*****	Senior <i>resource</i> .com E-zine	*****
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#### **CONTENTS**

- A. Healthy Bones the Wise Woman Way (and Food for Thought, Men)
- B. Is Moving Or Selling Real Estate One Of Your New Year's Resolutions?
- C. Did You Know?
- D. Thoughts For The Day
- F. Parenting Parents
- G. FREE
- **H. Special Surfing Sites**
- I. Oh My Aging Funny Bone

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seniorresource.com and our clients serve you better by knowing "you" collectively!

# A. HEALTHY BONES THE WISE WOMAN WAY (AND FOOD FOR THOUGHT, MEN)

by Susun. S. Weed

In the Wise Woman Tradition, we focus on the patient, not the problem. When we focus only on osteoporosis, we cannot see the whole person. The more we focus on disease, even disease prevention, the less likely we are to know how to nourish health/wholeness/holiness.

Bones DO need calcium, and they are the last to get it, so our diets need to be very rich in this mineral. But to focus on calcium to the exclusion of other minerals leads to broken bones, for calcium is brittle and inflexible. Think of a piece of chalk, calcium carbonate, and how easily it breaks. A six-and-a-half year study of 10,000 Caucasian women over 65 found that "Use of calcium supplements was associated with increased risk of hip and vertebral fracture; use of Tums TM antacid tablets was associated with increased risk of fractures of the proximal humerus." The other minerals found in bone lend it flexibility. When we get our calcium from herbs and foods (containing a multitude of minerals) we nourish healthy bones.

My own experiences in helping women regain and maintain bone density and flexibility have led to a belief that life-style modifications work exceptionally well for those motivated to avoid the risks and expense of long-term pill use. However, eating a cup of cooked greens every day is difficult, even for the most motivated.

Nourishing herbal infusions, mineral-rich herbal vinegars, yogurt, and seaweed, combined with attention to muscle toning, unfailingly increases bone density and creates flexible, healthy bones and people. Not only are nourishing herbs exceptional sources of minerals, their minerals are better at preventing bone breaks than supplements.

#### 8 Keys to Healthy Bones

- 1. Good nutrition for your mother while pregnant with you.
- 2. Good nutrition for you during the formation of your bones.
- 3. Monthly menses throughout your fertile years, especially before 30.
- 4. Special attention to maintaining high levels of protein, fat, minerals, and vitamins from herbs and foods in your diet when menses cease during pregnancy, lactation, or after menopause.
- 5. Regular rhythmical movement, the faster the better, daily.
- 6. Consistent practice of yoga, tai chi, or any strengthening, flexibility-building discipline.
- 7. Chop wood, carry water.
- 8. Eat yogurt.

Green blessings to you all.

Note: Although 3 and 4 above don't apply directly to men, we hear more and more about the loss of calcium in the bones of males, especially following chemotherapy or radiation treatment for prostate cancer. So do pay attention to the rest of 8, and modify your daily routine and eating habits.

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Of additional note is the number of seniors who limit vitamin K intake because they are taking coumadin/warfarin. Vitamin K, along with magnesium and vitamin C are necessary for absorption of calcium. Talk with your doctor how best to adjust your diet when on coumadin/warfarin to still get the nutrients you need in the right combination.

## B. IS MOVING OR SELLING REAL ESTATE ONE OF YOUR NEW YEAR'S RESOLUTIONS?

From articles by Larry Klein with SeniorFinances Newsletter and Jamie Wilkinson, relocation specialist with ReMax Premier Realty

This year, as years past, will be paved with resolutions abandoned along the way. We will lose only some of the pounds we resolved to shed, or loose and gain them back by years end. We will be nice to our in-laws only occasionally, and never clean out the garage. But if we resolved that in 2004 we will move - here are some reasons to do it early in the first quarter.

- 1. There are fewer homes on the market.
- 2. Many people make purchasing a home THEIR New Year's resolution.
- 3. Buyers start their search so they can move in the summer.
- 4. Large corporations move executives at the beginning of the year.

Is this also the time to consider selling investment real estate?

Many individuals have done well investing in real estate over the years. Investments have been vacant land and rental property. But there often comes a point when real estate, particularly residential rentals, is too demanding an investment compared with other assets such as stocks and bonds. So what is the best way to transfer the responsibilities of managing or getting this asset out of your portfolio?

With income properties, you could hire a property manager. But sometimes this isn't cost efficient or perhaps you've had enough and want out. There are several ways to remove real

estate from your portfolio and perhaps increase your income at the same time. - An outright sale is simplest. Tax consequences, however, can take up to 15% of your long-term gains (plus State tax plus recapture tax if it applies).

- An installment sale can ease the tax bite, but you will have to wait longer to get your money, yet pay all the tax today.
- A 1031 exchange to a less demanding or higher income producing property could simplify your life and defer income taxes. For example, selling your apartment building and using the equity to buy a McDonalds results in less demands since the commercial tenant usually takes care of all property responsibilities.
- If you also want to help a charity, you could put the property into a charitable remainder trust without paying capital gains tax. The charity would sell the real estate and pay you an income as long as you live and it can even stretch to the next generation.
- You could use a private annuity and transfer the property to heirs and immediately remove it from your estate.

Before you make any changes in your real estate investments you might want to take some factors into consideration. What does your family think? Do your children expect to get or stay involved with the real estate? If you're married will your spouse have the ability or even want to take care of the real estate if you died? If not, you might end up leaving family with a bundle of problems and responsibilities.

Coming up with the appropriate strategy to remove real estate from a portfolio needs to be approached with a coordinated effort that addresses your financial, family, legal, and tax situation.

Want to sell or buy real estate with a realtor trained in working with seniors? Click, go to your state and then go to "Real Estate".

## C. DID YOU KNOW?

**Planning to travel abroad this year?** Bring your ATM card with you. Automatic teller machines give you a better rate for local currency than you get from a currency-exchange bureau or bank. Whenever possible pay with credit card because their exchange rate is generally the most favorable.

**Just as we need to be prepared for hurricanes,** electrical blackouts, tornadoes or earthquakes (depending upon what part of the country we live in), we also need to be prepared for our "retirement" years and for expected and unexpected illnesses and disabilities that may befall us. Knowing what services are available or could possibly be available in your area can

be an invaluable planning asset. There is a dictionary of services and organizational skills at to help identify what you want to know how to access for your "being prepared for aging" list.

**Is it getting harder to read on-line text?** Increase the size of text on web pages! If a website is designed with an absolute size you may not be able to enlarge all the type, but for senior friendly sites, the following should work nicely. For Internet Explorer Click on View on the top Menu Bar, Click on Text Size and enlarge the size of the text. For Netscape Click on View on the top Menu Bar, Click on Text Zoom.

## D. IS THERE ONE BOTTOM-LINE ON MEDICARE PRESCRIPTION DRUGS?

#### Barbara Krueger

Last month our article about the revisions to Medicare Prescription Drug we implied that there was time before 2006, when much of it goes into effect, for it to be modified. We delayed specifics until we could learn from the analysis of healthcare and journalistic experts the effect it was not going to have on prescription costs for lots of seniors. Readers called us on not taking a stand for or against.

"This is the reason why seniors subscribe to such groups - for information and for a unified front in the face of injustices," wrote one subscriber.

So here goes! Passage of a poor bill is only justified if there is reasonable hope that it will be modified to become a good bill before it takes effect or shortly thereafter. The only chance for modifications/improvements in this "most sweeping revision to Medicare since its inception that includes Medicare Prescription coverage" before it takes effect in 2006 is if the present administration and congress thinks their political survival depends upon its modification or those hoping to get elected in 2004 run on a platform of taking drug coverage back to the drawing board. Only voters can put such pressure on elected officials. Here are the points that we see most effecting our readers. The Medicare drug benefit goes into effect Jan, 1, 2006 for those seniors that OPT TO PAY \$30 - 35 per month for its coverage.

If you already have drug coverage on a medigap policy you cannot have supplemental drug coverage AND coverage under the new bill. (Per Robert Pear, NY Times, December 7, 2004, "Medicare beneficiaries will not be allowed to buy insurance to cover their share of prescription drug costs....") The bill "prohibits the sale of any Medigap policy that would help pay drug costs after Jan. 1, 2006." IF Medigap policies are issued in 2006 with drug coverage it will only be for recipients who DON'T opt into Medicare's drug benefit.

Gail E. Shearer a health policy analyst at Consumers Union\* claims, "Many seniors and disable people will face a huge gap in drug coverage." The new bill will establish a list of preferred "formulary" medicines as the ONLY medications Medicare will cover. Medications purchased that are not on the list (which is yet to be created) will not apply to participant's deductible.

Those who opt into the 2006 drug benefit, in addition to the \$30-35 monthly fee, will be responsible for:

- The first \$250 of meds
- 25% of meds from \$251 \$2,250 (25% of \$1999 = \$500) and
- All of the next \$2,850 for formulary meds.
- If medications costs for an individual exceeds the \$5,100 (\$250 + \$2000 + \$2,850) he or she will have laid out (\$250 + 500 + \$2,850) \$3600 for meds before the government will pick up 95% of meds.

Private medigap policies will not be allowed to pick up the \$250 initial deductible, the 25% of the next increment or any of the \$2,850 balance. If recipients already have one of the three Medigap policies that cover prescription meds, they can be renewed, BUT they MAY NOT opt into the new drug program.\*

It is possible that employers may drop prescription coverage from employee pension plans when this new Medicare coverage takes effect. Should coverage continue after Jan 1. 2006, employee pensions can help pay the share of drug costs, but their share cannot count toward your \$3,600 limit on your total expenditures.

Presently Medicaid recipients (the poorest of the seniors) receive meds under these statedirected and -administered programs. Under the new bill the poor will receive meds under Medicare, in line with what is expected to be a more restrictive "formulary" of permitted medications.

The new bill forbids states to negotiate with drug manufacturers for better prices. Therefore, states that have negotiated reduced rates from pharmaceutical companies now will experience increased med costs for Medicaid recipients in 2006 and are expected to drop that coverage and leave coverage to Medicare within the formulary. The bill allocates higher amounts of money per member to Medicare HMOs starting in 2004. The additional money in their pocket could be used to reduce premiums for enrollees, improve benefits, or a combination of both. Karen Ignagni, President of the managed care industry trade association in Washington, said HMOs could use the money to offset increases from doctors, hospitals, or earmark it for future use.

How will this effect you? If your medications are not covered by an employer plan, look at your

out of pocket prescription costs for 2003 and superimpose it on the amounts you would have to pay if you had the same costs in 2006. Add on the \$30-35 per month (\$360 - 420 for the year) opt-in medicare prescription fee. Will you be better off? If not, than you are expected to be among the majority.

\*(NY Times 12/7/03)

Get help with medications in 2004 Click on your home state and "Drug and Prescription Savings and Assistance Programs" in the Table of Contents.

## E. THOUGHTS FOR THE DAY

Worrying works! 90% of the things I worry about never happen.

If you lend someone \$20 and never see that person again, it was probably worth it.

Good judgment comes from bad experience and a lot of that comes from bad judgment.

It may be that your sole purpose in life is simply to serve as a warning to others.

### F. PARENTING PARENTS

When we reach the point of making decisions for parents, we each must deal with the reality of reversed roles. We must also realize that when we face making decisions for, or with, our parents, it's similar to sending dependent "children" off to college. We know what you expect from them and what we think they know, but they are out there responsible for making their own day-to-day decisions. We can try to influence, but in the end it is their common sense, their will or whims, that will decide - not us. When we step into the role of parenting our parent (s), unless that parent has been declared mentally incompetent by the court due to dementia or other mentally debilitating disease, we should not expect to have the power to force them to do something against their will.

It's a matter of finding the words, or a way to paint a scenario that brings them to the realization of what you think is best for them and what they think is best for them. Just as they must "buy in", we must understand the magnitude to them of what we are proposing. We must also learn that sometimes we must just "let go".

#### G. FREE

Order a prescription savings card by filling in the form, and click once to send your information to the database. Wait for the thank you screen and save the information it provides.

#### It will include:

- Your member identification number
- Password needed ONLY for on-line ordering
- The URL for on-line ordering.

By the second business day after submitting the form your account will be activated and you can purchase online at "Save/Mor" rates by going to the URL. Allow about three weeks to receive your savings card in the mail for use at participating retail pharmacies. ONE CARD IS GOOD FOR YOUR ENTIRE FAMILY. You do not need one for you AND one for your spouse, or children.

Membership has no age limit. ,/p>

#### H. SPECIAL SURFING SITES

<u>Disability Travel</u> provides travel options as well as tips for traveling. It also has a special equipment shopping area. Information provided as a courtesy from <u>ElderCareConcierge</u> helping us organize and prepare for living life to the fullest as we age and parts of our body begin to fail us. ,/p>

Freed from losing your cell phone number by new laws many people are switching cell phone providers, condensing all phones in one family to one provider to save big money. So <a href="www.what.do">www.what.do</a> <a href="

#### I. OH MY AGING FUNNY BONE

A 94 year old woman was arrested while jogging down the street. The police thought she was an escapee from a local nursing home. From Dr L. Rice.

Tom had been married to Mary for 55 years. The first day they were married they agreed that she would make the little decisions, and he would make the big ones. In 55 years there has never been a big decision to be made.

#### For Sale By Owner:

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