

Health Home Herald



Hearing Aid Benefit Restored

By Deborah O' Willow, Director
Office of Deaf and Hard of
Hearing

Today, many people are learning effective ways to manage the impacts of hearing loss. Approximately 48 million people in the United States have some degree of hearing loss, while 1.1 billion people around the world are at risk of hearing loss because of exposure to loud noise through listening devices, prolonged exposure to various environmental sounds or attending loud events such as music concerts¹.

What is hearing loss? Hearing loss is either congenital (happens at birth), or acquired sometime after birth. In addition, there are varying degrees of hearing loss from a very mild reduction in the

ability to hear sound, to profound loss where there is little to no sound detection.

What causes hearing loss?
There are many reasons a person may have hearing loss including but not limited to:

- ❖ Exposure to loud noise;
- ❖ Injuries that damage the ear;
- ❖ Ototoxic medications and drugs;
- ❖ Some diseases and infections;
- ❖ Genetic factors; and
- ❖ The aging process.

Barriers to Access and Communication: People with hearing loss may identify themselves differently but they

all have one thing in common; they often experience communication barriers and stigmas. Those barriers and stigma can lead to a delay in taking action to improve their hearing.

Some barriers to access and communication include but are not limited to:

- ❖ Challenges obtaining sign language interpreters for medical appointments or important meetings at work.

Above: Pierce Co. Human Services CCO. Back row (L to R): Chet Budinger, Amy Allen, Bobby Ocasio, Linda Russell, Kim Peterson, Daphne Gill, Marissa Bass. Front row (L to R): Ginny Codd, Tiffany Conaway, Srey Kray, Penny Rae Bradon

¹ <https://www.hearinglikeme.com/11-hearing-loss-stories-that-defined-2015/>

- ❖ The high cost of hearing aids may create a financial hardship and are often cost prohibitive.

The good news is that starting in January 2019; Washington State will restore the hearing aid benefit program that will help thousands of low-income people with hearing loss have access to hearing aids that will immediately benefit their lives. In addition, the passage of the OTC Hearing Aid Act of 2017 will help people with mild to moderate hearing losses have access to affordable hearing devices without having to see a hearing healthcare specialist.

This law will also encourage hearing aid manufacturers to innovate and lower the costs for expensive hearing aids. However, it is noted that people with more serious hearing loss are encouraged to see a hearing healthcare specialist to have their hearing evaluated and select a hearing aid to match with their degree of loss.

In the state of Washington, there are over 290,000 people with varying degrees of hearing loss. The Office of the Deaf and Hard-of-Hearing (ODHH) serves people of all ages that are Deaf, DeafBlind, DeafPlus, Hard of Hearing and Late-Deafened communities in Washington state. ODHH is a multifaceted program that works hard to provide accessibility, information, resources and services to community members and various agencies to ensure

access to effective communication. ODHH works in collaboration with the Aging and Long-Term Support Administration (AL TSA) within the Department of Social and Health Services (DSHS). If you are interested in receiving training or getting more information about our services, you can email at:

cametrequest@dshs.wa.gov

Spotlight on Resources



211 Information Line

211 is an easy to remember number for people to call for health and human service information, and referrals and other assistance to meet their needs. It easily connects people to the following resources: holiday programs; health education; food; financial assistance; housing and shelter; clothing, diapers, and household goods; healthcare, legal assistance, employment services and training; transportation, mental health and substance use

disorder services; and veteran resources. Why is it important?

- ❖ 2-1-1 provides simple access to the variety of essential services people need to lead healthier, more productive lives.
- ❖ 2-1-1 provides real-time tracking of community needs, allowing policy makers and funders to make informed decisions about resource allocation.
- ❖ 2-1-1 builds community by connecting people with the programs and agencies who can put their donations and volunteer time to good use.

Webinar Trainings for the First Quarter of 2019

We are pleased to announce the following upcoming webinars:

JAN 10	Hearing Loss
FEB 14	De-escalation Techniques
MAR 14	Insignia and Patient Activation Measures

Please use this link to register:

<https://attendee.gotowebinar.com/register/7739974009641728259>

Also, visit our website:

<https://www.dshs.wa.gov/altsa/washington-health-home-program>

CMS Announces WA Health Home Duals Demonstration Shared Savings

The Centers for Medicare and Medicaid Services (CMS) has reported shared savings results for the Washington Health Home program, which the WA Health Care Authority (HCA) jointly manages with the WA Department of Social and Health Services (DSHS).

Based on preliminary analysis, the program has saved Medicare \$42.0 million in its third demonstration year. This follows \$34.9 million and \$30.2 million in savings for the first and second years, respectively. Savings for all three years total \$107.1 million, representing a significant improvement in use of resources by high-cost, high-risk, full-benefit Medicare-Medicaid beneficiaries.

CMS calculated these savings through comparison of the trend of Medicare expenditures per member per month against a matched comparison group, and has made interim performance payments to Washington based on these findings. Depending on the final savings analysis, CMS may share up to half of the gross Medicare savings with our state.

Care Coordinator Corner

Submitted by Mary Brooks, Nurse Case Manager, on behalf of Care Coordinator Linda Castine, RN

Larry (not his real name) is a homeless Apple Health client who has been living in a shelter with very poor control of his insulin dependent diabetes. A recent low blood sugar episode required the shelter to call 911. He also had a history of alcoholism, pancreatitis, schizoaffective disorder, and chronic depression.

The Health Home Care Coordinator developed a good working relationship and trust with Larry, meeting at the shelter and attending multiple physician visits together. Through frequent telephone and in-person contacts, the Care Coordinator was able to assist Larry with a housing application, a plan to manage his diabetes better, coordination of his providers, tests, medication refills, and many educational resources.

The impact of the Health Home program on Larry's life has been immense. With the assistance of his Care Coordinator, he has been able to obtain permanent housing and was successful in lowering his A1C level from 12 to 8.5 – a tremendous improvement!

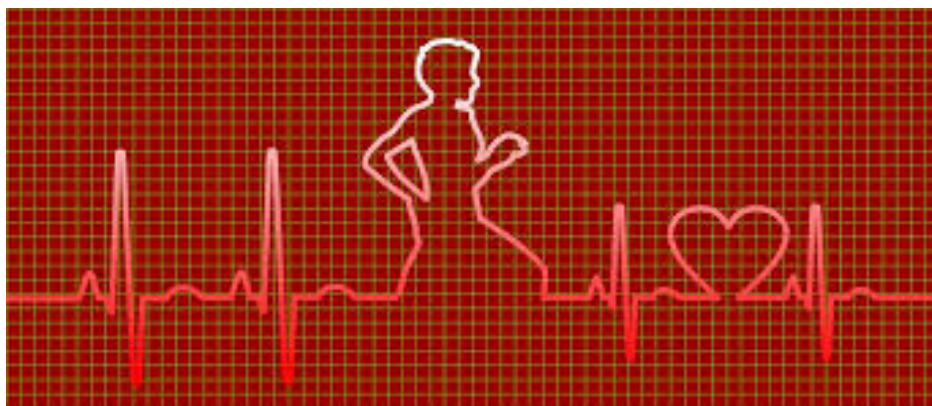
Larry and his Care Coordinator are now working on getting a continuous glucose monitor and the client demonstrates increased confidence in diabetes self-care in the privacy of his own home. Larry expresses gratitude for his Care Coordinator and times is moved to tears by the assistance he has received through the Health Home program.

This space was created just for you. It provides a place for Care Coordinators and allied staff to share their experiences, tips for working with clients, and creative health action planning ideas.

Do you have a unique resource, such as a program that provides free childcare so parents can attend a local support group? This is your space, so please share with us. To share your story, resource, or ideas, submit to:

healthhomenewsletter@dshs.wa.gov

Please include your telephone number so we can contact you if your submission is selected for publication. Confidential information such as client names or other identifying information will not be published.



February is American Heart Month

From healthfinder.gov

Heart disease is the leading cause of death for both men and women. To prevent heart disease and increase awareness of its effects, you can make healthy changes to lower your risk of developing heart disease. Controlling and preventing risk factors is also important for people who already have heart disease.

To help prevent heart disease, you can:

- ❖ Eat healthy
- ❖ Get active
- ❖ Stay at a healthy weight
- ❖ Quit smoking and stay away from secondhand smoke
- ❖ Control your cholesterol and blood pressure
- ❖ Drink alcohol only in moderation
- ❖ Manage stress

Everyone is at risk for heart disease. However, you are at higher risk for heart disease if you:

- ❖ Have high cholesterol or high blood pressure
- ❖ Smoke
- ❖ Are overweight or obese
- ❖ Don't get enough physical activity
- ❖ Don't eat a healthy diet
- ❖ Your age and family history also affect your risk for heart disease. Your risk is higher if:
 - ❖ You are a woman over age 55
 - ❖ You are a man over age 45
 - ❖ Your father or brother had heart disease before age 55
 - ❖ Your mother or sister had heart disease before age 65

The good news is there is a lot you can do to prevent heart disease.

Participant Portrait: Gregory

Submitted by Sound Health in King County

Gregory (not his real name) engaged with the Health Home program six months ago. Since beginning engagement with the program, he has been meeting face-to-face with his Care Coordinator each month to work on managing his long-term issues with high blood pressure.

The Care Coordinator attended a variety of medical appointments with Gregory, helping him come up with questions to ask providers. With the help of a smoking cessation specialist, Gregory was able to quit smoking, and is proud to report he has not had a cigarette for three months!

Gregory values his health and believes it is important to attend his scheduled appointments in order to meet his goal to become more active again. With his Care Coordinator's support, he has felt far more able to advocate for himself and has begun attending some of his doctor appointments by himself.

Both managing his high blood pressure and quitting smoking required Gregory to make serious, long-term lifestyle changes. He has shown great motivation and ability to follow through with these changes, and the Health Home program has been a great resource for Gregory in meeting these goals.

Health Home Puzzles and Games

Fill in the blanks to test your knowledge in celebration of Black History Month in February!

1. In 1863, _____ signed the Emancipation Act, which ended slavery in rebelling states.
2. On February 21, 1965, _____ was assassinated in the Audubon Ballroom as he was preparing to address the Organization of Afro-American Unity.
3. _____ proposed that congress consider Civil Rights Legislation culminated in the Civil Rights Act of 1964.
4. In _____, the Thirteenth Amendment was ratified abolishing slavery.
5. _____ was the first African American to play Major League Baseball.
6. At its height in 1850, there were about _____ slaves in the US?
7. _____ is most known for becoming the first female African American Poet.
8. _____ was the lawyer who won the Supreme Court case Brown v. Board of Education of Topeka (1954) which made segregation in public schools illegal.
9. _____ was the first African American Nobel Peace Prize winner.
10. _____ became the first African American President of the United States in 2008.

ANSWERS:

Jackie Robinson	Barack Obama	Phillis Wheatley	4 million	Ralph Bunche
Thurgood Marshall	Abraham Lincoln	John F. Kennedy	1865	Malcolm X

Visit us online:

<https://www.dshs.wa.gov/altsa/stakeholders/washington-health-home-program-quarterly-newsletters>

Email us:

healthhomenewsletter@dshs.wa.gov