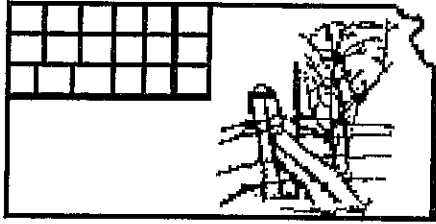


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MICHELLE MORGAN, Executive Director

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SERVING 18 COUNTIES IN NORTHWEST KANSAS



**COPY FOR YOUR
INFORMATION**

DATE: October 4, 2011
TO: Key Communicators in NW Kansas
FROM: Glenna Clingingsmith, Information & Assistance Supervisor *gc*
SUBJECT: Medicare Part D
Flu
Advocacy for Older Americans Act

The date for open enrollment for Medicare Part D has changed. It is now October 15 thru December 7. Please post the enclosed card about the date change. Remind everyone that this is the time to make a decision about their drug plan for next year. If anyone needs help, they can call the office and we'll be glad to help them.

Or - if you have a computer with internet access and a printer at your location, we can schedule a time when either Mary or I can come and do comparisons by appointment. If this is something you would like to offer, give me a call.

It's time to get your flu shot! Remember Medicare Part B pays for the shot. Enclosed is information about the flu from the Center for Disease Control. Please announce and post the information.

The enclosed information on the Older Americans Act was included in our agency newsletter but not everyone gets the newsletter. Please announce and post the information.

If you have questions about any of the information I'm sending, please don't hesitate to call. Thanks for your assistance in getting information out to people in northwest Kansas.

Medicare Open Enrollment

October 15 – December 7

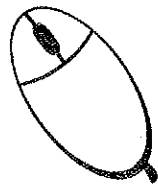


It's Earlier Now!

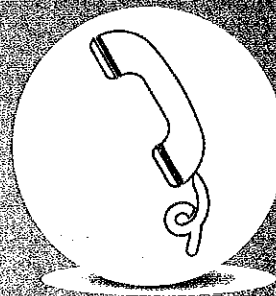
1-800-MEDICARE

medicare.gov

CMS Product No. 11572



CLICK



CALL



CHOOSE

www.medicare.gov

1-800-MEDICARE
(TTY 1-877-486-2048)

What's right for you

Be cautious to take the time
to compare. Let Medicare help!

Medicare Open Enrollment
October 15 – December 7



Centers for Disease Control and Prevention

CDC 24/7: Saving Lives. Protecting People. Saving Money Through Prevention.

Key Facts about Influenza (Flu) & Flu Vaccine

- [What is influenza \(also called flu\)? \(#whatis\)](#)
- [Signs and symptoms of flu \(#symptoms\)](#)
- [How flu spreads \(#howflu\)](#)
- [Period of contagiousness \(#periodof\)](#)
- [How serious is the flu? \(#howserious\)](#)
- [Complications of flu \(#complications\)](#)
- [Preventing seasonal flu: Get vaccinated \(#preventingseasonal\)](#)
- [When to get vaccinated against seasonal flu \(#whento\)](#)
- [Who should get vaccinated? \(#whoshould1\)](#)
- [Who is at high risk for developing flu-related complications? \(#whois\)](#)
- [Who else should get vaccinated? \(#whoelse\)](#)
- [Use of the nasal spray seasonal flu vaccine \(#useof\)](#)
- [Who should not be vaccinated against seasonal flu? \(#whoshould2\)](#)

What is influenza (also called flu)?

The flu is a contagious respiratory illness caused by influenza viruses that infect the nose, throat, and lungs. It can cause mild to severe illness, and at times can lead to death. The best way to prevent the flu is by getting a flu **vaccine** each year.

Signs and symptoms of flu

People who have the flu often feel some or all of these signs and symptoms:

- Fever* or feeling feverish/chills
- Cough
- Sore throat
- Runny or stuffy nose
- Muscle or body aches
- Headaches
- Fatigue (very tired)
- Some people may have vomiting and diarrhea, though this is more common in children than adults.

**It's important to note that not everyone with flu will have a fever.*

How flu spreads

Most experts believe that flu viruses spread mainly by droplets made when people with flu cough, sneeze or talk. These droplets can land in the mouths or noses of people who are nearby. Less often, a person might also get flu by touching a surface or object that has flu virus on it and then touching their own mouth, eyes or possibly their nose.

Period of contagiousness

You may be able to pass on the flu to someone else before you know you are sick, as well as while

you are sick. Most healthy adults may be able to infect others beginning 1 day **before** symptoms develop and up to 5 to 7 days **after** becoming sick. Some people, especially young children and people with weakened immune systems, might be able to infect others for an even longer time.

How serious is the flu?

Flu is unpredictable and how severe it is can vary widely from one season to the next depending on many things, including:

- what flu viruses are spreading,
- how much flu vaccine is available
- when vaccine is available
- how many people get vaccinated, and
- how well the flu vaccine is matched to flu viruses that are causing illness.

Certain people are at greater risk for serious complications if they get the flu. This includes older people, young children, pregnant women and people with certain health conditions (/flu/about/disease/high_risk.htm) (such as asthma, diabetes, or heart disease), and persons who live in facilities like nursing homes.

Flu seasons are unpredictable and can be severe. Over a period of 30 years, between 1976 and 2006, estimates of flu-associated deaths in the United States range from a low of about 3,000 to a high of about 49,000 people.

Complications of flu

Complications of flu can include bacterial pneumonia, ear infections, sinus infections, dehydration, and worsening of chronic medical conditions, such as congestive heart failure, asthma, or diabetes.

Preventing seasonal flu: Get vaccinated

The single best way to prevent the flu is to get a flu vaccine each season. There are two types of flu vaccines:

- “Flu shots” — inactivated vaccines (containing killed virus) that are given with a needle. There are three flu shots being produced for the United States market now.
 - The regular seasonal flu shot is “intramuscular” which means it is injected into muscle (usually in the upper arm). It has been used for decades and is approved for use in people 6 months of age and older, including healthy people, people with chronic medical conditions and pregnant women. Regular flu shots make up the bulk of the vaccine supply produced for the United States.
 - A hi-dose vaccine for people 65 and older which also is intramuscular. This vaccine was first made available during the 2010-2011 season.
 - An intradermal vaccine for people 18 to 64 years of age which is injected with a needle into the “dermis” or skin. This vaccine is being made available for the first time for the 2011-2012 season.
- The nasal-spray flu vaccine — a vaccine made with live, weakened flu viruses that is given as a nasal spray (sometimes called LAIV for “Live Attenuated Influenza Vaccine”). The viruses in the nasal spray vaccine do not cause the flu. LAIV is approved for use in healthy* people 2 to 49 years of age who are not pregnant.

About two weeks after vaccination, antibodies develop that protect against influenza virus infection. Flu vaccines will not protect against flu-like illnesses caused by non-influenza viruses.

The seasonal flu vaccine protects against the three influenza viruses that research suggests will be most common.

When to get vaccinated against seasonal flu

Yearly flu vaccination should begin in September, or as soon as vaccine is available, and continue throughout the flu season which can last as late as May. This is because the timing and duration of flu seasons vary. While flu season can begin early as October, most of the time seasonal flu activity peaks in January, February or later.

Who should get vaccinated?

Everyone 6 months and older should get a flu vaccine each year. This recommendation has been in place since February 24, 2010 when CDC's Advisory Committee on Immunization Practices (ACIP) (/media/pressrel/2010/r100224.htm) voted for "universal" flu vaccination in the U.S. to expand protection against the flu to more people. While everyone should get a flu vaccine each flu season, it's especially important that certain people get vaccinated either because they are at high risk of having serious flu-related complications or because they live with or care for people at high risk for developing flu-related complications.

Who is at high risk for developing flu-related complications?

- Children younger than 5, but especially children younger than 2 years old
- Adults 65 years of age and older (/flu/about/disease/65over.htm)
- Pregnant women (/flu/protect/vaccine/pregnant.htm)
- American Indians and Alaskan Natives seem to be at higher risk of flu complications
- People who have medical conditions including:
 - Asthma (/flu/asthma/) (even if it's controlled or mild)
 - Neurological and neurodevelopmental conditions [including disorders of the brain, spinal cord, peripheral nerve, and muscle such as cerebral palsy, epilepsy (seizure disorders), stroke, intellectual disability (mental retardation), moderate to severe developmental delay, muscular dystrophy, or spinal cord injury]
 - Chronic lung disease (such as chronic obstructive pulmonary disease [COPD] and cystic fibrosis)
 - Heart disease (such as congenital heart disease, congestive heart failure and coronary artery disease)
 - Blood disorders (such as sickle cell disease)
 - Endocrine disorders (such as diabetes (/flu/diabetes/) mellitus)
 - Kidney disorders
 - Liver disorders
 - Metabolic disorders (such as inherited metabolic disorders and mitochondrial disorders)
 - Weakened immune system due to disease or medication (such as people with HIV or AIDS (/flu/protect/hiv-flu.htm), or cancer, or those on chronic steroids)
 - People younger than 19 years of age who are receiving long-term aspirin therapy
 - People who are morbidly obese (Body Mass Index [BMI] of 40 or greater)

Who else should get vaccinated?

Other people for whom vaccination is especially important are:

- People who live in nursing homes and other long-term care facilities
- People who live with or care for those at high risk for complications from flu, including:
 - Health care workers
 - Household contacts of persons at high risk for complications from the flu
 - Household contacts and caregivers of children younger than 5 years of age with particular emphasis on vaccinating contacts of children younger than 6 months of age (children younger than 6 months are at highest risk of flu-related complications but are too young to get vaccinated)

Use of the nasal spray seasonal flu vaccine

Vaccination with the nasal-spray flu vaccine is an option for healthy* people 2 to 49 years of age who are not pregnant. Even people who live with or care for those in a high risk group (including health care workers) can get the nasal-spray flu vaccine as long as they are healthy themselves and are not pregnant. The one exception is health care workers who care for people with severely weakened immune systems who require a protected hospital environment; these people should get the inactivated flu vaccine (flu shot).

Who should not be vaccinated against seasonal flu?

Some people should not be vaccinated without first consulting a physician. They include:

- People who have a severe allergy to chicken eggs.
- People who have had a severe reaction to an influenza vaccination in the past.
- Children younger than 6 months of age (influenza vaccine is not approved for use in this age group).
- People who have a moderate or severe illness with a fever should wait to get vaccinated until their symptoms lessen.
- People with a history of Guillain–Barré Syndrome (</flu/protect/vaccine/guillainbarre.htm>) (a severe paralytic illness, also called GBS) that occurred after receiving influenza vaccine and who are not at risk for severe illness from influenza should generally not receive vaccine. Tell your doctor if you ever had Guillain-Barré Syndrome. Your doctor will help you decide whether the vaccine is recommended for you.

If you have questions about whether you should get a flu vaccine, consult your health care provider.

For more about preventing the flu, see the following:

- [Key Facts About Seasonal Flu Vaccine \(/flu/protect/keyfacts.htm\)](/flu/protect/keyfacts.htm)
- [Influenza Antiviral Drugs \(/flu/antivirals/\)](/flu/antivirals/)
- [Good Health Habits for Prevention \(/flu/protect/habits.htm\)](/flu/protect/habits.htm)
- [The Flu: A Guide for Parents !\[\]\(c580b67c7cd5c9e9e19f04ff6d5093e0_img.jpg\) \[251 KB, 2 pages\] \(/flu/pdf/freeresources/family/A_Flu_Guide_For_Parents.pdf\)](/flu/pdf/freeresources/family/A_Flu_Guide_For_Parents.pdf)
- [Flu & You !\[\]\(81f7c93ea32d9f7160f5d63859611838_img.jpg\) \[980 KB, 2 pages\] \(/flu/pdf/freeresources/family/FluandYou_press.pdf\)](/flu/pdf/freeresources/family/FluandYou_press.pdf)

* “Healthy” indicates persons who do not have an underlying medical condition that predisposes them to influenza complications.

Reauthorize the Older Americans Act

Since 1965, the Older Americans Act (OAA) has gained recognition as a unique and highly regarded statute that has stimulated the development of a comprehensive and coordinated service system. This system has contributed greatly to enhancing the lives of older individuals, family caregivers, and persons with disabilities.

Congress passed the Older Americans Act in response to concern by policymakers about a lack of community social services for older persons. Although older individuals may receive services under many other Federal programs, today the OAA is considered to be the major vehicle for the organization and delivery of social and nutrition services to this group and their caregivers. It authorizes a wide array of service programs through a national network of 56 State agencies on aging, 629 area agencies on aging, nearly 20,000 service providers, 244 Tribal organizations, and 2 Native Hawaiian organizations representing 400 Tribes. The OAA also includes community service employment for low-income older Americans; training, research, and demonstration activities in the field of aging; and vulnerable elder rights protection activities.

Designated as the local single point of entry, the Northwest Kansas Area Agency on Aging serves as the unbiased, trusted source for older Americans and their caregivers. Whether it is information on available options, in-home services, nutrition services, or insurance counseling a senior only needs to make a call to the local Area Agency on Aging office to connect them with the resources they need. Additionally as a grassroots organization, advocacy for senior services is a high priority of the Area Agency on Aging. In 2011, Congress will consider reauthorization and amendments to the OAA effective in FY 2012. In anticipation of this process, it is important that citizens educate our elected officials about the importance of our senior community programs. Whether it is your local nutrition site, your worker who helps with your bathing, or the counselor who helped you choose the right Part D drug plan – know that all of these services were made possible by the creation of the Older Americans Act.

It is important that today's Congress understands the importance of the Older Americans Act, just as the Congress in 1965 understood this. It is the major vehicle for the organization and delivery of social and nutrition services to seniors and their caregivers.

**Contact your Federal Legislators today and let them know you want
them to
'Vote to Reauthorize the Older Americans Act'!**

Excerpts from the Administration on Aging 2011

OVER

Please call **1-800-998-0180** to be connected to your Congressperson.

Email access and direct numbers are also listed below.

Senator Jerry Moran

Washington: (202) 224-6521

Hays: (785) 628-6401

<http://moran.senate.gov/public/>

Senator Pat Roberts

Washington: (202) 224-4774

Dodge City: (620) 227-2244

<http://roberts.senate.gov/public/>

Representative Tim Huelskamp, 1st District

Washington: (202) 225-2715

Salina: (785) 309-0572

<http://huelskamp.house.gov/>

Representative Lynn Jenkins, 2nd District

Washington: (202) 225-6601

Topeka: (785) 234-5966

<http://lynnjenkins.house.gov/>

Representative Kevin Yoder, 3rd District

Washington: (202) 225-2865

Kansas City: (913) 621-0832

<http://yoder.house.gov/>

Representative Mike Pompeo, 4th District

Washington: (202) 225-6216

Wichita: (316) 262-8992

<http://pompeo.house.gov/>