



TO YOUR HEALTH



Carleton-Willard Out Patient Clinic

100 Old Billerica Road, Bedford MA 01730

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The Times, They Are A-Changing

By Marcia Feldman,
Palliative Care Coordinator

There have been some recent changes to Medicare, health insurance regulations and local hospitals that may affect the health care we receive in our last days.

Starting January 1, 2016, qualified health care professionals began being reimbursed by Medicare for conversations with their patients about advanced care planning. This was historically a delicate issue. People who initially opposed this change worried about expensive care being withheld or rationed. Now there is general agreement among many that these conversations are important and physicians should be reimbursed for their time. Polls show that *“eight in 10 people in the U.S. said Medicare and private health insurers should pay for end-of-life conversations.”* Wall Street Journal, October 20, 2015. This change marks a cultural shift towards encouraging discussions with our health care providers about our priorities and preferences if or when we are unable to speak for ourselves.

Another change is a pilot program by Medicare called Medicare Care Choices Model. Currently, a patient with serious illness has to choose to forego curative treatments in order to receive hospice services. Under this limited experiment, people with certain diseases who qualify for hospice will be able to receive a range of hospice services while they continue to receive treatment for their illness. This pilot program is only being administered on a trial basis through a handful of hospices in the U.S. If successful, this new model could lead to a reduction in hospital and emergency room visits and ease the transition to end-of-life and hospice care.

According to Dr. Diane Meier, Director of the Center to Advance Palliative Care, *“Allowing people to receive both types of care may actually save money. Several studies have shown that patients who receive both palliative care and disease treatment actually live longer than those who receive only disease treatment.”*

Insurers are interested in these changes because medical care at the end of life can be expensive. According to a Dec. 28, 2015 article in the Boston Globe, *“a 2010 study found that 25 percent of all Medicare payments go towards the 5 percent of people in the last year of their lives.”*

Other changes are in process. For example, one health insurer is developing a new program that will support members with advanced illness in their own homes. In addition, policies are changing around eligibility for hospice. Many health plans limit hospice coverage to people with 6 months or less to live. Blue Cross, Blue Shield will be expanding hospice coverage to people with 12 months or less to live. Tufts Health Plan will be working with its members to record their end-of-life wishes on paper so their primary care physicians and Health Care Proxy Agents will know about the patient's wishes for care. Massachusetts General Hospital will be training clinicians who treat serious illnesses to know how to help patients plan for death. Beth Israel Deaconess has made changes to its electronic medical records system that will help emergency physicians retrieve information about patients' end of life wishes.

These revisions reflect a fundamental cultural change in the care we receive in our final days.



Health Education Lecture

“Coping with Downsizing and Transitions”

Many elders faced with the necessity of moving to a smaller residence are often overwhelmed with the task, both physically and emotionally.

Please come join us for our presentation to learn practical ways to manage the task of downsizing, and work through the emotions that can accompany these transitions. This panel discussion will be presented by Susan Cusson, Nurse Practitioner; Judi Tabor, Clinic Social Worker and Lois Young, Director of Llewysac Lodge.
Wednesday, February 10, 2016
10:30am —11:30 am
Auditorium Center.

Clinic Satisfaction Survey

Surveys went out the last week of January. Please contact the Clinic if you did not receive one in your mailbox. We're always looking for ways to improve so your feedback is important to us. Thank you for taking the time to complete the survey.

Please return by February 12.

BEDFORD DRUG PICK-UP

The Bedford Police will pick-up expired and unused medications on:

Friday, February 12, 2016

You can drop off any unused/expired Prescription ONLY

medication at the Clinic between 8:30 am and 12 noon.

Unfortunately, we can only accept medicines during these times and on the date of pick-up.

Make Your Diet Mediterranean



Hardly a day goes by without headlines touting the health benefits of a Mediterranean-style diet, which has been linked to lower risk of cardiovascular disease and possible brain protection. Now, a recent study suggests this style of eating may also help protect women against breast cancer. In the PREDIMED trial, Mediterranean dieters were instructed to follow these guidelines:

Eat more:

- Olive oil, 4 or more Tbsp./day
- Nuts, 1 oz./day
- Vegetables, 2 or more servings/day
- Fruits, 3 or more servings/day
- Wine, 1 small glass/day (optional)
- Legumes, 3 servings/week
- Fish, 3 servings/week
- Chicken or turkey instead of red meat

Eat less:

- Red and processed meat, less than 1 serving/day
- Butter, margarine and cream, less than 1 serving/day
- Soda, less than 1 serving/day
- Grain-based desserts and pastries, fewer than 3 servings/week

"from Tufts Health & Nutrition Newsletter, January 2016"

ACUPUNCTURE & ACUPRESSURE



Finding balance in health is a goal we all aspire to. In order to upgrade ourselves for comfort and to enhance our health, we need to honor and nurture our body in the present and bring our spirit to a calm and peaceful place. Acupressure and/or Acupuncture can give us that guidance and support.

Barbara Blanchard sees Residents on Monday afternoons for Acupuncture and/or Acupressure. Call the Clinic to schedule an appointment.