

***** Seniorresource.com E-zine *****
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Our present [Survey](#) is waiting for your input! Your privacy is respected. We don't capture your email or plant code in your computer. We receive only the answers you provide. It helps

[seniorresource.com](http://www.seniorresource.com) and our clients serve you better by knowing "you" collectively!

A. APPROACHING 65 AND LOOKING AT THE GAP?

When you approach 65 years of age the Gap that you're looking at is not the one where your children and grandchildren shop for jeans and midriff revealing shirts. It's the "gap" between what Medicare covers and what doctors and hospitals charge seniors. If you are planning to receive (or already receive) your medical care under a Medicare HMO, then the "gap" does not apply to you. There is no insurance that covers the co-pay or portion of your bills that are your responsibility, but it's expected that the "gap" with an HMO is relatively small.

But for seniors who opt for conventional or preferred-provider-options, like more freedom to travel, move from state to state or region to region and have freedom in deciding which doctors and hospitals they would like providing their care, there is a gap. It is the difference between what Medicare Part A will pay to a hospital for inpatient care, skilled nursing, some home health care, and what the bill will say they expect to get paid. The gap also refers to the part between what Part B Medicare will pay to a doctor for services rendered to you and for durable medical equipment used in your treatment or recovery and what the doctor or equipment company expects to be paid. (Learn how you become eligible for part A and part B Medicare coverage at <http://www.seniorresource.com/insurance.htm>).

If you are eligible for Medicare and don't belong to an HMO, then you should be covered by a Medigap or Supplemental insurance policy. Government regulations have set up specific policies and types of coverage known as "A" through "J" policies. Regardless of which company offers them in which state all like-letter designated policies must be identical in their coverage. Only the cost to purchase them may differ. The amount of coverage they offer is graduated with "A" generally costing less, and offering less coverage, and "J" being the most expensive and offering the most coverage.

Variables between the policy categories can be summarized as:

- Part A and/or Part B Deductible
- Foreign travel emergency
- At home recovery
- Preventive Care
- Medicare
- Medicare B Excess Charge
- Skilled Nursing Coinsurance
- Drug Benefit to \$1,250 or to \$3,000
- Ability to switch to a higher -level plan later

Only you can determine what is best for you.

When you think you know which coverage or coverages could work for you, shop the providers of Medigap Insurance in your state. Compare the pricing and flexibility should you move to another state at a later date. Compare which providers will make you wait 6 month before they cover pre-existing conditions.

To obtain the most comprehensive book to help wade through your options, "2003 Guide To Health Insurance For People With Medicare: Choosing a Medigap Policy" or the English or Spanish Audiotape, Braille or Large Print version call 1.800.Medicare.

B. WHERE WILL SENIOR VEGETARIANS FIND APPROPRIATE DIET CHOICES? --AN ISSUE FOR A NEW AGE

by Maida Waldner Genser, moderator of the ["SeniorVeg" e-discussion group at yahoo](#)

Many seniors are turning to vegetarianism, not because they are animal-rights activists, but because of degenerative diseases, such as heart problems. Their cardiologist or other health professional has recommended a dietary change in addition to regular exercise.

The age group with the highest percentage of vegetarians is teenagers, especially teenage girls who see a vegetarian diet as a way to lose weight. As the medical community is becoming more aware of the health implications of the Standard American Diet (S.A.D.) the number of senior vegetarians is expected to rise. It is not just the high amount of fat in the S.A.D. that is the problem; it is lack of fiber and phytonutrients that are only found in plant foods. Fats found in plants, such as avocados, nuts, flax and other seeds are healthier fats and actually help regulate cholesterol.

As more seniors embrace a vegetarian life style, where will they go for independent living or other senior living arrangements? Can they get appropriate food choices for lunch at their local senior center? Are there parts of the country where the senior facilities make it easier to maintain a healthy diet? More and more people are going to be asking these questions as the approach older age.

C. PLANNING CAN FULFIL RESOLUTIONS AND DREAMS

Steve Goldman (a polio survivor)

What does a disabled person do when he has lots of time on his hands, reasonable overall health, adequate resources and a desire to travel? Well, of course, he does a lot of planning, he says goodbye to his friends and relatives, gasses up his car and hits the road for the next few months "Searching for Accessible America."

"What is this all about," you might ask yourself. Have you every wondered just how much of this great country is "disabled friendly?" Well, I have and I thought, "What better way to find this out than to experience it firsthand, as opposed to reading about it from people who may not even be disabled. What would it be like to be "out there" on my own to deal with everything and anything a "normal" person deals with but only I'm the one disabled.

So, I began planning an epic journey. First to visit all the major league ballparks, then the many friends and relatives I have around this great land. I circled these destinations on the map then "connected the dots" to create my route. I was pleasantly surprised to find I had created fairly straight lines that took me around the perimeter of the U.S. All told, the route passed through 35 U.S. states, one Canadian Province and encompassed about 16,000 miles. To not put a taxing timetable on it and to enable flexibility, I expected the total trip to take three to four months to complete.

What are some of the obstacles I expected to encounter along the way and what, if anything, did I do in my pre_planning to avoid these pitfalls? First of all, I had to be honest with myself as to what my abilities and disabilities were and how they could present potential problems. This was not easy because even though I had polio as a teen I always felt that I could do anything. I am an active, strong and independent individual who uses a folding, non_powered wheelchair. I already have a car-top carrier for my wheelchair that operates off my car's battery. This is good for two reasons; first of all, there's hardly any effort in loading the chair into the carrier on my roof, since I just have to push a button that is hardwired into my battery after I sit in the drivers seat, fold the chair and hook it in the car-top lift. Secondly, since the chair is on the roof, it doesn't take up any valuable room inside the car or trunk.

So, back to the potential obstacles. Staying with friends and relatives along the way would, at times, present problems getting up the steps to their front door. I might also have problems getting into bathrooms that had doorways that may be too narrow. How did I solve these problems?

To help in getting up the front steps of inaccessible houses I obtained a pair of "Telescoping Track Ramps." These are adjustable in length and can be placed on the steps parallel to one another just far enough apart so my chair wheels travel on them as I go up or down. These tracks are portable and take up very little room in a car trunk.

The "bathroom" problem was a lot more difficult to solve. Here's what I did - I took an old "Quickie" folding wheelchair that I had (one can also buys these used for a reasonable amount

of money). My goal was to adapt it to be only 18 inches wide and fit through narrow doorways. I installed inch casters in the rear, turned around the casters in the front, took off the wheel locks and foot pedals and installed a foot strap. Voila! The chair was now only 18 inches wide. It could still function as a backup wheelchair using the two large wheels in the rear. I kept this chair in my trunk as well.

My goal, and the adaptations needed to make the goal become reality are not the same for everyone. This is where "knowing yourself" comes in handy. By being honest about your limitations and also knowing that you are not so old as to let some barriers stand in your way, you may be able to accomplish what I did on my long, interesting trip.

I planned well, even remembering to tell friends and relatives approximately when I'd be stopping by.

[Steve Goldman can be reached via email.](#) ***** Get information about the 25 per cent of polio survivors who suffer from [Post-Polio Syndrome \(PPS\)](#), further debilitating them with the death of individual nerve terminals in the motor units that remain after the so-called recovery from polio. PPS can occur 10 to 40 years after the initial disease bout. [Get information on the Americans With Disabilities Act \(ADA\) and file complaints.](#)

D. VALENTINES PAST AND FUTURE

Sent to [Seniorresource.com](#) by a frequent contributor with no original source. We hope the original author will forgive us, and identify him- or herself. We did do some editing.

Just Maybe.....

Maybe God wanted us to meet the wrong people before meeting the right one so that when we finally meet the right person, we will know how to be grateful for that gift.

Maybe when the door of happiness closes, another opens, but oftentimes we look so long at the closed door that we don't see the one that has been opened for us.

Maybe the best kind of friend is the kind you can sit on a porch and swing with, never say a word, and then walk away feeling like it was the best conversation you've ever had.

Maybe it is true that we don't know what we have got until we lose it, but it is also true that we don't know what we have been missing until it arrives.

Giving someone all your love is never an assurance that they will love you back. Don't expect

love in return; just wait for it to grow in their heart; but if it does not, be content it grew in yours.

May you have enough happiness to make you sweet, enough trials to make you strong, enough sorrow to keep you human, enough hope to make you happy.

The happiest of people don't necessarily have the best of everything; they just make the most of everything that comes along their way.

When you were born, you were crying and everyone around you was smiling. Live your life so that when you die, you are the one who is smiling and everyone around you is crying.

E. DID YOU KNOW...

Heart and cardiovascular disease is primarily the consequence of an unhealthy lifestyle, according to an article in Aventis Magazine 3/2002 by Claudia Eberhard-Metzger. Live healthy by:

- Not smoking,,
- Eating a healthy diet,
- Maintaining a healthy weight,
- Being physically active,
- Doing what it takes to keep your blood pressure under control.

Not news, but a welcome reminder in a month when we focus on the heart.

Never drive in the rain with your cruise control on! If your car begins to hydroplane your tires lose contact with the pavement. If the cruise control is on it will accelerate to a higher speed to get contact with the road. That is just the opposite of what you would do manually when you realize you are hydroplaning. You don't want to end up accelerating some 10 or 15 miles an hour faster!

A national survey by the GE Center for Financial Learning found that baby boomers are in denial when it comes to planning for their own care giving during retirement. In spite of their observations about how unprepared their parents are for their later years' decline:

- 87% have not purchased long term care insurance
- 63% do not have a will or living trust
- 36% have not taken steps to prepare for long term health issues that arise with age.

At present projections, nearly half of Americans 65 or older will enter a nursing home at some point in their later years. And 65 is only 7 years away for the leading edge of baby boomers. To plan for our care, we must first visualize what our retirement and later years will encompass. Then perhaps we can see the pitfalls and plan how to avoid them, or best cope with them.

and resources for same in your state at: [Learn more about insurances](#) and find [Insurances available in your state](#)

There are multiple ways you may be able to legally save on prescription drugs.

- Ask your doctor if there is an over-the-counter or generic equivalent to a prescribed drug.
- <http://www.benefitscheckup.org> See if you qualify for Rx assistance from your state health department.
- [Retired military veterans or their widows](#) can find special help.
- [Does the manufacturer of your medications offer free product for your income level?](#)
- If none of the above help you, try a Rx savings card which we are presently offering free-of-charge.

F. DEPRESSION IS NOT A NORMAL PART OF AGING

More physicians are learning to look for depression when treating Medicare patients. But they and we must recognize that depression is not a normal part of healthy aging.

Seniors, like people of all ages, can be prone to suffer depression when they are faced with:

- Loss of family and friends
- Financial insecurity
- Loss of their independence
- Loss of physical functions
- Inability to continue activities they have enjoyed
- Metabolic instability
- Unfinished psychological issues

The loss of family and friends who constitute one's support network compound the effect of all the other factors that can trigger depression. Through life it is our interaction with friends and family that help us see the bright side of things, regain our perspective and help distract us or temporarily divert our attention during illnesses and tragedies until we can regain our psychological balance. When we lose members of that support network, we have to hope that the network is broad enough to sustain us.

That is why it is important to stay active, social and involved. These connections can help us avoid depression, or to recover without the use of prescription medications.

Metabolic instability can also contribute to our inability to cope with other changes in our life. Vitamin deficiencies, glandular malfunctions, drug interactions, even the slowing down of our metabolic processes, can all lower our tolerance for coping with the other changes with which seniors must deal.

Signs of depression are not always as obvious to the untrained eye:

Do we have days when they do not get dressed and get out of the house?

Do we spend many hours without social contact?

Are they run-down, and "sick" all the time?

Do they easily fly off the handle and seem angry most of the time?

Recognize signs of depression in seniors we know? Are you in a position to point it out to their influencers? That could be your good deed for today.

G. FREE

Offer is no longer available.

H. THOUGHT FOR THE DAY

The 50-50-90 rule: Anytime you have a 50-50 chance of getting something right, there's a 90 per cent probability you'll get it wrong.

I. Special Surfing Sites

Recently, a cruise line employee said older seniors don't go on cruises that require long plane rides. Perhaps some knowledge about in-flight exercises will at least help quell fears about deep vein thrombosis which can occur from sitting still in a cramped leg position for a long time. Research with patients who have suffered clots in their lower legs on planes seem to do so on flights longer than 6 or 8 hours. [Learn which in-flight exercises can help avoid deep vein thrombosis and clots.](#)

[Get information on the "Health Coverage Tax Credit"](#) available to workers who lost their job due to "international trade" (no instructions on the definition were offered to us) and for those not yet on Medicare and who receive pension payments from the Pension Benefit Guaranty Corporation. The tax credit could pay nearly 2/3 of the monthly health insurance premiums.

J. OH MY AGING FUNNY BONE

I thought I would reassure you that after retirement there are ways to cut corners and survive.

With the average cost for a Nursing Home per day reaching \$188.00, there is a better way when we get old & feeble. I have ascertained that I can get a nice room at the Holiday Inn for around \$65.00. That leaves \$123.00 a day for beer, food (room service), laundry, gratuities and special TV movies. They have a swimming pool, a workout room, a lounge, washer, dryer, etc. Most have free toothpaste and razors, and all have free shampoo and soap.

Super 8 is somewhat more economical and they have a free breakfast, though you usually have to walk next door for lunch and dinner.

There may be a bit of a wait to get that first floor room, but that's OK, it takes months to get into decent nursing homes. There is the Senior Bus, the Handicap bus (if you fake a decent limp), a Church bus or van, cabs, and even a regular bus. For a change of lunch take the Airport Bus and eat at one of the fast food cafes there.

The Inn has security, and if someone sees me drop over, they will call an ambulance. And should I break a hip, pick one of those attorneys seen on TV and sue. What more can I ask for?

As a bonus, most motels give Senior discounts.

So When I reach the Golden age, help me keep my grin Just check me into the nearest Holiday Inn!

From J.Oppenheimer to <http://www.seniorresource.com/jokes.htm>
[See more senior humor.](#)

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