



Pennsylvania Behavioral Health and Aging Coalition
Opening Doors for Older Pennsylvanians

News You Can Use...

October 5, 2010

Treatment Admissions Way Up for Older Americans

The excesses of the Baby Boomer generation are starting to show up at the door of U.S. treatment programs, which saw admissions of patients ages 50 and older almost double between 1992 and 2008.

Patients over age 50 comprised 12.2 percent of all treatment admissions in 2008, up from 6.6 percent in 1992, according to a report from the [Substance Abuse and Mental Health Services Administration](#) (SAMHSA). Admissions for heroin use among this age group more than doubled, cocaine admissions quadrupled, and significant increases in older Americans seeking treatment for prescription drugs and marijuana also were reported.

Most of those seeking help had started using their primary substance of abuse prior to age 25, but an increasing number said they had only started using drugs like cocaine or prescription medications within the past five years. More older Americans also are reporting problems with multiple substances, including alcohol, illicit drugs, and prescription medications.

The findings are reported in [Changing Substance Abuse Patterns among Older Admissions: 1992 and 2008](#).

Connecting Those At Risk to Care: A Guide to Building a Community "Hub"

The AHRQ Health Care Innovations Exchange Web site features a new guide to help mobilize local community organizations to coordinate appropriate medical care and social services for at-risk individuals. This online guide provides a step-by-step process for community-based organizations and health care services to work together to improve the quality and coordination of medical care and social services for the most vulnerable groups, including African Americans, Hispanics, women, and older adults.

More information is available at
<http://www.innovations.ahrq.gov/resources/resources.aspx>



For Elderly Individuals with Depression, Cost-Sharing Insurance Policies Reduce Drug Use without Increasing Use of Care

Many are concerned that patient cost-sharing policies incorporated in the Medicare Modernization Act may have unintended health consequences, if they reduce essential drug use among the elderly. After two cost-sharing insurance policies were introduced in British Columbia in 2002 and 2003, there was a decline in antidepressant initiation among the elderly, but this decline did not lead to adverse consequences indicated by greater use of other health care services, according to a new study. Neither the copayment policy nor the coinsurance/income-based deductible policy had any significant effect on long-term care admissions, hospitalization rates, psychiatrist visits, or physician visits for elderly patients with depression.

More information is available at <http://www.ahrq.gov/research/oct10/1010RA8.htm>

Rural Elderly with Dementia are Hospitalized More Often for Conditions That Primary Care Visits Might Have Caught

Older adults who suffer from dementia and live in rural areas are more likely than city dwellers to end up hospitalized for conditions that could have been prevented if better outpatient care were available near their pastoral surroundings, a new study finds. Researchers linked survey data from the 1998 National Longitudinal Caregiver Survey with Medicare and Veterans Affairs claims data from 1,186 U.S. veterans who suffer from dementia. They found that 13 percent of veterans had at least one "ambulatory-care-sensitive hospitalization." This term refers to a condition in which timely primary care in an outpatient setting would have reduced the need for a hospitalization.

More information is available at <http://www.ahrq.gov/research/oct10/1010RA10.htm>

Training Package Features Elder Abuse Victims

In Their Own Words: Domestic Abuse in Later Life is a two-DVD package and training guide prepared by the Office for Victims of Crimes. It uses the voices of older victims to facilitate a dialog among professionals about the dynamics of abuse, the barriers these victims must overcome to live free from abuse, and interventions and potential collaborations that may be effective in such cases.

More information is available at <http://www.ovc.gov/library/videoclips.html>

Video Explains New Health Care Reform Law

The Kaiser Family Foundation has made available a video to help the American public understand the new health care reform law. This short animated movie -- featuring the "YouToons" -- explains the problems with the current health care system, the changes that are happening now, and the big changes coming in 2014.

The video is available at <http://healthreform.kff.org/the-animation.aspx>



Web Watch

Staying organized is a key component of family caregiving. Ecarediary.com is a free Web site that offers family caregivers online tools and information to stay organized. The online calendar helps you keep track of and share appointments, medications, and dietary needs. It also enables family members to send email reminders. The site also has a shopping portal that offers a range of supplies from bathtub transfer benches and medical supplies to mobility devices. There is a search engine listing 110,000 certified care services, and information and links to medical conditions and information on financing care.

Source: Met Life Quick Facts October issue

More information is available at

<http://www.metlife.com/assets/cao/mmi/publications/quick-facts/2010/mmi-quickfacts-october-2010.pdf>

Aging in Place

A new study released by the MetLife Mature Market Institute, *The MetLife Report on Aging in Place 2.0: Rethinking Solutions to the Home Care Challenge*, reports that communities, government, and the public and private sectors will need to make major changes to accommodate older Americans' desire to remain in their homes. The age 85+ population, at greatest risk of being disabled, is expected to grow to 8.7 million people in 2030 from 4.3 million in 2000. This report finds that adjustments will need to include homes in which residential design, health care services, and new monitoring technologies are combined with comprehensive community care services to form a dynamic and efficient home health management system.

Source: Met Life Quick Facts October issue

More information is available at [http://www.metlife.com/mmi/research/aging-in-](http://www.metlife.com/mmi/research/aging-in-place.html?WT.ac=Pro2_NewMMI_5-18421_T4297-MM-mmi&oc_id=Pro2_NewMMI_5-18421_T4297-MM-mmi#insights)

[place.html?WT.ac=Pro2_NewMMI_5-18421_T4297-MM-mmi&oc_id=Pro2_NewMMI_5-18421_T4297-MM-mmi#insights](http://www.metlife.com/mmi/research/aging-in-place.html?WT.ac=Pro2_NewMMI_5-18421_T4297-MM-mmi&oc_id=Pro2_NewMMI_5-18421_T4297-MM-mmi#insights)

QPR Gatekeeper Trainer Certification

A training is available for those interested in becoming certified instructors to teach the QPR (Question, Persuade, Refer) Method for suicide prevention. The training will be held on November 9 in Centre County and will be targeted to individuals who will teach the method to those who work with older adults.

Sponsored by:

Pennsylvania Department of Aging and Office of Long Term Living

In Collaboration with:

Pennsylvania Adult/Older Adult Suicide Prevention Coalition

More information is available at

<http://www.olderpa.org/Resources/Documents/Newsletter/QPR%20T4T%2011%2010-1-1.pdf>



1-Day Training Session for Caregivers, Mental Health, & Aging Professionals

Behavioral Health Connection (An APPRISE Program)

There is no charge for this training!

December 13, 2010 State College; 8:30-4:00

Topics Will Include:

- Understanding Behavioral Health Concerns in Care giving
- Understanding and Accessing Medicare Services for Mental Health Consumers
- The training will include case studies to help understand issues involved in serving Baby Boomers, older adults, and those dealing with substance use.

For more information or to register online:

<http://www.olderpa.org/Default.aspx?pageId=643643&eventId=217997&EventViewMode=EventDetails>

The Network of Care Personal Health Record

The **Personal Health Record (PHR)** on the Network of Care Web sites generates a great deal of interest. Thousands of records have been created, and there are frequent inquiries from around the country asking what it can do. Here is an update on this valuable and free service:

- The PHR is on all Network of Care sites. It is free to use and contains no commercial advertisements.
- The PHR is a fully registered, HL7-compliant record, meeting the highest international standards for electronic medical records, including fully encrypted, password-protected security.
- The PHR offers private and safe storage of virtually any medical, health, personal and legal documents, as well as private notes.
- The PHR can grab and store the best-in-class articles from the Network of Care Library relative to any condition or medication typed into the record. It can even immediately find the local service agencies that deal with that condition.
- Because the PHR is fully integrated with the Network of Care, it also has the remarkable capacity to find and store a wide variety of interactive self-assessment tools and eLearning-based educational and recovery programs.
- The person who creates the PHR may grant access to a guest who can see all or part of the record – all under the exclusive control of the PHR's creator. A guest, in turn, can leave a private message for the record's creator inside the PHR.
- The person who creates a PHR can make an Emergency Card or Care Coordination Card that can be kept in a purse or wallet for valuable use in a wide variety of circumstances.
- The PHR has full "interoperability standards" with electronic medical records, if there is a willing provider.

For more information go to www.pa.networkofcare.org

Previous copies of PBHAC's News You Can Use are available on the website at www.olderPA.org/newsletter

