



HURA news

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Harvard Addresses the Crisis

Dr. Giang T. Nguyen, Executive Director of Harvard University Health Services, was scheduled to join HURA at our Annual meeting last May. That gathering had to be cancelled. Dr. Nguyen has graciously agreed to address some questions put to him by HURA about the forward path of the University in this continuing health crisis. We are grateful to Dr. Nguyen for taking time to update us. *[Donna Chiozzi]*



HURA: In this time of multiple layers of stress among the populations it serves, how is University Health Services dealing with the mental health of its patients? And is there any outreach to address issues before they develop?

Nguyen: The pandemic has created many challenges for many members of our community. HUHS offers Counseling and Mental Health Services (CAMHS) for Harvard's student population, and Behavioral Health (BH) for our patients who are faculty, staff, and retirees. Both departments have remained fully operational via telemedicine since the start of the pandemic. When students left campus and staff began remote work in the spring term, CAMHS and BH rapidly shifted their efforts to train their respective teams of clinicians to effectively conduct services through telephone and secure video.

Our primary focus throughout the spring term was to ensure that patients seeking therapy had access to mental health services with minimal disruption, no matter their location. In fact, our patient numbers remained almost identical to our patient volume when campus was open.

Looking forward, we will continue to offer our services remotely for every eligible member of the Harvard community. As always, the emotional health and well-being of our patients are our top priority, and we are here for them no matter where they are located. Both CAMHS and BH remain open Monday through Friday during regular business hours, and after-hours urgent care consultation by phone is available nightly from 6:00 p.m. to 8:00 a.m. and weekends 24/7 at 617-495-5711.

For those seeking resiliency tools in stressful and disruptive times, CAMHS psychologist, Tara Cousineau, PhD, offers her "Courage, Presence, Resilience" (CPR) workshop in short, 15-minute clips. <https://vimeo.com/showcase/6942447>

I'd also encourage readers who are looking for ways to manage their fears and anxiety around COVID-19 to review the following helpful guide from CAMHS psychologist S. Rue Wilson, EdD. https://www.harvard.edu/sites/default/files/content/coronavirus_HUHS_managing_fears_A2%5B5%5D.pdf

If you're interested in our Behavioral Health services, please visit our website

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COMING EVENTS

There are currently no coming events. The annual HURA Fall Reception in October and the Holiday Luncheon in December have both been canceled.

SPORTS

Harvard will not compete in any varsity sports in Fall 2020. This applies to all fall varsity competition. A decision on the remaining winter and spring sports competition calendar, and on whether fall sport competition would be feasible in the spring, will be determined at a later date.

The Ivy League placed all sports on hold until at least January, making it the first Division I Conference that will not play football in the fall. (*NY Times*, July 8, 2020)

Countway Renovation



One of the features of the extensive renovation at the Countway Library of Medicine at the Medical School is moving the main entrance to the Huntington Avenue side of the building, where visitors entering will find a new café.

Delayed by the coronavirus shutdown, the project started up again on June 1, 2020 and is quickly getting back on track. Find more at <https://countway.harvard.edu/renovation>.



Harvard's Academic Plans for the Fall Semester

There were eleven working groups in the Faculty of Arts and Sciences that developed the fall semester plan. About forty percent of Harvard undergraduates—entering first-year students and those who cannot learn successfully in their current home environments—were permitted to be in residence for the fall semester. They and their classmates who will not be in Cambridge will learn remotely, avoiding the problems that are caused by gathering students and teachers together entering, during, and exiting classes. Previous plans for a hybrid of in-class and remote classes were canceled.

Michael Burke, dean of undergraduate education, explained the nature of the problem by pointing out that the largest Science Center lecture hall can seat 500, but if modified for social distancing, its capacity might be just 87 students.

First-year foreign students will not be permitted to arrive. Federal rules do not allow foreign students to enroll in online-only programs. Additionally, the uncertainty of changing travel regulations might affect their ability to enter or leave the country.

In the spring semester, unless public health conditions improve or worsen, seniors will be given priority for residence, with first-year students returning home to learn remotely for their second term.

Harvard professional schools moved online for fall semester, including the Divinity School, Graduate School of Design, Graduate School of Education (both fall and spring semesters), T.H. Chan School of Public Health, Kennedy School, and the Law School.

At the Medical School, first-year instruction is online, so that upper-level students can pursue their clinical and other learning on campus.

Harvard Business School invited students to return to campus for a hybrid of in-class and online learning experience. Given the school's large international cohort (more than one-third of MBA enrollees), it was understood that getting to Allston might prove challenging for a significant number of new or second-year students.

(From Harvard Magazine and other sources)

IN BRIEF

Open Enrollment 2021

Benefits annual open enrollment period will be Tuesday, November 10, to Thursday, November 19, 2020. This is the only time you can make changes to your medical plan during the year without a qualifying life event. An information package will be sent to your home address in late October. There are no plan design changes, but there will be rate changes, so retirees should be sure to review their Open Enrollment information.

HURA Contributes to PBHA's Summer Urban Program

The Phillips Brooks House Association's Summer Urban Program (SUP) remains "our biggest need this year," said Director Maria Dominguez Gray. "We have made the commitment to honor stipends for the college students and teens given the economic climate and are running programming online and meeting basic needs of families.

"Our communities have been disproportionately impacted by COVID-19, and we are committed to helping campers (children who participate in the programs) and their families access the support they need this summer, including connection to health and food security resources and financial information.

"We are excited to announce that PBHA will provide every child with a laptop and technology support so they can participate in the programming and, if the child fully participates each week, they will be able to keep the laptop at the end of the summer."

In support of this program, the HURA Board voted to contribute \$1,000 to SUP.

Lillian Braudis, Centenarian

Last March, Lillian celebrated her 100th birthday. She was a founding member of HURA, being on the organizing committee in the mid-1980s, and signed the letter that proposed to Harvard President Derek Bok that an organization of retirees should be created. He enthusiastically approved, and the committee commenced to create HURA. She then served as its first vice president from 1990/91 through 1992/93.



Membership Renewals

Letters were sent out in June, and several reminders since have triggered enormous response to our annual renewal membership drive. We are

delighted that you value our events and publications. If you haven't already renewed, send dues (\$20 check payable to HURA) to Carleen Farrell, HURA Membership Secretary, 1 Atlantic Court, Mashpee, MA 02649.

Cancer Rates Fall

The Centers for Disease Control and Prevention (CDC) reports that cancer death rates continue to decrease in the United States. New data show changes in cancer death rates every year during the 20-year period of 1999 to 2018 for several types of cancer.

Lung cancer is still the leading cause of cancer death, but death rates decreased 37% from 1999 to 2018.

Rates also decreased in 15 other common cancers including colorectal, female breast, and prostate. But death rates increased for cancers of the liver, pancreas, and uterus, all of which are linked to excess weight.

Harvard Health Letter Subscriptions

As you know by now, the free subscriptions to the *Harvard Health Letter* that many retirees have enjoyed over the years have ceased to be free.



The July issue of the *Letter* contained an explanation of the publisher's offer to continue for just \$12 a year.

The publisher sent a followup letter in late-July. It clearly instructed that if you had already subscribed to ignore the second mailing. The followup letter was sent to many who

never got the previous mailing, so there has been some confusion.

The special subscription rate of \$12 is available until December 31, 2020 to current and new HURA subscribers. Send your subscription request and check for \$12 in the envelope provided or in your own to:

Harvard Health Letter
Subscription Services;
code DFGHLLS
P.O. Box 9341

Big Sandy, TX 75755-9319

Former subscribers may also telephone customer service at 1-877-640-9459 to set up a subscription. Mention the DFGHLLS code to get the \$12 rate.

Harvard Addresses the Crisis

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to learn more about services offered, eligibility, and how to make an appointment. <https://huhs.harvard.edu/services/behavioral-health>

HURA: Zoom has changed everything. In what ways will telemedicine become the new normal for delivery of medical services?

Nguyen: I've been thrilled with the successful roll-out of telemedicine services at HUHS. It's served as an invaluable safety net for our patients to ensure that they can receive the care they need, no matter their location. At HUHS we use the Zoom technology that is compliant with the Health Insurance Portability and Accountability Act (HIPAA) for our telemedicine visits. It's proven to be an excellent way for our patients to access care from the safety and privacy of their homes, eliminates transportation time and associated costs, reduces wait time, and increases access for our patients who might have transportation or mobility problems. Through telemedicine, our clinicians can literally see their patients and make many diagnoses, prescribe drugs, and order tests, and it's been a great way to treat our patients in a safe way. HUHS continues to move forward carefully in our phased re-opening of in-person services, but we will utilize telemedicine whenever possible.

We recognize that video technology is not everyone's cup of tea. However, many of our patients have found it to be very appealing, even if they were initially reluctant to try it. Video visits are superior to telephone interactions and allow clinicians

to see our patients as well as our patients' surroundings. If an in-person visit is required as follow-up, the information gathered at the video visit reduces the time that patients need to spend in our office.

It is important to note that while private insurers and Medicare currently have policies in place that cover telemedicine services, this could be temporary. Once COVID-19 is no longer deemed to be a public health emergency, coverage for telemedicine services may change or be reduced, at which time we will review our model of care and adjust services accordingly.

“Looking forward,
we will continue to offer
services remotely for every
eligible member of
the Harvard community.”

HURA: Once there is a vaccine for Covid-19, how will the University deal with persons who refuse to be vaccinated? What recourse does the University have to require on-campus persons to comply?

Nguyen: Right now, our sole focus is to keep the Harvard community safe as we look to the fall term and we welcome more students, faculty, and staff to campus. Like everything we've done around our COVID-19 planning on campus, we will make policy decisions in close collaboration with our colleagues across the Schools and Central Administration,

using the latest public health and scientific findings, alongside guidance from government officials.

HURA: How reliable and safe can a fast-tracked vaccine be, when it usually takes 2-10 years to develop and deliver one that is reliable?

Nguyen: We've seen encouraging advancements with some vaccines that have moved into Phase 3 trials. It is during these trials that we'll uncover important information about the safety and efficacy of these vaccines. Until we see the data from these trials, it is difficult to speculate about a vaccine's reliability and safety, but I am optimistic by the progress made thus far. I imagine that more scientific minds are working on this particular vaccine than we have seen for any other disease in recent memory, and that will likely contribute to faster discoveries.

HURA: Will Harvard prepare isolation units for persons who test positive or have been in contact with someone who has?

Nguyen: Harvard has developed quarantine and isolation procedures to reduce the risk of outbreaks on campus and to provide the necessary support for individuals who may need to quarantine or isolate. We also have a trained team of contact tracers who will help to identify and support persons who need to be isolated or quarantined.

For students who test positive for COVID-19, the University has set aside dedicated space for them to be separate from the general community.

More information about isolation and quarantine protocols can be found at <https://www.harvard.edu/coronavirus/testing-tracing/quarantine-isolation>.

HURA: What is Harvard’s plan for frequent testing of students and staff?

Nguyen: To keep Harvard healthy, all members of our community who will be on campus for academics or work must adhere to public health measures and participate fully in University programs to control the spread of COVID-19. For fall term we plan to test community members up to three times per week, depending on the subpopulation. Members of the residential community (dorms) will be tested most frequently.

More information about testing can be found at <https://www.harvard.edu/coronavirus/testing-tracing>.

HURA: Understanding the health concerns related to large group gatherings, what do you think about Harvard going virtual next year as far as students are concerned?

Nguyen: Harvard’s undergraduate, graduate, and professional Schools have made plans for fall 2020 based on their own unique considerations. With few exceptions, learning will be remote, and only a limited population of students will be authorized to live on campus. For those returning to campus, see Dorm and House Residence Requirements at <https://www.harvard.edu/coronavirus/planning-2020/dorm-and-house-residence-requirements>.

Our role at HUHS is to support these Schools to ensure their communities are safe and healthy in whatever plan they have chosen.



HURA PROFILE 2020

This report includes HURA members through the end of March 2020. Data were supplied by Human Resources on July 1, 2020.

In what states do ten or more HURA members live?

- CA: 11
- ME: 21
- NH: 30
- FL: 35
- MA: 1,158 (86.2%)

Massachusetts cities where 30 or more live

- | | |
|----------------|-----------------|
| Medford: 32 | The Newtons: 41 |
| Somerville: 32 | Boston: 48 |
| Belmont: 35 | Lexington: 51 |
| Brookline: 37 | Arlington: 79 |
| Watertown: 39 | Cambridge: 191 |

When did they retire?

- 1979: 1 (41 years retired)
- 1980s: 16
- 1990s: 127
- 2000-2004: 161
- 2005-2009: 352
- 2010-2014: 245
- 2015-2020: 435 (April-September 2020 retirees not included)
- [Dates missing for 4 persons]

Status

- Employees: 1,277
- Surviving spouses: 62
- Qualified domestic partners: 2

Job Family when they retired

- | | |
|----------------------------------|---|
| Academic (mostly faculty): 163 | Hospitality & Dining Services: 13 |
| Alumni Affairs & Development: 28 | Human Resources: 22 |
| Arts: 5 | Information Technology: 73 |
| Athletics: 1 | Library: 145 |
| Communications: 47 | Museum: 13 |
| Facilities: 59 | Research: 33 |
| Faculty & Student Services: 78 | Technical (lab & other): 12 |
| Finance: 95 | Not classified: 133 |
| General Administration: 381 | (most pre-date the use of job families) |
| Health Care: 41 | |

Reporting Email, Phone Scams, Phishing, Hacking

The Internal Revenue Service (IRS) requests that you report phishing and online scams to them by forwarding suspicious emails to phishing@irs.gov.

- Forward the email as-is. Don't forward scanned or copied images because this removes valuable information. To learn how to forward an email with the header intact, go to <https://www.irs.gov/privacy-disclosure/how-to-forward-the-header-of-a-phishing-email>.

- Then delete it from your computer.
- Don't reply to the email message.
- Don't open any attachments. They can contain malicious code that may infect your computer or mobile phone.

- Don't click on any links. Visit the IRS Identity Protection page www.irs.gov/identity-theft-central if you clicked on links in a suspicious email or website and entered confidential information.

Find more information at <https://www.irs.gov/privacy-disclosure/report-phishing>.

FBI Internet Crime Complaint Center (IC3)

File a complaint with the IC3 about computer intrusions (hacking), online extortion, identify theft, intellectual property rights, and a growing list of Internet-facilitated crimes at <https://www.ic3.gov/default.aspx>.

Nuisance phone calls:

Federal Trade Commission (FTC)

The FTC deals with complaints of unfair business practices, such as scams and deceptive advertising. Its Bureau of Consumer Protection conducts investigations into alleged abuses and carries out enforcement actions. The Bureau is in charge of the Do Not Call Registry.

<https://www.donotcall.gov/>

- You can register your home or mobile phone at no cost.
- After you register, organizations such as charities, political groups, debt collectors, and surveys may still call you.
- If you receive other unwanted calls after your number had been on the National Registry for 31 days, report them to the FTC.

The **Do Not Call Registry** was widely recognized as an effective way to be rid of unwanted calls, but technology changed and scammers can send thousands of calls for less than a penny a minute from anywhere in the world.



NOMOROBO was the winner of an FTC robocall challenge to improve the DoNotCall service. Nomorobo offers protection for all of your VoIP (voice over Internet Protocol) landlines free and for your smartphone at \$1.99 per month per device for both iOS and Android devices. <https://www.nomorobo.com/>

New to the scene are RoboKiller, TrueCaller, and YouMail that offer additional blocking services for a fee.

Federal Communications Commission (FCC)

Report billing or access issues with Internet and TV providers, as well as other communications problems, to https://consumercomplaints.fcc.gov/hc/en-us/requests/new?ticket_form_id=39744.

Social Security

If you suspect someone of committing fraud, waste, or abuse against Social Security, contact the Office of the Inspector General's fraud hotline at 1-800-269-0271 or submit a report online at <https://oig.ssa.gov/>. Find the scam reporting form at <https://secure.ssa.gov/ipff/home>.

U.S. Post Office

It is not easy to find out how to report fraud and abuse to the Post Office. If it relates to physical mail, talk with someone at your local Post Office. If it relates to email messages, go to www.uspis.gov. However, the U.S. Postal Inspection Services website does not make it easy to report fraud and abuse.

Medicare

Report suspected Medicare fraud via telephone to 1-800-633-4227; TTY users can call 1-877-486-2048. Visit www.medicare.gov/fraud for information on protecting yourself from fraud and on reporting suspected fraud.

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Seasonal Flu Vaccinations during COVID-19

Is it important to get regular seasonal flu shots this year?

According to guidance provided by the Centers for Disease Control and Prevention (CDC), ensuring that people get regular seasonal flu vaccinations is essential for protecting them and communities from vaccine-preventable diseases and outbreaks.

For the upcoming flu season, vaccinations will be very important to reduce flu to help reduce the overall impact of respiratory illnesses not related to COVID-19 on the population and thus lessen the resulting burden on the healthcare system during the pandemic.

Who should get flu vaccines during the pandemic?

Annual flu vaccination is recommended for everyone six months of age and older, with rare exceptions, because it is an effective way to decrease flu illnesses, hospitalizations, and deaths. A prior infection of flu does not protect someone from future flu infections. The best way to prevent seasonal flu is to get vaccinated every year.

During the COVID-19 pandemic, it is important to protect vulnerable populations at risk for severe illness, the healthcare system, and other critical infrastructure. All eligible persons should be vaccinated, especially

- Essential workers: healthcare personnel (including nursing home, long-term care facility, and pharmacy staff) and other critical infrastructure workforce.
- Persons at increased risk for severe illness from COVID-19: adults aged 65 years and older, residents in nursing homes or long-term care facilities, and persons of all ages with certain underlying medical conditions.

Severe illness from COVID-19 has also been observed to disproportionately affect members of certain racial/ethnic minority groups.

Should a seasonal flu vaccine be given to someone with suspected or confirmed COVID-19?

No. Vaccination should be deferred for people with suspected or confirmed COVID-19, regardless of whether they have symptoms, until they have met the criteria to discontinue their isolation. Vaccination visits for these people should be postponed to avoid exposing healthcare personnel and other patients to the virus* that causes COVID-19. When scheduling or confirming appointments for vaccination, patients will be instructed to notify the provider's office or clinic in advance if they currently have or develop any symptoms of COVID-19.

**SARS COV-2 (Severe Acute Respiratory Syndrome-Coronavirus 2) is the strain of coronavirus that causes COVID-19. The*

prominent spikes on the coronavirus give it its name for "corona", or "crown-like".

How are vaccine components determined?

The influenza viruses in the seasonal flu vaccine are selected each year based on surveillance data indicating which viruses are circulating and on forecasts about which viruses are the most likely to circulate during the coming season. Read more at <https://www.cdc.gov/flu/prevent/vaccine-selection.htm>.

What are high-dose vaccines?

Fluzone High-Dose contains four times the antigen (the part of the vaccine that helps your body build up protection against flu viruses) of standard-dose inactivated influenza vaccines. The higher dose of antigen in the vaccine is intended to give older people a better immune response, and therefore, better protection against flu. Read more at https://www.cdc.gov/flu/prevent/qa_fluzone.htm.

HUHS Flu Clinics

University Health Services

will have flu immunization clinics for students, staff, and retirees, but they will not be at Smith Center, due to the need for space for social distancing. The current plan is to have a large tent in front of the Science Center, which can be used both for flu immunization clinics and for COVID testing (students and staff only). An outside venue provides room for social distancing for those who are waiting. Dates have not been set yet, but Health Services anticipates starting to offer flu

immunizations in early September. Both standard and high dose vaccines will be available. At walk-in clinics, everyone in the Harvard community—with a Harvard ID or HUGHP card—is accepted, regardless of their insurance plans, for regular seasonal flu shots. Spouses and qualified domestic partners who do not have their own cards are not eligible for these clinics. Remember to bring your card with you.

More complete information is coming in the next few weeks. Go to <https://huhs.harvard.edu>.

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A source of information and news at
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<https://www.facebook.com/HUretirees>

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Reporting Email and Phone Scams

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Blue Cross/Blue Shield of Massachusetts

Use the Member Service telephone number on your BCBS card to report healthcare fraud; online, go to <https://www.bluecrossma.org/disclaimer/member-rights-and-responsibilities/health-care-fraud>.

Most providers of online services want you to report spam, spoof, or phishing messages. For example:

Comcast/Xfinity: abuse@comcast.net

RCN: abuse@rcn.com or customer support at 844-726-1881.

Gmail: Open the Gmail message (do not click on anything in the message).

Next to the Reply arrow, click More (the three vertical dots).

Click Report phishing or Report spam and follow the directions.

Microsoft/Windows Use the Microsoft webpage at <https://www.microsoft.com/en-us/concern/scam>.

Financial Institutions (some examples)

Bank of America: abuse@bankofamerica.com

Chase: phishing@chase.com

CitiBank: spoof@citi.com

Credit cards

See the backs of your credit cards for phone numbers and online sites to report problems. Write these down and store in a secure place in case you lose your cards or they are stolen.

HURA is a tax-exempt 501 (c) 7 all-volunteer organization. Membership is open to benefits-eligible retirees of Harvard University and is complimentary until the renewal period the following June 30. Thereafter dues are \$20 annually. Visit HURA on Facebook at www.facebook.com/HUretirees or at www.HURA.harvard.edu.