

TIP SHEETS

WHAT MATTERS





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Nevada Interprofessional Healthy Aging Network (NIHAN)

project is federally funded by HRSA Geriatric Workforce Enhancement Program (GWEP) to improve health outcomes for older adults by educating a healthcare workforce that maximizes older adult and family engagement and by promoting Age-Friendly Health Systems and Dementia-Friendly Communities to primary care clinics and their communities.

What is the 4Ms of Age-Friendly Care?



- **Age-Friendly Care** is health care that addresses your unique needs and wants.
- It's about **What Matters to You**.
- It can help you enjoy **a better quality of life**.
- It is care that is safe and based on **what research shows are the most important things** to pay attention to as we get older

The 4Ms: What Matters, Medication, Mentation and Mobility.

Element of the 4Ms Framework:



What Matters

Know and align care with health outcome goals and preferences of each older adult.



Mobility

Assess and monitor a daily mobility goal; create home environments safe for mobility.



Medication

Review high-risk medication use; deprescribe or decide not to prescribe if necessary; ensure medication do not interfere with other 4Ms.



Mentation

Monitor mental and cognitive well-being; manage mental and cognitive concerns of older adults and their caregiver.

For more information and resources, visit:

<https://www.johnhartford.org/> and <http://www.ih.org>

NIHAN TIP SHEETS have been *developed by* the *NIHAN Education Committee* for the topics related to the 4Ms such as home health exercise to improve mobility, medications that often prescribed to geriatric patients with usage and side effects, educational information for brain health, memory loss, Alzheimer's symptoms, advance care planning, COVID-19 vaccines and safety tips, and so on. The NIHAN Tip Sheets provide useful resources and guidance for older adults and their caregivers to help older adults health and well-being.

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WHAT MATTERS

COVID-19 Vaccines and Safety Tips

Shot or No shot? There is no question. COVID-19 vaccines protect!

How does the vaccine defend us from the virus?

- Builds immunity to COVID-19 virus without getting the infection.
- Reduces the chance of getting sick or dying from the virus.

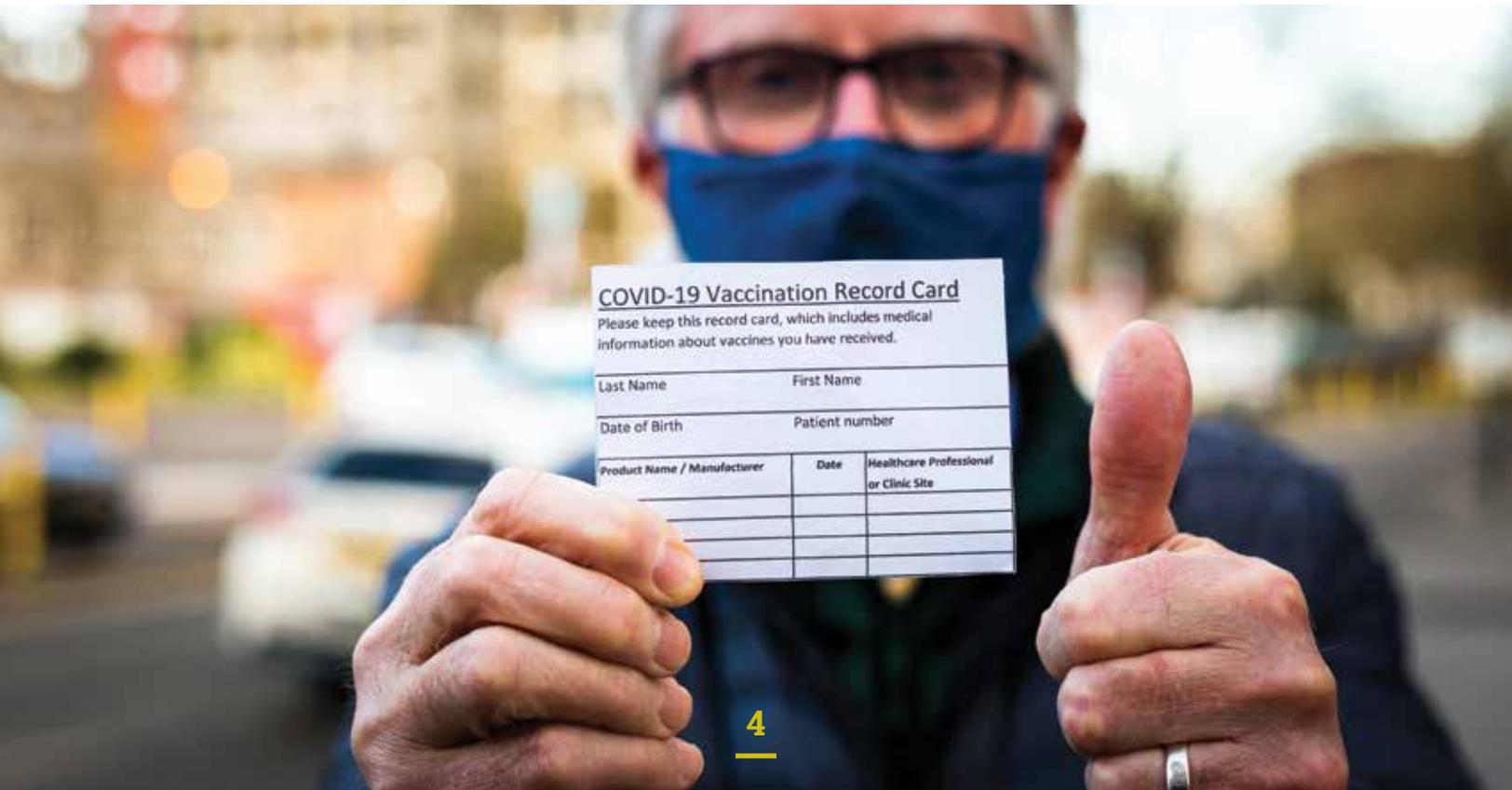
How does the vaccine protect others if I get the vaccine?

- When the population is largely vaccinated, it prevents transmission in the community protecting the unvaccinated people, or creating a “herd immunity”.

Can I receive COVID-19 vaccine with other types of vaccines?

YES

- Multiple vaccines including routine immunization can be administered with COVID-19 vaccine at a single visit, in different injection areas.



Should I receive COVID-19 vaccine even though I already got COVID-19 virus infection?

YES

- It's still unknown how long you are protected from getting sick again after recovery of the infection.
- If treated with convalescent plasma, wait 90 days before getting the vaccine.

Why should I receive COVID-19 vaccine?

- Pfizer, Moderna and J&J vaccines have shown to be safe and effective.
- It keeps you from getting seriously infected and may protect people around you.

Can I take off the mask after fully vaccinated?

YES

- Fully vaccinated (**2 weeks after receiving the complete doses**) need not to wear a mask indoor or outdoor, **except** in public transportation, or where required by law.



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COVID-19 Vaccines and Safety Tips

How to find COVID-19 vaccine site?

1. **Vaccines.gov**
2. Or **call 1.800.401.0946** between 7:00 AM to 8:00 PM, 7 days a week

Can I still get a COVID-19 vaccine if I have allergies to food or oral medications?

YES

- Report any type of allergies to vaccine administrator.
- Read the vaccine's Fact Sheet for ingredients.

Should I take the second dose of Pfizer or Moderna if I have had any allergic reaction?

NO

- Even if it is not severe, you **should not** get either of them.
- Report to your Healthcare Provider and may suggest getting the other type of vaccine.



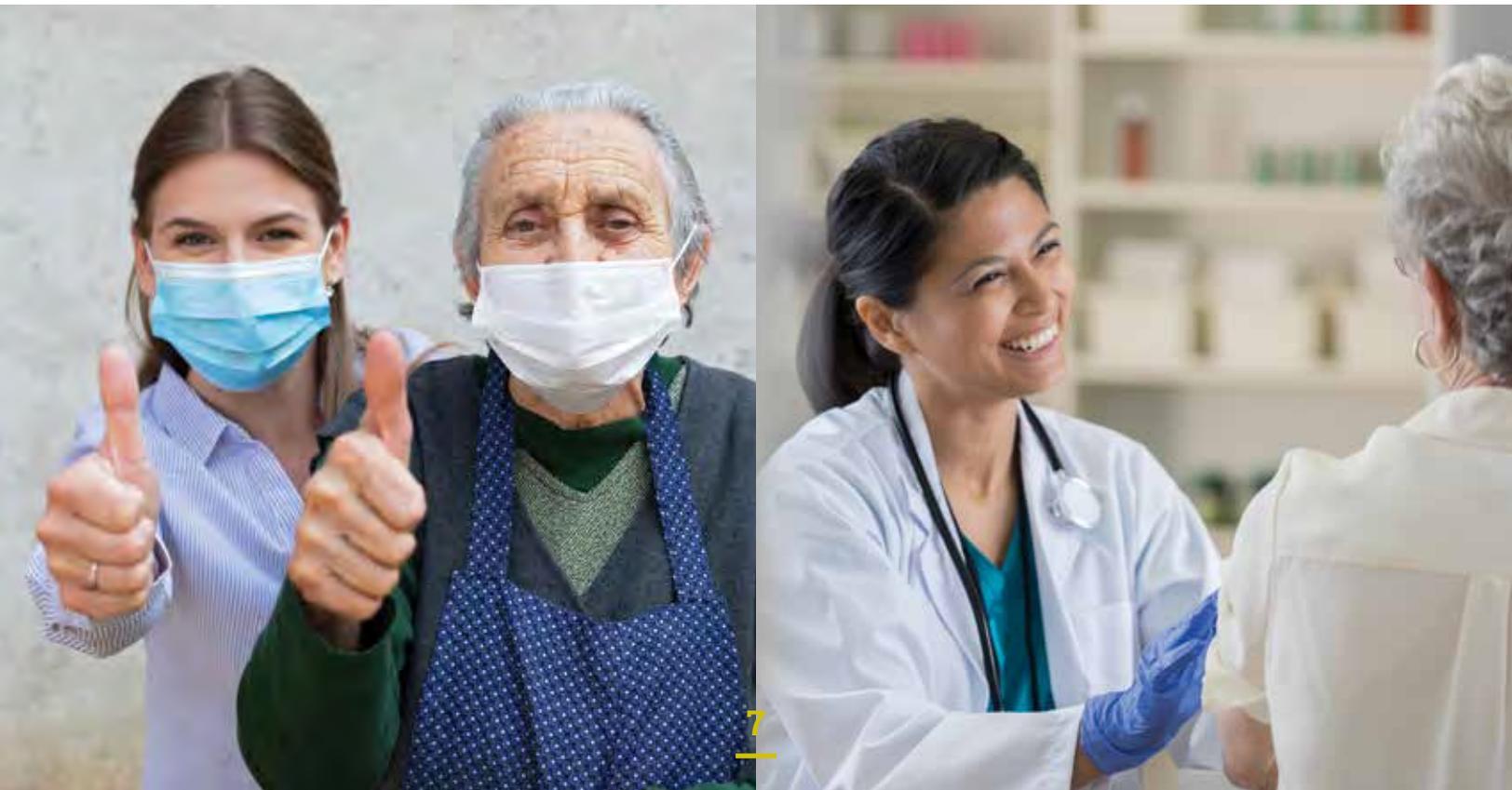
How to contact a healthcare provider when I have reactions from COVID-19 vaccine?

- A 15-min wait to see if any side effects or allergies are incurred.
- For any immediate allergic reaction after leaving a vaccination site, please call 911!
- Use “v-safe” app and let CDC (Centers for Disease Control & Prevention) know.

Can I use fans to decrease the risk of COVID-19 spread inside my apartment?

YES

- Fans increase ventilation of open windows and break particle concentrations.



WHAT MATTERS

COVID-19 Vaccines and Safety Tips

Does the COVID-19 virus spread in public swimming pool areas or water playgrounds?

NO

NO evidence reported, **but must continue to:**

Wear a mask!

- that fit securely over nose and mouth
- regularly wash reusable masks

Wash hands!

- before putting on and after touching used mask
- before touching your face

Keep 6-foot distance in & out of the water

For more information, please visit:

- **CDC:** <https://www.cdc.gov>
- **Southern Nevada Health District:** <https://www.southernnevadahealthdistrict.org>
- **Nevada Health Response:** <https://nvhealthresponse.nv.gov>
- **Immunize Nevada:** <https://www.immunizenevada.org>
- **Nevada 211:** <https://www.nevada211.org/covid-19-vaccine-info>
- **Alzheimer's Association:**
<https://www.alz.org/alzheimers-dementia/coronavirus-covid-19>



WHAT MATTERS

Advance Care Planning

What is Advance Care Planning?

Advance Care Planning is a process. It allows a person to express certain wishes related to medical care. These wishes guide medical care decisions if (and only if) the person becomes unable to make them in the future because of illness.

Advance Care Planning involves figuring out a person's own preferences, discussing them with loved ones and healthcare providers, and documenting them.

Advance Care Plans should be updated on an ongoing basis because life circumstances change.

Why is Advance Care Planning important?

Most people are used to making their own decisions about medical care. But, sometimes, because of an illness, a person cannot choose the type of care the person wants.

Advance Care Planning can help a person exert more control over the medical care the person receives if the person becomes unable to make decisions about care in the future.

Anyone can lose the ability to make medical decisions at any time. Advance Care Planning is therefore important for everyone.





WHAT MATTERS

Advance Care Planning



What can someone decide as part of the Advance Care Planning process?

A person can make and share different wishes related to healthcare as part of this process.

One important choice often made as part of Advance Care Planning is who should make medical decisions on behalf of a person if the person becomes unable to do so.

Advance Care Planning also often involves deciding what kind of medical care a person would want at the end of life. This can include whether a person would want to receive life-sustaining treatment, resuscitation, dialysis, chemotherapy, or use of a ventilator.

How do I document these wishes?

An important part of Advance Care Planning is to translate a person's wishes into legal documents. Collectively, the legal documents used in Advance Care Planning are sometimes called "Advance Directives."

The types of Advance Directives available to a person, what kinds of wishes they can express, and how they can be created varies under state law. As a result, guidance from a licensed and qualified attorney can be an important part of Advance Care Planning.

After Advance Directives are created, it is important to share them with loved ones, caregivers, and healthcare providers so that they can be used if they become needed.



WHAT MATTERS

Communicating with Older Adults 101

The Basics:

- Many older adults (especially those who are younger than 85) have no problem with everyday communication.
- First, make sure that the older adult you are communicating with can see, hear, and understand you.

General Tips:

- Show the older adult respect. Address them “Mr.,” “Mrs.,” or “Ms.,” unless you are asked not to.
- After you convey information, ask the older adult if what you said made sense. Do not assume that everything you said was understood.
- Use simple language and avoid medical or technical terms.
- Do your homework so that you really understand what you are trying to communicate. This will help you simplify the complex information in advance.
- Improve your general communication and presentation skills. This will help you communicate with older adults too.
- Observe and learn the older adult’s preferred communication or conversation style. Use this style, if possible.
- Check how you convey your message. Aim to communicate at the 5th – 10th-grade levels. You can use online tools to help determine the grade level associated with your language. These tools include: <https://readabilityformulas.com/free-readability-formula-tests.php>

**GET TO KNOW
THE OLDER
ADULT AND
HELP THE
OLDER ADULT
GET TO
KNOW YOU.**



WHAT MATTERS

Communicating with Older Adults 101

Communicating with an Older Adult who has Cognitive Challenges:

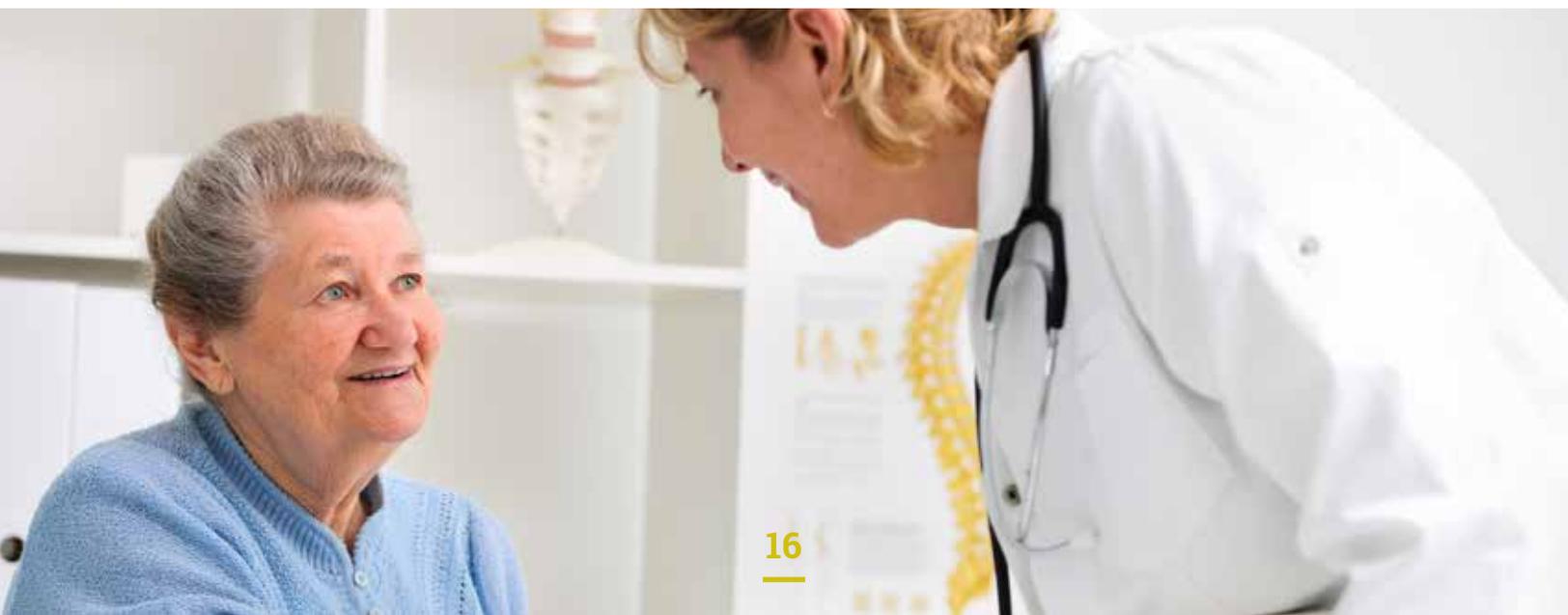
- Repeat and review important health care information multiple times.
- Listen extra carefully and do not interrupt during communication.
- Give the older adult additional time to digest information.

Communicating with an Older Adult who has Visual Challenges:

- Check the lighting and make sure that the room is bright.
- Use at least 18-point size font in any written communication.
- Make sure that glasses and magnifying glasses are ready and available to the older adult.

Communicating with an Older Adult who has Hearing Challenges:

- Avoid noisy and distracting environments when communicating.
- Use gestures and visual aids to help convey information.
- Speak slowly and louder than you might otherwise.
- Encourage the use of hearing aids during communication.



Good Practice:

- Combine the above tips as needed, depending on the older adult.
- Give older adults important information in writing or refer them to easily-accessible websites in case they need a refresher.
- If you are having communication problems, take a note and ask a health professional or communication specialist to resolve it before any future communications.

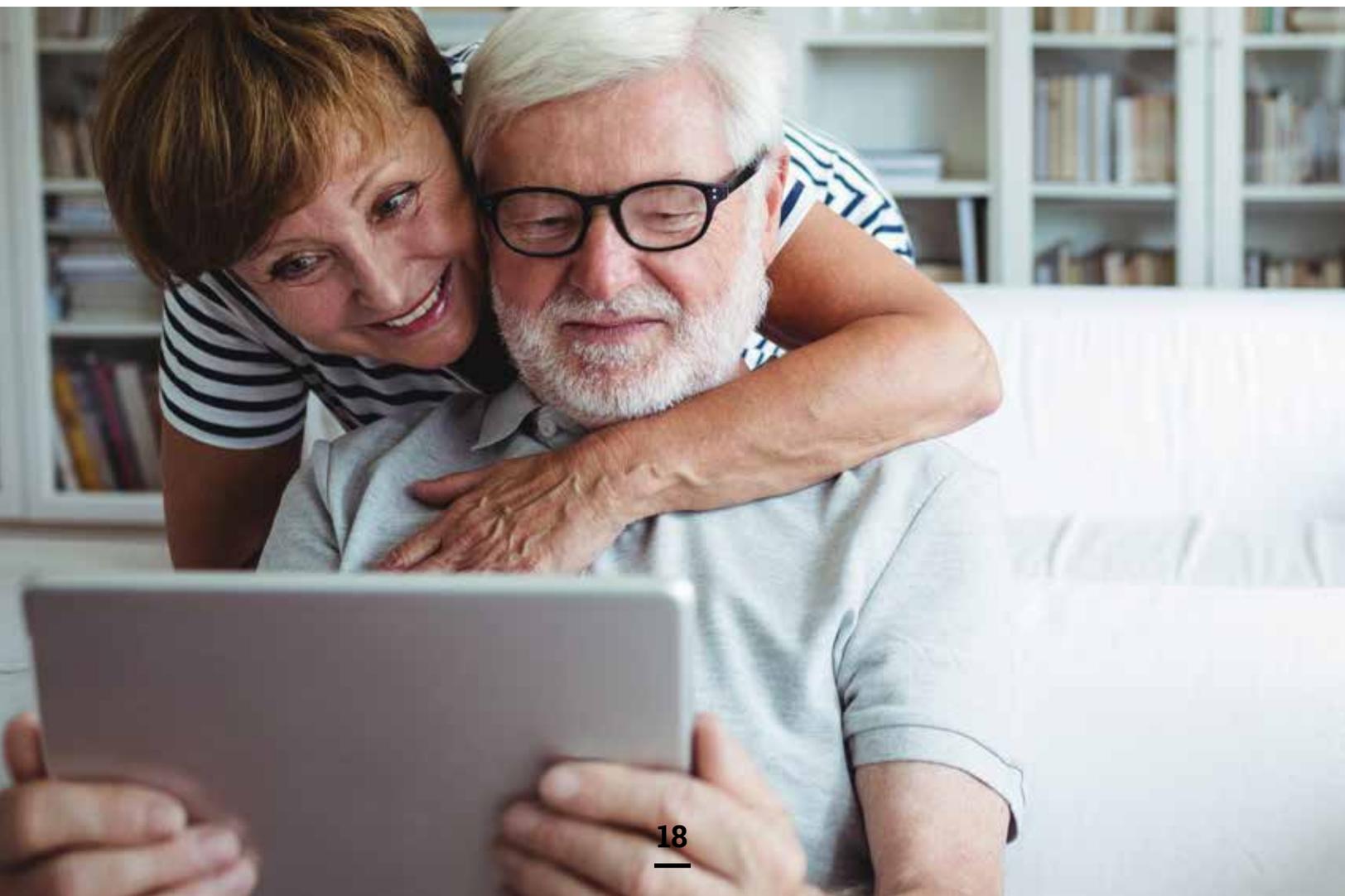


WHAT MATTERS

Digital Communication for Older Adults

The Basics:

- Digital communication means providing and receiving information using digital sources, such as websites, blogs, emails, text messages, and video conferences.
- Computers, tablet devices, smartphones, and landline phones are commonly used for digital communication.
- Health literacy refers to the ability to find and understand information about health.
- Low health literacy may result in a person misunderstanding medical information and medication instructions.



**Before Digital
Communication:**

Make sure that you know the purpose of this communication.

Ask the older adult “how confident are you filling out medical forms by yourself?” with the options of [Extremely], [Quite a bit], [Somewhat], [A little bit] and [Not at all].

1. If the person answers [A little bit] or [Not at all], communications should be at the 5th to 6th grade reading level.
2. If the person answers [Quite a bit] or [Somewhat], communications should be at the 8th to 9th grade reading level.
3. If the person answers [Extremely], communications should be at the 10th grade reading level.

Check the reading level of your messages here: <https://readabilityformulas.com/free-readability-formula-tests.php>

Offer to help older adults adjust their device settings, including at least a 12-point font size, preferred sound volume, and comfortable screen brightness.

**During Digital
Communication:**

- Focus only on 1 to 3 important messages at a time.
- Describe and explain your message in 2 to 3 different ways.
- Give information in multiple modes - orally, in writing, using visual aids, through video, etc.
- Use video-conferencing applications instead of long text messages or emails in case of low health literacy.

WHAT MATTERS

Digital Communication for Older Adults

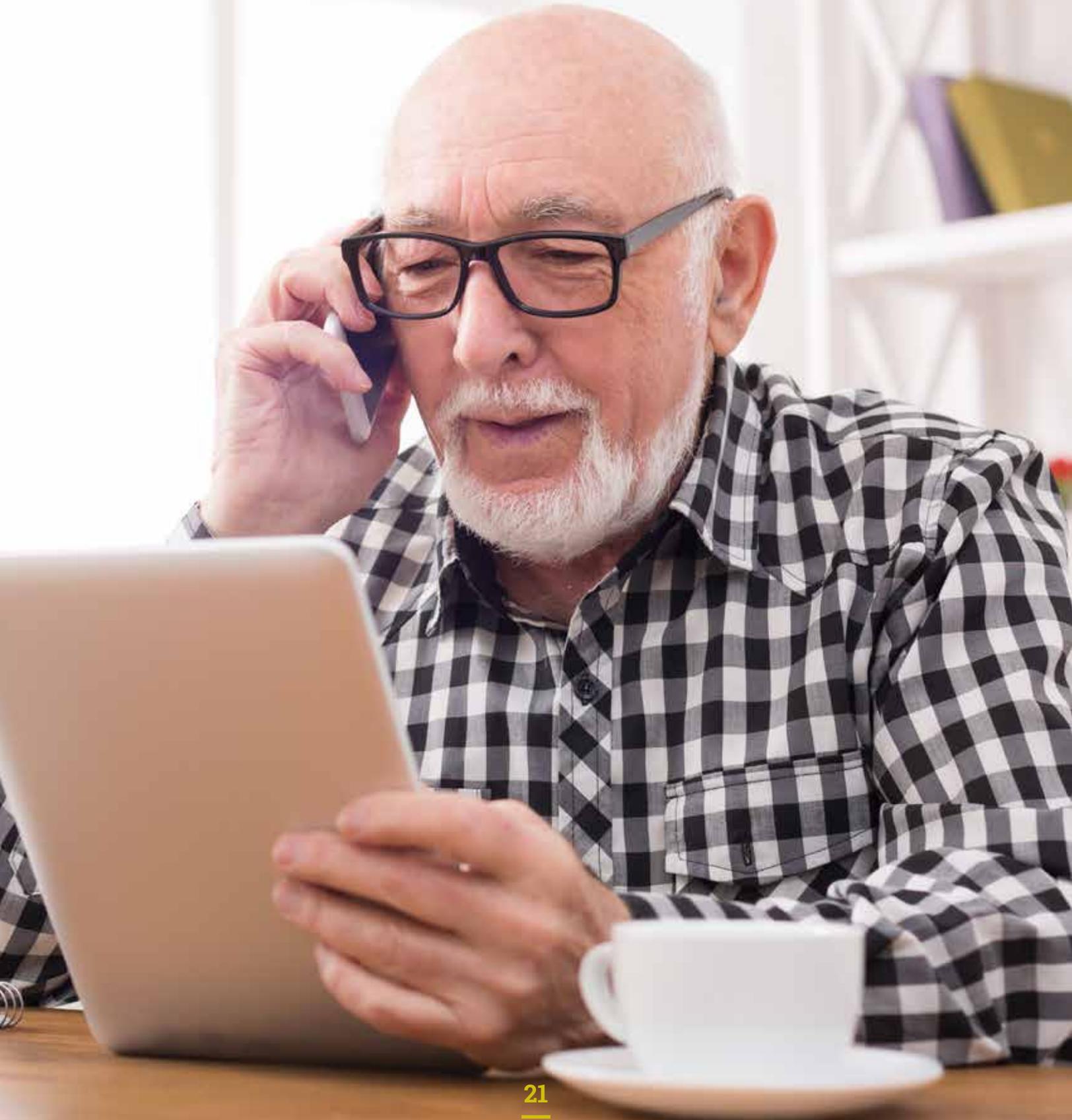
After Digital Communication:

Recommend reliable health websites such as the National Institutes of Health (NIH), Centers for Disease Control and Prevention (CDC), Food and Drug Administration (FDA), etc.

Have older adults ask their health care providers if they have questions about any of the information communicated digitally.

Remind older adults not to completely rely on online health information because it varies in quality.





Medicare 101

What is Medicare?

Medicare is federal government program that pays for health services for certain people. To qualify for Medicare, you must meet some basic qualification requirements, including being an adult who is age 65 or older or having a qualifying disability or disease. It is important to understand that not everyone who meets these basic requirements can receive Medicare benefits because there are additional qualification requirements too.

What does Medicare cover?

Medicare is made up of four distinct parts.

- Part A** funds hospital services, recovery after hospital care, and hospice care.
- Part B** funds doctors' visits, home health, and medical equipment like canes and walkers.
- Part C** is sometimes called "Medicare Advantage" and involves private insurance companies.
- Part D** funds prescription drugs.

Each part pays for certain services but not others and some parts require patients who do not have any additional health insurance to pay some costs out of pocket as well.

There are certain services that an older adult may need that Medicare does not cover. This includes dental care, eyeglasses, hearing aids, acupuncture, and foot care. Since this can get complicated, it is a good idea to get some help in understanding what Medicare covers and how to enroll.

Where can I get help with questions about Medicare?

An important resource for help is Nevada's State Health Insurance Assistance Program, which helps people understand Medicare through one-on-one counseling. You can reach them at (800) 307-4444 in Southern Nevada or (800) 826-2085 in Northern Nevada.



Nevada Medicaid

What is Medicaid?

Medicaid is another government program. It is a partnership between the federal and state government and paid for with a combination of federal and state dollars.

The state plays a big role in running Medicaid.

As a result, each state Medicaid program is somewhat different.

Who can participate in the Medicaid program?

Medicaid provides coverage for low-income people — that is, people whose income is at or below 138% of the federal poverty level.

The amount of money this translates to varies by family size. For a family of one, this amount is slightly under \$17,000. For many lower-income seniors who are also eligible for Medicare, Medicaid covers many of the costs that Medicare does not.

Medicaid also covers some nursing home care for people who qualify. In Nevada, the Medicaid program is run in partnership with several private insurance companies.

Where do I get more information about Nevada's Medicaid?

A good first step is to call the **Nevada Division of Welfare and Supportive services (800) 992-0900.**

Nevada works with private insurance organizations to provide Medicaid services.

Another option is to contact these organizations:

Anthem Blue Cross and Blue Shield (844) 396-2329

Health Plan of Nevada by the UnitedHealth (800) 962-8074

SilverSummit Healthplan — (844) 366-2880.

How to Choose Health Insurance

What if I think I don't qualify for Medicare or Medicaid or I just don't know?



There might be private insurance options if you do not qualify for Medicare or Medicaid. A good first step is to contact **Nevada Health Link**, which can help you find a health insurance that fits your needs and budgets.

What kind of private insurance is best for me?



It really depends. There are many types of private insurance plans. Given the different options, it is a good idea to contact **Nevada Health Link** and also to see if there are other resources in the community that can help you select the private insurance option that best fits your needs.

I have medical conditions and worry that I won't be able to afford insurance. What should I do?



Contact **Nevada Health Link**. Usually, you cannot be denied health insurance coverage or charged more money because of a pre-existing medical conditions.

BASIC FEATURES OF PRIVATE INSURANCE PLANS

Feature	PPO	HMO	EPO
Primary care provider required	No	Yes	Usually
Out-of-network coverage	Covered, but at a cost	Not covered	Not covered
Specialist visit	No referral	Referral only	No referral
Premium cost	Higher	Lower	Middling

**PPO: Preferred Provider Organization | HMO: Health Maintenance Organization
EPO: Exclusive Provider Organization**

Government/Community Resources When You're Uninsured

Who is eligible?

- When visitors are sick and hospitalized, alien (or emergency) Nevada Medicaid may be eligible. Case manager in hospital is right person to help.

I have Medicare but am concerned about my out-of-pocket cost of my prescription drugs. What can I do?

- Nevada has a Senior Rx Program for low-income adults over age 62 who are enrolled in Medicare but do not qualify for other assistance with their prescription drug costs. For additional information, call the program at (866) 303-6323.

Where can I get care if I am a low-income person and do not have health insurance?

- There are some great resources in Nevada that provide primary healthcare services to low-income patients. They include, Volunteers in Medicine Southern Nevada, Nevada Health Centers, and FirstMed Health and Wellness.

I am homeless and therefore face unique challenges when it comes to health insurance and health services. Where can I go for help?

- A good place to start is the Homeless Shelters in Southern Nevada run by organizations such as Catholic Charities, the Salvation Army, and Lutheran Social Services.

Nevada COVID-19 Aging Network (CAN)

How can I access health services now that I don't want to leave my house because of the Covid-19 pandemic?

Nevada now has a statewide support system to help socially isolated older adults.

This system, called **Nevada Covid-19 Aging Network**, provides telehealth primary care, social work, and mental health counseling services virtually.

This means that you can receive care without leaving your home. **To learn more, call 2-1-1** from any phone or visit <https://www.nevada211.org/seniors-covid19-resources/>, where information is available in 8 different languages.



WHAT MATTERS

No English, Help Me!

I Don't Speak English, Help Me! Older Adults with Limited English.

Most health care providers that see patients who are Medicaid or Medicare beneficiaries must make language services available to patients with Limited English Proficiency.

Before You See a Provider – Do Your Homework:

- Look up important English words that you may not know about your health.
- Translate your questions into English.
- Look for visual aids that works for your language and English.
- See if a family member or friend who is more comfortable speaking English can come with you.
- Learn how to use translation applications on mobile devices such as smartphones or tablets.
- Prepare a “My Health Passport” in English so that you can easily share basic information about your health.
- Know that the hospital, clinic, or nursing home should provide interpretation services at your request. These services may be in-person or by video or phone.



WHAT MATTERS

No English, Help Me!

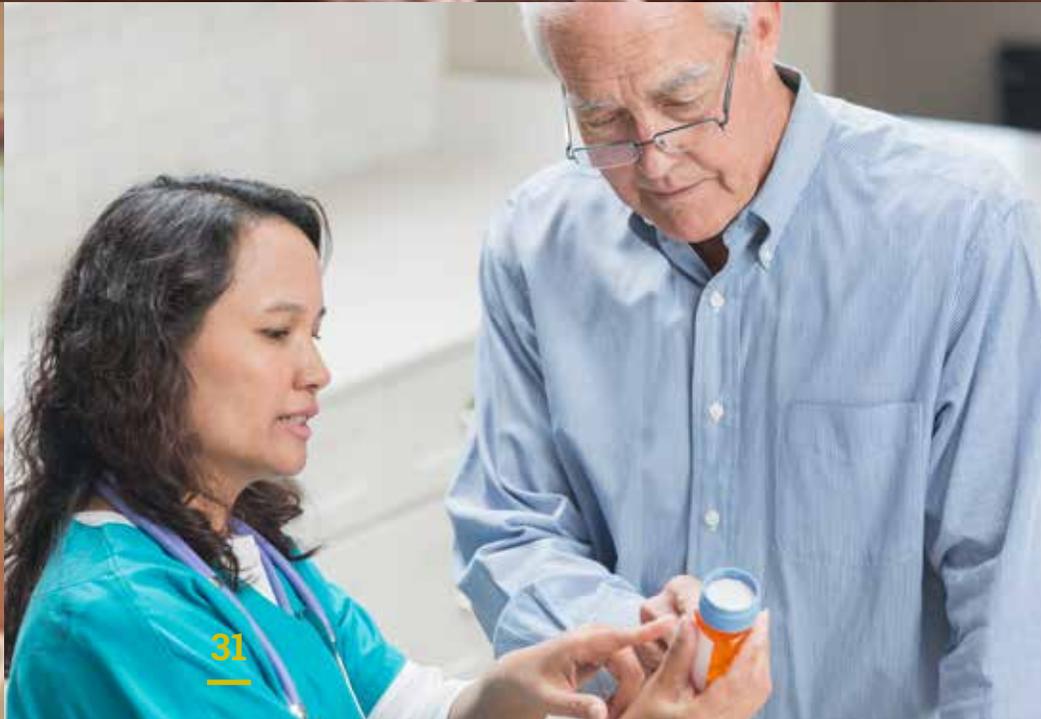
While You See a Provider:

- Ask the doctor, nurse, or any staff member about interpretation services in your language.
- Don't be afraid to ask the same question more than once.
- Tell your provider if you are having a hard time understanding instructions or asking questions in English.
- Use your time with your provider for what matters the most to you. For example, managing your medications might be very important to you.
- Communicate little by little. Use short and simple sentences. Speak up and repeat yourself in different tones if you think that might help.
- Repeat back what you think you heard the provider say: Tell the provider what you understood and ask, "Is this right?"
- Use technology, such as translation application on your smartphone, if it is available to you.



After You See a Provider:

- Figure out if there is any interpretation phone services to ask more questions
- Write down questions or things you are not sure about.
- Do your homework (see above) before your next visit.





CREATING AGE-FRIENDLY HEALTH SYSTEM & DEMENTIA-FRIENDLY COMMUNITY IN NEVADA



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DISCLAIMER: This information is not intended to diagnose health problems or to take the place of medical advice or care you receive from your physician or other healthcare provider. Always consult your healthcare provider about your medications, symptoms, and health problems.

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