



Health Care Alert

A QUARTERLY PUBLICATION PROVIDING TIPS FOR INDIVIDUALS WITH MENTAL RETARDATION AND THEIR SUPPORT TEAMS IN ACCESSING HEALTH CARE THROUGH THE MANAGED CARE SYSTEM

Prescription Drug Coverage Under Medical Assistance and Medicare Part D

The most important change coming is shifting the coverage of medications for "dual eligibles" (e.g. individuals who are eligible for both Medicare and Medical Assistance) from Medical Assistance to Medicare.

As of January 1, 2006, "dual eligibles" will obtain their prescription drug coverage through the Medicare Prescription benefit program. Medical Assistance will no longer provide drug coverage for these individuals. How this process of transition will take place has yet to be resolved.

PCHC is in the process of developing information for the community we support. We hope to "roll-out" this educational and technical assistance session in September, 2005.

If you have any questions, call PCHC and ask to speak with a Health Care Technical Assistance Specialist.



Pain Management



The International Association for the Study of Pain defines pain as the sensory and emotional experience associated with actual or potential tissue damage. The experience of pain is different for each person. No one can question if another person's pain is real or how severe another person's pain might be. Pain is what the person says or demonstrates. Because pain is the body's way of telling us that something is wrong, it is imperative to know the signs or symptoms of pain in others, especially those people who may have communication difficulties.

For people with verbal communication difficulties, pain might be expressed in behavior. For example, think about how someone might appear if they caught their finger in the door of a car—they might have an awful look on their face, shake their hand, jump up and down, cry, scream, etc. In fact, some behavioral symptoms of pain include: facial grimacing (#1 symptom), crying, screaming, aggression, guarding, rubbing or holding body parts, change in vital signs (increased blood pressure and/or pulse), change in activity level, and increase in existing challenging behaviors.

There are many conditions that are known to cause sensory or emotional pain. Some of the more common conditions include but are not limited to:

- Degenerative joint disease, arthritis, chronic immobility
- Migraine headaches, sinus headaches
- Constipation, diarrhea, other gastrointestinal conditions
- Gastroesophageal Reflux Disease (GERD)
- Premenstrual syndrome (PMS), cramps during menstruation
- Cancer
- Anxiety
- Depression
- Abuse and traumatic experiences

If someone has a condition known to cause pain, a pain assessment should be completed to determine how the person expresses pain and what strategies they have developed to cope with pain. Information should be developed to treat the pain and should include monitoring for effectiveness of treatment. People who work with someone suffering pain should receive training about the condition causing the pain, how the person demonstrates pain, and the person's pain management plan.

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Mark Your Calendars!!

14th Annual
Brighter Futures Awards Ceremony
October 28, 2005
Wyndham Philadelphia Hotel
at
Franklin Plaza

Resource Tables, Technology Room,
and Afternoon Job Fair!

"Show Me the Money...
Making Employment Happen"

The information presented to you is to increase your awareness of health conditions. It is not intended to replace medical advice. Please seek the advice of a physician for any health related concerns.

Pain Management (continued from front)

This plan should be changed to meet the changing needs of the person. Recognizing a new or different pain is crucial to the health and safety of the person because a new or different pain is the body's way of letting us know that something else is wrong. Again, objective information should be organized for presentation to the treating physician so that an evaluation of this new finding can be completed.

Determining if someone has pain, like taking a blood pressure, is an important part of a thorough evaluation but this might be overlooked in someone with a developmental disability. People may have experienced pain for many years with inadequate or no treatment. Many people, because they have not had their pain relieved, have accepted this pain as part of their daily lives. Others have just stopped doing those activities that cause pain such as walking, dancing, getting in and out of cars, etc. In a recent report from the *Embreeville Health Care Plan Project* while an average of 78% of the general population experiences back pain, this condition was diagnosed in only one of the 151 participants. Severe headache, while affecting 15% of the general population, was diagnosed in only 1 of the 151 participants.

When a person is having difficulty coping or expressing themselves through challenging behavior we should always check out any physical cause first. Ruling out pain should be at the top of this list.

Some content for this article has been taken from PCHC publications entitled, "Management of Pain for People with Mental Retardation and other Developmental Disabilities" and "Embreeville Health Care Plan Project." Please contact PCHC to request copies.

NEW DIRECTOR OF NURSING AT PCHC

As you may already know, our Director of Nursing, Ginny Foelt-New resigned recently to pursue further educational and clinical opportunities. She will be missed.

However, we are very excited and very happy to announce PCHC has promoted one of our own, Patty Graves, to this position.

Patty has been with our agency for over 8 years and brings knowledge, skills, and her own sense of style to her new role.

Everyone at PCHC is looking forward to working with her.

CONGRATULATIONS PATTY!!

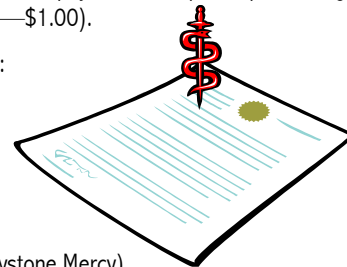
Changes in Medical Assistance Benefits

Important Information!

The Department of Public Welfare is making changes to your Medical Assistance benefits. Effective August 29, 2005 there will be new service limits (e.g. 18 outpatient visits) and new co-payments for prescription drugs (e.g. Brand name—\$3.00/Generic—\$1.00).

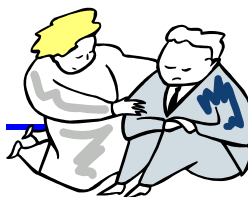
These limits do not apply if you are:

- Under age 21,
- Pregnant,
- Covered by Medicare, or
- In a Managed care plan (e.g. Keystone Mercy).



If you have any questions regarding the many changes to your yearly limits, call the Medical Assistance Call Center help line at 1-866-542-3015.

PCHC will include this information in a training being developed regarding the new Medicare prescription coverage being implemented in September 2005.



Behavioral Health

PCHC is in the process of developing a booklet surrounding dual diagnosis activities.

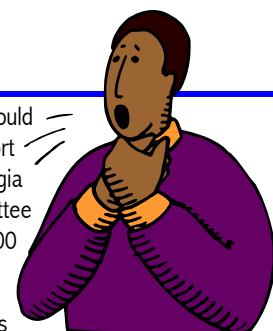
The purpose of this publication is to heighten awareness around dual diagnosis and to increase the visibility of our behavioral health team in the Southeast region.

Stay tuned for more information in upcoming Health Care Alert newsletters.

Dysphagia Update

Philadelphia Coordinated Health Care would like to thank the SE region for their support and interest regarding the Dysphagia Resource Directory. The SE regional committee produced and distributed almost 700 directories across the state.

PCHC is currently working on accessing this directory electronically through their website. More information on availability will be provided in the upcoming Fall 2005 Health Care Alert newsletter.



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PCHC is a core program of PMHCC, Inc.