran Services
133 SE Second Ave., Hillsboro

Thursday, October 22nd , 9:00 a.m. – Noon
Washington County Disability, Aging and Veteran Services
133 SE Second Ave., Hillsboro

Council on Aging, Inc.
Monday, September 14th , 1:00pm
Sherwood Senior Center
21907 SW Sherwood Blvd., Sherwood

Monday, October 12th , 1:00pm
North Plains Senior Center
31450 NW Commercial Street, North Plains

The Advisory Rebecca Tabra

To receive a copy of *The Advisory* call 503-615-4646 (TTY: 503-640-3489)
or view *The Advisory* on the Web at
www.co.washington.or.us/News/Newsletters/theadvisory.cfm