



# Ageing Matters

New Hampshire State Commission on Aging

## New Hampshire Commission on Aging

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## Is Having Gray Hair Brave?

By BARBARA RAYNOR, Changing the Narrative

I found my first gray hair when I was thirty—the same year my children were born (coincidence?). And those hairs have continued to multiply throughout my life—and theirs (again I ask, coincidence?).

Over the years, as the grays have increasingly grown to dominate the browns, I have received a number of compliments on my hair—usually in a public restroom (the great accidental sorority house of women everywhere).

“I love your hair,” a woman next to me will say. To which I always respond, “Thank you.” Which she will generally follow with a comment like, “You’re so BRAVE.” Or, “I’m not brave enough to let my hair go natural.” To which I reply, “Not brave. Just cheap and lazy.” And then we both chuckle a bit—and I encourage her to give it a try. “Embrace the gray,” I say. “You’ve earned every single one of those babies!”

I share this story to shine a light on what Internalized Ageism looks like. It’s not like the overt “OK Boomer” ageism of the recent past—or the “We could hire you, or we could hire someone who’s 25 and pretty” ageism found in the workplace (and yes, that statement was actually made to a former C-suite professional looking for a job in marketing).

### We Hurt Ourselves with Ageism

In many ways, it’s worse than that—because Internalized Ageism is often so subtle and insidious, it’s corrosive to our own mental, physical, and emotional well-being. In fact, research conducted by Dr. Becca Levy, professor of public health and psychology at Yale University and author of “Breaking the Age Code,” reveals that negative self-perceptions of aging result in poor health outcomes, hearing decline, poor memory

*Gray Hair, con’t next page*

## IN THIS ISSUE

NH COA March Meeting Recap.....	3
Letter to the Editor / In Support of Middle Income Medicare LTC Insurance	4
Celebrating Older Americans Mouth.....	5
Women May Benefit from Regular Exercise More than Men .....	6
Studies Show Millions with Mild Cognitive Impairment Go Undiagnosed .....	7
Opportunity to End Some Student Debt Deadline is April 30 .....	8
Do You Have Time to Save a Planet? .....	9
5 Medication Safety Tips for Older Adults.....	11
Ensuring Wheelchair Users Can Fly with Dignity .....	12
Obtain a Copy of Your Tax Records .....	13
2023/2024 Fuel Assistance Program Ends April 30 .....	14
Tips for Better Nutrition.....	15
SCAM of the Month / Package Delivery Scams .....	16
Links to Learn More.....	17

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## Older Adult Volunteer Awards Update

Thank you to everyone who submitted nominations for the 2024 Older Adult Volunteer Awards. We received great submissions from through the state highlighting the work of inspiring and dedicated volunteers.

Nominations will be reviewed in the coming weeks with winners notified in later this month.

In recognition of May's Older Americans Month, the Commission will host a special event at the state house with Governor Chris Sununu (invited) to celebrate the winners from each county.

Stay tuned for further details.

**We welcome all points of view and invite your submissions. To send articles or to add your name to our mailing list, contact: [NHCOAnews@gmail.com](mailto:NHCOAnews@gmail.com)**

## *Grey Hair, con't*

performance, and shorter life spans.

Conversely, her studies reveal that positive self-perceptions of aging can improve memory, thinking, cognition, mood, self-confidence, overall functionality, and longevity (adding seven-and-a-half years to a person's life span). SEVEN-AND-A-HALF YEARS!

Yet, according to the FrameWorks Institute's 2015 "Gauging Aging" report, ageism may be the only form of discrimination in which the perpetrators are also the victims—and they fail to recognize it (another example of Internalized Ageism).

How many times have you forgotten something and attributed it to having a "Senior Moment"? Or struggled to learn a new skill and rationalized it by saying, "You can't teach an old dog new tricks"? Or commented about a celebrity by saying, "She sure does look good for her age"? Or remarked about a friend or loved one, "He's STILL (fill-in-the-blank here) working, driving, travelling, skiing, cycling, etc."? Or given someone one of those "over-the-hill" birthday cards to "celebrate" their latest trip around the sun?

While any of those behaviors may have seemed innocent to you at the time, they are actually negatively coloring the way you view aging—and older age—and they are prime examples of Internalized Ageism.

## **What Can We/You Do About It?**

The first step is to **RECOGNIZE IT WHEN YOU SEE IT—OR ENGAGE IN IT**. While you may not have realized that some of your beliefs, statements, or actions were ageist before now, now you know, so you can do better going forward.

The second is to **CALL IT OUT—IN THE MOMENT**—much in the same way you might a racist, sexist, antisemitic, or homophobic comment. If someone made a derogatory comment to you or about you, would you just sit there? Or would you respond (politely, of course)? Why treat ageist comments any differently?

The third is to **HELP EDUCATE PEOPLE ABOUT IT IN OUR LARGER SOCIETY**. Make people aware of what ageism looks like, how it adversely affects both the quality and length of their lives, and what they can do to change the narrative.

Which brings us to our fourth and final recommendation: Changing the Narrative has an entire **campaign dedicated to Internalized Ageism**, including a link to a **FREE, half-hour webinar** that will introduce you the AgeSmart Inventory©, a tool for introspection, reflection, and conversation about individual values and judgments about age.

Getting back to my hair, I'd be lying if I said I didn't appreciate all the compliments (after all, who doesn't?). But at the same time, it makes me sad that there are so many women (and men, I dare say) out there who would love to go gray—or try new things, or learn new skills, or pursue new opportunities—but are afraid to, simply as a result of Internalized Ageism.

Let's work together to put a stop to it, shall we?

*Barbara Raynor is an award-winning writer and strategic marketing and communications specialist with a particular passion for Adults 50+ and the challenges they face as they grow older. Based in Denver, she believes AGING IS LIVING and frequently writes and speaks on topics related to aging and ageism.*

Source: <https://changingthenarrativeco.org/2024/01/25/is-having-gray-hair-brave/>

# NHCOA March 2024 Meeting Recap

The Commission on Aging continued its focus on Alzheimer's Disease and Related Dementias (ADRD) at its March meeting.

The meeting opened with **Kerry Dennis** from Auburn, NH sharing her journey with Alzheimer's Disease. Still in an early stage, she shared her challenges working with her primary care physician to get a diagnosis and reinforced many of the barriers mentioned at the February Commission meeting, including a lack of provider information that inhibited an earlier diagnosis in Kerry's instance.

Her diagnosis only came after a referral to a Boston specialist by her employer. Emotions at that point of diagnosis ranged from relief from finally confirming what was happening, to sadness and loneliness, and a fear of living without purpose and future loss of dignity.

Connecting to the Alzheimer's Association, accessing their resources, and participating in their peer support groups have made a significant positive difference since her diagnosis. Kerry advocates that early-stage diagnosis needs to become the norm as it creates the opportunity for setting and communicating goals for one's own care and quality of life over the course of the disease with family and future care partners. Kerry ended by talking about all the things she loves in her life that she is still able to enjoy even with this diagnosis.

**Kris Hering, Vice President of Quality Improvement at Foundation for Healthy Communities**, spoke to the requirement in statute that required hospitals to complete and implement an operational plan for the recognition and management of patients with dementia or delirium in acute-care settings by January 2023.

In early 2022, hospitals collaborated in a learning community reviewing resources, studying best practices, conducting gap analysis, and hearing from experts to help each other develop plans and troubleshoot implementation.

There were many "aha moments," including realizing the impact of delirium and the imperative of preventive measures. Valued by the hospitals, the learning community has continued to convene past its intended end date.

One significant challenge for hospitals is supporting patients who lack family or a designated care partner at home. Kris was asked how hospitals are communicating the complexity of post hospital care of patients with dementia or delirium with a patient's primary care physician. She attested to hospital

acknowledgement of care coordinators in the care management for this patient population.

Another question was asked about staff training on dementia. Kris replied that the plans required hospitals to provide annual training to staff.

A final question asked how hospitals are held accountable for planning and implementation. She indicated that accountability falls to the Bureau of Health Care Facility Licensing within the NH Department of Health and Human Services. People with concerns can raise issues to the Bureau.

An attendee commented that it can be time consuming for organization leaders - who are required to provide training on dementia and dementia care - to weed through all the information available to make sure that the training is relevant and accurate training. They suggested that the state provide free updated annual trainings to meet this requirement.

The final presentation on ADRD was provided by **Susan Antkowiak Vice President, Programs & Services | Alzheimer's Association, MA/NH Chapter**. She spoke about Alzheimer's research and innovation and resulting changes on the horizon. Susan covered what we know about prevention and the emotional, social, and medical benefits of early diagnosis. Speaking to research on various biomarkers, she suggested that we could be optimistic that a blood draw could be used for diagnosis within the next five years.

As access to PET (positron emission tomography) scans is limited, especially in rural areas, this could significantly open the door for early diagnosis. The Alzheimer's Association is involved in developing clinical guidelines towards their use, but it could take time to get into common practice. Early diagnosis will have increased value as we move into an era of treating not just symptoms, but the biology of the disease interrupting its progression. There are currently over 140 unique therapies being tested in clinical trials.

## Other Updates

Other updates were provided on the Older Adult Volunteer Award Program and the bills being tracked by the Commission.

## Next Meeting Information

The next Commission meeting will be on Monday, April 15, 2024 at 10:00 AM at the NH Hospital Association, 125 Airport Road in Concord. To attend via ZOOM, please access the link under the calendar tab for that date at <https://www.nhcoa.nh.gov/>

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## Letter to the Editor:

### ***In Support of Long Term Care Coverage for Middle Income Medicare Recipients***

Submitted by **RICHARD MOORE**, Chichester, NH

This is an overview of the lack of Long Term Care coverage for middle income NH Medicare recipients and it suggests steps to provide LTC coverage for middle income Medicare recipients. A side benefit is that the NH Medicaid LTC costs would be reduced due to the reduction of NH residents entering the low asset/low-income Medicaid LTC program.

A couple dozen of my middle-income baby boomer Medicare friends and I have been contemplating our potential Long Term Care, LTC, needs over the next few years. The middle income MediCARE LTC outlook appears bleak and potentially budget breaking expensive.

If you are on MediCARE and need long-term care help with basic personal tasks of everyday life, sometimes called “activities of daily living”, then you are 100% responsible for that entire LTC cost. This includes dressing, bathing and using the bathroom. MediCARE does not cover these LTC services. If you hire an individual or a company to come to your house to provide these LTC services, then you will be responsible for the entire cost. If you enter a LTC facility to receive these LTC benefits you will be responsible for the LTC cost.

It is extremely important to note that Skilled Nursing, Rehab, and other medical services are not LTC and the non LTC services may be “covered” by MediCARE. There may even be some cases where limited LTC might be temporarily “covered” to some extent as a necessary related service to a Skilled Nursing, Rehab, or similar MediCARE covered benefits, but stand-alone LTC is NOT covered by MediCARE.

You may have seen newspaper articles, NH legislation, studies, and reports about LTC improvements and enhancements but that is for MediCAID LTC, not LTC for middle income MediCARE recipients. If you are on MediCARE then you are on your own for LTC. The TV advertisements that show the nice people coming into your home to help you should highlight that MediCARE LTC patients are responsible for the LTC cost.

You may know of family and friends that have gone through the MediCAID “spend down” and the five year look back to meet the strict financial requirements to be MediCAID eligible for LTC. This can be a very stressful and difficult financial, emotional, and dignity process for the patient and the patient’s family.

We suggest that the MediCARE rules be changed to allow MediCARE to “cover” LTC. The new rules would allow LTC “coverage” to begin when the appropriate “Advanced Benefit Notification”, ABN is issued per existing MediCARE rules. The new MediCARE LTC benefit would cease when the patient passes or the official Hospice documentation is processed, again in accordance with existing MediCARE processes. This op-ed uses the MediCARE definition of LTC and identified the official beginning of LTC and the official end points of LTC. This is important to address the potential cost and benefits of a MediCARE LTC benefit within these parameters. Many other articles, NH legislation, studies, and reports treat MediCAID LTC as the entire LTC. MediCARE LTC tends to

*Medicare Long Term Care, con’t next page*

## **You’re Invited To Share Your Thoughts & Ideas**

New Hampshire’s older adults have a story to tell.

We welcome the opportunity Aging Matters gives you to share your story with others in hopes that your experiences will help, inspire and encourage someone else as we all look for answers and ideas on how to navigate the years ahead.

Please use Aging Matters as your way to share those personal experiences and your personal points of view on living in New Hampshire as an older adult.

We hope that in sharing a variety of different points of view, we are able to assist our readers in forming their own opinions.

There are two ways to send articles —or to add your name to our newsletter mailing list.

1. Email it to: [NHCOAnews@gmail.com](mailto:NHCOAnews@gmail.com)

2. Mail it to: NHCOA Newsletter, NH Commission on Aging, 117 Pleasant St., Dolloff Building, 4th Floor, Concord, NH 03301

We look forward to hearing from you soon!

**[NHCOAnews@gmail.com](mailto:NHCOAnews@gmail.com)**

## **Check Out Past Editions of AgingMatters**

**<https://www.nhcoa.nh.gov/newsletters.aspx>**

## Medicare Long Term Care, con't

be ignored and middle income MediCARE patients tend to be ignored for LTC "coverage".

What might LTC coverage look like and how would it be funded? A couple of initial steps include determining an appropriate MediCARE pay rate for in-home LTC workers and also an appropriate MediCARE rate for facility based LTC. Then one option is to have MediCARE "cover" in home LTC up to some limit, maybe 70 hours per week. MediCARE could pay for the in-home LTC at the usual 80% rate and the patient would be responsible for the other 20%, similar to many other MediCARE coverages.

The funding for this new MediCARE LTC benefit could come from a variety of sources including a modest increase to the current \$175/month MediCARE premium, adjustments to the 1.45% MediCARE payroll tax, an increase to the MediCARE payroll tax cap, a redirection of some of the funds paid to MediCARE Advantage programs, the MediCAID savings by creating MediCARE LTC benefits, and other possible sources.

The "coverage" for facility based LTC coverage tends to be significantly more expensive than in home services and might be something for the Medi-Gap Supplemental Insurances. The facility based Medi-Gap coverage might follow the model of the existing private LTC insurances or the Medi-Gap Insurance companies may develop a new model. Hopefully the Medi-Gap LTC insurances would be able to serve a larger population than the private insurance options and be able to provide stable coverages at stable premiums.

In addition to providing financial and emotional benefits to the middle income MediCARE patients and their families, this new benefit would reduce the number of patients entering MediCAID LTC because the "spend down" would be deferred and possibly eliminated in some cases. This would reduce the number of people entering MediCAID LTC. The cost savings to NH and MediCAID LTC needs to be estimated.

There are several benefits to creating MediCARE LTC benefits. Please contact your Federal Congressional Representatives Kuster and Pappas and Senators Shaheen and Hassan to encourage them to support a new MediCARE LTC benefit. Thanks

## Contact Information for NH Members of the U.S. Congress

U.S. Rep. Chris Pappas,

(202) 225-5456

<https://pappas.house.gov/>

U.S. Rep Ann Kuster,

(202) 225-5206

<https://kuster.house.gov/contact/>

U.S. Senator Maggie Hassan,

(202) 224-3324

<https://www.hassan.senate.gov/content/contact-senator>

U.S. Senator Jeanne Shaheen,

(202) 224-2841

<https://www.shaheen.senate.gov/contact>

## Who is My NH State Legislator?

Use this link to find and contact your

- **State Representative:** <https://www.gencourt.state.nh.us/house/members/>
- **State Senator:** <https://www.gencourt.state.nh.us/senate/members/wml.aspx>

Visit your town or city's website to find contact information for your local elected officials.



*"I stand for a world without ageism, where all people of all ages are valued and respected. I acknowledge that ageism is harmful to me and others around me, and to our workforce, communities, and economy. I know that the struggle to eliminate ageism will not end with a pledge, and that I must act to transform my own bias, and the bias in our institutions and systems. I will speak*

*out against the age injustices I see, call attention to ageist language and stereotypes, and educate myself, my family, friends, co-workers and peers about the importance of being actively anti-ageist and promoting age equity in all aspects of life."*

**Add your name at**

<https://agefriendly.community/anti-ageism-pledge/>

## RAISE YOUR VOICE!

Let us know what's on your mind and what's important to you.

Email us today!

**NHCOAnews@gmail.com**

# Celebrating Older Americans Month:

Established in 1963, Older Americans Month (OAM) is celebrated every May. Led by a federal agency, the Administration for Community Living, OAM is a time to recognize older Americans' contributions, highlight aging trends, and reaffirm commitments to serving the older adults in our communities.

This year's theme, "Powered by Connection," focuses on the profound impact that meaningful connections have on the well-being and health of older adults — a relationship underscored by the [U.S. Surgeon General's Advisory on the Healing Effects of Social Connection and Community](#).

"Connecting older adults both to each other and intergenerationally is an opportunity for a valuable and meaningful experience for all. Older adults have wisdom, experience, and often humor and balance that can bring pleasure and satisfaction" said **Sue Ruka, Chair of NH State Commission on Aging**. "By recognizing and nurturing the role that connectedness plays, we can mitigate issues like loneliness, ultimately promoting healthy aging for more Americans."

## What can individuals do to connect?

- Invite more connection into your life by finding a new passion, joining a social club, taking a class, or trying new activities in your community.
- Stay engaged in your community by giving back

through volunteering, working, teaching, or mentoring.

- Invest time with people to build new relationships and discover deeper connections with your family, friends, colleagues, or neighbors.

## How can community groups, businesses, and organizations mark OAM?

- Spread the word about the mental, physical, and emotional health benefits of social connection through professional and personal networks.
- Promote opportunities to engage, like cultural activities, recreational programs, and interactive virtual events.
- Connect older adults with local services, such as counseling, that can help them overcome obstacles to meaningful relationships and access to support systems.
- Host connection-centric events or programs where older adults can serve as mentors to peers, younger adults, or youths.

For more information, visit the official [OAM website](#).



# Women May Realize Health Benefits of Regular Exercise More Than Men

An NIH-supported observational study finds that even when women and men get the same amount of physical activity, the risk of premature death is lower for women.

For all the health benefits of exercise for both groups, however, only 33% of women and 43% of men in the study met the standard for weekly aerobic exercise, while 20% of women and 28% of men completed a weekly strength training session.

"Even a limited amount of regular exercise can provide a major benefit, and it turns out this is especially true for women," said Cheng. "Taking some regular time out for exercise, even if it's just 20-30 minutes of vigorous exercise a few times each week, can offer a lot more gain than they may realize."

"This study emphasizes that there is no singular approach for exercise," said Eric J. Shiroma, Sc.D., a program director in the Clinical Applications and Prevention branch at the National Heart, Lung, and Blood Institute (NHLBI). "A person's physical activity needs and goals may change based on their age,

health status, and schedule – but the value of any type of exercise is irrefutable."

The authors said multiple factors, including variations in anatomy and physiology, may account for the differences in outcomes between the sexes. For example, men often have increased lung capacity, larger hearts, more lean-body mass, and a greater proportion of fast-twitch muscle fibers compared to women. As a result, women may use added respiratory, metabolic, and strength demands to conduct the same movement and in turn reap greater health rewards.

**The Physical Activity Guidelines for Americans** recommend adults get at least 2.5-5 hours of moderate-intensity exercise or 1.25-2.5 hours of vigorous exercise each week, or a combination of both, and participate in two or more days a week of strength-based activities.

Source: <https://www.nih.gov/news-events/news-releases/women-may-realize-health-benefits-regular-exercise-more-men>

# New Studies Suggest Millions with Mild Cognitive Impairment Go Undiagnosed, Often Until It's too Late

By **SOEREN MATTKE**, Director of the USC Dornsife Brain Health Observatory, USC & **YING LIU**, Research Scientist, Center for Economic and Social Research, USC Dornsife College of Letters, Arts and Sciences

Mild cognitive impairment – an early stage of dementia – is widely underdiagnosed in people 65 and older. That is the key takeaway of two recent studies from our team.

In the first study, we used Medicare data for about 40 million beneficiaries age 65 and older from 2015 to 2019 to estimate the prevalence of mild cognitive impairment in that population and to identify what proportion of them had actually been diagnosed.

Our **finding was sobering**: A mere 8% of the number of cases with mild cognitive impairment that we expected based on a statistical model had actually been diagnosed. Scaled up to the general population 65 and older, this means that approximately 7.4 million cases across the country remain undiagnosed.

In the second study, we analyzed data for 226,756 primary care clinicians and found that **over 99% of them underdiagnosed mild cognitive impairment** in this population.

## Why it Matters

Mild cognitive impairment is an early symptom of Alzheimer's disease in **about half of cases** and progresses to dementia **at a rate of 10% to 15% per year**. It includes symptoms such as losing the ability to remember recent events and appointments, make sound decisions and master complex tasks. Failure to detect it might deprive patients of an opportunity to get treated and to slow down disease progression.

Mild cognitive impairment can sometimes be caused by easily addressable factors, such as medication side effects, thyroid dysfunction or **vitamin B12 deficiency**. Since mild cognitive impairment has **the same risk factors as cardiovascular disease**, such as high blood pressure and cholesterol, medication management of these risks combined with diet and exercise **can reduce the risk of progression**.

In 2023, the Food and Drug Administration **approved the drug lecanemab** as the **first disease-modifying treatment for Alzheimer's disease**, the most common cause of mild cognitive impairment. In contrast to previous drugs, which can temporarily improve symptoms of the disease, such as memory loss and agitation, this new treatment addresses the underlying cause of the disease.

Lecanemab, a monoclonal antibody, **reduces amyloid plaques** in the brain, which are toxic protein clumps that are believed to contribute to the progression of the disease. In a large clinical trial, lecanemab was able to **reduce the progression** of early-stage Alzheimer's disease. A similar drug, donanemab, also **succeeded in a clinical trial** and is expected to be **approved sometime in 2024**.

However, these drugs must be used in the early stages of Alzheimer's disease, ideally when a patient has only mild cognitive impairment, as there is **no evidence that they are effective in advanced stages**.

## What Still Isn't Known

Many factors contribute to the **lack of timely detection**. But researchers don't have a good understanding of the relative importance of those individual factors or how to reduce the high rate of underdiagnosis.

While distinct, symptoms are subtle and their slow progression means that they can be overlooked or misinterpreted as normal aging. A neurologist in China told our research team that diagnosis rates spike in China after the New Year's holiday, when children who haven't seen their parents for a year notice changes that are harder to pick up when interacting with someone daily.

Doctors also commonly discount memory concerns as normal aging and doubt that much can be done about it. While cognitive tests to distinguish mild cognitive impairment from pathologic decline do exist, they take about 15 minutes, which can be hard to come by during the limited time of a doctor's visit and may require a follow-up appointment.

## What's Next

People, particularly those in their 60s and beyond, as well as their families and friends need to be vigilant about cognitive decline, bring it up during doctor's appointments and insist on a formal assessment.

The **Medicare yearly "wellness" visit** is an opportunity to explore such concerns, but only about half of beneficiaries **take advantage of it**.

Just as physicians ask patients about unexplained weight loss and take those concerns seriously, we believe questions that explore a patient's cognitive state need to become the norm.

Source: <https://theconversation.com/new-studies-suggest-millions-with-mild-cognitive-impairment-go-undiagnosed-often-until-its-too-late-216892>

# Opportunity to End Student Debt Loan Pay Count Adjustment Ends April 30, 2024

Many student loan borrowers have an opportunity to have their entire student loans cancelled or receive more credit towards cancellation. But there is an **impending deadline that requires immediate action** from certain borrowers who have student loans.

The one-time pay count adjustment will occur in Summer 2024. But borrowers who have non-federally held loans must consolidate their loans into a Direct-Consolidation Loan by **APRIL 30, 2024**.

While any borrower is potentially eligible, **older borrowers are more likely to need to take immediate action because of the types of loans these borrowers frequently have**. We need your help in getting these borrowers the information they need so that they can get their loans cancelled as soon as possible.

The U.S. Department of Education (ED) will be conducting a one-time payment count adjustment. Specifically, ED will give borrowers credit towards loan cancellation through its Income Driven Repayment program (IDR) for repayment periods since July 1, 1994, and for certain deferments and forbearances.

IDR programs result in loan cancellation after 20 or 25 years of eligible payments; the account adjustment will ensure borrowers receive credit for the maximum number of eligible payments based on their loan history.

This program has already resulted in cancellation of loans for more than 800,000 borrowers. In addition, IDR plans can make monthly payments more affordable by capping monthly payments based on borrowers' income and family size, not loan balances.

## Tri-State Learning Collaborative 'Inclusion Summit' is May 1

The 2024 Tri-State Learning Collaborative on Aging Spring Summit focusing on Inclusion will be held on Wednesday, May 1 at the Grappone Conference Center in Concord. To ensure that we all have the opportunity to live fulfilling lives throughout our lifespan, individuals, community members and program leaders need to plan with intention to engage, include, and learn from older adults of all ages and all different walks of life.

For updated information go to <https://lp.constantcontactpages.com/ev/reg/y66stv6/lp/231f533a-e425-4776-a5a0-7b06c4f14c0d>

Most federal student loans qualify for at least one IDR plan and federally held loans will automatically be subject to the pay count adjustment. However, some loans aren't eligible for these programs unless consumers take further action, and the borrowers who have these loans are the ones we are now trying to reach.

ED will apply the account adjustment to most federally held student loans. However, consumers who have certain types of loans must first consolidate their loan into a Direct Consolidation loan to maximize the effect of the account adjustment. These loans include,

- Parent PLUS,
- Commercially managed Federal Family Education Loan (FFEL),
- Perkins loans, and
- Health Education Assistance Loan (HEAL) Program loans.

### Action Plan for Borrowers

- Learn whether you have a loan that must first be consolidated into a Direct-Consolidation Loan to benefit from the account adjustment. To find out call ED at 1-800-433-3243 or go to, [studentaid.gov](https://studentaid.gov).
- If you have a one of the kinds of loans that requires consolidation, apply to consolidate your loan no later than April 30, 2024, at <https://studentaid.gov/loan-consolidation/>.
- To continue earning credit towards loan forgiveness after April 30, 2024, enroll in an IDR plan at, <https://studentaid.gov/idr/>.

## Your Local Resources

- **ServiceLink Aging & Disability Resource Center:**



Center: (866) 634-9412, [servicelink.nh.gov](https://servicelink.nh.gov)

- **2-1-1 NH** is the connection for NH residents to the most up-to-date resources they need from specially trained Information and Referral Specialists. 211 NH

is available 24 hours, 365 days a year. Multilingual assistance and TDD access are also available,



<https://www.211nh.org>



# Do You Have Time to Save a Planet?

By DON AKCHIN, The End Game

## Environmental causes are highly receptive to older adult volunteers.

People in our generation can take several approaches to climate change. The first is to be grateful that we won't be around that much longer to worry about it. We can let somebody else worry about it. But that approach is generally considered cowardly, insensitive toward our children and grandchildren, and not especially constructive.

A second approach is to focus on how older adults are **particularly vulnerable** to the **effects of climate change**. It is a fact that our bodies are less able to compensate for certain environmental hazards, such as air pollution. We also are more likely to have health conditions that make us more sensitive to extreme heat and cold. We are more likely to have compromised immune systems that make us more prone to severe illnesses contracted from insects (Lyme Disease) and water (diarrhea, dysentery, E. Coli). According to a recent article in the British medical journal *Lancet*, for example, heat-related deaths among adults older than 65 are up 85% compared with 1990-2000.

Finally, we may depend on others for medical care and assistance or may have limited mobility, all of which at us at greater risk in the event of hurricanes, tornadoes, wildfires, flooding, or other extreme weather events.

While all this may be true, seeing ourselves as vulnerable victims has disadvantages. In particular, it plays into ageist stereotypes of older adults as weak and helpless. "Viewing older individuals only as passive victims of environmental threats is an overly narrow and limiting perspective," says Dr. Karl Pillemer, a Cornell University professor of human ecology.

That leaves the third approach: actively working to better the environment and to prepare for the new climate realities. "Older adults around the world can be active participants rather than passive actors when it comes to climate change," says Pillemer, "by mobilizing in large numbers to address local environmental problems through civic environmentalism."

In other words – stop me if you've heard this one – think globally, act locally.

### Thinking Globally

One climate-change organization that encourages older adults to take the third approach is **Third Act**. Founded in 2022 by author and long-time climate

activist Bill McKibbin, Third Act professes to be "building a community of Americans over the age of sixty determined to change the world for the better." Specifically, it organizes older adult volunteers to become active in national campaigns on a panoply of climate-related issues and voter education efforts. It also encourages members to form local or state working groups to study issues and plan campaigns.

While Third Act deliberately seeks to harness the experience and talents of older adults, **Citizens Climate Lobby** appeals across generations to "empower everyday people on climate policy." Founded in 2007, it describes itself as "a nonprofit, nonpartisan, grassroots advocacy climate change organization focused on national policies to address the national and global climate crisis." More than 560 local chapters (including international chapters) help volunteers develop the skills to lobby officials in their state on climate change issues.

### Acting Locally

If lobbying, marching, and writing to politicians are not your cup of tea, there are numerous ways to address climate change closer to home – where you also are likely to see immediate results of your efforts. Environmental groups eagerly welcome older adult volunteers, both for their lived experience and because they have more time for engagement.

Opportunities abound. They include planting trees to shade streets and sidewalks, restoring parks and other green spaces, growing produce in a community garden, monitoring water quality in a watershed, reducing your home's carbon footprint, composting kitchen waste, promoting recycling, and educating children about the environment.

You can find ongoing projects or like-minded citizens at land conservation organizations, the state's cooperative extension office, an area nature center or science center, trail maintenance organizations, watershed management group, or through online platforms such as **volunteermatch.org**. A great site for background information and project ideas is the **Aging and Climate Change Clearinghouse** at Cornell University,

### Helping Yourself

While most volunteers are drawn to environmental causes by a sense of responsibility for the world and a commitment to leave a better world behind, there's also strong evidence that environmental activism **promotes healthy aging**. In a study of older adults who participated in programs to improve outdoor environments, volunteers improved their physical

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## Save a Planet, con't

health, improved their mental wellbeing, and reported feeling a sense of purpose.

People who comprehend the urgency and severity of the climate threat often struggle with sadness and depression, says Lawrence MacDonald, author of *Am I Too Old to Save the Planet? A Boomer's Guide to Climate Action*. "Working with others to address the threat can help to relieve these feelings," he says. "We can only free ourselves from our climate culpability by acknowledging it and vowing to do all we can to repair or minimize the damage."

If you find yourself looking for a new sense of purpose, or if you find yourself with a surplus of time on your hands, know that environmental groups are looking for people like you, and they have important work for you to do.

*Don Akchin produces a weekly newsletter and a biweekly podcast about positive aspects of aging. You can read more (and get a free subscription) at <https://theendgame.substack.com/p/do-you-have-time-to-save-a-planet>*

## NE Conference for Dementia Care Professionals

Registration is now open for the NE Conference for Dementia Care Professionals scheduled for May 2nd, 2024.

The conference will be held virtually and feature presentations from professionals in the field of Alzheimer's and dementia.



Those interested in attending can register at <https://www.alz.org/manh/events/necdcp>

If unable to attend, conference material will be available on the MA/NH Chapter's website following the conference.

Information and session recordings from the **2024 Family Conference** held March 1st and 2nd, 2024 are now available at <https://www.alz.org/manh/events/family-conference>.



## Let's Get Social

The NH State Commission on Aging has a Facebook page. Please follow the NHCOA at <https://www.facebook.com/NHCommissiononAging/> to stay up-to-date on the latest Commission news, as well as insights, resources and information from across the field of aging.

## What's a Caregiver?

Getting groceries. Driving to doctors. Picking up medications. Dropping off dinner.

These acts of kindness may make someone a good neighbor, friend, or family member. But they also qualify someone as an informal, unpaid "family caregiver."

There are an estimated 53 million family caregivers in the U.S., including many in our own community. If you aren't currently a caregiver, you're likely to become one or need one at some point in the future.

Some caregiver roles are unsurprising, such as a husband taking care of his wife with dementia, or an adult daughter caring for her father with Parkinson's.

Other caregiver roles are less obvious, like grandparents raising grandchildren, or children under the age of 18 caring for siblings or parents with chronic health conditions.

An increasing trend is the "sandwich caregiver," which is an adult caring for aging parents and raising children (or financially supporting them) at the same time.

No matter what type of caregiver you or someone you know may be, the work is hard and stressful. Unpaid caregivers are more likely to suffer from anxiety, depression, and social isolation. It's hard to know where to turn for help, and it's nearly impossible to get a break.

The Bureau of Elderly and Adult Services in collaboration with ServiceLink Aging and Disability Resource Center recognizes the importance of supporting all caregivers. We have partnered with Trualta to provide an online caregiver education and support platform at no cost to New Hampshire residents.

Caregivers can sign up at <https://beas.trualta.com> on a smartphone, tablet, or computer, in order to read articles and watch videos about how to provide the best care to loved ones. Trualta offers content in both English and Spanish for caregivers providing care for individuals with conditions like Alzheimer's disease and dementia, heart disease, diabetes, COPD, and more.

The first step in getting help and support is recognizing if you are, in fact, a caregiver. The next step is to sign up for resources like <https://beas.trualta.com>.

# 5 Medication Safety Tips for Older Adults

Whether you're settling into your 60s or heading into your 90s, be careful when taking medicines, herbal preparations and supplements.

Why the special concern? The older we get, the more likely we are to use more prescription and nonprescription (or over-the-counter, OTC) medicines. That can increase the chance of harmful side effects and drug interactions.

As we age, physical changes can affect the way our body handles medications and how medicines work in our bodies, which can lead to potential complications. For example, your liver and kidneys may not work as well as they once did, which affects how a drug breaks down and leaves your body.

If you have questions about any medication, contact the U.S. Food and Drug Administration's Division of Drug Information at 1-855-543-3784 and 1-301-796-3400, or [druginfo@fda.hhs.gov](mailto:druginfo@fda.hhs.gov). Our **pharmacists** are experts at interpreting information for patients.

Even if your medications have worked well for you over the years, they might need to be adjusted or changed **later in life**. Here are some important safety tips to keep in mind:

## 1. Take Medicine as Prescribed and with Input from Your Health Care Professional

Take your medicine regularly and follow your health care professional's instructions. If you're having bothersome side effects or have other questions about your medication, talk to a health care professional.

Don't take prescription medication your health care professional has not prescribed for you. Doctors consider many factors, including allergies and drug interactions, before prescribing medication for someone.

Taking someone else's prescription medication can cause unexpected side effects or dangerous reactions. For example:

If you have a symptom such as pain, your medical problem could get worse.

Misuse of medications may lead to addiction.

Don't skip doses or stop taking a prescribed medication without first consulting your health care professional, even if you're feeling better or think the medicine isn't working. Not taking your medicine as prescribed could lead to your disease getting worse, hospitalization or even death.

For example, many antibiotics must be taken for the full length of time prescribed even after your symptoms go away. Otherwise, you risk the infection returning and in a more severe form.

The best medicine in the world won't work unless you take it correctly. For example, medicines that treat chronic conditions such as high blood pressure, high cholesterol and diabetes work only when taken regularly and as directed. These diseases can cause damage to your body that is hard to notice before something is wrong.

Dosing for medications is based on **clinical trials**. Every medicine is different and is dosed according to what's been tested. That's one reason you shouldn't select or change a dose yourself.

If you are having trouble remembering how and when to take your medicine, talk with your pharmacist or other professional. They may have suggestions and tools to help you take the right medicine, at the right dose and at the right time.

## 2. Store your Medicines Properly and Check the Expiration Date

Help make sure your medicines remain safe and effective by storing them properly. Medicines that aren't stored properly may not work as well or may cause harm, even if they are not expired.

Be sure to read the information you were provided to find specific storage instructions for your medicine. Most medicines are best stored up and away, in a cool, dry place. Avoid exposing medicines to extreme high or low temperatures. For example, don't leave them in the car in the summer or winter. Some medicines must be stored in the refrigerator.

Take care to keep all medicines up and away from children. Children are especially at risk of accidental poisoning and may take a medicine because it looks like candy. If you have questions about how to safely store your medicines, contact your pharmacist or health care professional.

There are potential harms from taking expired medicines or drugs stored in extreme temperatures. If medicine has degraded, weakened or worsened over time, it might not work as intended. Worse, it could become harmful and cause unwanted side effects. People with serious or life-threatening diseases may be at higher risk of potential harm from expired medicines.

Check the expiration dates on your medication and **discard any unused or expired medicines** as soon as possible.

## 3. Be Aware of Potential Medication Interactions and Side Effects

Even common foods and drinks can cause serious interactions with medications. One example is **grapefruit juice**, which can affect how well some

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## Medications, con't

medicines work and may cause dangerous side effects.

Some medications should not be taken with alcohol, because it can result in loss of coordination, memory problems, sleepiness and falls.

Interactions can occur when:

- Your medical condition makes a medication potentially harmful.
- One of your medications affects the way your other medicine works, causing dangerous side effects.
- An herbal preparation or supplement alters the way another medication works.
- A food or drink (with or without alcohol) reacts with your medication or changes the way your body absorbs your medicine.

Learn about possible interactions and side effects of your medications by reading drug labels on your medicine. Also review any special instructions from your health care professional.

Some medications can cause side effects that mimic other health problems, such as memory

difficulties, dizziness and sleepiness. Ask your health care professional if any new problems you are experiencing could be caused by your medications.

## 4. Keep a Medication List

Write down all medicines you take, including OTC drugs, vitamins and dietary supplements. The **list** should include the name of each medicine or supplement, the amount you take, and when you take it. If it's a prescription drug, note who prescribed it and why.

Keep the list current and show it to all your health care providers, including physical therapists and dentists. Keep one copy at home and another with you (in your wallet, purse or cellphone).

## 5. Have a Question? Contact FDA's Drug Information Pharmacists.

When in doubt, reach out and ask our pharmacists.

- By email: [druginfo@fda.hhs.gov](mailto:druginfo@fda.hhs.gov)
- By phone: 1-855-543-3784 and 1-301-796-3400

Source: <https://www.fda.gov/consumers/consumer-updates/5-medication-safety-tips-older-adults>

# Ensuring Wheelchair Users Can Fly with Dignity

The U.S. Department of Transportation (DOT) is seeking public comments on a new **proposed rule** designed to ensure airline passengers who use wheelchairs can travel safely and with dignity.

An estimated 5.5 million Americans use a wheelchair, and many encounter barriers when it comes to air travel. In 2023, 11,527 wheelchairs and scooters were mishandled by carriers required to report data to DOT.

The proposed rule would set new standards for prompt, safe, and dignified assistance; require enhanced training for airline employees and contractors who physically assist passengers with disabilities and handle passengers' wheelchairs; and specify actions that airlines must take to protect passengers when a wheelchair is damaged during transport.

Notably, the proposed rule would require airlines to provide passengers with two options to repair or replace their wheelchairs if mishandled by the airline. The two options are:

- The carrier handles the repair or replacement of the wheelchair with one that has equivalent or greater function and safety within a reasonable timeframe and pays the associated cost.
- The passenger arranges the repair or replacement

of the wheelchair with one that has equivalent or greater function and safety through their preferred vendor and the airline pays the associated costs.

In addition, the proposed rule would make it easier for DOT to hold airlines accountable when they damage or delay the return of a wheelchair to its owner by making it an automatic violation of the Air Carrier Access Act to mishandle wheelchairs.

As part of the Notice of Proposed Rulemaking, DOT is also requesting input on two topics not currently included in the proposal: lavatory size on twin-aisle aircrafts and reimbursement of the fare difference between a flight someone could've taken if their wheelchair fit in the aircraft and the more expensive flight they had to take instead.

Comments can be submitted online, by mail or fax, or hand-delivered through Monday, May 13, 2024.

(<https://www.regulations.gov/document/DOT-OST-2022-0144-0225>)

Read DOT's press release (<https://www.transportation.gov/briefing-room/secretary-buttigieg-announces-proposed-rule-ensure-passengers-who-use-wheelchairs-can>) for a summary of key provisions.

## Help Us Spread the Word!

If you like this newsletter, please share it with your family, neighbors, friends, and colleagues.

# Obtain a Copy of Your Federal Tax Transcript or Tax Return

Do you need a copy of your federal tax return transcript or an actual copy of your tax return? Do you know the difference? Transcripts are the most important highlights of your return. They're free, can date back to your last 10 years and you can download them online immediately.

Copies of your actual tax return cost around \$43 each, can take up to 75 days to process and go back only seven years. Still unsure which you need?

## Get a Federal Tax Return Transcript

- Transcripts are print-outs of the most important highlights from a tax return. In many cases, you may only need a transcript and not a full copy of your tax return.
- You can get transcripts of the last 10 tax years.
- Transcripts are free.
- Online orders can be downloaded immediately.
- Phone and mail orders take 5-10 days.
- [Learn how to request a tax transcript online, by phone, or by mail.](#)

## Get a Copy of Your Federal Tax Return

- Copies of tax returns are exact replicas of your tax return and all the attached forms you submitted. In most cases, you will need a transcript rather than a copy of your tax return. But you may need a copy of your tax return for other reasons, like filing an amended tax return.
- You can get copies of your last 7 years of tax returns.
- Each copy is \$43.
- It may take up to 75 days to process your request.
- [Learn how to get a copy of your tax return using Form 4506, Request for Copy of Tax Return.](#)

Source: <https://www.irs.gov/efile/individuals/get-copy-tax-return>

## How to Handle a Big – and Unexpected – Tax Bill

It happens more often than we'd like to think. You misjudged or miscalculated your tax liability for the year, and, surprise, you owe Uncle Sam big bucks. It's not a good feeling. And those threatening letters from the IRS that will certainly follow if you don't pay will cause sleepless nights.

Writing for Senior Planet, Rodney A. Brooks offers tips on how not to panic or ignore the problem and what steps to take to ensure that you don't get into that situation again.

Find the article at <https://seniorplanet.org/articles-big-unexpected-tax-bill>

## Solar Eclipse Time Capsule Update

Details about the time capsule being planned as part of the April 8, 2024 Total Solar Eclipse Celebration continue to be finalized.

According to Rik Yeames, the time capsule will be buried at the McAuliffe-Shepard Discovery Center on Wednesday, May 1, 2024 – 50 years in advance of the New Hampshire's next total eclipse scheduled for May 1, 2079.

Items are currently being sought to include in the capsule. Of particular interest are solar eclipse items from New Hampshire's older adults, especially those who recall or reference the last two NH solar eclipses in 1959 and 1932.

If you or an older relative remembers either of these events, they're encouraged to share their experiences.

Items from NH juniors (ages 10-20) are also of interest as this is the age segment that has the best chance of viewing both the 2024 and 2079 eclipses.

Those interested in more information can contact Rik at [r.yeames@comcast.net](mailto:r.yeames@comcast.net). He does caution that his response could be slow because he's going to be pretty busy between now and NH Solar Eclipse Day on Monday, April 8.

More information about the April 8 eclipse can be found at <https://www.visitnh.gov/solareclipse>

# 2023/2024 NH Fuel Assistance Program Ends April 30

If you have had trouble paying for your heat this winter season, the New Hampshire Fuel Assistance Program (FAP) may be able to provide you with some relief.

The Fuel Assistance Program provides benefits to qualified New Hampshire households to assist with heating costs from December 1st through April 30th. Applications can be submitted through April 30th. Both renters and homeowners may qualify for the Fuel Assistance Program.

The NH Department of Energy distributes federal Low Income Home Energy Assistance Program (LIHEAP) funds to New Hampshire's five Community Action Agencies (CAAs), which in turn take applications, determine benefits, and distribute FAP payments to vendors on behalf of eligible New Hampshire households throughout the state.

FAP benefits may also be used to help households in a heating emergency by securing an emergency delivery of fuel or by delaying a utility disconnection or eviction notice if heat is included in the rent and the rent is not subsidized.

FAP benefits are a grant; they do not have to be paid back and they are not counted as income when applying for other assistance programs. Fuel bills that have already been paid by the applicant can be submitted and repaid through the awarded benefit, creating a credit on the applicant's account.

**HOUSEHOLD INCOME GUIDELINES**  
PY 2023-2024 - 60% of State Medium Income

Household Size	30 Days	365 Days
1	\$ 3,422	\$ 41,635
2	\$ 4,475	\$ 54,446
3	\$ 5,528	\$ 67,257
4	\$ 6,581	\$ 80,069
5	\$ 7,634	\$ 92,880
6	\$ 8,709	\$105,961

## Am I Eligible?

Eligibility for the Fuel Assistance Program is determined by gross household income (i.e. total before taxes), the number of people in the household, the type of household and fuel used, and the energy burden to the household. Income limits are surprisingly high (i.e.: \$54,446 annually for a 2-person household).

## How Do I Apply?

Contact your local CAA office to learn how to apply for FAP. (See the list of CAA office phone numbers in your county on the side panel.)

The CAA staff will tell you what information you will need to supply to process your application. To prevent delays in processing, be sure to provide all requested documents.

If you are homebound or unable to visit a Community Action Agency office, it may be possible to arrange a home or telephone interview.

Find more information at <https://www.energy.nh.gov/consumers/help-energy-and-utility-bills/fuel-assistance-program>

## NH Community Action Agencies

### BELKNAP COUNTY (CAPBM)

Laconia (603) 524-5512

Meredith: (603) 279-4096

### CARROLL COUNTY (TCCAP)

Tamworth: (603) 323-7400

### CHESHIRE COUNTY (SCS)

Keene: (603) 352-7512

or (800) 529-0005

### COOS COUNTY (TCCAP)

Berlin: (603) 752-3248

### GRAFTON COUNTY (TCCAP)

Ashland: (603) 968-3560

### HILLSBOROUGH COUNTY

(SNHS)

Milford, Peterborough & Hillsborough

(603) 924-2243 or (877) 757-7048

Manchester: (603) 647-4470

or (800) 322-1073

Nashua: (603) 889-3440

or (877) 211-0723

### MERRIMACK COUNTY (CAPBM)

Concord: (603) 225-6880

Suncook: (603) 485-7824

Warner: (603) 456-2207

### ROCKINGHAM COUNTY (SNHS)

Derry: (603) 965-3029 or

(855) 295-4105

Portsmouth: (603) 436-3896 or

(800) 639-3896

Raymond: (603) 895-2303 or

(800) 974-2303

Salem: (603) 893-9172

or (800) 939-9172

Seabrook: (603) 474-3507

or (800) 979-3507

### STRAFFORD COUNTY (CAPSC)

Dover, Farmington & Rochester:

(603) 435-2500

### SULLIVAN COUNTY (SCS)

Claremont: (603) 542-9528

# Tips for Better Nutrition

By **CARLI POLANCO**, Program Coordinator, SNAHEC

March was Nutrition Month so let's dive into some more nutrition information, and how gardening indoors can lead to a multitude of nutritional benefits. The integration of indoor vegetable gardening provides a delightful solution that combines the joy of cultivation with the health benefits of fresh produce. We will explore the relationship between indoor gardening and nutrition, and provide delicious recipes that transform homegrown vegetables into culinary delights.

## Tips for Better Nutrition through Indoor Gardening:

Choose nutrient-dense varieties when embarking on indoor gardening, opt for vegetables rich in essential nutrients. Leafy greens like kale and spinach, along with colorful bell peppers and cherry tomatoes, are excellent choices. These varieties not only thrive indoors but also pack a punch in terms of vitamins and minerals. If you want some seeds to start your indoor garden, fill out the form located at <https://forms.gle/7oHMNHtAGmCJPTcv7> to receive some seeds.

## Delicious Recipes to Showcase Indoor Harvests:

- **Herb-Infused Quinoa Salad:** Harvest fresh herbs like basil, parsley, and chives from your indoor garden to create a flavorful herb-infused quinoa salad. Toss in cherry tomatoes, cucumber, and a drizzle of olive oil for a nutritious and satisfying dish.
- **Spinach and Feta Stuffed Bell Peppers:** Utilize homegrown spinach and bell peppers to craft a wholesome meal. Mix spinach with feta cheese, quinoa, and your favorite herbs, then stuff the mixture into halved bell peppers. Roast until golden brown for a delicious and nutrient-packed entrée.

## More Tips for Better Nutrition

- **Diversify Your Plate:** Incorporate a variety of vegetables from your indoor garden into each meal to ensure a broad spectrum of nutrients. Different colors and types of vegetables provide a range of vitamins, minerals, and antioxidants essential for overall well-being.
- **Include Healthy Fats:** Incorporate sources of healthy fats, such as avocados, nuts, seeds, and olive oil, into your diet. These fats support heart health, brain function, and the absorption of fat-soluble vitamins.
- **Stay Physically Active:** With the Spring season upon us this would be a great time to start taking walks outside. Regular physical activity is crucial for overall health. Combining a balanced diet with regular exercise to maintain a healthy weight, support cardiovascular health, and boost your mood. Our Walk with Ease programming is a great opportunity to start implementing movement into your routine. To learn more and sign up check out: <https://www.snhahec.org/walk-with-ease.html>.

Indoor vegetable gardening not only elevates the nutritional content of your meals but also adds a touch of freshness and flavor to your culinary creations. By following these tips and incorporating homegrown vegetables into delicious recipes, you embark on a journey towards better nutrition, embracing the harmony between gardening and a wholesome, satisfying diet.

# NH State Veteran Cemetery Invites Volunteers to Annual Clean Up Event

The NH Department of Military Affairs and Veterans Services, New Hampshire State Veterans Cemetery is grateful for all our volunteers that support and assist with maintaining the dignity of its hallowed grounds and beauty of the flower gardens.

April is National Volunteer Month, and the New Hampshire State Veterans Cemetery welcomes all to attend its cleanup event.

## Memorial Walkway and Headstone Cleaning Event

- Sunday, April 28, 2024, 10:00am – noon
- New Hampshire State Veteran Cemetery
- 110 Daniel Webster Highway
- Boscawen, NH 03303

Sponsored by Rolling Thunder of NH, Gold Star Families, and Air Force Academy Association of Graduates NH.

Bring your work/rubber gloves, rakes, small leaf blowers, tarps, safety glasses and appropriate outerwear. The Cemetery will provide heavy equipment, scrub brushes, water and cleaner.

Further information may be found at the NH State Veteran Cemetery website at <https://www.nhsvc.com/1000-am-memorial-walkway-headstone-cleaning-event-1> and updates will be included on their Facebook page <https://www.facebook.com/NHSVC/> as the date gets closer.

# SCAM of the Month

## How to Identify and Avoid Package Delivery Scams

The COVID-19 pandemic has changed the way many Americans shop, with online purchasing in the U.S. increasing steadily. More shopping online means more package deliveries for consumers.

With the increase in deliveries, the FCC has received complaints about delivery notification scam calls and texts, proving once again that fraudsters are following the trends and adapting their scams to steal your money and information.

Many delivery scams start with a text message or an email about delivering a package to your address, according to the Better Business Bureau. These messages often include a “tracking link” that you are urged to click in order to update your delivery or payment preferences. You might also get a voicemail message with a call-back number, or a “missed delivery” tag on your door with a number to call.

While these messages often look or sound legitimate, you should never click a link or call back the number from an unexpected delivery notice. Instead, contact the delivery service or seller directly using a verified number or website.

In some cases, a link may open a website that prompts you to enter personal information, or it may install malware on your phone or computer that can secretly steal personal information. The number you call back may be answered by a scam “operator” asking to verify your account information or the credit card number you used for a purchase. Other scam calls and texts may claim you need to pay a customs fee or tax before the delivery can be made.

Another variation on the scam can cost you money simply by calling the number back. The fake delivery notice will include a call back number with an 809 area code, or other 10 digit international number. Calling back can result in high connection fees and costly per minute rates. (See also FCC Consumer Guide: One Ring Phone Scam)

If you receive suspicious email, text or phone messages, go to the delivery carrier’s website directly or use the retailer’s tracking tools to verify the sender’s identity and avoid these scams.

In addition, the U.S. Postal Service has posted an alert about phony delivery texts. The alert cites “unsolicited mobile text messages indicating that a USPS delivery is awaiting your action” and includes a non-postal service web link to click.

National delivery companies are also providing information on their websites to help consumers avoid falling for package delivery scams. Both FedEx and UPS say they do not seek payment or personal information through unsolicited texts and email.

On its website, FedEx includes common warning signs of mail, text or online scams:

- Unexpected requests for money in return for delivery of a package, often with a sense of urgency.
- Requests for personal and/or financial information.
- Links to misspelled or slightly altered website addresses, such as “**fedx.com**” or “**fed-ex.com**.”
- Spelling and grammatical errors or excessive use of capitalization and exclamation points.
- Certificate errors or lack of online security protocols for sensitive activities.

FedEx also warns that “If you receive any of these or similar communications, do not reply or cooperate with the sender.”

UPS provides examples of these types of fraudulent communications on its fraud alert webpage.

Remember that imposter scams often illegally spoof phone numbers used in calls and texts to try to trick you into thinking that the number is from a legitimate company or even a government agency.

If you receive any information about an unexpected package delivery, err on the side of caution. Follow the tips above to keep your information and finances secure.

Source: <https://www.fcc.gov/how-identify-and-avoid-package-delivery-scams>



# Links to Learn More

The following is a sample of information regarding older adults that came across our desk this month. We thought our readers might find this information interesting. Please follow the links or type the URL address into your browser for the complete story.

## **Social Security Announces Four Key Updates to Address Improper Payments**

Social Security Commissioner Martin O'Malley today announced he is taking four vital steps to immediately address overpayment issues customers and the agency have experienced. Details can found at [www.ssa.gov/news/press/releases](http://www.ssa.gov/news/press/releases).

Additional information about the recent plan to tackle Social Security overpayments and clawbacks can be found in "Social Security Chief Testifies in Senate About Plan to Stop 'Clawback' Cruelty" written by David Hilzenrath and Jodie Fleischer of the Cox Media Group in cooperation with KFF Health News. The article can be found at <https://kffhealthnews.org/news/article/overpayments-social-security-chief-testifies-senate/>

## **Qualified Vendor Applications Sought to Provide Adult Day Program Services**

*The following information was shared by the NH Alliance for Health Aging:*

Covered at NHAHA's Quarterly Meeting last December, the shortage of adult day health care programs in the Granite State is placing a further burden on family caregivers. To help mitigate that issue, the New Hampshire Department of Health and Human Services, Division of Long Term Supports and Services, Bureau of Elderly and Adult Services is seeking responses to this Request for Applications (solicitation) from qualified Vendors to provide Adult Day Program services to individuals who reside in independent living settings, in accordance with the Older Americans Act, Title III, and the Social Services Block Grant Programs, Title XX of the Social Security Act.

Learn more at: <https://www.dhhs.nh.gov/news-and-media/rfa-2024-dltss-02-adult-adult-day-program-services>

## **April Medicare Minute**

"Medicare Minutes" are short, engaging presentations on current Medicare topics hosted by the Medicare Rights Center. The presentation is streamed live using a Medicare interactive profile.

## **April Topic: Medicare for Federal Employees and Retirees**

- Thursday, April 18, 2024 • 3:00 - 3:30 PM (EST)  
Federal Employee Health Benefit (FEHB) plans cover current and retired government employees, and

work with Medicare differently than other employer plans. In this Medicare Minute, you'll learn how your FEHB benefits coordinate with Medicare and what to consider when making enrollment decisions.

Visit [www.medicareinteractive.org/medicare-minute](http://www.medicareinteractive.org/medicare-minute) to access the archive of presentations and attend any of the upcoming live presentations.

## **Consumer Reports Updates Cybersafety Skill Resource**

Consumer Reports has just completed a redesign of its already excellent free resource that helps folks develop cybersafety skills – in English and Spanish: Security Planner. The site guides the user in setting up a plan to keep their data secure. The plan helps cut down on data collection and protects sensitive personal information, health data, and geolocation. Users have only to answer a few simple questions to get customized recommendations to keep their sensitive data safe

Find the Security Planner at <https://securityplanner.consumerreports.org/>

## **New Website Provides Strategies to Support Family Caregivers**

The National Academy for State Health Policy (NASHP) has launched a website, [SupportCaregiving.org](http://SupportCaregiving.org), that offers resources that different sectors can use to implement the National Strategy to Support Family Caregivers (<https://acl.gov/CaregiverStrategy>)

[SupportCaregiving.org](http://SupportCaregiving.org) supports the implementation and dissemination of the National Strategy and offers education through a variety of resource guides.

NASHP also has a new quarterly [newsletter on Family Caregiving](#) that offers an in-depth round-up of state family caregiving initiatives and resources, including the latest resource guides from [SupportCaregiving.org](http://SupportCaregiving.org), new publications from the RAISE Act Family Caregiver Implementation and Technical Assistance Center, and highlights from states on their latest activities.

Sign up for the newsletter at <https://nashp.us5.list-manage.com/subscribe?u=7c540696e67cc934b09085310&id=545dba200e>

*Introducing the 2024...*

# AGE OF CHAMPIONS



**APRIL 20, 2024**  
**Lundholm Gym UNH Durham**  
**10 AM - 1 PM**



Center on Aging and Community Living  
Age of Champions Health and Wellness Fair

**Join us for our 11th Annual  
Health & Wellness Fair!**

## Demos and Workshops

- Interactive workshops
- Assistive technology activities
- Full event & table demonstrations
- And more!

## Community Involvement

- Intergenerational healthy aging resources
- Local vendors
- Community networking
- And more!

## UNH Student Involvement

- Educational resources on ageism
- Occupational therapy screenings & activities
- Fall risk, balance, & exercise assessments
- And more!

*For more information,  
check out our  
Facebook page or  
scan the QR code for  
our event website!*



<https://www.facebook.com/unhageofchampions/>

