

INCOME CHANGES FOR THE MEDICARE SAVINGS PROGRAM

The NEW Medicare Savings Program (MSP) income guidelines effective March 2019

Medicare Savings Program (MSP) effective 3/19			SSA COLA (1/19) 2.8 %		2019 SSI \$771 (one) or \$1157 (couple)	
Program	Status	Income Limit	Status	Income Limit	GLOSSARY QMB - Qualified Medicare Beneficiaries SLMB - Special Low Income Medicare Beneficiaries ALMB -Additional Low Income Medicare Beneficiaries	
QMB (Q01) 211% FPL	Single	\$2,196.51 / mo	Couple	\$2972.99/ mo		
SLMB (Q03) 231% FPL	Single	\$2,404.71/ mo	Couple	\$3,254.79/ mo		
ALMB (Q04) 246% FPL	Single	\$2,560.86/mo	Couple	\$3,466.14/ mo		
Medicaid (Husky C) (for those 65+, blind or with a disability)	Single	\$972.49 (region A) \$862.38(reg. B & C)	Couple	\$1483.09 (reg. A) \$1374.41 (reg. B & C)		
Husky A (155% FPL) Caretakers w/ children < 19 years For two: Magi: \$2,183.95/mo						

Benefits of the Medicare Savings Program Explained in Detail: All three levels of the Medicare Savings Program pay the Medicare Part B premium and help pay for Medicare's prescription benefits, (called the Low Income Subsidy or "Extra Help" federal program).

The LIS or "Extra Help" program pays the full cost of Medicare Part D benchmark plans or a portion of a non-benchmark plan. "Benchmark" plans are those that offer basic benefits and have premiums at or below the national average premium. The Extra Help program also covers the yearly deductible for Part D plans and allows you to have prescription co-pays that cannot exceed \$3.40 for generic drugs/\$8.50 for brand drugs. The coverage remains the same during the coverage gap.

PLEASE NOTE: * The Medicare Savings Program allows you to change your Medicare Part D prescription coverage **once a quarter** for 2019. *QMB is the only level that covers the costs of the deductibles or co-pays for Medicare Part A and Medicare Part B up to the Medicaid approved rate. * ***If a provider agrees to treat you***, federal law protects you from being "balanced billed", or billed for services after Medicare has paid its portion of the bill, whether or not the provider is a Medicaid provider. * If you have earned income from a job, the first \$65.00 is not counted and the remaining earned income is counted as ½ for MSP eligibility. * If you have a spouse who works and is not on Medicare, the total earned by your spouse is counted.

Any questions, please contact the WCAAA CHOICES department at 203-757-5449 Ext. 134.

Article By: Diane DiLeo-Millas, WCAAA-Staff

IMPORTANT MESSAGE FOR MEDICARE BENEFICIARIES:

Have you not received your Medicare Card yet or lost your new Medicare Card?

Please contact Medicare directly at 1-800-MEDICARE (1-800-633-4227); there may be something that needs to be corrected, like your mailing address. Know that you can still use your old card to get health care services until January 1, 2020.



Watch out for scams: Medicare will never call you uninvited and ask for personal or private information to get your Medicare Number and card. Scam artists may try to get personal information (like your Medicare Number) by contacting you about your new card. If someone asks you for your information, for money, or threatens to cancel your health benefits if you don't share your personal information, hang up and call MEDICARE or contact the Senior Medicare Patrol at: 1800-994-9422

Source: <https://www.medicare.gov/newcard/>



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Western CT Area Agency on Aging 06-5310



NEW INCOME GUIDELINES EFFECTIVE MARCH 2019

Please consider these new income guidelines when applying for the following programs.



2019 Benefits Quick Guide Rev. March 2019

Medicare Part A 2019 Premium, Deductibles & Co-pays			2019 Medicare Part B Premiums & Deductibles		
Part A Premium	(30-39 quarters) (30 quarters)	\$240 per month \$437 per month	PART B Those with annual incomes: \$85,001-\$107,000 (single) or \$170,001-\$214,000 (married)		\$135.50 per month
Hospital Deductible	(per benefit period deductible)	\$1,364	\$107,001-\$133,500 (single) or \$214,001 - \$267,00 (married)		\$189.60 per month (2019) Part D (+ \$12.40 to premium 2019)
Hospital Co-pays	Days 61-90 Days 91-150	\$341 per day \$682 per day	For those over these amounts...		\$270.90 per month (2019) Part D (+ \$31.90 to premium 2019)
Skilled Nursing facility Co-Pay	Days 21-100	\$ 170.50 per day	Part B Deductible		Visit www.ssa.gov \$185 per year (2019)
Medicare Savings Program (MSP) effective 3/19			SSA COLA (1/19) 2.8 % 2019 SSI \$771 (one) or \$1157 (couple)		
Program	Status	Income Limit	Status	Income Limit	NO ASSET LIMITS FOR MSP No Estate Recovery after 1/1/10 DSS Benefits Line: 1-855-626-6632 Income(143% TFA) listed includes Husky C unearned income disregard of \$339/single & \$678/couple if each has unearned income Assets: \$1600 single; \$2,400 couple
QMB (Q01) 211% FPL	Single	\$2,196.51 / mo	Couple	\$2972.99 / mo	
SLMB (Q03) 231% FPL	Single	\$2,404.71/ mo	Couple	\$3,254.79/ mo	
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Husky A (155% FPL)	Caretakers w/ children < 19 years		For two	Magi: \$2,183.95/mo	Husky A eff 3/19
If you qualify for MSP, you will automatically qualify for Extra Help and the lower co-pays for Part D					
Medicare Part D Low Income Subsidy (LIS) for 2019 LIS level 1 CO-PAYS FOR MEDICATIONS: \$3.40 - FORMULARY GENERIC DRUGS \$8.50 - FORMULARY BRAND NAME DRUGS LIS Level 2: Medicaid recipients up ≤ 100% FPL: \$1.25/3.80 Max \$17 per month Medicaid Waiver/perm. SNF-no co-pays (LIS Level 3) 2019 CT LIS Benchmark Premium- \$36.20 2019 \$33.19 base premium to calculate penalty Max Income (1/11/19)/Assets for Partial Subsidy (2019)			Medicaid Expanded Benefits (3/19) HUSKY D		CT Health Insurance Exchange Access Health CT Benefits Center- 1-855-805-4325 www.accesshealthct.com Open enrollment Nov 1, 2019 – Jan 31, 2020 DSS applications mailed to: DSS Connect Scanning Center P.O.Box 1320 Manchester, CT 06045-1320 New W-1LTC Medicaid LTSS - send to LTSS Application Ctrs Or apply online: www.connect.ct.gov Questions only DSS Benefits Line: 1-855-626-6632
LIS Single (150%FPL)	\$1,581*- *Includes \$20 disregard	Assets under \$14,390* (1/19) *includes \$1500 burial	Household size	MAGI Monthly Income (138%)	
LIS Couples	\$2,134*-	Assets under \$28,720* (1/19)	1 person	\$1436	
Partial dual eligible pay deductible of \$85 then 15% copayment up to \$5,100 in 2019 then \$3.40/\$8.50			Couple	\$1945	
FPL	Eff 1/11/19	Couple	No asset limit restrictions Age 19-64 without Medicare without children. MAGI income. Apply at www.accesshealthct.com Supplemental Nutrition Assistance Program (SNAP)-eff 10/18 Information below is for 60 years old or older or persons with a disability Single person net income - \$1012/ mo (max benefit \$192) Couple net income – \$1,372 / mo (max benefit \$353) There is no asset limit EXCEPT for members whose gross income is more than 185% of the FPL. Updated annually in October (asset limit over 185%: \$3,500)		
100% FPL	Single	\$1,409			
150% FPL	\$1041	\$2,114			
\$1561					
CT Energy Assistance Program (CEAP) 10/18 Began accepting applications August 1, 2018					
Household Size	60% median income	*Vulnerable households receive a higher basic benefit: Vulnerable Households include a household member who is age 60+ or a person with a disability, or child under age 6. (basis benefit \$725 up to 100% FPG; \$190 for renters) Crisis Assistance for those unable to secure primary deliverable fuel may be eligible for additional \$710. Asset Limits apply: Homeowners - \$15,000 Renters - \$12,000 Households (including renters) with up to 60% of median income can qualify if rent is more than 30% of gross income. Households with liquid assets that exceed these amounts may qualify if gross income, when added to excess liquid assets, is within guidelines.			
1 person	\$35,116	First date of delivery: 11/14/18 1-800-842-1132			
2 people	\$45,920	Eligible for winter protection shutoff: 11/1/18-5/1/19			
3 people	\$56,725				
4 people	\$67,530				
5 people	\$78,335				
6 people	\$89,140				
CHOICES 1-800-994-9422 Funded in part by the Administration for Community Living Grant Eff 3/1/2019					

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“WHAT’S COVERED” APP: Access Your Medicare Information on Your Mobile Device



Quickly see whether Original Medicare covers a specific medical item or service. Medicare beneficiaries and their caregivers can access what is covered by Original Medicare on their mobile devices. The new app, called, “What’s Covered?” launched by the Centers for Medicare and Medicare Services (CMS) is the latest tool in CMS’s e-Medicare initiative started in 2018. The e-Medicare initiative was designed to provide beneficiaries with cost and quality information related to Medicare. See instructions below on how to download the app to your device.

This new app is one of many new tools that CMS has added to their new online service: CMS designed this tool to empower Medicare beneficiaries, maximization of their Medicare coverage through personal management. For those who would like to learn about other online tools, go to: <https://www.Medicare.gov>.

To manage your personal Medicare information on line, create a MyMedicare account by going to <https://www.MyMedicare.gov>. Once you set up your personal account, you can receive your Medicare Summary Notices (MSN) and Explanation of Benefits (EOB) online along with other important information. Remember to review your MSNs and EOBs to ensure you are being billed for the correct services. If you discover information on those notices that appear to be in error, contact Medicare at 1 800 Medicare, your provider, the hospital or the pharmacy. If you need assistance with this, please contact WCAAA’s Senior Medicare Patrol at 1 800.944.9422.

To download the free “What’s Covered?” app which is available in both Google Play and the Apple App Store go to: Google Play at: <https://play.google.com/store/apps/details?id=gov.medicare.coverage>
Apple App Store at: <https://itunes.apple.com/us/app/whats-covered/id1444143600?mt=8>

Article by: Amanda Halle—WCAAA-Staff

Source: CMS Press Release dated February 6, 2019 at cms.gov/newsroom



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The Connecticut Department of Veterans Affairs Mobile Application allows Connecticut Veterans and residents to access crisis assistance by phone, text, and online chat.

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US TAX DEADLINE IS APPROACHING

Just a Few Days Left!



The last day to file your taxes is April 15, 2019. Keep in mind that if your due date falls on a Saturday, Sunday, or legal holiday, the due date is delayed until the next business day. Your

return is considered filed on time if the envelope is properly addressed, postmarked, and deposited in the mail by the due date.

Need More Time? You should request an extension of time to file. To receive an automatic 6-month extension of time to file your return, you must file Form 4868, by the due date of your return. This gives you until October 15th to file your tax return NOT pay your taxes. This will save you up 25% or the 5% per month failure to file penalty on the tax debt amount. If you owe no taxes (but rather a refund) there will be no penalty assessed.

An extension of time to file is not an extension of time to pay. You may be subject to a late payment penalty on any tax not paid by the original due date of your return; this means that you need to pay all or up to 90% of taxes owed (if you owe taxes). In fact, if the IRS does not get 90% of your estimated taxes owed on April 15th, the failure to pay penalty of .5% compounded monthly will take effect on the tax debt amount.

Remember: If you don't file, you cannot get a refund (if due) and you only have 3 years to file a return in order to get a refund.

Source: <https://www.irs.gov/filing/individuals/when-to-file>

DID YOU KNOW?

I do not have a car of my own, and I wanted to



Dear Marci

learn more about how Medicare covers medical transportation. When does Medicare cover transportation in an ambulance? Does it cover ambulette transportation?

-Paula (Fayetteville, AR)

Dear Paula,

Medicare Part B covers emergency ambulance services and, **in limited cases**, non-emergency ambulance services. Medicare considers an emergency to be any situation when your health is in serious danger and you cannot be transported safely by any other means. If your trip is scheduled when your health is not in immediate danger, it is not considered an emergency.

Part B covers **emergency ambulance services** if:

- An ambulance is medically necessary, meaning it is the only safe way to transport you
- The reason for your trip is to receive a Medicare-covered service or to return from receiving care

You are transported to and from certain locations, following Medicare's coverage guidelines

- And, the transportation supplier meets Medicare's ambulance requirements

To be eligible for coverage of **non-emergency ambulance services**, you must:

- Be confined to your bed (unable to get up from bed without help, unable to walk, and unable to sit in a chair or wheelchair)
- Or, need essential medical services during your trip that are only available in an ambulance, such as administration of medications or monitoring of vital functions

★ Original Medicare **never** covers the services of ambulettes, wheelchair vans, or litter-vans. These are wheelchair-accessible vans that provide non-emergency transportation. Medicare also **does not** cover ambulance transportation just because you lack access to alternative transportation. **Medicare Advantage Plans must cover the same services as Original Medicare**, and may offer some additional transportation services. Check with your plan to learn about its coverage of non-emergency ambulance transportation.

Note that if you are receiving skilled nursing facility (SNF) care under Part A, most ambulance transportation should be paid for by the SNF. The SNF should not bill Medicare for this service.

Under Original Medicare, Part B covers medically necessary emergency and non-emergency ambulance services at 80% of the Medicare-approved amount. In most cases, you pay a 20% coinsurance after you meet

your Part B deductible (\$185 in 2019). All ambulance companies that receive Medicare payments must be participating providers who accept assignment in all cases. If you have a Medicare Advantage Plan, contact your plan to learn about the costs of ambulance transportation.

-Marci

Dear Marci is a biweekly e-newsletter designed to keep you—people with Medicare, social workers, health care providers and other professionals—in the loop about health care benefits, rights and options for older Americans and people with disabilities. "This information is republished with the permission from the Medicare Rights Center. For more info visit source www.medicarerights.org." On the internet: The URL is www.medicareinteractive.org.

APPLYING FOR MEDICARE AFTER THE AGE OF 65

Most people are aware that they need to apply for Medicare on or before their 65th birthday. Things become a little more complicated if one continues to work after 65 and continues to receive benefits from a health plan offered by a current employer.

So how does one apply for benefits, if they do not retire until they are 69, 70 or later? If one has neither part A or part B, one has 8 months to sign up after your employment ends. This is called a Special Enrollment period. Generally, there is no late penalty during this time.

The prescription part of the Medicare Program works a little differently. Once one has separated from employment, he or she is allowed 63 days to enroll in a creditable prescription drug plan, without a penalty. Cobra, which may be offered by many employers is not considered CREDITABLE coverage. One will not be eligible for a special enrollment and will have penalties to pay. It is important to clearly understand the Medicare Program to avoid paying extra fines that can last a lifetime. For instance, if one does not take any medications, it is still mandated that one have a prescription drug plan. General advice is to sign up for the cheapest plan and cover the mandate.

If you are unsure how your health insurance would work with Medicare, please call our office and ask to speak to a CHOICES counselor to avoid paying additional fees down the road that could last a lifetime.



WCAAA's CHOICES is a program here to help you. Call us 203 757-5449 or 1-800-994-9422

Article by: Darylle Willenbrock –WCAAA Staff
Source: MEDICARE & You book 2019

FALLS PREVENTION

Reducing Your Risks of Falling

Did you know that falls are the leading cause of fatal and non-fatal injuries for older Americans? One in four Americans aged 65+ falls each year. Falls threaten the safety and independence of seniors and create huge financial and personal costs. Many older Americans fear falling, and as a result, limit their activities and social activities. This can cause further physical decline, depression, social isolation and feelings of hopelessness. The good news is, there are many things you can do to reduce the risk of a fall.



Four things YOU can do to prevent falls:

1. Talk Openly With Your Healthcare Provider about fall risks and preventions. Ask your provider to review your medications. Sometimes interactions between medications can make a fall more likely – and some medications put you at much greater risk for a fall. Certain ones can make you sleepy or dizzy. As you get older the way medications work in your body can change. Tell your provider right away if you do have a fall, or if you worry about falls, or feel unsteady. Ask your healthcare provider about taking vitamin D supplements to improve bone, muscle and nerve health.

2. Exercise to Improve Balance & Strength. Exercises that improve balance and make your legs stronger, lower your chance of falling. Exercise has so many other benefits as well; it can make you feel better and more confident. Lack of exercise leads to weakness and increases your chances of falling. Ask your doctor or healthcare provider about the best type of exercise program for you. There also may be educational programs available in your community that can introduce you to exercises to increase strength in your trunk, legs and ankles. One of these programs is called “Matter of Balance”. You can call your senior center and ask about programs like this.

3. Have Your Eyes, Ears & Feet Checked. Once a year, schedule a check-up with your eye doctor, and update your glasses if needed. You may have a condition like cataracts or glaucoma that limits your vision. Poor vision can increase your chances of falling. Researchers have also found a link between impaired hearing and falls, so having your hearing tested periodically can also reduce your risk of falling. And finally, have your healthcare provider check your feet each year. Discuss well-fitting, proper footwear, and avoid “flip-flop” type sandals. Ask whether seeing a foot specialist is advised, especially if you have certain medical conditions, such as diabetes.

4. Make your home safer. Remove things you can trip over, (such as paper, books and shoes) from stairs and

places you walk. Remove small throw rugs, or use a good double sided tape to keep them from slipping. Keep items you use often, in places you can reach them easily without using a step stool. Have grab bars put in next to, and in the tub, and next to the toilet. Use non-slip mats in the bathtub in on shower floors. Improve lighting in your home. As you get older you need brighter light to see well. Have handrails and lights installed on all staircases.

Many falls can be prevented if you take action before you’re at risk. Not only will you be safer, you’ll know that YOU can be in control of your safety and health, before a fall occurs.

Article By: Debbie Kaszas—WCAAA Staff

Source: <https://www.cdc.gov/steady/>

LIVANTA MEDICARE APPEALS

Learn About your Rights!

If you are being discharged from a nursing home or hospital because Medicare will no longer cover your stay, but do not feel healthy enough to leave? You have the right to file an appeal. In the State of Connecticut, Livanta handles all appeals and quality of care complaints for people who are on Medicare. This service is provided free of charge to Medicare recipients.

When you have Medicare and are going to be discharged from a health care facility, you will be given a notice in writing called “An Important Message from Medicare.” The notice explains how you can appeal your discharge. If you wish to file an appeal, you must call the Livanta hotline. In order to facilitate the process and avoid being charged for services while the appeal is pending, you should call the hotline immediately upon receiving the notice. After Livanta receives the phone call to start the appeal, they contact your healthcare provider to request your medical record and they send it to their physician reviewer. The physician reviewer decides whether or not you are healthy enough to be discharged. You will then receive a phone call and a letter from Livanta with the decision. Livanta also handles quality of care complaints. A complaint relates to concerns about quality of care or other services you receive from a Medicare provider.

If you wish to file a complaint or an appeal, you can call Livanta at 866-815-5440 and select option 1. When you call, you will be asked for your Medicare number, address and phone number, date of birth, date of service and the full name and contact number of the facility or health care provider. More information on appeals, quality of care issues and frequently asked questions can be found at www.livanta.com.

Article By: Bill Shugrue—WCAAA-Staff

Source: Livanta “www.livanta.com” for Medicare case review

THE INTERNET, SENIOR CITIZENS AND TRANSPORTATION-LIKELY OR UNLIKELY COMBINATION?

A Message from April Chaplin-Northwest CT Regional Mobility Manager



As the Northwest Regional Mobility Manager in Connecticut (covering 45 towns) for the past 2+ years, I have learned as much from seniors, veterans and people with disabilities I present to as they have learned from me about available transportation options in their area. There are many reasons God gave us two ears and one mouth, and now I will share with you what it is I have learned from listening, not just hearing them.

In this continuing world of almost daily gigantic leaps and bounds in technology, it's a wonder anyone but our fascinating, budding adolescents can figure out our new smartphone, updates, apps, settings, etc. You wouldn't believe the number of people who tell me when they have an issue, they have their son, daughter or grandchild help them out....and I am no exception and use new technology every day! Now imagine how frustrating this may be to a senior citizen or person with a disability who may be just beginning navigating a smart phone?? Now what if they should need access to public and private transportation at the same time??!! Holy smokes! Do you get the picture?!

Let's look at some facts: According to a Pew Foundation Center Survey, there are 46 million seniors living in the U.S. today and 15% of this population is aged 65 and over. Encouragingly, senior citizens are steadily embracing the new digital/technologically advanced era and broadening their online presence. How about this? 4 in 10 or 42% of adults 65 and over now own a smartphone! This statistic is up dramatically from 18% in 2013! This should be a perfect combination of evolving changes when we think about public and paratransit services online for our aging populations, right? Well, No! Because a staggering one third of adults aged 65 and over state that they never use the internet! Half of them do not have internet at home. The Pew Foundation Center Survey also mentions that like our population as a whole, "...there are also substantial differences in technology adoption within the population based on factors such as age, household income and educational attainment." For transportation, we can safely translate this into meaning those with less access, money and education are more likely to need the public and paratransit reduced fare transportation options.

So what do we do with this information? Fortunately for us, here in the Western Area of Connecticut, our major transportation providers: Northeast Transportation Company, Northwest Transit District and HARTransit do not rely solely on mass communications and information through the internet. They remain accessible through telephone and continue to provide paper information and education, as I do. *It is vital to keep services accessible to our population in the ways that make the most sense for them, not us.* As your Mobility Manager in the north-western corner of Connecticut, The Kennedy Center, Inc. and I will continue to supply you with tutorials and information in paper form and will assist you navigating the internet for Transportation when you are ready.

On the same token, for all of you tech savvy, digitally connected senior citizens....Congrats! Not an easy feat! We are here for you with websites, internet tools and on-line booking and ride passes! GoGoGrandparent got this right! "GoGoGrandparent acts as your agent to help you use Lyft with just a phone call"-GoGoGrandparent. 1 (855) 464-6872. Please reach out to me whether you are one individual or a group needing direction, education, resources or information on transportation options; Know How To Go presentations for seniors, people with disabilities, veterans and providers. The Kennedy Center, Inc.'s Mobility Services Department truly is a One Stop Shop for Transportation. achaplin@kennedyctr.org (475) 298-3103 April Chaplin, MSHS – Northwest CT Regional Mobility Manager.



Article by: April Chaplin, MSHS– Northwest CT Regional Mobility Manager

Sources: Facts-The Pew Research Center <http://www.pewinternet.org/2017/05/17/tech-adoptionclimbs-among-older-adults/>.



REMINDER TO JOIN OUR CAMPAIGN: The five Area Agencies on Aging have started a campaign to end ageism. We are asking you to join our campaign by taking the pledge on our website at: <http://wcaaa.org/home/stop-ageism-now>. Together, we can bring awareness to society and break down the chain of unfair policies. Let's unite our voices and STOP AGEISM NOW!

WAS “HEALTHY EATING” PART OF YOUR NEW YEAR’S RESOLUTION?

If So, Then You Might Want To Keep Reading This

As the year goes by, we find it more and more difficult to commit with our New Year’s resolutions. But don’t worry, you are not the only one! For this reason, the editorial staff at Today’s Caregiver Magazine gives us some tips to keep up with a healthy diet. Not only will you receive endless healthy benefits, but you will also have the satisfaction of knowing you complied with your New Year’s resolution

Use these tips to choose foods for better health at each stage of life.

- ⇒ Make half your plate fruits and vegetables.
- ⇒ Eat a variety of vegetables, especially dark-green, red, and orange varieties. Choose “reduced sodium” or “no salt added” when buying canned vegetables.
- ⇒ Make at least half your grains whole (wheat).
- ⇒ Switch to fat-free or low-fat milk. These usually have same amount of calcium and other essential nutrients, but less fat and fewer calories.
- ⇒ Vary your protein choices: seafood, nuts, beans, lean meat, poultry, soy, and eggs. Select lean meats or poultry. At least twice a week, make fish and seafood the protein on your plate.
- ⇒ Cut back on sodium and empty calories from solid fats and added sugars.
- ⇒ Drink water instead of sugary drinks, sodas, fruit-flavored drinks, sweetened teas, and coffees.
- ⇒ Season foods with spices and herbs instead of salt.
- ⇒ Use heart healthy oils like: olive, canola, and sunflower in place of butter or shortening when cooking.
- ⇒ About 30 minutes of exercise daily is recommended to maintain a healthy lifestyle.

Article by: Sandy Taylor, WCAAA-Staff

Sources: Simple Tips from Registered Dietitians, by Editorial Staff at www.caregiver.com
<http://caregiver.com/articles/simple-tips-registered-dietitians/>

UPCOMING LIVE WELL WORKSHOPS:

Don’t miss out the following workshops hosted by the Live Well program. If you are interested in attending, please call to enroll.

DSMP – Diabetes Self-Management Workshop
CDSMP – Chronic Disease Self-Management Workshop
CPSMP – Chronic Pain Self-Management Program

***Long Hill Bible Church DSMP**
131 Garden Circle, Waterbury, CT
April 2nd -May 7th, Tuesdays, 4:00-6:30pm
For more information/to enroll: 203-527-6446

***Winsted Health Center CDSMP**
115 Spencer Street, Winsted, CT
April 30th -June 4th, Tuesdays, 9:30-noon
For more information/to enroll: 860-379-0888

***Maplewood at Newtown CDSMP**
166 Mount Pleasant Road, Newtown, CT
May 23rd -June 27th, Thursdays, 9:30-noon
For more information/to enroll: 203-426-8118

***Waterbury Senior Center CPSMP**
1985 E. Main St., Waterbury, CT
June 26th -August 7th, Wednesdays, 9:30-noon. For more information/to enroll: 203-574-6746





"It's Your Life...Live It Well"



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FREE 6-WEEK WORKSHOP!

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Learn skills to manage your diabetes or prediabetes like healthy eating, foot care, physical activity and dealing with stress. Set small, achievable goals to help you take charge of your diabetes!

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- ✓ Learn about low and high blood sugar
- ✓ Explore healthful menu planning
- ✓ Learn to talk with your health care provider about your health

JOIN US!

Learn the Tools to Manage and Take Control of Your Health!

Live Well is an evidence-based self-management workshop developed at Stanford University. This program is supported by funds made available for the Centers for Disease Control and Prevention, Office of State, Tribal, Local & Territorial Support under grant DP13-905.





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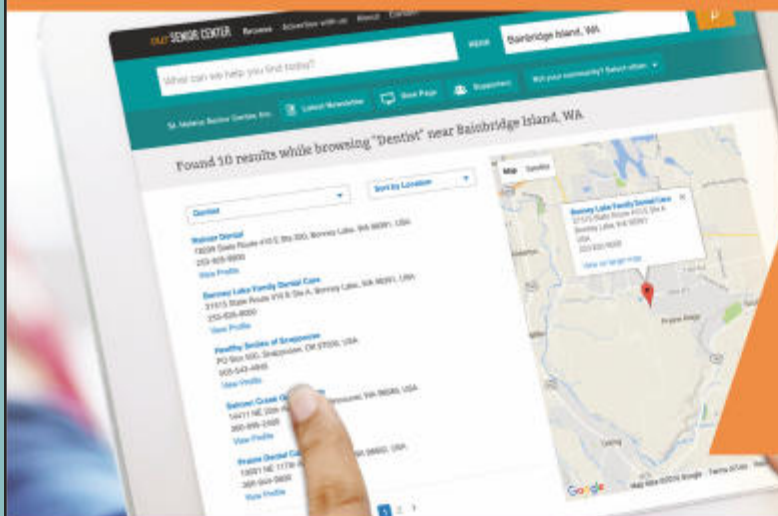
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WCAAA INSIDER

WCAAA Mission Statement

The mission of the Western Connecticut Area Agency on Aging, Inc., is to develop, manage and provide comprehensive services for seniors, caregivers and individuals with disabilities through person-centered planning in order to maintain their independence and quality of life.

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You can also visit our website
at: www.wcaaa.org.

Items of interest, Medicare news, caregiver issues etc., are posted as updates.

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NOTE:

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Thank you.