



PARTNERSHIP PROJECT

HIV ADVOCACY & SERVICES SINCE 1995

The Network
News
2013
January Issue #153

OREGON HIV/AIDS CASE MANAGEMENT

BE IN THE KNOW ABOUT MEDICARE PART B

By Alan Edwards, Social Security Public Affairs

You may already know that Medicare is a medical insurance program for people who are 65 or older and for people who are disabled at any age. Some people are covered only by one type of Medicare; others opt to pay extra for more coverage. Understanding Medicare can save you money.

If you're eligible for and want to be covered by Medicare Part B medical insurance, now is the time to sign up. The general enrollment period for Medicare Part B runs from January 1 through March 31. Before you make a decision about general enrollment, here is some useful information.

There are four parts to Medicare: Parts A, B, C and D. **Part A** helps pay for inpatient hospital care, skilled nursing care, hospice care, and other services. **Part B** helps pay for doctors' fees, outpatient hospital visits, and other medical services and supplies not covered by Part A. **Part C** allows you to choose to receive all of your health care services through a managed health care organization. These plans, known as Medicare Advantage Plans, may help lower your costs of receiving medical services, or you may get extra benefits for an additional monthly fee. You must have both Parts A and B to enroll in Part C. And **Part D** is the Medicare Prescription Drug Program.

There is a monthly premium for Medicare Part B. In 2013, the standard premium is \$104.90. Some high-income individuals pay more than the standard premium. Your Part B premium also can be higher if you do not enroll during your initial enrollment period, or when you first become eligible.

There are exceptions to this rule. For example, you can delay your Medicare Part B enrollment without having to pay higher premiums if you are covered under a group health plan based on your own current employment or the current employment of any family member. If this situation applies to you, you have a "special enrollment period" in which to sign up for Medicare Part B, without paying the premium surcharge for late enrollment. This rule allows you to:

- *Enroll in Medicare Part B at any time while you are covered under a group health plan based on your own current employment or the current employment of any family member; or
- *Enroll in Medicare Part B during the eight month period that begins following the last month your group health coverage ends, or following the month employment ends, whichever comes first.

If you receive disability benefits and have coverage from a working family member, the same rules apply. If you live in one of the 50 states or Washington D.C. and you're already receiving Social Security retirement or disability benefits or railroad retirement payments, you will be enrolled in Medicare Parts A and B automatically. However, because you must pay a premium for Part B coverage, you have the option of turning it down.

If you don't enroll in Medicare Part B when you first become eligible to apply and you don't fall under the special enrollment period, you'll have to wait until the general enrollment period, which is January 1 through March 31 of each year. At that time, you may have to pay a higher Medicare Part B premium.

For more information about Medicare, visit the Centers for Medicare & Medicaid Services (CMS) website at www.medicare.gov. Or read our publication on Medicare at www.socialsecurity.gov/pubs/10043.html.

Next Meeting February 12th

Domestic Violence in the LGBTQ community

Lupita Mendez, MSW

LGBTQ Program Coordinator at Bradley Angle



ASK Joanne

Joanne Maurice is a dietitian with Legacy Emanuel and Multnomah County HIV Clinic with other 15 years of experience specializing in HIV nutrition

New Year – New Motivations

Ok, so how is it REALLY going with your New Year resolutions? We all make new goals to lose all that holiday weight, get up at 4 AM to go to the gym to exercise, read all our emails, make (and eat) breakfast every morning, meditate, or whatever it is that your put on the list. Truthfully, we rarely ever keep all those lofty goals we set, mostly because the bar is set too high. We don't follow through on some, then the towel gets thrown in and we wait until next year – after all it will all be different next year – right?

The goal should really be fun, something you want to do, enjoy doing and possibly could do with a group of friends. Here are a couple of things to check out.

American Volkssport Association –has sponsored walks throughout the year in various locations. Most walks are about 6 Km in length, and are done at your own pace on a particular day.

Better Yet: check out www.walkoregon.org and look for the year around, self guided walks. There are MANY of these walks all over Portland. There are ones around Council Crest, Crystal Springs, Ladd's Addition, Hawthorne, Hayden Island, Downtown, Oaks Bottom, Mt. Tabor, etc, etc. You start the walks at a check point, get a map and some directions, then take off. There will be check points along the way such as a particular house, or a coffee shop, or a park, so you will know that you are not lost and have completed the walk. The web info will list certain points of interest along the walk, whether there are restrooms, etc. Most walks are about 3-5 miles and totally done at your pace. It's a nice way to get some fun exercise, while exploring parts of the city.

If you want some general bike and walking maps, go to www.GettingAroundPortland.org, and they will send you maps of your area. Bike and walking areas are shown, along with points of interest – parks, shopping areas, transit routes, etc. It will show how long it will take to bike or walk from point A to B.

American on the Move is a get resource web page. It can help you track your steps that you walk each day, and for fun, you can plot them against a historic trail to see how far you walked. It will ask for goals, like eating another fruit or vegetable each day, getting up and moving while at work etc, and then ask if you are meeting your goals. It is a fun web page with lots of resources.

ChooseMyPlate.gov is the new food pyramid site. The improvements include videos on how to buy and prepare certain foods. It also has menu ideas, handouts for your information, information regarding weight management, etc.

Tools – if you do nothing else, get a pedometer or stepometer. They range in price from about \$10.00 to over \$100. I don't think you need one with all the bells and whistles, just one that will count your steps every day. Start tracking them with the idea of adding a few more steps each day – instant feedback and incentive to do just a little more. The goal is to do 10,000 steps in a day. That is about 5 miles, the magic number to help lose weight or at least not gain any more.

Check out all the phone apps that help you track what you eat and how much you exercise. Whatever one you like and will use, will be the best one for you.

Make the exercise fun! Any increase in activity is a step (sorry the pun) in the right direction. See how many of the Portland walks you can do this year; using the trail tracker on America on the Move, see if you can complete the distance for walking the Pacific Trail or the one used by the pioneers.

Make it fun – that is one goal we can all keep.



Young Adult HIV Peer Support Group Winter 2012-2013 Schedule

February discussion: Online Dating

Connect with other HIV + young adults in a comfortable, small group setting.

Share support and information about issues such as navigating relationships, work, school, disclosure, and more.



When? **Every 2nd Monday of the month from 4:30pm-6:00pm**

Where? **Central Drugs: 538 SW 4th Ave, Portland**

Hungry? **Pizza & drinks provided each meeting**

Interested? **RSVP requested**

Contact Partnership Project facilitators:
Paolo Galullo, SW Intern: galullo@ohsu.edu (503) 230-1202 x 245
Lisa Steeves, LCSW: mitcheli@ohsu.edu (503) 494-6516

THANK YOU to Central Drugs for donating the space and food for this group.

Feeling lucky?

If you attend, enter to win a Holiday Gift Bag we'll be giving away at the event!



This column is provided as a public service by Attorney Sarah Patterson ([www. Sarahpattersonlaw.com](http://www.Sarahpattersonlaw.com)), by Email :Sarah@sarahpattersonlaw.com, (503) 281-4766. Sarah is a lawyer in private practice and represents claimants with HIV and AIDS in Social Security and SSI disability cases and is not associated with the Social Security Administration.

CLIENTS WITH ANXIETY DISORDERS, like all those with mental disorders, have challenging situations for disability claims. Diagnosis is sometimes difficult, but the case must fit into a legal framework for a Social Security claim to be successful. There is a clear path to winning these cases. Once a diagnosis has been established, the key is proving functional impairment.

SOME ANXIETY DISORDERS MAY qualify an applicant for benefits. There is a spectrum of impairments, from general nervousness and apprehension, to PTSD and severe phobias. Whether it is intense recollections of a past event or panic attacks, from a legal point of view, the case must be developed to demonstrate functional impairment. The question is: Does the person's impairment-driven capacity and behavior interfere with the ability to work?

FUNCTIONAL IMPAIRMENT FOR anxiety requires at least two "marked" limitations in the activities of daily living or social functioning. It also looks at impairments in "concentration, persistence, or pace," and "episodes of decompensation" – meaning deterioration in work-like settings.

A LOT OF JARGON to be sure. Sometimes medical providers and therapists throw up their hands and ask "how do I *prove* those things?" The process is actually quite simple, and establishing functional impairment can mean the difference between winning and losing. Winning can make the difference between access to treatment or not, and as we all see daily, there are far too many people with untreated mental illness wandering our streets.

THE FIRST STEP IS a diagnosis. The Social Security law now tracks the 1994 DSM IV. For example, to prove a diagnosis of anxiety, you have to show at least three clinical signs -- such as worry, irritability, insomnia, tiredness, sharp startle reflex or difficulty focusing. In addition there must be two functional impairments.

SOMEONE WHO IS HOMEBOUND or never leaves a restricted setting may not have to meet the functional impairment criteria. If necessary, information should also be obtained from non-medical sources, such as family members and others, to supplement the record of impairment severity and longitude.

TO HELP SHAPE a winning claim, please do not hesitate to contact us.

SSA SAYS...*We will find that you have a "marked" limitation when your impairment(s) interferes seriously with your ability to independently initiate, sustain, or complete activities. "Marked" limitation also means a limitation that is "more than moderate" but "less than extreme." It is the equivalent of the functioning we would expect to find on standardized testing with scores that are at least two, but less than three, standard deviations below the mean.*

This newsletter is published by
[OHSU/ Partnership Project](#).

Our thanks to Kim Lewis and Myrna Walking Eagle for their patient proofreading , Barbara Danel for website posting and Annick Benson for distribution of the newsletter.

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This issue, and issues from Feb 2002 on, can be found electronically at <http://www.oregon.gov/DHS/ph/hiv/services/news.shtml>