Mental Health and Suicide Risks in Later Life: Prevention and Early Interventions Resources
Thank you for attending Central Maryland Area Health Education Center Mental Health and Suicide Risks in Later Life: Prevention and Early Interventions.

CMAHEC has a variety of programs designed to provide important health education and training in Central Maryland. These programs include three conferences a year focusing on various issues facing older adults. In addition, CMAHEC hosts several programs a year that introduce healthcare students to topics related to geriatrics and gerontology. Central Maryland AHEC also conducts the AHEC Scholars program as part of a the national HRSA initiative to offer inter-professional learning opportunities to advance students’ clinical knowledge and skills while assisting them in the development of the inter-professional competencies. For more information about CMAHEC visit our website https://centralmarylandahec.org/

Link to Mental Health and Aging Guidebook

Impact of COVID-19 on Mental Well-Being of Older Adults

One-Quarter of Older Adults Reported Anxiety or Depression Amid the Coronavirus Pandemic, while Some Groups Reported Higher Rate

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Overall, 65 and older</td>
<td>24%</td>
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<tr>
<td>Live Alone</td>
<td>27%</td>
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<tr>
<td>Women</td>
<td>29%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>33%</td>
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<tr>
<td>Income under $25,000</td>
<td>37%</td>
</tr>
<tr>
<td>Fair or Poor Health</td>
<td>48%</td>
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</tbody>
</table>

NOTE: Analysis is among adults age 65 and older. Self-reported health status. Adults of Hispanic origin may be of any race, but are categorized as Hispanic for this analysis. All other groups are non-Hispanic.

MEDICARE TELEMEDICINE HEALTH CARE PROVIDER FACT SHEET

Note: Effective for services starting March 6, 2020 and for the duration of the COVID-19 Public Health Emergency, Medicare will make payment for Medicare Telehealth Services furnished to patients in broader circumstances.

### Summary of Medicare Telemedicine Services

<table>
<thead>
<tr>
<th>TYPE OF SERVICE</th>
<th>WHAT IS THE SERVICE?</th>
<th>HCPCS/CPT CODE</th>
<th>Patient Relationship with Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEDICARE TELEHEALTH VISITS</td>
<td>A visit with a provider that uses telecommunication systems between a provider and a patient.</td>
<td>Common telehealth services include:</td>
<td>For new* or established patients.</td>
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<td></td>
<td></td>
<td>• 99201-99215 (Office or other outpatient visits)</td>
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<td></td>
<td></td>
<td>• G0425-G0427 (Telehealth consultations, emergency department or initial inpatient)</td>
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<td></td>
<td></td>
<td>• G0406-G0408 (Follow-up inpatient telehealth consultations furnished to beneficiaries in hospitals or SNFs)</td>
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<td></td>
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<td>For a complete list: <a href="https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes">https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes</a></td>
<td></td>
</tr>
<tr>
<td>VIRTUAL CHECK-IN</td>
<td>A brief (5-10 minutes) check in with your practitioner via telephone or other telecommunications device to decide whether an office visit or other service is needed. A remote evaluation of recorded video and/or images submitted by an established patient.</td>
<td>• HCPCS code G2012</td>
<td>For established patients.</td>
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<td></td>
<td></td>
<td>• HCPCS code G2010</td>
<td></td>
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<tr>
<td>E-VISITS</td>
<td>A communication between a patient and their provider through an online patient portal.</td>
<td>• 99421</td>
<td>For established patients.</td>
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</table>
Resources: Depression and Suicidal Ideation

Suicide Prevention Resource Center

https://www.sprc.org/covid19
1-800-276-8255

The Suicide Prevention Resource Center (SPRC) has compiled a selection of web pages and information sheets on mental health and coping with the effects of COVID-19.

Howard County Office on Aging and Independence

The Howard County Office on Aging and Independence offers many programs and services that are accessed through Maryland Access Point (MAP) at 410-313-1234 or www.howardcountymd.gov and click on “seniors”. A directory of senior resources can be obtained at any Senior Center and the Howard County Department of Community Resources and Services/Office on Aging and Independence by calling MD Access Point (410-313-1234).

Maryland Home and Community Based Services for Older Adults

Home and Community Based Services are offered to older adults and individuals with disabilities as part of the Medicaid Waiver Program. The Medicaid Waiver enables older adults to remain in the community setting even though the individual meets medical eligibility criteria for placement in a nursing home facility. The Medicaid Waiver allows those services usually covered by Medicaid only in a nursing home setting, to be provided to eligible individuals in their own home or in assisted living facilities in the community. Assisted living and in-home services for individuals are available for those who meet Medicaid Waiver eligibility. There may be an extensive waiting period. You should contact the Howard County Office on Aging and Independence. For this and for more information on the Medicaid Home and Community Based Waiver Program, contact the MAP (Maryland Access Point) office at 410-313-1234.

Suicide Hotline

1-800-SUICIDE (1-800-784-2433) or 410-749-9424

Provides counseling for suicide prevention

Help Information Guide for General Public in Maryland

https://app.smartsheet.com/b/publish?EQBCT=a8014997f3df4ef6b1cb84b97508f91

(National Helpline Database)

SAMHSA National Helpline

1-800-662-HELP (4357)

Operated 24/7, the Substance Abuse and Mental Health Services Administration (SAMHSA) National Helpline provides information and referrals if someone is facing mental health and/or
substance use issues. The confidential service does not provide counseling, but can direct you to helpful resources, treatment facilities, and support groups in your area.

**National Suicide Prevention Lifeline**

1-800-273-TALK (8255)

This national toll-free number—available 24/7—connects to local crisis centers where a trained worker will provide confidential support to people who are experiencing suicidal thoughts or emotional distress.

**National Alliance on Mental Illness (NAMI) HelpLine**

1-800-950-NAMI (6264)

The NAMI HelpLine is a nationwide peer-support service, not a crisis line, but it does provide information, resource referrals, and community support if you or someone you know are living with a mental health condition. Note that NAMI is not currently taking calls due to the coronavirus pandemic.

**Online Provider Finder Resources**

**Anxiety and Depression Association of America: Find a Therapist**

[https://members.adaa.org/search/custom.asp?id=4685](https://members.adaa.org/search/custom.asp?id=4685)

This tool can search locations by city, location (state or province), or country. To return the best results you must spell out the state or province name in which you are looking (e.g., Maryland v. MD). You may also search by disorders treated or treatment options (including ‘Teletherapy’ or ‘Phone Consultations’).

**Behavioral Health Treatment Services Locator**

[https://findtreatment.samhsa.gov/](https://findtreatment.samhsa.gov/)

This is the Behavioral Health Treatment Services Locator, a confidential and anonymous source of information for persons seeking treatment facilities in the United States or U.S. Territories for substance use/addiction and/or mental health problems.

**Maryland Department of Mental Health Behavioral Health Administration Covid-19 Telehealth Guidance**

[https://telebehavioralhealth-maryland.hub.arcgis.com/](https://telebehavioralhealth-maryland.hub.arcgis.com/)

SAFE: Stop Abuse of Elders at Chana 410-234-0030. Barbara Korenblit at Chana Korenblit@associated.org
National Council on Aging and Substance Abuse and Mental Health Services Administration: Issue Briefs and videos on multiple issues of late life behavioral health

https://www.ncoa.org/center-for-healthy-aging/behavioral-health/older-americans-behavioral-health-series/#intraPageNav0
Suicide In Later Life

Thoughts of suicide are usually associated with feelings of:

- hopelessness
- worthlessness
- being a burden to others
- loneliness
- emotional, mental, or physical pain
- guilt
- disinterest in activities
- disinterest in people
- helplessness
- despair

Medications, certain illnesses, and common late-life stressors may raise the risk of suicidal thoughts.

It is natural to experience despair and have thoughts about your own mortality. But sometimes mental, emotional, and physical pain become so deep and overwhelming that death begins to seem like a compelling escape. If you or someone you know feels suicidal, do not ignore the signs or give up. There are numerous ways to address deep pain, relieve distress, and get on a path to feeling better.

If you are having thoughts of suicide or feelings of distress:

Know that you are not alone. Your life matters and people care about how you are feeling. As hard as it may seem, reaching out to talk to someone can bring great relief. Here are some things to try:

- Contact a trusted friend or family member with whom you can honestly and openly share your thoughts and feelings. Ask for their support and let them help you.
- Talk to your doctor, a health professional, or a member of the clergy and ask for their help.
- Get connected to free, 24/7 support from a trained counselor at the Maryland Helpline. Call (2-1-1, press 1), text your zip code to 898-211, or visit 211MD.org.

FACT:

1 in 5 older adults will experience a mental health condition that can lead to suicidal thoughts and feelings.
If you are concerned that someone is feeling distressed and possibly having thoughts of suicide:

- Talk to the person in private. Remain calm and comforting.
- Invite them to have an honest conversation about how they’re feeling.
- Listen to their story without judgement.
- Take the person seriously. Avoid debating the value of life, minimizing problems, or giving advice.
- Ask directly if they’re thinking about suicide.
- Tell the person you care and let them know they are not alone.
- Get connected to free, 24/7 support from a trained counselor at the Maryland Helpline. Call (2-1-1, press 1), text your zip code to 898-211, or visit 211MD.org.

Talking about suicide saves lives.
Suicide can be a very difficult subject to talk about. But it’s important to put fears aside, because talking about suicide saves lives. In fact, many people who have considered suicide report feeling relieved when they were able to talk about their despair.

We know from research that suicide rates are very high among older adults, who are less likely to talk about their intentions and less likely to survive a suicidal act. Take any expression of suicide very seriously. There is a common myth that talking about suicide can make someone begin to feel suicidal. This is not true. Trust your instincts. If you sense someone is distressed or thinking about suicide, it’s time to talk about it.

For more information, go to the American Foundation for Suicide Prevention’s website at afsp.org or the Suicide Prevention Resource Center at sprc.org/populations/older-adults.

For more information about late life mental health, please visit Older Adults: Vibrant Minds at mdaging.org.
Regardless of age, healthy brains...

- learn new information,
- create and recall memories,
- and adapt to changes and challenges.

Unless a person is making a purposeful change, their character traits and personality remain steady through life. A significant or sudden shift in these areas can indicate a need for assessment.

Research tells us that most older adults report greater satisfaction with life and that wisdom and insight actually improve with age.

The aging process can...

- require reinforcement or repetition when committing new information to memory,
- slow down the processing time for calculations, recollection of information and multi-tasking (especially under stress),
- increase vulnerability for brain illness and injury resulting from:
  - falls,
  - medication side effects,
  - alcohol use,
  - hearing, vision or other sensory changes,
  - isolation,
  - and/or stress.

Tips for a Healthy Brain

Eat nutritious foods: Healthy brains depend on the vitamins, minerals, fats, and proteins found in healthy foods. Hydration is just as important as nutrition, so make sure to drink plenty of water every day.

Keep your body moving: Regular exercise boosts mood, memory and motivation. Your brain needs the blood flow and oxygen that comes from serious exercise (even when you are seated).

Practice mental fitness: Our brains thrive on challenges, activities and a balance of stimulation and rest. Stay mentally fit by learning new skills, building your interests, practicing positive thinking and making sure you get plenty of sleep.

Stay engaged: Stay involved in your community and develop relationships with old and new friends. Connect with people, pets, places, and interests that energize you.

Learn to manage stress: We can learn new coping skills, flexibility and resiliency at any age which is important when life takes challenging turns. Expand your support network and ask for help when you need it.

Visit mdaging.org to learn more about brain health and aging, and order a free guidebook with further information and resources.

Did you know?

Keeping your brain healthy as you age

A publication of the Mental Health Association of Maryland
Risk factors

Brains do not become unwell simply by growing older. However, many common age-related changes can cause stress and put our brains at risk for becoming unwell. Some of these risk factors include:

- sensory changes, such as hearing and vision loss,
- pain and functional limitations,
- chronic health conditions,
- isolation and loneliness,
- significant loss,
- and use of medications.

Feeling unwell is not uncommon or something to be ashamed about: one in four older adults experience depression, anxiety, dementia, substance use problems, chronic stress or other distressing brain condition. For those who experienced these problems earlier in life and recovered, the risk factors listed above can potentially cause symptoms to return.

Symptoms can include:

- worsening health conditions and pain,
- disturbances in sleep or appetite,
- difficulty focusing and concentrating,
- loss of interest or withdrawal from preferred activities and people,
- moodiness, irritability, or negativity,
- changes in behavior, quality of thought or quality of life.

Recovery happens

Whether you've lived with a brain health condition for years or are experiencing one for the first time, it is possible to feel well again.

- Get screened: Accurate identification of a brain health problem is an important step towards recovery. Tell your health professional about any problematic symptoms and ask them to use a screening and assessment tool for older adults.

- Get treatment: Older adults benefit from a variety of treatment types, alone or in combination, depending on the illness and severity of the condition. Treatment options include: nutrition, meditation, expressive therapies (art, music, movement, drama), talk therapy, peer support, faith-based approaches, medication, clinical treatment, and more.

- Develop resiliency: Positive coping strategies and resiliency are key skills for "successful" aging. They can be learned at any age and gained through peer support, which occurs when people share experiences, strength, hope, and a commitment to recovery.