

October/November 2023

# Newsletter



Toll Free: 866-743-5144

Office: 715-743-5166

Fax: 715-743-5240

# To All Veterans



**Whether At Home Or Abroad**

**Active Duty ~ Reserves ~ Retired**

**All Americans Say:**

**THANK YOU!**

## The Short History of Veterans Day

Originally called "Armistice Day," Veterans Day was intended to serve as a time that would remind nations to always strive for peaceful relationships. Over the decades, the date took on new significance as more worldwide conflicts erupted into war. The twists and turns in the holiday's history include:

November 11,  
**1918**

The Allied Nations  
and Germany  
agree to put an  
end to World War I



June 28,  
**1919**  
WWI  
officially  
ends.



November  
**1919**

President Woodrow  
Wilson proclaims  
November 11 as the  
first commemoration  
of Armistice Day



May 13,  
**1938**

An Act is approved  
that designates  
November 11 an  
annual legal holiday  
known as "Armistice  
Day."



June 1,  
**1954**

The Act of 1938  
and replaces the  
word "Armistice"  
with "Veterans."



October 8,  
**1954**

President  
Eisenhower issues  
the first "Veterans  
Day Proclamation"



June 28,  
**1968**

The Uniforms  
Holiday Bill assigns  
the fourth Monday  
of October as  
Veterans.



October 25,  
**1971**

The first Veterans Day  
under the new law is  
observed, but not  
without widespread  
resistance and  
confusion.



September 20,  
**1975**

The annual  
observance of  
Veterans Day to  
November 11.  
Beginning in 1978.



**November 11, 1918** – The Allied Nations and Germany agree to put an end to World War I with an armistice on “the 11th hour of the 11th day of the 11th month.”

**June 28, 1919** – WWI officially ends with the signing of the Treaty of Versailles in France.

**November 1919** – President Woodrow Wilson proclaims November 11 as the first commemoration of Armistice Day. Celebrations include parades and public gatherings as well as a brief cessation of business activities beginning at 11:00 a.m.

**May 13, 1938** – An Act is approved in the United States that designates November 11 an annual legal holiday known as “Armistice Day.” At this time, the day is intended to honor World War I veterans.

**June 1, 1954** – In the aftermath of World War II and the Korean War, the 83rd Congress amends the Act of 1938 and replaces the word “Armistice” with “Veterans.” This allows November 11 to honor all veterans. President Dwight D. Eisenhower signs the legislation.

**October 8, 1954** – President Eisenhower issues the [first “Veterans Day Proclamation”](#)

**June 28, 1968** – The Uniforms Holiday Bill assigns the fourth Monday of October as Veterans Day to make it one of four three-day weekends for federal employees. Many states disapprove and continue to celebrate the holiday on November 11.

**October 25, 1971** – The first Veterans Day under the new law is observed, but not without widespread resistance and confusion.

**September 20, 1975** – President Gerald R. Ford signs Public Law 94-97 to return the annual observance of Veterans Day to November 11, beginning in 1978. If November 11 falls on a Saturday or Sunday, we celebrate the holiday on the previous Friday or Monday. This policy honors the intentions of the Uniforms Holiday Bill while also respecting Americans who feel strongly about the holiday’s significance. The Veterans Day [National Ceremony](#) commences precisely at 11:00 a.m. every November 11th at Arlington National Cemetery. A wreath is laid at the Tomb of the Unknowns, and celebrations continue inside the Memorial Amphitheater to thank and honor all who have served in the United States Armed Forces.

Veterans Day holds great historical and patriotic value for many in our country, and by marking the date annually, we reinforce our national values of duty, honor, selflessness, civic responsibility, and passion for our country.



Are you interested in enjoying a cup of coffee, a nutritious meal, talking with old friends, and meeting new ones?

## Colby Senior Care Presents:



Monday through Friday  
Come one day or  
every day!

\$9.00/meal

Coffee starts at 11:30am  
Lunch Served at 12:00pm

 Colby Senior Care

510 West Wausau Street, Colby, WI 54421

**Starting Monday October 23, 2023**

.....  
We have partnered with the Clark County ADRC Program and if you are 60 years or older you may qualify to have them cover the cost of your meal! We can assist you with exploring this option!  
.....

Per ADRC, we are required to provide you the opportunity to contribute to the cost of this service. The actual cost to our agency to provide this meal is \$9.00 per meal. Contributions to help offset the cost of meals are essential to maintaining nutrition services for our community's older adults. The suggested contribution is \$4.50 per meal. Please contribute what your budget allows. You will not be denied a meal if you are unable to contribute. We are committed to protecting the privacy of your contributions.  
.....

Everyone is welcome! You do not need to reside in Clark County to join us at Chat & Chew. Please call **715-223-1612** to reserve your spot 24 hours in advance of the day you are requesting!

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](mailto: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](http://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](http://www.esmmweighless.com)



# Medicare Card Scams: Tips for Protecting Yourself and Your Medicare

By the SMP Resource Center

In 2018, Medicare updated the Medicare card from containing a person's Social Security number to a random identifier that includes numbers and letters. That was the last time the card was updated and there is no plan to update it again.

## What Does the Card Look Like?

The card from Medicare is a paper card that has a blue banner on the top, a white middle, and a red banner on the bottom. However, you can print your own in black and white.



## Examples of Medicare Card Scams

Someone calls you claiming:

- You are getting a new, plastic Medicare card.
- Medicare is switching to a card with chip in it.
- It's a new year so you need a new card.
- You need a black and white card.
- They need your Medicare number to see if you have received your new one yet.
- They need you to verify your Medicare number so they can confirm you have the correct Medicare card.

## What Can You Do to Stop New Medicare Card Scams?

- Do not answer calls from numbers you do not recognize.
- Do not confirm your Medicare number or answer "Yes" to any question.
- Guard your Medicare card and number like a credit card! Don't share your number, laminate it, make copies, or let anyone else make a copy.

## How Can Your Senior Medicare Patrol (SMP) Help?

Your local SMP is ready to provide you with the information you need to PROTECT yourself from Medicare fraud, errors, and abuse; DETECT potential fraud, errors, and abuse; and REPORT your concerns. SMPs and their trained teams help educate and empower Medicare beneficiaries in the fight against health care fraud. Your SMP can help you with your questions, concerns, or complaints about potential fraud and abuse issues. It also can provide information and educational presentations.

Visit your local Senior Medicare Patrol (SMP) at: [www.smpwi.org](http://www.smpwi.org) or call (888) 818-2611.

This project was supported, in part, by grant number 90MPC0002 from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official Administration for Community Living policy.

SMP SCAM WATCH

# Don't Say Yes

- "Can you hear me?"
- "Are you on Medicare?"
- "Do you have your red, white, and blue card?"
- "Are you a veteran?"

These are all questions phrased to get the caller to say "yes" in an attempt to record and process fraudulent products or services billed to Medicare.

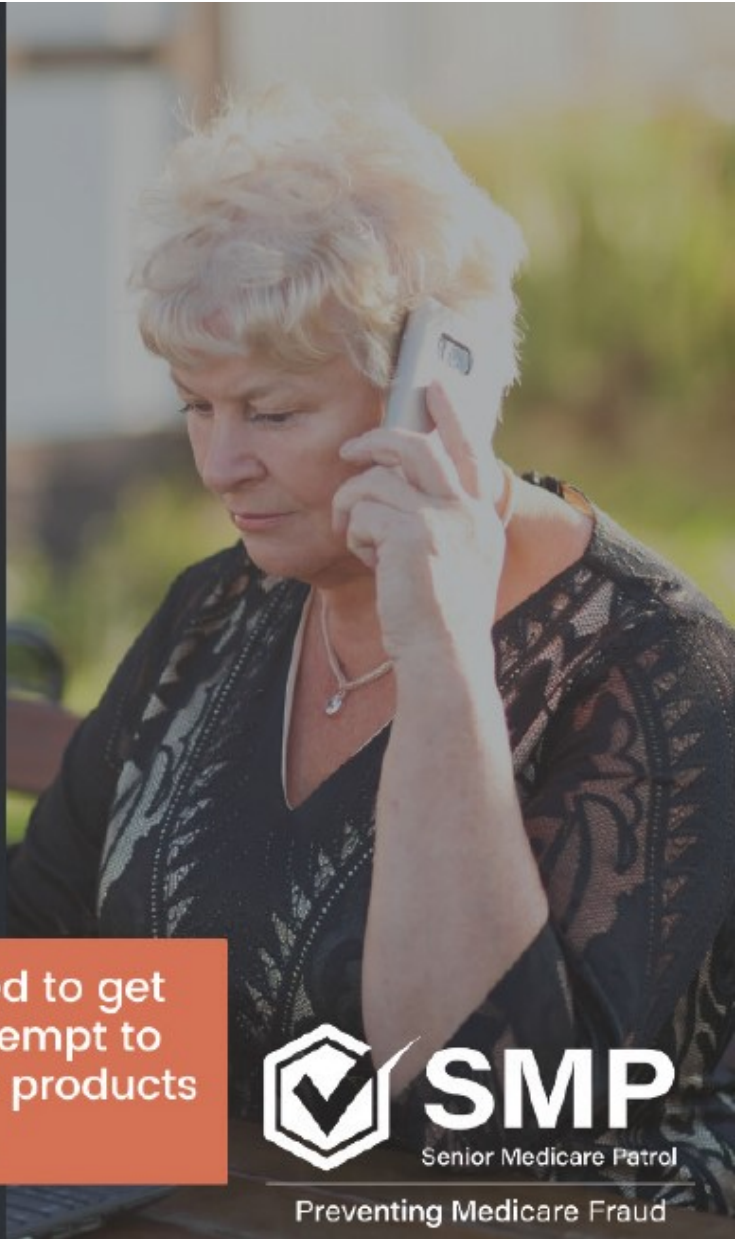
SUPPORTED BY GRANT # 90MPC0002 FROM ACL



**SMP**

Senior Medicare Patrol

Preventing Medicare Fraud



## 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 in need of wheelchairs in good condition.

We are also accepting donations of unused/unopened incontinence garments.

# Marketplace Open Enrollment Starts November 1

*By the GWAAR Legal Services Team (for reprint)*

Open enrollment for 2024 health insurance coverage through the Marketplace started November 1 and ends January 15, 2024. If you enroll in a health insurance plan before December 15, 2023, your coverage will start January 1, 2024.

If you don't have health insurance through your job, Medicare, Medicaid, the Veterans Administration (VA), or another source, the Marketplace can help you get coverage. Marketplace health insurance plans provide coverage for benefits like doctor visits, inpatient and outpatient hospital care, prescriptions, mental health services, and laboratory tests. Marketplace plans are also required to provide coverage for pre-existing medical conditions. That means that a plan cannot reject you, charge you more, or refuse to pay for care for any condition you had before your coverage started.

What you pay for Marketplace insurance depends on your expected income for the year. You may qualify for a premium tax credit that lowers your monthly insurance bill. In addition, some people are eligible for extra savings on out-of-pocket costs like deductibles and copayments.

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.

There are several ways to apply for Marketplace coverage. Starting November 1, you can apply:

- Online at [www.healthcare.gov](https://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>.

In order to apply, you will need to provide information about your household size, income, and any current health insurance coverage. Even if you currently have a Marketplace plan, it's a good idea to review your application information to make sure it is up-to-date. In addition, you should make sure that your plan is still the best fit for you.

If you do not sign up for a 2024 Marketplace plan by January 15, 2024, and you do not have another type of health insurance coverage, it may be very difficult for you to find health insurance if you need it later. Outside of Open Enrollment, you can only enroll in a Marketplace plan if you have a special enrollment period. Examples of events that might give you a special enrollment period include getting married, losing your health insurance, or moving to a new county or zip code.

### **\*CORRECTION\***

## **Please note the following corrected numbers from this article published in October, 2023: FoodShare Numbers Change October 1, 2023**

*By the GWAAR Legal Services Team (for reprint)*

The following eligibility numbers will be in effect beginning October 1, 2023:

<b>Household Size</b>	<b>Gross income limit (Categorical eligibility) 200% FPL</b>	<b>Gross income limit (Change reporting required if household member(s) have earnings) 130% FPL</b>	<b>Maximum Benefit per month</b>
<b>1</b>	\$2,430	\$1,580	\$291
<b>2</b>	\$3,288	\$2,137	\$535

Household Size	Net Income Limit 100% FPL	Household Asset Limit	Maximum Benefit per month
1	\$1,215	\$4,250	\$291
2	\$1,644	\$4,250	\$535

**Income limit:** Gross income is less than or equal to 200% FPL or, if gross income exceeds 200% of FPL, the net income of the EBD household is less than or equal to 100% of the FPL.

**Asset limit:** There is NO ASSET LIMIT for households with gross income less than or equal to 200% FPL; for households qualifying via net income, there is a household asset limit of \$4,250.

If an elder (age 60+) or disabled household cannot purchase and prepare food separately, they can apply as a separate household if the combined gross monthly income of persons living with the elder/disabled person and his/her spouse does not exceed 165% FPL (\$2,005/\$2,712). Do not count the income of the elder/disabled person and his/her spouse in this calculation.

	Oct. 1, 2022 – Sept. 30, 2023	Oct. 1, 2023 – Sept. 30, 2024
<b>Minimum Allotment</b>	\$23	\$23
<b>Maximum Excess Shelter Deduction</b>	\$624	\$672
<b>Standard Deduction</b>	Group 1-3: \$193 Group 4: \$193 Group 5: \$225 Group 6 or more: \$258	Group 1-3: \$198 Group 4: \$208 Group 5: \$244 Group 6 or more: \$279

## Standard Utility Allowances Oct. 1, 2023 – Sept. 30, 2024

	Amount	Type of Utility Allowance
HSUA	\$502	Heating
LUA	\$347	No heat, with at least two other qualifying expenses
EUA	\$144	Electric
WUA	\$99	Water and sewer
FUA	\$42	Cooking fuel
PUA	\$30	Telephone
TUA	\$26	Garbage and trash

## 2024 Medicare Costs

*By the GWAAR Legal Services Team (for reprint)*

The Centers for Medicare & Medicaid Services (CMS) recently released the 2024 premiums, deductibles, and coinsurance amounts for Medicare Part A and Part B as well as the 2024 income-related monthly adjustment amounts for Part B, Part B-ID, and Part D.

### Medicare Part A Costs

Most Medicare beneficiaries do not have a Part A premium because they paid Medicare taxes while working for long enough to qualify for premium-free Part A. Typically, this means for at least 10 years. People who do not qualify for premium-free Part A may be able to buy it by paying a monthly premium. In 2024, the premium will either be \$278 or \$505 each month, depending on how long a beneficiary or beneficiary's spouse worked and paid Medicare taxes.

Part A covers inpatient hospitalizations, skilled nursing facility care, hospice, inpatient rehabilitation, and some home health care services. The Part A inpatient hospital deductible covers the first 60 days of inpatient hospital care in a benefit period. Beneficiaries must pay a coinsurance amount for additional days of hospital care. For skilled nursing facility care, beneficiaries do not pay anything for the first 20 days, but they must pay a daily coinsurance for days 21 through 100. In 2024, these costs will be as follows:

- Inpatient hospital deductible: \$1,632
- Daily hospital coinsurance for 61<sup>st</sup>-90<sup>th</sup> day: \$408
- Daily hospital coinsurance for lifetime reserve days: \$816
- Skilled nursing facility daily coinsurance for 21<sup>st</sup>-100<sup>th</sup> day: \$204

#### Medicare Part B Costs

Part B covers physicians' services, outpatient hospital services, some home health care services, durable medical equipment, and some other services that are not covered by Part A. In 2024, beneficiaries enrolled in Part B will pay a monthly premium of \$174.70. In addition, they will pay an annual deductible of \$240.

Individuals whose full Medicare coverage ended 36 months after a kidney transplant and who do not have other insurance that covers immunosuppressive drugs, may enroll in the Part B Immunosuppressive Drug (Part B-ID) benefit. This benefit only covers immunosuppressive drugs. It does not cover any other items or services. In 2024, beneficiaries enrolled in Part B-ID will pay a monthly premium of \$103.

#### Income-Related Monthly Adjustment Amounts for Part B, Part B-ID, and Part D

Beneficiaries who are on Medicare and who have higher incomes may have to pay a higher monthly premium amount for their Part B, Part B-ID, and prescription drug coverage. These higher premiums are called "Income-Related Monthly Adjusted Amount" (IRMAA). Fewer than 5 percent of people with Medicare will pay an IRMAA, so most people are not affected.

Whether a beneficiary must pay an IRMAA depends on the beneficiary's tax filing status and yearly income from two years ago. That means that in 2024, an IRMAA will be based on the beneficiary's 2022 tax return, as shown in the table below.

If your yearly income in 2022 was:			You pay each month (in 2024) for <u>Part B</u>	You pay each month (in 2024) for <u>Part B-ID</u>	You pay each month (in 2024) for <u>Part D</u>
File individual tax return	File joint tax return	File married & separate tax return			
\$103,000 or less	\$206,000 or less	\$103,000 or less	\$174.70	\$103.00	Plan premium
above \$103,00 up to \$129,000	above \$206,000 up to \$258,000	Not applicable	\$244.60	\$171.70	\$12.90 + plan premium
above \$129,000 up to \$161,000	above \$258,000 up to \$322,000	Not applicable	\$349.40	\$274.70	\$33.30 + plan premium
above \$161,000 up to \$193,000	above \$322,000 up to \$386,000	Not applicable	\$454.20	\$377.70	\$53.80 + plan premium
above \$193,000 and less than \$500,000	above \$386,000 and less than \$750,000	above \$103,000 and less than \$397,000	\$559.00	\$480.70	\$74.20 + plan premium
\$500,000 or above	\$750,000 or above	\$397,000 or above	\$594.00	\$515.10	\$81.00 + plan premium





Welcome to the 2023 - 2024 Wisconsin Home Energy Assistance Program season! WESTERN DAIRYLAND is pleased to be able to assist Clark, Trempealeau, and Eau Claire County residents in applying for the WHEAP program!

Beginning October 1, you can apply for energy assistance in order to determine if your household is eligible for a one-time benefit toward heating costs and electric costs. The application process can be done with our staff over the phone or you may complete and submit a paper application. The deadline to apply for this season is **on or before 5/15/2024**.

Eligibility for this year's program is based on household size and gross income received in the month prior to your date of application. If your household gross income (before taxes and other deductions) is less than the amount shown on the chart below, you may be eligible:

Household Size	ONE Month	Annual Income
1	\$2,820.67	\$33,848
2	\$3,688.58	\$44,263
3	\$4,556.50	\$54,678
4	\$5,424.50	\$65,094
5	\$6,292.42	\$75,509
6	\$7,160.33	\$85,924
7	\$7,323.00	\$87,876
8	\$7,485.75	\$89,829

Did you know that if you are eligible for WHEAP benefits, you may also be eligible for other services such as Energy Crisis situations, Weatherization Services, Furnace Repair or Replacement for homeowners (whose furnace or boiler stops working), and the new Water Conservation Program? Contact us to learn more!!

**CONTACT WESTERN DAIRYLAND NOW to begin your application for Energy Assistance!**

**PHONE: 715-836-7511**

**EMAIL: [energy@wdeoc.org](mailto:energy@wdeoc.org)**

**WEBSITE: [westerndairyland.org](http://westerndairyland.org)**





## PHONE A FRIEND

If you would like to be added to the Phone A Friend call list for daily or weekly calls please contact the ADRC at 715-743-5166. Your name will be passed onto a volunteer who will be making the calls.

# HAPPY THANKSGIVING



## EYE EXAMS FOR SENIORS...

Seniors need the most eye care. By age 65, 1-in-3 Americans have some form of vision-impairing eye disease. Poor vision doesn't have to be a normal part of aging. By detecting and treating eye disease early through annual, dilated eye exams, seniors can preserve their sight. As with any health concern, it's better to catch it early than wait until symptoms occur. If you're noticing a change in vision, however gradual it may be, contact your eye doctor to schedule an exam.



### WHAT TO EXPECT FROM YOUR EXAMINATION

Annual eye exams not only allow the doctor to monitor your vision, but also your overall eye health. During an annual eye health exam your eye doctor will be looking closely for:

**GLAUCOMA** - There are several ways that eye care professionals monitor patients for glaucoma. Eye pressure measurements like "the puff of air" are taken to evaluate the intra-ocular pressure. Sometimes additional tests of the optic nerve and peripheral vision are needed to further evaluate if glaucoma is a concern.

**MACULAR DEGENERATION** - Following dilation of the eyes, your eye doctor will take an in depth look at your retina, specifically the macula, which is the part of the retina that provides detailed, central vision. Through this assessment, your eye doctor can determine the presence or absence of ARMD. Additional testing may be performed to take an in depth look at the macula to determine the severity of degeneration.



**DIABETIC RETIOPATHY** - Since diabetes is a vascular disease, it can affect the blood vessels of the retina. When the retinal blood vessels change, it is called diabetic retinopathy. It is important for all diabetics to have annual dilated eye exams and we work hand in hand with your primary care doctor to make sure your retina stays healthy.

**CATARACTS** can interfere with vision, but they rarely pose any health concern for the eye. Cataract severity is best determined with a dilated eye exam.

Annual eye exams for seniors are important. If you have questions regarding when your last eye examination was, be sure to contact your eye doctor.

A banner for HealthView eye care centers. On the left is the logo, which consists of a stylized eye icon followed by the text "HealthView" in a large font and "eye care centers" in a smaller font below it. To the right of the logo is a photograph of four smiling staff members: a woman with blonde hair, a man with short brown hair, a woman with long brown hair, and a woman with long blonde hair. Below the photograph, the names of the optometrists are listed: "DR. JULIE THUMS", "DR. MATHEW MERGENTHALER", "DR. BETSY MEINEL", and "DR. BREANNA HOFFMANN". To the left of the names, the word "OPTOMETRISTS" is written. Above the names, the contact information for the two locations is provided: "MEDFORD 715-748-2020" and "COLBY 715-223-4003".

**HealthView**  
eye care centers

MEDFORD 715-748-2020  
COLBY 715-223-4003

OPTOMETRISTS DR. JULIE THUMS DR. MATHEW MERGENTHALER DR. BETSY MEINEL DR. BREANNA HOFFMANN



# Adult Flu Vaccines

## Clark County Health Department



### **Appointment or Walk-In:**

Mondays - 2:30pm to 4:00pm

Clark County Health Department

517 Court Street, Room 105, Neillsville, WI 54456

Immunization Hotline: 715-743-5292

**Indianhead Community Action Agency will be offering a \$25 gift card incentive for individuals age 55+ and/or for individuals with disabilities.**

### **Available to those with certain insurance plans or self-pay.**

#### **Insurance Plans:**

Medicaid/BadgerCare+  
Security Health Plan  
Security Administrative Services  
UMR  
Blue Cross Blue Shield  
Medicare

#### **Self-Pay:**

Adult Standard  
(\$40)  
High-Dose  
(\$88)

### **Available Flu Vaccines:**

Adult Standard Dose  
FluLaval  
(Age 19+)

High-Dose  
Fluzone  
(Age 65+)

(While Supplies Last)

# 2023-2024 mRNA COVID-19 Vaccine

## What?

- mRNA COVID-19 vaccines include Moderna and Pfizer brands.
- Monovalent (single) component COVID-19 vaccine.
- Updated to more closely target circulating variants.
- Corresponds to the Omicron variant XBB.1.5.
- Provides better protection against serious consequences of COVID-19, including severe illness, hospitalization, and death.



## Who?

- Recommended for everyone 6 months and older.

## When?

- Ages 5 Years and Older: One dose at least 2 months since last COVID-19 vaccine.
- Ages 6 Months - 4 Years and Immunocompromised (All Ages): One, two, or three doses based on previous COVID-19 vaccine status, and number of prior doses.

The Clark County Health Department (CCHD) only has Moderna COVID-19 vaccines available for:

Children (6 Months - 18 Years): Children who meet one of the criteria below (VFC Program).

- Enrolled or eligible for Medicaid.
- Do not have health insurance.
- Health insurance does not cover the COVID-19 vaccine.
- American Indian or Alaska Native



Adults (19 Years+): Adults who do not have health insurance, or their health insurance does not cover the COVID-19 vaccine.

Other potential COVID-19 vaccine locations include primary care providers, local pharmacies, etc. Visit [vaccines.gov](https://www.vaccines.gov) to find COVID-19 vaccine locations.



For an appointment to receive a Moderna COVID-19 vaccine, please call the CCHD Immunization Hotline: 715-743-5292.

# COVID-19 Isolation & Exposure



## Isolation Period = 5 Days

(Tested Positive for COVID-19)

### No Symptoms

- Day 0 = Day of positive test.
- If develop symptoms, clock restarts at Day 0 on day of symptom onset.
- Release after Day 5.

### Symptoms

- Day 0 = Day of symptom onset.
- Release after Day 5 if fever-free for 24 hours without the use of fever-reducing medications, and symptoms are improving.
- Release after Day 10 if you experienced shortness of breath or had difficulty breathing.
- If you were hospitalized or have a weakened immune system, consult with your doctor.

### Regardless of Symptoms - Through Day 10

- Try to avoid being around others who are more likely to get sick.
- Wear a mask when around others indoors.



## Exposed to COVID-19

### No Symptoms

- Wear a mask through Day 10, and follow other COVID-19 precautions.
- Day 0 = Day of exposure.
- Test on Day 5.
  - If positive, follow isolation period instructions.
  - If negative, continue taking precautions through Day 10.

### Symptoms

- Stay home and get tested.
  - If positive, follow isolation period instructions.
  - If negative, continue taking precautions through Day 10.



### More Information

- Isolation: [cdc.gov/coronavirus/2019-ncov/your-health/isolation.html](https://www.cdc.gov/coronavirus/2019-ncov/your-health/isolation.html)
- Exposure: [cdc.gov/coronavirus/2019-ncov/your-health/if-you-were-exposed.html](https://www.cdc.gov/coronavirus/2019-ncov/your-health/if-you-were-exposed.html)

# Unwanted or Unneeded Disposal

## SHARPS

## MEDICATIONS

## ACCEPTED MEDICATIONS

**Marshfield Medical Center-  
Emergency Room Entrance**  
611 Saint Joseph's Avenue  
Marshfield, WI 54449  
Available 24/7

**Clark County Sheriff's Office**  
517 Court Street  
Neillsville, WI 54456  
Available 24/7  
(715) 743-5278

Prescriptions: medication, patches, or ointments, over-the-counter medications, vitamins, samples, and pet medications.

Must be in a puncture resistant container.

**Colby-Abbotsford Police Department**  
112 W. Spruce Street  
Abbotsford, WI 54405  
Mon-Fri: 9:00am-4:00pm  
(715) 223-2313 (Ext. 2)

**Aspirus Stanley Hospital**  
1120 Pine Street  
Stanley, WI 54768  
Main Entrance  
Mon-Fri: 7:00am-4:00pm

**Loyal Police Department**  
301 N. Main Street  
Loyal, WI 54446  
Mon-Fri: 8:00am-4:30pm  
(Appointment Only) (715) 255-8986

## NOT ACCEPTED MEDICATIONS

Must be in a biohazard sharps container.

**Thorp City Hall**  
300 W. Prospect Street  
Thorp, WI 54771  
Mon-Fri: 8:00am-4:30pm

Hydrogen peroxide, inhalers, thermometers, needles (sharps), aerosol cans, and lotions or liquids. Business or clinic owner drop-offs.

**Owen City Hall**  
833 W 3rd Street  
Owen, WI 54460  
Outdoor-Available 24/7

**NO** need to be in a red biohazard sharps container.

**MMC-Neillsville**  
N3708 River Avenue  
Neillsville, WI 54456  
Clinic Entrance  
Mon-Fri: 7:00am-6:00pm

Must be in a biohazard sharps container.



Information compiled by: Clark County Health Department  
Updated: 7/26/23

# End of Life Planning



Wisconsin  
Department of Health Services

## Advance Directives

An advance directive describes, in writing, your choices about the treatments you want or do not want or about how health care decisions should be made for you if you become incapacitated and cannot express your wishes. Anyone who is of sound mind and age 18 or older may complete these forms. Wisconsin laws created two forms of advance directives for health care – the [living will](#) and the [power of attorney for health care](#).

- A [living will](#) (Declaration to Physicians) allows you to select the kind of life-sustaining care you would want if injury or illness leaves you in a terminal condition (dying) or a persistent vegetative state with no hope of recovery.
- A [health care power of attorney](#), you appoint someone to be your “agent” to make all health care decisions – not just those involving life support – for you if you lose the ability to make decisions for yourself.

In addition, you can also appoint someone to handle your financial matters using a [Power of Attorney for Finances and Property](#).

[Your Right to Direct Your Future Health Care Needs: Who Will Make Your Medical Decisions When You Can't](#) (PDF, 104 KB), is a publication from the Department that provides additional information and resources regarding advance directives.

[Consumer's Tool Kit for Health Care Advance Planning](#)([link is external](#)), from the American Bar Association, includes question and answer forms to help you and your family think and talk about end-of-life health care issues.

## Do-Not-Resuscitate (DNR) Information

Under [Subchapter III of Wis. Stat. Chapter 154](#)([link is external](#)), an attending physician may issue a do-not-resuscitate order for a "[qualified patient](#)([link is external](#))," as defined in [Wis. Stat. s. 154.17 \(4\)](#)([link is external](#)).

As defined in [Wis. Stat. s. 154.17 \(2\)](#)([link is external](#)) , a do-not-resuscitate order directs emergency medical technicians, first responders and emergency health care facilities personnel not to attempt cardiopulmonary resuscitation on the person for whom the order is issued if that person suffers cardiac or respiratory arrest. The purpose of a do-not-resuscitate order is to ensure

that medical care provided in the emergency department and out-of-hospital settings is consistent with the patient's desire and the attending physician's authorization.

[Visit the DNR page for more information on:](#)

- Issuing a DNR order (attending physician responsibilities)
- Revoking a DNR order
- DNR identification bracelets
- Ordering materials

## Organ Donation

The [Wisconsin Donor Registry](#)([link is external](#)) allows a person to legally authorize the gift of their organs, tissues and eyes upon their death. This decision can save and improve lives through transplantation, therapy, research, and education.

[Visit the Organ Donation Program](#) for more information on the registry and:

- Forms related to organ, tissue and eye recovery
- Donor designation data
- Donation events
- Donation organizations

## Access to and Privacy of Health Information

Federal and state laws govern your right to get, read and, in some cases, change the information in your medical records. They also protect the privacy of your medical records and other types of health information. These laws have been interpreted in different ways by different health care providers, but some general information on your rights and protections under these laws is available from the following sources.

[Health Information Privacy for Consumers](#)([link is external](#)), from the United States Department of Health and Human Services (HHS), includes information on how the privacy rule of the Health Insurance Portability and Accountability Act (HIPAA) may allow you to access your medical records while at the same time protect the privacy of your health information.

[Wisconsin Consumer's Guide to Health Information Privacy](#): A guide to health information privacy that takes into account HIPAA and laws specific to Wisconsin.

[HIPAA - Frequently Asked Questions](#)(link is external), also from HHS, provides answers to a wide variety of questions about access to and privacy of medical records and information covered by HIPAA. Some of the general topics covered include:

- Release of information to [family and friends](#)(link is external)
- Information available from [hospital directories](#)(link is external)
- Rights of [personal representatives](#)(link is external) of patients
- Rights to [access my medical records](#)(link is external)
- Release of information in a [severe disaster](#)(link is external)
- Release of information in a [national or public health emergency](#)(link is external)

[Medical Privacy](#)(link is external) from the [Privacy Rights Clearinghouse](#)(link is external) provides information about your rights and protections on medical information in various settings and circumstances.

## Legal Help

[Health Care: Answering Your Legal Questions](#)(link is external), published by the State Bar of Wisconsin.

If you need legal help, the [State Bar of Wisconsin](#)(link is external) website provides [general information on finding a lawyer](#)(link is external) and information on [finding a lawyer if you have a low income](#)(link is external).

The [Legal Services Corporation](#)(link is external), a private, non-profit corporation established by Congress, provides a list of [local legal aid programs](#)(link is external) from its website.

Source: Wisconsin Department of Health Services



Check us out on Facebook for updates, tips and more information provided especially for you.

Aging & Disability Resource  
Center of Clark County

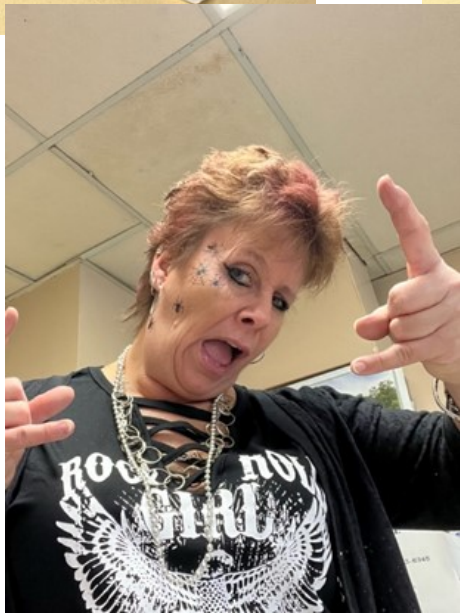


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# OWEN SENIOR CENTER



Nutrition Education



Halloween fun and  
Rocker Girl







## Foot Flush for Toilets

Simple daily tasks that many people take for granted can become difficult for the elderly or persons with disabilities. Many individuals struggle with dexterity, reach range, balance, and physical barriers that prevent them from doing daily tasks. One prominent barrier for individuals can be toileting, it is a necessity, but can become an overwhelming task. One piece of assistive technology that may ease the barrier of flushing is the Foot Flush. The Foot Flush is a hands free flushing device for toilets. This device is designed for those experiencing barriers from arthritis, pain, reach range, and physical barriers. It is easy to install and works on most standard toilets. The handle of the toilet will still work if the foot flush is installed.

If you would like more information on Foot Flush or any other assistive technology devices that could potentially improve your independence, please call CILWW at 715-233-1070 or 800-228-3287. CILWW provides services at no cost to the individual, and are not a funding source to purchase the assistive technology.

*There are various services available through the assistive technology program at CILWW as a part of the WisTech Assistive Technology Program. Our agency can provide information on WisTech's alternative financing options (WisLoan, Telework, and TEPP) per request.*





# Native American Heritage Month

## Did you Know...

Native American Heritage Month first evolved from "American Indian Week," which President Reagan proclaimed on the week of November 23-30, 1986. In 1990, President George H. W. Bush approved a joint resolution designating November 1990 as National American Indian Heritage Month. It was later changed to Native American Heritage month under President Barack Obama.

For centuries, indigenous people across Wisconsin have relied on traditional diets not only as food, but also as a source of medicine touting the healing properties of Native foods.

Often times the food that was most beneficial to the people of that area were the foods that were most readily available. Foods were rich in nutrients and vitamins because they came right from the earth like fish, wild game, foods from plants like berries, fiddle ferns, dandelions, and cattails. Foods such as these (many which we still have access to today) were the source of "good health" for the Native American people.

For example, wild rice is a long-standing food in the traditional Native American diet. Harvesting this grain goes back thousands of years in the tribal communities of Wisconsin. Wild rice provides a

good amount of magnesium when eaten. If you have low levels of magnesium, it can result in high blood pressure, heart disease, type 2 diabetes and other diseases. (Mayo Clinic)

Conversely, according to the CDC, in recent years heart disease is the leading cause of death in Native Americans nationwide and Diabetes is the fourth leading cause of death. It begs the question, "Would these statistics be different today if Native Americans were able to eat like they did in the past?" If they could ingest more foods that were from their traditional diet; rich in nutrients, minerals, and vitamins, Like wild rice?

When Native Americans speak of food is medicine, this in part is what they are describing. The foods most closely tied to their traditional diets are the foods the provide the most benefits to their health.

Traditional diets included a balance of carbohydrates, protein and essential vitamins and minerals. This balance was achieved by interplanting corn, bean and squash which are often referred to as The Three Sisters. The sturdy corn stalks provided support for the beans to climb while the vines of the squash provided shade to trap moisture in the soil.

## Did you Know...

According to the 2020 U.S. Census 2.5% of Wisconsin residents identified as being American Indian and Alaska Native alone or in combination. The counties with the highest populations include Menominee, Sawyer, Forest, Ashland, Bayfield, Vilas, Shawano and Jackson. Which makes sense because there are tribal communities or reservations located within those counties.

# Italian Hot Dish

## Ingredients

- 1-1/2 cups uncooked multigrain bow tie pasta (about 4 ounces)
- 1 pound lean ground beef (90% lean)
- 1 cup sliced fresh mushrooms, divided
- 1/2 cup chopped onion
- 1/2 cup chopped green pepper
- 1 teaspoon dried oregano
- 1/2 teaspoon garlic powder
- 1/4 teaspoon onion powder
- 1/8 teaspoon pepper
- 1 can (15 ounces) tomato sauce
- 1/2 cup shredded part-skim mozzarella cheese, divided
- 2 tablespoons grated Parmesan cheese, divided

## Directions

1. Preheat oven to 350°. Cook pasta according to package directions for al dente; drain.
2. Meanwhile, in a large skillet coated with cooking spray, cook and crumble beef with 1/2 cup mushrooms, onion and green pepper over medium-high heat until no longer pink, 5-7 minutes. Stir in seasonings and tomato sauce: bring to a boil. Reduce heat, simmer, covered, 15 mins.
3. Place pasta in a 8-in square baking dish coated with cooking spray. Top with meat sauce and remaining mushrooms. Sprinkle with 1/4 cup mozzarella cheese and 1 tablespoon Parmesan cheese.
4. Bake, covered, 35 mins. Uncover, sprinkle with remaining cheeses. Bake until heated through and cheese is melted, 5-10 mins.

## Nutrition Facts

1 serving: 394 calories, 15g fat (6g saturated fat), 82mg cholesterol, 704mg sodium, 32g carbohydrate (5g sugars, 5g fiber), 34g protein. **Diabetic Exchanges:** 3 lean meat, 2 starch, 2 vegetable, 1/2 fat.

# Thanksgiving Word Search

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

England  
 third  
 Wampanoag Indians  
 thankful  
 turkey  
 November  
 harvest  
 football  
 cornucopia  
 New World  
 acorn

maize  
 Abraham Lincoln  
 voyage  
 tablecloth  
 Pecan pie  
 Native American  
 gravy  
 feast  
 cornbread  
 bread



celery  
 Sarah Hale  
 vegetables  
 sweet potato  
 pumpkin pie  
 Mayflower  
 grateful  
 Squanto  
 Colonists  
 beans

symbol  
 yams  
 customs  
 settlers  
 Plymouth  
 Massachusetts Bay Colony  
 gobbler  
 family  
 celebrate  
 bake

Thursday  
 wishbone  
 tradition  
 ham  
 Pilgrim  
 holiday  
 friends  
 cranberries  
 casserole  
 autumn

# November 2023



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





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