

Change flexibility

“Use it or lose it” has always been the adage that promotes practicing skills with the fear of losing them permanently. There is an endless supply of research that recommends seniors routinely keep up on active exercise and activities or they will lose their ability to independently care for themselves.

Stretching daily, performing exercises that improve balance and even mental exercises like crossword puzzles are all widely practiced by dedicated seniors hoping to stay nimble both physically and mentally. Yet, keeping flexible in our ability to accept and adapt to change is often overlooked in all of these long-term practices.

Just like stretching any other muscles, it takes a concerted effort to keep emotionally flexible to changes in one’s community and daily routine. Unfortunately, change is not only inevitable, but there is often more change as we age. Changes in living situations, loss of family and friends and changes in the community only seem to increase in speed and frequency.

Coping with change is challenging and takes some mental flexibility to try to understand and accept. Meditation and quiet reflection often helps with accepting change. Another mental exercise to try is identifying a list of opportunities or good things that might result from a change. This allows the emotional focus to shift from the negative to the positive. However, like any other stretch, it might be challenging at first to be optimistic.

In the same token, it is important to embrace heritage and tradition and to see how change can strengthen those customs instead of detracting from them. Belonging to a strong, healthy community where personal memories and life experiences can be shared is an important way to not only keep those traditions alive, but also help deal with the changes that are occurring. Finding a community that you can depend on and be open with is another great tool for adapting. The experience and wisdom that seniors have to share with the upcoming generation is invaluable and should be used to help shape the future.

With all this in mind, add stretching your change-adapting muscles to your daily routine of staying healthy, happy and nimble.

ELISABETH CASSIDAY is the Sheridan County YMCA executive director.



ELISABETH CASSIDAY

TAKEN FOR A RIDE?

Ambulances stick patients with surprise bills

BY MELISSA BAILEY AND HEIDI DE MARCO
KAISER HEALTH NEWS VIA THE ASSOCIATED PRESS

One patient got a \$3,660 bill for a 4-mile ride. Another was charged \$8,460 for a trip from one hospital that could not handle his case to another that could. Still another found herself marooned at an out-of-network hospital, where she’d been taken by ambulance without her consent.

These patients all took ambulances in emergencies and got slammed with unexpected bills. Public outrage has erupted over surprise medical bills — generally out-of-network charges that a patient did not expect or could not control — prompting 21 states to pass laws protecting consumers in some situations. But these laws largely ignore ground ambulance rides, which can leave patients stuck with hundreds or even thousands of dollars in bills, with few options for recourse, finds a Kaiser Health News review of 350 consumer complaints in 32 states.

Patients usually choose to go to the doctor, but they are vulnerable when they call 911 — or get into an ambulance. The dispatcher picks the ambulance crew, which, in turn, often picks the hospital. Moreover, many ambulances are not summoned by patients. Instead, the crew arrives at the scene having heard about an accident on a scanner, or because police or a bystander called 911.

Betsy Imholz, special projects director at the Consumers Union, which has collected over 700 patient stories about surprise medical bills, said at least a quarter concern ambulances.

“It’s a huge problem,” she said.

Forty years ago, most ambulances were free for patients, provided by volunteers or town fire departments using taxpayer money, said Jay Fitch, president of Fitch & Associates, an emergency services consulting firm. Today, ambulances are increasingly run by private companies and venture capital firms. Ambulance providers now often charge by the mile and sometimes for each “service,” like providing oxygen. If the ambulance is staffed by paramedics



COURTESY PHOTO | METRO CREATIVE CONNECTION

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ics rather than emergency medical technicians, that will result in a higher charge — even if the patient didn’t need paramedic-level services. Charges range widely from zero to thousands of dollars, depending on billing practices.

The core of the problem is that ambulance and private insurance companies often can’t agree on a fair price, so the ambulance service doesn’t join the insurance network. That leaves patients stuck in the middle with out-of-network charges that are not negotiated, Imholz said.

This happens to patients frequently, according to one recent study of over half a million ambulance trips taken by patients with private insurance in 2014. The study found that 26 percent of these trips were billed on an out-of-network basis.

That figure is “quite jarring,” said Loren Adler, associate director for the USC-Brookings Schaeffer Initiative and co-author of recent research on surprise billing. The KHN review of complaints revealed two common scenarios leaving patients in debt: First, patients get in an ambulance after a 911 call. Second, an ambulance transfers them between hospitals. In both scenarios, patients later learn the fee is much higher because the ambulance was out-of-network, and after their insur-

er pays what it deems fair, they get a surprise bill for the balance, also known as a “balance bill.”

The Better Business Bureau has received nearly 1,200 consumer complaints about ambulances in the past three years; half were related to billing, and 46 mentioned out-of-network charges, spokeswoman Katherine Hutt said.

While the federal government sets reimbursement rates for patients on Medicare, it does not regulate ambulance fees for patients with private insurance. In the absence of federal rules, those patients are left with a fragmented system in which the cost of a similar ambulance ride can vary widely from town to town. There are about 14,000 ambulance services across the country, run by governments, volunteers, hospitals and private companies, according to the American Ambulance Association.

For a glimpse into the unpredictable, fragmented system, consider the case of Roman Barshay. The 46-year-old software engineer, who lives in Brooklyn, N.Y., was visiting friends in the Boston suburb of Chestnut Hill last November when he took a nasty fall.

Barshay felt a sharp pain in his chest and back and had trouble walking. An ambulance crew responded to a 911 call at the house and drove him 4 miles to

Brigham and Women’s Hospital, taking his blood pressure as he lay down in the back. Doctors there determined he had sprained tendons and ligaments and a bruised foot, and released him after about four hours, he said.

After Barshay returned to Brooklyn, he got a bill totaling \$3,660 — which is \$915 for each mile of the ambulance ride. His insurance had paid nearly half, leaving him to pay the remaining \$1,890.50.

“I thought it was a mistake,” Barshay said.

But Fallon Ambulance Service, a private company, was out-of-network for his UnitedHealthcare insurance plan.

“The cost is outrageous,” said Barshay, who reluctantly paid the \$1,890.50 after Fallon sent it to a collection agency. If he had known what the ride would cost, he said, he would at least have been able to refuse and “crawl to the hospital myself.”

“You feel horribly to send a patient a bill like that,” said Peter Racicot, senior vice president of Fallon, a family-owned company based outside Boston.

But ambulance companies are “severely underfunded” by Medicare and Medicaid, Racicot said, so Fallon must balance the books by charging higher rates for patients with private insurance.

SENIOR HAPPENINGS

• Christmas wrapping stations will be located in the art studio at The Hub on Smith, complete with everything to get the job done. The stations are available Monday through

Friday from 9 a.m. to 3 p.m. with the exception of class times.

• Creekside Apartment residences will be added to the lunch route every Monday and Thursday.

The bus will depart from Creekside at 10:35 a.m. to The Hub with return trips departing from The Hub at 12:40 p.m. The fare is one ticket. Alternate location drop requires additional fare. The route begins Dec 4. No need to call for reservations. Direct questions to 674-9273.

• Join The Hub on Dec. 6 for “Holiday Recipes with a Healthy Twist” with Georgia Boley. The presentation is part of the “When I’m 64...or More” lecture series. The event will take place from 5:30-7 p.m. in the café. There is no charge to attend.

• A winter concert presented by the SheridanAires will take place Dec. 7 at 1:30 p.m. and Dec 8 with a dinner at 6 p.m. There is a \$10 suggested contribution. Prepay at the front desk. RSVP for dinner only. The show will begin at 7 p.m.

• For all who are interested, please plan to attend an informational presentation

discussing a great new outdoor recreation project being developed for the Sheridan community. The Doubleday Sports Complex will be a multi-use sports complex that will increase participation in physical activities, build teamwork qualities and develop community pride. This complex will impact all age groups by establishing new green space including four soccer fields, four youth baseball fields and four softball fields with community areas for picnic and family gatherings as well as a pathway that will connect to the current Sheridan pathway system. Don Julian, activities director for Sheridan County School District 2, will conduct the informational presentation Dec. 13 at 1 pm in the café at The Hub on Smith. Members of the Doubleday planning committee will also be in attendance to discuss the project and answer questions from the audience.

GO ONLINE!

www.thesheridanpress.com



ENTRÉE CHOICE* or SOUP/SALAD

- Tue- Breaded Pork Chops
- Wed- Chicken Tetrazzini
- Thu- Sweet & Sour Pork
- Fri- Cheeseburger Deluxe
- Sat- Western Egg bake
- Sun - Glazed Ham
- Mon- Lemon Parmesan Chicken Breast

UPCOMING SPECIAL EVENTS

Tue- Tai Chi	8:30 a.m.	Fitness Room
Wed- DEEP	1:00 p.m.	Art Studio
Thurs - Sheridan Aires Winter Concert	1:30 p.m. (Suggested Contribution \$2)	Café
Fri - Sheridan Aires Concert & Dinner	6:00p.m. Sign Up	Café
Sat- Texas Hold'em	12:30 p.m.	Café
Sun- Billiards Open Play	9:00 a.m.	Billiards Room

FUN AND FOOD
BUILD YOUR OWN SALAD
Mondays - Fridays
Entrees and kiosk include sides, dessert and drink.

Salad Bar Available
Mondays - Fridays

No Salad Bar on
Saturday or Sunday

*entrée only offered for Home Delivered Meals

Lunch Service Hours: 11:00 a.m. to 1:00 p.m., 365 days a year at 211 Smith Street
Home Delivered Meals (307) 672-6079

Loan Closet, Outreach, and Administration Services, 672-2240. Mondays - Fridays.

Help at Home Services, 675-1978. 232 North Brooks: Mondays - Fridays.

Day Break Adult Care Services, 674-4968. 241 Smith Street: Mondays - Fridays.



- Respite Care
- Private Rooms
- Short-term Rehab
- Outpatient Therapy

