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SOUTH DAKOTA  
**Housing**  
DEVELOPMENT AUTHORITY

## R e c i p e s

### Hamburger Hot Dish

submitted by Susan Hansen for Mountain Man, Gold Mountain

Brown 1½ pounds of hamburger in butter. Add 1 cup chopped celery and 1 cup chopped onion. Add 1 can cream of chicken soup, 1 can of beef bouillon soup, 1 large can of mushrooms cut up, 1 can water chestnuts (chopped), 1 cup rice (uncooked), ½ cup of soy sauce. Bake 45 to 60 minutes at 350°.

### Maple Pork Chop Dinner - submitted by Susan Hansen, Gold Mountain

1 tablespoon vegetable oil      5 ¾" thick pork chops  
salt and pepper to taste      1 17 ounce can sweet potatoes drained  
1 10.2 ounce can refrigerated buttermilk biscuits (5 biscuits)  
¾ cup maple-flavored syrup

Heat oven to 350°. In a nonstick skillet, heat oil over medium-high heat. Cook pork chops in oil until browned on both sides. Place pork chops in ungreased 15x10x1 inch pan. Sprinkle with salt and pepper. Arrange sweet potatoes around pork chops. Cover with foil. Bake 10 minutes. Move pork chops and sweet potatoes to one side of pan; drain and discard drippings. Separate dough into biscuits; arrange in pan next to pork chops and potatoes. Drizzle syrup over pork chops, potatoes and biscuits. Bake uncovered 15 to 20 minutes until biscuits are golden brown and pork chops are no longer pink. To serve, spoon liquid in pan over pork chops and sweet potatoes.

### Pumpkin Cake Roll - submitted by Jodi Morrill, Pheasant Valley Courtyard

**Cake:**  
¾ cup flour      ½ teaspoon baking powder  
½ teaspoon baking soda      ½ teaspoon cinnamon  
½ teaspoon ground cloves      ¼ teaspoon salt  
1 cup sugar      ⅔ cup pumpkin (1 can)  
1 cup chopped walnuts      powdered sugar

**Filling:**  
8 ounces cream cheese      1 cup powdered sugar  
6 tablespoons butter      1 teaspoon vanilla

Preheat oven to 375°. Grease 15x10x1 inch pan. Line with wax paper. Grease and flour wax paper. Sprinkle a clean dish towel with powdered sugar. Combine flour, baking powder, soda, cinnamon, cloves and salt in a small bowl. Set aside. Beat eggs and sugar until thick. Beat in pumpkin. Stir in flour mixture. Spread evenly into baking pan. Sprinkle with walnuts. Bake for 13 - 15 minutes or until the top of the cake springs back when touched.

Loosen and turn cake onto prepared dish towel. Peel off wax paper. Roll cake and dish towel together. Cool. Mix together filling ingredients. Unwrap cake and spread filling over cake. Roll cake again, removing the dish towel in the process. Wrap in plastic wrap and refrigerate at least 1 hour. Sprinkle the pumpkin roll with powdered sugar before serving.

SPRING  
2015

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AUTHORITY



**STAR**  
Resident Newsletter

## From Panama to Rapid City Maplewood Resident Finds his Home

As a child growing up in Colon, in the Republic of Panama, Rolando Bodden heard America was the land of opportunity. It was a dream of many to come to America. Rolando did not have such plans. He loved his country. He went to college and worked for a year teaching high school. During this time, his family kept encouraging him to move to the United States so he would have the opportunity for a better life. Their encouragement helped him decide to move to the United States when he was 21 years old, joining his sister who was already living in Rapid City.

"The hardest adjustment in moving to Rapid City was dealing with the cold weather. I was not used to the snow," said Rolando. "I had never experienced a frozen mustache before!" Rolando is still not a fan of the cold. "I am glad to live in Rapid City and enjoy its slower pace, regardless of the 4 seasons," said Rolando.

Rolando furthered his education by earning an Associate Degree at the National College of

Business in Rapid City. After Rolando earned his degree he worked in the management field in a number of different states. In New Jersey he worked at Macy's in the men's wear department. He is most proud of the 11 years he was a Senior General Manager with S&K Menswear in Pennsylvania and Florida.

Rolando's career was going quite well but he started having heart problems. He continued to work until his second heart attack and triple bypass surgery, after which his physician advised him to retire. His father had passed away of a massive heart attack at age 55, and he also lost his only brother to a heart attack. Rolando decided it was time to slow down and take better care of himself.

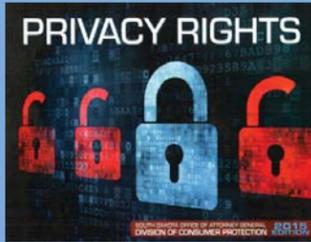
He moved back to Rapid City into the Maplewood Townhouses, where he has the reputation of helping everyone. Rolando assists with the meals program, decorates the dining room, provides transportation for his neighbors who need to run errands or go to doctor's appointments, helps unload groceries and finds time to visit residents in a nursing home. During the growing season you will find Rolando tending the garden at the entrance to Maplewood.

Rolando became an United States citizen in 2014. He participated at the oath of citizenship ceremony at Mount Rushmore National Memorial. Rolando stated, "I love the United States because it accepts diversity. Life is good. I survived a stroke, triple bypass surgery and two accidents. God knows why I am here. I try to keep a positive attitude." Rolando's positive attitude shines through in all his good work and kindness he shares with his neighbors.



Rolando takes wonderful care of the flowers adorning the entrance to Maplewood Townhouses.





## Privacy Rights Handbook

The South Dakota Office of Attorney General, Division of Consumer Protection, provides a free Privacy Rights Handbook to help consumers make informed decisions to protect their privacy. This 36 page booklet provides information on areas such as financial privacy, identity theft, Social Security Number privacy, security breaches, medical identity theft and debt collectors. For more information or to request a copy please contact your STAR Coordinator or the Division of Consumer Protection at 1-800-300-1986.



## Royalty Crowned at The Sherman



On February 16, 2015, the Sherman celebrated Valentine's Day and President's Day with a lunch provided by the Resident Council and Aberdeen Housing. Sparkling cider and cupcakes were served while the Council counted the ballots for the Sherman King and Queen. DuWayne Newell was crowned king and Jamie Pence was crowned this year's queen. Residents also enjoyed a few games of bingo.

## Energy Assistance Program

The Energy Assistance Program assists in paying the heating bills of qualifying individuals. Eligibility and assistance amounts are based on the number of people in the home, the income of everyone in the home, location of the residence and the type and cost of heating used in the home.

Income guidelines for the next heating season were not available as of the printing of this newsletter. Your STAR Coordinator will provide that information when it is available.

If you received energy assistance last season, the Office of Energy Assistance in Pierre will be mailing out a preprinted application to you. When you receive your application, or if you are filling out a new application, you will be asked to provide proof of your last three month's income. Please have this information available if you would like your STAR Coordinator to help you fill out the application.

Energy Assistance funds are distributed on a first come, first served basis. The heating season runs from October to May. If you have questions about the Energy Assistance program please visit with your STAR Coordinator or contact the Office of Energy Assistance at 1-800-233-8503.

Source: South Dakota Department of Social Services

## Sales & Property Tax Refund for Senior Citizens & Citizens with Disabilities



Sales & Property Tax Refund for Senior Citizens and Citizens with Disabilities Program offers seniors and those with disabilities a one-time refund of property or sales taxes. Applications are accepted from May 1 to July 1, 2015. If you received a refund check last year, an application will automatically be sent to you this spring.

Refunds are based on your income. The Department of Revenue begins issuing refund checks at the end of August. To be eligible you must meet all of the following criteria:

- You must have been at least 65 years old on or before January 1, 2014, OR disabled during any part of 2014. Disabled means you have been qualified to receive Social Security Disability benefits or Supplemental Security Disability Benefits during some part of 2014, or you are a veteran with a rated disability of 60 percent or greater.
- You must have been a South Dakota resident during all of 2014.
- You must meet annual income requirements. The one person household income limit is under \$11,670. The multiple member household combined income limit is under \$15,730.

Visit with your STAR Coordinator for an application or more information about the Tax Refund, or contact the Department of Revenue, Property Tax Division at 1-800-829-9188 or email [specialt@state.sd.us](mailto:specialt@state.sd.us).

Source: South Dakota Department of Revenue



## Flogstad Tackles Rental Issues

Renters and landlords across South Dakota now have an additional place to turn when disputes arise, especially those involving Fair Housing Act concerns.

Paul Flogstad of Sioux Falls has contracted with the South Dakota Housing Development Authority to act as a statewide Fair Housing Ombudsman. His official start date is April 1, which coincides with the beginning of Fair Housing Month. He will work with landlords, tenants and agencies across South Dakota.

Under the Fair Housing Act of 1968, it is illegal to discriminate in housing against anyone based on race, color, religion, sex, disability, familial status or national origin. Flogstad said disputes often arise when landlords or tenants don't understand their rights and responsibilities. Flogstad is available to answer questions from landlords, property managers and renters.

When a dispute arises, Flogstad will act as a mediator to help find an answer that both parties can accept. If the dispute is unresolved, and it potentially involves housing discrimination, Flogstad forwards the case to the U.S. Department of Housing and Urban Development.

Flogstad stressed that he is not an advocate for either landlord or tenant. Through the years, he has dealt with a variety of issues such as assistive animals for people with disabilities, tenant harassment, sexual harassment and discriminatory practices in the way prospective renters are treated. "Even the thinnest pancake has two sides," stated Flogstad.

For questions about Fair Housing in South Dakota, contact Flogstad at 1-877-832-0161.

## The difference between a flower and a weed is. . . a judgement!

Submitted by Genine Borah, Four Winds

P E P P E R R E G N I G U X B  
 A K N O I N O Q E M V I G Y E  
 R X A L F E G A S P R I X P G  
 S I G E I I M V G I F N I A O  
 L B B C G L C Y S L E F E R N  
 E A V O J L Y U H U N W B S I  
 Y S F R V I I I S T I K Y L A  
 I I M N E E R G R E V E R E Q  
 G L I A E N I M S A J B M Y H  
 E E N X M J O D D R Y E G M M  
 I V T F V L P I N E E G G W A  
 V I F E N N E L N Y S N X G P  
 Y L D R E M I L V V O T I E L  
 X O J L K G Y I I H R I Q V E  
 C A C T U S A E A Z A L E A P

### All Kinds of Plants

You don't need a green thumb to search for all kinds of plants in the puzzle.

- |           |         |         |
|-----------|---------|---------|
| azalea    | fig     | onion   |
| basil     | flax    | parsley |
| begonia   | ginger  | pepper  |
| cactus    | iris    | pine    |
| corn      | ivy     | rose    |
| dill      | jasmine | sage    |
| evergreen | lily    | thyme   |
| fern      | maple   | tulip   |
| figus     | mint    | vine    |





## Taking a Trip? Pack your Medical History

If you are making plans to visit family this year, the top item to pack should be your personal health record. Today's technology makes it possible to create an electronic health record. However, if you are not tech-savvy, creating a notebook or folder with pertinent health information is better than having no information

when you are away from home.

Records to include in your traveling health record should include medical records, digital image studies, vaccines, medications and other special health conditions. Having all these items provides easy access in the case of emergency or for added convenience when seeing physicians in other cities. When emergencies happen, it is important to have medical records on hand immediately for a prompt and accurate medical diagnosis.

Under the Health Insurance Portability and Accountability Act (HIPAA), all medical providers are required to allow patients access to their medical records and to obtain copies of all medical records – including x-ray and other images, blood work, allergic reactions and more. The cost of printing or mailing documents is not covered, but doctors' offices are not allowed to charge for access to the records. Many larger health organizations will have a medical records or health information department at which to request access to medical records at one convenient location.

Personal health records should be updated with the most current medical studies such as colonoscopies and mammograms. Each time a new study is taken, it should be added to your traveling health record so that all physicians and medical professionals have access to the most up-to-date health information.

Before traveling, leave contact information for physicians and medical specialists with family or close contacts. This provides first responders an additional method to access personal health information in the event of an emergency.

Source: [seniorjournal.com](http://seniorjournal.com)

## Planning a Family Reunion

*In today's hyper-hectic world, gathering far-flung family is no small feat. While arranging a family reunion may be challenging, it can also be fun and rewarding.*

Family reunions require careful planning, the first step of which is determining interest. Rally other family members and find out how they feel about getting together.



Once you have determined your family is excited about a reunion, form committees to help with planning. Include a cross-section of ages on the committees to engage as many family members as possible in the event.

Before choosing a date and location you will need to decide where and when to hold the reunion. What time of year works best for the majority of family members? How will

you handle food? What activities will create the best atmosphere? Committees can be assigned to handle invitations, entertainment, accommodations, theme and budget.

Understand that you will never be able to make everyone happy. It is likely not everyone who is invited will be able to attend. You can't pull off a perfect reunion, but you can create a fun and memorable event.

Numerous websites help with planning reunions. Consider setting up a Facebook page dedicated to the event. Facebook is a simple, fun and easy tool for communicating. It is a great way to engage younger family members.

Source: [MetLife Life Advise](http://MetLifeLifeAdvise.com)

## Comparing the Differences Inpatient vs. Outpatient Hospital Status

If you have a medical situation that requires hospitalization, the last thing that may occur to you is to ask about your status at the hospital. Patients assume that if they are staying in the hospital they are considered an inpatient, but this is not always true. The last few years have brought about changes in the way a hospital classifies a patient's status. Doctors are now more frequently considering patients as outpatients that are under "observation status." This means that even though you may be staying overnight in the hospital, technically you are not admitted as an inpatient. Your hospital status can have a large impact on how insurance will cover the hospital expenses and a stay in a skilled nursing facility, if necessary.



There are a few important differences between inpatient and outpatient status. You are an inpatient starting the day a doctor's order formally admits you to the hospital. The day before you are discharged is your last inpatient day.

Medicare updated their policies in 2014 to clarify that a Medicare beneficiary must stay two midnights as an inpatient, also called the "Two-Midnight Rule," to qualify for skilled nursing facility (SNF) coverage under Medicare Part A. Always ask your doctor or hospital staff if Medicare will cover your SNF stay.

You are an outpatient if you are getting emergency department services, observation services, outpatient surgery, lab tests or X-rays and the doctor has not written an order to admit you to the hospital as an inpatient. In these cases, you are an outpatient even if you spend one midnight in the hospital.

If you do not have a two midnight stay as an inpatient and you need care after you are discharged from the hospital, ask if you can get care in other settings such as home health or in a SNF. There are other programs such as Medicaid or Veterans' benefits that can cover your skilled nursing facility care.

If you are an inpatient, Medicare Part A, which is your hospital insurance, covers inpatient

hospital services. You pay a one-time deductible for all of your hospital services for the first 60 days you are hospitalized. Medicare Part B, which is your medical insurance, covers most of your doctor services when you are an inpatient. You pay 20 percent of the Medicare-approved amount for the doctor services after paying the Part B deductible. Your portion of the payment may vary if you have Medicaid, a Medicare Supplement Plan or a Medicare Advantage Plan.

If you are an outpatient, Medicare Part B covers outpatient hospital services. Generally, this means you pay a copayment for each individual outpatient hospital service. The amount will vary by service. Part B also covers most of your doctor services and you pay 20 percent of the Medicare-approved amount after paying the Part B deductible. Prescription and

over-the-counter drugs you get in an outpatient setting, such as in the emergency room, are sometimes called "self-administered drugs," and are not usually covered by Part B. Many hospitals have policies that do not allow patients to bring prescriptions or other drugs from home. If you have Medicare Part D, which is your prescription drug coverage, these drugs may be covered under certain circumstances and you will probably need to pay upfront and submit a claim be reimbursed.

The doctor or provider determines the medical necessity of your stay and if you disagree with their decision while you are still at the hospital you have a right to file an appeal. The hospital is required to give you a "Special Notice from Medicare" during your stay that discloses your appeal rights. By calling the number for South Dakota's Beneficiary and Family Centered Care Quality Improvement Organization, KEPRO, listed on that notice you can begin the appeal process. The staff at KEPRO, consisting of physicians and social workers, will review the decision and determine if it was appropriate for your condition. To file a quality of care complaint or appeal a discharge from a hospital, skilled nursing facility, home health agency or hospice, call KEPRO toll-free at 1-844-430-9504. Visit [www.keproqio.com](http://www.keproqio.com) to learn more about their free services.

Source: [Centers for Medicare & Medicaid Services](http://CentersforMedicareandMedicaidServices.com)



# Health Topics in the News

## Measles



There has been a lot of information in the media lately over the reappearance of measles, which was thought to have been eradicated in the United States. Measles is actually a very old disease, having first been identified in the 9th century by a Persian doctor. Throughout the centuries, more research was done on measles and it was determined that the illness was very contagious. Prior to 1963, when the first vaccination for the measles was available, between 3 and 4 million people in the United States alone were infected with measles every year.

Measles is considered to be highly contagious. The virus lives in the nose and throat mucus of an infected person and is spread easily through coughing and sneezing. Measles usually appears in an infected person 7 to 14 days after they have been exposed. The illness generally begins with a high fever, cough, runny nose and watery eyes. Then 2 to 3 days later, tiny white spots begin to form inside the mouth. Three to 5 days later, a bright red rash develops on the face and hairline area, spreading down the neck, torso, arms, legs and feet. After the appearance of the rash, a person could develop a fever of 104° or higher. The illness would last for several days before symptoms would subside. Some people may suffer from severe complications, such as pneumonia (infection of the lungs) and encephalitis (swelling of the brain), which could lead to death.

In 1968 it was decided that the measles vaccination could be combined with the vaccination for mumps and rubella, creating the vaccination we commonly know today as MMR. Once the MMR vaccination became commercially available, the Center for Disease Control (CDC) set out to eradicate measles from the United States. The CDC promoted vaccination amongst newborns and children, and also advised adults to get the vaccination. It was also recommended that everyone receive a second booster shot a few years later. Thanks to the MMR vaccination, in 2000 the CDC officially declared measles had been eliminated from the United States.

Since measles was eradicated 15 years ago in the United States it was not on health professionals radars until a few months ago when there was a sudden outbreak of measles at Disneyland in California. Due to parents opting out of vaccinating their children, the disease spread like wildfire and has now been reported in 14 states, including South Dakota. The resurgence of the virus has caused health professionals to review if and when adults should receive a booster shot.

Health professionals state that if you were born before 1957, it is highly likely that you had the measles. Having the measles appears to create immunity from ever getting them again. People who were born after 1957 most likely received the first version of the vaccine which was given between 1963 and 1967. That version was not very effective. The 1968 version of the MMR vaccine is considered the most effective and is still used today. In 1989 it became standard practice that people receive two doses of the vaccine. If you have only ever received one dose of the vaccine, you may want to visit with your physician to determine if it would be appropriate to get vaccinated again.

Source: [www.cdc.gov](http://www.cdc.gov)

## Antibiotic Resistance

Throughout the past few years there has been much discussion in the medical community about the growing problem of antibiotic resistance. Antibiotic resistance is described as the ability of microbes to resist the effects of drugs. This means that germs are not killed by antibiotics and their growth is not stopped. Although some people are at greater risk than others for antibiotic resistance, no one can completely avoid the risk of antibiotic-resistant infections. Patient visits to a doctor's office for the purpose of getting a prescription for antibiotics has increased drastically over the past several years. Patients will often request an antibiotic to treat things like the common cold or the flu, when in fact, antibiotics will not help cure these viral illnesses any faster.

Antibiotics have been lifesaving to millions of people throughout the years who have experienced illness. However, according to the Center for Disease Control (CDC), up to 50 percent of the time antibiotics are not optimally prescribed, often prescribed when not needed, given in an incorrect dosage or for an incorrect duration. This means that a patient might be prescribed an antibiotic for an illness that can't be cured with that medication.

Many people have the misconception that an antibiotic can cure most minor illnesses when in fact, antibiotics only work against infections caused by bacteria, fungi and certain parasites. They do not work against infections caused by viruses. Viruses are what cause colds, the flu and most coughs and sore throats.

How do you know when you need to visit your doctor for an antibiotic prescription so you can feel better? The answer depends on what is causing your infection. The following are some basic guidelines:

- **Colds and Flu.** Viruses cause these illnesses. They can't be cured with antibiotics.
- **Cough or Bronchitis.** Viruses almost always cause these conditions. However, if you have a problem with your lungs or an illness that lasts a long time, bacteria may actually be the cause. Your doctor may prescribe an antibiotic.

• **Sore throat.** Most sore throats are caused by viruses and don't need antibiotics. However, strep throat is caused by bacteria. Your doctor can determine if you have strep throat and can prescribe an antibiotic.

• **Ear infections.** There are several types of ear infections. Antibiotics are used for some (but not all) ear infections.

• **Sinus infections.** Antibiotics are often used to treat sinus infections. However, a runny nose and yellow or green mucus do not necessarily mean you need an antibiotic.

The CDC says that patients not taking their prescribed antibiotics correctly is a large problem. If your doctor prescribes an antibiotic for you, take all of the medicine, even if you feel better after a few days. This reduces the chance that there will be any bacteria left in your body that could potentially become resistant to antibiotics.

Never take antibiotics without a prescription. If, for whatever reason, you have antibiotics leftover from a time when you were previously sick, do not take them unless your doctor tells you it's okay. The leftover antibiotics may not work on whatever is making you sick. If they do work, there probably will not be enough leftover medicine to completely kill all the bacteria in your body. Not only will you not get better, but this increases the chance that the bacteria will become resistant to antibiotics.

It is important to remember that you can prevent catching infections in the first place by practicing good hygiene. Wash your hands with soap and water, especially after using the restroom and before eating. Don't touch your nose, eyes or mouth unless you have clean hands. Germs spread easily into the body through exposed areas.

If you have additional questions about antibiotic resistance, please contact your doctor who will be able to answer your questions.

Sources: [www.cdc.gov](http://www.cdc.gov) and [www.familydoctor.org](http://www.familydoctor.org)