

# Horizons

## Sorting Out Differences Between Care Options

By Tanisha Davis

They are called by many names: congregate care, assisted living, independent living and nursing homes. Since there are many titles for elder care options, many people are walking the tight rope to understand the differences between *assisted living* and *nursing homes*.

When the daily routine becomes more difficult in later years, choosing the right residential setting is an important consideration, and defining the type of care available at different facilities is essential.

Assisted living residences combine apartment-like environments with a variety of support services for older persons who need help with daily routines. Serving meals, administering medications and housekeeping are a few of the services that make assisted living a viable solution for many seniors.

Assisted living communities have 24-hour security and on-site staffing to respond to

emergencies. Most facilities plan social, recreational, exercise and wellness activities that promote the quality of life of residents.

However, while assisted living facilities may offer many amenities, one service they do not offer is *medical care*—the primary purpose of a nursing home.

Nursing homes are licensed facilities that provide complete medical care as well as basic personal care for seniors with illnesses, injuries or functional disabilities. The level of care provided by nursing homes has increased dramatically over the years and a quality facility is equipped to provide a full array of physical, medical, therapeutic and social services.

The most noticeable difference between nursing homes and assisted living communities is cost. Assisted living communities may run between \$22,000 and \$38,000 a year, depending on the services available. The cost of nursing home care may exceed \$50,000 per year.

In addition to being cost-effective, assisted living facilities have gained wide

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## Shoe's on Other Foot for Retired Benefits Rep

By Teresa Lockhart

After 22 years of helping coworkers prepare for retirement, Frank Serra Sr. finds himself taking his own advice these days.

The former UAW Local 1248 benefits plans representative at the Centerline Parts Distribution Center retired recently, and he looks back with pride on the role he played.

"When you help a retiree, they can't do enough for you," said Frank, who spent nearly four decades with

DaimlerChrysler. "I worked 37 years and everything I've got through DaimlerChrysler is because of what retirees have gotten before me. I couldn't do enough for them."

Frank found pleasure in helping thousands of employees prepare for retirement.



Frank Serra Sr.

"The benefits rep job has been the best job I could ever want," he said. "I could have run for different things. I could have run for president if I wanted to. But the benefits job is gratifying. You get to help people

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every single day. That's what I'm going to miss about this job."

Leaving the company wasn't easy. "It was hard to leave because of the people that I worked with," he said.

But Frank plans to stay involved in issues that relate to retirees. He wants to follow the example of other retirees who have remained active in helping their peers.

"I'll probably end up running for chairperson or financial secretary of the retiree chapter," he said. "I'm going to do things through the UAW-DaimlerChrysler National Training Center. I have a lot of expertise, a lot of experience and I want to share that."

In his spare time, Frank also is active in the community. He's interested in doing volunteer work in hospitals and assisting Meals on Wheels.

He encourages retirees to get involved in their union and their community.

"A retiree has got so much experience. There are so many things to offer people. It's amazing," he said. "Use that knowledge. Go to your schools; ask them if they need anyone to work with kids or older people. Go to your union meetings. Stay active. Don't just sit down and not do anything but watch TV."



## Watch Your Back!

Back pain is second only to headaches as the most frequent place of pain. Four out of five adults have at least one bout of back pain sometime in their lives.

Back injuries are one of the most common causes of disability. A serious back problem can have an impact on your ability to walk, sit, stand and run.

Some of the risks for lower back pain are: increasing age, frequent hard labor (including lifting, pushing and pulling), lifting objects quickly, falling, poor body posture and excess weight.

Learn how to avoid back

injuries. Preventing a back injury is much easier than repairing one.

Here are some tips to help prevent such injuries:

- Exercise regularly to strengthen your back and reduce stress.
- Lose excess weight to reduce strain and pain in your back.
- Maintain good posture while standing, sitting and sleeping.
- Use proper lifting techniques.
- Reduce emotional stress that causes muscle tension.
- Quit smoking.

For more information, contact the National Arthritis and Musculoskeletal and Skin Diseases Information Clearinghouse at 877-226-4267.

## Clean Your Home the Sensible Way

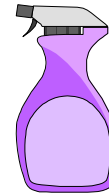
Brand-name household cleaners can be expensive. You can make your own cleaning products by using mixtures of common household items such as ammonia, vinegar and bleach.

These alternatives can provide an inexpensive way to clean your home and do just as good a job as the brand-name cleaners.

Here are some examples for do-it-yourselfers:

- To clean ceramic tile, where mold and mildew accumulate, use a combination of ¼ cup

baking soda, ½ cup white vinegar, one gallon warm water and one cup ammonia.



- To remove and prohibit mold growth in other areas, a weak bleach solution should be used on the affected surfaces.
- To polish furniture, combine one teaspoon of lemon juice with one-pint mineral or vegetable oil. For a spray, mix two teaspoons lemon oil and one pint mineral oil.
- To clean windows and mirrors, mix three tablespoons ammonia, one tablespoon white vinegar and ¾ cup water. Wipe glass dry with a newspaper.

## Other Household Worries? No Problem!

In addition to cleaning products, there are also neat solutions to other household headaches.

Crayon marks on the walls? Use a damp rag dipped in baking soda. Comes off with little effort.

And what about permanent marks on appliances and counter tops (like

those caused by blue store receipts)? Try rubbing alcohol. Works like a charm!

Ruining your Tupperware with hard-to-remove stains can be a thing of the past. Spray it with nonstick cooking spray before pouring in tomato-based sauces and your Tupperware will come out just like new.

## Understanding Medicare Versus Medicaid

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popularity because of their goal to promote independent living. Many assisted living facilities are emerging as a primary option for individuals with Alzheimer's disease or other cognitive impairments.

Individuals in nursing homes are patients, admitted on the recommendation of a physician and whose medical condition prevents them from maintaining independent lives.

While both elder care choices have something to offer, it is important to make sure that your decision about which option to select is based on the specific needs of you or your loved one.

Once you have decided which elder care option is right for you, here are a few key questions to ask when considering an assisted living facility or a nursing home:

1. Is the facility licensed? If not, it means care is not being monitored.
2. Is it adequately staffed? Are staff members cheerful, helpful, clean, energetic?
3. Are the meals nutritious and adequate?
4. What is the level of activity for residents?
5. What are the restrictions on medical conditions under which a resident can be admitted and continue to live there?
6. What are costs and what do they include? What is not included?

People often misunderstand the difference between Medicaid and Medicare. Both were created as part of the Social Security Act.

Medicare is a federal government health insurance program designed to assist individuals age 65 and older and some disabled individuals under the age of 65, including persons with end-stage renal disease.

Medicare has deductibles and copays.

A deductible is an initial amount the beneficiary is responsible for paying before Medicare coverage begins.

A copay is a percentage or dollar amount of covered expenses that the beneficiary is required to pay. It is divided into two parts: Part A (Hospital Insurance) and Part B (Medical Insurance).

Part A pays for:

- Cost of all normal hospital services
- Extended-care services in a "skilled-nursing facility"
- Home health services, including medical supplies for visiting nurses or physical, occupational or speech therapists
- Hospice services

Part B pays for:

- 80 percent of reasonable charges

from doctors and other health care professionals, after the annual deductible is met

- Medically necessary ambulance service
- Physical, speech and occupational therapy
- Home health services, doctor-certified as medically necessary
- Medical supplies and equipment
- Transfusions of blood components furnished on an outpatient basis
- Outpatient surgery

Medicaid, on the other hand, is a program that provides medical assistance to needy persons. It is run jointly by the federal and state governments. Medicaid is not a program directed primarily at the elderly, but rather at the poor. It depends on financial need, low income and low financial worth. It is not available to seniors under 65 unless they are blind or disabled.

In determining eligibility for Medicaid, the government looks at medical expenses, not such things as the cost of rent, car payments or food.

Medical expenses include:

- Care from hospitals, doctors, clinics, nurses, dentists, podiatrists and chiropractors
- Drugs, medical supplies and equipment
- Health insurance premiums
- Transportation to get medical care

## Myths About Alzheimer's Disease

By Tanisha Davis

Until recent years, medical research was lagging behind with regard to Alzheimer's disease. Reports in the newspaper, in health pamphlets and on television brought tales of "breakthrough" information that often was distorted and created misconceptions about the disease—making it difficult to distinguish myth from reality.

**Myth #1: Memory loss is a natural part of aging.** Simply not true. Of course, normal signs of aging may include mild memory loss and forgetfulness, but Alzheimer's disease is much more severe. The disease progresses quickly and eventually fully deteriorates the brain. Communication, learning, thinking and reasoning are severely affected and it greatly affects a person's work and social life.

**Myth #2: Alzheimer's disease is hereditary.** While early research suggests that the disease has been linked to three different genes, it's unclear whether it involves a genetic abnormality. Alzheimer's doesn't follow any hard and fast rule. It strikes individuals at different ages, progresses at different rates and affects individuals differently. In the most common form of the disease, which occurs after age 65 and accounts for more than 90 percent of all cases, genetics, environmental factors or a combination of both may contribute.

**Myth #3: Alzheimer's disease is not fatal.** False. Alzheimer's is a fatal, progressive and degenerative disease that attacks the brain and results in impaired memory, thinking and behavior. Eventually, patients lose all mental abilities and an individual's daily functions

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# Myths About Alzheimer's Disease

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usually shut down, resulting in death.

**Myth #4: Drinking from aluminum cans or cooking in aluminum pots and pans can lead to Alzheimer's disease.** Aluminum is one of the 90 naturally occurring chemical elements and is the third most common element found in the earth's crust. Although the subject is still under debate, no research exists to confirm that aluminum is a factor in developing Alzheimer's disease.

**Myth #5: Aspartame causes memory loss.** Aspartame is the technical term for the brand name products, NutraSweet, Equal, Spoonful and Equal-Measure. Research is divided on the effects of aspartame and its relation to dementia (memory loss), but no cases have been found that associate Alzheimer's disease with aspartame.

**Myth #6: There are therapies available to stop the progression of Alzheimer's disease.** There is no medical treatment to cure or stop the progression of Alzheimer's.

However, four FDA-approved drugs—tacrine (Cognex), donepezil (Aricept), rivastigmine (Exelon) and galantamine (Reminyl)—may temporarily relieve some symptoms of the disease.

## Warning Signs of Alzheimer's Disease

- ◆ **Recent memory loss**--Frequently forgetting assignments, names and phone numbers
- ◆ **Problems with language**--Forgetting the meaning of simple words and using words inappropriately
- ◆ **Disorientation of time and place**--Losing a sense of time and becoming confused in familiar surroundings
- ◆ **Changes in mood or behavior**--Rapid, unexplained mood swings
- ◆ **Poor or decreased judgment**--Making poor decisions such as leaving a child alone or dressing inappropriately
- ◆ **Problems with abstract thinking**-- Difficulty calculating numbers, handling money
- ◆ **Misplacing things**--Placing items in inappropriate places—an iron in the freezer

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