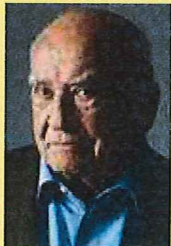
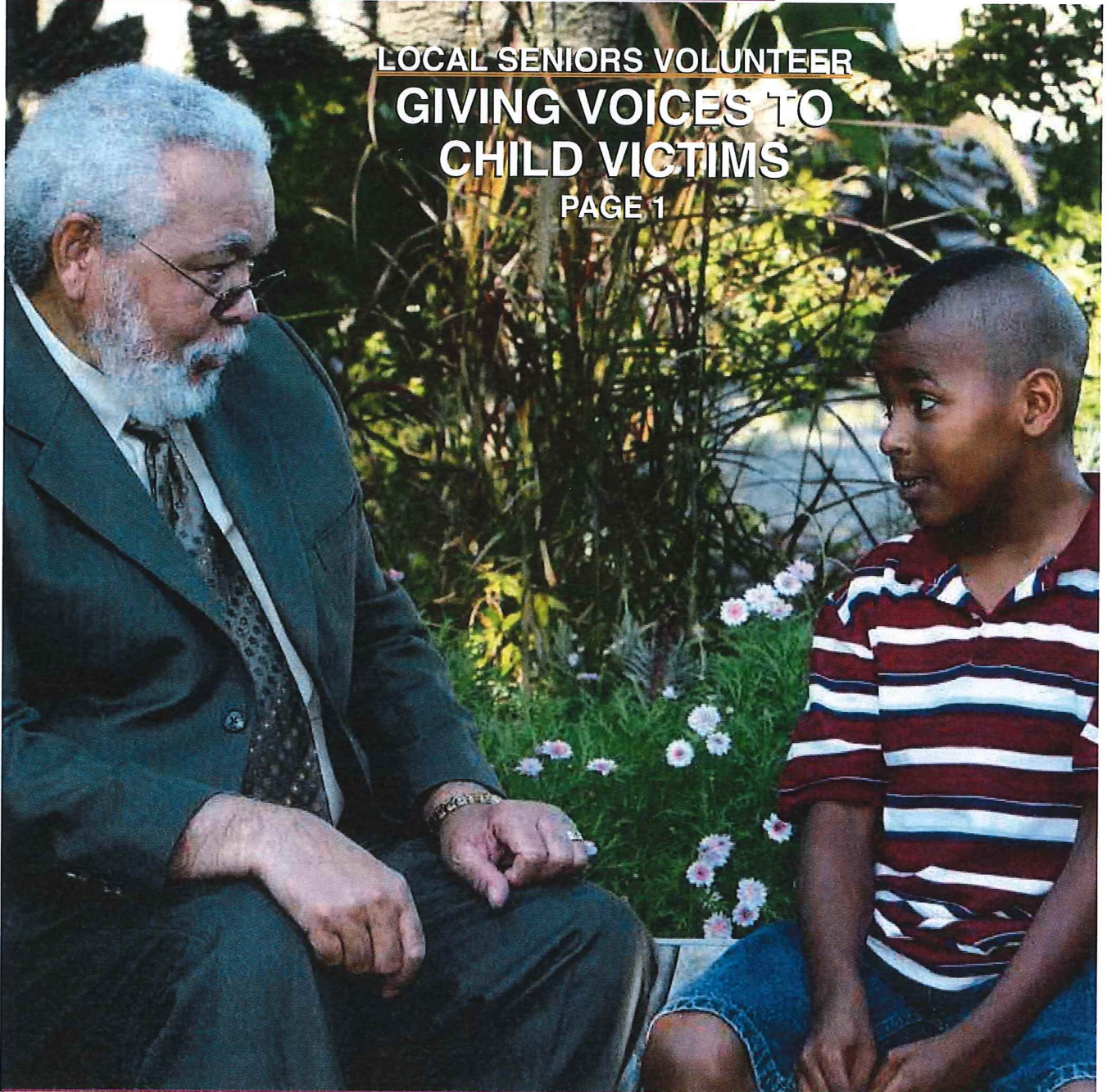


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OHIO'S FOREMOST
NEWSMAGAZINE FOR
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APRIL 2017
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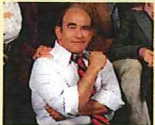
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GIVING VOICES TO CHILD VICTIMS

Local seniors standing up, not standing by!

By Kathy Kerr
"To see a child smile.... that's why I do what I do," said Tom Barry, Court Appointed Special Advocate (CASA) volunteer Guardian ad Litem (GAL).

For the past four years, Tom, 68, and a Hilliard resident, has taken on a role that many would assume is left for someone that must have worked with children or perhaps has experience in the social work field, maybe even someone who spent time in foster care as a youth. Not Tom. Tom is a Court Appointed Special Advocate or CASA. He decided a long time ago that as he entered the stage of his life where he would be looking retirement in the eye he wanted to give back, but in a way unlike any other. He wanted to help abused and neglected children realize a better life.

Every day in this country, children are removed from their homes because of abuse and neglect and have their lives turned upside down. Luckily, for the sake of these children, there is a non-profit organization that focuses its efforts on them. CASA of Franklin County's mission is to provide a powerful and consistent voice in court for child victims of abuse and neglect. CASA recruits and trains community members—many times retirees and seniors—to become volunteer Guardians ad Litem (GAL) for these child victims. A Guardian ad Litem is a trained and committed volunteer who is a sworn officer of the court, and who advocates for the best interest of children. They give the child a voice, by monitoring the case, and guaranteeing that the child's wishes are a priority in an overburdened

legal and child welfare system. One of those voices is Tom, and his journey with CASA started in 2013.

"In the 70s, I worked as an attorney doing similar work to that of CASA,"



they complete the necessary training. The cases may involve one child or many. "We work with the volunteer to place them on a case that suits their particular interest, and their schedules," said Beverly Robinson, Director of Volunteer Management.

Because of his experience as an attorney, Tom jumped right into a case with seven

said Kathy Kerr, Executive Director. "Volunteers come from all walks of life—they do not need to be lawyers or social workers. Our children most often come from underserved populations and are equally male and female, so having a diverse population of volunteers who can genuinely empathize with these children is invaluable."

CASA trains its volunteers and provides them with the requisite knowledge and skills needed. This includes training in the legal system, case/project management, interviewing and analysis, cultural awareness, investigation, effective communication, child and family development, conflict management, and mental health and substance abuse awareness.



Tom Barry

children. "I've been on this case since I started," he said. "I have had other cases as well that haven't been as extensive, but this one just has a lot going on." It's a story not uncommon with CASA; there are often multiple children and extended family involved. "These children have been through a lot," Tom said. "They have been in different foster homes, placed with different family members, torn apart from each other." With Tom as their GAL, however, the children have been able to maintain a level of consistency with their representation in court, and their best interests have remained a priority. "If I can make a difference in a child's life, that's what matters," Tom said. "I am learning from these children, too! I'm learning that things that I take for granted are gifts to these children."

CASA is always in need of passionate volunteers to give a voice to those most vulnerable as they work their way through an overburdened system. "Our GALs focus only on the child's best interests,"

Once assigned to a case, the GAL visits the child at least monthly, usually in the foster home, and talks with teachers, doctors, and others close to the child. The GAL then files a report of their findings to CASA and serves firsthand as the child's voice in court to answer questions and make fact-based recommendations as to their best interests. "Many of these children have suffered from horrific abuse and neglect," Kerr said. "Obviously learning to trust adults is an issue and having an older, nurturing adult on their side is critical to their sense of well-being until their nightmare is over." A CASA volunteer is often the only consistent, caring adult involved from the beginning of a case to the end. Last year, CASA served 826 abused and neglected children with the help of 243 volunteer GALs.

Research shows that children who experience the positive CASA GAL relationship are more likely to succeed in school and less likely to get into trouble, abuse illegal substances, or commit child abuse or family violence as adults. "We

See VOICES, page 6

Marci's Medicare Answers



Dear Marci: I am in charge of my father's care, and he was recently hospitalized as an inpatient. How does his Medicare work for his hospital stay, and what can I do if the hospital wants to release him before I think he's ready to be discharged? - Julianne

(Cary, NC)

Dear Julianne: If your father is covered by Original Medicare, his inpatient hospital stay is covered by Part A (hospital insurance). How much will Medicare pay for his stay, and what will his costs be? When he

is a hospital inpatient, he is responsible for the Part A hospital deductible of \$1,316 at the beginning of each benefit period. After he meets the deductible, he pays zero dollars for the first 60 days of inpatient care in each benefit period. He owes a coinsurance of \$329 for days 61 through 90 in each benefit period and of \$658 per lifetime reserve day he uses after day 90. He has 60 lifetime reserve days that can only be used once. Note that if your father has a Medicare supplemental insurance policy (Medigap plans A through L), it will

pay for all his hospital coinsurance plus provide up to 365 additional lifetime reserve days. Medigap plans B through J will also pay his full hospital deductible.

If your father has a Medicare Advantage Plan, contact his plan to learn what its cost sharing rules are for hospital care. Many plans have a deductible and/or daily copayments for inpatient care. Some Medicare Advantage plans use a benefit period similar to Original Medicare, while others assess the inpatient deductible only once per year. A benefit period begins when someone is admitted to a hospital as an inpatient and ends when they have been out of the hospital or Skilled Nursing Facility (SNF) for at least 60 days in a row. If your father is readmitted to the hospital more than 60 days after his previous inpatient hospital stay, a new benefit period begins. This means that he will have to pay the inpatient hospital deductible again, and his coverage days renew. If he is readmitted to the hospital before 60 days have passed, then he is in the same benefit period. He does not have to pay the inpatient hospital deductible again and his coverage days continue from where he left off.

Medicare Part A covers up to 60 additional lifetime reserve days. These are available when he has used all 90 covered hospital days during a single benefit period. Once again, reserve days are not renewable and can be used only once during a beneficiary's lifetime.

Your father doesn't have to use these days if he would prefer not to, and he doesn't have to use them during the same hospital stay. If he is in the hospital for more than 90 days in a single benefit period, the hospital typically starts using his lifetime reserve days unless he decides that he doesn't want to use them. If he is in the hospital for an extended stay, the

hospital should notify him on day 85 of his hospital stay that he has five covered days left in the benefit period. He can decide to use his lifetime reserve days after day 90 of his hospital stay. If he decides he doesn't want to use his lifetime reserve days, he must notify the hospital in writing. In that case, Medicare won't pay toward any hospital costs beyond the standard 90 Medicare-covered days in a benefit period.

If your father's health care provider decides that he no longer requires hospital care, or believes Medicare will no longer pay for continued care, your father will receive notice from the hospital that he will soon be discharged. If you or your father do not feel that he is ready to leave the hospital, you can appeal the hospital's decision. Appealing means you ask an outside organization to review the hospital's decision to discharge your father. You or your father (or any other representative) can appeal a hospital discharge by following directions on a notice called An Important Message From Medicare, which should also explain why he is being discharged. His doctor can also assist you with the appeal. The Important Message will provide contact information for the Beneficiary and Family Centered Care Quality Improvement Organization (BFCC-QIO). You must file an appeal with the BFCC-QIO by the date on the notice to protect your father against incurring out of pocket costs. Once you file your appeal, the BFCC-QIO will contact you by phone to discuss your case. These types of appeals are expedited, meaning decisions are made quickly. It is important to be aware of the deadlines for appealing and to keep track of all paperwork you receive. If your first appeal with the BFCC-QIO is not successful, you can continue to ap-

peal by following directions on the unfavorable decision that the BFCC-QIO sends you. You can still appeal once your father has left the hospital, but the appeal will be handled on a standard timeline, instead of an expedited one. For information about how the hospital should help arrange for your father's post-hospitalization needs, read about hospital discharge planning.

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VOICES, from page 1 give them hope, encouragement, and a chance to grow up," Kerr said.

"As a child, being the oldest of 3 boys, and our father travelling for business every week, I felt like a third parent," Tom says. "I felt the need to protect my family and so this upbringing taught me to care for others. Sharing the good things that I have had and giving back to others is incredibly important to me." Tom wants to do more though! Once he retires, he knows that he will be able to take on even more with CASA, helping change even more children's lives for the better.

An average of five to eight hours a month will change the life of a neglected and abused child and will certainly enrich yours. To learn more please visit www.casacolumbus.org. Our next training class begins on May 8, 2017. Men and women volunteers are needed. A child is waiting.

Kathy Kerr is Executive Director, CASA of Franklin County.



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