

The Caucus Corner

The National Caucus and Center on Black Aging, Inc. (NCBA)
Monthly Newsletter
September 2023

IN THIS ISSUE

MAINSTREAM NEWS

- First 10 Drugs Eligible for Medicare Price Negotiations1-2
- COVID-19 Still a Threat. Vaccines Remain Covered and Available at No Cost to You..... 3
- Triple Threat: COVID-19, Flu, and RSV.....4-5
- National Preparedness' Month.....6-8
- FEMA Fact Sheet: Wireless Emergency Alerts6-7
- Natural Disasters in the U.S..... 7-13

EMPLOYMENT

- How to Find a Mentor after 50.....13-14

HEALTH

- Health Insurance Addresses Food Insecurity for Low-Income Adults15-16

HOUSING

- Empty Nest? I Wish?16-18

GRANDFAMILIES

- Factsheet: Children Thrive in Grand families19

FRIENDLY REMINDER

- Job Training & Employment20
- Health and Wellness.....20
- Housing.....21
- COVID-19 Education Materials.....21
- NCBA Social Media21

BREAKING NEWS

- Social Security Expands Outreach and Access for SSI..... 22

Biden Administration Reveals First 10 Drugs Eligible for Medicare Price Negotiations



In August 2023, the Biden administration announced the initial slate of 10 prescription medicines chosen as part of the first-ever pricing negotiations between Medicare and the nation's pharmaceutical giants.

The Medicare Drug Price Negotiation Program guide -- released by the Centers for Medicare & Medicaid Services -- comes as President Joe Biden seeks to fulfill a campaign promise to make prescription drugs more affordable for millions of aging Americans. The drugs on the list "are among the most common and costly prescriptions that treat everything from heart failure, blood clots, diabetes, arthritis, Crohn's disease -- and more," Biden said in a statement announcing the start of the highly anticipated program.

"When implemented, prices on negotiated drugs will decrease for up to 9 million seniors," Biden said, echoing his previous vows to lower prescription drug costs. "These seniors currently pay up to \$6,497 in out-of-pocket costs per year for these prescriptions. In addition, the nonpartisan Congressional Budget Office reports that this will save taxpayers \$160 billion by reducing how much Medicare pays for drugs through negotiation and inflation rebates."

Biden's program is being funded by the Inflation Reduction Act of 2022, which expanded Medicare's authority to negotiate out-of-pocket drug costs, including a \$2 monthly cap on certain generic drugs used to treat chronic conditions, as well as a \$35 price cap on insulin. When the pricing negotiations wrap up, the new drug prices won't go into effect until 2026 -- more than 28 months from now.

When the pricing negotiations wrap up, the new drug prices won't go into effect until 2026 -- more than 28 months from now. The 10 drugs under consideration in the first round of talks are among the top 50 prescription medications that seniors fill the most at retail pharmacies under Medicare Part D, the White House said.

They are:

- Eliquis, from Bristol-Myers Squibb, to prevent blood clotting and reduce stroke risk
- Jardiance, from Boehringer Ingelheim, to lower blood sugar for people with type 2 diabetes
- Xarelto, from Johnson & Johnson, to prevent blood clotting and reduce stroke risk
- Januvia, from Merck, to lower blood sugar for people with type 2 diabetes
- Farxiga, from AstraZeneca, to treat type 2 diabetes
- Entresto, from Novartis, to treat heart failure
- Enbrel, from Amgen, to treat rheumatoid arthritis
- Imbruvica, from Abbvie, to treat various types of blood cancers
- Stelara, from Janssen, to treat Crohn's disease
- A family of insulin products made by Novo Nordisk to treat diabetes, including Fiasp; Fiasp FlexTouch; Fiasp PenFill; NovoLog; NovoLog FlexPen; and NovoLog PenFill.

In 2022, Medicare Part D enrollees paid a total of \$3.4 billion in out-of-pocket costs for the listed drugs, with the average person paying as much as \$6,497 on prescriptions throughout the year, the White House said.

Drug manufacturers have criticized Biden's plan as detrimental to profits and innovation, while Merck and Johnson & Johnson have filed multiple lawsuits in an effort to declare the plan unconstitutional.

Biden said his plan was working to make a difference for struggling Americans while the pharmaceutical industry continued to rake in record profits. "Let me be clear: I am not backing down," Biden said. "There is no reason why Americans should be forced to pay more than any developed nation for life-saving prescriptions just to pad Big Pharma's pockets."

Biden's plan has also drawn criticism for adding commercial health insurers to a requirement that forces drug companies to pay rebates to Medicare whenever medicine prices rise faster than inflation.

Rebates for drugs administered by physicians under Medicare Part B went into effect on Jan. 1.

In March, the U.S. Department of Health and Human Services announced the first set of prescription drugs that would be subject to the rebates, bringing a lower co-pay to about 27 prescription drugs that saw prices rise sharply in the final quarter of 2022.

By comparison, 1,200 prescription drugs increased their prices faster than inflation throughout 2021 before Biden's policies went into effect.

Biden's plan also allows for free vaccines for Medicare recipients and decreases costs for behavioral and mental health services.

Beginning in 2024, Part D enrollees will no longer pay a 5% co-pay after the maximum benefit is reached, while the out-of-pocket cap drops to \$2,000 in 2025, and 1.9 million enrollees with the highest drug costs will save an average of \$2,500 per year, the White House said.

Medicare recipients will continue to see their prescription drug costs go down as more provisions of the Inflation Reduction Act go into effect in the coming years, the White House said.

Biden's federal budget proposal for 2024 calls for extending Medicare and Social Security and reducing the deficit by raising taxes on wealthy Americans.

The reforms would increase the Medicare tax rate from 3.8% to 5% on those who earn more than \$400,000 per year, which would keep Medicare solvent for the next 25 years, the White House said previously.

For more information, visit: <https://www.msn.com/en-us/money/insurance/biden-administration-reveals-first-10-drugs-eligible-for-medicare-price-negotiations/ar-AA1fWqcS>

COVID-19 Still a Threat. Vaccines Remain Covered and Available at No Cost to You



We've made real progress in the fight against COVID-19, but the virus and new variants remain a threat and still pose risks. Vaccines are your best way to protect against illness, especially severe illness. Have questions about how to get your vaccines and if they are still free? The answer is simple: **You're covered—COVID-19 vaccines are widely available at no cost to you.**

Questions about COVID-19

Why Should I Still Be Worried About COVID-19?

COVID-19 is still a real threat. We have come a long way in our fight against COVID-19, in large part thanks to vaccines that help us prevent serious illness and death. But the virus has not gone away. Everyday thousands of people are still diagnosed with COVID-19, which not only puts people at risk of severe outcomes but also interrupts important parts of our daily lives.

What Can I Do to Help Protect Myself Against COVID-19?

Staying up to date with your COVID-19 vaccine is the best way to protect yourself and your community against the worst outcomes of COVID-19.

The Centers for Disease Control and Prevention (CDC) recommends that everyone 6 years and older should get one updated vaccine. This applies if you have received any original COVID-19 vaccines and if you have not. If you have questions about the latest COVID-19 vaccines or if you are up to date with your COVID-19 vaccine, ask your health care provider.

Why Should I Still be Worried About COVID-19?

COVID-19 is still a real threat. We have come a long way in our fight against COVID-19, in large part thanks to vaccines that help us prevent serious illness and death. But the virus

has not gone away. Everyday thousands of people are still diagnosed with COVID-19, which not only puts people at risk of severe outcomes but also interrupts important parts of our daily lives.

What Can I Do to Help Protect Myself Against COVID-19?

Staying up to date with your COVID-19 vaccine is the best way to protect yourself and your community against the worst outcomes of COVID-19.

The Centers for Disease Control and Prevention (CDC) recommends that everyone 6 years and older should get one updated vaccine. This applies if you have received any original COVID-19 vaccines and if you have not. If you have questions about the latest COVID-19 vaccines or if you are up to date with your COVID-19 vaccine, ask your health care provider.

I Had An Updated Vaccine Already, Am I Eligible for Another?

If you are over 65 and it has been at least four months since your last vaccine or if you have a condition that weakens your immune system, you can get another dose of the updated vaccine.

Can Children Get the Updated Vaccine?

The CDC recommends that all children 6 months and older get vaccinated and receive at least one dose of the updated COVID-19 vaccine. When children should get vaccines can vary by the age of the child, so it is important you talk to your child's health care provider to ensure your child is up to date.

Will COVID-19 Vaccines Still Be Free to Me?

Yes! Updated COVID-19 vaccines continue to be available to everyone in the United States free of cost. You may have heard about upcoming changes to how COVID-19 vaccines will be covered. Even as these changes take place, COVID-19 vaccines will still be fully covered and free of cost for almost everyone.

For more information, visit: <https://covidvaccineproject.org/>

States Gear Up for the Falls Triple Threat of Respiratory Viruses COVID-19, Flu, and RSV



State and local health officials across the United States are bracing for a rise in respiratory illnesses this fall, and they are making plans to urge everyone who is eligible to get vaccinated against Covid-19, flu, and respiratory syncytial virus once those shots become available. “We are very, very concerned about the upcoming pan-respiratory season,” Dr. Marcus Plescia, chief medical officer for the Association of State and Territorial Health Officials, said in a briefing Wednesday.

Local health departments will work with their state and federal counterparts to encourage eligible people to get their flu shots, updated Covid-19 boosters, and RSV vaccines, says Lori Tremmel Freeman, chief executive officer of the National Association of County and City Health Officials. “The focus for the fall will be clear and integrated messaging, especially for people who are most at risk, because we’re talking about a unique new normal of coexisting respiratory viruses,” she said. “There’s conscientious thought being given to how to communicate this. It’s really about public health and keeping everybody safe during a season when respiratory diseases happen.”

On a national scale, the US Centers for Disease Control and Prevention also is preparing for the threat of respiratory illnesses this fall. Protecting against respiratory diseases this fall is a central focus for CDC. Efforts will include preparing Americans for what to expect, helping them understand the risk for illness in their communities, and providing information on how they can protect themselves,” spokesperson Kathleen Conley said in an email. “CDC will use every lever at its disposal to help people understand how they can protect themselves and their families from serious illness, including staying up to date on their vaccinations.”

Getting vaccinated before Halloween

Some major US pharmacy chains have begun rolling out flu and RSV vaccine appointments, and an updated Covid-19 booster shot could be ready by the latter part of September.

Health officials recommend that adults 60 and older get vaccinated against RSV as soon as their doctors advise doing so, and everyone older than 6 months is urged to get their flu shots, preferably by Halloween — an approach called “flu before boo.”

As for the new Covid-19 booster, health officials are waiting for the US Food and Drug Administration to officially approve it and then for the CDC to make recommendations on it. But they plan to recommend Covid-19 boosters before Halloween as well. “I don’t think it’s unreasonable to think of Covid-flu before boo,” Dr. Manisha Juthani, commissioner of the Connecticut Department of Public Health, said during Wednesday’s briefing. “For many people, we really want to make this easy and simple.”

She added that the flu shot and the updated Covid-19 vaccine, when it’s available, may be given at the same time for people who might want to have a single appointment. “There is not a single vaccine that is going to be 100%. But having said that, the efficacy of these vaccines is so high in preventing some of our worst outcomes that that is the main thing we want to drive home,” Juthani said. “And that is going to make a difference in the overall health of a person who receives them.”

Where to get vaccinated this fall

Pharmacies and doctor’s offices will continue to offer flu, Covid-19 and RSV vaccines this fall, but some states are also considering organizing vaccination events. One of the other lessons that we learned from Covid is that you can’t wait for people to come to you. You have to really try to go meet them where they’re at,” Dr. Joseph Kanter, state health officer and medical director at the Louisiana Department of Health, said during Wednesday’s briefing.

“As we looked at the back-to-school season, we’re leveraging one of the more effective programs we had during Covid, which is bringing vaccine out to people. We have teams that we instituted during Covid that we’re now leveraging for flu and RSV, to go out into the communities and host vaccine events at convenient locations for families,” he said. “We’re going to continue those campaigns because we know we need to reduce barriers wherever we find them, and we can help bring vaccines to people.”

Walgreens, Rite Aid and CVS are among the major US pharmacy chains that have begun rolling out flu and RSV vaccine appointments already.

Walgreens is now offering both shots, the company said last week. Anyone 3 or older can get a flu shot at the pharmacy, and adults 60 and older are eligible for the RSV vaccine. Rite Aid also plans to announce availability of those vaccines soon, according to a company spokesperson. CVS is scheduling flu vaccinations, as well as allowing walk-in vaccinations at certain pharmacies. The chain is also preparing to offer the new RSV vaccines.

Those chains have said they will offer the new Covid-19 boosters once they're available.

Entering 'uncharted territory'

Although it's hard to predict exactly how much flu, Covid-19 and RSV infections the United States may see this fall and winter, state health officials said they're putting plans in place now to prepare for possible surges.

"We're in uncharted territory. We don't really know what this season is going to look like, and it's going to look different in different areas of the country," Juthani said. "One of the things we are doing in Connecticut is meeting with our children's hospitals, understanding what their plan is going to be for if we see a surge starting this fall," she said, referring specifically to RSV preparations. "So, this is the type of planning that happens at the state level across the United States."

"We are all watching closely the respiratory season. It's something that state health officials are always preparing for every fall, particularly this fall," Dr. Anne Zink, chief medical officer for the state of Alaska and president of Association of State and Territorial Health Officials, said during Wednesday's briefing.

"Flu continues to circulate. We're watching closely what's happening down in the Southern Hemisphere right now. Last year, we saw over 9 million illnesses, 4 million medical visits, 10,000 hospitalizations and 5,000 deaths are associated with influenza," she said. "However, we did see that vaccine prevented 1.8 million of those illnesses, 1 million of his medical visits, 22,000 hospitalizations and 1,000 deaths."



Each year, she noted, RSV appears to cause about 2.1 million hospital visits for children younger than 1 and up to 300 pediatric deaths. Among adults, RSV causes up to 160,000 hospitalizations and 10,000 deaths a year.

Also, "we continue to see Covid," Zink said. "It continues to spread and be around." Covid-19 was associated with about 244,000 deaths in the United States last year, according to CDC data.

A report released last year by the Commonwealth Fund found that in the first two years that Covid-19 vaccines were available in the United States, they kept more than 18 million people out of the hospital and saved more than 3 million lives.

For more information, visit:
<https://www.cnn.com/2023/08/10/health/fall-viruses-covid-rsv-flu/index.html>



National Preparedness Month is an observance each September to raise awareness about the importance of preparing for disasters and emergencies that could happen at any time.

In 2021, FEMA's Ready Campaign and the Ad Council broke ground by producing the first-ever national preparedness campaign specifically targeting the Latino community for National Preparedness Month. Released during Hispanic Heritage month, the advertisements centered around the Latino community's commitment to personal planning for occasions and family milestones as a bridge to also planning for disasters.

This one-of-a-kind campaign is committed to putting people first and reaching communities where they are. To continue these efforts, this year's National Preparedness Month campaign will feature a call to action for the Black and African American community.

This year's national public service announcements are being developed and will be released throughout the country this September, to help get preparedness information into the hands of those who live in underserved communities.
2023 Theme: Preparing for Older Adults

The Ready Campaign's 2023 National Preparedness Month theme is **"Take Control in 1, 2, 3"**. The campaign will focus on preparing older adults for disasters, specifically older adults from communities that are disproportionately impacted by the all-hazard events, which continue to threaten the nation.

We know older adults can face greater risks when it comes to the multitude of extreme weather events and emergencies we now face, especially if they are living alone, are low-income, have a disability, or live in rural areas.

For more information, visit:
<https://www.ready.gov/september>

What are Wireless Emergency Alerts?

- Wireless Emergency Alerts, or WEAs, are free messages sent directly to your cellular phone, warning you about severe weather, AMBER Alerts and threats to safety in your area.
- WEAs are sent to you by your state and local public safety officials, the National Weather Service, the National Center for Missing and Exploited Children, the U.S. Geological Survey, and the President.
- WEAs began in 2012 and should already be on your cellular phone or other wireless device.
- WEAs are no more than 360 characters and will provide brief critical information about a threat in your location or an AMBER emergency.
- The WEA notification is designed to get your attention and alert you with a unique sound and vibration.
- WEAs resemble a text message on your cellular phone – but WEAs will not interrupt calls in progress.
- WEA messages allow alerts to be sent to cellular phones in a geographically targeted affected area.
- WEAs are one-way alerts to any cell phones in range of the cell tower, which ensures that authorities cannot collect any data from an individual.
- WEAs are not affected by network congestion.
- Wireless customers will not be charged for the delivery of WEA messages.

Unique Sound & Vibration

- The unique sound and vibration (Common Audio Attention Signal and Vibration Pattern) you receive when a WEA is sent are prescribed in Part 10 of the Code of Federal Regulations for use in Alert messaging only.
- The unique sound and vibration cadence are particularly helpful to people with visual or hearing disabilities.

Will I Receive WEAs on My Cell Phone?

- To find out if your phone can receive WEA alerts, contact your wireless provider. All the major providers participate in WEA on a voluntary basis. It will take time for upgrades in infrastructure, coverage, and handset technology to allow WEA enhancements to reach all cellular customers.
- Wireless providers are selling devices with WEA capability included but not all handsets now on the market can receive WEAs. To learn how yours is configured, contact your wireless provider or phone manufacturer.
- WEA messages can save lives. Do not ignore these messages! WEAs contain basic information so if you receive a WEA, seek additional information from other sources such as radio or TV.

For more information visit <https://www.fema.gov/ipaws>.
Contact the IPAWS Program Management Office at ipaws@fema.dhs.gov.

Natural Disasters in the U.S. Statistics & Facts

The sheer size and geographic diversity of the United States means that the country experiences a variety of different natural disasters on a frequent basis. Rather than just an extreme natural event such as a hurricane, a flood or an earthquake, a natural disaster is characterized by a great deal of damage and/or loss of life.

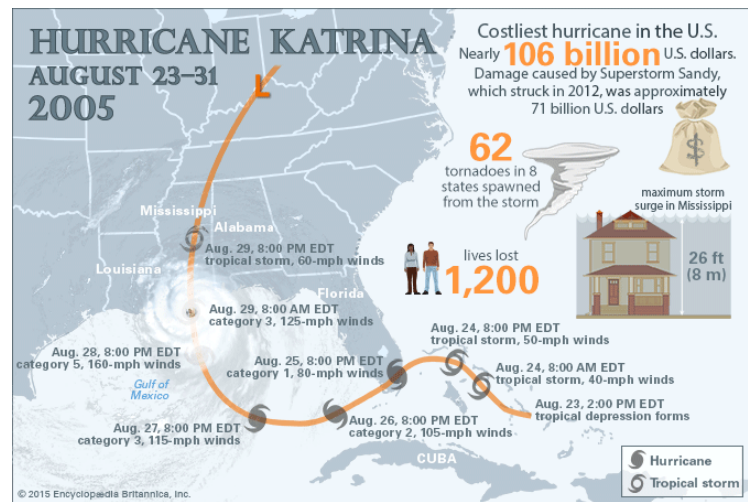
The most destructive natural disaster in economic terms in the United States was a storm on August 29, 2005. Known as Hurricane Katrina, the storm sent shockwaves around the nation and the world. Outsiders watched the devastation unfold before their eyes through their screens. While the damage done on the day was catastrophic, a slow governmental response resulted in a lingering financial burden for many of those who lost most of what they had to Katrina.

Material property and economic damage can cripple a city such as New Orleans. However, if given the choice, many people would trade their possessions to revive their loved ones lost to natural disasters. Sadly, many such deaths often occur in a more mundane, but equally lethal, set of natural disasters.

Heat and cold waves can exacerbate conditions among children, the elderly, or the ill. Such events can also prove deadlier to those from lower socio-economic backgrounds as some lack the means to afford air-conditioning or heating in their homes. The deadliest of these events was a heat wave that stuck Kansas City, Missouri, and St Louis in 1980.

The most destructive natural disaster in economic terms in the United States was a storm on August 29, 2005. Known as Hurricane Katrina, the storm sent shockwaves around the nation and the world. Outsiders watched the devastation unfold before their eyes through their screens. While the damage done on the day was catastrophic, a slow governmental response resulted in a lingering financial burden for many of those who lost most of what they had to Katrina.

Material property and economic damage can cripple a city such as New Orleans. However, if given the choice, many people would trade their possessions to revive their loved ones lost to natural disasters. Sadly, many such deaths often occur in a more mundane, but equally lethal, set of natural disasters.



Other disasters are less deadly but claim their disaster tag through the sheer number of people they affect. Flooding across the Midwest in June 2008 affected more than 11 million people, the most people affected by a natural disaster in U.S. history.

While it is often the horrors of death that gather the widest media attention, government support and intervention is often just as necessary in less lethal cases.

Although many natural disasters are impossible to contain, the battle against wildfires in the United States frequently rages on. As the area of acres burnt due to wildfires from 2000 to 2018 shows, millions of hectares are lost to fire each year. The most significant natural disasters in the United States since 1900 include storms and floods (hurricanes), earthquakes, extreme weather and droughts, and wildfires.

Hurricanes

Hurricanes are massive storm systems that form over warm ocean waters and move toward land. Potential threats from hurricanes include powerful winds, heavy rainfall, storm surges, coastal and inland flooding, rip currents, tornadoes, and landslides.

The Atlantic hurricane season runs from June 1 to November 30. The Pacific hurricane season runs May 15 to November 30.

Hurricanes:

- Can happen along any U.S. coast or in any territory in the Atlantic or Pacific oceans.
- Can affect areas more than 100 miles inland.

If You Are Under a Hurricane Warning, Find Safe Shelter Right Away

- Determine how best to protect yourself from high winds and flooding.
 - Evacuate if told to do so.
 - Take refuge in a designated storm shelter, or an interior room for high winds.
- Listen for emergency information and alerts.
- Only use generators outdoors and away from windows.
- Turn Around, Don't Drown! Do not walk, swim, or drive through flood waters.



✓ Emergency Kit Checklist +

Use this checklist of items suggested by the American Red Cross to put together a hurricane preparedness emergency kit.



Layout by BRONWYN COFFEEN/Staff Artist

Prepare Now

- Know your area's risk of hurricanes.
- Sign up for your community's warning system. The Emergency Alert System (EAS) and National Oceanic and Atmospheric Administration (NOAA) Weather Radio also provide emergency alerts.
- If you are at risk for flash flooding, watch for warning signs such as heavy rain.
- Practice going to a safe shelter for high winds, such as a FEMA safe room or ICC 500 storm shelter. The next best protection is a small, interior, windowless room in a sturdy building on the lowest level that is not subject to flooding.
- Based on your location and community plans, make your own plans for evacuation or sheltering in place.
- Become familiar with your evacuation zone, the evacuation route, and shelter locations.
- Gather needed supplies for at least three days. Keep in mind each person's specific needs, including medication. Don't forget the needs of pets.
- Keep important documents in a safe place or create password-protected digital copies.
- Protect your property. Declutter drains and gutters. Install check valves in plumbing to prevent backups. Consider hurricane shutters. Review insurance policies.

When a Hurricane is 36 Hours from Arriving

- Turn on your TV or radio in order to get the latest weather updates and emergency instructions.
- Restock your emergency preparedness kit.
- Include food and enough water for at least three days, medications, a flashlight, batteries, cash, and first aid

Plan how to communicate with family members if you lose power. For example, you can call, text, email or use social media. disasters, sand water pumps, to protect your insured property.

When a Hurricane is 18-36 Hours from Arriving

- Bookmark your city or county website for quick access to storm updates and emergency instructions.
- Bring loose, lightweight objects inside that could become projectiles in high winds (e.g., patio furniture, garbage cans); anchor objects that would be unsafe to bring inside (e.g., propane tanks); and trim or remove trees close enough to fall on the building.
- Cover all of your home's windows. Permanent storm shutters offer the best protection for windows. A second option is to board up windows with 5/8" exterior grade or marine plywood, cut to fit and ready to install.

When a Hurricane is 6-18 Hours from Arriving

- Turn on your TV/radio or check your city/county website every 30 minutes to get the latest weather updates and emergency instructions.
- Charge your cell phone now so you will have a full battery in case you lose power.

When a Hurricane is 6 Hours from Arriving

- If you're not in an area that is recommended for evacuation, plan to stay at home or where you are and let friends and family know
- Close storm shutters and stay away from windows. Flying glass from broken windows could injure you.
- Turn your refrigerator or freezer to the coldest setting and open only when necessary. If you lose power, food will last longer. Keep a thermometer in the refrigerator to be able to check the food temperature when the power is restored.
- Turn on your TV/radio or check your city/county website every 30 minutes to get the latest weather updates and emergency instructions.

Earthquake

An earthquake is the sudden, rapid shaking of the earth, caused by the breaking and shifting of underground rock. Earthquakes can cause buildings to collapse and cause heavy items to fall, resulting in injuries and property damage.

Earthquakes Can:

- Happen anywhere. Higher risk areas include California, Oregon, Washington, Alaska, Hawaii, Puerto Rico, and the Mississippi Valley.
- Happen without warning.
- Cause fires and damage roads.
- Cause tsunamis, landslides, and avalanches.

If an Earthquake Happens, Protect Yourself Right Away. Drop, Cover and Hold On!

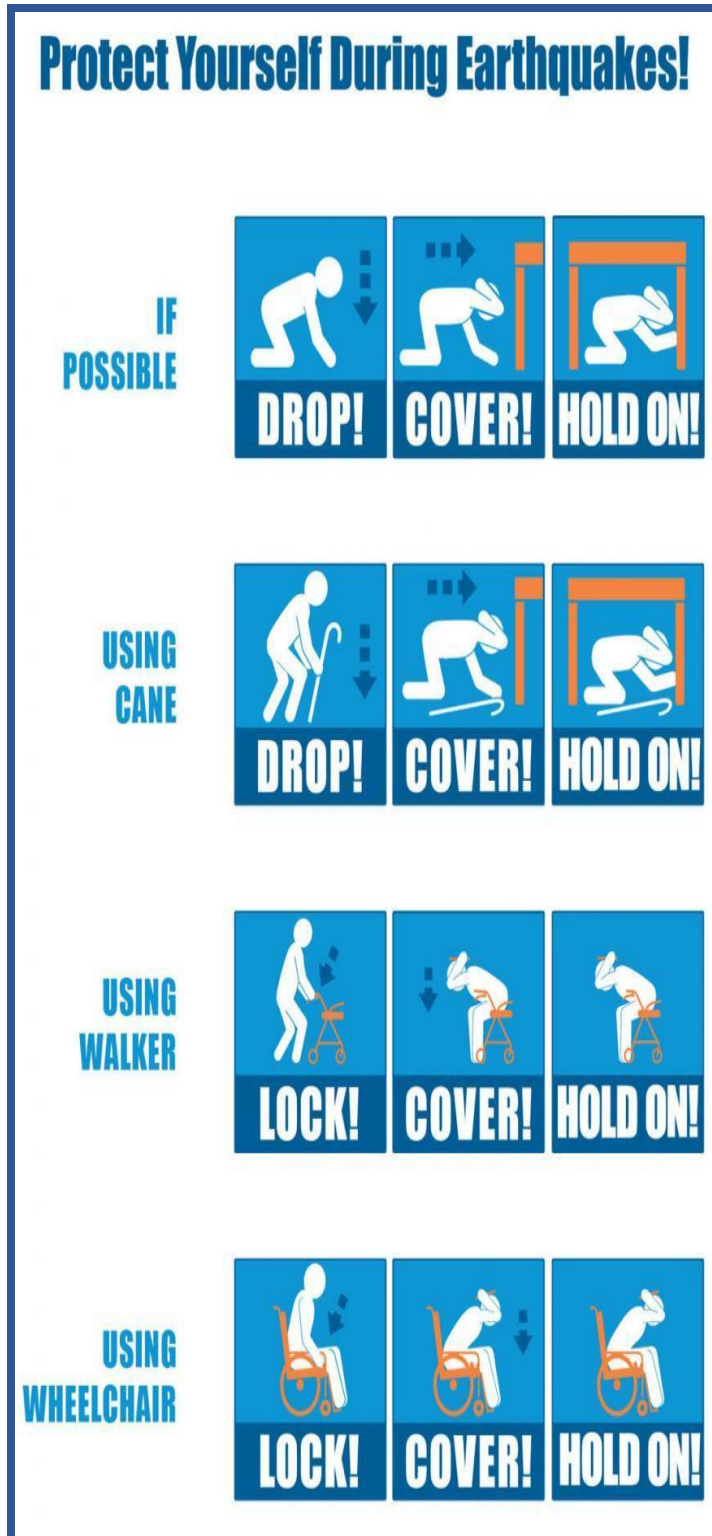
- If you are in a vehicle, pull over and stop. Set your parking brake.
- If you are in bed, turn face down and cover your head and neck with a pillow.
- If you are outdoors, stay outdoors away from buildings.
- Do not get in a doorway.
- Do not run outside.
- Visit EarthquakeCountry.org/step5 for tips and videos on what to do in a variety of other situations.

Stay Safe During an Earthquake: Drop, Cover and Hold On!

- **Drop:** Drop where you are, onto your hands and knees.
- **Cover:** Cover your head and neck with your arms. If a sturdy table or desk is nearby, crawl underneath it for shelter. If no shelter is nearby, crawl next to an interior wall (away from windows). Crawl only if you can reach better cover without going through an area with more debris. Stay on your knees; bend over to protect vital organs.
- **Hold On.** If you are under a table or desk, hold onto with one hand and be ready to move with it if it moves. If you can't find a table or desk: hold on to your head and neck with both arms and hands. If seated and unable to drop to the floor: bend forward, cover your head with your arms, and hold on to your neck with both hands.

If Using a Wheelchair or a Walker with a Seat:

- **Lock:** Make sure your wheels are locked. Remain seated until the shaking stops.
- **Cover:** Protect your head and neck with your arms, a pillow, a book, or whatever is available.
- **Hold on:** maintain your position with head and neck covered until shaking stops.



Prepare Before an Earthquake

The best time to prepare for any disaster is before it happens.

- Practice **Drop, Cover, then Hold On** with family and coworkers. Drop to your hands and knees. Cover your head and neck with your arms. Crawl under a sturdy table or desk if nearby. Hold on to any sturdy furniture until the shaking stops. If a table or desk is not close, crawl next to an interior wall.
- Secure items, such as bookcases, refrigerators, televisions, and objects that hang on walls. Store heavy and breakable objects on low shelves.
- Create a family emergency communications plan that has an out-of-state contact. Plan where to meet if you get separated.
- Make a supply kit that includes enough food and water for at least three days, a flashlight, a fire extinguisher, and a whistle. Consider each person's specific needs, including medication. Have extra batteries and charging devices for phones and other critical equipment. Do not forget the needs of pets and service animals.
- Consider obtaining an earthquake insurance policy. A standard homeowner's insurance policy does not cover earthquake damage.
- Consider making improvements to your building to fix structural issues that could cause your building to collapse during an earthquake.

Keep Yourself Safe After an Earthquake

If an earthquake has just happened, there can be serious hazards such as damage to the building, leaking gas and water lines, or downed power lines.

- Expect aftershocks to follow the main shock of an earthquake.
- Check yourself to see if you are hurt and help others if you have training. Learn how to be the Help Until Help Arrives (Link to: <https://community.fema.gov/until-help-arrives>)
- If you are in a damaged building, go outside and quickly move away from the building.
- Do not enter damaged buildings.
- If you are trapped, protect your mouth, nose and eyes from dust. Send a text, bang on a pipe or wall, or use a whistle instead of shouting so that rescuers can locate you.

- If you are in an area that may experience tsunamis, go inland or to higher ground immediately after the shaking stops.
- Text messages may be more reliable than phone calls.
- Save phone calls for emergencies.
- Once you are safe, listen to local news reports via battery operated radio, TV, social media, and cell phone text alerts for emergency information and instructions.
- Be very careful during post-disaster clean-up of buildings and around debris.
- Do not attempt to remove heavy debris by yourself.
- Wear protective clothing, including a long-sleeved shirt, long pants, work gloves, and sturdy, thick-soled shoes.

Extreme Heat

Extreme Heat often results in the highest number of annual deaths among all weather-related hazards. In most of the United States, extreme heat is defined as a long period (2 to 3 days) of high heat and humidity with temperatures above 90 degrees. In extreme heat, evaporation is slow, and the body must work extra hard to maintain a normal temperature. This can lead to death by overworking the human body.

Remember:

- Extreme heat can occur quickly and without warning.
- Older adults, children, and sick or overweight individuals are at greater risk from extreme heat.
- Humidity increases the feeling of heat as measured by a heat index.

If You Are Under an Extreme Heat Warning:

- Find air conditioning.
- Avoid strenuous activities.
- Watch for heat illness.
- Wear light clothing.
- Check on family members and neighbors.
- Drink plenty of fluids.
- Watch for heat cramps, heat exhaustion, and heat stroke.
- Never leave people or pets in a closed car.

How to Stay safe When Extreme Heat Threatens Prepare NOW

- Find places in your community where you can go to get cool.
- Keep your home cool by doing the following:
 - Cover windows with drapes or shades.
 - Weather-strip doors and windows.
 - Use window reflectors, such as aluminum foil-covered cardboard, to reflect heat back outside.
 - Add insulation to keep the heat out.
 - Use attic fans to clear hot air.
 - Install window air conditioners and insulate around them.
- Learn to recognize the signs of heat-related illness.

Be Safe DURING Extreme Heat

- Never leave a child, adult, or animal alone inside a vehicle on a warm day.
- Find places with air conditioning. Libraries, shopping malls, and community centers can provide a cool place to take a break from the heat.
- If you're outside, find shade. Wear a hat wide enough to protect your face.
- Wear loose, lightweight, light-colored clothing.
- Drink plenty of fluids to stay hydrated. If you or someone you care for is on a special diet, ask a doctor how best to accommodate temperature outside is more than 95 degrees, as this could increase the risk of heat-related illness. Fans create air flow and a false sense of comfort, but do not reduce body temperature.
- Avoid high-energy activities.
- Check yourself, family members, and neighbors for signs of heat-related illness.

Recognize and Respond

Know the signs of heat-related illness and the ways to respond to it:

- **Heat Cramps**
 - **Signs:** Muscle pains or spasms in the stomach, arms, or legs
 - **Actions:** Go to a cooler location. Remove excess clothing. Take sips of cool sports drinks with salt and sugar. Get medical help if cramps last more than an hour.

Heat Exhaustion

- **Signs:** Heavy sweating, paleness, muscle cramps, tiredness, weakness, dizziness, headache, nausea or vomiting, or fainting
- **Actions:** Go to an air-conditioned place and lie down. Loosen or remove clothing. Take a cool bath. Take sips of cool sports drinks with salt and sugar. Get medical help if symptoms get worse or last more than an hour.

Heat Stroke

- **Signs:** Extremely high body temperature (above 103 degrees) taken orally; red, hot, and dry skin with no sweat; rapid, strong pulse; dizziness; confusion; or unconsciousness
- **Actions:** Call 911 or get the person to a hospital immediately. Cool down with whatever methods are available until medical help arrives.

Wildfires

- Wildfires can ruin homes and cause injuries or death to people and animals. A wildfire is an unplanned fire that burn in a natural area such as a forest, grassland, or prairie.
- Often be caused by humans or lightning.
- Cause flooding or disrupt transportation, gas, power, and communications.
- Happen anywhere, anytime. Risk increases with in periods of little rain and high winds.
- Cost the Federal Government billions of dollars each year.

If You Are Under a Wildfire Warning, Get to Safety Right Away

- Leave if told to do so.
- If trapped, call 9-1-1.
- Listen for emergency information and alerts.
- Use N95 masks to keep particles out of the air you breathe.

How to Stay Safe When a Wildfire Threatens

Prepare NOW

- Sign up for your community's warning system. The Emergency Alert System (EAS) and National Oceanic and Atmospheric Administration (NOAA) Weather Radio also provide emergency alerts.

- Know your community's evacuation plans and find several ways to leave the area. Drive the evacuation routes and find shelter locations. Have a plan for pets and livestock.
- Gather emergency supplies, including N95 respirator masks that filter out particles in the air you breathe. Keep in mind each person's specific needs, including and updated asthma action plan and medication. Don't forget the needs of pets.
- Designate a room that can be closed off from outside air. Close all doors and windows. Set up a portable air cleaner to keep indoor pollution levels low when smoky conditions exist.
- Keep important documents in a fireproof, safe place. Create password-protected digital copies.
- Use fire-resistant materials to build, renovate, or make repairs.
- Find an outdoor water source with a hose that can reach any area of your property.
- Create a fire-resistant zone that is free of leaves, debris, or flammable materials for at least 30 feet from your home.
- Review insurance coverage to make sure it is enough to replace your property.
- Pay attention to air quality alerts.



Survive DURING

- Evacuate immediately if authorities tell you to do so.
- If trapped, then call 911 and give your location, but be aware that emergency response could be delayed or impossible. Turn on lights to help rescuers find you.
- Listen to EAS, NOAA Weather Radio, or local alerting systems for current emergency information and instructions.



Look for people – younger or older than you – whose work you admire, and approach them graciously and gratefully

- For years, I worked as a production account manager at an independent video store while pretending to pursue an acting career. I didn't go to auditions, send my resume and headshots out or try to find roles in student films.

I was an actress in name only.

- When I was laid off from my job in my fifties, I had a choice: pursue an acting career or try to make my living as a writer. I knew I didn't have the skills to be an actress, and decided it was time for me to pursue a freelance writing career. I was older than most people starting out, but age gave me the ability to focus on my goals and make them happen rather than talk about them.

However, much of the mentor information that I found seemed geared toward young people embarking for the first time on their professional journeys. Older people were seen as mentors, not mentees.

There was an assumption that older people didn't need guidance since they were the ones with all the answers. While it's true that wisdom comes with age, within that wisdom is the knowledge there's much we don't know.

People aged 50 and up need career guidance as much as anyone else. Mentors do so much more than give you job advice — a good one will support, guide and inspire you.

People aged 50 and up need career guidance as much as anyone else.

As I embarked on my new career, the first thing I did was call myself a writer — not an aspiring writer or a want-to-be but a freelance writer. I took classes, talked to working writers and wrote a lot. It was exciting when I began getting published

and paid. Things were going well, but I still needed help to go to the next level. I was writing on Medium and meeting many different kinds of writers.

One woman, Debra, had published a memoir and was writing consistently well-received pieces on the platform. When she created her own Medium publications, she asked me to join her editorial team. After working closely with her, we've become mentors to each other, and I have thrived under her guidance.

Based on my experience, here are some ways older adults can find a mentor.

- **Determine why you want a mentor.** What do you hope to achieve with a mentor? Are your goals clear and do you know the steps you need to take? How will a mentor assist you with this?
- **Be flexible when considering a mentor.** Don't disregard someone as a potential mentor because they're younger than you or because their field of expertise doesn't exactly match yours. If you're too rigid about whom you'll consider as a mentor, you may miss out.
- **Find someone you admire and who's doing what you want to do.** If you feel awkward contacting a stranger, remember few people are so successful they find honest admiration annoying. If they respond, be grateful for any information they're willing to share. Trust your instincts and if it feels right, ask them if they'd consider mentoring you. If they can't help you now, they may be able to in the future. Don't take their refusal personally. Remember, not everyone is comfortable with mentoring.
- **Go to alumni get-togethers.** Alumni functions are the original networking opportunities and people may feel more inclined to help a fellow alum than someone else.
- **Use social media.** Social media isn't only about humble-bragging and self-promotion. You can use social media to find the help you need. You never know who knows someone who can connect you to your next mentor. On Facebook, there are many different kinds of groups; find one that aligns with what you want to do and join. Talk to people and find out what they did to get started in their second career. They also may be able to advise you on the best online mentorship platforms.
- **Be a mentor to a mentor.** Sometimes a mentor/mentee relationship can seem out-of-balance with the mentee getting the most from the relationship. Mentoring your mentor is a way to guarantee that you both get something valuable from the relationship. The skills you learn from mentoring can help you on your path to achieving success in your new career.

- **Attend networking events.** It may not seem like a hiking meetup or a mixer at the Chamber of Commerce would be a great place to find a mentor, but they're a low-stakes way to practice your social skills and fine-tune your ability to make connections quickly. You might find a mentor, or you might find someone who can help you find one.
- **Take a class.** Your instructor may currently be working in the field you're interested in, or they may be retired from a long career in it. Whatever their status, they are experienced in your field and can give you tips on how to navigate the landscape. Your potential mentor isn't limited to the instructor, another student may have strengths in areas that you don't and might be interested in the experience of mentoring.

There isn't an exact science to finding the right mentor, but persevere, be patient and think creatively.

- **Take advantage of your age.** As someone over 50, you may not have quite as many resources as someone just starting out, but since there are so many people over 50 starting second careers, "unretiring" and returning to the workforce, there are programs for the 50+ mentor seeker.

The Gerontological Society of America, for example, has a user-driven, online career networking tool, called Mentor Match. Also, check out your local senior center, many offer career assistance and mentorship programs.

Since most mentors don't charge for their time, you, as a mentee, should be respectful and thoughtful. Don't get angry if he or she gives you a piece of advice you don't like, or if they need to reschedule at the last minute.

There isn't an exact science to finding the right mentor, but persevere, be patient and think creatively. If the first mentor you find isn't a good fit, it's OK to thank him or her for meeting with you and continue the search.

When you're 50 years old or older, you're smart enough to realize when you need help, be open to receiving it and have enough experience to take full advantage of it, especially if it's in the form of a mentor.

Contributing Author: Christine Schoenwald,
<https://www.nextavenue.org/how-to-find-a-mentor-after-50/>



Health Insurance Addresses Food Insecurity for Low-Income Adults

Adults who are eligible for both Medicare and Medicaid, known as dual-eligible beneficiaries, are at particularly high risk for food insecurity.

The price of food has risen sharply over the past several years. High grocery bills — in addition to other daily costs pushed upward by inflation — have put a financial strain on many Americans, but particularly older adults living on a fixed income. At the same time, emergency food assistance that helped low-income individuals during the COVID-19 pandemic ended earlier this year, significantly reducing benefits that many older Americans relied on from the Supplemental Nutrition Assistance Program, also known as SNAP. These combined factors have forced tough financial decisions and increased food hardship for many.

More than one in five food-insecure households includes someone 65 or older — a population that is especially vulnerable to the health effects of food insecurity. Limited access to adequate, healthy food can cause or exacerbate chronic conditions such as diabetes, congestive heart failure, asthma and depression. It also restricts people from engaging in basic activities, with food-insecure older adults having daily living limitations comparable to those 14 years their senior.

Older adults who are eligible for both Medicare and Medicaid, known as dual-eligible beneficiaries, are at particularly high risk for food insecurity and its harmful effects, since they live with more chronic and complex conditions and have lower incomes than the general older population.

There are 12.5 million dual-eligible Americans; 60% of these beneficiaries are 65 years and older and almost 9 in 10 have an annual income of less than \$20,000. About one in five dual eligibles have three or more chronic conditions. According to a study by Humana, 52% of dual-eligible beneficiaries experience food insecurity compared to 17% of non-dual eligibles.

Addressing Food Insecurity for Dual Eligibles

Research has shown that food assistance can make a substantial difference in the health of dual eligibles, reducing the likelihood of hospitalizations, emergency department visits and long-term care admissions. What many dual eligibles may not know is that they can receive a food allowance benefit by enrolling in certain Dual Eligible Special Needs Plans (D-SNPs), which are special types of Medicare Advantage plans offered in many states through private insurers.

D-SNPs are an alternative to having coverage through original Medicare and a state-run Medicaid program. In addition to covering Medicare Part A (hospitalization), Part B (outpatient medical services) and Part D (prescription drugs), and in some cases delivering certain covered Medicaid benefits, D-SNPs offer additional benefits that may include food allowances. For instance, all of Humana's D-SNP members receive a Healthy Options Allowance, which provides between \$35–\$275 as a monthly allowance (\$420–\$3,300 annually), depending on the plan and location. This benefit can be used to purchase healthy foods and pay for other essentials that have an impact on health and well-being, such as rent and utility bills.

We have heard from our dual-eligible beneficiaries about how this allowance gives them some stability. One Humana Gold Plus SNP-DE H5619-123 plan member expressed what many others have told us about the positive impact the allowance has had on the budget: "The money I'm able to use from this benefit card is huge to me. I try to eat healthy, and I'm on a very, very tight budget."

Filling Gaps in Care

Dual eligibles often have more complex and chronic health conditions than the general population. On top of that, they often struggle with basic living needs making it extremely challenging to properly manage the multiple treatments, regular monitoring, and various physician visits that their health conditions may require.

D-SNPs, such as those offered by Humana, use a care team approach that helps patients better manage their health by providing additional patient support through a person-centered, comprehensive care approach. This includes assistance with coordinating the patient's benefits and medical services, as well as connecting them to community resources, including transportation, food assistance and other social supports. These plans also fill other gaps in original Medicare coverage, such as routine dental, hearing and vision care that can have a significant impact on a person's overall health and independence.

Enrolling in a D-SNP

There are multiple times during the year when eligible individuals can enroll in a D-SNP:

- *Initial Enrollment Period (IEP)*: A seven-month window, starting three months before the month the beneficiary turns 65 and ending three months after their birthday month.
- *Annual Election Period (AEP)*: Runs from Oct. 15 to Dec. 7 each year. Individuals who are already enrolled in a D-SNP can change plans during this period. Coverage begins Jan. 1 of the following year.
- *Special Enrollment Periods (SEP)*: These are times when eligible beneficiaries can enroll in a D-SNP based on a qualifying event, such as moving out of the current plan's service area, becoming eligible for Medicaid, or when the current D-SNP is no longer available.

D-SNPs can provide vital resources and support for low-income adults that can improve their health outcomes and overall quality of life. To find out more, visit the Centers for Medicare and Medicaid Services at <https://www.cms.gov/medicare/enrollment-renewal/special-needs-plans/dual-eligible>.

ABOUT HUMANA

Humana Inc. is committed to putting health first – for our teammates, our customers, and our company. Through our Humana insurance services, and our CenterWell health care services, we make it easier for the millions of people we serve to achieve their best health – delivering the care and service they need, when they need it. These efforts are leading to a better quality of life for people with Medicare, Medicaid, families, individuals, military service personnel, and communities at large. Learn more about what we offer at [Humana.com](https://www.humana.com) and at [CenterWell.com](https://www.centerwell.com).



Empty Nest? I Wish?

My daughters have left home and started the next phases of their lives, but my husband is another story

Ever since my daughters entered high school, I was preparing myself for the dreaded "empty nest." While it was years away, I worried about how I would adjust to the reality of kids in college and no more time-sucking chores to do.

Even though I have been a working mother in a two-income household, family always was a priority, and I was devoted to caring for our daughters. So, I did wonder how I would adjust to the hole left in my daily calendar when our girls went off to school, graduated or moved on and launched their own lives.

But here's the dirty little secret that no one talks about until it happens. After decades of marriage and three years of COVID quarantine, I've got a different problem: I can't get my husband to leave the house.

It's a topic of conversation among my girlfriends, all of us looking for some solitude but instead faced with our husbands, always in their sweatpants, happily hanging out around the house.

Of course, COVID was the trial run, the big disrupter, for being at home. My husband, pre-COVID, was a human tourism brochure, constantly digging up great activities we could go to. Most of them were things we did together but since we weren't holed up together at home, it didn't feel stifling.

The COVID Pivot

But once COVID hit, all those activities came to a screeching halt and my husband proclaimed that with all the books, CDs and vinyl from his youth along with tchotchkes he's collected over decades, he could be more than happy to stay home forever and read, listen to music and peruse his collections.

Maybe I have done such a good job of creating a comfortable nest that my husband just doesn't feel the need to leave. Perhaps COVID caused him to reevaluate just how important it was to get some fresh — and possibly contaminated — air.

Maybe, like so many men his age, he doesn't have enough friends — [Jane Fonda has expounded on that of late](#), explaining to anyone who will listen how vital her women friends are to her well-being, while all men want to do is sit next to each other and [watch sports](#) or cars or women from afar. And she's right, women have friends that are soulmates, advisors, co-conspirators. Most men haven't thrown each other that emotional lifeline.

The timing is unfortunate. I'm working less than fulltime at this stage of life. Now that I've gotten accustomed to my children being gone and look forward to some time to myself, my husband has had to rethink his motivation to get out of the house every day.

Still Working, but from Home

The fact that he continues to work, but now fully from home, hasn't helped. After stressful workdays I understand that he also needs some downtime.

Many men are at the stage of life where a decision about whether to retire is also on the table. But here is a word of warning to husbands considering that as their next chapter: Check your Rolodex for friends you want to spend time with because we can't be your constant companions. Maybe it's a "[Men Are from Mars, Women Are from Venus](#)" kind of thing. But after watching all the episodes of "The Sopranos" for the first time recently, I feel that if only there was a [Bada Bing](#) club — without the Bada Bing. Maybe someone should start a Daddy Daycare to literally take care of Daddy.

Guys of a certain age need a place to meet and schmooze, a clubhouse where someone can make them a plate and just create an inviting space to shoot the breeze. I have no idea what they would talk about though.

Women know that building deep friendships has paid huge dividends as we all have gotten older. Long-married spouses need more time with their friends — a respite from too much togetherness at home and an opportunity to discuss something beyond what's for dinner.



I did gently mention a few weeks ago to my husband that he rarely leaves the house these days and maybe he could take an outing one afternoon a week that didn't include me.

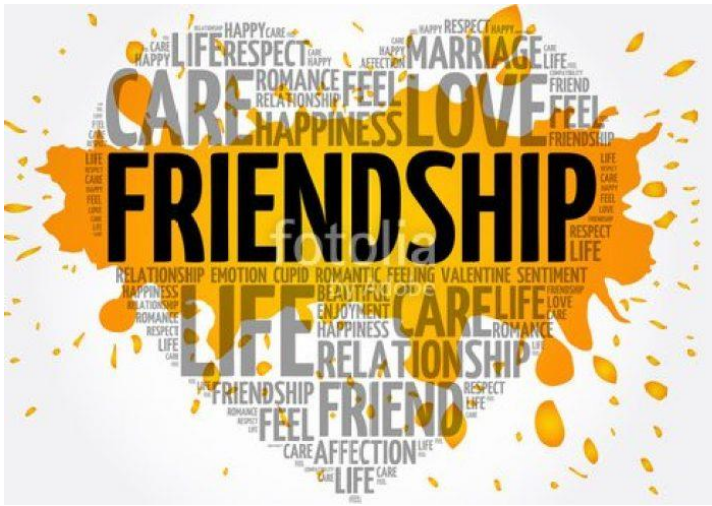
"What do you mean I never leave the house?" he said, incredulous. "I went to Ralph's just the other day." And proud hunter-gatherer that he is, we've got the boxes and cans of unheard-of sale items we will probably never use to prove it.

Growth of Gray Divorces

I have found women are often more adventurous, even as we age. We are less willing to just hang back and "relax." For an increasing number of women, [gray divorce](#) has become a term that sociologists are noticing, as more older women have chosen to approach their senior years alone.

For others, [independent travel](#) is an answer. There are so many blogs, Instagram and Facebook accounts by women traveling alone that we are practically our own demographic. In my independent solo travels, I have encountered many women who got tired of asking their reluctant husbands to come along and have happily set out on their own.

Once you arrive in a strange city, it is totally liberating to explore when you don't have to check in with anyone else about what to do when, how to get wherever, or what time or what to eat each day. And it's easier to engage in conversations with strangers when you are by yourself. I find I'm more open to those encounters when I'm on my own.



Dolly Parton's Secret

I heard a story recently from a photographer who was photographing Dolly Parton. The soon-to-be-married photographer asked the performer her secret to her long marriage. Parton's answer: "Travel a lot. Separately."

While it's important to get away, for me, who never described myself as a homebody, it's essential to have some alone time that doesn't involve leaving the house. As we age, the one thing that is certain is that the future is unpredictable.

There may come a time when leaving the house is not a safe or viable option. While we are healthy and active enough, let's give each other the space to enjoy one of life's guilty pleasures – moments of solitude at home where you have a chance to think, regroup, dream and sometimes to just do absolutely nothing.

The added bonus will be that the time we do spend together will be all the more interesting, with new adventures to hear about.

Contributing Author: Iris Schneider has been a journalist and photographer since the 1970s, starting in New York City while teaching at PS 97 on the Lower East Side. She became a staff photographer at the Los Angeles Times in 1980. Her work can be seen on her website or on Instagram (@schneidereye).



GRANDFAMILIES



Factsheet: Children Thrive in Grandfamilies

More than 2.5 million children across the U.S. are raised in grandfamilies (also known as kinship families). These are families in which grandparents, other adult family members, or close family friends are raising children, with no parents in the home.

The parents are not caring for their children for many reasons, including parental substance use, incarceration, military deployment, severe disability, deportation, teenage pregnancy, or death.

When children cannot remain in their parents' care, research shows they do best in grandfamilies.

**For more information about grandafamilies or kinship families
visit Generations United at <https://www.gu.org/>**

**Contributing Author:**

Kinship Families



Founded in 1970, The National Caucus and Center on Black Aging, Inc. (NCBA) is a national 501 (c) (3) nonprofit organization. Headquartered in Washington, DC, NCBA is the only national aging organization who meets and addresses the social and economic challenges of low-income African American and Black older adults, their families, and caregivers.

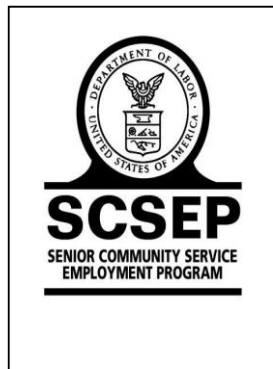
NCBA Supportive Services include:

Job Training & Employment

NCBA administers Senior Community Service Employment Program (SCSEP) with funding from the U.S. Department of Labor (DOL) to over 3,500 older adults, age 60+ in North Carolina, Arkansas, Washington, DC, Illinois, Missouri, Michigan, Ohio, Florida, and Mississippi.

SCSEP is a part-time community service and work-based job training program that offers older adults the opportunity to return or remain active in the workforce through on the job training in community-based organizations in identified growth industries.

Priority is given to Veterans and their qualified spouses, then to individuals who: are over age 65; have a disability; have low literacy skills or limited English proficiency; reside in a rural area; may be homeless or at risk for homelessness; have low employment prospects; failed to find employment after using services through the American Job Center system.



Annually, NCBA and CVS partner to host job fairs to orient SCSEP participants about the benefits of working at CVS as a mature worker.

To learn more about the Senior Community Service Employment Program (SCSEP), visit: <https://ncba-aging.org/employment-program-resources>

NCBA administers the Environmental Employment (SEE) Program with funding from the U.S. Environmental Protection Agency.



Agency (EPA) to older adults, age 55+ with professional backgrounds in engineering, public information, chemistry, writing and administration the opportunity to remain active in the workforce while sharing their talents with the U.S. Environmental Protection Agency (EPA) in Washington, DC, and at EPA Regional Offices and Environmental Laboratories in NC, OK, FL, and GA.

To learn more about the Senior Employment Environment Program (SEE), visit: <https://www.ncba-aging.org/environmental-employment-program-resources>



Health

The NCBA Health and Wellness Program offers continual education, resources, and technical assistance either in-person, online, or through self-paced learning opportunities. The program offers a wide variety of social and economic services and support including, the delivery and coordination of national health education and promotion activities, and the dissemination of and referral to resources.

To learn more visit <https://ncba-aging.org/health-and-wellness>

Housing

Established in 1977, the NCBA Housing Management Corporation (NCBA-HMC) is the organization's largest program and service to seniors. NCBA-HMC provides senior housing for over 500 low-income seniors with operations in Washington, DC, Jackson, MS, Hernando, MS, Marks, MS, Mayersville, MS and Reidsville, NC.

To learn more about NCBA Housing Program, visit <https://www.ncba-aged.org/affordable-housing/>



Samuel J. Simmons NCBA Estates located in Washington, DC



NCBA Presents Free Tool Kit and Recorded Webinar for Dispelling Fears and Myths about COVID-19 Vaccines

Rather than a live webinar, we have linked a **recorded webinar** for you to view at your convenience to help in your outreach to older African Americans in your community who are still wary about the Covid-19 vaccines or have trouble accessing services. The webinar runs less than 20 minutes.



The webinar offers practical "learned" about organizations seeking to educate their members and facilitate vaccinations, but it also includes a **Tool Kit** with an infographic, tip sheet, a brief informational video that addresses myths and facts about the vaccines, and appointment cards to help recipients keep track.

Here is the link to the Recorded Webinar and the Tool Kit.

We strongly encourage you to download the **informational video in the Tool Kit** for public showings, to email it to members, or to share with other organizations and individuals who are engaged in Covid-19 education. There is no copyright on the video, so feel free to distribute it far and wide.

We would very much appreciate your feedback about this webinar, the Tool Kit and your distribution numbers. Please let us hear from you at covided@ncba-aging.org.

NCBA Social Media



To learn more about NCBA programs, services, and upcoming events, follow us on Facebook, Twitter, and Instagram!

Facebook @NCBA1970

Twitter@NCBA1970

Instagram@NCBA_1970

You're also welcome to learn more about NCBA by visiting our website at www.ncba-aging.org. We look forward to hearing from you!



SOCIAL SECURITY EXPANDS OUTREACH AND ACCESS FOR SSI

Social Security has expanded its outreach to people in critical need of financial help who may be eligible for Supplemental Security Income (SSI). SSI provides monthly payments to adults aged 65 and older or to other adults – and children – with a disability or blindness who have limited income and financial resources. SSI helps pay for basic needs like rent, food, clothing, and medicine.

The Social Security Administration (SSA) identified underserved communities in rural and urban areas across the country. SSA focused on areas with the greatest decline in SSI applications since the pandemic. Their outreach efforts targeted areas where a majority of people are living at or below the federal poverty threshold.

People who receive SSI may qualify for other financial help, including Supplemental Nutrition Assistance Program or SNAP benefits (formerly known as food stamps), Medicaid, and discounted internet service through the Federal Trade Commission's Affordable Connectivity Program. Social Security beneficiaries may also be eligible for SSI.

People with limited income and financial resources and internet access can visit www.ssa.gov/ssi to learn more about SSI eligibility and request an appointment to apply for benefits. People without access to the internet can call our National 800 Number at 1-800-772-1213 to speak with a representative.

SSA and NCBA would like to encourage you to share this information with your friends and family to spread the word about SSI.

#