



© RI ARA 2015  
All Rights Reserved

# RI ARA

Affiliated with the Rhode Island AFL-CIO  
"Fighting *for* the future of our members,  
*NOW*, more than ever"!!!!



Publication 2015 / Issue 32  
Published in house by the  
RI ARA

## August 10, 2015 E-Newsletter

**Come Help The RI ARA Celebrate two great events August 14, 2015**

### YOU ARE INVITED!!!!!!

**The RI ARA will Celebrate two great events,  
Social Security's 80th Birthday**

**The Social Security Act was signed into law  
on August 14, 1935 by President Roosevelt**

**Medicare & Medicaid's 50th Birthday**

**The Medicare & Medicaid programs were  
signed into law on July 30, 1965**

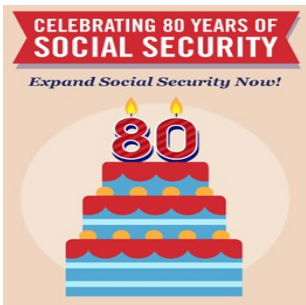
**By President Lyndon B. Johnson**

**At the Johnston Senior Center**

**1291 Hartford Avenue**

**Johnston, RI 02919**

**11:30 am to 12:30 pm**



**Come help us celebrate these historic events with  
Members of the Rhode Island Congressional Delegation**

**RI Department of Elderly Affairs Director**

***Charles Fogarty***

**Social Security Administration**

**Metropolitan Public Affairs Specialist**

***Catherine LeBlanc***

**RI AFL-CIO President**

***George Nee***

**Johnston RI Mayor**

***Joseph Polisena***

**We will serve Coffee & Birthday Cake**

**50 free Birthday event t-shirts**

**Door Prizes: 10 / \$10 CVS Gift Cards**



## Social Security, Medicare and Medicaid Work for Rhode Island 2015

Our *Social Security, Medicare and Medicaid Work for America* series of reports is written for public officials, members of the press, advocates and other concerned citizens. In addition to providing information about each program's history, character and vitality, as well as relating compelling, real-life stories, every report includes statistics about the number of people who receive benefits, the types of benefits they receive, and the total amount of funds flowing from these programs into each state, including its congressional districts and counties. Reports are available online for all 50 states, Washington D.C., Puerto Rico, American Samoa, Guam, the Northern Mariana Islands and the U.S. Virgin Islands.

For press inquiries, please contact Lacy Crawford at [lcrawford@socialsecurityworks.org](mailto:lcrawford@socialsecurityworks.org)

[Click Here To View The 114th Congress Social Security Bill Fact Sheet](#)

[Click Here To Find Out How Social Security Works for Your State](#)

[Click Here To See How Social Security, Medicare and Medicaid Work for Rhode Island](#)

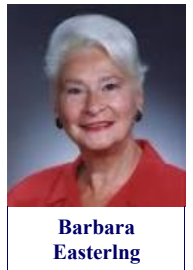


## GOP Candidates Attack Social Security, Medicare at Primary Debate

Last night, the Republican Party held its first primetime primary debate in Cleveland, Ohio. Participants in the evening event included current and former Governors **Jeb Bush, Chris Christie, Mike Huckabee, John Kasich, and Scott Walker**; Senators **Ted Cruz, Rand Paul and Marco Rubio**; pediatric neurosurgeon **Ben Carson**; and business mogul **Donald Trump**. An event earlier in the day featured candidates who did not make the top ten in national polls.

The nighttime debate featured a heated exchange between Governors Christie and Huckabee on how to best "reform" Social Security. Governor Christie said he was in favor of raising the retirement age for Social Security, which would reduce benefits for millions of older Americans. Prior statements from Jeb Bush suggest that he is in favor of "phasing-out" Medicare, while Scott Walker also hinted yesterday that Social Security was "ready for reform."

"These GOP attacks on Social Security and Medicare need to stop," said Alliance President **Barbara Easterling**. "It is clear from their statements yesterday, and previously, that none of the candidates at this debate stand for retirement security for all Americans."



Barbara  
Easterling

## New Medicaid initiative improves access to substance use disorder treatment

*Byline: Vikki Wachino*



The Medicaid program plays an important role in providing access to treatment for individuals with a substance use disorder (SUD). Nearly 21 million Americans suffer from SUD, many of whom are low-income or uninsured. It is estimated that 12 percent of all Medicaid beneficiaries ages 18-64 and 15 percent of uninsured individuals who could be eligible for Medicaid coverage have SUD. Medicaid pays one out of every five dollars for SUD treatment.

As states identify new ways to promote stronger systems of care that improve access to affordable quality health care, strengthening approaches to SUD services is a major area of focus. Many states are seeking to reform SUD treatment services in a way that meets the needs of individuals as well as the capacity for treatment in their states.

The Centers for Medicare & Medicaid Services (CMS) is working with states to develop system reforms that improve care, enhance treatment, and offer recovery supports for individuals with SUD. For the past year, CMS has worked with states through our new [Medicaid Innovation Accelerator Program](#) to provide program support for states to pursue innovations that reduce costs and improve health outcomes for beneficiaries with SUD. We have also been in active dialogue with states on ways to combat the opioid and heroin epidemic that is ravaging many rural and urban communities alike...[Read More](#)

## Cure for Alzheimer's not top research need for dementia patients

**National Alzheimer's Project Act has it wrong; caregivers, patients want help with improving care**



There has been a lot of cheering across the U.S. about the large amounts of money being spent on research seeking a cure for Alzheimer's disease. Dementia patients and their caregivers, however, would like to see more of this money spent improving long-term care.

A study led by University at Buffalo researcher Davina Porock surveyed people with dementia and their care providers on how funding from the National Alzheimer's Project Act (NAPA), a federal plan to overcome the disease, should be spent.

It revealed that the majority of respondents ranked caregiving support and resources for long-term care ahead of research for a cure of Alzheimer's disease. More than \$100 million in federal funding was spent last year toward searching for this cure.

The findings are in contrast to current NAPA spending to support those with Alzheimer's disease, which dedicated only \$10 million to care services and education, according to the Department of Health and Human Services.

With more than 5 million people in the U.S. living with dementia, each person receives less than \$2 for care support, says Porock.

"Sure, most people in our surveys would love for there to be a cure, but in the meantime they all have this disease and they need help," says Porock, PhD, professor in the UB School of Nursing.

"We have 10 times more money going toward research instead of supporting the people who are living with dementia. Research is still high on the agenda, but they think that support is more important."

The study, "National Priorities for Dementia Care: Perspectives of Persons Living with Dementia and their Care Partners," was published in the *Journal of Gerontological Nursing*.

The nationwide survey recorded nearly 700 responses, drawing participants from more than 25 Alzheimer's disease advocacy and patient-support groups. Participants were asked to rank funding priorities based on 11 themes that included care setting, quality of life, and advocacy and awareness...[Read More](#)

## Is longevity linked to intelligence – shorter life may surprise many

**First research to seek answer confirms some smart people live longer but it's mostly genetic**

We probably know a lot of people who are going to die a lot earlier than they think, if new research is accurate. There is a recognized tendency for more intelligent people to live longer, but it may not be because they are smarter.

This tendency of more intelligent people to live longer has been shown, for the first time, to be mainly down to their genes. The new research is published in the *International Journal of Epidemiology*.

By analyzing data from twins, researchers found that 95 per cent of the link between intelligence and lifespan is genetic.

They found that, within twin pairs, the brighter twin tends to live longer than the less bright twin and this was much more pronounced in fraternal (non identical) twins than in identical twins.

Studies that compare genetically identical twins with fraternal twins – who only share half of their twin's DNA – help distinguish the effects of genes from the effects of shared environmental factors such as housing, schooling and childhood nutrition.

Rosalind Arden, a research associate at the London School of Economics and Political Science (LSE), said, "We know that children who score higher in IQ-type tests are prone to living longer. Also, people at the top of an employment hierarchy, such as senior civil servants, tend to be long-lived. But, in both cases, we have not understood why.

"Our research shows that the link between intelligence and longer life is mostly genetic. So, to the extent that being smarter plays a role in doing a top job, the association between top jobs and longer lifespans is more a result of genes than having a big desk...[Read More](#)

**'The association between intelligence and lifespan is mostly genetic'** was authored by Rosalind Arden, Michelle Luciano, Ian J Deary, Chandra A Reynolds, Nancy L Pedersen, Brenda L Plassman, Matt McGue, Kaare Christensen and Peter M Visscher.



## Social action needed to maintain gains in reducing deaths from heart disease, stroke

American Heart Association cites need to address problems with education, income and racial divide



Deaths from heart attacks, strokes and other heart diseases have been declining, but social factors, including race, income, environment and education could reverse that trend according to a first of its kind scientific statement from the American Heart Association.

Advances in prevention and treatment have driven the decline in cardiovascular deaths, but the benefits have not been shared equally across economic, racial, and ethnic groups in the United States, according to the statement, published in the association's journal *Circulation*.

"The steady decline of death from cardiovascular disease that began in the 1970s might be coming to an end. Overall population health cannot improve if parts of the population do not benefit from improvements in prevention and treatment," said Edward P. Havranek, M.D., chair of the writing group and a cardiologist at Denver Health Medical Center and professor of cardiology at the University of Colorado School of Medicine, Denver, Colorado...[Read More](#)

## Telephone Therapy Helps Older People In Underserved Rural Areas, Study Finds

By [Lisa Gillespie](#)

Therapy provided over the phone lowered symptoms of anxiety and depression among older adults in rural areas with a lack of mental health services, a new study shows.

The option is important, one expert said, because seniors often have increased need for treatment as they cope with the effects of disease and the emotional tolls of aging and loss.

"Almost all older adults have one chronic medical condition, and most of these have been found to be significantly associated with anxiety disorder," Eric Lenze, a psychiatrist and professor at the Washington University School of Medicine in St. Louis, said in an interview.

**The study**, by researchers at Wake Forest University and published Wednesday in *JAMA Psychiatry*, examined 141 people over the age of 60 living in rural counties in North Carolina who were experiencing excessive and uncontrollable worry that is brought on by a condition called generalized anxiety disorder.

The participants had up to 11 phone sessions between January 2011 and October, 2013. Half of them received cognitive behavioral therapy, which focused on the recognition of anxiety symptoms, relaxation techniques, problem solving and other coping techniques. The other study participants got a less intensive phone therapy in which mental health professionals provided support for participants to discuss their feelings but offered no suggestions for coping.

The researchers found that severity of the patients' worries declined in both groups, but the patients getting cognitive therapy had a significantly higher reduction of symptoms from generalized anxiety disorder and depressive symptoms.

[Read More](#)



The New England ARA state affiliates are actively pursuing these Petitions.

**Petition Subject: Observation Status: "Current Hospital Issues in the Medicare Program"**

ADD  
YOUR  
NAME

**Get The Message Out:  
SIGN THE PETITION!!!!**

**Petition Subject: House Concurrent Resolution 37 and Senate Concurrent Resolution 12 to get power doors installed in Post Offices and other federal buildings.**

ADD  
YOUR  
NAME

**Get The Message Out:  
SIGN THE PETITION!!!!**

**Petition Subject: Elimination of the Unfair GPO and WEP Provisions of the Social Security Act to make sure the Congress of the United States enacts legislation, HR.973 & S.1651**

ADD  
YOUR  
NAME

**Get The Message Out:  
SIGN THE PETITION!!!!**