

02/21/94
COMMUNITY CARE FOR ELDERLY
WVHM-MILWAUKEE-PR REPORT

THE WHITE HOUSE

Office of the Press Secretary

For Internal Use Only

February 21, 1994

THE FIRST LADY VISITS
COMMUNITY CARE FOR THE ELDERLY
WUWM-FM MILWAUKEE PUBLIC RADIO REPORT

MR. BOCK: -- Milwaukee Public Radio. Good morning, I'm Bob Bock (phonetic). Support for MPR news comes from AMGEN (phonetic), bringing better, healthier lives to millions worldwide through biotechnology.

First Lady Hillary Rodham Clinton says she'd like to see more elderly care centers like the one she visited in Milwaukee this weekend. Community care for the elderly saves the government up to 15 percent in medical costs for frail senior citizens in the program. More from WUWM's Andrea Rowe (phonetic).

MS. ROWE: Three years ago Josephine needed the kind of medical attention and special services that one gets at a nursing home. Instead, she lives at home with her husband while a team of doctors and care-givers look after her.

A PARTICIPANT: And I always tell my husband if he has to put me in a nursing home, please, shoot me first. I think I would have been very, very depressed just sitting there watching television and looking out the window, and this way it gives you -- it really gives you an incentive to do what you're supposed to do. Like, I'm supposed to be exercising my hands, so I do it.

MS. ROWE: Josephine is in a pilot program called community care for the elderly, or CCE. Through one center she gets all the medical care, social services, and home help she needs. Participants sign over their Medicaid and Medicare policies, and CCE provides anything a senior needs in order to still live at home, like a wheelchair ramp, house cleaning, or visiting doctors. At the same time, Josephine and others in the program come to a day center as often as they like. A driver comes in the morning and takes everyone

MORE

home at night.

A PARTICIPANT: Well, we have current events for part of the program, then they have an exercise program, and then we have lunch. And after that there's various activities, craft work, trivia programs, working on crossword puzzles.

MS. ROWE: And in-between activities, seniors see their doctors, therapists and social workers, all under one roof. Mary Gavinsky (phonetic) is the CCE medical director and says the program is experimental not only in the types of services it offers, but in the way it's run. Without the program, the elderly have several different health agencies making decisions about them. Sometimes this causes over-medication where services overlap.

MS. GAVINSKY: What we can offer here is that the doctor, and the nurse, and the social worker, and the home care worker, and the personal care worker are all sitting down and talking about the person and making a joint plan of what we think is right, and also taking into consideration what that individual wants.

MS. ROWE: Gavinsky says everyone from the doctors to the drivers keep track of each senior's well-being. During a morning pickup a driver might notice a slight change and bring them straight into the center's clinic. With so many open eyes and ears, Gavinsky says, developing health problems are detected much earlier, and it saves many hospital visits.

CCE marketing director, Tom Andrews (phonetic), says early intervention not only keeps the clients healthier, it helps the program save money.

MR. ANDREWS: It's to our advantage and the program's advantage to be as efficient with the dollars that we have -- okay? It's to our advantage to keep them out of the hospital, because we have to pay for everything. If they have to go to the hospital, we pay for it. If they go to the nursing home, we pay for it. Okay? Sort of like an HMO.

MS. ROWE: Andrews adds that clients are sent to the hospital if the clinic can't take care of the problem, but the money CCE saves in medical costs makes it possible to run such a program.

MORE

A PARTICIPANT: People are becoming very much aware, now, of what this kind of program offers, not only in terms of saving money. Yes, we save money, but the bottom line is, we help people stay independent, living at home, okay, and meeting their needs. Their quality of life is a lot better. They just don't feel like they're being shuffled off someplace and forgotten.

MS. ROWE: And that's what attracts First Lady Hillary Rodham Clinton to the program. She visited one of Milwaukee's CCE centers on Saturday.

MRS. CLINTON: Everything in the President's plan has been done somewhere, you know. We've got good models around America, we just haven't put it all together, and Wisconsin has really led the way in having these options program --

MS. ROWE: Perhaps what sold Mrs. Clinton on the program's success was the cheery disposition found in so many of the clients. Eighty-two year old Sophie tells her friend Irene how she found out about Arthur. That's what she calls arthritis.

A PARTICIPANT: I was starting to get a pain here and a pain there, and I said, well, what is this pain? And then the doctor told me that I've been sleeping with Arthur for a long time. But I didn't know. I said, oh, my gosh, you mean to tell me that I've been in bed with Arthur, and I didn't know it? But that's what it was.

MS. ROWE: Andrea Rowe, WUWM, Milwaukee Public Radio.

* * * * *

THE WHITE HOUSE

Office of the Press Secretary

For Internal Use Only

February 21, 1994

THE FIRST LADY VISITS
COMMUNITY CARE FOR THE ELDERLY
WUWM-FM MILWAUKEE PUBLIC RADIO REPORT

MR. BOCK: -- Milwaukee Public Radio. Good morning, I'm Bob Bock (phonetic). Support for MPR news comes from AMGEN (phonetic), bringing better, healthier lives to millions worldwide through biotechnology.

First Lady Hillary Rodham Clinton says she'd like to see more elderly care centers like the one she visited in Milwaukee this weekend. Community care for the elderly saves the government up to 15 percent in medical costs for frail senior citizens in the program. More from WUWM's Andrea Rowe (phonetic).

MS. ROWE: Three years ago Josephine needed the kind of medical attention and special services that one gets at a nursing home. Instead, she lives at home with her husband while a team of doctors and care-givers look after her.

A PARTICIPANT: And I always tell my husband if he has to put me in a nursing home, please, shoot me first. I think I would have been very, very depressed just sitting there watching television and looking out the window, and this way it gives you -- it really gives you an incentive to do what you're supposed to do. Like, I'm supposed to be exercising my hands, so I do it.

MS. ROWE: Josephine is in a pilot program called community care for the elderly, or CCE. Through one center she gets all the medical care, social services, and home help she needs. Participants sign over their Medicaid and Medicare policies, and CCE provides anything a senior needs in order to still live at home, like a wheelchair ramp, house cleaning, or visiting doctors. At the same time, Josephine and others in the program come to a day center as often as they like. A driver comes in the morning and takes everyone

MORE

Diversified Reporting Services, Inc.

918 16TH STREET, N.W. SUITE 803

WASHINGTON, D.C. 20006

(202) 296-2929

home at night.

A PARTICIPANT: Well, we have current events for part of the program, then they have an exercise program, and then we have lunch. And after that there's various activities, craft work, trivia programs, working on crossword puzzles.

MS. ROWE: And in-between activities, seniors see their doctors, therapists and social workers, all under one roof. Mary Gavinsky (phonetic) is the CCE medical director and says the program is experimental not only in the types of services it offers, but in the way it's run. Without the program, the elderly have several different health agencies making decisions about them. Sometimes this causes over-medication where services overlap.

MS. GAVINSKY: What we can offer here is that the doctor, and the nurse, and the social worker, and the home care worker, and the personal care worker are all sitting down and talking about the person and making a joint plan of what we think is right, and also taking into consideration what that individual wants.

MS. ROWE: Gavinsky says everyone from the doctors to the drivers keep track of each senior's well-being. During a morning pickup a driver might notice a slight change and bring them straight into the center's clinic. With so many open eyes and ears, Gavinsky says, developing health problems are detected much earlier, and it saves many hospital visits.

CCE marketing director, Tom Andrews (phonetic), says early intervention not only keeps the clients healthier, it helps the program save money.

MR. ANDREWS: It's to our advantage and the program's advantage to be as efficient with the dollars that we have -- okay? It's to our advantage to keep them out of the hospital, because we have to pay for everything. If they have to go to the hospital, we pay for it. If they go to the nursing home, we pay for it. Okay? Sort of like an HMO.

MS. ROWE: Andrews adds that clients are sent to the hospital if the clinic can't take care of the problem, but the money CCE saves in medical costs makes it possible to run such a program.

MORE

Diversified Reporting Services, Inc.

918 16TH STREET, N.W. SUITE 803

WASHINGTON, D.C. 20006

(202) 296-2929

A PARTICIPANT: People are becoming very much aware, now, of what this kind of program offers, not only in terms of saving money. Yes, we save money, but the bottom line is, we help people stay independent, living at home, okay, and meeting their needs. Their quality of life is a lot better. They just don't feel like they're being shuffled off someplace and forgotten.

MS. ROWE: And that's what attracts First Lady Hillary Rodham Clinton to the program. She visited one of Milwaukee's CCE centers on Saturday.

MRS. CLINTON: Everything in the President's plan has been done somewhere, you know. We've got good models around America, we just haven't put it all together, and Wisconsin has really led the way in having these options program --

MS. ROWE: Perhaps what sold Mrs. Clinton on the program's success was the cheery disposition found in so many of the clients. Eighty-two year old Sophie tells her friend Irene how she found out about Arthur. That's what she calls arthritis.

A PARTICIPANT: I was starting to get a pain here and a pain there, and I said, well, what is this pain? And then the doctor told me that I've been sleeping with Arthur for a long time. But I didn't know. I said, oh, my gosh, you mean to tell me that I've been in bed with Arthur, and I didn't know it? But that's what it was.

MS. ROWE: Andrea Rowe, WUWM, Milwaukee Public Radio.

* * * * *

Diversified Reporting Services, Inc.

918 16TH STREET, N.W. SUITE 803

WASHINGTON, D.C. 20006

(202) 296-2929