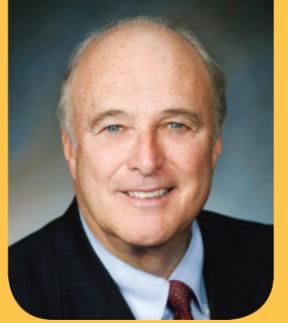


Breaking News



An Urgent Message to Senior Citizens from Butler County Prosecutor Michael T. Gmoser

FRAUD ALERT!

Beginning April 2018, The Center for Medicare and Medicaid Services (CMS) will be issuing new Medicare cards. Your current Medicare number or your social security number will be replaced with a new account number containing eleven digits; a combination of numbers and capital letters only. This process must be finished by April 2019.



BEWARE: Criminals are aware of this changeover and will use it to devise any number of stories OVER THE TELEPHONE to get your social security number. EXAMPLE: A caller may tell you that you can speed up this process by giving them your existing Medicare number. You may even be told that if you do not comply with this request, your benefits could be in jeopardy.

PLEASE UNDERSTAND THAT MEDICARE REPRESENTATIVES WILL NEVER CALL YOU TO ASK FOR YOUR CURRENT OR FUTURE MEDICARE NUMBER.

If you have any doubt or questions, please contact my Community Outreach Director, Susan Monnin, at 513-887-3471. Remember, "FOREWARNED IS FOREARMED!"

Michael T. Gmoser
Butler County Prosecutor

Happy Third Quarter of 2017!

Many of you are probably wondering why I'm wishing you a happy "Third Quarter?" What's the big deal? Some of you may even be thinking what an odd way of beginning the newsletter. So, what is the significance of the third quarter for the Prosecutor's Office? While a third quarter trend in crime is generally not something we track, many of you mark your life by quarters; return on investments or third quarter earnings, third quarter sales goals or the dreaded third quarterly payment of taxes. And if you are retired, it is hard to let go of the fiscal/quarterly marker.

**Q3
2017**

And, as the season quickly approaches, we can't forget about the avid sports fans who may have thought about the third quarter in a football game, maybe when our Bengals turn the game around!

Here, at the Butler County Prosecutor's office, third quarter for the Crimes Against the Elderly Task Force means time for another newsletter.

In past publications, we have utilized most of the space in the newsletter to report and describe scams that target our seniors. While this

remains an important goal, I want to take this opportunity to re-introduce The Butler County Crimes Against the Elderly Task Force and what it means to the seniors of Butler County.

The Elderly Task Force was created in September 2011 by Prosecutor Mike Gmoser to bring together members of law enforcement, the business community and elderly services organizations in an effort to protect and inform the senior citizens of Butler County. Prosecutor Gmoser appointed Gloria Sigman as special assistant prosecutor for elderly crime, both financial and some cases of physical abuse. In addition to an aggressive education and awareness campaign, a Hotline was created for the older adults in the community to report SCAMS, financial and/or physical abuse, and to have access to a live person who will listen to their concerns: that is me!

My name is Susan Monnin and I am the Community Outreach Director for Prosecuting Attorney, Michael T. Gmoser. As part of my responsibilities, I work directly with the Prosecutor to develop and implement community outreach programs. Two very important initiatives are the Crimes Against



the Elderly Task Force and the Prosecutor's Anti-Heroin Initiative.

While I am involved with all facets of the Elderly Task Force, I'd like to bring attention to what I feel is one of the most important tools available to seniors; The SCAM Hotline, 1-888-662-3673. Through the Hotline, I have received many types of calls from not just seniors, but worried family members, friends and neighbors with concerns about their mother, father, grandmother, or older Butler County adults they feel need help; but with nowhere to turn. Many people are not aware of all of the programs available to seniors. Through the work of the Elderly Task Force, we have created a network of individuals and agencies that are utilized referral tools. When a call comes in, sometimes I immediately refer them to Adult Protective Services or another agency; other times, a referral isn't necessary – the caller just needs someone to talk to. Sadly, all too often, seniors tell me they don't want to be a burden on anyone and don't reach out for assistance leaving many of our most respected community members feeling helpless and lonely; the type of vulnerable victim a scammer preys on.

Scam Hotline (1-888-662-3673)

Since 2011, calls to The Hotline have steadily increased and last year, I received 138 calls with referrals that resulted in \$49,515 dollars returned to elderly victims of 'sweepstakes' and 'contractor' scams. Other call-types include:

- requests to verify a contractor's reputation and/or references;
- requests for a referral of a reputable contractor;

- assistance in securing aid for older adults and their families during difficult times;
- consumer questions or complaints;
- what to do about telemarketing calls and harassment;
- how to stop junk mail from being delivered;
- questions about a Power of Attorney.

With the Hotline's development as a successful

tool for seniors and their family members, I want to touch on a couple of the topics that I receive frequent calls about; Power of Attorney and Contractors.



***DISCLAIMER – THE HOTLINE NUMBER IS NOT MONITORED 24/7, SO IF YOU OR SOMEONE NEEDS IMMEDIATE ASSISTANCE PLEASE CALL 911.**

Power of Attorney

Some of the questions I receive on the hotline are more complex than others. Questions related to a Power of Attorney (POA) often times require review of specific details written in the document and cannot be answered until the document is available for review or the information is known; however, some

questions are basic and more straight forward.

Here are some examples:

- If I give someone a POA, does that mean I don't have control over my money anymore?
- Does the POA have to be filed and recorded

anywhere for it to be legal?

- My sister is POA for my parents and I know she is paying for her groceries and other expenses with their money. My parents don't seem to care, but it is wrong! How

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Power of Attorney

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can I get her removed as POA?

- Does my father also need a Medical POA if he has a Living Will?

Because of the many questions I receive about Powers of Attorney, I thought it would be helpful to include some basic responses that should be verified with your attorney. As you all know, I am not a lawyer but I have consulted with attorneys in our office to ensure the accuracy of this information, which can be found in the relevant sections of the Ohio Revised Code Chapter 1337, as well as on the Ohio State Bar Association website.

Powers of Attorney are essential legal documents and should be written with specific directives from the principal, so with this in mind, it is strongly recommended that all powers of attorney and advance directives be prepared and explained, witnessed and notarized with the assistance of, and in the

presence of, an experienced, competent attorney.

This is not advice for just the seniors. As such, it is important that every person of sufficient age and competency at least consider a financial power of attorney, a living will (sometimes referred to as an advance directive) and a health care power of attorney, to ensure that his or her wishes are carried out following a catastrophic illness or injury; and to guarantee that those persons you choose are those who will direct your health care and end-of-life.

A lack of education and failure to be proactive in terms of medical decisions had a direct effect on my family recently. My husband had his knee replaced. The surgery went well and his knee is healing as expected, however, prior to surgery he had nothing in writing about his healthcare directives. When I inquired, my husband explained that during the admission process, the hospital asked

him "something" pertaining to that, but he couldn't remember exactly what. He quickly reminded me that I knew he didn't want to be kept alive in a vegetative state, but as I told him, I had nothing in writing to support that. As a result, we are now completing our healthcare directives so that our family members are not left with the burden of trying to figure out what we would want in an already stressful situation. Thank goodness, my husband's surgery went well and he is recovering!

The information presented is for general use and is not an exhaustive description of the law relating to health care advance directives or the various types of powers of attorney. Nothing in the above mentioned is intended or is to constitute a legal opinion or legal advice on the part of the Butler County Prosecutor's Office.

Let's See What You Know! (Answers on last page)

- living will
- power of attorney
- criminally
- principal
- financial
- medical
- fiduciary
- civilly
- durable healthcare power of attorney
- durable financial power of attorney
- agent
- specifies

1. A _____ is a writing or other record that grants authority to an agent to act in the place of the principal. The agent is the person given the authority to act for the principal under the power of attorney and the agent may also be named the attorney-in-fact – it is the person to which the principal's authority is given. The _____ is the individual who grants authority to an agent in a power of attorney.
2. The two main types of Powers of Attorney are _____ and _____. Note: a power of attorney may also be used to transfer or convey a mortgage, lease or other interest in real property or real estate, but it must be certified under the Ohio Revised Code and filed with the appropriate county authority. There are also other types of POA's.
3. A _____ may be created by one who voluntarily does so and is of sound mind. It can authorize an agent or attorney-in-fact to obtain health care information, communicate with a health care provider and make health care decisions when an attending physician determines that you, as the principal, have lost the capacity to make informed health care decisions. This durable health care power of attorney does not expire unless the principal states in the document an expiration date; except in the case where upon the expiration date, the principal lacks the capacity to make

- informed health care decisions. One who lacks capacity includes an individual who is unable to manage property or business affairs or impairment in the ability to receive and evaluate information or make or communicate decisions.
4. A _____ is a document that expresses a person's desires and preferences about the use or non-use of artificial life-sustaining support if that person becomes terminally ill or permanently unconscious. A living will becomes effective only when you cannot communicate your wishes and are permanently unconscious or terminally ill and it can be changed or revoked by you at any time. It cannot be changed or revoked by anyone but you. According to the legal information provided on the Ohio State Bar Association website, a living will trumps or takes precedence over a health care power of attorney. Many will want to have both a living will and a health care power of attorney because as stated above, a living will only applies in limited end-of-life circumstances, whereas a health care power of attorney differs in that it covers all other situations concerning your medical care when you cannot make health care decisions for yourself. If you choose, your health care power of attorney may give your agent the power to make all health care decisions, including the use or termination of life-support and artificial nutrition and hydration.

5. A _____ may also be created in Ohio where an agent, attorney-in-fact, or financial representative, is named to look after all of your assets, business affairs and make any other monetary related decisions on your behalf. Because this person must do everything from paying your monthly bills to managing your business interests, he or she must be someone who has your complete trust and has your best interests in mind. This durable financial power of attorney does not expire, unless the principal states in the document an expiration date.
6. Powers of Attorney can be used for many things, but an _____ can only do those acts that the Power of Attorney _____. The POA should be written clearly so the attorney-in-fact or agent knows what he or she can and cannot do.
7. Agents are held to a certain standard of care when performing their duties under a power of attorney. An agent is viewed as a "_____" under the law. A fiduciary relationship is one of trust. If the agent violates this trust, the law may address violations of the agent's duties both _____ and/or _____; please enlist an attorney or law enforcement should you suspect decisions are not being made with your best interests in mind.

Contractors

Complaints about contractors frequently come through the Hotline. Unfortunately, I usually receive the call after the person has been scammed. The complaints are all similar in content; payment was made in full or a large

portion of the job cost was required and paid up front...and the contractor did not return to do the work or the contractor did shoddy work and never returned to complete the job. One situation involved someone hiring a

friend's family member. We assume that just because we have known the friends for many years that their family member is reputable or qualified to do the job. And, because we think

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Contractors

Continued from Page 2

we “technically” know someone through our friends, we don’t check references or whether a contractor may be licensed and/or insured. After all, we wouldn’t want to insult our friends by verifying someone they referred; especially their family member. When the job is never started or completed, and you have paid for all or most of the work upfront, you end up having to hire someone else never mentioning this to your friend. As a result, a couple of things happen: your friends aren’t made aware of what happened and they continue to refer their family member; and your friendship may be affected because you trusted your friend to refer a reputable person and it ended up costing you a lot more.

Another frequent call involves door-to-door salesmen for so-called roofing companies. These scammers walk around neighborhoods looking for houses that may need a new roof. Many times they show up after there has been a bad storm. They knock on your door and may use the ploy that they are doing work for others in the area and noticed that your roof is in need of replacement too. They recommend you contact your insurance company and if necessary, they will be happy to meet with

your agent. Once it’s determined that your insurance company approves payment for a new roof, they issue you a check, which you in turn sign over to the roofing company. And guess what? That’s right, you NEVER see that roofing company again.

Lastly, I want to talk about a contractor who scammed a 97-year-old Butler County resident out of \$3500. James Boswell and his crew were driving through the victim’s neighborhood when they saw her out working in the yard. Before James ever spoke to the resident, or received approval for any repairs on her driveway, he had his crew throw some blacktop down. Once the shoddy work was completed, James Boswell approached the elderly victim claiming he had repaired her driveway and forced her to pay him \$3500 for work she never authorized. Feeling like she had no option, she paid James for the work. After James Boswell left with her check, she realized this was not right. She, along with her niece, contacted Fairfield Police and filed a report. An investigation was completed and Assistant Prosecutor Gloria Sigman was able to prosecute James for the crime and got full restitution for the victim. Boswell was placed on Community

Control in November of 2016 and within a couple of weeks, he scammed another elderly victim. He

was accused of stealing \$10,000 from a senior couple in Mason for siding and paint work that was not completed. In January 2017, Boswell tricked an older woman in Hamilton County into paying him \$2400 for tree trimming work he didn’t finish and was charged with two counts of theft in that case. James Boswell’s Butler County probation officer notified the courts that he was in violation of his probation and ultimately his Community Control was revoked and he was sent to prison.

The Ohio Attorney General has filed a civil lawsuit in Hamilton County against James C. Boswell and Edward Boswell for violating state consumer protection laws by failing to deliver promised services, performing shoddy work, and failing to notify consumers about their cancellation rights. **Consumers who suspect a scam should contact the Ohio Attorney General’s Office at www.OhioProtects.org, or call the SCAM Hotline at 1-888-662-3673.**



Heroin Epidemic

Daily headlines spell out that heroin abuse has become a national epidemic in our society: Butler County had a total of 192 drug overdose deaths in 2016.* Drug overdoses were the leading cause of death in Butler County with Hamilton and Middletown leading in most deaths. Most of us know someone, or have a family member, who has suffered the result of heroin addiction; no one is immune. I have talked with many mothers and family members who have lost loved ones and are devastated because they don’t know where things went wrong. One moment their son/daughter is thriving academically with lots of friends and involved in sports.....and the next moment, their child is on the streets doing whatever necessary to buy their next dose of heroin. I hear the same story over and over and over!

In 2012, with growing concern over the continued rise in deaths due to heroin overdose, Prosecutor Gmoser launched his initiative against this previous silent killer that is now headlining our front pages and television

news. Community leaders and government agencies were equally concerned and began to form Task Forces and Committees to address the problem.

While the intentions of these committees were good, the Prosecutor wanted action rather than discussion. He made himself available to speak to anyone or any group, not only about the heroin epidemic and how it has affected the legal system, but also about his solution. He spoke to Edgewood and Hamilton High School students to educate them on the dangers of experimenting with heroin and used an excellent live example of the parallel between experimenting with heroin once and jumping from the top of a 20 foot ladder. The demonstration comes from the idea that teens are risk takers. A study written by Agnieszka Tymula, a postdoctoral student at New York University, determined that “Relative to adults, adolescents engage more in unknown risks than they do in known risks.”** They may have been told that using heroin once could kill them, but it does not bear the same proof

as jumping from the top of a 20 foot ladder. It was an engaging program because he not only spoke to the students about the consequences addicts face once they stand in front of a Judge, but the groups heard powerful and impactful stories from recovering addicts who could speak personally about their experiences with addiction. One addict in particular spoke about losing a football scholarship at Ohio State University because of his drug use. His spiral to addiction began with experimenting with pain pills while in high school, which led to heroin addiction, and ultimately, arrest and loss of his scholarship.

For more information on the heroin epidemic and additional resources go to www.letsfaceheroin.com.

* Statistics from Dr. Lisa Mannix, Butler County Coroner

**<http://healthland.time.com/2012/10/02/why-the-teen-brain-is-drawn-to-risk>

Silent Epidemic: Seniors and Addiction

Addiction to prescription painkillers among seniors is growing, says Dr. Joseph Garbely, Medical Director of Caron Treatment Centers, who opened a 10-bed senior inpatient unit in Pennsylvania. It’s not just young adults becoming addicted to drugs and overdosing, it’s our moms, dads and grandparents too.

U.S. emergency departments saw a 78 percent rise in the number of visits among older adults with misuse of prescription or illicit drugs between 2006 and 2012, according to a study written by Mary Carter, an associate professor at Towson University. She used a nationally representative sample with data from more than 71,000 cases involving older adults. Of those, 53 percent were ages 65 to 74, which means nearly half of the visits occurred among people ages 75 and older. Yet seniors are often ignored in the broader discussion about addiction, Carter says.

Older people are mostly becoming addicted to opioids through medical treatment for chronic pain, says Dr. Andrew Kolodny, Executive Director of Physicians for Responsible Opioid Prescribing and Chief Medical Officer of the Phoenix House Foundation. Dr. Kolodny says that people believe the opioid is relieving their underlying pain problem, but what’s probably happening is that the opioid is treating their withdrawal pain.

Accidents also happen if they forgot that they took their pill, and then take another one, or the opioid has a harmful interaction with other drugs the senior is taking.

Kolodny says health providers can reduce overdose risk by prescribing lower-dose painkillers, such as 5-milligram Vicodin or 10-mg Percocet tablets. If they accidentally double their dose, it’s not going to hurt them. Kolodny also recommends using a low-dose opioid on

an intermittent basis with Tylenol or Advil. Then on really bad days, take the stronger prescribed medication.

The Johns Hopkins Bloomberg School of Public Health released a report on the prescription opioid epidemic that addresses prescribing guidelines, prescription drug-monitoring programs, overdose education, community-based prevention and more. Changes need to be made on prescribing opioids and begin to substitute with nonaddictive medications. Non-drug treatments such as acupuncture, medical massage, hydrotherapy (soothing warm jets of water) and pool therapy all reduce pain. Garbely says getting people active again helps more than you can imagine.

Information in this article was taken from the SILENT EPIDEMIC: SENIORS AND ADDICTION, by Lisa Esposito, who is a Patient Advice reporter at U.S. News.

A Prosecutor's Perspective on the Heroin Epidemic

Statistically, deaths from heroin continue to rise to epidemic proportions. If there is any doubt, for confirmation ask any county coroner in any county across the entire country. All segments of society are affected from the very poor to the very rich. Heroin has become an equal opportunity killer.

This scourge must be attacked like any epidemic we have faced in the past, just as we attacked the polio epidemic sixty years ago when the lives of all our children were on the line. It will take a massive and coordinated effort and the consequences of inaction will be tragic with an ever increasing number of parents and grandparents losing family members by death and addiction from this deadly drug.

Before presenting my solution, please consider my perspective on the causes for this growing cancer among us. Regrettably, there are many, but those most frequently cited by survivors of addiction and those still addicted boil down to just a few. The first of these is the medical profession that was sold a bill of goods by a pharmaceutical manufacturer years ago that produced a "be all, end all" pain solution- an opiate pill- for common ailments without thoroughly presenting to the medical profession the addictive properties of the newly developed pain killers. Physicians should not be criticized for wanting to alleviate pain, but the consequences of easy, uninformed access to such medications and a demanding society intolerant of any pain have advanced the use and profits associated with opiate pain killers. When minor disorders like a simple sprain or strain resolve, the prescriptions end, but the addiction continues. When the insurance that paid for the prescriptions runs out, so usually does the physician, but the addiction continues. To their credit, physicians are now much more aware of these consequences and are more cautious with prescription pain killers. Those who do become addicted, however, often turn to the street where the once prescribed pill now costs eight times as much as a dose of heroin to feed their addiction.

The next cause of addiction and death is simple experimentation with tragic consequences. As a society we are curious in all things. It is, after all, a human trait. Our curiosity is what got us from the jungle to the shopping mall. Few, if anyone, ever died or became addicted from a first drink of alcohol or inhaling a cloud of smoke from a cigarette or marijuana joint. The same now CANNOT be said for experimentation with heroin. Peer pressure often adds to the motivation to experiment. Deaths from heroin often show that it was laced with fentanyl which is many times more addictive and deadly than heroin. I bear witness to parents who have exclaimed to me that "he or she only tried heroin once and it killed him or her." One such parent said the mantra in the fight against heroin should be "one and done." My mantra from the beginning of my fight for public awareness is "heroin takes your life and then it kills you" and this reality is repeated every day across our country.

Another cause, and often overly exaggerated for legalization debate purposes, is that marijuana is a primary gateway drug leading to heroin. However, one third of all addicts that I have spoken with do tell about using marijuana and eventually seeking heroin as something stronger with it as a figurative and literal dead end. For this reason, I am opposed to such legalization even if masquerading and disguised as a benefit for medical purposes. The underlying cause for marijuana use is often tied to self-medication for emotional problems

and inability to cope with everyday stresses of life. After all, in these modern times there is a medication for anything that troubles us and in a society where we are advertised all manner of material things, there are many that cannot achieve such economic success no matter how they try leading to a solution in feel good medications both legal and illegal and usually highly addictive and deadly. Alcohol abuse has historically been the self-medication of choice and its troubling consequences have been tolerated because the addiction and damage occurs in slow motion compared to the frequent instant death brought by heroin.

Lastly, availability of intoxicating substances to our society must be considered as a logical cause although some may argue with merit that availability is only a consequence of a demand in our country. Cause or consequence makes little difference, however, and making heroin unavailable is a major part of the solution, but as history has shown it cannot be the only solution.

Like any pandemic, the solution requires massive, consistent and coordinated public involvement and a realization that there is no quick fix. My five point program has been developed by careful analysis from experts in all fields necessary for a solution and the five essentials are as follows:

1. Law Enforcement

The so called war on drugs was started with the notion that society could arrest and prosecute our way out of the scourge of drugs without more. That singular approach has failed, but should not be seen as diminishing the need for such deterrence. Interdiction at the southern border of our country is essential especially when Mexican criminals now claim a billion dollar market in our country. Every dealer in the chain from our cities to the poppy fields in Mexico needs to be prosecuted by us and Mexican authorities and taken out of society.

2. Prosecution

Prosecutions need to be focused, efficient and relevant. Prosecutors are in a position to evaluate how to get the biggest bang for the buck when prosecuting the supply chain. Prosecuting addicts may be easy, but solves little unless we as a society intend our jail system to become the default treatment centers of an addicted populous. This option is now the direction we are heading and the cost will far exceed more thoughtful approaches. Regrettably, jails are also the educational source for higher crime so the graduating addict comes out prepared for other criminal pursuits. Cooperation with drug courts set up to handle the treatment of addicts involved in crime to feed their habits is thus essential to the extent possible where offenders are not violent or have not committed an associated heinous crime.

3. Legislation

A key element to a united effort is legislation necessary to provide the tools required. The best place to begin an overhaul on how our society deals with this problem is through education that must begin at the elementary school age level. It is not enough to request schools to teach anti-drug programs and it must be a legislatively imposed curriculum. Consistent and uniform education must be mandated. Next, there must be legalization of needle exchange programs. Without legalization, technical violations of law involving possession and distribution of drug paraphernalia may result especially by some in law enforcement who oppose this initiative. Needles are an

effect of drug use and not the cause. On a risk/benefit analysis, providing an exchange of clean needles among those addicted will reduce infection of hepatitis C and AIDS for which one case alone can cost enormous resources better spent elsewhere. Lastly, legislation must be initiated to formulate consistent and uniform statewide programs for drug addiction rehabilitative services including all forms of treatment and medications without cost to those who have no means or limited means of payment.

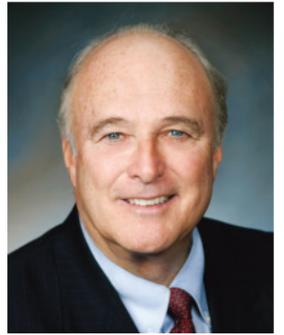
4. Education

With sufficient legislative mandates, anti-drug education should be a daily event in the young lives of students. It should be as common place as the pledge of allegiance was every morning years ago. Young people must be told what will be coming at them and reliance cannot be on parents alone who may themselves be afflicted. In addition to anti-drug education, teaching coping skills is essential to prepare young minds for the material and social pressures they are bound to encounter that may lead to drug abuse.

5. Medical Treatment

Medical science has progressed to the point of knowing the full range of medical problems associated with drug abuse. It knows the science of addiction, as well as what is required to treat and eliminate it. We need to take advantage of that knowledge by paying for the medical services available. I understand that no non-addicted person wants to pay for this, but such thinking is short sighted in the face of the cost without such services. Only when there are vacancies in available beds for treatment recovery, will we see success in the fight against drug abuse. Many courts are on board with alternatives to punishment for the addicted, but it is not uniformly presented. Such programs need to be mandatory and not discretionary depending upon where one lives. Addiction pays no attention to geographic or economic boundaries.

Our former President of the United States stated that if his executive action on gun control could save just one life it would be worth it. Heroin is no different than a loaded gun with a high probability of lethal consequences from abuse and should be considered with the same urgency. Our children and those already afflicted with the disease of addiction deserve better, especially in a society that prides itself on accomplishing great things and with the ability to end this epidemic.



Answers to "Let's See What You Know"

From Page 2

1. power of attorney, principal
2. financial, medical
3. durable health care power of attorney
4. living will
5. durable financial power of attorney
6. agent, specifies
7. "fiduciary", civilly, criminally