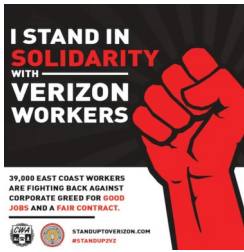




Why is this Verizon IBEW/CWA strike so important???

Steven Murphy: 450 Providence jobs are at risk, that's why.



Imagine if news broke that a major corporation was going to send 450 good-paying Rhode Island jobs overseas. This corporation also

happens to be one of the most profitable in the United States.

Our politicians would point fingers. Citizens would shake their heads about the outsourcing of America. More working people would be scrambling to find ways to support their loved ones.

That's a scenario we've seen too often in Rhode Island, but it's just what Verizon executives want to do. It's a big reason why the members of International Brotherhood of Electrical Workers Local 2323, which I proudly represent, are on strike against Verizon, along with nearly 39,000 other IBEW and Communications Workers of America members up and down the East Coast.

Verizon currently employs 450 of our members at its call center in Providence. They're good jobs. Our members work hard and earn enough to raise a family and give their children and others counting on them a better life.

They are the first voice the customer hears if he or she has a concern or

question. It's a highly technical job where employees often must diagnose and fix complex problems during the course of a call.

But Verizon is pushing us to accept a proposal that encourages the outsourcing of these jobs to one of its many overseas call centers in the Philippines, Costa Rica, Mexico, India and the Dominican Republic.

We also represent 400 wireline installation, repair technicians and clerical workers who are facing similar challenges. Verizon is proposing to send technicians hours away from their homes for work, where they could be assigned for up to two months or more.

There are three things to keep in mind when it comes to Verizon's spin.

First, we've already shown a willingness to compromise. We've agreed to millions of dollars of givebacks during current negotiations when it comes to health insurance, yet Verizon wants to add up to \$300 per month in health-care costs for 80,000 retirees living on a fixed income.

Second, Verizon is wildly successful. It ranks 15th on the Fortune 500. It makes nearly \$1.8 billion in profit per month. You read that right. That isn't revenue, it's profit. Adding insult to injury, CEO Lowell McAdam earns \$18.6 million

dollars per year. For perspective, that is \$8,600 per hour.

Third, Verizon gets enormous breaks in our complicated tax system. Research by Citizens for Tax Justice found that Verizon's average federal tax rate during the last 15 years is 12.4 percent. It paid no federal taxes during five of those years, tax revenue that could be invested here in Rhode Island.

Instead of taking its enormous profits and partnering with the communities it serves, Verizon is trying to reward its executives and stockholders on the backs of its employees.

Unlike Verizon, we are part of the community. We are your neighbors, and our children attend the same schools and events. Our wish is to keep our jobs in the community in which we live.

So please, tell Verizon to sit down and negotiate in good faith. Let your elected officials know you're disgusted with Verizon's actions.

It not only will help our members, but all of Rhode Island's working families. It's time to stand up to corporate greed.

We're thankful for your support. We look forward to getting back to work and serving you.

Steven Murphy is the business manager of IBEW Local 2323.

Who are these replacement workers that Verizon has hired???

A simple background check on some of the replacements Verizon has hired produced arrest records as long as your arm.

They have committed some of the following offenses:

Battery-Domestic Violence • Burglary of Dwellings w/ assault & battery • Possession of controlled substance Driving w/ license canceled, suspended or revoked • Petite theft • Resisting arrest • Leaving the scene of a crash w/

property damage • Trafficking in illegal drugs • Obtaining controlled substance by fraud • Driving under the influence • Purchase of cocaine • Possession of cocaine • Grand theft motor vehicle • Kidnapping commit felony on child • Sexual battery • False imprisonment minor • Lewd molestation victim 12-15 years old.

Get the word out to your friends and family:

No ID, No entry!!

If you see something suspicious, report it to the police.

GAO Audit: Feds Failed To Rein In Medicare Advantage Overbilling

The Centers for Medicare and Medicaid Services has spent about \$117 million on Medicare Advantage audits that have recouped just \$14 million related to overcharging.



Private Medicare Advantage plans treating the elderly have overbilled the government by billions of dollars, but rarely been forced to repay the

money or face other consequences for their actions, according to a congressional audit released Monday.

In a **sharply critical report**, the Government Accountability Office called for "fundamental improvements" to curb overbilling by the health plans, which are paid more than \$160 billion annually. The privately run health plans, an alternative to traditional fee-for-service Medicare, have proven popular with seniors and have enrolled more than 17 million people. The

plans, which were the subject of a Center for Public Integrity investigation, also enjoy strong **support** in Congress.

GAO took aim at Medicare's primary tactic for recouping overcharges, a secretive, and lengthy, audit process called Risk Adjustment Data Validation, or RADV. Unlike many other anti-fraud programs, RADV has cost the government way more than it has returned to the treasury.

The GAO said that the Centers for Medicare and Medicaid Services, an arm of the Department of Health and Human Services, has spent about \$117 million on these audits, but so far has recouped just \$14 million. CMS officials counter that the mere threat of RADV these audits has caused health plans to voluntarily return

approximately \$650 million in overpayments – and that upcoming audits will recover tens of millions more.

"As the MA (Medicare Advantage) program continues to grow, safeguarding the program from loss is critical," the GAO report said. The report did not name any of the health plans studied.

The GAO **launched** its audit in October 2014 in the wake of the Center for Public Integrity's "**Medicare Advantage Money Grab**" series. The articles documented **nearly \$70 billion in "improper" payments** to health plans — mostly inflated fees from **overstating patients' health risks** — from 2008 through 2013 alone....[**Read More**](#)

Raising Medicare eligibility age may save feds dollars but drive up total spending

Some health spending dropped by a third with switch from private insurance to Medicare

By *Michelle Andrews, Kaiser Health News*

Healthcare spending for some services dropped by nearly a third when people turned 65 and switched from private insurance to Medicare, according to a recent **study**. The decline was driven by lower prices paid by the Medicare program to doctors and other providers rather than a drop-off in the volume of services seniors receive.

The study offers a preview of the potential impact of raising the Medicare eligibility age to 67 from the current 65, said Jacob Wallace, a doctoral candidate in health policy at Harvard University who coauthored the study, which was published in the May issue of *Health Affairs*.

"What this study shows, pretty clearly, is that while the government may save money by increasing Medicare eligibility to 67, overall national health care spending will go up," Wallace said.

Using the claims data of 200,870 retired people who transitioned to traditional Medicare from private insurance at age 65, researchers tracked healthcare spending on a per member, per quarter basis for two types of services, outpatient imaging and procedures. The study

looked at claims paid for people between the ages of 62 and 68.

When people turned 65 and enrolled in Medicare, the amount that insurers and beneficiaries spent on those services dropped 32.4 percent on average, or \$38.56.

The spending decline wasn't tied to a reduction in beneficiaries' use of health care services, the study found. Rather, once seniors enrolled in Medicare, doctors continued to see these patients, but at reduced rates.

"It crystallized for me that Medicare, due to its large market share, is able to extract larger discounts from providers than other payers," Wallace said. "Medicare is able to pay physicians 30 percent less than other payers, without leading to a reduction in access."

The impact on individual patients is less clear, since the change in their spending upon enrolling in Medicare would depend on the generosity of the private coverage they had before. But since Medicare generally pays less for services than private insurance, it's fair to say that seniors might expect to pay less

as well for services when they're responsible for paying a percentage of the cost in the form of coinsurance, Wallace said.



As for raising the Medicare eligibility age to 67, the study's findings are consistent with a 2011 analysis by the Kaiser Family Foundation, the study said. (KHN is an editorially independent program of the foundation.) That study estimated that raising the Medicare eligibility age would have saved the federal government \$5.7 billion in 2014 but would also have increased the out-of-pocket costs of 65- and 66-year-olds by \$3.7 billion and employer retiree health care costs by \$4.5 billion.

"These findings, like ours, may seem counterintuitive but show the importance of looking at the total picture when trying to understand the effects of a seemingly straightforward proposal," said Tricia Neuman, director of the program on Medicare Policy at the Kaiser Family Foundation who coauthored the analysis.

Older Americans Month focuses on trail blazing seniors Census Bureau issues long list of facts about U.S. senior citizens



President John F. Kennedy first celebrated older Americans by designating May 1963 as Senior Citizens Month. Every President since has issued a formal proclamation during or before the month of May in support of older Americans. This year there are 46.2 million in the U.S. who qualify for recognition by having reached age 65.

In 1980, President Jimmy Carter's proclamation changed the name to Older Americans Month. This month continues to be a time to celebrate those 65 and older through ceremonies, events and public recognition.

This year's theme, "Blaze a Trail," emphasizes the ways older adults are

reinventing themselves through new work and new passions, engaging their communities, and blazing a trail of positive impact on the lives of people of all ages.

Older adults are a growing and increasingly vital part of our country. The contributions they make to our communities are varied, deeply rooted, and include influential roles in the nation's economy, politics, and the arts. From 69-year-old NASA Administrator Charles Bolden, Jr. to 84-year-old actress Rita Moreno to 83-year-old Ruth Bader Ginsberg, who took her seat as a Supreme Court Justice at age 60, older adults are blazing trails in all aspects of American life.

Led by the Administration for Community Living, the annual observance

offers the opportunity to learn about, support, and celebrate our nation's older citizens.

Organizations and others are being encouraged to use OAM 2016 to focus on how older adults in the community are leading and inspiring others, how we can support and learn from them, and how we might follow their examples to blaze trails of our own.

Throughout the month, groups will conduct activities and share information designed to highlight programs, resources, senior success stories, events to hone older Americans.

More about OAM <http://acl.gov/olderamericansmonth>

Disabling Falls Don't Have to Happen Expert advice on how seniors can lower their risk

Seniors are at high risk for falls, but there are ways to reduce that risk, experts say.

One-third of Americans aged 65 and older fall each year. And, falls are the leading cause of nonfatal and fatal injuries among older Americans, according to the American Trauma Society.

Each year, more than 2.5 million fall-related injuries are treated at U.S. emergency departments, the trauma society says. These falls result in more

than 734,000 hospitalizations and more than 21,700 deaths.

It's crucial for seniors to get medical care after a fall, said Dr. James Vosswinkel, chief of trauma, emergency surgery and surgical critical care at Stony Brook University Hospital in New York.

"Older adults who suffer a serious fall have much better chances of survival and overall better health outcomes if they are treated at a trauma center where specialized surgeons are available," he

said in a hospital news release.

Seniors can significantly reduce their risk of falls through certain lifestyle changes and prevention programs, Vosswinkel added.

Here are some tips from Kristi Ladowski, injury prevention and outreach coordinator at the Stony Brook Trauma Center:...[Read More](#)



Common Antacid Linked to Accelerated Vascular Aging

Chronic use of some drugs for heartburn and gastroesophageal reflux (GERD) speeds up the aging of blood vessels, according to a published paper in *Circulation Research* (early online), an

American Heart Association journal. This accelerated aging in humans could lead to increased cardiovascular disease, vascular dementia and renal failure.

These findings by a Houston Methodist Research Institute team are a progression of the work that John Cooke, M.D., Ph.D., began more than five years ago, and support recent

epidemiological and retrospective studies that observed associations between the long-term use of proton pump inhibitors (PPIs) and an increased risk of heart attack, renal failure and dementia.

PPIs like esomeprazole (Nexium) are widely used for the treatment of GERD. These medications are sold over-the-counter in the United States so medical supervision is not required. While these drugs are effective when taken as prescribed, they were not approved for long-term use and evidence suggests that up to 70 percent of PPI use may be inappropriate...[Read More](#)



Nursing homes turn to eviction to drop difficult patients

By MATT SEDENSKY



Nursing homes are increasingly evicting their most challenging residents,

advocates for the aged and disabled say, testing protections for some of society's most vulnerable.

Those targeted for eviction are frequently poor and suffering from dementia, according to residents' allies. They often put up little fight, their families unsure what to do. Removing them makes room for less labor-intensive

and more profitable patients, critics of the tactic say, noting it can be shattering.

"It's not just losing their home. It's losing their whole community, it's losing their familiar caregivers, it's losing their roommate, it's losing the people they sit with and have meals with," said Alison Hirschel, an attorney who directs the Michigan Elder Justice Initiative and has fought evictions. "It's completely devastating."

Complaints and lawsuits across the U.S. point to a spike in evictions even as observers note available records only give a glimpse of the problem.

An Associated Press analysis of federal

data from the Long-Term Care Ombudsman Program finds complaints about discharges and evictions are up about 57 percent since 2000. It was the top-reported grievance in 2014, with 11,331 such issues logged by ombudsmen, who work to resolve problems faced by residents of nursing homes, assisted living facilities and other adult-care settings.

"When they get tired of caring for the resident, they kick the resident out," said Richard Mollot of the Long Term Care Community Coalition, a New York advocacy group....[Read More](#)

Group Doctor Visits Gain Ground

By CONSTANCE GUSTKE, *New York Times*

WANT to spend more quality time with your doctor? Maybe you should try joining a group.

Paradoxical as that may sound, it works remarkably well for Bill Swain, 69, who began going to shared medical appointments several years ago after his doctor suggested the idea. Now he attends quarterly sessions for eight to 15 people that usually last 90 minutes.

A digital white board lists group members' vital signs, such as **blood pressure** and weight. Mr. Swain, who doesn't like falling behind his peers, especially likes the accountability and the extra medical attention.

"Yearly physicals can mean sliding too far back," said Mr. Swain, who is retired and lives in Ellensburg, Wash. "I had a lump on my neck a few months ago. It turned out to be nothing, but I might have put it off until my physical. This way, I have the physician's ear four times per year."

Shared medical appointments are still relatively rare, but they are slipping into a system rife with 15-minute doctor visits, nearly doubling in popularity in the last 10 years, according to the American Academy of Family Physicians. And they are being seen as one weapon for fighting fast-rising diseases like **diabetes**, which

threaten to overburden the health care system.

Several studies show that group visits are particularly effective at keeping chronic illnesses in check. Typically, recent lab results are discussed and patients can schedule individual time with doctors if they need it. Nurses are also on hand to refill prescriptions or take vital signs....[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

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YOUR
NAME

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SIGN THE PETITION!!!!**