



Poverty wages are a Losing Bet at Twin River Casino

Let's Help Our Brothers At Twin River Casino

If Twin River Casino Can Do This To The Valets, Who Will Be Next?????

Poverty wages are a Losing Bet at Twin River Casino

To be delivered to Craig Sculos, General Manager, Twin River Casino

PETITION STATEMENT

Poverty wages are a guaranteed loss for our community. No one can live on \$2.89/hour. The Twin River Casino should pay its parking valets a fair wage and provide affordable healthcare coverage for their families. In a matter of a few days, 5000 people signed the Petition.

Update: August 12, 2014 From IBT Local 251

Backed by overwhelming public support, Twin River Casino valets sat down with management today and won major wage increases, affordable family healthcare for every valet and other improvements. This tentative agreement will be voted on by all the valets. In the meantime, a big **THANK YOU** for standing up for Rhode Island working families.

Dear Active Labor, Retiree & Community Based Leaders

In 2002, the national AFL-CIO created a new organization called the Alliance for Retired Americans (ARA). This organization is the outgrowth of the National Council of Senior Citizens. This article is to inform you of our local organization, the Rhode Island Alliance *for* Retired Americans, (aka, RI ARA).

The mission of the RI ARA is to ensure social and economic justice and full civil rights for all citizens so that they may enjoy lives of dignity, personal and family fulfillment and security. The Alliance believes that all older and retired persons have a responsibility to strive to create a society that incorporates these goals and rights and that retirement provides them with opportunities to pursue new and expanded activities with their unions, civic organizations and their communities.

A primary objective of the RI ARA is to enroll and mobilize retired union members and other senior and community activists into a nationwide grassroots movement advocating a progressive political and social agenda-one that respects work and strengthens families. The long-term goal of the Alliance is to become the voice for all older Americans. By engaging in important political battles to protect and preserve programs vital to the health and economic security of older Americans, the Alliance will gain recognition as the country's leading progressive grassroots senior organization.

In pursuit of these values, the Rhode Island Alliance *for* Retired Americans will:

- ◆ **Build a strong organization of seniors with a viable structure, ample resources and clear objectives.**
- ◆ **Create programs designed to promote a commitment by retired workers and older persons.**
- ◆ **Encourage all segments of the senior population to act with unity on legislative, political and policy issues.**

The RI ARA HealthLink Wellness Mission.....

- ◆ **Education, Health Care Programs, Partnerships.**
- ◆ **The outreach for this program should lead to networking with existing senior citizen centers, labor and community based organizations throughout Rhode Island.**

The Rhode Island Alliance *for* Retired Americans & the RI AFL-CIO is reaching out to all labor organizations along with community based organizations to participate in this unique organization to promote the wellbeing of all Rhode Island seniors. **Contact John A. Pernorio at riarajap@hotmail.com for more information.**

Medicare Advantage Plans Exaggerate Diseases of Senior Citizens to Make More Money

Suspect billing practices have been common across much of the Medicare Advantage industry and are likely to get worse unless officials crack down

By Fred Schulte, [The Center for Public Integrity](#)



Many Medicare Advantage health plans routinely overbill the government for treating elderly patients - and have done it for years, a federal study shows.

Department of Health and Human Services researchers found that many plans exaggerate how sick their patients are and how much they cost to treat. Medicare expects to pay the privately run plans — an alternative to traditional Medicare — \$160 billion this year.

The HHS [study](#) does not accuse any specific insurers of wrongdoing or name the plans that were scrutinized. But the researchers offer the most comprehensive evidence to date that suspect billing practices have been common across much of the Medicare Advantage industry and are likely to get worse unless officials crack down.

“Further policy changes will likely be necessary,” the study concludes.

Congress created Medicare Advantage in 2003 to encourage private insurance companies to venture into the senior care market. The plans now insure 16 million elderly and disabled people, nearly a third of those eligible for Medicare. They are popular with seniors because they often provide extra benefits, such as eyeglasses and dental care, and can cost less out-of-pocket than standard Medicare...[Read More](#)

Medicare Spending Cuts Also Reducing Healthcare Spending for Younger People

Medicare by far the largest payer of hospital bills in U.S., accounting for about 30% of total hospital revenues

The increased efforts by Medicare to reduce costs and improve the medical care for senior citizens and the disabled, mandated by prices under the Obamacare, appears to be reducing the total overall hospital spending. Even younger patients and insurance companies are gaining the benefits.

“Our findings indicate that when Medicare tightly reins in its inpatient hospital prices, hospitals scale back overall capacity, resulting in less hospital use by nonelderly patients, not just elderly patients,” said Chapin White, Ph.D., lead author and senior policy researcher with RAND Corporation.

His recent study in *Health Services Research* is based on 15 years of hospital data and shows that cuts in Medicare prices under the Affordable Care Act may slow the growth in total overall hospital spending.

White added that this kind of “spillover effect” is important as it exemplifies the way that changes in Medicare prices can affect the health system broadly. Medicare is by far the largest payer of hospital bills in the U.S., accounting for around 30 percent of total hospital revenues....[Read More](#)



Medicare Rule on Hospital Pay Wants Charges Public, Emphasis on Better Care

Rule updates Medicare payment policies and rates for inpatient stays at general acute care, long-term care hospitals



A final rule that updates Medicare payment policies and rates for inpatient stays at general acute and long-term care hospitals (LTCHs) for FY 2015 was issued today. The provision that will grab the attention of seniors supports price transparency by emphasizing the Obamacare requirement that hospitals most make their charges available to patients and the public. Hospital administrators may pay more attention, however, to mandated improvements in the quality of care that limit payment for hospital acquired conditions (HACs) and readmissions.

The rule, which updates Medicare payment policies and rates for inpatient stays at general acute care and long-term care hospitals (LTCHs) for fiscal year (FY) 2015, builds on the administration’s efforts for better hospital patient outcomes and slowing the long-term health care cost growth, according to the announcement by the Centers for Medicare & Medicaid Services (CMS)...[Read More](#)



Rhode Island Alliance *for* Retired Americans



Save the Date, August 29, 2014

**The RI ARA will Celebrate
two great events,**



Social Security's 79th Birthday

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

Medicare & Medicaid's 49th Birthday

**The Medicare & Medicaid programs were
signed into law on July 30, 1965
By President Lyndon B. Johnson**

**At the Salvatore Mancini Recourse &
Activity Center**

**2 Atlantic Blvd., North Providence, RI
11:00 am to 12:00 noon**

**Come help us celebrate these historic events with:
Alliance *for* Retired Americans Executive Director,
*Rich Fiesta***

**RI Senators: *Jack Reed & Sheldon Whitehouse*
RI Congressmen: *Jim Langevin & David Cicilline***

We will serve Coffee & Birthday Cake

**There will be 10 Door Prizes
Of \$10 CVS Gift Cards**



Senior Citizens Should Schedule Mentally Challenging Tasks in the Morning

Older adults have ‘morning brains’ finds study showing noticeable difference in brain function across the day



Senior citizens facing a challenge that will require their brain to be working at its best should schedule it for the morning hours. A new study finds older adults have “morning brains.” They not only perform better on demanding cognitive tasks but also activate the same brain networks responsible for paying attention and suppressing distraction as younger adults, according to Canadian researchers.

The study, published online ahead of print publication in the journal *Psychology and Aging*, may have yielded some of the strongest evidence yet that there are noticeable differences in brain function across the day for older adults...[Read More](#)

Obese Senior Citizens More Likely to Survive Deadly Sepsis Infection

Study suggest that excess weight may cause the body to respond differently to critical illness

It is not often we see good health news for fat senior citizens. The University of Michigan Health System claims, however, that obese senior citizens in Medicare were more likely to survive life-threatening sepsis infection than other patients.

In a study of 1,404 Medicare beneficiaries, heavier patients were more likely to survive the life-threatening infection that can lead to a stay in a hospital’s intensive care unit.

The findings, published in the August issue of *Critical Care Medicine*, raise interesting questions about how obesity impacts the body’s response to infection.

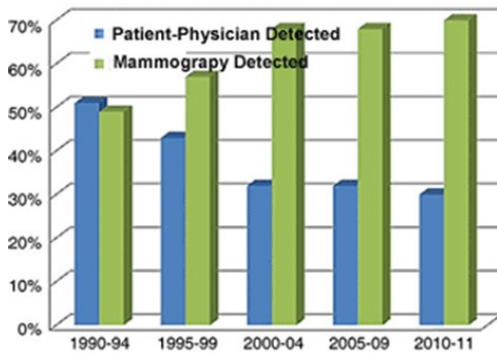
Obesity is most often connected with worse, not better, health outcomes.

“Physicians expect obese patients to do poorly and this belief can affect the care and counseling they provide to patients and their families,” says lead author Hallie C. Prescott, M.D., a pulmonary and critical care medicine clinical lecturer at the U-M Health System...[Read More](#)



Women Age 75 and Older Should Stay with Mammography Says New Study

‘There are no studies on women age 75 and older, despite the fact that they are at the highest risk for breast cancer’



This bar graph shows the change in detection method over time (1990-2011) for breast cancer cases in patients aged 75 years and older. Blue represents cases detected by patients or physicians. Green represents cases detected by mammography.

Radiological Society of North America

There is new evidence that supports the argument for senior women – ages 75 and older – to continue in mammography screening. The research says mammography leads to earlier stage cancer diagnosis in older women, which reduces the rate of more advanced, difficult-to-treat cases.

The new study is published online in the journal *Radiology*. Researchers said the findings lend support to regular mammography screening in women ages 75 and older.

The value of mammography screening in older women has been subject to much debate in recent years. The American Cancer Society recommends annual mammograms for women age 75 and older as long as they are in good health, while the U.S. Preventive Services Task Force (USPSTF) does not recommend mammography screening in this age group, citing insufficient evidence to evaluate benefits and harms.

A lack of research is chiefly responsible for the divergent recommendations, according to Judith A. Malmgren, Ph.D., affiliate assistant professor at the University of Washington's School of Public Health and Community Medicine in Seattle.

"There are no studies on women age 75 and older, despite the fact that they are at the highest risk for breast cancer," she said.

Dr. Malmgren and her research partner, Henry Kaplan, M.D., from the Swedish Cancer Institute in Seattle, recently looked at the impact of mammography detection on older women by studying data from an institutional registry that includes more than 14,000 breast cancer cases with 1,600 patients over age 75....[Read More](#)

Link Between Frailty and Dementia Gets Closer Look by New York Researchers

‘Growing consensus in the field that frailty is at the core of geriatrics, and that frailty is associated with higher rates of cognitive deficit’

Ellen Goldbaum Senior Editor, Medicine, UB News



What is the relationship between frailty and dementia? Many studies acknowledge that frailty and dementia often coexist, but little research has been done on why that is the case.

Bruce R. Troen, MD, professor of medicine and chief of the Division of Geriatrics and Palliative Medicine at the University at Buffalo School of Medicine and Biomedical Sciences, is working with colleagues at the other State University of New York medical schools to change that.

Troen is a co-investigator on the SUNY Network Aging Partnership (SNAP): Investigating Frailty and Enhancing Lifespan Across the Health Spectrum. Sharon A. Brangman, MD, professor of medicine and division chief, Geriatric Medicine, at SUNY Upstate Medical University, is lead investigator. . . . [Read More](#)

Lung Cancer Diagnosis Tool Found Safe, Effective for Senior Citizens

Correct assessment of the stage of a patient's cancer –

how much tumor has grown and spread – is key to ensuring they receive the right treatment

Half of all lung cancer patients are over 70 years old when first diagnosed, but studies have shown that these older patients are less likely to receive an accurate diagnosis. A recent study has found that a procedure to take tissue samples from these patients can be used safely in the elderly - allowing doctors to make a more accurate diagnosis and to choose appropriate treatment.

A correct assessment of the stage of a patient's disease – how much their tumor has grown and spread – is key to ensuring they receive the right treatment.

Non-invasive methods of checking whether a patient's cancer has spread to their lymph nodes have limited sensitivity and until recently the only way to obtain a tissue sample was under general anesthetic – limiting its use in elderly patients who often present with other conditions that may restrict the use of general anesthesia. . . . [Read More](#)



Spanish Friday Alert now Available

The *Friday Alert* will now be available each week in Spanish! To see last week's *Alerta Semanal*, go to <http://tinyurl.com/mq7gpry>. For the Alliance's Spanish language page, which includes fact sheets and other translated documents from the main site, go to <http://tinyurl.com/nllcz6n>. More outreach from the Alliance to the Hispanic elder community will be coming in the next few months.

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

Petition Subject: Observation Stays: “Current Hospital Issues in the Medicare Program”

ADD
YOUR
NAME

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

Petition Subject: House Concurrent Resolution 67 and Senate Concurrent Resolution 26 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 3118 & S 896

ADD
YOUR
NAME

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