POA Membership Meeting

Tuesday, January 17, 2017

The meeting was called to order by the President, Cliff Weiner at 7:00 PM followed by a moment of silence to remember those who served our country.

Roll call indicated all members present except Donna Kempa, excused.

The minutes of the December meeting were approved as read.

The <u>Treasurer's</u> report showed total receipts for 2016 were \$205,848; 2016 expenses totaled \$172,950; and net operating cash flow of \$32,898.

The <u>membership</u> report noted that the second mailing for 2017 membership dues is in the mail explaining that there is always an overlap of incoming dues, so if anyone paid and also received a second notice, please disregard it. He thanked attendees who have paid their 2017 dues to date and encouraged those who have not to become a member.

SHINE report reminded beneficiaries that anyone who does not have Medicare A or B can sign up January 1 thru March 31 with an effective date of coverage July 1. There is a penalty for each 12 months a beneficiary does not have Part B, the cost of which will be added to your Part B monthly premium for ever. Also January 1 through February 14 you can move from a Medicare Advantage plan back to original Medicare and add a Part D plan. However, you cannot during that time move from one Medicare Advantage plan to another.

Mile Schobinger of $\underline{\mathsf{CERT}}$ spoke briefly to the group explaining that CERT will have a 6 week training class starting February 6th. Anyone interested can obtain additional information from the back table.

Others at the <u>back tables</u> for individual questions or more information include Seniors v Crime, SHINE, and District government representatives.

The <u>cash raffle</u> yielded \$30 to each of three lucky winners.

<u>Open forum – Answers may appear in future Bulletins:</u>

How does a Villager get Comcast to remove used boxes from homes?

What is the position of the POA on forming an AAC south of CR466?

Is there interest in having lines drawn on more cart paths?

Speaker: Michael Pittman, VP and Chief Clinical Officer of the Villages Hospital, and Susan Williams, DON, provided a detailed and informative presentation on the clinical status of the hospital. They focused primarily on patient care standard s. The hospital abides by Joint Commission quality standards and in 2016 was named a JCAH Accredited Stroke Center. They currently operate as most hospital with two twelve-hour shifts. In a national hospital rating system, TVRH rates "3" our of "5" and they are

working hard to be granted a "4" in the near future. As most hospitals they are looking for more volunteers. The ER has expanded to include an Urgent Care Center that operates from 8am to 8pm to care for patients with minor illnesses that do not require emergency room services. As far as informing patients if they are as admitted patient or in an "observation" bed, they abide with the recent Medicare Outpatient Observation Notice (MOON) to inform patients in writing if they have been officially admitted, important if you may be in need of qualifying for skilled nursing home services. Both were available for additional questions after their presentation.

The February meeting will feature a panel who will speak on End of Life issues.

There being no further business, the meeting was adjourned at 8:20 PM followed by coffee, donuts, and good conversation.

Carolyn Reichel, Secretary