

Grandparents are parents again

Across the U.S., more than 2.4 million grandparents are raising their grandchildren, as the parents struggle with a variety of serious problems such as drug or alcohol addiction, financial hardship, mental illness, prison time, domestic violence, divorce and more. While there are many financial, legal and even emotional issues to think about when you begin to raise a grandchild, you'll be happy to know that help is available. Here are some tips and resources along with supportive services to check into.

Support groups

Even if it's not your thing, support groups for grandparents raising grandchildren are fantastic tools to connect you with other people who understand what you're experiencing, not to mention it gives you a chance to learn and share information and resources.

To find local and online support groups, visit the AARP Foundation Grandparent Information Center at www.giclocalsupport.org where you can do a search by city or ZIP code.

Financial assistance

Raising or taking care of grand kids can be a major strain on the pocketbook, but financial assistance is available depending on your circumstances. For starters, find out whether your grandchild or family qualifies for Social Security (www.ssa.gov/kids/parent5.htm), your state's Temporary Assistance for Needy Families program (www.acf.hhs.gov/programs/ofa) or food stamps (www.fns.usda.gov/fsp). Also visit www.benefitscheckup.org, a comprehensive web resource that helps you search for additional

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Adam Hamm
Insurance Commissioner

Welcome to the *RxConnector* newsletter!

Dear friends,

This newsletter is designed to keep you up-to-date about the Prescription Connection for North Dakota program and to keep you in the know about the various prescription assistance programs that are available. From time to time, we may also include other items of interest related to Medicare and the State Health Insurance Counseling (SHIC) program.

As always, thank you so much for all that you do for the Prescription Connection program. Without your help, our work would be that much harder. Your efforts are valued and appreciated.

If you have items of interest that you think should be included in this newsletter, we would love to hear about them. Please contact Sharon St. Aubin at sstaubin@nd.gov or call her at 1.888.575.6611.



Adam Hamm
Insurance Commissioner

government and private benefits you may be eligible for, such as supplemental income, lower energy bills, discounts on prescription medications and more.

Tax breaks

Grandparents who are raising children may also be eligible for tax credits like the Earned Income Tax



Credit (EITC), which is available to those with low or moderate incomes. If you make too much money to qualify for the EITC, you may be able to apply for the Child Tax Credit. And if you're raising three or more kids, you can try for the Additional Child Tax Credit. Also available is the Child and Dependent Care Tax Credit to families who incur childcare expenditures in order to work. To learn more, visit www.irs.gov or call the IRS helpline at 1-800-829-1040.

Legal status

Ask a family law attorney to help you determine whether or not it would be beneficial for you to

The patients doctors don't know

All medical students are required to have clinical experiences in pediatrics and obstetrics, even though after they graduate most will never treat a child or deliver a baby. Yet there is no requirement for any clinical training in geriatrics, even though patients 65 and older account for 32 percent of the average

become your grandchild's legal guardian. This status will allow you to make important decisions for the child such as enrolling them in school (some states require it), or giving a doctor permission to treat them. For help finding legal advice or locating an attorney visit www.findlegalhelp.org, a consumer's guide created by the American Bar Association that can also help you locate free legal services depending on your income.

Health insurance

If you need health insurance for your grandchildren, you can apply for free or low-cost health insurance (depending on your income level) through your state government. To learn more and find out if you're eligible go to www.insurekidsnow.gov, or call 1-877-543-7669. You may be able to get help through Medicaid. Also visit the National Association of Insurance Commissioners website at www.insureonline.org. Click on "Raising Grandchildren," for tips and information on a variety of other insurance considerations.

Savvy tip: An overall resource for grandparents raising grandchildren is AARP (www.aarp.org/family/grandparenting), which offers a bevy of articles and helpful information including a GrandCare tool kit.

Send your senior questions to: Savvy Senior, P.O. Box 5443, Norman, OK 73070, or visit www.savvysenior.org.

Source: Jim Miller, a contributor to the NBC Today show and author of "The Savvy Senior" book.

doctor's workload in surgical care and 43 percent in medical specialty care, and they make up 48 percent of all inpatient hospital days (Rosanne M. Leipzig, 7/1).

Source: The New York Times

VA provides underused monthly pension benefit while Medicaid receives increased attention

Medicaid receives increased attention while an underused, special monthly pension benefit called Aid and Attendance can help veterans, and spouses, with assisted living.

Newsday reports that the “pension benefit may be available to wartime veterans and surviving spouses who have in-home care or who live in nursing homes or assisted-living facilities” and that “eligible veterans need not have served overseas or in combat; they must have served during the period of a war: World War II, Dec. 7, 1941-Dec. 31, 1946; Korea, June 27, 1950-Jan. 31, 1955; Vietnam, Aug. 5, 1964-May 7, 1975; Persian Gulf War, Aug. 2, 1990 to a

date not yet determined.” A 2006 press release about the program “got little notice ... [but that] as word of the benefit got around, elder law firms throughout the country became active in pursuing the benefit for clients.” The benefit is meant for veterans and surviving spouses with unreimbursed medical expenses, such as assisted-living charges that are not supported by Medicaid. The Philadelphia Inquirer also picked up the feature (Friedman, 6/27).

Source: Kaiser Daily Report

Lawyers to provide legal help for victims of flooding



Some North Dakota lawyers have partnered with the Federal Emergency Management Agency to establish a toll-free legal

help line for victims of flooding in the state. There are some limitations on disaster legal services. For

example, assistance is not available for cases that will produce a fee, such as cases where attorneys are paid part of a court settlement. Such cases are referred to local lawyer referral services.

People facing legal issues due to flooding who cannot afford a lawyer may call 1-800-634-5263 from 9 a.m. to 3 p.m. Central Standard Time Monday through Thursday. Callers should identify that they are seeking flood-related legal assistance.

Source: Bismarck Tribune

Bridge to Benefits

Visit the newly launched North Dakota Bridge to Benefits web site at nd.bridgetobenefits.org/.

Why should you care and how it will help?

We all know people who have difficulty making their income stretch to meet basic needs. This online eligibility screening tool is a convenient and efficient way to help individuals and families with limited incomes determine their eligibility for assistance programs such as Medicaid, children’s health insurance, food assistance, home energy assistance,

earned income tax credits and more.

Take a minute to look at this handy online screening tool and share the information with others.

North Dakota KIDS COUNT, with assistance from numerous agencies and site reviewers, helped develop this resource for the Children’s Defense Fund of Minnesota, who sponsors the Bridge to Benefits program.

FDA warns not to consume two liquid “energy” products

The Food and Drug Administration (FDA) has warned consumers not to buy or use two liquid products that have been recalled due to suspected product tampering. The products are:

- New Whey liquid products
- Hardcore Energize Bullet liquid products

The products are sold in vials that look similar to test tubes.

The suspected tampering involved a utility knife blade found in one vial of Hardcore Energize Bullet drink and another blade in one vial of New Whey liquid products. No one is known to have been hurt. The manufacturer of both products, Protica Inc., of Whitehall, Pa., is investigating these incidents.

About the recalled products

New Whey liquid products are being recalled by IDS of Oviedo, Fla. The products were sold at various retail stores in the United States; are packaged in 2.9-ounce clear, test-tube-like vials; and come in two flavors: New Whey Fruit Punch 25g (the affected lot is 1960), and New Whey Blue Raspberry 42g (the affected lot is 1944).

Lantus (insulin glargine)

FDA notified health care professionals and patients that it is aware of four recently-published observational studies that looked at the use of Lantus (insulin glargine) and possible risk for cancer in patients with diabetes. Three of the four studies suggest an increased risk for cancer associated with use of Lantus. Based on the currently available data, the FDA recommends that patients should not stop taking their insulin therapy without consulting a physician, since uncontrolled blood sugar levels can have both immediate and long-term serious adverse effects.

FDA is currently reviewing many sources of safety data for Lantus, including these newly published observational studies, data from all completed controlled clinical trials and information about ongoing controlled clinical trials, to better understand the risk, if any, for cancer associated with use of Lantus. Discussions are also ongoing between FDA

Hardcore Energize Bullet liquid products are being recalled by iSatori Technologies of Golden, Colo. The products were sold in the United States and Canada; are packaged in 2.9-ounce clear, test-tube-like vials; and come in two flavors: Blue Rage (the affected lots are 1961, 1962 and 1794), and Black Rush (the affected lot is 1963)

Advice for consumers

- Do not buy or consume New Whey or Hardcore Energize Bullet liquid products.
- Report serious side effects or product quality problems with the use of these products to FDA’s MedWatch Adverse Event Reporting program online, by regular mail, fax or phone.
 - Online: www.fda.gov/Safety/MedWatch/default.htm
 - Regular mail: Use FDA postage paid form 3500 and mail to MedWatch, 5600 Fishers Lane, Rockville, MD 20852-9787
 - Fax: 800-FDA-0178
 - Phone: 800-FDA-1088

Source: FDA

and the manufacturer of Lantus as to whether any additional studies evaluating the safety and efficacy of this drug will need to be performed. FDA will communicate the results on its ongoing review to the public, as appropriate, as our review continues.

The FDA encourages both health care professionals and patients to report side effects from the use of insulin glargine to the FDA’s MedWatch Adverse Event Reporting Program at www.fda.gov/medwatch/report.htm.

Read the complete MedWatch Safety summary, including a link to the Early Communication and supporting documents, at: www.fda.gov/Safety/Med-Watch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm170089.htm

Source: FDA MedWatch

Varenicline (marketed as Chantix) and Bupropion (marketed as Zyban, Wellbutrin and generics)

FDA notified health care professionals and patients that it has required the manufacturers of the smoking cessation aids varenicline (Chantix) and bupropion (Zyban and generics) to add new Boxed Warnings and develop patient Medication Guides highlighting the risk of serious neuropsychiatric symptoms in patients using these products. These symptoms include changes in behavior, hostility, agitation, depressed mood, suicidal thoughts and behavior, and attempted suicide. The added warnings are based on the continued review of post-marketing adverse event reports for varenicline and bupropion received by the FDA. These reports included those with a temporal relationship between the use of varenicline or bupropion and suicidal events and the occurrence of suicidal ideation and suicidal behavior in patients with no history of psychiatric disease.

Health care professionals should advise patients to stop taking varenicline or bupropion and contact a health care provider immediately if they experience agitation, depressed mood and any changes in behavior that are not typical of nicotine withdrawal, or if they experience suicidal thoughts or behavior.

Read the complete MedWatch 2009 Safety summary, including links to the FDA Public Health Advisory, Information for Healthcare Professionals and previous MedWatch alerts, at: www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedical-Products/ucm170090.htm

Source: FDA MedWatch

No Shriners Hospitals closing; some may be outpatient only

“All 22 Shriners Hospitals for Children will stay open, but some eventually might become outpatient-only surgery facilities, the system that offers free specialty pediatric care said Thursday,” CNN reports. “The system, which has covered all costs of its patients’ care throughout its 87-year history, eventually will accept insurance from patients who have it, members of the Shriners fraternity decided in their annual convention in San Antonio, Texas. Accepting money from insurers and finding other ways to cut costs will help Shriners retain their presence in all 22 locations, said Doug Maxwell, the new president and CEO of Shriners Hospitals.”

Months ago, the Shriners board had “proposed to close six hospitals largely because an \$8.5 billion endowment fund lost more than \$3 billion as the stock market plummeted last year.” The system’s \$856 million budget for 2009 also outpaced “the fund’s interest and donations,” which caused the hospitals to “take about \$1 million per day from the fund.”



Shriners Hospitals
for Children™

“The hospital system has treated hundreds of thousands of children free of charge—regardless of patients’ ability to pay—since the first facility opened in 1922. Most offer orthopedic care. Four, including the Galveston hospital, care for children who are burned, and some offer cleft lip and palate repair and spinal cord injury rehabilitation. The system will continue to give care in these areas at no cost to the patients’ families, [Maxwell] said. One way to cut costs may be to transform some hospitals to outpatient-only surgery centers, Maxwell said. Many Shriners Hospitals have empty beds, in part because they were built during a time when many of their surgery patients needed to stay overnight” (Hanna, 7/10).

Source: Kaiser Daily Health Report

New restrictions on acetaminophen

Studies conducted between 1990 and 1998 found that overdose of acetaminophen—one of the country’s top drugs for pain relief—caused 56,000 emergency room visits, 26,000 hospitalizations, and 458 deaths per year.

While billions of doses are administered safely every year (the drug is found in Tylenol, Excedrin and many cold medicines), these statistics plus other concerns have prompted an advisory committee of the Food and Drug Administration (FDA) to recommend new restrictions.

Because acetaminophen is in so many over-the-counter medications, there is increased risk of overdose when using two or more products that contain it. Additionally, people who have undiagnosed liver disease and take acetaminophen risk liver injury. The largest concerns, however, are over widely-used

medications like Vicodin and Percocet that combine acetaminophen with narcotics.

The panel recommended lowering a single adult dose to 650 milligrams from the current 1,000 milligrams (often contained in two tablets over common over-the-counter products), and to lower the maximum daily dose, which is currently at 4,000 milligrams.

It also recommended a prohibition on prescription drugs that combine acetaminophen and another drug, and strong warnings on boxes of “combined” medications sold over-the-counter. This would make it easier for people to see how much acetaminophen they are taking and be able to better regulate their intake. You can find a summary of the panel’s recommendations on MedicineNet.com and more on acetaminophen and liver injury on the FDA website.

Source: FDA

AARP report on Part B premiums in 2010

For the first time in 35 years, older Americans will receive no cost-of-living increases (COLA) in their Social Security checks in 2010 according to Congressional Budget Office estimates.

Under an obscure “hold-harmless” provision of federal law, basic Part B premiums in any year cannot rise higher than that year’s COLA. So a zero COLA means that the basic premium (currently \$96.40 a month) must stay the same. “The intent of the policy is to protect the amount of the Social Security payment from being reduced by an increase in premium costs,” says Peter Ashkenaz, spokesman for the Centers for Medicare & Medicaid Services (CMS).

The hold-harmless policy gives this protection to the majority of people enrolled in Medicare Part B who also receive Social Security, Railroad Retirement or Civil Service retiree benefits.

But it does not apply to one in four (or about 11 million) beneficiaries who:

- Do not have their Part B premiums withheld from their Social Security checks or
- Pay a higher Part B premium based on higher income, or

- Are newly enrolled in Part B.

About 7.5 million Medicare beneficiaries who don’t have their Part B premiums deducted from their Social Security checks are those whose premiums are paid for by their state Medicaid program. These low-income people are not affected—they still won’t pay the premiums themselves. But the states would have to pick up the tab for the higher premiums.

Everybody else who pays Part B premiums directly to Medicare by check will be affected by the higher amounts. These include people who, though enrolled in Medicare, have deferred collecting their Social Security benefits.

Also affected are many people newly enrolled in Part B who therefore did not have premiums deducted from their retirement checks the previous year. The hold-harmless calculation is made in November each year, CMS says. So anyone joining Part B in 2010 would have to pay the higher Part B premiums until November 2010 when they would become eligible for hold-harmless protection.

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The hold-harmless provision applies only to Part B premiums and not to premiums for Part D drug coverage, which are also often withheld from enrollees' Social Security checks.

*Source: AARP Bulletin Today by Patricia Barry
May 7, 2009*

Help for unemployed workers appealing COBRA denials

The Centers for Medicare & Medicaid Services (CMS) today announced a new website (www.Continuation-Coverage.net) and helpline (1-866-400-6689) where certain unemployed workers may request expedited review of a denial by their former employers of eligibility for COBRA premium assistance under the American Recovery and Reinvestment Act of 2009 (ARRA).

CMS has contracted with MAXIMUS Federal Services, Inc., a subsidiary of MAXIMUS, Inc., to review requests for expedited review of denials and make recommendations—subject to CMS's review—on whether individuals are eligible for health insurance premium assistance under the Recovery Act's expansion of COBRA continuation coverage. Maximus will also answer questions about the premium assistance program and the expedited review process. Contact information for the website and helpline is provided below.

To help displaced workers maintain health care coverage for themselves and their families, the Recovery Act provides a 65 percent subsidy for health insurance premiums for workers who have elected COBRA after they have been involuntarily terminated from their jobs. "COBRA coverage" generally refers to the continuation of coverage provisions of the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA), which apply to employers with twenty or more employees. The ARRA-established subsidy is also available to eligible federal, state and local government employees, and, if state law requires certain continuation coverage, to workers for private sector employers with fewer than 20 employees. The Recovery Act's premium assistance applies to periods of continuation coverage beginning on or after Feb. 17, 2009 (when ARRA became law), and lasts for up to nine months.

To qualify for premium assistance, a worker must be involuntarily terminated between Sept. 1, 2008, and Dec. 31, 2009, and elect continuation coverage. The subsidy ends when the worker is offered any new employer-sponsored health care coverage or becomes eligible for Medicare. Workers who were involuntarily terminated between Sept. 1, 2008, and Feb. 16, 2009, but who failed to elect COBRA coverage at that time, most likely because it was



unaffordable, or who elected COBRA after Sept. 1, 2008, but let it drop because it was unaffordable, would be given an additional 60 days after employer notifications are released to elect COBRA and receive the subsidy.

Depending on actions taken by their states, individuals with state continuation coverage may also be eligible for this additional election period. To ensure that the premium assistance is targeted at workers who are most in need, the subsidy generally will be available only to people whose income does not exceed \$125,000 for individuals (\$250,000 for families).

Source: HHS

Orexo's Edluar receives FDA approval for the treatment of insomnia

Orexo announces that the US Food and Drug Administration (FDA) has approved Edluar (formerly Sublinox) 5 mg and 10 mg sublingual tablets for the short-term treatment of insomnia characterized by difficulties with sleep initiation. Orexo's partner Meda acquired the exclusive worldwide commercialization license for Edluar last year and they expect to launch the product in the US market during the 2nd half of 2009. Orexo will receive royalties on Meda's sales of Edluar.

This approval triggers a milestone payment to Orexo from Meda. The amount of the milestone is USD 5 million and is based upon the product labelling.

Commenting on the news Torbjörn Bjerke, CEO of Orexo, said "I am delighted that the FDA has approved Edluar for the treatment of short-term insomnia. This is a great achievement by Orexo. Edluar provides a convenient sublingual administration and we believe that this offers insomnia sufferers an effective alternative. This is the second product approved in a major market within 12 months and is an excellent achievement. The milestone payment and the anticipated product launch during the second half of 2009 will continue Orexo's progress towards profitability."

About Edluar

Edluar (formerly known as Sublinox) is a fast-acting, sublingual formulation of the well-known substance zolpidem and has been approved for the temporary treatment of insomnia. It is based on Orexo's sublingual technology, involving a tablet placed under the tongue for fast and effective absorption of the active substance across the oral mucosa.

About insomnia

Insomnia is the disturbance of a normal sleep pattern, characterized by the inability to fall asleep, or to stay asleep long enough to get a proper night's sleep. It is thought to affect 1 in 4 adults at some point during their lives. According to the U.S. Department of Health and Human Services, approximately 64 million Americans suffer from insomnia on a regular basis each year. Insomnia

occurs 1.4 times more commonly in women than in men.

Insomnia can last for days, months or years and can be split into three categories:

- Transient insomnia, which lasts for 2-3 days
- Short-term insomnia, which lasts for more than a few days, but less than three weeks
- Chronic insomnia, which can be defined as insomnia most nights for three weeks or longer

About Orexo

Orexo is a pharmaceutical company focused on developing drugs for the treatment of pain and inflammation. The company has three products on the market as well as a competitive product portfolio in late stages of development. Sales and product development are mainly carried out through worldwide partnership agreements with larger pharmaceutical companies. Orexo has 128 employees, and has its head office located in Uppsala, Sweden.

Source: Orexo

The North Dakota Insurance Department invites you to attend a free seminar on Medicare Part D, Medicare supplements and Medicare Advantage plans.

6:30–9 p.m. MT Tuesday, Aug. 4
 Hillside Baptist Church
 1123 E. 10th St., **Dickinson**

6:30–9 p.m. Tuesday, Aug. 11
 Minot Commission on Aging
 21 1st Ave. SE, **Minot**



Registration is required.
 1.888.575.6611
 janfrank@nd.gov

Albert Schweitzer and Prescription Connection

There are times in our everyday work life that we wonder about our role in the universe. Those of us who serve people by helping others with prescriptions and their costs may find inspiration in the following quotations from Albert Schweitzer, recipient of the 1952 Nobel Peace Prize in 1953 for his philosophy of “Reverence for Life.”

“Until he extends his **circle of compassion** to include all living things, man will not himself find peace.”

“I don’t know what your **destiny** will be, but one thing I do know: the only ones among you who will be really happy are those who have sought and found how to serve.”

“Ethics cannot be based upon our obligations toward [people], but they are complete and natural only when we feel this Reverence for Life and the desire to have compassion for and to help all creatures insofar as it is in our power. I think that this ethic will become more and more recognized because of its great naturalness and because it is the foundation of a true humanism toward which we must strive if our culture is to become **truly ethical**.”

“Ethics, too, are nothing but reverence for life. This is what gives me the fundamental principle of **morality**, namely, that good consists in maintaining, promoting, and enhancing life, and that destroying, injuring and limiting life are evil.

“Do something **wonderful**, people may imitate it.”

“Therefore search and see if there is not some place where you may **invest your humanity**.”

“**Constant kindness** can accomplish much. As the sun makes ice melt, kindness causes misunderstanding, mistrust and hostility to evaporate.”

“A man is truly ethical only when he **obeys the compulsion** to help all life which he is able to assist, and shrinks from injuring anything that lives.”

“Example is not the main thing in influencing others. **It is the only thing**.”