



Reaching Out:

Connecting Religion, Spirituality and Mental Health in our Faith Communities

Breakout Session B:

Community Resources: GPS for the pastoral caregiver

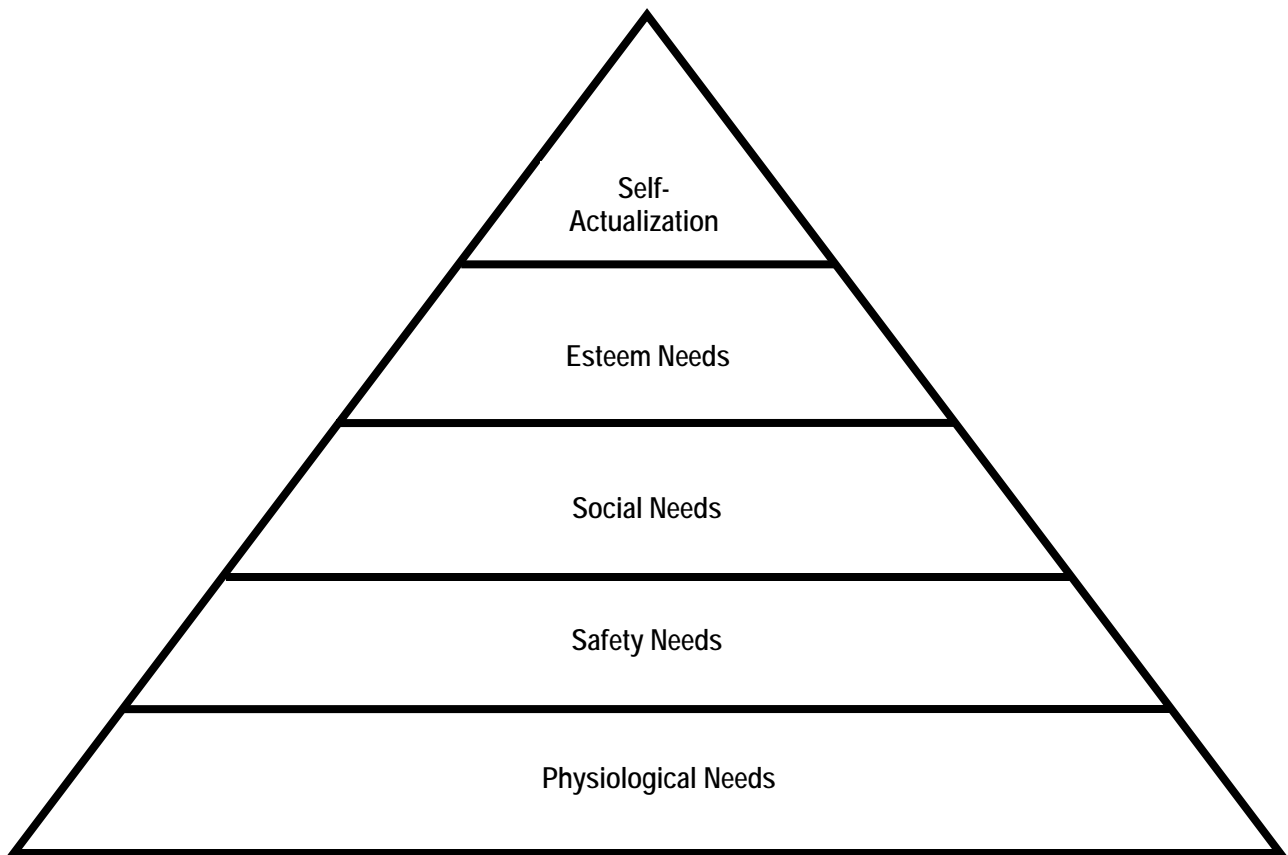
Jonna Pestka is the manager of the social services department at Rogers Memorial Hospital, coordinating the more than 70 staff who work closely with referring professionals to communicate treatment progress and to coordinate the discharge plan for continuing care. Jonna has nearly 25 years of experience working with people who have a mental illness and substance use disorders in both inpatient and outpatient settings. She received her master's degree in counseling and development from the University of Wisconsin – Whitewater. In addition to being credentialed as a Licensed Clinical Social Worker, Jonna is also a certified substance abuse counselor and an intermediate clinical supervisor. Jonna serves as board president of the Mental Health Association 211/First Call for Help in Waukesha County.

Cara Hansen is the information and assistance coordinator for Mental Health America of Wisconsin (MHA). On a local and statewide level, MHA serves individuals, schools, workplaces, senior centers, support groups and community organizations in Milwaukee County and throughout Wisconsin by promoting the rights and well being of people with mental disorders. In her current role, Cara oversees the agency's information and referral to mental health and wellness resources, primarily in the Milwaukee area. Prior to her current position, Cara served as the community outreach and education coordinator for MHA, providing workshops, consultation services and trainings for audiences across the state to raise awareness and reduce the stigma associated with mental illness.

Community Resources: GPS for the pastoral caregiver

Jonna Pestka, LCSW, Rogers Memorial Hospital
Cara Hansen, Mental Health America of Wisconsin

Maslow's Hierarchy of Needs



Types of mental health professionals

Which Mental Health Professional Is Right For Me?

There are many types of mental health professionals. Finding the right one for you may require some research. Often it is a good idea to first describe the symptoms and/or problems to your family physician or clergy. He or she can suggest the type of mental health professional you should call.

Types of Mental Health Professionals

Psychiatrist--medical doctor with special training in the diagnosis and treatment of mental and emotional illnesses. Like other doctors, psychiatrists are qualified to prescribe medication. **Qualifications:** should have a state license and be board eligible or certified by the American Board of Psychiatry and Neurology.

Child/Adolescent Psychiatrist--medical doctor with special training in the diagnosis and treatment of emotional and behavioral problems in children. Child/Adolescent psychiatrists are qualified to prescribe medication. **Qualifications:** should have a state license and be board eligible or certified by the American Board of Psychiatry and Neurology.

Psychologist--Psychologist with a doctoral degree in psychology from an accredited/designated doctoral program in psychology and two years of supervised professional experience, including a year long internship from an approved internship. Trained to make diagnoses and provide individual and group therapy. **Qualifications:** and for some psychologists, credentialing as a health service provider in psychology.

Clinical Social Worker--Counselor with a master's degree in social work from an accredited graduate program. Trained to make diagnoses and provide individual and group counseling. **Qualifications:** state license; may be member of the Academy of Certified Social Workers.

Licensed Professional Counselor--Counselor with a master's degree in psychology, counseling or a related field. Trained to diagnose and provide individual and group counseling. **Qualifications:** state license.

Mental Health Counselor--Counselor with a master's degree and several years of supervised clinical work experience. Trained to diagnose and provide individual and group counseling. **Qualifications:** certification by the National Academy of Certified Clinical Mental Health Counselors.

What You Need to Know...



Certified Alcohol and Drug Abuse Counselor--Counselor with specific clinical training in alcohol and drug abuse. Trained to diagnose and provide individual and group counseling. **Qualifications:** state license.

Nurse Psychotherapist--A registered nurse who is trained in the practice of psychiatric and mental health nursing. Trained to diagnose and provide individual and group counseling. **Qualifications:** certification, state license.

Marital and Family Therapist--A counselor with a master's degree, with special education and training in marital and family therapy. Trained to diagnose and provide individual and group counseling. **Qualifications:** state license

Pastoral Counselor--Clergy with training in clinical pastoral education Trained to diagnose and provide individual and group counseling. **Qualifications:** Certification from American Association of Pastoral Counselors.

You Make the Call to the Mental Health Professional...Now What Do You Do?

Spend a few minutes talking with him or her on the phone, ask about their approach to working with patients, their philosophy, whether or not they have a specialty or concentration (some psychologists for instance specialize in family counseling, or child counseling, while others specialize in divorce or coping with the loss of a loved one.) If you feel comfortable talking to the counselor or doctor, the next step is to make an appointment.

On your first visit, the counselor or the doctor, will want to get to know you and why you called him or her. The counselor will want to know-- what you think the problem is, about your life, what you do, where you live, with whom you live. It is also common to be asked about your family and friends. This information helps the professional to assess your situation and develop a plan for treatment.

If you don't feel comfortable with the professional after the first, or even several visits, talk about your feelings at your next meeting; Don't be afraid to contact another counselor. Feeling comfortable with the professional you choose is very important to the success of your treatment.

www.mhawisconsin.org

Medicare and Medicaid

What is the difference between Medicare and Medicaid?

While Medicaid and Medicare sound similar, they are in fact very different programs. One of the biggest differences is Medicaid is a state governed program and Medicare is a federal governed program. Here are some other differences:

Medicaid is for low income:

- Pregnant women
- Children under the age of 19
- People 65 and over
- People who are blind
- People who are disabled
- People who need nursing home care

Application for Medicaid is at the State's Medicaid agency.

Medicare is for:

- People 65 and over
- People of any age who have kidney failure or long term kidney disease
- People who are permanently disabled and cannot work

Medicare is applied for at the local Social Security office.

Some people qualify for both Medicaid and Medicare, Medicaid is sometimes used to help pay for Medicare premiums. People who qualify for both programs are called 'dual eligible'.

What Is Medicare? ★ ★ ★

Medicare is health insurance for people age 65 or older, under age 65 with certain disabilities, and any age with permanent kidney failure (called “End-Stage Renal Disease”). You must have entered the United States lawfully and have lived here for 5 years to be eligible for Medicare.

Medicare has two parts:

Medicare Part A (Hospital Insurance)

helps pay for inpatient care you get in a hospital, skilled nursing facility, or hospice, and for home health care if you meet certain conditions. Most people don't have to pay a monthly premium for Medicare Part A because they or a spouse paid Medicare taxes while working in the United States. If you don't automatically get premium-free Part A, you may still be able to enroll, and pay a premium.

Medicare Part B (Medical Insurance)

helps pay for medically-necessary doctors' services and other outpatient care. It also pays for some preventive services (like flu shots) to help keep you healthy and some services that keep certain illnesses from getting worse. Most people pay the standard monthly Medicare Part B premium (\$96.40 in 2008).

You have choices about how you get your Medicare coverage. Here are the two main options:

Original Medicare

Managed by the Federal government, it provides your Medicare Part A and Part B coverage. (You can choose to have either one, or both parts.) You have to pay a deductible, and you are usually charged coinsurance each time you get services.

- You can add Medicare prescription drug coverage (Part D) by joining a Medicare Prescription Drug Plan. Costs and benefits vary by plan.
- You can also choose to buy a Medigap (Medicare Supplement Insurance) policy to help pay some of the health care costs' “gaps” (like copayments, coinsurances, and deductibles).

Medicare Advantage Plans (called Part C)

You must have both Part A and Part B to join one of these plans. The plans provide all of your Part A and Part B services and generally provide additional services. You usually pay a monthly premium, and copayments that will likely be less than the coinsurance and deductibles under Original Medicare. In most cases, these plans also offer Part D prescription drug coverage. These plans are offered by private insurance companies approved by Medicare. Costs and benefits vary by plan.

Note: Help is available. If you have limited income and resources, you may qualify for help paying your Medicare health care and/or prescription drug coverage costs. For more information, call Social Security at 1-800-772-1213, visit www.socialsecurity.gov on the web, or apply at your State Medical Assistance (Medicaid) office.

If you have a question about Medicare or the Medicare health and prescription drug plans in your area, visit www.medicare.gov on the web, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

What Is Medicaid? ★ ★ ★

Medicaid is health insurance available to certain people and families who have limited income and resources. The rules for counting your income and resources (like bank accounts or other items that can be sold for cash) usually depend on which state you live in. Eligibility may also depend on how old you are and whether you are pregnant, whether you are blind or have other disabilities, and whether you are a U.S. citizen or a lawfully admitted immigrant. If a woman's labor and delivery of her child is covered by Medicaid, her baby may be covered for up to 1 year without needing to apply.

Even if you aren't sure whether you qualify, if your income is limited, and if you or someone in your family needs health care, you should apply for Medicaid and have a qualified caseworker in your state look at your situation.

People with Medicaid may also get coverage for services such as nursing home care. Depending on your state's rules, you may also be asked to pay a small part of the cost (copayment) for some medical services. If you qualify for both Medicare and Medicaid, most of your health care costs will be covered.

If you have questions about Medicaid (to find out if you qualify or to sign up), you can call your State Medical Assistance (Medicaid) office for more information. Visit www.medicare.gov on the web. Under "Search Tools," select "Find Helpful Phone Numbers and Websites," or call 1-800-MEDICARE (1-800-633-4227) to get the telephone number. TTY users should call 1-877-486-2048.

BadgerCare

The **BadgerCare** program is a health insurance program that provides health coverage to low-income, uninsured families with children under the age of 19 who are not eligible for Medicaid and who are uninsured.

- *A child whose family has a household income at or below 185% of the federal poverty level (FPL) is eligible for BadgerCare. For a family of three, this works out to an annual income of up to \$30,710, or a monthly income of \$2,559. If your income increases while enrolled, you may be able to remain eligible until your income exceeds 200% of the FPL.*
- *BadgerCare does not impose a pre-existing condition exclusion period. If a family meets the eligibility guidelines, an applicant's pre-existing medical condition does not exclude him from coverage.*
- *BadgerCare provides comprehensive benefits identical to those available under the Medicaid program including doctor visits, hospital care, prescriptions, mental health services and dental care.*
- *If your family income is below 150% of the federal poverty level, you will not pay a premium or co-pay. If it is at or above 150%, you will pay a monthly premium equal to 5% of your family income.*
- *Most BadgerCare families are enrolled in the Wisconsin Medicaid Managed Care Health Insurance Organization program. However, BadgerCare can pay premiums to enroll families into their employer-sponsored health insurance. To qualify for the Health Insurance Premium Purchase (HIPP) program, the employer must pay at least 40%, but less than 80%, of a family premium. Also, the employer-sponsored plan must be cost-effective compared to BadgerCare HMO coverage for the family.*
- *For more information, contact the BadgerCare program at (800) 362-3002 or visit them at <http://www.dhfs.state.wi.us/badgercare/>.*