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Health Home Herald Newsletter

Making changes to Medicare coverage can be confusing, but help is available. Whether a beneficiary has questions about Medicare or is considering changing the way they receive their Medicare coverage, they can call the Statewide Health Insurance Benefits Advisors at 1-(800) 562-6900 for free local support throughout WA; they can also call 1-800-MEDICARE. Health Home Care Coordinators can also assist their Medicare clients with researching information and assist with making phone calls.

Medicare's Annual Open Enrollment

By Vanessa Sherrill – DSHS Project Manager Advancing Medicare & Medicaid Integration and Kerri Hummel – DSHS Health Home QA Specialist

As seasons change and fall arrives, so do pumpkin spice lattes, corn mazes, leaves changing colors, and open enrollment for active Medicare beneficiaries.

Medicare's Open Enrollment period occurs annually in the fall from October 15 – December 7; this is the one time, each year, that current Medicare beneficiaries can make changes to the way they receive their Medicare benefits.

If a beneficiary has had health changes or is unhappy with Original Medicare or their Medicare Advantage plan, they can switch between the two during this open enrollment period. Medicare Advantage plans are becoming more popular as they typically offer benefits that Original Medicare does not, such as prescription coverage, dental, vision, hearing aids, and more. Beneficiaries should always research their options before choosing a Medicare Advantage Plan as the supplemental benefits will vary by plan.

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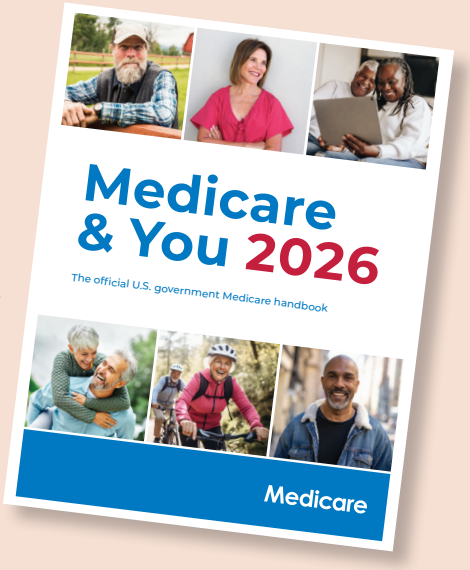

A month or two prior to open enrollment, the Medicare beneficiary and/or their authorized representative should review their current Medicare coverage to ensure they are on the best Medicare option that meets their health and prescription drug needs (Original Medicare A & B + Medicare Part D or Medicare Advantage Part C that includes Part D coverage). The Medicare and You Handbook is an excellent resource and includes information on Medicare coverage and Original Medicare A and B cost information; the Medicare & You Handbook, found at https://www.medicare.gov/Pubs/pdf/10050-Medicare-and-You.pdf, is sent to all Medicare beneficiaries annually in August/September.

Here are a few things to keep in mind when choosing Medicare coverage:

- Open Enrollment starts October 15 and ends December 7; changes made go into effect January 1.
- If a beneficiary is currently on a Medicare Advantage plan, they can switch back to Original Medicare or, if on Original Medicare they can switch to a Medicare Advantage plan.
- Part D prescription coverage: a beneficiary on Original Medicare will need to purchase a stand-alone Part D plan through a private insurance carrier; beneficiaries on a Medicare Advantage Plan, should make sure the MA plan they select has Part D included, otherwise they have the option to purchase a stand-alone Medicare Part D plan as well.

Care Coordinator Corner

Lead: PCHS | CCO: Virginia Mason Franciscan Health
CC: Ruth Winkler

I have worked with this client since February 2024. Initially I had many challenges getting in touch with her and onboarding due to her alcoholism and unreliability for our appointments. Once we were able to meet, it took around 11 months for the client to finally open up and begin to trust me.

The client has a history of 25 years of alcoholism, three suicide attempts in her lifetime, and a tremendous amount of trauma from her adolescent years through adulthood. She has participated in rehab for SUD over six times, with her longest sobriety stint being six months during her inpatient stays in a controlled environment.

Her initial long-term goal was to maintain her sobriety and quit smoking cigarettes. She was sober from March 2024 to August 2024 with the support from the Health Home program and goal setting. The member relapsed while I was out on leave (I feared this while I was away due to her lack of a trusted support network).

She also had a suicide attempt on 11/14/2024, was stabilized inpatient and began her sobriety journey again. However, she was still experiencing suicidal ideation. She was adamant that she was intoxicated and acted out of anger. I worked very closely with the inpatient care team during this stay, and we successfully were able to get her to agree to the vivitrol shot to help maintain sobriety. I connected her to an outpatient psychiatrist, and she began trauma/PTSD therapy in January 2025.

The patient lost her eldest son to an overdose in 2022, and two weeks later, her other son was convicted for murder (serving 15 years in Walla Walla). She has been denied two times by the Department of Corrections to have in-person visits with him. The patient was very vocal about the emotional damage of losing both of her sons and the impact that it has had on her. I offered to do some problem solving with her around seeing her son in prison. Together, we were able to (finally) connect with someone at DOC to tell her why visitation was being denied. They advised her to write an appeal. The patient stated she needed help with that as she hardly uses a computer or her cellphone. We sat down together, wrote out the appeal, and she emailed it to the DOC. Today, the patient told me she was granted visitation with her son after three years of not being able to see him. This is amazing news, gives her hope to begin her healing journey, and support her son. The patient has remained sober since 11/14/2024.

Submit your story, resource, or ideas to the Care Coordinator Corner via: anthony.foster@dshs.wa.gov

NOVEMBER
DIABETES
AWARENESS MONTH

World Diabetes Day Washington

In November, National Diabetes Month — and World Diabetes Day on November 14 — brings communities across the United States and globally together to:

- Increase awareness and educate communities about the impact of diabetes.
- Inform people about the importance of screening and early detection.
- Encourage healthy nutrition for the wellbeing of families.

Diabetes Mellitus, or commonly known as diabetes, is a group of diseases that involve problems with the hormone insulin, which impacts glucose regulation. If left untreated, it can cause many complications. In Washington state alone, 715,000 adults have diabetes and nearly 2 million people have prediabetes. 15 to 30% of the people with prediabetes could develop type 2 diabetes in 5 years if lifestyle modifications are not followed. Currently there is no cure for diabetes, but it can be well managed and, in some cases, prevented with healthy nutrition and an active lifestyle. For this reason, we hope to increase awareness about this condition.

Do you know your risk for Diabetes?

In Washington state, 1 out of 3 adults have prediabetes and two thirds are not aware of having it. Prediabetes puts you at a higher risk for developing type 2 diabetes. If you think you may be at risk for prediabetes, take a minute to complete the Do I Have Prediabetes Risk Test and learn about risk factors and steps to reduce your chances of developing it.

Did you know you can take simple steps toward stopping diabetes before it starts?

If after taking the risk test you learn you have prediabetes, please know that you could reverse it. You can participate in the National Diabetes Prevention Program. This is a research-based program that focuses on healthy eating and physical activity. This program showed that people with prediabetes were able to cut their risk of developing type 2 diabetes by over 50%. Learn more about the program at: https://www.cdc.gov/diabetes-prevention/index.html

Living with Diabetes?

Guidelines from the National Institute of Diabetes and Digestive and Kidney Diseases recommend knowing your diabetes ABCs to help manage your blood glucose, blood pressure, and cholesterol. Working toward your ABC goals can help lower your chances of having a heart attack, stroke, or other diabetes problems. Learn more about the ABCs and how to manage your diabetes at: https://www.niddk.nih.gov/health-information/diabetes/overview/managing-diabetes

Supporting those with Diabetes:

Diabetes affects family members, friends, coworkers, you; anybody is at risk. Your support and understanding can have a positive impact on someone with diabetes. Regular diabetes management can be stressful and complicated, but your support can help someone with diabetes feel empowered. Learn more about how to help people living with diabetes at: https://www.cdc.gov/diabetes-prevention/index.html

For more information connect with your health provider regarding prediabetes and diabetes.

Participant Portrait

Lead: SEWA | CCO: SE WA ALTC | CC: Alejandra Ramirez-Carrera

Client is a Hispanic 88-year-old lady whose primary language is Spanish. She was diagnosed with progressive dementia. She lives with her grandchild and spends most of her day alone with her caregivers; one in the morning and another during the evening. Her son is her power of attorney and he and his wife visit her when they can while her daughter in law visits more frequently. Her caregiver informed the HHCC that she could no longer walk due to knee pain, making it difficult to lift her up to get in the shower and to get her in the car before medical appointments. Sometimes the client refuses to get out of the car, which makes it more difficult for her to receive proper care. The HHCC informed the family members that the client needed to re-apply for the community transportation service Dial a Ride as their minibus could transport her and her caregiver to medical appointments without her having to get out of her wheelchair.

The client's daughter-in-law insisted that the caregiver could still lift the client into the car even though there were times the client's caregiver had to reschedule appointments until client's grandson could help her lift her into the car. The HHCC was persistent with speaking with family members about how they did not only put the client at risk of falls but also the caregiver suffering an injury as well. The daughter-in-law asked the HHCC to help complete the Dial a Ride application, obtain the physicians' signature and get a signature from the POA. Once completed, the application was sent to Dial a Ride who immediately approved the services.

The client and caregiver now consistently attend medical appointments with ease, and she is receiving all health care on time and transportation is no longer an inconvenience.

Monthly Webinar Invitations

The Health Home Program offers learning topics for new health home care coordinators. For the current invitation, please visit Washington Health Home Program – Training Invitations | DSHS

PRISM Access Reminder:

Please be sure to log into your SAW account every 30 days, enter the PRISM application, and click on at least one of your assigned clients so that you will continue to have uninterrupted PRISM access.

October Brain Teasers

1. What kind of room has no doors, no windows, and is great in soup?
2. The more of me you take away, the bigger I get. What am I?
3. Why don't mummies take vacations?
4. I fall but never get hurt, and I cover the ground in October. What am I?
5. I'm round, orange, and carved with a grin—who am I?

Answers:
1. Mushroom
2. Hole
3. Because they're afraid to unwind
4. Autumn leaves
5. Jack o'lantern