



# The Golden Years

PUBLICATION OF EAST CENTRAL KANSAS AREA AGENCY ON AGING

SERVING ANDERSON, COFFEY, FRANKLIN, LINN, MIAMI, & OSAGE COUNTIES

## Elizabeth's Retirement

by Elizabeth Maxwell



Soon after I started in 1993 the state instituted the Senior Care Act which allowed us to more than double the amount of people who could receive in home services. It opened the door for more communication with our county governments as it required a local match. Every county in our service area agreed to participate. A few years later the state ask each area agency on aging to learn more about Medicaid and provide

targeted case management to that population. As staff grew, we purchased a building which doubled our space. It was a gutted building so we had the opportunity to design it to meet our needs and leave room for growth. In 2012 the state went to a managed care system for Medicaid and repositioned the targeted case management away from the area agencies on aging but ask us to be an aging and disability resource center. This changed the client base and changed our staffing. It added more assessments and expanded information and assistance and options counseling. We were now not only providing assistance to the elderly but also to the physically disabled and those with a traumatic brain injury.

We recognized we needed to upgrade our telephone system to a state of the art voice- over-IP system which leveraged our growing internet infrastructure. The rapidly expanding dependence on computer technology demanded a more streamlined, efficient, and supportable structure. A cloud based system was chosen.

In the midst of adding and changing our service population our agency became the first area agency on aging to become a CDDO providing assessments and overseeing quality of service for the intellectual and developmental disability population. In 2018 we became a direct provider of the meals program for the elderly and purchased the building and all equipment in order to do so. We hired 24 site managers, 7 van drivers and 5 cooks to run the program to service our six counties. This tripled the size of our staff. With the commitment of a quality meals

program came the necessity to ask each county government to provide their "fair share" of match funding. Each county agreed and that stabilized the program.

This past year the area agencies on aging were asked to provide administrative case management to selected populations needing help completing the Medicaid financial application. We have had challenges working thru the pandemic, but our office has continued to stay open and continue to meet the needs of people in our service area. We were given disaster funding for meals and have provided shelf stable meals to anyone over age sixty who have made the request. We were able to apply for and receive funds to increase the speed and capacity of our internet. Although we cannot go into client's homes for assessments, when possible we use Zoom to provide us with video capabilities and stability of the internet is a necessity. We were also awarded disaster funds to replace two of our nutrition vans.

During my 27 years I have also had the opportunity to work with the other area agency on aging directors across the state. I served several terms as the president of our state association, K4AD. I served on numerous committees at the state level, the most memorable being the development of the statewide computer system, KAMIS, the beginning of the shift of Medicaid programs to the department on aging, and the design of the aging and disability resource center. I had the opportunity to testify in front of our state legislature, advocate for adequate funding for elderly services, and help be a voice of reason in a fluid political environment.

Through every program change, every funding change, every policy change, every staffing change at both the state level

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## From the Editor...

I would usually write about the new year and making goals or resolutions but with Elizabeth's retirement, I thought I would include some of her present and former Board members wonderful comments.



Jodi Smith, *Editor*

Roy Dunn of Franklin County wrote, "As a senior and County Commissioner on the Policy Board, there aren't enough accolades to describe Elizabeth Maxwell's leadership of ECKAAA over the years. I appreciate the effort to guide the organization has been admired through the taking over the Meals on Wheels program, getting more proportional funding from each county, managing the agency's Covid-19 response this year, and getting approval and funding for the delivery van garage project. Elizabeth has set a high standard for the agency's future so we will miss her. I wish her the best in retirement and a big thank you for all the Agency has done for the people and communities they serve."

Tristan Wurtz-Smith, Linn County added "Elizabeth Maxwell has been nothing but a godsend to this agency and will be missed so very much as she has led this organization to the highest level. Elizabeth has always been open to ideas, suggestions and has a way of keeping the board on track. I could tell that her passion for the elderly and disabled completely aligned with mine. To this day, she remains a highly respected role model and inspiration to me. The Meals on Wheels program is probably one of the most important programs that Elizabeth wanted to keep, to make sure no senior went hungry. In the last couple of years, Elizabeth has taken on many challenges to ensure that we have and continue to have the Meals on Wheels Program. I wish you the best in your retirement Elizabeth. I know you have been taking Leslea under your wing and I know she will do a great job. Thank you for allowing me to grow with you and teaching me throughout the whole process. You will be truly missed."

Dona Jackson, Miami County, also learned a lot from Elizabeth and had this to say, "Working with Elizabeth has been a real learning experience. When I came on board back in the late 1990's or early 2000's, I had very little knowledge

of what ECKAAA actually did, but through her leadership I feel very knowledgeable now. She is a very strong leader but is always willing to listen and accept other opinions. She has always made me feel good about my place on the Advisory Board. Through her leadership we have come a long way and most of the time it has been upward. She has had to make some hard decisions, with the input from both the Policy and Advisory board but always kept aware of the outcome. I have really enjoyed working under Elizabeth and feel her shoes are going to be hard to fill."

Frank Mersman, Osage City, had this to say, "I was on the Osage County Commissioners when I first met Elizabeth back in the mid 90's. At first, I wasn't too sure about her, so I decided to get on the Board at ECKAAA and find out firsthand if she knew what she was doing. I stayed on that board and then got on the Advisory Board. I decided she knew what she was doing, was concerned about doing things the right way and really was doing a good job"

Tim Sipe, Coffey County, Vice- Chairperson of the Policy Board summed it all up by saying, "I would like to personally thank Elizabeth for the many years of service she has given the Agency on Aging along with time she spent with Mid America Nutrition. I first meet Elizabeth after I was elected County Commissioner in 1994 and was assigned to be the Representative on the Advisory Board for Coffey County. I remember and appreciated how she presented the agency's request for funding along with answering questions and concern, and how the agency's budget was for real needs and programs that helped the citizens from Coffey County and the other Counties of ECKAAA. Some 25 years later she still has the drive of filling such needs. The Nutrition Program was on the verge of closing its doors and today is serving meals to the elderly in our area even through a pandemic. Thank you for the time you gave to the citizens and the agency, you will be missed but not forgotten."

I would also like to say Thank You, Elizabeth, for all you have done for the seniors in our counties and for leaving the agency in the capable hands of Leslea Rockers. She does have big shoes to fill but she has been taught well and will have you as a resource to ask and continue to learn from.

### CHAIR YOGA WITH JODI VIA ZOOM

For details including Meeting ID and Passcode

Please email me at [jodis@eckaaa.org](mailto:jodis@eckaaa.org)

Or call me at 785-242-7200

Classes will be

Monday at 5:30PM

and Wednesday at 4:00PM

Funded in part by the BCBS Social Integration Grant

### Elizabeth's Retirement *(continued)*

and within our agency, my goal has remained the same: to promote a client-centered culture. Our area agency on aging is one of the smallest in the state, but with a creative spirit and a knowledge of limitations and opportunities, our area agency on aging has provided services to thousands of people of varying ages and needs. But the greatest take away for me as Executive Director are the staff, advisory council, policy board, county councils, county commissions, and clients that I have met and the lessons I have learned from them.



# From The Director

By Elizabeth Maxwell  
Executive Director

I think all of us are ready for a new beginning and getting the CORONA-19 virus under containment. We want to get back to going where we want to go, when we want to go, and with whom we want to go without a mask or social distancing. We miss the hugs and the smiles.

I'm also making a change this year. I'm retiring effective January 29, 2021. I started my career working with the aging population in August of 1979. I spent the first 14 years managing the nutrition program and then took over as Executive director of the area agency on aging March 13,

1993....almost 41 years... While I have had the opportunity to see many new services launched, the people I've met are the most important.

I have met hundreds of people in the six counties our agency serves, as well as others across the state of Kansas and across the United States. While I may not remember all of their names, I can see their faces and remember how they made me smile, or sometimes groan with frustration, but always helping me as an individual and the agency as a provider of services.

Thank you for being a part of my career and my life.

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## REOPENING SELF-ASSESSMENT

### BEFORE YOU ENTER ...

**PLEASE CONSIDER RESCHEDULING  
YOUR VISIT IF YOU ARE  
EXPERIENCING ANY OF THESE**

**SYMPTOMS**



**PLEASE HELP US MAINTAIN  
A HEALTHY ATMOSPHERE  
AND HELP PROTECT OUR  
STAFF, VOLUNTEERS, AND  
CUSTOMERS**



East Central Kansas Area Agency on Aging  
Nutrition Program  
117 S Main St, Ottawa, Ks. 66067  
785-242-7200 [www.eckaaa.org](http://www.eckaaa.org)

### SYMPTOMS:

**FEVER (100.4 +)**

**CONGESTION**

**BODY ACHES**

**COUGH**

**SORE THROAT**

**HEADACHE**

**LOSS OF TASTE OR  
SMELL**

Please check with  
Your local  
Sr. Lunch Site  
For specifics on  
Dine in  
Grab & Go and  
Upcoming news





## Yoga and IDD

from Amber Vogeler, CDDO Coordinator

Collectively, individuals diagnosed with a health condition classified as an intellectual or developmental disability are referred to as individuals with intellectual and developmental disabilities (IDDs). IDD encompasses multiple diagnoses including, but not limited to, autism spectrum disorder, Down syndrome, and fragile X syndrome. Individuals with IDDs have impaired intellectual developmental functioning such as reduced cognitive, social, and practical skills, impaired physical functioning, learning, language, and behavior. IDDs are congenital or occur during an individual's developmental stages and are generally diagnosed before the age of 18 years.

Adults with IDDs exhibit signs and symptoms of premature aging at an accelerated rate compared to the general population. In particular, adults with IDDs are prone to physical decline in sensorimotor skills, coordination, muscular strength, flexibility, and balance in part due to physical inactivity. Due to these physical limitations, adults with IDDs may be limited in activities required for vocation, recreation, and independent living, otherwise known as functional fitness. Functional fitness is the capacity to safely and independently execute daily physical activities, such as walking longer distances without falling or lifting household items without undue lethargy. Although functional fitness training and testing were developed to focus on strength, flexibility, endurance, and balance in older adults, these same issues are important for adults with IDD.

Results from this 7-week yoga intervention showed significant improvements in functional fitness related to lower-body strength, upper-body strength, and agility and dynamic balance. Similar findings show that upper- and lower-body strength improved in a healthy adult sample after 8 weeks of Hatha yoga practice due to improved isokinetic strength, likely as a result of holding postures for an extended period of time in combination with controlled transitions from one pose to the next. [ Similar to the findings investigating yoga with adults with disabilities, agility and dynamic balance

was significantly improved in the current sample, which is particularly important in this population due to increased risk of falls at younger ages. Given the significant improvements in the current sample, it is plausible that yoga may improve strength and agility and dynamic balance for adults with IDD, although additional research is necessary.

Although flexibility and endurance did not significantly improve post yoga intervention in the current sample, lower-body flexibility still improved by 47%. The lack of significant results is contrary to the findings in other studies in various diagnostic populations and surprising given the percent change in lower-body flexibility. Meanwhile, the evidence for yoga and endurance is conflicted with some sources, suggesting that endurance is not better than brisk walking. Some of the participants in the current study were also involved in other forms of exercises which may have improved their endurance, potentially skewing results. The lack of significant improvement in flexibility could be explained by participants having previous experience with yoga or participation in other physical activities. Although participants were asked if they participated in other physical activities, the frequency and types of activity were not obtained potentially confounding results. Further investigation is needed to clarify the effects of yoga on flexibility while controlling for other physical activity types in adults with IDDs.

This study contributes novel information as it was the first known study to examine the benefits of yoga on the functional fitness of adults with IDDs. It is recommended that validity, reliability, and norms be established for the FFT with this population, which would make the FFT more useful in the future yoga intervention studies. These preliminary results indicate that yoga may be a valuable intervention to improve physical strength, flexibility, endurance, and agility and balance for people with IDD, a population often overlooked in yoga research.

Retrieved from: <https://www.ijoy.org.in/article.asp?issn=0973-6131&year=2020&volume=13&issue=2&spage=156&epage=159&aulast=Reina>



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# Money Matter\$

**Ryan Henningsen**

**Financial Advisor**

**Edward Jones**

[www.edwardjones.com](http://www.edwardjones.com)

The CARES (Coronavirus Aid Relief, and Economic Security) Act was signed into law to help provide financial stability and relief for individuals and businesses affected by COVID-19. While the bill is very broad and addresses a number of areas and industries, we believe the following are important to highlight for individuals and their families.

## Retirement Account Changes

As we navigate through this challenging environment, we want to make sure you know about several provisions within the CARES Act that you may want to consider for your IRAs and employer retirement plans, including:

- No penalty on early withdrawals
- Increase of retirement plan loan limit
- Required minimum distributions (RMDs) are waived for 2020

To qualify for early withdrawals and increased loan amounts, you will need to meet one of the COVID-19 relief requirements to be eligible:

- You, your spouse, or a dependent is diagnosed with COVID-19; or
- You experience adverse financial consequences as a result of you or your spouse or a member of your household (defined as someone who shares the principal residence) being quarantined, furloughed or laid off, having reduced work hours or pay, a job rescinded or start date delayed, child care responsibilities or business closures due to COVID-19.

## Enhanced Tax Benefits for Charitable Gifts

- **\$300 Deduction of Cash Contributions:** Ability for an above-the-line deduction of up to \$300 of cash contributions to charities, regardless of whether the individual itemizes deductions.
- **Changes to Limits on Charitable Contributions:**
  - o **Individuals:** For those who itemize their deductions for charitable giving, the 60% of adjusted gross income limit for cash gifts is suspended for 2020.

- o **Corporations:** The 10% limit on charitable contributions is increased to 25% of taxable income.

## Homeowners, Renters and Student Loan Holders

Whether you are a homeowner or a renter, the CARES Act may provide some relief for your situation. Student loan payments have also been suspended through Sept. 30, 2020. We created some helpful information about these provisions, as well as recommendations for you to consider.

### **Student Loans/Education**

- **Loan Payment Suspension:** Suspends payments automatically for federally held student loans through Sept. 30, 2020, with no interest accruing or penalties during the period of suspension.
- **Additional Provisions:** Contains a variety of other emergency-relief provisions related to education, and specifically the impact of many students being sent home mid-semester. For example, it allows universities to make payments to students who were unable to complete work-study programs.

## **Partner with Your Tax Professional**

As with any decision involving taxes, consult with your tax professional on considerations and impacts to your specific situation. Your financial advisor can partner with them to provide additional financial information that can help in the decision-making process.

Work with your Edward Jones [financial advisor](#) to consider key aspects of the CARES Act as part of your financial strategy.

### *Important Information:*

*Edward Jones, its employees and financial advisors cannot provide tax or legal advice. You should consult your attorney or qualified tax advisor regarding your situation.*

## Caregiver's Corner



**Shannon Ocsody**  
Caregiver Coordinator



### *Hello Caregivers!*

Please join me via ZOOM on  
Wednesdays 10:30-11:30 AM or  
1:30-2:30PM.

All you need to do is call  
785-242-7200 ask for Shannon.

I will send you the Link.

## Save the Date

## For These Upcoming Events

**Tentative date for Active Aging in Garnett, Ks.**  
May 6, 2021 ( Details will follow )

**alphapointe Low Vision Support Group**  
January 27, May 26, September 22  
At 1PM ECKAAA conference room

**Keys to Embracing Aging**  
Twelve Virtual Sessions will start February 3, 2021

**20th Annual Benefit Trail Ride**  
For ECKAAA Meals on Wheels  
October 2, 2021

## Tips for Caregiving During the Coronavirus Pandemic

*From the American Heart Association at heart.org*

Careful planning, focusing on mental health and enforcing infection prevention practices are critical for caregivers in the era of COVID-19.

Deborah Dunn, national president of the Gerontological Advanced Practice Nurses Association, offers this advice:

- Try to get 90-day supplies of prescriptions; use a pharmacy with a drive-through or delivery service.
- Review home care supplies such as distilled water for CPAP machines, incontinence garments, and supplies for chronic conditions such as diabetes or lung disease.
- Find out if doctors are doing telemedicine visits. And, if so, how.
- Learn what may still require in-person medical visits and how those are conducted, such as having a test done or blood drawn.
- Talk to health care providers about plans or strategies to monitor chronic conditions.
- Coordinate ongoing home health care visits and learn the infection prevention steps. Ask about virtual visits.
- Reinforce infection protection practices like social distancing and proper hand-washing.
- Discuss health care system preference if hospitalization becomes necessary.
- Keep key documents, such as medical histories, medical information release forms and advance directives, easily accessible for an emergency. Better yet, have everything on a USB flash drive that can be easily transported and updated.
- Help devise a plan for you both to stay healthy that includes exercise, nutrition, hydration and adequate sleep.

- Limit news intake about the coronavirus to an hour or two a day. Continuous news updates appear to cause more anxiety.
- Focus on joy and gratitude; provide hope and assurances that “this too shall pass” and “we are in this together.”
- Encourage hobbies such as sewing, gardening or puzzles, and find ways to ease stress such as meditation or prayer. Provide access to mental health support if needed.
- Celebrate birthdays, anniversaries, past achievements and other happy occasions or memories.

### **When your loved one lives separately:**

- Maintain physical distancing; avoid or minimize physical contact.
- If you need to have physical contact, wash hands and wear a mask and gloves.
- Deliver groceries, prescriptions and other supplies; provide surprise, cheerful “care packages.”
- Make sure your phone number and those of other emergency helpers are handy.
- Set a time when to regularly connect by phone or video call; encourage your loved one to reach out and provide support to others.
- Reinforce the importance of staying home, avoiding unnecessary close contact with others and washing hands after touching outside items such as deliveries and mail.

**Franklin County Caregiver Support Group – at ECKAAA conference room 2nd Tuesday of every month at 1PM**

**Please check with us about the times and dates of caregiver support groups that are meeting!**



# Keys to Embracing Aging in 2021

Submitted by Rebecca McFarland, District Extension Agent, Family and Child Development, Frontier Extension District

The way you take care of yourself through the years, both physically and mentally, will impact the natural process of aging. No one knows this better than centenarians, people who are 100 years old and older. Centenarian studies demonstrate that life does not diminish with aging. In fact, centenarians are teaching us that the acceptance of aging can be positive, joyful and exciting. They demonstrate that aging brings new experiences, knowledge, wisdom and a greater ability to create a positive approach to the aging process. Many centenarians contribute their longevity to a positive attitude, nutrition, physical activity, mental and social stimulation, staying in-tune with the times, safety, medical literacy, financial security, sleep, and taking time for oneself. When given the necessary attention, such lifestyle choices can positively affect future health, well-being and optimal aging.

Based on knowledge gained through centenarian and longevity studies and New York's bestselling author and explorer Dan Buettner (Blue Zones™), Keys to Embracing Aging introduces and reinforces 12 healthy lifestyle behaviors. **The Frontier Extension District, Marais des Cygnes Extension District and Coffey County Extension, in coordination with the East Central Kansas Area Agency on Aging, are providing**

**a 12-session virtual series on the Keys to Embracing Aging. The program is made possible through a grant from the Kansas Department for Aging and Disability Services. The series will be held via Zoom, every other Tuesday, from 1:30-2:30 pm, February 3 through July 7, 2021.** The program is free for anyone 60 years or older, but is limited to 30 participants. To register, you can visit <http://bit.do/embracingaging> or call your local office. Participants will receive participant material (mailed from the local Extension office), learning tools and the Blue Zones™, Second Edition: 9 Lesson for Living Longer from the People Who've Lived the Longest.

For more information or to register, call your local Extension office.

**Coffey County:** Jill Barnhardt, 620-364-5313, [jbarnhardt@ksu.edu](mailto:jbarnhardt@ksu.edu)

**Frontier District (Anderson, Franklin and Osage counties):** Chelsea Richmond, 785-448-6826, [crichmon@ksu.edu](mailto:crichmon@ksu.edu) or Rebecca McFarland, 785-229-3520, [rmcfarla@ksu.edu](mailto:rmcfarla@ksu.edu)

**Marais des Cygnes District (Linn and Miami counties):** Franny Eastwood, 913-795-2829, [fmeastwo@ksu.edu](mailto:fmeastwo@ksu.edu) or Kathy Goul, 913-294-4306, [kgoul@ksu.edu](mailto:kgoul@ksu.edu)



## KEYS TO EMBRACING AGING

PLEASE RETURN TO:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Age: (60+): \_\_\_\_\_

County: \_\_\_\_\_

*Keys to Embracing Aging will be comprised of twelve individual online sessions using Zoom. The sessions will be every other Wednesday, February 3-July 7, from 1:30 - 2:30pm.*

*After registration is completed, participants will receive more information regarding the sessions. This is a FREE event that is presented by the collaboration of Frontier Extension District, Marais des Cygnes Extension District and Coffey County Extension. Limited to 30 participants.*

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THIS PROGRAM IS PROVIDED IN COORDINATION WITH THE EAST CENTRAL KANSAS AREA AGENCY ON AGING AND MADE POSSIBLE THROUGH A GRANT WITH THE KANSAS DEPARTMENT FOR AGING AND DISABILITY SERVICES.

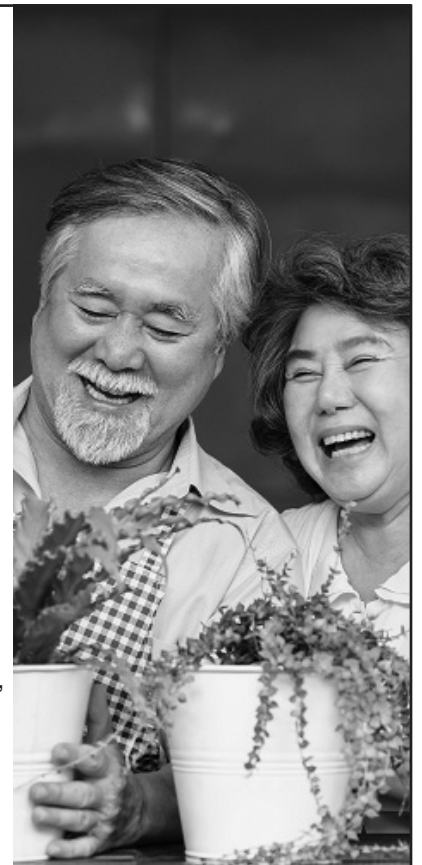
K-State Research and Extension is committed to providing equal opportunity for participation in all programs, services and activities. Accommodations for persons with disabilities may be requested by contacting the event contact two weeks prior to the start of the event February 3, 2021. Requests received after this date will be honored when it is feasible to do so. Kansas State University Agricultural Experiment Station and Cooperative Extension Service K-State Research and Extension is an equal opportunity provider and employer.

Frontier Extension District,  
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& Coffey County

Presents

## Keys to Embracing Aging

- Twelve virtual individual sessions will begin February 3, 2021.
- Learn about the way in which you take care of yourself through the years, both physically and mentally, that will affect the natural process of aging
- Must be 60+ Years Old
- FREE EVENT!



This program is provided in coordination with the East Central Kansas Area Agency on Aging and made possible through a grant with the Kansas Department for Aging and Disability Services.

# NEWS *from* Kansas Legal Services



## Competency and Executing Estate Planning Documents

by *Thomas L. Lasley*  
Attorney for *Kansas Legal Services, Inc.*

Frequently, in my day to day practice of law, I find myself in the position of having to determine if my clients possess the sufficient mental capacity to sign the documents I have drafted for them. “Competency” in this sense refers to one’s mental ability to understand the consequences of signing legal documents. More than once, in talking and meeting with my clients, it has become obvious that their mental capacity is lacking. Thus, I cannot proceed with the execution of their documents. These meetings and conversations can be difficult. Hopefully, this article will present an understanding of what an attorney looks for in determining a client’s competency and why it is so important for a client to handle his or her affairs prior to losing their mental faculties.

Naturally, the first step in finding an attorney to draft a client’s document is for the client to make the initial contact with an attorney. With the elderly, it is not unusual for a relative to contact an attorney on the client’s behalf, asking for certain estate planning documents to be drafted. It is a red flag to an attorney if the relative dominates the conversation, tells the attorney exactly what the “client” wants, and then downplays the importance of a meeting with the attorney and client. At this point the attorney realizes that something is fishy and suspects that either the relative knows the client may not be competent, but wants to get the document drafted and executed anyway, or the relative is trying to have the client sign something that benefits that relative against the client’s wishes. Regardless of the motives, the attorney must be extremely cautious moving forward.

The attorney should always meet and talk with the client before the document is executed. If there is any question as to competency, the attorney should meet with the client alone. At that point, the attorney should go through a series of questions with the client to determine whether he or she understands the document and whether the client’s wishes are being met by signing the document. The client should be able to express this verbally to the attorney. In the past, I have had to ask relatives to leave the room. As soon as the relatives leave, it becomes clear whether the client is competent.

It is possible for people to phase in and out of competency. For example, at the first meeting with the attorney the client might be perfectly clear on his or her wishes. Two weeks later, the intent may seem fuzzy and the client might appear confused. There are many factors that could cause this newly found confusion, such as medications, skipped medications, the time of day, or even whether or not the client has recently eaten. If

the confusion is temporary and caused by one of these factors, the appointment with the attorney should be rescheduled to find another time when the client will be fresh and capable of signing the documents. In situations like this, a written doctor’s statement regarding the client’s competency may be needed before proceeding.

If, however, the diminished capacity is permanent, then the attorney must not allow the execution of the documents to proceed. So what is the lesson here? It is imperative that you have all important estate planning documents drafted sooner rather than later. You never know what might happen to cause you to have diminished capacity at some point in your life. You could be dealing with a slow progressing disease like Alzheimer’s. If that is the case, it is difficult to draw a line between competency and incompetency. You should always get your affairs in order soon after a diagnosis like this. You could also unexpectedly suffer from a life-changing event, like a stroke or a terrible car accident. One day you could be perfectly fine and the next you might be in a coma, never to wake again. If this is the case, you would already want your affairs in order so that loved ones are saved the trouble and expense of trying to figure your wishes.

What are the consequences of not having important documents signed and executed before you become incompetent? Well, it depends on the type of document. If you do not have a Power of Attorney document (which selects an agent to make healthcare and financial decisions for you when you are no longer able to do so) then a guardianship case may need to be filed in probate court. There, if a judge determines that you are not competent, the judge will appoint a guardian to make decisions for you. This can be an expensive, lengthy and stressful process. Your relatives will be required to hire an attorney. Also, a Guardian Ad Litem would be hired to protect your interests. And of course, there are also those filing fees with the court.

If you neglect to execute a Last Will and Testament, and you have not made other legal arrangements to distribute your property, then you will die “intestate.” This means that a probate case will be opened and your property will be distributed according to statute rather than your wishes.

If you neglect to execute a Living Will, then your end of life decisions may not be carried out as you wished. The purpose of a Living Will is to give your consent to doctors and hospitals to administer or withhold life-sustaining procedures if you have a terminal condition. Without executing this document before your incapacity, your life may be prolonged and your quality of life may suffer, depending on your personal beliefs.

As you can see, if you do not take the steps to have the appropriate documents drafted and executed while you are still competent, there may be severe, unintended consequences. Attorneys are bound by an ethical duty to ensure that only



**NEWS from Kansas Legal Services** *continued*

those who are competent are executing legal documents. So get your affairs in order now, rather than waiting until it is too late. For those of you who are 60 years of age or older, please feel free to set an appointment with Kansas Legal Services by calling the Area Agency on Aging in Ottawa at 785-242-7200 so we can help you with your estate planning needs.

*(The author, Thomas L. Lasley, is an attorney for Kansas Legal Services, licensed in both Kansas and Missouri, with over 40 years of experience in the areas of Elder Law and Estate Planning.)*



## RCIL Online Friends Group

The Resource Center for Independent Living, Inc. (RCIL) is offering an online Friends group meeting for individuals who have, or have experienced, a disability. RCIL Independent Living staff will share information about disability related topics such as health and wellness, safety, transportation, and direct support worker concerns. RCIL Friends groups usually meet in person and play games, learn about a topic, and share information with other consumers in attendance. Unfortunately, those meetings will remain on hold until the coronavirus subsides and it is safe for groups to get together again. The online Friends group is the same except you can do it wherever you are by your computer, tablet, smartphone, or your phone. The group meets the second Tuesday of each month from 2:00pm to 3:00pm online through Zoom.

The online Friends group will meet on January 12, 2021 at 2:00pm. All participants who attend will be entered into a drawing for a chance to win a FREE prize! If you are interested in participating in the RCIL Online Friends group, contact Beth Burnett at RCIL at 785-528-3105 for more details and to sign up.

Are you interested but don't have a computer, phone, and/or internet connection? You may be eligible to get a those things for free or at a reduced cost. Call RCIL and we can help you explore your options!

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**[www.medicare.gov/nhcompare/home.asp](http://www.medicare.gov/nhcompare/home.asp)**

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# NEWS

## from ECKAAA Nutrition Program



**Sarah Jane Russell**  
Nutrition Site Coordinator

*2021 is finally here and I would like to remind you that  
February is American Heart Month!  
Enjoy the information!*

American Heart Month is a great time to teach your family and friends that cardiovascular disease can often be prevented by making healthy choices and managing existing health conditions.

Did you know that about 80% of cardiovascular disease can be prevented by taking control and following everyday healthy living steps that include the following:

- \*not smoking
- \*physical activity
- \*good nutrition
- \*maintaining health weight
- \*controlling blood pressure, cholesterol and blood glucose levels

Love your heart and yourself! Take good care of yourselves every day!

### Top Ten Heart-Healthy Foods by Kathleen M. Zelman, MPH, RD, LD

The best diet for a healthy heart is one that is chock-full of vitamins, minerals, antioxidants, phytochemicals and fiber. Here are my nominations for the top 10 heart-healthy foods:

1. Berries, such as blueberries, raspberries, and strawberries (red grapes count, too)
2. Fish that is high in omega-3 fatty acids such as salmon, mackerel, and tuna (have it twice a week)
3. Soy foods, such as soybeans, tofu, and soybean oil
4. Whole grains, such as breads, cereals and oatmeal
5. Nuts, such as almonds, pecans, and walnuts
6. Olive Oil
7. Beans, such as pintos, garbanzos, lentils, kidney beans and chickpeas
8. Other fruits and vegetables such as broccoli, spinach and grapefruit
9. Margarines, such as those fortified with stanols or sterols
10. Teas, particularly green and black teas

### More great news from the ECKAAA Nutrition Program!

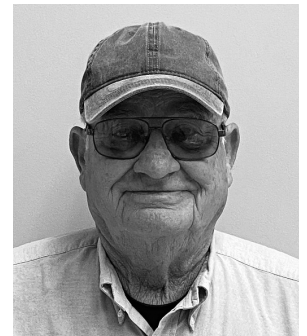
Over 500 boxes of shelf-stable food was delivered to our service area in December. The Kitchen was busy and we were so happy to send out the 20-meal boxes. Customers were excited to receive the food and sent back comments to the Kitchen. One customer called to say “Thank you very much for the boxes of food I received today. It has been a blessed day and I appreciate all that you do.”

We are glad to be providing meals to people and welcome your friends and family to join us in the Meals on Wheels program! If you are interested in receiving meals, please call **Sarah Jane Russell** at 785-242-7200.

### Nutrition Program New Staff



**Eli Gatewood**  
Van Driver



**Kent Lash**  
Van Driver



**Carol Ireland**  
Ottawa Senior Lunch Site Manager

## New ECKAA Staff



**Kristin Densmore M.Ed.**

I am so excited to be a part of the ECKAAA team as the new Quality Assurance Liaison! In my life, several people with disabilities closest to me have ignited my passion for this field resulting in this career path. I have worked in varying capacities in the disability world for the past 23 years from working as an Educational

Technician in the schools, going back to school to obtain my BS in Secondary Special Education, then working as a Disability Coordinator for the Job Corps for 11 years. During that time, I obtained my Master's in Education. In January of 2020, my husband and I moved from Maine to Kansas to be closer to our daughter and grandson, and to move to a climate that is not as harsh as the Maine winters can get. I spent about six months as a TCM and loved the introduction into this field, as well as meeting some wonderful workers and clients. I feel privileged to be able to move into this position as the QA and look forward to working with this community.



**Connie Herbert**

I am excited to join the ECKAAA team. I am the accounting assistant to Sherry Huschka. I am married and have four boys. I enjoy reading, eating yummy food, shopping, and spending time with friends.

### INFORMATION ON WINTER WEATHER AND THE KITCHEN CLOSING

We hope that we don't have to close the kitchen due to bad weather but we also want our van drivers and volunteers to be safe. If the kitchen closes, we will know early in the morning and it will be on KCTV5, WIBW, and KSNT and FOX News. It can also be found by listening to KOFO 1220 AM or 103.7 FM or go to [www.kofo.com](http://www.kofo.com) and there is a closings section. I hope to also have it on the ECK Area Agency on Aging Facebook page. out to our home delivered clients so they will not be without a meal.



Hello,

My name is **Deidra Casida**, and I am back! I am the Case Manager for Miami, Linn, and Franklin Counties. I have lived in Ottawa since 2011, I have always lived either in Ottawa or the surrounding areas. I have a long history and fond memories of ECKAAA. My Grandma Alice started working for

ECKAAA in 1999 when I was 16 years old, and during the spring semester of 2016 I started interning at ECKAAA. Upon graduation I was offered a Case Manager position and happily accepted. I graduated from Ottawa University in 2016 with a degree in Human Services, then in May of 2019 I graduated from Friends University with a Master's in Healthcare Leadership. I left the agency in November 2019 and just a short year later I decided to return and let me tell you, there is no place like home! I have always had a passion for working with the elderly. I worked in various nursing facilities as a Certified Nursing Assistant in Franklin and Miami Counties since 2005. My appreciation for the elderly started with my Grandma and Grandpa Wheeler. I would spend summers at their home, eventually moving in with them, I witnessed the ups and downs of them getting older. Between living with my grandparents and working as a CNA, I decided that working with the aging population is something that I wanted to do. I am so happy to be back at ECKAAA, the work we do here is so fulfilling and needed by so many people throughout the communities we serve.

A little about me.... I have an eleven-year-old son, Bryce, who is a sixth grader at Ottawa Middle School. Bryce manages to keep me on my toes, he plays tuba, guitar, and wants to start piano lessons in the spring. I have a love for music! I have a larger-than-life puppy, Tucker. Tucker weighs about 70 pounds and thinks he is a lap dog. I enjoy going to concerts and any event that revolves around music. I love watching the Kansas City Royals and KU Jayhawks. My son and I enjoy watching movies and playing Monopoly. I have an addiction to shoes, and thanks to a friend of mine, a new addiction to vinyl records.

I am so happy to be back at the place that has always been like a second home to me. I look forward to reuniting with old clients and helping new clients!



What new Fitness Research Means for you From AARP Magazine

## SIT LESS AND MOVE MORE

A major study from the National Institutes of Health, published last week in JAMA, showed that when it comes to walking, more is more for older adults — specifically, the more steps those over 40 took, the lower their mortality risk from all causes. But what surprised the researchers? How low-intensity strolls appeared to have the same benefits as higher-intensity power walks for the nearly 5,000 study participants.

### Short-Workout Guidelines

#### Five-minute workouts are officially approved

The “2008 Physical Activity Guidelines for Americans,” issued by the Department of Health and Human Services, suggested that to reap the benefits of exercise, you had to do it in 10-minute bouts. But in 2018 that thinking went out the window. Thanks to studies, including one published in the Journal of the American Heart Association, showing that walks of two minutes provided the same mortality-slashing benefits as those taken in 10 minutes, experts came to the consensus that any amount of movement can count toward recommended totals. As a result, the agency updated its second edition of the guidelines to reflect that. “The science no longer supports that you have to be active in 10-minute bouts. It very clearly supports that any movement is leading to benefits. And the more that you move, the more benefits that you get,” says Richards.

### Light and Easy Does It

The study is one of a growing number showing the major benefits of simply moving more throughout the day, even absent anything that resembles a moderate-intensity workout.

“Some of the studies are showing that light-intensity activity is for sure more beneficial than being inactive and that it has a dose-response relationship with mortality in older folks,” explains Libby Richards, an associate professor at the Purdue University School of Nursing, whose primary research focus is physical activity in older adulthood.

When it comes to walking, part of the magic may be in how such light-intensity activity ups gait speed, which, in turn, Richards says, has a direct relationship with cardiovascular outcomes and premature mortality and disability and frailty.

If fear of injury or reinjury is holding you back, the new federal exercise guidelines are very clear that participating in physical activity reduces your risk of falls, she says. “Exercise improves balance. It also reduces the risk of injury if you do sustain a fall, because being active increases your muscular health and your bone health. So it’s a win.”

### Sorry, Weekend Warriors

Adding years to your life for every easy stroll around the block has its pluses, but weekend warriors — proud of their ability to cram the government-recommended 150 minutes a week of exercise into 48 hours — may have to adjust their thinking.

“So if there’s just one thing that people could do, it would be to sit less and move more.”

Libby Richards, Purdue University School of Nursing

Research reveals that skipping those five days between sessions can blunt the positive effects of those weekend workouts. “Research is showing that even if you meet physical activity guidelines by, say, going for a long walk on Saturday and Sunday, if you’re inactive for the rest of the week, then it actually is undoing the benefits that you’re getting from being active on the weekends,” Richards says.

### Sitting: Still the New Smoking

“Sedentary behavior is bad news all around,” Richards cautions. “It’s now linked with poor sleep, symptoms of depression, and reduced executive function and cognitive ability in older adults. So if there’s just one thing that people could do, it would be to sit less and move more.”

You’ve heard this news before about sitting, which brought on a frenzy in the marketplace, with the proliferation of products like standing desks and standing-height tables. But research continues to strengthen the finding that being sedentary is akin to smoking. Barbara Resnick, a professor of organizational systems and adult health at the University of Maryland School of Nursing and past president of the American Geriatrics Society, implores people to think about how they can incorporate activity into their daily routine, to avoid problems like increased risk of heart disease, high blood pressure and a shorter life span.

Her advice? Identify long periods of sitting in your daily routine, and conceive of ways to break them up. For instance, try sit-to-stands or a few balance exercises during commercial breaks on TV. Or, as she advises her patients living in facilities, build in short walks — say, to pick up mail or get fresh air — beyond your travels to a dining area or to regular activities. “It seems like very little activity, but we know that there are benefits, especially for somebody who’s frail,” Resnick notes. “We know that if you sit there, you’re going to be able to do less and less and less. And that’s what people don’t realize — they think it’s just gonna stay, but it doesn’t.”



# Medicare Advantage: Special Enrollment Periods

from Leslea Rockers

While people with Medicare Advantage (MA) generally must remain in the plan they enrolled in for the remainder of the year, the MA Open Enrollment Period and/or a qualifying Special Enrollment

Period (SEP) provide potential opportunities to change plans.

**Medicare Advantage Open Enrollment Period (MA OEP)** The annual MA OEP replaced the previous Medicare Advantage Disenrollment Period and runs January 1 - March 31 each year. The MA OEP allows individuals enrolled in a Medicare Advantage plan as of January 1 to make a one-time election to another MA plan or return to Original Medicare and a stand-alone Medicare Part D plan. This enrollment period does not allow for Part D changes for individuals enrolled in Original Medicare. Additionally, new Medicare beneficiaries who enroll in an MA plan during the first three months they have Medicare have an individualized three-month MA OEP to switch to another MA plan or return to Original Medicare and a stand-alone Medicare Part D plan.

**Medicare Advantage “Trial Period” Special Enrollment Period (SEP)** People who enroll in a Medicare Advantage plan when they are first eligible for Medicare Part A at age 65 get a “trial period” (up to 12 months) to try out Medicare Advantage. This SEP allows them to disenroll from their first Medicare Advantage plan and go to Original Medicare. At this time, they also get a “guaranteed issue right” to purchase a Medigap supplemental plan. Under federal law this right lasts for 63 days after disenrollment from the MA plan. (They also get a Special Enrollment Period to join a Part D plan.)

If they had dropped a Medigap policy to enroll in a Medicare Advantage plan for the first time after age 65, they also have this SEP to go to Original Medicare. Again, they have up to 12 months with this SEP to change their minds and disenroll from their first MA plan. If they disenroll they have a “guaranteed issue” right for 63 days to Medigap; however, it is limited. Federal law allows them to buy back their previous Medigap policy if it is still available. If that Medigap policy is no longer available, they are allowed to buy Medigap plans A, B, D, G, K, or L from any insurance company that sells it in their state. Some state laws are more generous with regard to guaranteed issue rights, so it is wise to check with your state insurance department regarding their Medigap rules. And, if they were in a Medicare Advantage plan with prescription drug coverage (MA-PD), they also get a coordinating Part D SEP that allows them to join a PDP. By joining the PDP, they will be automatically disenrolled from the MA-PD. This SEP begins when the person first joins the Medicare Advantage

plan and lasts up to 12 months. The Original Medicare and the PDP enrollment (if applicable) take effect on the first day of the month following the month in which the SEP was used.

## Medicare Advantage SEP for Institutionalized Individuals

The Medicare Advantage Open Enrollment Period (or OEPI) that allows nursing home residents and others residing in residential long-term care facilities to enroll or switch Medicare Advantage plans is similar to the Part D SEP for institutionalized beneficiaries. The OEPI allows beneficiaries with Medicare Parts A and B who move into, reside in, or are discharged from certain long-term care facilities to join or disenroll from a Medicare Advantage plan. People eligible for the OEPI may join a Medicare Advantage plan, switch to a different Medicare Advantage plan or disenroll from Medicare Advantage and go to Original Medicare. They are not allowed to change their Part D status using the OEPI. If they previously had Part D, they must join an MA-PD or a PDP. If they did not previously have Part D, they are not allowed to join an MA-PD nor a PDP. Specifically, this SEP can be used by people in nursing homes, psychiatric hospitals, Updated August 2020 8 rehabilitation hospitals, long-term care hospitals, and swing beds. The OEPI also is applicable to individuals who are admitted to a skilled nursing facility in which they can join a Special Needs Plan (SNP) for institutionalized individuals. The SEP may be used to enroll or disenroll from an applicable institutional SNP. This SEP begins in the month of admission and continues for up to two months following discharge. Unlike the PDP SEP for institutionalized persons, the OEPI may be used repeatedly to switch plans as frequently as monthly (although this would not be a recommended practice).

**Medicare Advantage Relocation SEP** This SEP is for Medicare beneficiaries who, as a result of a permanent move, are no longer eligible to belong to their Medicare Advantage plan, or even if they are still eligible to remain in the plan, they will have new MA or Part D plan options available to them as a result of the move. (Generally, new plan options become available only upon moves to another state.) Generally, plan members are responsible for notifying the current plan about a permanent move. Upon such notification, the SEP begins the month before the move and continues until two months after the move. Upon selecting a new plan, the beneficiary can choose an effective date of up to three months after the month the enrollment was submitted.

Source: National Council on Aging, August 2020



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Published by:

East Central Kansas Aging And Disability Resource Center

**Elizabeth Maxwell, Executive Director**

**Jodi Smith, Editor**

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