



Older Americans Month 2016: Blaze a Trail

Older Americans Month 2016 A PROCLAMATION

Whereas, the state of Rhode Island includes a community of older Americans who deserve recognition for their contributions to our nation; and

Whereas, Rhode Island Alliance for Retired Americans, (AKA, RI ARA) recognizes that older adults are trailblazers—advocating for themselves, their peers, and their communities—paving the way for future generations; and

Whereas, the RI ARA is committed to raising awareness about issues facing older Americans and helping all individuals to thrive in communities of

their choice for as long as **possible; and** Whereas, we appreciate the value of inclusion and support in helping older adults successfully contribute to and benefit from their communities; and

Whereas, our community can provide opportunities to enrich the lives of individuals of all ages by:

- Promoting and engaging in activity, wellness, and social involvement.
- Emphasizing home- and community-based services that support independent living.
- Ensuring community members can benefit from the contributions and experience of older adults.

Now therefore, we of Rhode Island do

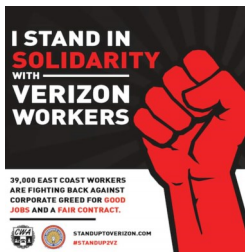
hereby proclaim May 2016 to be Older Americans Month. The RI ARA urge every resident to take time this month to acknowledge older adults and the people who serve them as powerful and vital individuals who greatly contribute to our community.

Dated this 1 day of May, 2016
John A. Pernorio, President
Rhode Island Alliance for
Retired Americans

[Click here to visit their web site](#)



Stand up to VERIZON GREED



May 1st, 2016... Today Verizon cancelled the health insurance of 100,000 people... 100,000 of your family, friends, neighbors, your child's friends and playmates, volunteer firefighters, EMT, PTA members, scout leaders and people who coach your children.

Never in the history of our labor relationship have they stooped this low. Not even during a 9 week New Jersey Bell and 9 month NYNEX strike in '89...

The new Verizon doesn't care... They profit \$1.8 billion a month and pay zero federal taxes but have decided to put people from newborns to those with long term illness in harms way... No access to prescriptions or medical care... All this despite the hundreds of millions in givebacks we've offered..

Please support our strike...

This fight is for the entire working class... Not just IBEW/ CWA and organized labor...

If they defeat us imagine what will happen to the rest of the middle class as the dominoes tumble...

We are united, we are strong, and we are willing to stand up and fight.

It's time to stop this madness against the middle class workers & their families.

**PLEASE, PLEASE, PLEASE
SHARE THIS INFORMATION.**



THE
EDSCHULTZ SHOW

Why does the mainstream media keep ignoring the 39k+ Verizon strikers

Verizon workers continue to strike along the east coast, though the mainstream media wouldn't let you know it beyond a presidential candidate's involvement. To discuss this issue, strike coordinator of the Communications Workers of America Peter Sikora, joins 'News With Ed.'

[Click here to watch the interview with Peter Sikora, Coordinator, Communications Workers of America, D1.](#)



Mediator Kenneth Feinberg rejects Central States' plan to cut Teamsters' pensions

Major Victory for all retirees in Multiemployer Pension Funds under the Kline-Miller Multiemployer Pension Reform Act of 2014



The U.S. Treasury on Friday rejected the Central States Pension

Fund's bid to avoid collapse by slashing thousands of retired Teamsters' monthly checks, many by half or more.

In a highly anticipated announcement, noted mediator Kenneth Feinberg ruled that the pension fund's proposal failed to meet legal standards set by a controversial 2014 law that makes cuts possible in severely underfunded plans.

The Treasury had appointed Feinberg — who had handled the September 11th Victim Compensation Fund — as special master in the case to rule on the proposal's legality.

His decision means more than 200,000 retired Teamsters will continue receiving their full benefit checks each month, but their pension fund remains on a path toward insolvency in a decade or less.

Retirees welcomed the news with a mixture of relief and concern about the fund's fate.

"Hooray. Thank God," said John M. Cooper, a 73-year-old retired Teamster near Lawson, Mo., who was facing a 51 percent cut to his pension check.

"I'm glad it turned out the way it did so we can figure out what we're going to do next," said Joyce Lowe of Parkville, whose husband, Aaron, had faced a 34 percent cut to his pension checks earned over 31 years as a Teamster.

In a 10-page letter to the pension fund, Feinberg said the plan failed on three tests.

The proposal failed to reasonably show it would avoid the pension fund's insolvency, it failed to distribute the benefit cuts equitably, and it failed to provide notices to those covered by Central States that could be easily understood by the average participant.

"We will not accept it. We cannot accept it," Feinberg said during a

conference call with reporters. "No benefit cuts are permitted pursuant to this law."

Many experts saw the Central States proposal as a test case under the 2014 law and feared its approval would clear the path for many other shaky pension funds to cut current retiree benefits. Central States had been the first to seek approval, and others have applications pending with the U.S. Treasury.

Feinberg emphasized in his comments to reporters that his rejection of the Central States plan was not a reflection on the law. He said other proposals might be acceptable but that this one was not.

Pension advocate groups have complained about the law and have sought to change or overturn it.

Feinberg's decision puts the Central States Pension Fund and its participants back where they started, searching for a solution to the fund's expected insolvency. Many retirees have argued that federal involvement in the fund means the government is at least partly responsible for its financial shortfall.

U.S. Rep. Emanuel Cleaver said stopping the proposed cuts provides valuable time for further inquiry into Central States' financial decline.

"More time is needed for the Department of Justice to investigate the management of the fund — as I have called for — and for the Government Accountability Office investigation to continue," the Missouri Democrat said in a statement.

Central States has a long history of difficulties, including a federal intervention amid charges it was infiltrated by the mob, the collapse of many trucking companies that failed to pay the fund what they owed, and significant losses on investments during the financial crisis and Great Recession.

Central States has said its fund would need an injection of \$11 billion to meet all of its promised benefits to current and future retirees.

In a statement Friday, Central States said it was disappointed by the rejection

because its trustees still see the proposed cuts as the "only realistic solution to avoiding insolvency." They also have said that it was important to approve this plan because there was no time for a "do-over" if it were rejected.

The statement also urged those who urged rejection — members of Congress, the Pension Rights Center, the International Brotherhood of Teamsters and AARP — to "take action to secure the funding needed to protect the pensions of all current and future Central States Pension Fund participants and beneficiaries."

Central States, meanwhile, is considering its next steps.

Thousands of retired Teamsters covered by the \$16 billion fund had fought for rejection of the proposal that identified more than 40,000 retirees as "orphans" and subjected them to some of the steepest cuts. Many had argued for rejection at a series of town hall sessions that Feinberg held, including one in Kansas City.

Feinberg's decision protects their checks from the proposed cuts that would have taken effect starting July 1.

Central States covers about 400,000 pension plan participants, including about 200,000 currently receiving retirement checks each month.

Dozens of local retired Teamsters groups formed to protest the planned cuts through a series of events and rallies, including one on the Capitol lawn in Washington, D.C. The groups also have drawn attention to the 2014 law in hopes of getting it changed.



Medicaid moving forward say Administration officials

CMS Blog: CMS updates how Medicaid works for most beneficiaries who get coverage through managed care plans



By Andy Slavitt, CMS Acting Administrator and Vikki Wachino,

CMS Deputy Administrator and Director for the Center for Medicaid and CHIP Services

If you haven't been paying close attention over the last several years, you may have missed some of the major changes that have taken place in the Medicaid program.

You may know that some 72 million Americans rely on Medicaid as their source of health insurance coverage this year – 14 million more than in October 2013 thanks largely to the Affordable Care Act's coverage expansion. For millions of children who need checkups or follow up care, pregnant women who want their babies to get a healthy start in life, adults who need health coverage when they unexpectedly lose a job, or people with disabilities who want to live independently in their communities, Medicaid has been there over the last 50 years to provide comprehensive health coverage to millions low-income American families.

insurance coverage through Medicaid over the past several years as millions more people have gained coverage because of the Affordable Care Act: The federal government and the states have sought to strengthen the program's focus on the consumer, the delivery of high quality care, and providing greater access points, and on developing a modern set of rules.

Today, we're taking a next step in that work today by finalizing a long-anticipated **rule** that updates how Medicaid works for the nearly two-thirds of beneficiaries who get coverage through private managed care plans.

These improvements modernize the way these managed care health plans operate so that Medicaid and CHIP continue to provide cost-effective, high quality care to consumers. The rule strengthens states' efforts to support delivery system reform and authorizes

the first-ever Medicaid and CHIP quality rating system so that states can publicly report plan quality information, and people can use that information to select plans.

It also deploys 21st century tools to improve beneficiary communications, like electronic notices to beneficiaries and creating online provider directories. It better aligns key rules and practices with those of Marketplace and Medicare Advantage, including the addition of reporting medical loss ratio to Medicaid to ensure managed care plans focus on delivering care, not profits. And the rule also helps strengthen and improve the delivery of health care to low-income children served by the Children's Health Insurance Program (CHIP)...[**Read More**](#)

Social Security joins effort for homeless seniors, veterans

Declared as most successful anti-poverty program ever

The effort to reduce homelessness among seniors, veterans and other vulnerable populations got a boost from the Social Security Administration last week. Acting Commissioner Carolyn W. Colvin declared SSA is the "most successful anti-poverty program" in U.S. history.

"Social Security plays a key role in reducing homelessness, and our benefit payments help people to secure and maintain stable housing," Colvin added.

She said SSA collaborates with other federal, state and local agencies to ensure that veterans, people who are disabled, have lost a loved one, or are retiring have access to our benefits and services.

Colvin and other leaders in the fight to end homelessness gathered last Thursday to continue the ongoing battle against homelessness among veterans, seniors, and other vulnerable populations.

The federal and state officials met to discuss initiatives to end homelessness and outreach programs to vulnerable populations, including veterans, at a forum called "*Ending Homelessness: Lessons Learned from the Commonwealth of Virginia.*"

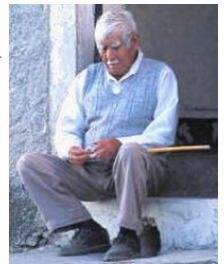
Representatives from the U.S. Interagency Council on Homelessness, the Department of Housing and Urban Development, the Substance Abuse and Mental Health Services Administration (SAMHSA), the Virginia Department of Veterans Services, and the Virginia Housing Alliance participated in the discussion.

In 2015, Virginia announced that it had ended homelessness among veterans. Many federal and state agencies are looking to replicate best practices from Virginia's success in their respective states.

Social Security has collaborated with other federal agencies to develop key

strategies for connecting veterans and other individuals experiencing homelessness to Supplemental Security Income (SSI) and Social Security Disability Income (SSDI) benefits.

Through partnerships across the country with the SSI/SSDI Outreach, Access and Recovery (SOAR) initiative, the agency receives more complete disability applications. They have a higher rate of approval on the initial application because someone is helping the applicant, especially homeless people who have difficulty documenting their cases and getting their medical records.[**Read More**](#)



Nursing Home Compare expanded by six quality measures Medicare & Medicaid now has 24 measures for 15,655 nursing homes



Six new quality measures have been added to the Nursing Home Compare website and three are the first to be based on Medicare-claims data from hospitals, rather

than data self-reported by nursing homes.

With these updates, it now reports information on 24 quality measures for 15,655 nursing home providers on *Nursing Home Compare*.

These three measure the rate of re-hospitalization, emergency room use, and community discharge among nursing home residents, according to a news release from the Centers for Medicare & Medicaid Services (CMS).

They include:

1. Percentage of short-stay residents who were successfully discharged to the community (claims-based)
2. Percentage of short-stay residents

who have had an outpatient emergency department visit (claims-based)

3. Percentage of short-stay residents who were re-hospitalized after a nursing home admission (claims-based)

4. Percentage of short-stay residents who made improvements in function (MDS-based)

5. Percentage of long-stay residents whose ability to move independently worsened (MDS-based)

6. Percentage of long-stay residents who received an antianxiety or hypnotic medication (MDS-based)

“These new quality measures broaden the set of quality measures already on the site so that patients, their family members, and caregivers have more meaningful information when they consider facilities,” said CMS Deputy Administrator and Chief Medical Officer Patrick Conway, M.D., MSc.

With today’s quality measure updates, CMS is nearly doubling the number of short-stay measures, which reflect care

provided to residents who are in the nursing home for 100 days or less, on *Nursing Home Compare*. CMS is also providing information about key short-stay outcomes, including the percentage of residents who are successfully discharged and the rate of activities of daily life (ADL) improvement among short-stay residents.

Beginning in July 2016, CMS will incorporate all of these measures, except for the antianxiety/hypnotic medication measure, into the calculation of the *Nursing Home Five-Star Quality Ratings*. CMS is not incorporating the antianxiety/hypnotic medication measure because it has been difficult to determine appropriate nursing home benchmarks for the acceptable use of these medications.

[Read More at Nursing Home Compare](#)

Medical Errors Are No. 3 Cause Of U.S. Deaths, Researchers Say

A study by researchers at Johns Hopkins Medicine says medical errors should rank as the third leading cause of death in the United States — and highlights how shortcomings in tracking vital statistics may hinder research and keep the problem out of the public eye.

The authors, led by Johns Hopkins surgeon [Dr. Martin Makary](#), call for changes in death certificates to better tabulate fatal lapses in care. In an [open letter](#), they urge the Centers for Disease Control and Prevention to immediately add medical errors to its annual list reporting the top causes of death.

Based on an analysis of prior research, the Johns Hopkins study estimates that more than 250,000 Americans die each year from medical errors. On the CDC's official list, that would rank just behind heart disease and cancer, which each took about 600,000 lives in 2014, and in front of respiratory disease, which caused about

150,000 deaths.

Medical mistakes that can lead to death range from surgical complications that go unrecognized to mix-ups with the doses or types of medications patients receive.

But no one knows the exact toll taken by medical errors. In significant part, that's because the coding system used by CDC to record death certificate data doesn't capture things like communication breakdowns, diagnostic errors and poor judgment that cost lives, the study says.

"You have this overappreciation and overestimate of things like cardiovascular disease, and a vast underrecognition of the place of medical care as the cause of death," Makary said in an interview. "That informs all our national health priorities and our research grants."

The [analysis](#) was published Tuesday in *The BMJ*, formerly the *British Medical Journal*.

Bob Anderson, chief of the mortality

statistics branch for the CDC, disputed that the agency's coding is the problem. He said complications from medical care are listed on death certificates and that codes do capture them.

The CDC's published mortality statistics, however, count only the "underlying cause of death," defined as the condition that led a person to seek treatment. As a result, even if a doctor does list medical errors on a death certificate, they aren't included in the published totals. Only the underlying condition, such as heart disease or cancer, is counted, even when it isn't fatal. . . . [Read More](#)



Poor Vision and Dangerous Falls Plague Many U.S. Seniors

Year-long CDC study finds 1.3 million people over 65 with poor eyesight fell at least once



Millions of American seniors have severe vision impairment, and with it comes the risk of a fall that could lead to

disability, a new report finds.

About 2.8 million seniors are thought to have severe vision impairment -- defined as either blindness or difficulty seeing, even with eyeglasses, according to data from the U.S. Centers for Disease Control and Prevention.

About 1.3 million of these older, vision-challenged Americans fell at least once in

2014, the new CDC report said.

Experts say the link between vision and balance is crucial, especially as people age.

Falls "represent a major source of disability and can lead to prolonged recoveries and lengthy stays in hospitals and long-term care facilities," said Dr. Robert Glatter, an emergency physician at Lenox Hill Hospital in New York City.

He said that hip and leg or arm fractures, as well as wounds that are slow to heal, mean falling can be disabling or even life-threatening for older people.

Vision checks are key to prevention, Glatter said. "Monitoring changes in

visual acuity is a critical aspect of screening in older persons who live independently, for fall risk -- especially if they use canes or walkers," he said.

The study was led by CDC investigator John Crews and involved 2014 federal data from the Behavioral Risk Factor Surveillance System.

Crews and colleagues found that fall risk among seniors rose significantly as vision failed. For example, while about 28 percent of seniors without severe vision trouble experienced at least one fall in 2014, that number jumped to almost 47 percent in people who had such eyesight issues... [Read More](#)

Lung Cancer Surgery Worthwhile for Older Patients

Study found those 65 and older survived longer when they had operation

Older lung cancer patients are surviving longer when they have lung cancer surgery, a new study suggests.

"This greater than expected survival in older patients selected for operative therapy is noteworthy, especially considering that the prevalence of lung cancer is expected to increase as the population continues to grow older and more people survive into old age," said study author Dr. Felix Fernandez, from Emory Clinic in Atlanta.

The median age of U.S. lung cancer patients at the time of diagnosis is 70, according to the American Cancer Society. About 17 percent of all patients diagnosed with lung cancer live for at

least five years, according to the U.S. National Cancer Institute.

In the study, researchers examined data from tens of thousands of patients aged 65 and older who had lung cancer surgery in the United States between 2002 and 2012. Median survival after surgery for early stage lung cancer was 6.7 years -- nearly two years longer than the benchmark five-year survival rate.

The analysis also showed that five-year survival rates for certain older patients with advanced lung cancer who had surgery were 30 percent for stage 3 cancer and 27 percent for stage 4 cancer.

The study was published online May 5 in *The Annals of Thoracic Surgery*.

The findings offer more information about survival after surgery, "which is important to patients. This information can

be included in the shared decision-making process when discussing treatment options with patients," Fernandez said in a journal news release.

The elderly population in the United States is expected to nearly double, from 43 million in 2012 to 80 million by 2050, according to the U.S. Census Bureau.

[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
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**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!!!!**