

DO YOU HAVE **concerns** about falling?



A MATTER OF BALANCE

MANAGING CONCERNS ABOUT FALLS

Many older adults experience concerns about falling and restrict their activities. A MATTER OF BALANCE is an award-winning program designed to manage falls and increase activity levels.

This program emphasizes practical strategies for managing concerns about falls.

YOU WILL LEARN TO:

- view falls as controllable
- set goals for increasing activity
- make changes to reduce fall risks at home
- exercise to increase strength and balance

WHO SHOULD ATTEND?

- anyone 60 years and older who have concerns about falls
- anyone interested in improving balance, flexibility and strength
- anyone who has fallen in the past
- anyone who has restricted activities because of falling concerns

YWCA Corpus Christi

is Hosting

"A MATTER OF BALANCE"

July 3rd - July 26th

Mondays and Wednesdays

1:30 PM - 3:30 PM

4601 Corona, Corpus Christi, TX

For Additional Information Contact:

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**THIS FREE EDUCATIONAL PROGRAM IS
BROUGHT TO YOU IN PARTNERSHIP WITH:**



CLASSES ARE FREE!



A Matter of Balance: Managing Concerns About Falls

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A Matter of Balance Lay Leader Model

Recognized for Innovation and Quality in Healthcare and Aging, 2006, American Society on Aging.

A Matter of Balance Lay Leader Model was developed by a grant from the Administration on Aging (#90AM2780).

Will My Medicare Still Work When I Move or Travel? 4 Key Facts You Need to Know

April 7, 2016 by: Margie Johnson Ware, Aging and Health Specialist

1. I have Original Medicare with no supplement. Isn't that the most flexible thing I can choose?

Yes and no. Original Medicare is definitely flexible. It covers you within the United States and can be used wherever local practitioners accept Medicare.

However, be sure and ask if the practitioner in question accepts Medicare assignment before they start treating you. If they don't accept Medicare, you may be asked to pay for the service upfront, or be charged 15% more than what Medicare would pay.

As for your lack of supplemental Medicare coverage, you may want to consider it. Although you don't go on a trip *expecting* to need medical services, if you are in an accident or experience some type of medical emergency away from home, supplemental Medicare coverage (also known as Medigap) definitely comes in handy.

2. Having Original Medicare with a supplement that covers overseas travel is the best plan you can choose. Right?

Original Medicare plus a supplemental (aka Medigap) policy that covers overseas travel is very flexible—it will cover you in the event of an emergency outside the US. It is also expensive. Is this a contingency that you actually need to plan for (and pay for), or will trips to foreign countries be relatively rare for you? Often, healthcare in other countries is cheaper than in the United States.

If you rarely travel overseas—but still want to be covered when you do—consider taking out travel insurance right before a trip (rather than paying every month for a supplemental policy that covers overseas travel). A good travel insurance policy will cover extra charges to change your return date, and other expenses, should you experience a health crisis overseas.

When travelling *within* the US, any type of supplement (with or without the overseas travel coverage) can be helpful in the event of a medical emergency. In fact, all supplemental plans are valid across the country and must be accepted (even if the local hospital or clinic tells you they have never heard of it). Try to have your Medicare card with you at all times to prevent any confusion—the law requires that your policy be listed as a Medicare Supplement.

3. I have a Medicare Advantage plan. Does that mean I'm stuck at home?

Not in the least. You just need to be aware of some of the limitations—Medicare Advantage/Part C plans are more restricted in terms of the provider networks they work with. And make sure you have a travel insurance company on speed dial before you book overseas adventures!

All Medicare Advantage (MA) plans will cover you in a true emergency within the US. A broken leg, stroke, or heart attack means you should always find the Emergency Room first (and ask questions about coverage and costs slightly later). After receiving treatment, be sure to contact your MA company within the first 24-48 hours of your arriving at the ER, and inform them of the issue. They will then tell you how to proceed from there.

Finally, remember to show hospital personnel your Medicare Advantage membership card rather than your Medicare card! If you show the hospital your Medicare card, the provider will bill Medicare rather than your MA plan. The MA card ensures that your care is billed properly.

4. My Medicare Advantage plan says it is a “National Plan.” So, I don't need to worry, right?

Not exactly! Although it says it's a “national plan,” you still need to check that the local area you are traveling to has practitioners in your network. You are certainly covered for an emergency, but if you need continuing oversight for a chronic condition, you should make those arrangements in advance.