

January 2024

Newsletter



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Lines from Lynne

We will miss you 2023 -What great memories you brought us!

Clark County ADRC had such a wonderful year. Joining Schmitt's in the community partnership of Café 60, we introduced Aroma Café in Thorp. We also introduced Chat and Chew, a partnership with Colby Care Center for local nutrition and socialization.

We were also honored to participate in State pilot projects for a number of projects including, Caregiver Advocacy representing WI in the National Project of Changing the Caregiver Conversation. The Nutrition prioritization project to help prioritize home delivered meals. The development of evidenced based education class cooking for 1-2 with UW-Stout.

Closer to home, the 2023 Health and Caregiving EXPO at Sunset Place Apartments in Neillsville was a huge success. Thank you to our community partners and continued partnership with Loyal and Greenwood Libraries for the successful monthly Lunch and Learn where new friends join us every month.

Last but not least, the great partnership with UW Extension. We are proud to offer Strong-Bodies classes all over the county now. Great way to stay fit and be healthy. Along with offering virtual classes on health and wellness *Eat Smart, Move More, Weight Less, Powerful Tools for Caregivers* and *Trualta*; great opportunities for Caregivers. In 2024 we will continue to see expansion in all these great services. Please be watching for the great things to come! Grab our newsletters, share them with your friends, join us on Facebook or give us a call.

Most of all, thank you for all the friends and volunteers for the ADRC. We do not do this alone. We have been blessed with a supportive County Board that supports us financially to keep us flowing; an ADRC Committee who helps advise us in the direction that we go; the volunteers and community partners who do the hard work that make the magic happen.

Thank you for allowing us to serve.

Lynne McDonald



Strength Training Class StrongBodies

LIFTING PEOPLE TO BETTER HEALTH



STRONGBODIES

Benefits of Strength Training:

- **Reduced risk for chronic diseases:**
 - Diabetes
 - High Blood Pressure
 - Heart Disease
 - Osteoporosis
 - Arthritis
 - Some Cancers
- **Increased:**
 - Strength
 - Muscle mass
 - Bone density

What: 10 Week Strength Training Class

When: Tuesdays and Thursdays 11-12, Starting January 16th.

(1/16, 2/20, and 3/19 from 1-2)

Where: Greenwood Fire Hall (103 W Cannery St, Greenwood)

Suggested Contribution: \$20

Please contact the UW-Extension office to register.

517 Court Street, Room 104

Neillsville, WI 54456

Phone: 715-743-5121

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Aging & Disability Resource
Center of Clark County

ADRC OF CHIPPEWA AND CLARK COUNTIES PRESENTS:



COPING SKILLS FOR CAREGIVERS

The Chippewa and Clark
County ADRC will
collaboratively present
FREE, quarterly education
sessions for caregivers of
individuals with dementia
hosted at Aspirus Stanley
Hospital

JOIN OUR EVENT



FEBRUARY 6, 2024
10:00 am—11:30 am



Aspirus Stanley Hospital
1120 Pine Street
Stanley, WI 54768

Please Register:



715-644-6153



diane.finn@aspirus.org



ADRC of CLARK COUNTY IS OFFERING A NEW WELLNESS INITIATIVE

GET HEALTHY WITH EAT SMART, MOVE MORE, WEIGH LESS ONLINE



NEW SERIES BEGINS SOON



For registration code, please
contact:
Lynne.McDonald@co.clark.wi.us
or 715-743-5166

◆ Check it out—a 15-week weight management program that works because it is not a diet—it's a lifestyle!

◆ All weekly classes are conducted online by a live instructor, fostering interaction between the instructor and all participants.

◆ Participants can conveniently attend classes from home or office using a computer or mobile device.

◆ ***ADRC of Clark County is covering the full cost of the program.***

◆ Go to www.esmmweighless.com to view class times for the upcoming series beginning soon.

All participants must be over 60+ years of age.

www.esmmweighless.com

Dementia Assistance Cards

Designed and sponsored by



Advice and information for anyone caring for the elderly or someone with dementia.

The cards provide an easy way for someone with dementia to ask for help in public.

They display the contact details of a friend or relative in case of an emergency - matching carer's cards are also available



Available to download from
dementiaassistancecard.com

Fully editable and available blank. Laminated cards make useful tags for handbags & key fobs.

Now available to use with self-adhesive and iron on transfer paper

Join us and begin

planning **AHEAD** for the end of this life

What is Planning AHEAD?

Planning AHEAD is a virtual 7-session course (one hour each) that guides participants through the topics on the right.

This course features a free workbook to help people with the tasks and decisions associated with end-of-life.

Who is the program for?

This program is for people who:

- Are interested in planning for the end of life to make things easier for family members
- Have lost a loved one
- Are in the process of losing a loved one and are dealing with the transition

When is the program?

Dates: Mondays from 1pm- 2pm:

January 15, 22, 29, February 5, 12, 19, 26.

Location: Virtually via Zoom, computer, laptop, tablet or smart phone required. (Link will be sent prior to class)

Contact us for more information

Register online at:

<https://bit.ly/PLANNINGAHEADJAN2024>
or by calling the Extension Office at 715-421-8440.

planning **AHEAD** PROGRAM TOPICS



Getting Started



Handling Financial Changes



Advance Medical and Legal Directives



Estate Planning



Choices in End-of-Life Care



Final Wishes



Understanding Grief



Extension
UNIVERSITY OF WISCONSIN-MADISON

Protect Your Family from Radon

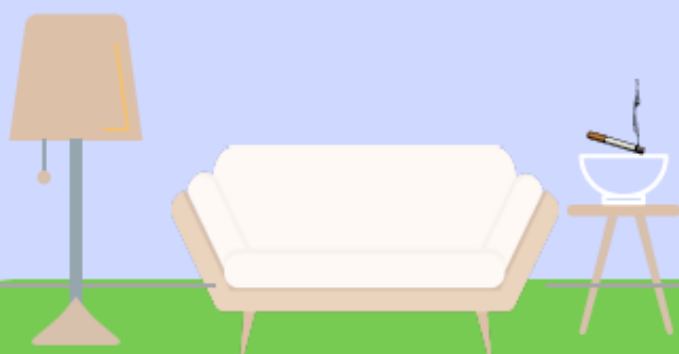
Radon is a gas that you can't see, smell, or taste - but it can be dangerous. It's the second leading cause of lung cancer.





Radon is in the ground naturally. But sometimes it gets into homes **through the cracks in the floors or walls.**



Radon and Smoking: A Dangerous Combination



If you live in a home with high radon levels, smoking raises your risk of lung cancer by **10 times.**

 + 
= **10x**
the risk of lung cancer

**Protect your home from radon.
Pick up a test kit today.**

Radon test kits are \$5 at the
Clark County Health Department.



MOVING A PARENT TO ASSISTED LIVING

12 STRATEGIES TO EASE THE TRANSITION

Moving a parent, even a willing one, into assisted living or any senior living facility is fraught with emotion. Your parents may mourn the loss of their younger years, their independence, the home they built. They could be scared about aging, making new friends, and finding their way in a new place. You may be mourning all of those things, too. You may second-guess your decision. Did we act too quickly? Overreact? Wait too long? And you will feel guilt. Guilt is inevitable.

All of these feelings are normal and don't need to last forever. Keep these 12 strategies in mind as you make the transition:

1. **Give it time.** Senior living experts say it typically takes between three and six months for someone to adjust to assisted living. That's an average. It might be quicker; it may take longer. Stay focused on the reasons you made the decision (safety, health, security, sanity). Keeping the big picture in mind will help you through the rough patches.
2. **Visit often, or not for two weeks.** Only you know your parent, so only you can decide how best to assist them through the early weeks of the move. Many experts will tell you to visit as often as possible. Frequent visits can ease any stress your parent may have that they will be abandoned or lonely. It might be easier for them to meet people at activities or in the dining room if they have a companion with them. But if your parent is calling you several times a day, staying in their room, and waiting for you to show up and keep them company, you may need to give them some space in order to encourage them to branch out. When I went to college my parents wouldn't let me come home to visit for the first few weeks. By forcing me to stay at school on the weekends, they forced me to make friends. Tough love – it can work both ways.
3. **It takes a village.** Mobilize yours. When we first moved my mother into assisted living, my sisters and I could not visit for a week or two. We had been staying with her before the move and needed to get back to work. Plus, our father was in the hospital. So I called my relatives and asked them to visit in our absence. Just as parenting takes a village, so does daughtering.
4. **Expect setbacks.** Just when you think you are over the hump and your parent is settling in, things will change. They will tell you they are lonely. They will decide they don't like their new dining hall friends. They will ask to go home. These moments are heart wrenching but knowing that they are normal and that they will pass, can help get you through them.

5. **Allow yourself to feel discomfort.** Speaking of home, know that when your parent says they want to go home, they may not necessarily mean their last address. It's incredibly difficult to hear your parent say they want to go home. But know this: they may not be referring to their last address – especially if they have dementia; they may be referring to a childhood home. Home is both a place and a feeling. Sit with them in the discomfort of that statement and talk to them about what they miss. You can't promise to change their situation, but you can hear them as they express their feelings. And that will help.
6. **Acknowledge the difficult parts.** Yes, you want to paint the new move in a positive light, but don't talk at your parents about all the wonderful new activities and people and opportunities. Listen to their fears and concerns and acknowledge them. Then help them get through it. They will be more likely to listen to what you have to say if they feel like you've listened to what they had to say.
7. **Surround your parent with their personal belongings.** Moving to assisted living usually means downsizing. The dining room table with two extension leaves and coordinating hutch may not fit in the new apartment. But what does fit, are photographs of family and friends, photo albums, favorite books, a familiar piece of artwork. If you need to downsize the bedroom set, you can still bring a familiar blanket and pillows. The kitchen may be new, but you can pack your mother's favorite teacup. Leaving a home shouldn't mean leaving behind the comforts of that home.
8. **Limit new things.** You may be tempted to furnish your parent's new place with the latest and greatest in hopes they love their fancy new home. But limit new items. Moving into an assisted living facility is a major adjustment where everything is new – the people, the food, the routines. Don't overwhelm your parents with a new phone or remote control for the television, or a fancy new coffee maker. Limit the amount of new things they need to learn.
9. **Be your parent's advocate.** No place is perfect. You and your parents may see opportunities to improve something at their new home but your parent may hesitate to speak up when they move to a new place. Do it for them. My father, who worked nights his entire adult life, likes to sit outside on a balcony until almost midnight. When he first moved in, the staff would tell him he needed to be inside by 8 p.m. I asked management if there was any reason he couldn't be on the balcony after 8, and there wasn't. The staff just wasn't used to seeing the residents out of their rooms after 8:30 at night. So management let the staff know that my father could stay outside as late as he wanted—and he does.
10. **Build a team.** The staff at assisted living can and should be a part of your team. Talk to them about your concerns and your parent's concerns and actively enroll them in

helping with the transition. Don't assume they will notice what needs to happen – they are very busy. If your parent tells you they are too shy to go to the dining hall for dinner, or they forget when activities are happening, ask if a staff member can knock on their door and invite them. If the staff members know what you need, they should be willing to help out.

11. **Set your boundaries.** Yes, you want to be a good daughter and ease your parent's transition. But you have needs too. Try to free up as much time as you can in the first few months after the move to help, but know that it is okay if you are not always available. Your kids may need you. Your boss and clients may need you. And you need to take care of yourself. Determine what you are able and willing to do and then stick to your boundaries. Other people will tell you what you should do. Ignore them. You are the judge – no one else.

Daughter knows best. Remember the television show and saying, "Father Knows Best." Well this time, daughter, you know best. Different experts may tell you to stay away or visit often. They may tell you to dismiss complaints as normal. But you know your parent best. Trust your instincts.

I was told my father had to spend the rest of his life in a locked memory unit. When I expressed doubt about that decision, doctors and social workers dismissed me as a daughter in denial. But I persisted and my father now lives in his own apartment in an assisted living facility with minimal support.

CORRECTION

It was listed in the December ADRC Newsletter under Food Pantry & Other Food Resources that there was a food pantry in Granton which has been closed.

We also have an update on the food pantry in Withee. Owen-Withee Food Pantry is located at Nazareth Lutheran Church in Withee, at 1127 N Division St. The monthly distribution is the 3rd Tuesday of the month from 2-3 pm as drive through distribution and by appointment. Pantry phone number 715-229-2051. Delivery available in the Owen-Withee area by calling or texting Rev. Elizabeth Bier at 715-255-0013. There is no income or geographic restrictions.

Report Misleading Medicare Ads

By the GWAAR Legal Services Team (for reprint)

The Centers for Medicare and Medicaid Services (CMS) are asking consumers and beneficiaries to help identify misleading Advantage plan sales practices that violate new federal marketing rules. That includes television ads promoting benefits that may not be available in the consumer's service area, as well as printed materials and telephone marketing practices.

CMS is asking people to watch for marketing efforts that:

- Suggest benefits are available to anybody who joins the plan.
- Mention benefits that are not available in the service area where they are advertised.
- Claim that the plan advertised will provide the "most" or "best" benefits or coverage.
- Promise unrealistic savings that most consumers will not realize.
- Fail to identify the name of the plan being advertised.
- Use the Medicare name or images of the Medicare membership card or logo without approval of CMS.
- Contact Advantage or drug plan members who have already told a plan or issuer not to contact them.
- Pretend to be representative of the government-run Medicare program.

The new marketing rules, which took effect September 30, require sales representatives to explain to consumers how any plan being offered differs from the consumer's current plan before making a switch. The rules also require insurers and third-party marketing companies to submit advertisements to CMS for review before going public. However, the sheer volume of Advantage plan advertising makes it unlikely that CMS will be able to catch every misleading sales pitch. CMS is asking consumers to report potentially misleading marketing efforts to 1-800-MEDICARE. Wisconsin residents can also report potential marketing violations to the Senior Medicare Patrol at 1-888-818-2611.

New Law Would Allow SeniorCare Recipients to Receive 100-Day Medication Refills

By the GWAAR Legal Services Team (for reprint)

On December 6, 2023, Wisconsin Governor Tony Evers signed into law Senate Bill 263 (now Wisconsin Act 71), which could allow SeniorCare participants to purchase 100-day supplies for certain prescription drugs. During the COVID-19 pandemic, SeniorCare participants had been allowed to purchase 100-day refills of certain medications, instead of the 34-day supply that had previously been allowed. Those changes were only temporary, however, and expired in December 2022. Now, thanks to the new law, the approximately 100,000 individuals around the state who participate in SeniorCare may once again be able to take advantage of the benefits that come with the ability to purchase larger refills at one time.

For background purposes, the SeniorCare program extends Medicaid eligibility through Title XIX to cover prescription drugs as a necessary primary health care benefit. The SeniorCare program provides assistance to Wisconsin seniors in the purchase of prescription drugs. To be eligible for SeniorCare benefits, a person must pay an annual program enrollment fee, reside in Wisconsin, be at least 65 years of age, and not be a recipient of Medical Assistance. Seniorcare does not have a household income limit, but members with income over 240% of the federal poverty level will have a spenddown.

All SeniorCare members pay an annual \$30 enrollment fee. Enrollees with incomes at or below 160% of the federal poverty level pay no other out-of-pocket costs besides co-pays of \$5 for generic drugs and \$15 for brand-name drugs, while those who fall into one of three higher income range categories must meet certain spenddown or deductible requirements. After any spenddown or deductible requirement is met, these members pay co-pays of \$5 for generic drugs and \$15 for brand-name drugs.

If implemented, Wisconsin Act 71 would provide several important benefits to SeniorCare enrollees and healthcare providers, including:

- Saving money on prescription drug co-pays. Individuals enrolled in SeniorCare currently pay a \$15 co-pay for three 34-day supplies for generic drugs. Under the provisions of Wisconsin Act 71, however, they would only have one co-pay of \$5 for a 100-day supply. Brand-name drugs currently require a co-pay of \$45 for three 34-day supplies; under the new law, SeniorCare participants would only have one co-pay of \$15 for a 100-day supply of a brand-name drug.
- Fewer trips to the pharmacy to pick up medications. This would especially benefit seniors who live in rural areas and often have to travel great distances to reach a pharmacy.
- Improved medication compliance, due to having better access to prescription drugs at home. Taking prescriptions as recommended is a critical factor in managing chronic health conditions. This, in turn, can lead to a reduced need for emergency interventions and hospitalizations, ultimately lowering healthcare costs for both individuals and healthcare institutions.
- Alleviating administrative burdens on healthcare providers and pharmacists by not requiring them to have to renew and refill prescriptions as often, allowing them more time to devote to patient care.

Before Wisconsin Act 71 can be implemented, however, the Wisconsin Department of Health Services (DHS) may apply for and receive a waiver of federal Medicaid laws from the Federal Secretary of Health and Human Services that would allow SeniorCare pharmacy providers to dispense certain medications in amounts up to a 100-day supply, as prescribed by a physician. It is unclear how long it could take for DHS to receive a waiver.

Even if a waiver is granted, however, some medications would not be eligible for the 100-day refills but would instead still require a monthly renewal. DHS would make this determination based on factors such as clinical considerations, safety, and costs.

If implemented, the new law would be a step towards creating a more accessible, efficient, and cost-effective healthcare system. It would also hopefully reduce the strain on physicians, pharmacists, and other healthcare providers and contribute to better health outcomes overall.

SeniorCare Coverage of Respiratory Syncytial Virus Vaccines

By the GWAAR Legal Services Team (for reprint)

You may have heard about the new respiratory syncytial virus (RSV) vaccines for older adults. RSV is a respiratory virus that typically causes cold-like symptoms in healthy adults and older children but can lead to more serious illness, like pneumonia, as well as hospitalizations and even death in very young children and older adults. The new vaccines will help protect older adults against severe illness from RSV. Talk to your healthcare provider about whether the RSV vaccine is right for you and any other vaccines you might need to help prevent illness.

As of September 5, 2023, SeniorCare covers RSV vaccines for SeniorCare members when the vaccine is administered in a pharmacy. Prior authorization is not required for these vaccines. If you have other health insurance, your pharmacy should bill that insurance first before submitting the claim to SeniorCare. If your pharmacy is unable to provide the RSV vaccine for you, pharmacy staff should refer you to another pharmacy that can provide the vaccine.

Please note that adult BadgerCare Plus and Medicaid members must receive the RSV vaccine at their doctor's office. BadgerCare Plus and Medicaid will not cover the RSV vaccine if it is administered at a pharmacy.

Divestments: What are they and why are they important?

By the GWAAR Legal Services Team (for reprint)

What is a Divestment?

Divestment is a term related to long-term care Medicaid. It is defined as the giving away of something for less than fair market value. This could mean giving something away as a gift or for less than the item is worth in the commercial market. A divestment can be done intentionally by giving someone money, or unintentionally by not doing something that the person should have done.

Here are some examples of divestments:

- selling one's home at a discounted price;
- adding a person's name to the deed of a house if they did not pay towards the purchase of it;
- giving away a life estate or remainder interest in a home property without being paid for it;
- agreeing to waive a debt that is owed by another person;
- adding a person's name as a joint owner to a bank account, and then allowing that person to withdraw money from the account for their own personal spending;
- paying off debts or loans that the person is not legally obligated to pay for;
- donating more than 15% of a household's annual income to a religious or charitable organization;

- refusing to accept an inheritance, settlement, or other lump sum of money the person is entitled to;

Why is it important to be aware of divestment policy issues?

If a person makes a divestment, a divestment penalty period may be imposed upon them if they later apply for long-term care Medicaid benefits. For example, if a person makes a \$100,000 divestment, then they will be ineligible for long-term care Medicaid for 323 days—that's almost a full year!

Do divestment penalties apply to all forms of Medicaid?

No, divestment penalties only apply to long-term care Medicaid, including institutional Medicaid (in the nursing home or hospital), FamilyCare, IRIS, PACE, and Partnership. Divestment penalties do not apply to card-services Medicaid (BadgerCare+, MAPP, Medicaid deductible, categorically needy Medicaid, etc.). Under federal law, divestment penalties also do not apply to Medicare Savings Programs such as QMB, SLMB, and SLMB+.

If a divestment penalty is assessed but inaccurate, how can that be resolved?

A person who is assessed a divestment penalty but believes it to be inaccurate can call the local [Income Maintenance Consortium](#) to discuss the situation. They can also file an appeal with the [Division of Hearings and Appeals](#), a state agency that decides Medicaid appeals in Wisconsin. Be aware that there is a 45-calendar day appeal window and there are no provisions for late appeals.

Where can more information on divestments be found?

For more information, look at the [Medicaid Eligibility Handbook](#), section 17 or the [WI DHS website](#).

Marketplace Enrollment Reminders

By the GWAAR Legal Services Team (for reprint)

Don't forget that Open Enrollment for 2024 health insurance coverage through the Marketplace ends January 16, 2024! If you enroll in a health insurance plan before January 16, 2024, your coverage will start February 1, 2024. After Open Enrollment ends, you will only be able to enroll in a Marketplace plan for 2024 coverage or switch Marketplace plans if you qualify for a Special Enrollment Period (SEP).

You may qualify for a Marketplace SEP if you experience a:

- Loss of qualifying health insurance coverage, also known as "minimum essential coverage." Some examples of qualifying coverage include coverage through a job or through another person's job, Medicaid coverage, or Medicare Part A. Please note that Medicare Part B and Part D are not considered qualifying coverage.
- Change in household size. For example, you may get married or divorced, have a baby or adopt a child, or gain a dependent through a court order.
- Change in primary place of living. This may include moving to a new home in a new ZIP code or county, moving to the U.S. from a foreign country, moving to or from a place of seasonal employment, or moving to or from a shelter or other transitional housing.

- Change in eligibility for Marketplace coverage. This includes becoming newly eligible for Marketplace coverage because you became a citizen or were lawfully admitted for permanent residence or because you became newly eligible for Marketplace coverage after being released from incarceration. You may also become eligible for an SEP if you are enrolled in Marketplace coverage and report a change that makes you newly eligible for help paying for coverage, newly ineligible for help paying for coverage, or eligible for a different amount of help paying for out-of-pocket costs.
- Another situation that kept you from enrolling in coverage during an Open Enrollment Period, like being incapacitated, a victim of a natural disaster, or being affected by another type of national or local emergency or disaster. You may also qualify for an SEP if you submitted documents to the Marketplace to confirm your eligibility for coverage, like immigration paperwork, and did not enroll in coverage while you waited for those documents to be reviewed.

In general, you have 60 days following the qualifying event to enroll in a plan or change plans. Depending on the type of SEP, you may also have 60 days before the event to enroll in a plan. In addition, you may qualify for an ongoing monthly SEP to enroll in Marketplace coverage or switch plans if you are not eligible for Medicaid and your income is at or below 150% of the Federal Poverty Level.

- There are several ways to apply for Marketplace coverage. You can apply:
- Online at www.healthcare.gov,
- By phone at 1-800-318-2596,
- With in-person help from local enrollment assisters or insurance agents or brokers (you can search for local help here: <https://localhelp.healthcare.gov/#/>), or
- With a paper application, available at: <https://marketplace.cms.gov/applications-and-forms/marketplace-application-for-family.pdf>.

To enroll in coverage, first pick a plan. After you submit your application, you may be asked to send documents that confirm you qualify for an SEP. Your coverage start date will be based on when you pick a plan, but you will not be able to use your coverage until it is confirmed that you qualify for an SEP and you make your first premium payment.

Please note that Marketplace plans are not for people who have job-based health insurance, Medicare, Medicaid, or VA coverage. If you already have this type of coverage or are eligible for it, you will most likely not be eligible for premium tax credits. In addition, if you have Medicare, it is illegal for an insurance company to sell you a Marketplace plan. Medicare and the Marketplace are two completely different programs.

Navigating the Upcoming Medicare General Enrollment Period and the Medicare Advantage Open Enrollment Period

By the GWAAR Legal Services Team (for reprint)

In January 2024, two important annual Medicare enrollment periods will kick off: the Medicare General Enrollment Period (GEP) and the Medicare Advantage Open Enrollment Period (OEP). It is important that

consumers understand the GEP and Medicare Advantage OEP so that they can make good choices for their health care.

Let's discuss each in turn:

Medicare General Enrollment Period:

Each year, from January 1 through March 31, the Medicare GEP provides individuals with the opportunity to sign up for Medicare Part B if they did not already enroll during their Initial Enrollment Period (IEP) or during a Part B Special Enrollment Period. Beneficiaries who have to pay a premium for Medicare Part A are allowed to sign up for Part A during the GEP if they did not enroll during their IEP. Most people do not have to pay a premium for Part A and can enroll in it at any time after they become eligible for Medicare. Individuals who sign up for Part A or Part B during the GEP may have to pay a penalty for late enrollment.

When a person signs up for Part A or Part B during the GEP, their coverage begins the first day of the following month. So, if someone signs up for Medicare Part B in February, their coverage would start on March 1.

New in 2024, if a person has to pay a premium for Part A and they sign up for Part B during the GEP, they can also join a Medicare Part D drug plan after they sign up for Part B. They will have 2 months to join a drug plan after signing up for Part B. Their drug coverage will start the month after the plan receives their enrollment request.

If an individual already has Part A coverage and signs up for Part B for the first time during the GEP, they can also join a Medicare Advantage Plan. Their coverage will start the first day of the month after signing up for the Medicare Advantage Plan.

Special Note: If the GEP ends on a Saturday, Sunday, or legal holiday (and in 2024, it will end on a Sunday), Social Security will allow beneficiaries to [enroll at its offices the following Monday \(or first regular workday\)](#). In addition to in-person enrollment, Social Security will honor a written enrollment request, as long as it is stamped by the last day of the GEP (March 31).

Medicare Advantage Open Enrollment Period:

January 1 through March 31 is also the annual Medicare Advantage OEP. This is a time when someone who already has a Medicare Advantage Plan can switch to a different Medicare Advantage Plan, with or without drug coverage. An individual can also drop their Medicare Advantage Plan and go back to Original Medicare. If they return to Original Medicare, they can also join a Medicare Part D drug plan.

An individual can only make one change during the OEP, and any changes they make will be effective the first of the month after the plan receives their request. If a person is returning to Original Medicare and joining a separate Medicare Part D drug plan, they do not have to contact their Medicare Advantage Plan to disenroll. The disenrollment will happen automatically when they join the drug plan.

Note that certain actions cannot be taken during OEP. These include:

- An individual who does not already have a Medicare Advantage Plan on January 1 cannot enroll in one for the first time during OEP. So, for example, a person with Original Medicare cannot switch to a Medicare Advantage Plan during the OEP.

- Individuals with special types of Medicare plans, such as Medicare Savings Accounts, cost plans or Programs of All-Inclusive Care for the Elderly (PACE), cannot make changes, including dropping their plan or switching to a different plan, during OEP.
- Individuals with Original Medicare cannot join a separate Medicare drug plan during OEP.
- Persons with a stand-alone Medicare prescription drug plan cannot switch or drop their Part D plan during OEP.



AARP Foundation Tax-Aide

AARP Foundation Tax-Aide volunteers will be providing in-person tax preparation to Clark County area residents, with a focus on taxpayers who are over 50 and have low to moderate income.

This free program is funded by AARP Foundation and the Internal Revenue Service and supported locally by Clark County ADRC. Local volunteers, who are trained and IRS-certified, will prepare and then electronically file Federal, Wisconsin and Homestead Credit tax returns.

To have your 2023 income tax returns prepared, call Clark County ADRC at (715) 743-5166 to make an appointment. Appointments will be scheduled in Neillsville Thursday and Friday between 8:30 AM and 2:15 PM starting February 16 and ending March 15. **Walk-in appointments will not be accepted.**

Other local AARP Foundation Tax-Aide sites are in Marshfield at the 2nd Street Community Center, Call 1-877-947-2211.





Photo Courtesy of Pixabay.com

Did you Know...

Turnips are not a true root vegetable but a swollen part of the stem.

Garlic has anti-inflammatory and antioxidant properties that may help reduce heart disease risk.

EAT WELL, AGE WELL. January – Turnips and Garlic

Turnips are high in many vitamins, minerals, fiber, and water making them a healthy vegetable available even in the winter months. While we usually only eat the bulb, the leaves are also edible and a good source of many vitamins and minerals. Due to their mild flavor, turnips pair well with other seasonal "root" vegetables like carrots, onions, and potatoes.

- Storage: Remove green top; store bulb in dry, sealed container
- Preparation: Peeling before cooking can help remove bitter taste. Can be roasted, boiled, and mashed.

Garlic is one of the oldest cultivated crops. Garlic contains several phytochemicals, or plant compound, which help reduce inflammation and heart disease risk. Garlic stores well meaning fresh garlic can be available year-round.

- Storage: Keep at room temperature, not in refrigerator
- Preparation: Smash garlic with flat side of knife to remove peel before mincing, or use a garlic press after removing peel. Can be sauteed, roasted, baked, or raw and added to most any dish.

SPARK YOUR MEMORIES

Sharing your story with your loved ones means more than you know.

Follow our newsletters as we ask some great “SPARK” questions to reminisce those great memories.



“Spark” Cards

What was the longest driving trip you ever took?



GWaar
Greater Wisconsin
Agency on Aging Resources, Inc.



ADAPTIVE EQUIPMENT

The ADRC office has several pieces of DME equipment available in our Loan Closet. Call for further details 715-743-5166. We are also accepting donations of unused/unopened incontinence garments.

WINTER WORD SEARCH

D Y P P H S N H R N V S U O G E U A
D R W Q B O S E B C B C Y S I Q O E
U A V Q D K T A W N G A D K E P H X
B U U S G D R N V O G R K I Q H Z P
S R X F N K I K C Q Y F Q I J Q M T
X B B R I O S R I H M E K N E H E K
O E T O T Z W C M D O E A G K K K M
G F A S A Z H M X R R C A R C D K O
J W O T K I Y B A A G Q O A V U V O
K Y C B S C K L U N I K J L P J H L
X R C I H I B E R N A T E Y A T G G
R A M T E C J S A I P R J J F T I I
E U N E C L S A S F R E E Z E D E A
B N T Q I E O M E T V N F C T G L M
M A I O L U L T I C H I L L Y J S R
E J X N S D S S R A F A E R A J G E
C J U R E M T I R M C O Q J B W S T
E C O L D V I R U M I T T E N S X N
D L I Y E Q C H L P N N T C B G Q I
H S L O L W E C F D S R W P M U Z W

CHILLY
CHRISTMAS
COAT
COLD
DECEMBER
FEBRUARY

FLURRIES
FREEZE
FROSTBITE
HIBERNATE
HOT CHOCOLATE
ICE SKATING

ICICLE
IGLOO
JACKET
JANUARY
MITTENS
NEW YEAR

SCARF
SKIING
SLEIGH
SNOWMAN
SOLSTICE
WINTER

January 2024



Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1 New Years Day	2	3	4	5 BINGO Greenwood Center @ 11:30	6
7	8	9 Loyal Library Lunch & Learn Call library to sign up 715-255-8189	10	11	12 BINGO Greenwood Center @ 11:30	13
14	15	16 Greenwood Library Lunch & Learn Call library to sign up 715-267-7103 StrongBodies Greenwood Fire Hall 1:00 to 2:00	17	18 StrongBodies Greenwood Fire Hall 11:00 to 12:00	19 BINGO Greenwood Center @ 11:30	20
21	22	23 StrongBodies Greenwood Fire Hall 11:00 to 12:00	24	25 StrongBodies Greenwood Fire Hall 11:00 to 12:00	26 BINGO Greenwood Center @ 11:30	27
28	29	30 StrongBodies Greenwood Fire Hall 11:00 to 12:00	31			



ADRC Director

Lynne McDonald

ADRC Financial / Nutrition Manager

Lynn Crothers

ADRC Admin. Assistant

Kim Stetzer

Elder Benefit Specialist

Terri Esselman

Disability Benefit Specialist

Crystal Rueth

I&A Specialist

Hannah Quicker

Michelle Berdan

ADRC Newsletter Online:

<http://www.co.clark.wi.us/index.aspx?NID=767>

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