

# **New Jersey State AFL–CIO Retirees Health Literacy Conference Report and Resource Guide**

**Wednesday, October 5<sup>th</sup>, 2005**

**United Auto Workers Region 9, 56 Vineyard Road, Edison, NJ**

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## Presenters

- ✚ Governor-elect/Senator Jon Corzine
- ✚ Linda Potter, Dr. P.H., UMDNJ-School of Public Health
- ✚ David Knowlton, CEO of NJ Healthcare Institute
- ✚ Kelli M. Singleton, MPA, Large Employer Outreach  
Coordinator, Centers for Medicare & Medicaid Services,  
Division of Medicare Operations
- ✚ Lois Krieger Esq., Community Health Law Project

We thank Governor-elect Senator Jon Corzine and these health care professionals for participating in this important event and for sharing their expertise and comprehensive resource information.

*This Resource Guide is provided as a courtesy of the  
New Jersey State AFL-CIO Retirees with permission of the presenters.*

## **“Health Care for Retirees in New Jersey”**

**U.S. Senator Jon Corzine, NJ State AFL-CIO, Endorsed candidate for Governor (now Governor-elect of New Jersey)**

- **Jon Corzine has a 100% AFL – CIO voting record**
- **Believes pensions and benefits are rights for retirees**
- **He does not agree with the growing practice of companies declaring bankruptcy and turning their back on employees by withdrawing pension benefits**
- **Senator Jon Corzine is against the privatization of Social Security**
  
- **New Medicare Prescription Drug plan**
  - ✓ **It is too complicated and the “doughnut hole” in the coverage is too costly for those on a fixed income**
  - ✓ **The plan discourages employers to maintain coverage?**
  
- **Corzine Property Tax Plan**
  - ✓ **Rebates for seniors \$1200 to \$1800 over next four years**
  - ✓ **Biggest burden falls on seniors because of their fixed income status**
  - ✓ **Rebates with 10% growth each year for people with salaries under \$70,000 (cost associated with plan...\$1.7 billion)**
  - ✓ **Forrester’s plan to cut property taxes 10%, 20%, 30%.....(Corzine believes this is unrealistic and costs \$9 Billion)**
  
- **Jon Corzine is a proponent of labor**
  - ✓ **He will bring his Goldman-Sachs management style to the governor’s office, which includes team work, good working conditions, accountability, leadership and fair play**
  - ✓ **He will work everyday for the people of NJ**

## **“Health + Literacy: What is Health Literacy?”**

**Linda Potter, Dr. P.H., UMDNJ-School of Public Health**

**Health Literacy** is the ability to “read, understand, and act” to protect one’s health. Examples include: prescription labels, pamphlets, consent and insurance forms, as well as doctor’s orders.

### **The Problem**

- **50% of Americans have difficulty reading.**
- **33% of people over 65 have literacy problems.**
- **Most health information is given at the college graduate level, even though the average reading level in the U.S. is 8<sup>th</sup> grade.**
- **The words and phrases used by doctors are complicated, so even very bright people often do not understand them.**
- **For example, two-thirds of patients in one survey did not know what it means to “take on an empty stomach”. Even more did not know if they were eligible for Medicaid.**
- **Other examples:**
  - ✓ **A woman who described having had her uterus removed (hysterectomy) because she signed 5 forms without understanding what she was reading. It was her gallbladder that should have been taken out.**
  - ✓ **A man who did not know that ‘hypertension’ means the same as ‘high blood pressure’.**
- **But many people are embarrassed to ask questions. They feel they should understand what they are being told or what they are reading.**

### **What to do about it**

- **Please, DON’T HESITATE TO ASK QUESTIONS. Know that, if you have a question, many other people have that same question.**
- **BE PERSISTENT. Keep asking questions until you understand.**
- **The 3 most important questions to ask your doctor (“AskMe3”):**
  1. **What is my main problem?**
  2. **What do I need to do?**
  3. **Why is it important for me to do this?**

- **To do at each visit:**
  1. Ask those 3 questions.
  2. Bring a list of your other questions and concerns.
  3. Bring a list of all medicines you take (name and dose).
  4. Bring a family member or friend with you. Two people can ask and remember more than one.
  5. “Teach back.” Tell your doctor what you think she/he said and ask if that is correct.
  6. Again, keep asking questions. Be persistent.
  7. Call back later if you still aren’t sure.
- Also ask your pharmacist any questions about the medicines you take.
- Visit the website [WWW.ASKME3.ORG](http://WWW.ASKME3.ORG) for other suggestions.
- Other useful websites: [www.cdc.gov](http://www.cdc.gov), [www.fda.gov](http://www.fda.gov), [www.webmed.com](http://www.webmed.com), [www.aarp.org](http://www.aarp.org), [www.ama-assn.org](http://www.ama-assn.org), [www.pfizerhealthliteracy.com](http://www.pfizerhealthliteracy.com)

**What is the Extent of the Health Literacy problem?**  
**Introduction of the Health Literacy Survey to Retirees**  
**David Knowlton: CEO of NJ Healthcare Institute**

Goal of the NJ Healthcare Institute is to prevent medical error and improve the quality of health care

- **Some Statistics about the problem**
  - Number of people killed in Vietnam: 57,939
  - TWA Plane Crash: 230
  - United States medical Errors Daily: 238
  - Medical errors yearly: about 90,000
- [www.HowsYourHealth.org](http://www.HowsYourHealth.org)
  - Provides an objective questionnaire for you to fill out
  - You can also receive a form to give to your doctor to further explain your history, health literacy, and feelings about health
- **Online Resources to Evaluate Doctors and Hospitals**
  - Leap Frog Group
    - Claims that 2/3 medical errors are easily preventable

- **Vial of Life**
  - **On the NJ Healthcare Institute website**
  - **Creates a list of all medications that you take and you are able to print and put it on the fridge or in a wallet**
- **What can you do as a patient – when speaking with the doctor about medications?**
  - **Tell your doctor EVERYTHING you are taking**
  - **Disclose allergies**
  - **Describe your ability to read the prescription label**
  - **Ask Pharmacist, “Is this the medicine my Doctor prescribed?”**
- **Practicing Drug Safety**
  - **Always double check that the prescription dosage is accurate**
  - **Watch for Trailing Zeros on prescription dosage that may confuse the Pharmacist**
  - **Always a leading zero when less than 1 unit to prevent misreading**
- **Drug Shopping**
  - **Prices for drugs may vary within the same community as much as \$40**
  - **Ask for prices and do not be afraid to shop around**
- **Tips for a Doctor’s Office visit**
  - **Bring a friend or family member to help understand what the doctor says**
  - **Bring a piece of paper listing all of your health concerns and read them all to your doctor**
- **Tips for a Hospital stay**
  - **Check quality of the hospital and doctor online at [WWW.NJHCQL.ORG](http://WWW.NJHCQL.ORG)**
  - **Choose a hospital where many have had your procedure**
  - **Ask everyone to wash their hands**
  - **Understand the treatment plan for you to follow at home**
  - **Know what medicines you are taking**

- **Tips for a Surgery**
  - **Make sure that you, your doctor, and your surgeon are clear on what will happen, including any conditional surgeries: For example, if you are likely to have other health issues once the doctor is inside, how should they react to these problems?**
  - **Make sure that the surgeon signs the operating site with a felt marker**
- **Patient Summary**
  - **Speak up with any questions or concerns**
  - **Make sure someone is in charge of your care**
  - **Providers need all your necessary health information**
  - **Do not assume everyone knows everything they need to know**
  - **Ask a friend or family member to be with you**
  - **Understand that “more” is not always better in health care**
  - **Ask for test results. Have your doctor explain what they mean**

**Understanding the Prescription Drug Plan and How it Relates to Your Current Insurance Plan:**

**Kelli M. Singleton, MPA, Large Employer Outreach Coordinator, Centers for Medicare & Medicaid Services, Division of Medicare Operations**

- **Overview of Medicare updates and Prescription Drug Plan**
- **Medicare A and B cost sharing updates for 2006**
  - ✓ **Part A Hospital Insurance: \$952 per benefit period (up to 60 days after the initial day in hospital...possibility of days in and out of hospital), Daily co-pay from 61-90 days is \$238, Daily co-pay from 91-150 days is \$476**
  - ✓ **Part B Insurance (Outpatient; blood work, x-rays, etc.): monthly premium of \$88.50, and an annual deductible of \$124**

- Medicare now **COVERS** routine physicals only to newly eligible Medicare beneficiaries within the first 6 months of enrollment. Physicals include height, weight, and blood pressure;
- An electrocardiogram, education, counseling, and referrals to other preventative services are covered by Medicare
- Medicare Prescription Drug Plans
  - ✓ Available January 2006
  - ✓ Offered through private prescription drug plans (PDPs)
  - ✓ Are voluntary plans
- Health Plans offering Part D Benefits in NY: Aetna, American Progressive Life and Health, Cambridge Life Insurance, Excellus Health Plan, GHI, HIP Medco, United Health Care, Wellcare Health Plans....and others
- Health Plans offering Part D benefits in NJ: Aetna, American Progressive Life and Health, Connecticut General Life Insurance, Health Net Life Insurance, Horizon, Humana, Medco, United Health Care, Wellcare Health Plans...and others
- Part D eligibility: 1) entitled to Part A and/or enrolled in part B, 2) reside in plan's service area, 3) must enroll in a Medicare prescription drug plan to get Medicare prescription drug coverage
- Enrollment periods:
  - ✓ Initial open enrollment period- 11/15/2005 – 05/15/2006
  - ✓ Part B open enrollment period
  - ✓ Annual coordinated enrollment from 11/15 to 12/31 of any given year
- Postponing Enrollment results in higher premiums for people who wait to enroll at rate of 1% of base premium for every month that a person does not have Part D (exception for people with prescription drug coverage at least as good as a Medicare prescription drug plan declared as "Creditable coverage"
  - ✓ One needs a notice declaring that current coverage is creditable from their or their spouse's former employer if receiving retirement coverage and should mention what happens to current coverage if you enroll in Medicare Part D

- ✓ **Example of creditable coverage: PDPs or MA-PDs, Some Employer Group Health Plans, State Pharmaceutical Assistance Programs like PAAD, VA coverage, TRICARE—all of these entities are required to send a creditable coverage notice to their enrollees**
- **It is possible to stop the Medicare Part D plan during the annual coordinated election period or a special enrollment period**
- **Dis-enrollment from Part D occurs when you move out of the coverage area, pass away, or lose eligibility**
- **Also may occur if monthly premium is not paid or if the patient is “disruptive”**
- **Standard Benefit**
  - ✓ **\$32 monthly premium (estimated)**
  - ✓ **\$250 deductible**
  - ✓ **The Part D plan pays 75% of drug costs from \$250 to \$2250 and beneficiary pays 25%**
  - ✓ **Beneficiary pays 100% of drug costs from \$2250 to \$5100**
  - ✓ **The Part D plan pays 95% of costs after \$3600 out of pocket (called True Out of Pocket Costs or TROOP); Beneficiaries pay 5% or a \$2 or \$5 co-pay (whichever is less) for the remainder of the year.**
- **Sources of Pay**
  - ✓ **Beneficiaries with Medicare**
  - ✓ **Family member**
  - ✓ **Medicare’s cost sharing assistance program---wherein Medicaid helps people pay their Part B premiums**
  - ✓ **Qualified State Pharmacy Assistance Programs like PAAD for NJ**
- **Extra Help is available for those with limited incomes**
  - ✓ **Must have an income below 150% of the Federal Poverty Level and resources below \$10,000 as an individual and \$20,000 for a married couple.**
  - ✓ **People who have both Medicare and Medicaid with incomes at or below 100% of the FPL will be automatically enrolled into a Part D plan if they do not choose one by**
  - ✓ **December 31<sup>st</sup>. Can change to another plan if they do not want to stay in the plan they’ve been auto enrolled in.**

- ✓ People with Medicare and Medicaid with incomes at or below 135% of the FPL or who have Supplemental Security Income, or who are enrolled in the Medicare Savings Program or have Medicare alone will be automatically enrolled into a Part D plan if they do not choose one by May 15<sup>th</sup>, 2006
- ✓ People who have incomes at 150% of the FPL should contact the local Social Security office to apply for the subsidy at 800-772-1213; the application is also online at [www.socialsecurity.gov](http://www.socialsecurity.gov)
- ✓ Premiums and deductibles are either fully paid for or reduced for these individuals and couples
- **Drugs Not Covered**
  - ✓ Drugs for: anorexia, weight loss, or weight gain, fertility, cosmetic purposes or hair growth, cold and cough relief, prescription vitamins and mineral products, over the counter drugs, barbiturates, benzodiazepines
- **IMPORTANT DATES TO REMEMBER:**
  - ✓ November 15, 2005: last day to receive a Creditable Coverage notice from your former employer or insurer. Part D enrollment begins
  - ✓ January 1<sup>st</sup>, 2006: Part D coverage begins for people who enroll by December 31<sup>st</sup>
  - ✓ May 15, 2006: Part D initial enrollment ends
- **Compare Plans**
  - ✓ Find out which plan covers YOUR drugs: Use the Medicare Prescription Drug Plan Finder at [www.medicare.gov](http://www.medicare.gov)
  - ✓ Find out your plans' pharmacy access and mail order options
  - ✓ Choose whether to stay with your current plan or enroll in Medicare Part D
- **For More information**
  - ✓ Online: [www.medicare.gov](http://www.medicare.gov) and [www.socialsecurity.gov](http://www.socialsecurity.gov)
  - ✓ Phone: 1-800-MEDICARE (1-800-633-4227)
  - ✓ State Health Insurance Assistance Program: 1-800-792-8820
  - ✓ Social Security: 1-800-772-1213
  - ✓ Review the 2006 Medicare and You Handbook—mailed to every Medicare beneficiary during the fall of every year.

**Lois Krieger Esq., Community Health Law Project**  
**“Advocacy services for Medicaid and Medicare recipients”**

- **Advocacy begins with understanding of how to access resources for:**
  - **Existing laws**
  - **Contacting agencies**
  - **Legal help**
  - **Explanation of health care services**
- **Medical appeal process**
  - **You are able to appeal denials of coverage by Medicare, Medicaid, or private insurers**
  - **Ask your doctor to advocate for you by calling or writing the plan on your behalf**
- **Self-funded union plans are under Federal jurisdiction**
- **Policies of insurance executed in New Jersey are under New Jersey state jurisdiction**
- **Sources of information to find out more information**
  - **Internet**
  - **SHIP (State Health Insurance Assistance Plan) counselor**
    - **You are able to make an appointment and sit down with a representative – main number 800-792-8820**
  - **Medicare number: 800 633-4227 (800-MEDICARE)**
  - **The Community Health Law Project, 973 275-1175, may be able to assist you, if other sources could not.**

*Dr. Potter, Mr. Knowlton, Ms. Singleton and Ms. Krieger are available to speak to groups, depending on their schedules.*

## **Health Literacy Handouts & Resources**

- 1935-2005 Celebrating 70 years of programs that support the health and economic needs of American workers, retirees, and their families (NCPSSM) – *Booklet*
- Help for People with Medicare – A Guide to the NJ State Health Insurance Assistance Program – *Brochure*
- America’s Senior Health Guide – Good Health Begins with you (NCPSSM) – *Booklet*
- Community Health Law Project – *Brochure*
- Your Consumer Rights in Managed Health Care – A program of the Community Health Law Project – *Brochure*
- Alternatives for Seniors – Free Telephone Assistance – *Booklet*
- Medicare Part D – Prescription Drugs (NCPSSM) – *Flyer*
- National Committee Endorses the “Medicare Informed Choice Act” – *Letter*
- An overview of Medicare Part D and other important updates: Kelli M Singleton

**Publication # 11107:** Quick facts about Medicare’s New Coverage for Prescription Drugs for people who have coverage from an Employer or Union

**Publication # 10116:** Your Medicare benefits

**Publication # 11063:** Guide to Answering your Medicare Questions on the Web

**Publication # 02179:** Medicare and other Benefits: Your Guide to Who Pays First

**Publication # 11022:** Medicare Coverage of Diabetic Supplies & Services

**Publication # 11055:** How to Read your Medicare Summary Notice

**Publication # 10110:** Guide to Medicare Preventive Services

**Publication # 02248:** Women with Medicare

**Publication # 111162:** Frequently Asked Questions about Retiree Prescription Drug Coverage

## **Health Insurance & Disability Resources**

<i>Catastrophic Illness in Children Relief Fund</i>	1-800-355-FUND
<i>NJ Dept. of Banking &amp; Insurance</i>	1-800-446-7467; 609-292-5316; <a href="http://www.njdobi.org">www.njdobi.org</a>
<i>NJ Dept. of Health &amp; Senior Services</i>	1-888-393-1062; <a href="http://www.state.nj.us/health/hcsa">www.state.nj.us/health/hcsa</a>
<i>NJ Div. of Developmental Disabilities</i>	609-984-4500
<i>NJ Div. of Disability Services</i>	1-888-285-3036
<i>NJ Div. of Mental Health Services</i>	1-800-382-6717
<i>NJ Div. of Temporary Disability Insurance</i>	609-292-7060
<i>NJ Div. of Vocational Rehabilitation</i>	609-292-5987
<i>Medicaid</i>	1-800-356-1561; <a href="http://www.state.nj.us/humanservices/dmhs">www.state.nj.us/humanservices/dmhs</a>
<i>Medicaid Buy-In Program</i>	1-888-285-3036 (Division of Disability Services)
(Ticket to Work)	
<i>Medicaid Fraud &amp; Abuse</i>	1-888-973-2835; 1-888-692-2140
<i>Medicaid Fair Hearing Unit</i>	609-588-2656
<i>Medicare</i>	1-800-MEDICARE; <a href="http://www.medicare.gov">www.medicare.gov</a>
<i>Medicare Coordination of Benefits</i>	1-800-999-1118
<i>Medicare Ombudsman</i>	410-786-0630
<i>New Jersey FamilyCare</i>	1-800-701-0710 <a href="http://www.njfamilycare.org">www.njfamilycare.org</a>
<i>PAAD &amp; Senior Gold</i>	1-800-792-9745; <a href="http://www.njpaad.gov">www.njpaad.gov</a> ; <a href="http://www.srgold.gov">www.srgold.gov</a>
<i>SHIP Program</i>	1-800-792-8820; <a href="http://www.state.nj.us/health/senior/ship.shtml">www.state.nj.us/health/senior/ship.shtml</a>
<i>Social Security Administration</i>	1-800-722-1213; <a href="http://www.ssa.gov">www.ssa.gov</a>
<i>Special Child, Adult and Early Intervention Services</i>	609-292-5676
<i>TRICARE</i>	1-800-241-4848; <a href="http://www.tricare.osd.mil">www.tricare.osd.mil</a>
<i>US Dept. of Labor (ERISA)</i>	1-866-444-3272; 212-607-8600 or 215-861-5300; <a href="http://www.dol.gov/ebsa">www.dol.gov/ebsa</a>
(self-funded plans)	
<i>Veterans Administration</i>	1-800-827-1000; 1-800-624-0508
<b><u>Advocacy Organizations</u></b>	
<i>Community Health Law Project</i>	973-275-1175; 1-888-838-3180; <a href="http://www.chlp.org">www.chlp.org</a>
<i>Legal Services of NJ</i>	1-888-576-5529; <a href="http://www.lsnj.org">www.lsnj.org</a>
<i>Medicare Rights Center</i>	1-888-466-9050; 212-869-3850; <a href="http://www.medicarerights.org">www.medicarerights.org</a>
<i>NJ Protection &amp; Advocacy, Inc.</i>	1-800-922-7233
<i>Families USA</i>	202-628-3030; <a href="http://www.familiesusa.org">www.familiesusa.org</a>
<i>Health Assistance Partnership</i>	<a href="http://www.healthassistancepartnership.org">www.healthassistancepartnership.org</a>
<i>Center for Patient Partnership</i>	608-265-6267; <a href="http://www.law.wisc.edu/patientadvocacy">www.law.wisc.edu/patientadvocacy</a>