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## A Legacy of Support for Seniors

### Highmark Health Plans

By **Cheyenne Knight**

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With 76 million baby boomers in the U.S. — **10,000 per day turning 65** — the work that Randy Detweiler has done with senior citizens for more than 20 years at **Highmark** just becomes more and more valuable.

Detweiler coordinates **PALS (People Able to Lend Support)**, a unique assistance program available to **Highmark's Medicare Advantage** health plan members. PALS matches volunteers (many of whom are seniors themselves) with seniors who need non-medical support to maintain independent lifestyles. Help can take the form of picking up groceries, getting a ride to a doctor, household chores, social visits, and much more. The program also has community-based programs, including book clubs and walking clubs.

**PALS has received numerous awards**, including an AHIP Foundation Community Leadership Award, an AARP Excellence Award, and a 2017 Pittsburgh Business Times Health Care Heroes Award. Detweiler has guided the program **since its inception in 1997**, and his passion is evident — not just for the program, but for supporting the health and well-being of seniors. I sat down with him to learn more about helping seniors, the principles



**Randy Detweiler, PALS  
program coordinator**

behind PALS, and how the program fits into Highmark’s legacy of care for seniors.

## The Power of Purpose

**Cheyenne Knight (CK):** Let’s start by talking about your interest and background in [gerontology](#), the study of aging.

**Randy Detweiler (RD):** Some of that started with family experiences, including being very close to my grandmother as she was aging and began needing support to maintain her independence and quality of life.

As far as gerontology, I graduated college in 1982, and at the time there weren’t many options like the specialized undergraduate and graduate degrees you see now. I was taking a range of human services, social work, and business classes, and then I ended up in a class called Aging Studies and Society. My professor in that class took me aside and said, “You need to be in this new program we’re starting.” And that’s how I ended up being one of the first people to get an [Aging Studies Certificate](#) at the University of Iowa. I knew right away that I was where I needed to be — this was the kind of work I wanted to do, and the people I wanted to help. And that’s what I’ve been doing ever since.

**CK:** Looking at [previous articles on PALS](#), the program has been around for more than 20 years, it’s won awards, you have great success stories from Medicare Advantage members and volunteers — yet it’s still rare for organizations to offer something like this. Why aren’t more organizations doing what Highmark is doing?

**RD:** I won’t speak for other organizations, but I always tell people that at Highmark, we’re the “people people.” We want people to not just have our insurance, but to feel like they’re part of the family. As long as I’ve been here, there’s been a focus on taking care of our members and doing what’s best for them, including doing everything we can to keep our seniors healthy, active, independent, and in their homes.

Highmark is all about wellness and prevention. We want to keep members healthier by doing more of the upfront things, so it’s not just about paying for hospitalization and medication and medical procedures. When you do things on the front end to protect and promote health, rather than just treating problems later, everyone benefits. That mindset is a big part of where health care is

going in general, but I think there are still organizations out there that are more focused on the billing side of health care. They're not looking at every way that you can support health and well-being and reduce the need for medical treatment.

To be fair, some of what we offer to Medicare Advantage members has become more common, but PALS is still rare in taking extra steps around non-medical support to help seniors age healthier. Many members tell us that without the extra help they get from [our volunteers](#), they wouldn't be able to stay in their own homes. When I recruit volunteers, I tell them, "What we help with is what most of us take for granted." Much of that — like picking up groceries and prescriptions, preparing a healthy meal, getting to a doctor appointment, or even just regular socialization — can clearly impact a person's overall health.



**A PALS volunteer meets a woman she is helping with transportation, presented as one of Highmark's Living Proof ads.**

**CK:** It seems like much of PALS' work is about creating a system that keeps seniors engaged and connected — the volunteers as well as the people receiving help. No matter what task is involved, is that engagement and connection part of the value?

**RD:** Yes, that's a good point. When I'm out in the community, my bosses always say, "Ask seniors what they need." More than anything I hear, "I need a purpose." I always look at PALS as doing that.

Here's a story. We have a lady who needed a ride into Pittsburgh at eight in the morning, and a ride back home at three in the afternoon — for five straight weeks. Now, you wouldn't blame anyone if they said "no thanks" to dealing with traffic to and from the city at eight and three for one day, much less for five weeks. But I called a PALS volunteer and told her the situation, and I said, "This is more than we normally ask, but do you have any interest?" And she told me, "Randy, it's noon and I'm still in my pajamas. I need a reason to get up and get dressed, so I'll be happy to do this."

We also get stories where maybe someone hasn't been taking care of themselves so well, and suddenly a family member says they're showering, shaving, getting dressed — and it's because their PALS volunteer is coming that day. So that is part of it —

[giving volunteers a sense of purpose](#), and also giving the members an added purpose and something to look forward to.

## Supporting Seniors: Past, Present and Future

**CK:** In the years since you earned that Aging Studies Certificate, what has changed in how we think about and support seniors through health care?

**RD:** Well, there are many advances on the clinical side of course, but looking at the support Highmark offers through PALS, the follow-up phone calls, our health coaches, all of that — there's more interest now across the entire industry. Because it's such a growing population, seniors are getting more attention and services — rightly so.

I'm in a telephone conference call once a month with a good friend who has done this kind of work for seniors for about 30 years in New York. She's gathered seven or eight of us who do similar work for health organizations. We haven't found many others who do what we do, so, nationally, more can certainly be done.

**CK:** That's interesting — what do you discuss and learn from each other on these calls?

**RD:** It can be a wide range of issues we're facing, and sometimes just sharing information about how we run our programs and what's working or not working in terms of achieving our goals. Most of us in this field work by ourselves, so it's important to get individuals together and network. That can be especially helpful for those running newer programs.

One thing we have in common is using a volunteer system based on the idea of [timebanking or service credits](#), so we have a lot of conversations about that. The basic idea, and the way it works for PALS, is that when you volunteer you earn and accumulate service credits. Then you can use the credits yourself when you need help, or give them to someone else to use, or donate them to a general fund that's available to anyone. This is important to many seniors — they don't want something for nothing, and they may even hesitate to ask for help because of that. A system like this allows people to contribute — and reinforces that neighbors-helping-neighbors mindset as opposed to feeling like it's a handout.

**CK:** Has working with PALS over the years changed or confirmed your feelings about how to help aging seniors?

**RD:** It's confirmed my feelings that we're doing the right thing. We might make changes or additions along the way, such as creating the clubs, but I feel we're meeting our mission to keep Medicare Advantage members healthy and independent and active, and I see proof every day that what we do is needed and valued.

Not that this is the only measure of success, but our program has been getting bigger — our intakes have increased quite a bit this year, including one month where we had almost 200 percent more requests than we did for the same month in 2017. Whether it's articles like this, [the Living Proof video](#), word of mouth, or the website we launched,



**PALS volunteers can help Highmark Medicare Advantage members with a wide range of non-medical tasks, including meal preparation.**

more people are finding out about the program and there's a very positive reaction.

**CK:** Where do you want to see this program in 10 years?

**RD:** I hope PALS goes on forever! We are getting so much acknowledgement and support from Highmark, all the way up through senior management — that's why it's already been around for 21 years. So I'd just like to see it continue to grow and expand so we can help even more members.

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Tags: [gerontology](#), [living independently](#), [making a difference](#), [Medicare](#), [PALS](#), [purpose](#), [seniors](#), [volunteer](#), [wellness](#)

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Highmark PALS representatives can provide information by phone about many topics related to the program, including:

Determining eligibility for yourself, a family member or a client

Community programs

Specific program locations

Enrolling volunteers

To learn more, please call 1-800-988-0706 between 8:30 a.m. and 4:30 p.m., Monday through Friday. Text Telephone users can call 1-800-988-0668.

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When comparing Medicare Advantage (Part C) plans, you may notice a big difference in costs, coverage and features across Medicare plan providers. Medicare has created the Star Rating System to help consumers compare Medicare Advantage and Prescription Drug plans based on quality, costs and coverage. Higher quality can mean better care — and, in some cases, lower costs of care, too.

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