



**Health risk and  
sugary drinks**  
*page 9*



**Exploring TV's  
Dallas ranch**  
*page 12*



**Tax deductions:  
Your parents?**  
*page 18*

*Find Index of Caregiving Services on page 3*

# ***fifty plus*** advocate

**39<sup>th</sup>**  
*year*

Published Monthly / FREE / March 2013 / Vol. 39 / No. 3 / 24 pp.

BOSTON METRO EDITION

**Living life with purpose**



PRE-SORT STANDARD  
U.S. POSTAGE PAID  
PERMIT NO. 597  
WORCESTER, MASS.

Fifty Plus Advocate • 131 Lincoln Street • Worcester, MA 01605

CURRENT RESIDENT OR

**VOLUNTEERS NEEDED**

**You CAN HELP! Hospitals and Universities are recruiting now!**

*Participate in new research studies. See pgs. 6 & 7*



# CREMATION WHY PAY MORE?

## \$1,395.00

“Simplicity” Cremation.

Complete.

No Extra Charges

A+ Rated by the

Better Business Bureau

Family Owned

State Assistance Accepted

[www.CasperCremation.com](http://www.CasperCremation.com)

# Casper

CREMATION SERVICES

**617-269-1930**

**and 800-314-1890**

**(Toll-Free)**

MA Licensed Funeral Providers

URGENT CARE

## FLU shots Available!

Open  
7 Days A Week  
Walk-ins Welcome

### You Live. We Fix.

Relax. We're Right  
Around the Corner.

- Experienced Physicians On Site Every Day
- On Site X-Ray & Lab Work
- Vaccinations & Physicals
- Most Insurance Plans Accepted including Medicare

Mon - Fri: 8AM - 8PM  
Sat & Sun: 8AM - 5PM



**Doctors  
Express**

Urgent Care When You Need It

**BOTH LOCATIONS NOW OPEN!**

945 Worcester St., Natick, MA 01760  
508-650-6208

129 Turnpike St., North Andover, MA 01845  
978-470-0800

[www.DoctorsExpressBoston.com](http://www.DoctorsExpressBoston.com)



## WE ARE HERE TO HELP

VISITING NURSE & REHABILITATION SERVICES

PALLIATIVE CARE • HOSPICE AT HOME

HOSPICE RESIDENCE • COMMUNITY SERVICES

**Parmenter**  
Community Health Care™  
Care for Life®

266 Cochituate Road  
Wayland, MA 01778  
Tel: 508-358-3000  
[www.parmenter.org](http://www.parmenter.org)

LOCAL • INDEPENDENT • NONPROFIT • QUALITY CARE

Recognized for Excellence  **HomeCare Elite™**

National Institute for Jewish Hospice Accreditation



## FEATURED STORIES

Soc. Sec. head lambasts lawmakers	6
Medicare's expensive mistakes	7
Washington state wine Mecca	13
Nursing home evacuation troubles	16
Medicare: Equipment price cuts	16
Medicaid choice: An offer to refuse?	16
Prostate treatment side effects	17
Get ready for health ins. markets	17
Free tax help	19
DYI: New life for old plates	23

## DEPARTMENTS

Feeling Healthy	9
Home Care Tips	15
Home Improvement	22
Just My Opinion	5
Legal Briefs	19
Money Matters	18
Resource for Caregivers	15
Travel	12
Viewpoint	8



*Tongue lashing*

6



*Free tax help*

19



*Generous offer?*

16



*Old into new*

23

## ABOUT THE COVER

Judy Cockerton, 2012 Purpose Prize winner page 4.

(copyright © civic ventures.)

## ■ INDEX OF SERVICES IN THIS ISSUE ■

### ADULT DAY CARE

**Charles River Adult Day, Canton** ..... p. 11

### ADVOCACY

**AARP** ..... p. 5

### AFFORDABLE SENIOR HOUSING

**Sherwood Village, Natick** ..... p. 23

### ASSISTED LIVING

**Cefalo Memorial Complex, Melrose** . p. 10

**Oosterman, Melrose** ..... p. 20

**Oosterman, Wakefield** ..... p. 20

### ATTORNEY, ELDER LAW

**Estate Preservation Law, Worcester**.... p. 19

### CREMATION SERVICES

**Casper Cremations, Boston** ..... p. 2

### DEBT SERVICES

**Debt Counsel for Seniors/Disabled** ... p. 18

### EYE CARE SERVICES

**Eye Center of the Northshore, Salem** .p. 14

**Nielsen Eye Care, Quincy** ..... p. 11

### HEALTH CARE INFORMATION

**SHINE Program**..... p. 17

### HEALTH PLANS FOR SENIORS

**Elder Service Plan of North Shore** .... p. 16

**Upham's Service Plan, Boston** ..... p. 10

### HEARING SERVICES

**Tobias Hearing Aids, Quincy** ..... p. 11

### HOME CARE SERVICES

**ABC Home Healthcare, Wakefield** .... p. 12

**Seniors Helping Seniors, Cape Cod, Framingham MetroWest, Middlesex County, Southboro, Worcester Area** ..... p. 20

### HOSPICE

**Parmenter Comm. Health, Wayland** ... p. 2

### IN-HOME PHYSICAL/OCCUPATIONAL THERAPY

**Independent Living Innovations, .....** p. 16

### MEDICAL RESEARCH STUDIES

Exercise for Pain Study ~ UMass Boston

Type 2 Diabetes ~ Beth Israel Deaconess

Recruiting Patients for Clinical Research Studies ~ Analgesic Solutions

Postmenopausal Women ~ Mass General Hospital

### MENTAL HEALTH CARE

**Rabbi Irving Luchans, Sudbury**..... p. 17

### NURSING HOMES

**Brookline Health Care Ctr., Brookline** p. 14

**Golden LivingCenters** ..... p. 24

**Attleboro, Chestnut Hill, Cohasset, Dedham, Gloucester, Lexington, Malden, Melrose, Middleboro, Norwood, Plymouth, Taunton, West Newton**

**Wingate Healthcare, Brighton, Haverhill, Kingston, Lowell, Needham, North Andover, Reading, Sudbury**..... p. 13

### RETIREMENT COMMUNITY

**Fairing Way, South Weymouth**..... p. 14

### SUBSIDIZED HOUSING

**Bixby Brockton, Brockton** ..... p. 13

**Congregational Retirement, Melrose** p. 13

**Lamplighter Village, Canton** ..... p. 13

### URGENT WALK-IN MEDICAL SERVICES

**Doctors Express, Andover** ..... p. 2

**Doctors Express, Natick** ..... p. 2

### VOLUNTEER OPPORTUNITIES

**South Shore Elder Services**..... p. 22

*If you use any services listed above, please mention you saw their ad in the Fifty Plus Advocate.*



# Bay State woman wins prize for enriching lives of foster kids

By Brian Goslow

Judy Cockerton was happily running her two “No Kidding!” toy stores in Brookline and Mattapoisett in 1998 when her husband showed her an unsettling newspaper report.

“It was the story of a five-month-old baby boy from Worcester who had been kidnapped from his crib in his foster home in the middle of the day,” she said. “His foster mother had left him alone in the house and gone down to pick up her (own) children at a junior high school in the neighborhood. When she came back, he was gone.”

The missing boy, Marlon Devine Santos, was never found and his case remains unresolved, according to the Worcester Police Department website.

When Cockerton finished reading the article, disturbed at what might have happened to the boy, she called her children and husband in for a family meeting. “We just talked about the fact that we are all responsible for children when they’re removed from their homes and placed in foster care,” she said.

“We felt it would be much better if many, many more people in their communities were stepping up to the plate and becoming resources to kids and since we had the resources, why didn’t we step up to the plate and help them do that.”

Soon after reading about the kidnapping, Cockerton called the Massachusetts Department of Children and Families to find out how her family could assist with children in state foster care. That phone call was the first step on Cockerton’s path to the \$100,000 Purpose Prize she received last month in San Francisco for her work to enrich the lives of foster children.

This is the seventh year Purpose Prizes have been awarded. Created by Encore.org in 2005 (when the company was known as Civic Ventures) to put the spotlight on the value of baby boomers’ life experiences and prove they have as much passion to create new programs to better society as younger citizens, it presents five \$100,000 awards annually to people over age 60 who are serving in encore careers dedicated to developing new ways to solve social problems. The John Templeton Foundation and The Atlantic Philanthropies fund the prize.

Cockerton, now 61, and her husband, Arthur, now 62, of Sharon, entered the world of child welfare knowing about as much as any typical American does: not much. “I entered (the world of foster par-

enting) with a five-month-old on one hip and a 17-month-old on another hip,” she said. “I just opened that door (to foster care) with two beautiful babies in my arms that I cared deeply for and saw the reality of the public foster care system. And what I saw missing, more than anything, were ordinary citizens like myself.”

Her own children were 12 and 18 at the time.

“They were delighted to be a part of it and delighted to welcome children into our home and delighted to go on to become adoptive siblings,” Cockerton said.

Bringing two foster children into her family’s life was only the beginning of Cockerton’s contribution. She sold her two stores and became a full-time advocate for foster children.



Purpose Prize winner Judy Cockerton with Anna Evans and Aliana Morales (from l to r).

“I wanted to create this new compelling menu of engagement options so Americans of all ages and backgrounds could become resources to children in foster care,” she said.

For the past 10 years, she has overseen the Easthampton, Mass.-based Treehouse Foundation; the foundation’s mission is to help move children out of the public foster care system into lifetime families and communities that invest in their lives every day of the week.

Among the programs the foundation supports are:

- The Suitcase Project, in which donated empty duffel bags and suitcases are given to social workers at the Department of Children and Families to distribute to foster kids in their system so they have a place to keep their clothing and possessions;

- The creation of Birdsong Farm, a new farm-based education center in southeastern Massachusetts, which will serve foster children from newborns to age 18; and

- The Re-envisioning Foster Care in America Initiative, launched in 2010, in which Treehouse partners and collaborates with stakeholders throughout the entire western region to harness creative ideas

and leverage people, dollars and ideas to better serve children and youth places in the public foster care system.

It is the last initiative that led to Cockerton being awarded a Purpose Prize. Cockerton’s honor was sponsored by AARP to honor Intergenerational Innovation.

“This is the second year AARP has sponsored a special Purpose Prize to recognize people who bring generations together to benefit society,” said Barb Quaintance, managing director of AARP Experience Corps. “Judy is an excellent example of public service because of her steadfast commitment and her ability to tackle a social issue

head on with passion, purpose and determination. Judy has used a lifetime’s worth of experience to make a difference in the lives of others — young and old.”

AARP CEO Barry Rand participated on the Purpose Prize for Intergenerational Innovation judging panel that selected Cockerton.

“We were extremely moved by Judy’s steadfast commitment to providing unique learning opportunities for children in foster care by connecting them with older mentors in their communities,” Quaintance said. “She embodies the very spirit of service that is part of AARP’s mission to lead positive, multigenerational social change.”

Quaintance said it’s extremely important to have people like Cockerton lead by example.

“Too often, we think, ‘Oh, the problem is too big. I’m just one person,’ but a story like Judy’s shines a light on the power of just one person — and the ripple effect is huge,” she said. “Judy and her fellow Purpose Prize winners inspire us all and



Cockerton

help us see that making the world a better place is a responsibility that belongs to all of us.”

Cockerton didn’t wait long to put her \$100,000 prize to good use.

“I have already invested it in the work that I’m currently doing,” said Cockerton, who said going from the world of business to the world of non-profits was an eye-opening experience. Instead of selling a product, she was selling an idea; she estimates she spends 90 percent of her time fundraising.

“In order to accomplish what the children need me to accomplish — and need all of us to accomplish for them — means that I have to stay really focused, so getting a \$100,000 Purpose Prize award is such a gift,” she said.

While she has more than a full plate, Cockerton remains enthusiastic about all of the Treehouse-related programs. “I love it,” she said. “It’s my passion. I feel great and have deep joy in doing this work. I love collaborating with stellar people to create solutions and receiving the Purpose Prize has just given me the opportunity to do more of that. For the past 10 years, I’ve collaborated and partnered and invested in innovation and there’s really nothing better for me.”

## Internet photo goes viral, showing true love despite adversity

By Sondra L. Shapiro

Social media meets flashcards is what I thought while half-heartedly watching NBC news coverage of a photo that had gone viral on the Internet. Just one more photo or film clip plucked from YouTube or other Internet outlets by television news programs to be used in an effort to make news broadcasts hip and relevant to a younger audience.

Usually the subject matter is someone’s child or baby dancing, singing or reciting words beyond the child’s years. Or it’s a pet engaged in un-animal like behavior. Or it was last year’s film of the elderly couple playing around with the camera on their computer — a scenario

that perpetuated the stereotype of cute little old couples fumbling their way through technology.

So, when my peripheral vision caught the image of an elderly couple sitting at a table at a Starbucks with a set of flashcards spread out on the table, I was underwhelmed. “What’s the big deal?” I asked my husband.

But, then I caught the commentator’s words. “Eighty-two year-old John Allen patiently teaches his 70-year-old girlfriend Linda Alexander how to read again after her stroke,” reported NBC’s Kristen Dahlgren. At the time of the newscast, more than 2 million people had seen

VIRAL page 5

**fifty plus**  
advocate

**Eastern Massachusetts Edition**  
131 Lincoln Street, Worcester, MA 01605  
Serving the Fifty Plus Community since 1975  
(508) 752-2512 • FAX: (508) 752-9057

Bookkeeping: ext. 6, Circulation: ext. 7, Sales Manager: ext. 5

Publisher: Philip Davis  
Executive Editor /  
Assistant Publisher: Sondra Shapiro: ext. 136  
Staff Reporter: Brian Goslow: ext. 135  
Travel Writer: Victor Block  
Art Director: Susan J. Clapham: ext. 142  
Bookkeeper: Stacy Lemay: ext. 6

Research Study Advertising:  
Donna Davis: ext. 130  
Boston Metro / Boston South Sales Manager:  
Reva Capellari: ext. 5  
Sales:  
Donna Davis: ext. 130  
Cara Kassab: ext. 125

Members of the Associated Press.

- Fifty Plus Advocate is published monthly, 12 times annually by Mar-Len Publications, Inc. 131 Lincoln St., Worcester, MA 01605.
- Fifty Plus Advocate accepts no responsibility for unsolicited manuscripts or materials and does not return them to sender. Retractions for any inaccuracies will be printed when necessary. Unsolicited letters to the editor become the property of this newspaper and can be reprinted in part or in whole unless otherwise stated. Fifty Plus Advocate columnists writing under a byline are expressing their personal opinions and not necessarily those of the newspaper.

Read more at [www.fiftyplusadvocate.com](http://www.fiftyplusadvocate.com)



## ► Viral

Cont. from page 4

the snapshot, many offering comments such as: "Every time I need a bit more patience, I will think of this picture," or, "This is what true love is all about."

The snapshot transcended the trite photo-of-the-day category to become a real human-interest story that conveyed so much in and behind its composition. When news organizations picked up the story, we got to learn about the two people behind the picture.



### Just My Opinion

The couple was dating when Alexander suffered a stroke five years ago that robbed her of most of her speech and ability to recognize letters.

Rather than abandoning the ailing Alexander, Allen made it his mission to help her become whole again.

Almost every day the couple goes to a Starbucks where Allen uses flashcards to help Alexander learn to read again. It was during one of those sessions that Matthew Ballestero, a 20-something, was sitting with two friends when he happened to notice the couple, pulled out his smart phone and took the picture, then posted it on Facebook and Reddit, both social media sites.

The action is very typical of today's online culture that takes and shares photos, thoughts and experiences of just about every moment of their day. What is different is the motivation behind the action. "We could feel the love emanating off of them," said Ballestero. "My friends and I were overwhelmed by the love that these two had for each other and I knew I wanted to let them know how much of an inspiration and a perfect example of true love they were to me," Ballestero posted on his Facebook page.

"This is definitely a moment I will remember forever — John's unwavering love, patience and understanding for the woman he chose to give his life to. Linda's endless positive attitude, eagerness to (re)learn and mostly her uninhibited joy in expressing love to others. ... Thank you for your beautiful example, Linda and John!" wrote Ballestero.

It is heartening to hear of one so young exhibiting such sensitivity toward the elderly, to see beyond the stereotype to poignantly convey a portrait of love, devotion and selflessness. It is so rare for the young to apply such human characteristics to old people, let alone even notice them in a social setting.

Ballestero also inadvertently captured an image that portrays what is happening in millions of American homes — individuals providing care for sick loved ones. And, just as the caregiver and the

person who they are caring for had a life before, there was more behind that photo of Alexander and Allen who have now been dating for 11 years. When Ballestero first approached the couple, Alexander said, "You see, I've lost my memory and I'm trying to get it back."

Before her stroke, Alexander was a manager at Raytheon. Now, in addition to difficulty with reading, she is partially paralyzed on her right side. So, six days a week Allen shows up at her home to get her ready for the day. He greets her with "Good morning Sunshine." Three days a week, Allen takes Alexander to the gym where he works with her to restore function.

Though Alexander is very different from the woman he fell in love with 11 years ago, Allen is still devoted to her. He is extremely patient with her and she is so upbeat as she and Allen run through their difficult and strenuous routine. All the while she tells him, "I love you."

The fact that they also make sure that it isn't all work, managing to fit in romantic lunches, proves that even in a care giving/care receiving relationship,



(courtesy of matthew ballestero)

intimacy and love has a place. And, in fact, could keep that relationship from becoming one-dimensional where the caregiver views his or her charge as just someone needing care. The thought that true companionship can continue is inspirational to others in the same kind of relationship.

To NBC's

Dahlgren, Alexander said, "I really enjoy my life. I'm not sad, I'm not angry." Alexander looks ahead and wants to someday be able to drive again. This attitude is encouraging to anyone suffering from a debilitating condition and who sees no light at the end of the tunnel.

What does Allen get from this? He doesn't say it, but from his actions it is safe to conclude he has found a profound sense of purpose from caring for this woman who he clearly adores. This too, is an underreported bonus for individuals who provide care to a loved one.

This slice of life photo taken by a sensitive young man has had a rippling effect on so many levels. It also proves that I should be less cynical when it comes to the social media's infiltration of legitimate news organizations.

And, for the couple at the center of it all ...

"When I told them that the photo had gone viral they were overjoyed, confused and in shock — the good kind of shock," said Ballestero in an interview with *Mashable*, an online news source. "John and Linda have so much love, respect and compassion for each other and the people they meet, it's inspiring just to be in their presence."

Sondra Shapiro is the executive editor of the *Fifty Plus Advocate*. Email her at [sshapiro.fiftyplusadvocate@verizon.net](mailto:sshapiro.fiftyplusadvocate@verizon.net). And follow her online at [www.facebook.com/fiftyplusadvocate](http://www.facebook.com/fiftyplusadvocate), [www.twitter.com/shapiro50plus](http://www.twitter.com/shapiro50plus) or [www.fiftyplusadvocate.com](http://www.fiftyplusadvocate.com)

**AARP**  
FOUNDATION

Our help is free,  
individualized and  
no strings attached.  
And we're right here  
in your community

### Call today for information about AARP Foundation Tax-Aide.

AARP Foundation Tax-Aide is the nation's largest volunteer-run tax assistance and preparation service. Our free service can address most of the tax filing issues faced by low- and moderate-income taxpayers, with special attention to those age 60 and older.

Last year 600 AARP Foundation Tax-Aide volunteers helped over 39,000 Massachusetts taxpayers file their returns. During the tax season, AARP Foundation Tax-Aide sites are conveniently located throughout the Bay State in Libraries and senior centers. AARP volunteers are also available to answer your questions online.

Visit [aarp.org/ma](http://aarp.org/ma) or call 1-888-AARP-NOW (1-888-227-7669) to locate a site.

**AARP FOUNDATION  
TAX-AIDE**

AARP Foundation Tax-Aide is  
offered in conjunction with the IRS.



# Social Security head says program fraying from neglect

By Stephen Ohlemacher

WASHINGTON —

Outgoing Social Security Commissioner Michael J. Astrue had some parting shots for Congress, the White House and advocates for seniors. They have all “really walked away from Social Security,” he said, leaving the program “fraying because of inattention to its problems.”

Instead of making the hard choices to fix Social Security's financial problems, policymakers “use it as a tool of political rhetoric,” Astrue said.

Astrue, 56, has headed the federal government's largest program since 2007 — he was nominated by former President George W. Bush.

The trustees who oversee Social Security say the program's trust funds will run dry in 2033, leaving Social Security with only enough revenue to pay about 75 percent of benefits. Already the program is paying out more in benefits than it collects in payroll taxes.

As commissioner, Astrue served as a trustee. He regularly urged Congress to address Social Security's long-term financial problems but refrained from publicly weighing in on various options to cut benefits or raise taxes — until now.

In an interview with The Associated Press, Astrue said benefit cuts and tax increases are inevitable — despite fierce opposition to both. Yet he questions whether Congress is up to the task.

Q: The president and Republican leaders in Congress have both embraced changes to Social Security as part of negotiations to reduce government borrowing. Should Social Security be part of the deficit and debt discussions?

A: My general perspective is that Washington broadly, and I include the Congress, parties, the executive branch, the major interest groups, have really walked away from Social Security. ... I think that Social Security is a gem. I think it is the most successful domestic program in the history of the United States government and it is fraying because of inattention to its problems. And I think it's a shame that Washington cannot get its act together to look at Social Security in detail in isolation and say, What do we need to do?

Q: There are some in Congress who say only benefit cuts should be considered — no tax increases. Others say benefit cuts should be off the table. Where do you come down?

A: Nothing is going to happen if you establish preconditions for the conversation. I do think that for the people who simply want to tax more, you need to be very mindful of the fact that that tax will fall disproportionately on the younger generation and that if you're not careful, that could



Outgoing Soc. Sec. head throws parting shots at policymakers and senior advocates

be a huge economic drag.

Q: One of the few issues that the president and Republicans in Congress agree on is changing the way the government measures inflation. As you know, this would reduce the annual cost-of-living adjustment, or COLA, for Social Security recipients. Advocates for seniors hate the idea. They want bigger COLAs, not smaller ones. What do you think?

A: As a general matter I do think that the president and the Congress are right that before you start talking about increases in the retirement age and things like that, it's appropriate to try to have a conversation about what we might be able to do in terms of COLA adjustments.

Q: The age when retirees can receive full benefits is gradually increasing from 66 to 67. There are proposals to increase it gradually even more, perhaps as high as 70. What do you think of those proposals?

A: I think there's some historical inevitability that we will move in that direction. How far, I don't think is historically inevitable. Part of this we need to remember is not that the system is flawed or that there are evil people around here. I mean, we should celebrate a little bit of good news. Most of the pressure on the system comes from the fact that we've had great medical advances and people are living a lot longer than before.

Q: Social Security payroll taxes only apply to the first \$113,700 of a worker's wages. There have been proposals to increase this threshold or even eliminate it, applying the tax to all wages. What do you think of those ideas?

A: I think there's some historic inevitability on at least

some lifting of the (payroll tax) cap. I think that most politicians and I think most economists I've talked to generally think that that would have less of a negative impact on the economy than raising the rate itself.

Q: Applications for disability benefits increased dramatically when the economy went bad. Why did that happen?

A: I think a lot of people applied out of economic desperation. Very few of those people actually ended up getting benefits. If you look at the numbers, it's one of the reasons why our approval rates have dropped dramatically in the last few years.

Q: Aren't most disability claims initially denied?

A: Yes.

Q: Why?

A: Because the statutory standard is so stringent. In terms of the percentage who get on, both in the beginning and at the end of the process, it's somewhere usually, in most years, 7

in the 35 to 40 percent range. Sometimes people talk like nobody gets approved initially, and that's not true. Some people say, Oh, everybody gets on, and that's not true, either. But the statutory standard is you have to be unable to do work that exists in the national economy for 12 months or more.

Q: If your claim is denied, you can appeal to an administrative law judge, but the process can take a year or more. Tell me about your efforts to reduce these backlogs.

A: We've done, I think, some yeoman's work in reducing the backlogs. ... If you look at time to a hearing, what we call average processing time, it peaked very shortly after I started at 542 days and it got down to about 340 (days) and then drifted up a little bit with all the budget cuts in the last couple of years. But it's still about a year on average, and that's a big improvement.

Q: Are you getting enough resources from Congress to address these backlogs?

A: No.

Q: The Association of Administrative Law Judges says that in order to reduce backlogs some judges are deciding more than 500 cases a year. Is that too many cases to do a thorough job on each one?

A: No, not at all. We set, for the first time, productivity standards in 2007. It was actually done by the chief judge, and it was done looking at best demonstrated practices of existing judges. At that point in time about 40 percent of the judges were doing 500 to 700 cases a year. And so that's what we set as our goal, and that's what it is, it's a goal to shoot for. ... Now, about 80 percent of the judges hit that goal. — AP



## RESEARCH STUDY Opportunities

Join thousands of volunteers leading the way to medical breakthroughs!

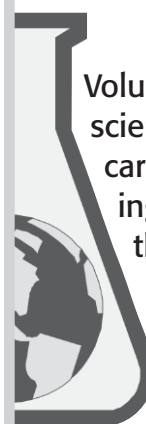
### ARE YOU A POSTMENOPAUSAL WOMAN?

*Interested in the effects of aging and estrogen on the brain?*



The Reproductive Endocrine Unit at Massachusetts General Hospital seeks healthy postmenopausal women ages 45-55 and 65-80 for a research study. There are three outpatient visits after screening which include MRI and PET scans. Compensation up to \$ 600. For more information, please call Taylor at 617-726-5384 or e-mail [thuhta@partners.org](mailto:thuhta@partners.org)

### Make a difference for many lifetimes



Volunteers in research studies contribute to medical science, thus charting new pathways of treatment and care for others. Participants can also benefit by obtaining breakthrough research treatments available only thru trials, most at no cost.

**You can make a difference.**

Call one of the clinical trials advertising in the **Fifty Plus** newspapers for volunteers now!



# Reports: Medicare paid \$120M in illegal care

The taxpayer-funded Medicare program paid more than \$120 million from 2009 to 2011 for medical services for inmates and illegal immigrants, in violation of federal law, according to two reports issued last month by federal health officials.

Under federal law, Medicare generally does not pay for services for either group of patients. But the program was billed for more than \$33 million in inmate care and more than \$91 million for illegal immigrant care over that period, according to the reports from the Department of Health and Human Services inspector general.

In 2011, Medicare expenditures were \$549 billion, making the figures a fraction of the program's annual budget. But the reports come as the Obama administration and Congress look for savings in a lean budget year. Putting a dent in Medicare fraud, estimated at \$60 billion a year, has the potential for major savings.

The reports recommend that federal health officials establish a better system to automatically flag charges for inmates and illegal immigrants to stop illegal payments before they are made.

The Centers for Medicare and Medicaid Services already had a system in place to do so, but the reports found that the system didn't catch improper bills until they had already been paid. The reports also noted that the agency didn't instruct its contrac-

tors to try to recoup the lost funds.

The agency agreed in the report that the system needs to be improved, and in April, Medicare is launching a process to help detect and recoup lost money.

"For cases where Medicare is informed of patients' unlawful presence after claims have been paid, we are working to implement a process for quickly and completely recouping these improper payments," the agency said in a statement.

Sen. Tom Carper, D-Del., chairman of the Senate subcommittee on Federal Financial Management, said the improper payments must be recovered, and he commended the agency for its plan to take action.

"Paying more than \$120 million in Medicare funds for health care services for people who are clearly not eligible for Medicare benefits is unacceptable," he said.

The Centers for Medicare and Medicaid Services has already been using a new, highly touted \$77 million technology system since 2011 designed to stop fraudulent payments before they are paid.

But lawmakers have been skeptical about the effectiveness of the system, and federal health officials have said they are still working out kinks. Still, initial reports in December showed that the system has saved about \$115 million and spurred more than 500 investigations, according to federal health officials. — AP

## Research Study on Type 2 Diabetes

Volunteers wanted for a research study that evaluates the effects of insulin administered in the nose on blood flow in the brain and memory.

**Looking for 60 participants (age >50 years):**


- Group 1: type 2 diabetes mellitus for > 5 years
- Group 2: healthy controls without major health problems

Study visits include: Overnight stay for 3 days, blood tests, medical and memory examinations, blood flow measurements using ultrasound and MRI.

*Stipend: up to \$220 for completing the study.*

Beth Israel Deaconess Medical Center, Boston

**If interested, please call:**  
**SAFE Laboratory 617-667-1777**  
**SAFELab@bidmc.harvard.edu**



## SENIORS

### CONTRIBUTE TO THE UNDERSTANDING OF AGING AND COGNITION

Are you healthy, mentally active, over the age of 65?  
**The Aging and Cognition Lab is looking for subjects**  
The experiment explores effects of aging on cognition.  
Noninvasive and no medication involved.


- 2 hour time commitment
- Provides \$15/hour

Please Call (617) 495-3856  
**Department of Psychology**  
**HARVARD UNIVERSITY**


## Analgesic Solutions is recruiting patients to participate in Clinical Research Studies

- Painful Diabetic Neuropathy (PDN)
- Osteoarthritis of the Knee (OA)
- Chronic Low Back Pain (CLBP)
- Post-Traumatic Peripheral Neuropathic Pain (PTPN)
- Opioid Experienced (Current or previous use of prescribed opioids)
- Post Herpetic Neuralgia (PHN)

**Compensation will be provided**




**Call now for more information:**  
**781-444-9605 x136**



## FREE INFORMATION, No-OBLIGATION

(Check off the study and a research study coordinator will call you.)

- ☐ Aging Study ~ Harvard University
- ☐ Postmenopausal Women ~ Mass General Hospital
- ☐ Type 2 Diabetes ~ Beth Israel Medical Center
- ☐ Chronic Low Back Pain ~ Analgesic Solutions
- ☐ Opioid Experienced ~ Analgesic Solutions
- ☐ Osteoarthritis of the Knee ~ Analgesic Solutions
- ☐ Painful Diabetic Neuropathy ~ Analgesic Solutions
- ☐ Peripheral Neuropathic Pain ~ Analgesic Solutions
- ☐ Post Herpetic Neuralgia ~ Analgesic Solutions

 **CUT OUT THIS COUPON AND MAIL TO:**

**Fifty Plus Advocate, 131 Lincoln Street, Worcester, MA 01605**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone #: **\*REQUIRED** (      ) \_\_\_\_\_

\*We cannot process without your phone #. It will be used only in regard to the studies you have marked.



# Home care waiting lists must end

By Michael E. Festa

This is not fiction: A 101-year-old Massachusetts senior with a serious heart condition has the ability to live independently in his home, with the help of his daughter, but may be forced into a nursing home because he cannot get the home care services he needs. He is currently on a waiting list — for home care.

Home care helps people stay independent in their own homes by providing a variety of services, including home-maker and chore services, transportation, protective services, respite care to relieve caregivers and information and referral.

Today, more than 1,000 Massachusetts seniors are not receiving the home care services for which they are eligible. Instead, they are put on waiting lists. Many are forced into premature nursing home care, which is more expensive for families and for the commonwealth.

Others rely exclusively on their family caregivers, giving these dedicated individuals no respite, at the cost of their own personal health and sometimes their jobs.

Still others die while waiting. This is unacceptable.

AARP believes: The time to end home care waiting lists is now — for our seniors, for their caregivers, for our commonwealth.

Time and time again, our research finds that the vast majority of seniors want to stay in their own homes and communities as they age. Yet, long-term care in the

commonwealth is weighted disproportionately toward institutional care, like nursing homes, leaving home care under-funded, seniors under-served and caregivers overstressed. This must change.

Today, 10 million seniors nationwide rely on others for assistance with daily care. This number will grow as boomers head into their 70s, 80s and beyond. And, long-term care is, indeed, an expensive proposition.

Medicare does not pay for most long-term care. And, most families have not yet planned for long-term care needs. Instead, they make difficult decisions during an unexpected crisis, without ample time to understand

## AARP and You

options and have frank conversations with their loved ones; certainly not the ideal situation.

Long-term care insurance is available, but only a small percentage of adults in the U.S. purchase these plans, mainly due to the cost and complexity. In Massachusetts, AARP fought hard to get a law passed that will standardize long-term care insurance in the commonwealth — making it easier for consumers to understand and compare plans.

Not surprisingly, most Americans support the notion of helping out older family members in need. But, we also must provide support for family caregivers. In Massachusetts, three major home care programs are available: a basic program, and two enhanced options that provide a higher level of service for those seniors who are medically eligible for a nursing home — including respite care to give caregivers a break.

Home care programs served 64,000 Bay State residents last year. Some pay privately for these services or through long-term care insurance; others receive help from MassHealth, the commonwealth's Medicaid program.

Strengthening and rebalancing long-term care — that includes high quality, affordable skilled nursing facilities, assisted living facilities, adult day health services, senior housing and home and community based services — for today's seniors, and those who will need these services in the next decades, should be a priority for all of us. After all, by 2030, the 65-plus population will grow to more than 20 percent in Massachusetts or an estimated 1.5 million residents.

We must make available the long-term care services that our older residents need, in a way that is fiscally responsible for individuals, families and the commonwealth.

But, right now, we have an immediate priority. AARP is fighting to end home care waiting lists — and on other issues that matter to you and your family.

If, like me, you believe home care waiting lists must end, once and for all, join me in raising your voice. Call your state legislators today at 888-259-9789: Urge them to fully fund home care in the Fiscal Year 2014 state budget — and end home care waiting lists.

*Michael E. Festa is the state director of AARP Massachusetts, which represents more than 800,000 members age 50 and older in the Bay State. Connect with AARP Massachusetts online at [www.aarp.org/ma](http://www.aarp.org/ma); [www.facebook.com/AARPMMA](http://www.facebook.com/AARPMMA); and [www.twitter.com/AARPMMA](http://www.twitter.com/AARPMMA).*

## Will the legislature end home care waiting lists?

By Al Norman

In September of 2012, a coalition of five elder advocacy groups sent a letter to Gov. Deval Patrick urging him to help end the home care waiting lists. Their letter was never answered. More than 100 activists went to the State House and presented the governor with a cell phone, hoping for "better reception" for their proposals.

As of Jan. 15 there were 1,224 people on a home care waiting list — and the numbers are rising. For a state that calls its elder-care policy "Community First," the idea of people waiting to get community care is an oxymoron. Ironically, we have a 12 percent vacancy rate for nursing homes beds.

We have proven that home care creates

a major cost-savings for taxpayers. Over the past 12 years, nursing home days paid for by MassHealth have fallen by roughly 32 percent. That's more than 4.5 million fewer nursing home days in 2012 compared to 2000. This has produced a savings to taxpayers of more than \$703 million a year in avoided institutional costs. We call this "the home care dividend."

In 2010, the state's Bureau of Health Care Safety and Quality projected that by 2015 we would have 10,772 surplus nursing home beds in Massachusetts. The private marketplace has been 'rebalancing,' but we still spend

two-thirds of our MassHealth long-term care dollars on institutions.

Since the governor took office six years ago the elder services line items have lost \$36.4 million in buying power. In June of 2006, then candidate Deval Patrick said the following:

## Push Back

"The long-term care system in Massachusetts favors institutional care over care in the community and at home. This neither respects the wishes of most older adults, nor follows the law of requiring care in the least restrictive environment, nor spends public dollars prudently ... A large portion of older and disabled adults see community care as the best choice. Massachusetts has made efforts and significant progress toward the rebalancing of the long term care system through support of community-based services ... However, there is far more that needs to be done to fundamentally rebalance the system."

Yet the governor's budget mostly flat-

lined home care programs. We have turned to the General Court to add nearly \$13 million to the governor's budget to help us keep the elderly living independently at home, where they so passionately want to be. That \$13 million is a small price to pay as a down payment on the home care dividend.

It's about time that the governor and the General Court recognize that home care programs have helped conquer one of the greatest "budget busters" facing this state: the cost of nursing home care. Expenditures on nursing homes in 2012 were \$290 million less than in 2005. That's a remarkable turnaround.

"Can you hear us now, governor?" the elder activists chanted in the State House. The governor clearly did not hear the message. His budget was flat. Now the \$13 million question is: "Can the legislature hear us now?"

*Al Norman is the executive director of Mass Home Care. He can be reached at [info@masshomecare.org](mailto:info@masshomecare.org), or at 978-502-3794.*

## Enjoy Home Delivery of fifty plus advocate

☐ 1 year - \$18 ☐ 2 years - \$34 ☐ 3 years - \$48

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

If change of address or renewal, place mailing label here and your new address.

MAIL TO: **fifty plus**  
131 Lincoln St., Worcester, MA 01605

You can enjoy the convenience of having your **Fifty Plus Advocate** delivered to you at home, insuring you that you will never miss an issue. Just fill out this coupon and enclose payment.

## Read Back Issues of the

# fifty plus

advocate

[www.fiftyplusadvocate.com](http://www.fiftyplusadvocate.com)





# Brain image study: Fructose may spur overeating

By Marilyn Marchione  
and Mike Stobbe

This is your brain on sugar — for real. Scientists have used imaging tests to show for the first time that fructose, a sugar that saturates the American diet, can trigger brain changes that may lead to overeating.

After drinking a fructose beverage, the brain doesn't register the feeling of being full as it does when simple glucose is consumed, researchers found.

It's a small study and does not prove that fructose or its relative, high-fructose corn syrup, can cause obesity, but experts say it adds evidence they may play a role. These sugars often are added to processed foods and beverages, and consumption has risen dramatically since the 1970s along with obesity. A third of U.S. children and teens and more than two-thirds of adults are obese or overweight.

All sugars are not equal — even though they contain the same amount of calories — because they are metabolized differently in the body. Table sugar is sucrose, which is half fructose, half glucose. High-fructose corn syrup is 55 percent fructose and 45 percent glucose. Some nutrition experts say this sweetener may pose special risks, but others and the industry reject that claim. And doctors say we eat too much sugar in all forms.

For the study, scientists used magnetic resonance imaging, or MRI, scans to track blood flow in the brain in 20 young, normal-weight people before and after they had drinks containing glucose or fructose in two sessions several weeks apart.

Scans showed that drinking glucose "turns off or suppresses the activity of areas of the brain that are critical for reward and desire for food," said one study leader, Yale University endocrinologist Dr. Robert Sherwin. With fructose, "we don't see those changes," he said. "As a result, the desire to eat continues — it isn't turned off."

What's convincing, said Dr. Jonathan Purnell, an endocrinologist at Oregon Health & Science University, is that the imaging results mirrored how hungry the people said they felt, as well as what earlier studies found in animals.

"It implies that fructose, at least with regards to promoting food intake and weight gain, is a bad actor compared to glucose," said Purnell. He wrote a commentary that appears with the federally funded study in a recent *Journal of the American Medical Association*.

Researchers now are testing obese people to see if they react the same way to fructose and glucose as the normal-weight people in this study did.

What to do? Cook more at home and limit processed foods containing fructose and high-fructose corn syrup, Purnell suggested. "Try to avoid the sugar-sweetened beverages. It doesn't mean you can't ever have them," but control their size and how often they are consumed, he said.

A second study in the journal suggests that only severe obesity carries a high death risk — and that a few extra pounds might even provide a survival advantage. However, independent experts say the methods are too flawed to make those claims.

The study comes from a federal researcher who drew controversy in 2005 with a report that found thin and normal-weight people had a slightly higher risk of death than those who were overweight. Many experts criticized that work, saying the researcher — Katherine Flegal of the Centers for Disease Control and Prevention (CDC) — painted a misleading

picture by including smokers and people with health problems ranging from cancer to heart disease. Those people tend to weigh less and therefore make pudgy people look healthy by comparison.

Flegal's new analysis bolsters her original one, by assessing nearly 100 other studies covering almost 2.9 million people around the world. She again concludes that very obese people had the highest risk of death but that overweight people had a 6 percent lower mortality rate than thinner people. She also concludes that mildly obese people had a death risk similar to that of normal-weight people.

Critics again have focused on her methods. This time, she included people too thin to fit what some consider to be normal weight, which could have taken in people emaciated by cancer or other diseases, as well as smokers with elevated risks of heart disease and cancer.

"Some portion of those thin people are actually sick, and sick people tend to die sooner," said Donald Berry, a biostatistician at the University of Texas MD Anderson Cancer Center in Houston.

The problems created by the study's inclusion of smokers and people with pre-existing illness "cannot be ignored," said Susan Gapstur, vice president of epidemiology for

BRAIN page 10



## Benefit from the most extensive library of caregiving articles!

### Get the answers to:

- How do you treat sleep problems in elderly with dementia?
- How do you communicate with a memory impaired loved one?
- Do adult children worry too much about their parents?
- What do you do about age related eye problems?
- What benefits are veterans entitled to?
- Why are on-line wills dangerous?
- What is elder law and how does it apply to your family?
- Do caregivers deserve some time off?
- How does the Medicaid five-year look back work?

Find these articles and more at [www.fiftyplusadvocate.com](http://www.fiftyplusadvocate.com)

You can scan this QR code to go directly to our online library of articles



Let our experts help you!



**fifty plus**  
advocate.com

Over 20,000 visitors  
each month!



# Study says leafy greens top food poisoning source

NEW YORK —

A big government study has fingered leafy greens like lettuce and spinach as the leading source of food poisoning, a perhaps uncomfortable conclusion for health officials who want us to eat our vegetables.

"Most meals are safe," said Dr. Patricia Griffin, a government researcher and one of the study's authors who said the finding shouldn't discourage people from eating produce. Experts repeated often-heard advice: Be sure to wash those foods or cook them thoroughly.

While more people may have gotten sick from plants, more died from contaminated poultry, the study also found. The results were released by the Centers for Disease Control and Prevention (CDC).

Each year roughly 1 in 6 Americans — or 48 million people — gets sick from food poisoning. That includes 128,000 hospitalizations and 3,000 deaths, according to previous CDC estimates.

The new report is the most comprehensive CDC has produced on the sources of food poisoning, covering the

years 1998 through 2008. It reflects the agency's growing sophistication at monitoring illnesses and finding their source.

What jumped out at the researchers was the role fruits and vegetables played in food poisonings, said Griffin, who heads the CDC office that handles foodborne infection surveillance and analysis.

About 1 in 5 illnesses were linked to leafy green vegetables — more than any other type of food. And nearly half of all food poisonings were attributed to produce in general, when illnesses from other fruits and vegetables were added in.

It's already been kind of a tough year for vegetables. A controversy erupted when Taco Bell started airing a TV ad for its variety 12-pack of tacos, with a voiceover saying that bringing a vegetable tray to a football party is "like punting on fourth-and-1." It said that people secretly hate guests who bring vegetables to parties.

The fast-food chain pulled the commercial after receiving complaints that it discouraged people from eating

vegetables.

Without actually saying so, the CDC report suggests that the Food and Drug Administration (FDA) should devote more staff time and other resources to inspection of fruits and vegetables, said Michael Doyle, director of the University of Georgia's Center for Food Safety.

Meanwhile, CDC officials emphasized that their report should not be seen as discouraging people from eating vegetables.

Many of the vegetable-related illnesses come from norovirus, which is often spread by cooks and food handlers and had more to do with the kitchen or restaurant it came from than the food itself, Griffin noted.

Also, while vegetable-related illnesses were more common, they were not the most dangerous. The largest proportion of foodborne illness deaths — about 1 in

5 — were due to poultry. That was partly because of three big outbreaks more than 10 years ago linked to turkey deli meat.

But it was close. CDC estimated 277 poultry-related deaths in 1998-2008, compared to 236 vegetable-related deaths.

Fruits and nuts were credited with 96 additional deaths, making 334 total deaths for produce of all types. The CDC estimated 417 deaths from all kinds of meat and poultry, another 140 from dairy and 71 from eggs.

Red meat was once seen as one of the leading sources of food poisoning, partly because of a deadly outbreak of E. coli associated with hamburger. But Griffin and Doyle said there have been significant safety improvements in beef handling. In the study, beef was the source of fewer than 4 percent of food-related deaths and fewer than 7 percent of illnesses. — AP



## ► Brain

Cont. from page 9

the American Cancer Society.

A third critic, Dr. Walter Willett of the Harvard School of Public Health, was blunter: "This is an even greater pile of rubbish" than the 2005 study, he said. Willett and others have done research since the 2005 study that found higher death risks from being overweight or obese.

Flegal defended her work. She noted that she used standard categories for weight classes. She said statistical adjustments were

made for smokers, who were included to give a more real-world sample. She also said study participants were not in hospitals or hospices, making it unlikely that large numbers of sick people skewed the results.

"We still have to learn about obesity, including how best to measure it," Flegal's boss, CDC Director Dr. Thomas Frieden, said in a written statement. "However, it's clear that being obese is not healthy — it increases the risk of diabetes, heart disease, cancer, and many other health problems. Small, sustainable increases in physical activity and improvements in nutrition can lead to significant health improvements." — AP

## Are you stressed caring for your loved one?

Does your loved one miss medical appointments?  
Is it hard for your loved one to get dressed or get out?



Upham's Elder Service Plan



### CAN HELP!

With PACE, a Program of All-Inclusive Care for the Elderly, your loved one can receive all-inclusive care at home, instead of in a nursing home.

- In-home health and personal care
- Day center program, activities and meals
- Interdisciplinary team of health care and social service providers

- Comprehensive medical treatment, including primary care, specialists, hospitalization and rehabilitation
- Full prescription drug coverage without copays
- Transportation to the day center and to all appointments

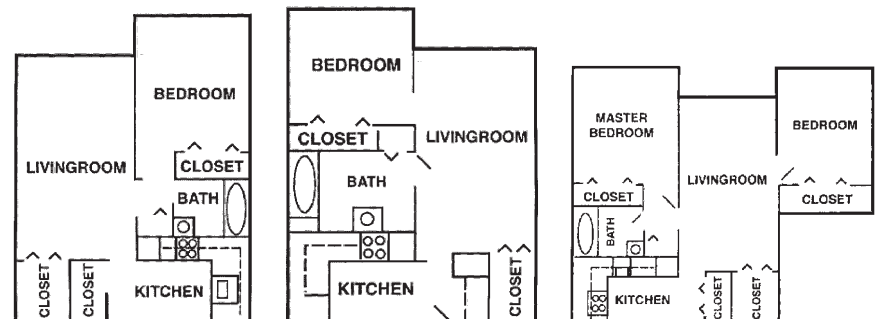
Call us to learn more, Ask for our PACE Enrollment Representative (617) 288-0970 Ext. 16  
[www.uphamselderserviceplan.org](http://www.uphamselderserviceplan.org)

H2220.2011.01

## ATTRACTIVE & AFFORDABLE

*This beautiful privately owned apartment complex with subsidized units for elderly and disabled individuals is just minutes from downtown Melrose.*

- Close to Public Transportation • Elevator Access to All Floors
- On Site Laundry Facilities • Heat Included • On Site Parking
- 24 Hour Closed Circuit Television • Excellent Closet and Storage Space
- 24 Hour Maintenance Availability • On site Management Office
- Monthly Newsletter • Weekly Videos on Big Screen T.V.
- Resident Computer Room • Bus Trips • Resident Garden Plots



One Bedroom Unit

Handicap Unit  
(One Bedroom)

Two Bedroom Unit

**Call for current income guidelines**

### JOSEPH T. CEFALO MEMORIAL COMPLEX

245 West Wyoming Avenue, Melrose, MA 02176

Call our Office at (781) 662-0223 or TDD: (800) 545-1833, ext. 131

9 a.m. - 5 p.m. Monday through Friday for an application



Visit us on the web at [www.cefalomemorial.com](http://www.cefalomemorial.com)





# Announcing the new ALTA from Oticon!



Coming February 2013, the Oticon Alta has a faster computer chip capable of **much** better performance in noise! The compatible streamer can connect you to FM listening systems, TV, all telephones and more.

I will be personally trying it over the next 30 days and will give you **my** own review.

I've been very happy with my Oticon Intiga hearing instruments. Let's see how the new ALTA measures up! Call me for my results!

**Hear, listen and live! -Steve**

The Tobias family has been serving Boston and South Shore since 1959! 617 770-3395



Stephen P. Tobias B.C. HIS  
MA Lic #59  
B.S. Science UMass 1978

Tobias Hearing Aids, Inc. 382 Quincy Ave, Quincy near Roche Bros and Walmart. Where Eddie's Diner was!

## WE'RE HERE FOR YOU

A Safe Place to Spend the Day.  
Any Day.



Are you caring for an aging loved one? Would you like some help during the day? Charles River Adult Day is here for you.

**If your loved one needs:**

- Companionship/Socialization with peers
- Wellness and Hygiene
- Nutrition- 3 Balanced Meals/Day
- A safe, home-like environment
- Daily Activity including Weekly Bingo and High Tea



**If you need:**

- "Time-off" from your role as caregiver
- Reassurance that your loved one is safe

*"Charles River Adult Day is a private, woman owned business."*



781-828-9500

**NOW ACCEPTING NEW CLIENTS**

**We encourage telephone calls!**

- Schedule a tour.
- Ask about our low daily or long-term rates.
- Get more details about our professional, social, health, and support services.

**WE ARE AVAILABLE 7am - 7pm,  
7 DAYS A WEEK, PLUS HOLIDAYS!**

1030 Turnpike Street (Rt. 138) • Canton, MA 02021  
www.cradultday.com • jen@cradultday.com

## The Nielsen Eye Center Advantage:

The Doctor,  
The Technology  
And The Service  
You Deserve

# CHOOSE THE VERY BEST<sup>IN</sup> Eye Care



Steven A. Nielsen, M.D.  
Cataract, Refractive  
and Lasik Specialist

*THE NIELSEN EYE CENTER IS A  
FULL SERVICE VISION CENTER OFFERING:*

- |   |  |
|---|--|
| ◆ Cataract Surgery                            | ◆ Dry Eye Treatment                    |
| ◆ Blade-free LASIK                            | ◆ Hearing evaluations and Hearing aids |
| ◆ Macular Degeneration and Glaucoma Treatment | ◆ Cosmetic Procedures                  |
| ◆ Diabetic Retinopathy                        | ◆ Routine Eye Exams                    |

**Is your loss of clear vision  
slowing you down?**

*Come to the Nielsen Eye Center, the premier vision correction destination for mature adults.*

**Call today and make an appointment.**

**1-877-373-2020.**

300 Congress Street, Suite 201, Quincy, MA 02169  
99 Derby Street, Hingham, MA 02043  
**www.golasik.net**





By Jamie Stengle

PARKER, Texas — The white two-story home with stately pillars overlooking a green Texas pasture where longhorns roam is instantly recognizable: This is the power seat of television's famous Ewing family.

Tourists from around the world have been flocking to Southfork Ranch since the early years of the classic series *Dallas*, which ran from 1978 to 1991, and the ranch is only getting more popular. With the premiere last June of a new *Dallas* series, the number of visitors at Southfork has doubled from 150,000 annually to more than 300,000, according to Jim Gomes, general manager of the Southfork Ranch & Hotel and vice president of Forever Resorts, which owns the property.

"We are obviously thrilled the new fans love Southfork as much as the original fans of 'Dallas,'" said Gomes.

The new show just started its second season on the TNT cable channel. The recent death of Larry Hagman, who starred as conniving Texas oilman J.R. Ewing in both the original series and the new show, has also spurred fans to visit.

The 340-acre (138-hectare) ranch is located about 25 miles (40 kilometers) northeast of downtown Dallas in the suburb of Parker. Patrick Duffy, who has returned to the role of J.R.'s brother Bobby, said that the biggest changes since he first filmed on the ranch are new tourist-related buildings and event facilities for weddings and meetings, along with the buildup of the surrounding town, including housing additions and a high school.

But any time he's back at Southfork, it doesn't take long for the magic to take over. "You drive down that road and you look across this pasture and there's the front of Southfork and it looks like the opening credits of the show and I know why people love it so much," Duffy said.

Duffy remembers a time when fans watching them film consisted of small groups of 20 to 30 people. Those crowds grew to the hundreds as the "Who Shot J.R.?" mania built in 1980 when a cliffhanger left fans in suspense. The answer came on Nov. 21, 1980, when the shooter was revealed to be Kristin — J.R.'s vengeful mistress, who was also his sister-in-law — in an episode that was seen by

## Southfork Ranch draws DALLAS fans old and new



Around the house, the pool and patio have provided spots for countless shots.

more people than any TV program in history up until that time.

When the series first began filming at Southfork, the family that built the house in 1970 still lived there. And while they hosted tourists as the show's popularity grew, it didn't become an official tourist attraction and event location until 1985 after they sold it. Forever Resorts bought Southfork in 1992.

Most of the shooting for the original series was done in Los Angeles, though some of it was filmed in Texas. But the new show is being filmed in the Dallas area — with locations ranging from the flagship Neiman Marcus downtown to the gleaming Cowboys Stadium.

Cynthia Cidre, executive producer of the reboot, said she knew when she started developing the new series that Southfork would again

be an integral part of the plot.

"The ranch had been in the previous show, it was almost a character in the story. I knew that I wanted to use that as something that the family was fighting over again," she said.

The struggle over ownership of the ranch became the central plot point in the first season of the new series, with J.R. telling his son, John Ross: "Southfork isn't just a piece of dirt. It's as much a part of me as my blood and my bones and I'd pay a hell of a price for it."

Visitors start their tour in a museum featuring everything from the gun that "shot" J.R. to scripts from the original series to the wedding dress of Lucy, the niece of J.R. and Bobby, who was played by Charlene Tilton. For those puzzled about the complicated relations of the Ewing family, there's a family tree to peruse.

As tour guides take visitors through the barns and pastures on their way to the house, they point out where scenes from both the old and new series were filmed — from the cottage where Elena Ramos, played by Jordana Brewster, lives, to the spot from the original series where the funeral was held for Bobby, who was later famously

revealed to still be alive. The story of his death turned out to be part of a prolonged dream sequence.

Around the house, the pool and patio have provided spots for countless shots. And while interior scenes for the home on the series were never shot inside the 5,900-square-foot (548-square-meter), four-bedroom house, visitors can still walk through and take in the rooms decorated in homage to the Ewings, with rooms reflecting the tastes of different characters.

Sally Peavy, tourism sales manager at Southfork, said scenes from reunion shows have been filmed in the house and that a scene in the second season of the new show was also filmed in one room, though details of the scene have not been revealed.

There's also a restaurant and two gift shops on the grounds. One sells items including hats and belts and has as its centerpiece family patriarch Jock Ewing's silver Lincoln Continental, which features "trunk sales."

Josh Henderson, who plays John Ross, was born in Dallas and spent much of his childhood here. Henderson said that when he got the part of J.R.'s son, his mother informed him that he'd already been to Southfork once, at age 3.

"I don't remember it but my mother definitely made sure I had that information," said Henderson.

Janice Johnstone of Vancouver visited Southfork in November while sightseeing in Dallas. An avid fan of the original series, she enjoyed hearing tidbits from the tour guides.

"I think just hearing the history of how people found out that that's where it was and they had all these people driving by constantly, I thought that was kind of interesting because those are things that you don't hear," she said. "I think it's definitely worthwhile going, anybody who has watched the show I think would really appreciate it."

When Larry White, who lives near Springfield, Mass., was in Dallas in November, a friend drove him by Southfork. Since he had a flight to catch, he didn't have time for the tour, but did make a quick stop in a gift shop and took a picture of the house complete with a longhorn.

"It's just clearly a piece of American history at this point," said White. — AP



Family patriarch Jock Ewing's silver Lincoln

### If You Go...

SOUTHFORK RANCH: 3700 Hogge Road, Parker, Texas, [www.southfork.com](http://www.southfork.com), 972-442-7800. Open daily 9 a.m.-5 p.m. Tours depart from the visitor center every 30 to 45 minutes. Adults, \$13.50; \$11.50 for senior citizens; \$8.50 for children ages 6-12; children 5 and under free.



**"You make our family feel that we are your only client..."**

- ABC Home Healthcare client

Experience the difference. We're owned and operated by nurse practitioners and geriatric care managers.

When it comes to home care, trust the professionals...



**781-245-1880**

**[www.abchhp.com](http://www.abchhp.com)**

Home Health Aides • Live-In Caregivers • Private Duty Nursing  
Hospice and Respite Care • Companions • and more

All services available 1 to 24 hours a day, 7 days a week include nurse supervision.



## Washington community, a mecca for wine

KENNEWICK, Wash. —

**N**ever has wine country been so close to Washington's largest population base.

Woodinville, a community of 11,000 across Lake Washington from Seattle, is far from the state's vineyards, but it has long been home to Washington's oldest and best-known winery.

And thanks to the success of that producer — Chateau Ste. Michelle — more than 70 wineries and tasting rooms now crowd Woodinville.

Ste. Michelle, which started in Seattle in 1934, opened its chateau in 1976. At the time, few understood the move to what was then a remote area of King County. But wine lovers came in droves, and today more than 300,000 visit Ste. Michelle each year for wine tasting, events and concerts.

Across the street is Columbia Winery, which was purchased by Gallo last summer. It started in the 1960s as Associated Vintners and has been one of the state's best producers for its entire history.

With this foundation, Woodinville has grown to a superb destination. Between new wineries that call Woodinville home and producers that have opened satellite tasting rooms, visitors will find more than 70 places to visit in the town.

With the explosion of wineries in the past half-decade, Woodinville's lodging and restaurant scene also have developed. The Herbfarm — arguably the Northwest's finest dining experience — is across the street from Ste. Michelle and shares a parking lot with

Willows Lodge and the Barking Frog restaurant. And a short walk away is Purple Cafe, which succeeds with great food and wine.

One can easily spend a long weekend in Woodinville or make it an afternoon trip from Seattle.

Here are a few wines from Woodinville producers we've tasted recently. Ask for them at your favorite wine merchant or order directly from the wineries.

•Pondera Winery 2009 Cabernet Sauvignon, Columbia Valley, \$28: This big, bold wine opens with aromas of boysenberries, black tea, blueberries, mint and fresh-out-of-the-oven brownies. On the palate, taste the rich flavors of black cherries, blackberries, blueberries and chocolate. It should be enjoyed with grilled meats.

•Baer Winery 2009 Ursa, Columbia Valley, \$39: A blend of Cabernet Franc (44 percent), Merlot (38 percent), Cabernet Sauvignon (9 percent) and Malbec, this brings hints of blueberry cobbler, dried cranberry, violet and sweet oak tones of tobacco and black pepper. The drink is dang delicious with its theme of inky blue fruit, bittersweet chocolate and Aussie black licorice.

•Chateau Ste. Michelle 2008 Ethos Reserve Cabernet Sauvignon, Columbia Valley, \$38: The attraction begins with its inky nose of black cherry extract and includes raspberry, root beer and woodruff, backed by humid aromas and the cured meat mark of Syrah. This wine should continue to evolve for the next five to eight years. — AP

## Unparalleled Care, Service, & Lifestyle for Your Well-Being



*"Coming to Wingate was one of the best decisions I've ever made. I truly feel at home here."*

Wingate Healthcare provides the finest care for our residents and superior healthcare services in our state of the art facilities. One look will tell you that you're in the right place!

**WINGATE**  
HEALTHCARE



**SHORT TERM  
REHABILITATION  
SKILLED NURSING  
ASSISTED LIVING • HOSPICE  
LONG TERM CARE  
WOUND CARE**

Call for a tour Brenda Diaz,  
Director of Community Relations  
(781) 707-6106

[www.wingatehealthcare.com](http://www.wingatehealthcare.com)

**BRIGHTON • NEEDHAM • SUDBURY • KINGSTON • HAVERHILL  
NORTH ANDOVER • LOWELL • READING**

**There's "snow" place like home!**

**Lamplighter Village**  
1 Stagecoach Road, Canton, MA  
**781-828-7834 (TTY 711)**

- **Now Accepting Applications!**
- 1 & 2 Bedrooms
- Community Room
- Parking
- Pet Friendly

**Bixby/Brockton Centre**  
103-106 Main Street, Brockton, MA  
**508-588-5556 (TTY 711)**

- **Now Accepting Applications for 2BRs**
- Heat & HW Included
- Community Room w/Catering
- Kitchen
- Computer Station
- Community Garden
- Live In Superintendent

**Congregational Retirement Homes**  
101 Cottage Street, Melrose, MA  
**781-665-6334 (TTY 711)**

- Efficiencies, Studios & 1BRs
- Community Room with TV, Library & Kitchen
- Beauty Salon
- Mystic Valley Elder Services on premises
- Council of Aging Van Available for Appts.

Our communities feature 24 hour emergency maintenance, professional management on-site, laundry care center, emergency call system, a vibrant social ambience with premier resident services, and close to bus routes, shopping, restaurants, medical & major roads/highways.

Income guidelines apply. Age requirement is 62 years of age/handicapped or disabled. Please inquire in advance for reasonable accommodation. Info contained herein subject to change w/o notice.



## Our focus is yours...



Randall Patkin, M.D.



Robert A. Freedman, M.D.



Robert G. Levy, M.D.

Our mission is to provide you with the very best medical and surgical treatment possible. We bring over 60 years of combined experience providing eye care to the North Shore. We perform the latest surgical procedures in a state of the art surgical center. Our staff includes a pediatric ophthalmologist and contact lens specialist to help meet the needs of patients of all ages.



(978) -744 -1177 / 400 Highland Ave., Salem MA 01970

[www.EyeCenterNorthShore.com](http://www.EyeCenterNorthShore.com)

## Exceptional Care by Exceptional People

### The Brookline Difference

Our highly skilled staff is committed to providing a supportive, therapeutic environment where the focus is on meeting individual needs. A strong clinical orientation ensures a superior level of medical and nursing care. Our goal is to help each patient reach his or her optimal level of functioning and independence.

### Services

- Short-Term Rehabilitation
- Skilled Nursing Services
- Russian & Chinese Translation
- Intravenous Therapy
- Private and Semiprivate Accommodations
- Physical, Occupational, Speech Therapy
- Orthopedic Care
- Long-Term Living Care
- Respite Care
- Wound Care Program

### Interdisciplinary Team

Members focus on individualized care plans that result in treatment to best meet each patient's needs. *Our expert staff consists of:*

- Medical Director
- Facility Educator
- Registered Dietician
- Psychiatry
- Social Workers
- Activity Director
- Nursing Services
- Therapy Services (OT, PT, ST)

### Brookline Health Care Center A Nursing and Rehabilitation Center

[www.healthbridgemanagement.com/Brookline](http://www.healthbridgemanagement.com/Brookline)

99 Park Street, Brookline, MA 02446

Close to public transportation and a block away from Coolidge Corner  
JCAHO Certified

**Please call for a tour today - 617.731.1050**  
**For more information e-mail Katelyn Yarrow**  
**at [kyarrow@healthbridgemanagement.com](mailto:kyarrow@healthbridgemanagement.com)**

### Contracts:

- Tufts Health Plan
- Massachusetts Blue Cross Blue Shield
- Harvard Pilgrim
- Evercare
- Senior Whole Health
- Network Health
- Canadian Medical Network
- CorVel
- Aetna
- TriCare
- United Health Plans
- Great-West HealthCare

## Live CONFIDENT.

*When you live at Fairing Way,* you can be confident you made the right move. Trust in our sponsor's legacy of not-for-profit excellence. Bank on a 95% refundable entrance fee. Know that you can rely on a community-based organization with 85 years of financial strength. And make the most of SouthField's superior live-work-play amenities.



**SOUTHFIELD** **ROGERSON COMMUNITIES** **EVENTIDE**  
RICE EVENTIDE COMMUNITIES

A Not-for-Profit Community Sponsored by Rice Eventide  
5 Stonehaven Drive, South Weymouth, MA

\*Pricing subject to change without notice.

### GET YOUR FREE GUIDE

## Making Confident Senior Living Choices

Apartment Homes from \$285,000\*

Visit [FairingWay.org/LiveConfident](http://FairingWay.org/LiveConfident) or call 781-561-1099



## Help at hand when elderly relative's health fails

By Jim Fitzgerald

WHITE PLAINS, N.Y. —

Marnie Schwartz was in California, a lawyer raising two toddlers. She was in no position to move across the country to care for her mother, who was living alone in New York and whose health was beginning to decline.

Schwartz's dilemma was similar to that faced by more and more Americans as the population spreads out, people live longer and giving up a job is out of the question.

"I needed eyes and ears closer to my mother," said Schwartz, an only child living in Malibu. "I needed someone to handle the medical, the insurance, the financial, and stay on top of the daily caregiving, so the emotional strain wouldn't be overwhelming."

Those needs have fostered a niche that a variety of enterprises have been filling in recent years. Companies and individuals calling themselves advocates, care managers and advisers are willing to stand in for the family and deal with the maze of responsibilities that comes with the care of an elderly loved one.

With the aging of the baby boom generation, the 78 million Americans born between 1946 and 1964, calls for such businesses are expected to increase over the next 20 years.

Their service doesn't come cheap and it's generally not covered by insurance. But some customers have found it's worth the peace of mind.

Schwartz found her "eyes and ears" when a childhood friend told her about A Dignified Life, a small company in White Plains, N.Y., that specializes in elder care.

"I don't know what I would have done without them," Schwartz said. "They knew where to go with all these questions I had that would have taken me 500 phone calls. They deciphered what the doctors were saying. They got a ramp built at the house. They dealt with the

plumber. They remembered everything, and they did it in a really human, caring way.

"In about a year and a half, as my mother's situation got worse, they became part of our daily life," Schwartz said. And in October, as her mother's health failed, "they told me it was time to get on a plane." She was at her mother's deathbed, she said, because A Dignified Life knew when to call.

Barbara Newman Mannix, who runs the company, said "experience and empathy" are required to do the job well. She vets, hires and monitors in-home caregivers, attorneys, nursing homes and more, guides a family through the financial tangles and makes sure an elderly person's wishes are respected. She can help arrange the sale of a house and pre-plan a funeral.

For an initial \$625 four-hour consultation, her company will evaluate a family's needs and come up with an "action plan." The family can then hire the company to implement the plan on an hourly or retainer basis.

Mannix started the company after navigating the maze during her husband's fatal illness.

"You're suddenly in crisis and the normal reaction is, 'What do I do, where do I go, who do I call first?'" she said. "People are lost. But we tell them there is a way to cope, there is crisis management, there are people that will help you who do what they do all day every day."

She said many people just don't have the personality for dealing with doctors and caregivers and insurance companies.

"It's time, it's energy, it's stress, it's consternation among members of the family," she



said. "There's emotional baggage, and if you have children yourself you're being pulled in both directions."

Judy Rappaport, who runs Preferred Lifestyle Services in Jupiter, Fla., said most elderly people resist moving to a son or daughter's home.

"Everybody wants to stay home," Rappaport said. "Now we

do what we can to make it possible for people to stay in their homes."

Most of her company's staffers are nurses.

"When we're hired, we go in and count the pills, check the food in the refrigerator, we talk to the doctors," she said. "We get a complete picture and we write up a report in lay language. The family knows what we'll do and what it will cost right up front."

The services can get very specific.

"We had one lady who wanted to play bingo and we said, 'No problem, we can get you to bingo.' But she was a German lady and she wanted to play bingo in German," Rappaport said. "We found a place."

Jullie Gray, president of the National Association of Geriatric Care Managers, said membership is now near 2,000, up from fewer than 1,600 a decade ago.

Rappaport said the average fee for her clients is between \$1,500 and \$2,500 a month, not including the in-home caretakers' pay.

David Cutner, an elder law attorney in Manhattan, said he worries about elderly people exhausting their assets, but added, "People who have a substantial net worth and are not thinking about government benefit programs might well want to hire this type of service."

A much less comprehensive and less

costly alternative is offered by CareFamily, which prescreens in-home caregivers and matches them to customers over the Internet. The company recently announced a variety of online tools through which a family can remotely monitor a caregiver's attendance, provide reminders about medications and appointments and exchange care plans and notes via email, texting or phone.

The service would be included in the average \$15 an hour fee paid for the caregiver, said CareFamily CEO Tom Knox. He said it can "cut costs while ensuring that the elderly can be well taken care of — without the need to uproot seniors and disrupt families."

Yale Hauptman, an elder law attorney in Livingston, N.J., said many different services are available. His office is often called in by advocates who discover that an elderly person needs a will or power of attorney or a trust.

"We work with people who just do health insurance, cut through red tape, deal with Medicaid," he said. "We work with daily money managers, who make sure the bills get paid. We work with geriatric care managers on the medical side."

"The type of work these people do is absolutely essential. It's a combination of families living farther apart and the fact we're living longer."

Leslie Riley of Cornwall-on-Hudson, N.Y., said that when her sister-in-law began having mental and physical problems, relatives hired A Dignified Life, even though some lived nearby.

"We had no idea where to start," she said. "Barbara came in and helped us focus on what needed to be done. How to work with the doctors in the hospital. We needed to get power of attorney, we needed to provide health care proxies, we needed to figure out how to approach the financial situation."

"She had a checklist for everything," Riley said. "I would call her lovingly efficient." — AP

## Elder bullying by caregivers comes in many forms

By Doug Peck

One of the hardest things to see is a senior being bullied and yet I see instances of it, to varying degrees, with increasing frequency. Bullying can be defined as harassment, maltreatment or even singling out. It usually doesn't include any physical abuse or threats when directed towards seniors.

### Home Care Tips

When it is directed towards seniors I have noticed two things. One, it is often done by family members. Two, it's not necessarily intentional. They often aren't aware of what they are doing or how it hurts the senior. Let me give you two real life examples.

When sitting down to talk with both the senior and family member about what mom would like to do with a new companion, where she would like to visit, what restaurants she would like to go to, etc., the son barely gives his mother an oppor-

tunity to speak and when she does voice an opinion, it is quickly disregarded with few sharp words. Comments such as "she's never asked us to take her to the library before. I don't think she would like that," are made and yet one can clearly see a look of disappointment on mom's face.

In another instance where mom lives with her daughter, who works fulltime, often two or three doctor's appointments are crammed into one day. The day may start at home with an 8 a.m. or 8:30 a.m. physical therapy session. This is a very early hour for someone who is 90 because it takes that person awhile to get up and get dressed. The day is too exhausting with all of this activity.

Are these acts done intentionally? I don't think so. We all live in a very busy world where it is often necessary to get as much done as quickly as possible. But whether they are done intentionally or not, they have the same effect. When opinions are dismissed out of hand, when comments are made as if the other person is not even there, when planned activities lead to

exhaustion, that's bullying.

It is very difficult to watch and even more difficult to try and stop as the person doing it is often not aware of the consequences. So what can a caregiver do? When taking care of an elderly parent in the home, apply these axioms: Do to others, as you would have them do to you; and treat others in the way they like to be treated.

Watch what you say and how you say it. Most importantly, make sure to give yourself a break. Being a caregiver does not mean you have to do everything your-

self. Have a neighbor, friend or a paid caregiver relieve you on a regular basis. Treat yourself to lunch, a movie or even a few quiet hours in the library. It will be better for everyone.

Doug Peck, CSA, is owner of Seniors Helping Seniors, in Southborough. He can be reached at 508-485-1765. Visit their website at [www.seniorshelpingseniors.com/metrowest](http://www.seniorshelpingseniors.com/metrowest). He can be reached at [kindnessworksllc@gmail.com](mailto:kindnessworksllc@gmail.com). Archives of articles from previous issues can be read on [fiftyplusadvocate.com](http://fiftyplusadvocate.com).

## Staying in your home forever: Kitchen modifications

By Cindy Tulimieri  
and Karen DeRosas

### Home Care Tips

The kitchen can be a daunting place as one ages. Not only do you have to consider the physical challenges when preparing a meal, one must think of

the cognitive challenges as well because a kitchen can be a very dangerous place.

Loved ones often have concerns about the safe use of the stove or ability to carry a boiling pot of water. Luckily, with the use of some easy techniques and new technology, there are answers to keeping you safe in your kitchen for the duration.

KITCHEN page 16



## Money fears vs. benefits in Medicaid choice

WASHINGTON —

President Barack Obama thinks his health care law makes states an offer they can't refuse.

Whether to expand Medicaid, the federal-state program for the poor and disabled, could be the most important decision facing governors and legislatures this year. The repercussions go beyond their budgets, directly affecting the wellbeing of residents

and the finances of critical hospitals.

Here's the offer:

If states expand their Medicaid programs to cover millions of low-income people now left out, the federal government will pick up the full cost for the first three years and 90 percent over the long haul.

About 21 million uninsured people, most

*MONEY page 21*

## Savings seen on diabetes supplies, other equipment

WASHINGTON —

Medicare is announcing a price cut.

Diabetes testing supplies now average about \$16 a month for beneficiaries. That's going down to around \$4.50.

Savings are also coming for many patients who rent home oxygen gear, hospital beds, wheelchairs and other equipment.

Medicare deputy administrator Jonathan Blum said it's due to competitive bidding making inroads against wasteful spending.

Starting July 1, diabetes patients will get

blood sugar testing supplies through a new national mail order program.

Competitive bidding for home medical equipment, now being piloted in nine cities, will expand to 100 metro areas, including New York, Los Angeles and Chicago.

Some seniors may have to switch suppliers, but taxpayers will save nearly \$26 billion over 10 years.

Outside experts say Medicare should make even greater use of competitive bidding. — AP

## Sandy highlights nursing home evacuation troubles

NEW YORK —

Health experts and regulators are warning that thousands of nursing homes nationwide are still ill prepared for a natural disaster after Superstorm Sandy.

The late October storm was the latest disaster to reveal gaps in emergency planning despite an industry-wide effort to improve preparedness in the years since Hurricane Katrina.

In New York City, seaside nursing homes and assisted living centers struggled to evacuate more than 6,000 residents from their flooded or powerless buildings.

Some changes could be in the works. The federal Centers for Medicare and Medicaid Services said it expects to issue new disaster planning requirements for nursing homes this year.

The aim is to avoiding the types of problems seen in Sandy. — AP

## ► Kitchen

Cont. from page 15

Fall prevention is always the number one safety issue that should be addressed. Simple changes such as organizing frequently used items on the first one to two shelves above and below the counter can reduce falls and injury. Infrequently used items should be placed at the top that can be accessed by a family member or friend.

Kitchen chairs that have arms and are about 18 inches or higher off the ground are ideal for ease with sitting and standing. Always avoid chairs with wheels or that swivel. Non-slip flooring should be used as the kitchen floor is very likely to get wet. Flooring with texture to it, or vinyl flooring that is specifically made to be non-slip, is a nice way to go. Lastly, always pick up scatter rugs.

Memory impairment can be a common issue causing a big concern for safety in the kitchen. There are a variety of recommendations that can be given depending on the level of cognition. The range includes simply using an egg timer as a reminder that something is on the stove, to a sensor-guided stovetop that will automatically shut off if there is no movement around the stove for a pre-set amount of time.

Simply unplugging the stove and using the microwave or electric kettles (with auto shut off) are other options. Microwave meals, pre-made meals or cold meals such as sandwiches, cereal, salads or fruit may be the way to go in order to stay alone in your home.

Meals on Wheels is a program that can be accessed through the local council on aging/senior center. This program delivers one meal per day (that usually feeds you for two meals) for a low fee depending on your income level.

For people with joint pain or endurance issues (such as heart or lung disease), using a small push cart to transfer hot items from one place or another is also a great way to conserve energy and stay safe. Sliding pots and pans across the top of the counter instead of carrying them is a good option as well.

There are many large grip utensils available in department stores that can be used for joint conservation, as well as electric appliances such as electric can openers, choppers, food processors and blenders. Sitting as much as you are able while preparing a meal or washing dishes can conserve energy for the things you want to do rather than what you have to do.

Ideas should be personalized for your situation with the help of an occupational or physical therapist in order to keep you as independent as possible.

*Cindy Tulimier is a Certified Occupational Therapist and Karen DeRosas has her masters in Physical Therapy. Both have an Executive Certificate for Home Modifications through the University of Southern California. As the founders of Independent Living Innovations, they have extensive experience working with elders and adults with disabilities. They can be reached at [www.iliseniorservices.com](http://www.iliseniorservices.com), by calling 617-877-4036 or 978-866-8782 or emailing [cindytulimier@iliseniorservices.com](mailto:cindytulimier@iliseniorservices.com).*



## Meet Ginny

Ginny lives in her own apartment and enjoys going out to dinner often with friends. A true social butterfly, her wheelchair doesn't hold her back, she is an active member of the Red Hat Society, Handicapped Commission and the Multiple Sclerosis Society.

Ginny has been attending a PACE day center for five years. Knowing the PACE team is there to support her as her needs change, she says **"I am able to focus on enjoying and living my life."**

*Call information & Referral at  
Elder Service Plan of the North Shore  
877-803-5564*

Serving

Beverly	Ipswich	Middleton	Saugus
Danvers	Lynn	Nahant	Swampscott
Essex	Lynnfield	Peabody	Topsfield
Gloucester	Manchester	Rockport	Wakefield
Hamilton	Marblehead	Salem	Wenham

Upon enrollment participants must receive all health care, primary care and specialist physician services — other than emergency services—as authorized by PACE, or be fully and personally liable for costs of unauthorized services. H-2222\_2011\_24

## Stay in your home forever



Home Safety  
Evaluations performed  
by Certified  
Occupational and  
Physical Therapists.

- Reduce falls and increase independence
- Education for caregivers
- Make daily mobility easier
- Quick Installation of Grab bars
- Assistance for people with dementia
- Low Cost Options
- In Home Therapy provided



FOR MORE INFORMATION CONTACT:

Cindy Tulimeri at 617-877-4036 or [cindytulimier@iliseniorservices.com](mailto:cindytulimier@iliseniorservices.com)  
Karen DeRosas at 978-866-8782 or [karend@iliseniorservices.com](mailto:karend@iliseniorservices.com)

[www.iliseniorservices.com](http://www.iliseniorservices.com)



# Study sees prostate cancer treatment side effects

By Marilyn Marchione

A new study shows how important it is for men to carefully consider treatments for early-stage prostate cancer. Fifteen years after surgery or radiation treatment, nearly all of the older men in the study had some problems having sex.

About one-fifth had bladder or bowel trouble, researchers found.

The study doesn't compare these men — who were 70 to 89 at the end of the study — to others who did not treat their cancers or to older men without the disease. At least one study suggests that half that age group has sexual problems even when healthy.

The study isn't a rigorous test of surgery and radiation, but it is the longest follow-up of some men who chose those treatments.

Since early prostate cancers usually don't prove fatal but there are no good ways to tell which ones really need treatment, men must be realistic about side effects they might suffer, said one study leader, Dr. David Penson of Vanderbilt University.

"They need to look at these findings and say, 'Oh my gosh, no matter what I choose, I'm going to have some quality-of-life effect and it's probably greater than my doctor is telling me,'" he said.

Prostate cancer is the most common cancer in American men. In the United States alone, there were about 240,000

new cases and 28,000 deaths from the disease last year. Radiation or surgery to remove the prostate are common treatments when the disease is confined to the gland.

Men usually live a long time after treatment — 14 years on average — so it's important to see how they fare, said another study leader, Vanderbilt's Dr. Matthew Resnick.

The study involved 1,655 men diagnosed in 1994 or 1995, when they were ages 55 to 74. About two-thirds of them had surgery and the rest, radiation. They were surveyed two, five and 15 years later. By that time, 569 had died.

Men who had surgery had more problems in the first few years after their treatments than those given radiation, but by the end of the study, there was no big difference.

After 15 years, 18 percent of the surgery group and 9 percent of the radiation group reported urinary incontinence, and 5 percent of the surgery group and 16 percent of the radiation group said they were bothered by bowel problems. But the differences between the two groups could have occurred by chance alone once researchers took other factors such as age and the size of the men's tumors into account.

Impotence was "near universal" at 15 years, the authors write — 94 percent of the radiation group and 87 percent of the surgery group. But the difference between the groups also was considered possibly

due to chance. Also, less than half of men said they were bothered by their sexual problems.

"These men do get some help from pills like Viagra, Cialis, Levitra," but it may not be as much as they would like and most men would rather not need those pills, Penson said.

The National Cancer Institute paid for the study. Two authors have consulted for several makers of prostate cancer treatment drugs.

No study is perfect and this one has many limitations, said Dr. Timothy Wilson, urology chief at City of Hope,

a cancer center in Duarte, Calif. Men who are having problems are more likely to complete follow-up surveys because they're angry, so that could skew results, he noted.

Still, "it's a high percentage" with side effects, said Wilson, who has been a paid speaker for two makers of surgery equipment.

"There's no question we overtreat" many cases of early prostate cancer, yet the disease is still the second-leading cause of cancer deaths in men. "We need to better sort out who really needs treatment," he said. — AP

## New health care markets on the way

By Ricardo Alonso-Zaldivar

WASHINGTON —

Buying your own health insurance will never be the same.

This fall, new insurance markets called exchanges will open in each state, marking the long-awaited and much-debated debut of President Barack Obama's health care overhaul.

The goal is quality coverage for millions of uninsured people in the United States. What the reality will look like is anybody's guess — from bureaucracy, confusion and indifference to seamless service and satisfied customers.

Exchanges will offer individuals and their families a choice of private health plans resembling what workers at major companies

already get. The government will help many middle-class households pay their premiums, while low-income people will be referred to safety-net programs they might qualify for.

Most people will go online to pick a plan when open enrollment starts Oct. 1. Counselors will be available at call centers and in local communities, too. Some areas will get a storefront operation or kiosks at the mall.

When you pick a plan, you'll no longer have to worry about getting turned down or charged more because of a medical problem. If you're a woman, you can't be charged a higher premium because of gender. Middle-aged people and those nearing retirement will get a price break: They can't be charged more

MARKETS page 20

## We work together so you can heal

- Stop Smoking
- Grief and Loss Counseling
- Hypnosis
- Spiritual Counseling

### Rabbi Irving Luchans

416 Boston Post Road, Suite 202

Sudbury, MA 01776

(508) 877-1234

www.healingworks.us irving@healingworks.us



## Support our ADVERTISERS



Please let them know you saw their ad in the

**fifty plus**

advocate

Thank you in advance for your help!

## Do You Want to Save \$4,000???

**Social Security Extra Help Rules Have Changed!!**

**You May Be One of 5,000 Beneficiaries Now Eligible for This Program.**

1. Do you have Medicare Prescription Drug Coverage?
2. Is your monthly income at or below \$1,373/individual, \$1,841/couple?
3. Are your resources at or below \$12,510/individual, \$25,010/couple?



If you answered yes to these three questions, you may save up to \$4,000 in prescription drug costs this year.



To find out if you qualify for this program, call your Regional SHINE Program at

1-800-AGE INFO

1-800-243-4636 (Option #3)

SHINE (Serving the Health Information Needs of Elders) is Administered by the Mass Executive Office of Elder Affairs In Partnership with the Friends of the Millford Senior Center, The Massachusetts Councils on Aging and other local agencies.



## Changing family dynamic may lead to tax relief

By Carole Feldman

WASHINGTON — Members of the sandwich generation — caught between supporting elderly parents whose assets are nearly exhausted and adult children without jobs — might find some relief come tax time.

The bottom line is, who's a dependent? Your kindergarten-age son, your adult daughter, her grandparents or maybe an elderly uncle or aunt?

"There's a changing family dynamic because of the economy," said Bob Meighan, vice president of TurboTax, an online tax preparation service.

More people are living longer. According to the U.S. Census Bureau, the number of older Americans increased by 9.7 percent from 2000 to 2010, when there were about 40 million people age 65 or older. A longer lifespan puts added strain on retirement accounts, which have already taken a hit in the roller-coaster economy.

As a result, many baby boomers find themselves supporting their elderly parents, in some cases footing the bill for assisted living or nursing home care.

Meanwhile, the unemployment rate for adults age 20 to 24 was 13.7 percent in December, considerably higher than the overall rate of 7.8 percent.

Unable to find work, many young adults are returning home — or never leaving, relying on Mom and Dad for food, lodging and more.

What does this mean for taxes?

"A lot of filers are going to have to pay particular attention," Meighan said. More people may rely on tax software to help get them through the dependency issue.

Depending on individual circumstances, taxpayers may be able to claim both their parents and their children as

dependents.

"The rules are very pro-taxpayer," said Mark Steber, chief tax officer at Jackson-Hewitt Tax Services. If you are taking care of someone and the IRS defines that clearly — age, income, residency tests and support — you should be able to claim the exemption, he said.

It comes down to the definition of dependent.

The Internal Revenue Service makes a distinction between a qualifying child and a qualifying relative.

To be a qualifying child, the person would have to be a child, stepchild, foster child or sibling, and under the age of 19, or 24 if in college, who has lived with you for at least half the year. The taxpayer would have to provide at least half the support.

A qualifying relative can be a child who doesn't meet the qualifying child requirement, a parent or stepparent, grandparent, niece or nephew, aunt or uncle or in-laws, according to the IRS. They do not necessarily have to live with you, but you do have to provide at least half the support for that person. And that person's income cannot exceed the personal exemption — \$3,800 in 2012.

"Unlike a qualifying child, a qualifying relative can be any age," the IRS says in its Publication 17.

Taxpayers can take an exemption of \$3,800 for each qualified child or relative who is a dependent.

Here are some examples from the IRS:

"Your mother received \$2,400 in Social Security benefits and \$300 in interest. She paid \$2,000 for lodging and \$400 for recreation." If you spend more than \$2,400



to support her, supplementing what she spends, and her annual income is less than \$3,800, you can claim her as a dependent and take the full value of the exemption.

"Your brother's daughter takes out a student loan of \$2,500 and uses it to pay her college tuition. She is personally responsible for the loan. You provide \$2,000 toward her total support. You can-

not claim an exemption for her because you provide less than half of her support."

Usually the items that go into determining support are the cost of housing, food, clothing and medical costs, including doctor bills and medicine.

But it's not just the personal exemption that could help taxpayers. Individual taxpayers might qualify and get the "extra benefit" of filing as head of households if they legally can claim children, parents or relatives as a dependent, said Jackie Perlman, principal tax research analyst for H&R Block.

For example, the 15 percent tax bracket applies to taxable income up to \$47,350 for heads of households and \$35,350 for individual returns. At the 25 percent tax bracket, it's \$133,300 for heads of households and \$85,650 for single filers.

Steber said taxpayers have to understand that it's not just nuclear family members who might qualify. Think beyond children and parents. If you're providing half the support for an aunt or uncle, niece or nephew whose income for the year was under \$3,800, you may be able to claim them as dependents. — AP



**Follow  
breaking  
news all  
month on**

**www.fiftyplusadvocate.com**

**Don't wait for the next issue  
of the Fifty Plus Advocate  
newspaper to get the  
most updated information!**

**VISIT  
www.fiftyplusadvocate.com  
TODAY!**

### Notice to Seniors, Veterans and the Disabled

**What would you say if we told you that you don't have  
to pay your credit card and medical bills?  
Most of our clients say, "Thank you."**

If you're living on Social Security, disability, pensions or veteran's benefits, federal law states that your income cannot be taken away to repay debts. You don't have to endure frustrating calls and letters from collection agents. You can live worry-free as thousand of our clients do.

**DCSD: shelters you from harassment.  
protects your income.  
is not a bankruptcy.**

Stops, creditors from breaking the law by trying to collect on debts you can't pay. There is an affordable alternative to bankruptcy. For as little as \$20 per month you can employ a DCSD attorney to deal with your debts.

Debt Counsel for Seniors and the Disabled

**DCSD**  
founded in 1998



**DEBT COUNSEL FOR SENIORS AND THE DISABLED**  
For a FREE consultation call 1-800-992-3275 ext. 1304.

**Jerome S. Lamet**

Founder and Supervising Attorney • Former Bankruptcy Trustee

info@lawyers-united.com

www.DebtCounsel.net



# Aid & attendance for veterans: changes on the horizon

By Linda T. Cammuso

**A**id and Attendance is a program of the Veterans Administration (VA) that provides benefits for veterans and surviving spouses who require regular help from a caretaker to assist with eating, bathing, dressing and undressing, medications and personal care. Blind individuals, patients who are in a nursing home because of mental or physical incapacities or those who need care in assisted living facilities are also included.



## Legal Briefs

It is a fact that many veterans qualify for, but never take advantage of, this little known benefit offered by the VA. The Aid and Attendance benefit is part of an Improved Pension benefit program that offers benefits to veterans and to their widows. Veterans who qualify are eligible for up to \$1,732 per month, while a surviving spouse is eligible for up to \$1,113 per month. Veterans with a living spouse are eligible to receive up to \$2,054 per month. The Improved Pension benefit program is not a new program. Actually, it has been available for over 60 years — sitting idle — while millions of veterans and their survivors have missed out.

Veterans need not be disabled from a service-related injury to receive benefits. However, the road to qualifying for Aid and Attendance benefits is very complex and VA rules sometimes change based on the availability of resources. Some reasons why veterans should use the services of a quali-

fied professional to help them through the application process include:

- The rules for VA benefits and Medicaid/MassHealth eligibility often conflict — it is critical to ensure that qualifying for Aids and Attendance does not jeopardize your future eligibility for Medicaid/MassHealth.

- VA rules continue to be revised — most importantly a three-year look back period on gifting/transfers of assets for veterans and their spouses who apply for the benefit has been proposed and could be passed in the near future. The look back proposal covers any asset transfers, including transfers to an annuity or trust. The Medicaid rules have enforced a similar look back rule for several decades — currently it is a five-year period.

Undoubtedly the benefits received from the Aid and Attendance program can provide significant financial help to meet long-term care costs and improve the quality of care for veterans and spouses. However, applicants should approach the application process cautiously.

While many veterans' services organizations assist veterans in filling out applications for VA benefits, they are not able to provide legal advice. Because of the legal and financial complexities involved in qualifying for veterans benefits, veterans should consult an attorney who is skilled in estate planning, elder law and Medicaid planning.

---

*Linda T. Cammuso, a founding partner at Estate Preservation Law Offices and an estate planning professional, has extensive experience in estate planning, elder law and long-term care planning. She may be reached at [www.estatepreservationlaw.com](http://www.estatepreservationlaw.com) or by calling 508-751-5010. Archives of articles from previous issues may be read at [www.fiftyplusadvocate.com](http://www.fiftyplusadvocate.com).*

---

## AARP Tax-Aide program offers free help

BOSTON —

**A**ARP Foundation Tax-Aide — the nation's largest, volunteer-run, free tax preparation program — is available to help taxpayers with basic federal and state income tax returns until April 16.

Available to middle- and low-income taxpayers, with special attention given to those 60 and older, AARP Foundation Tax-Aide provides face-to-face assistance at nearly 250 sites across Massachusetts.

"Last year, AARP Foundation Tax-Aide

volunteers helped more than 39,000 Massachusetts residents with tax returns and questions," said Linda Fitzgerald, state president of AARP Massachusetts.

The volunteers are well versed in federal and state tax rules, and focused on helping taxpayers identify all the tax credits and deductions for which they may qualify, including:

- Circuit Breaker tax credit, which is available for Massachusetts property owners and renters who are age 65 and older and meet certain criteria.

- Energy Efficiency credits, which may be available to qualifying Bay State residential property owners.

- Schedule HC, proof of health insur-

ance coverage, which is required of all Massachusetts residents.

This year, more than 600 AARP Foundation Tax-Aide volunteers have been trained in conjunction with the

Internal Revenue Service and the Massachusetts Department of Revenue.

What to bring: If married, both spouses should be present during an income tax counseling session. Taxpayers must have available all information and documents that apply to their 2011 income taxes, including:

- Proof of identity (picture or other documentation).

- All income statements that apply to the taxpayers.

- Social Security number (Social Security card or Benefit Statement-Form SSA-1099) for taxpayer and all dependents.

- Copy of last year's federal and state tax returns.

- Personal check if direct depositing tax refund, with bank checking account and routing numbers.

---

*To find an AARP Foundation Tax-Aide site in a local community, call 888-227-7669 or go online to [www.aarp.org/ma](http://www.aarp.org/ma).*

---



Hampton residents (from l to r) Janet Brehaut and Rita Vail, a volunteer

## "What happens if I don't have a will or an estate plan?"

A lot and it's not good.

If you don't have a will or an estate plan:

- A court could appoint a third party to make medical and financial decisions for you...instead of someone you love and trust
- You could lose your home and life savings to pay for long-term or nursing home care
- The government could take a huge chunk of the inheritance that you planned to leave behind for loved ones — is that what you really want to happen?

No matter what your net worth is... you need a will and an estate plan!

Don't wait! Let Estate Preservation Law Offices help protect you and your loved ones. Our consultations are **free**; and, if you cannot come to us — we'll come to you.

Contact Attorney Linda T. Cammuso or Attorney Brendan J. King at Estate Preservation Law Offices today.



### Estate Preservation Law Offices

Protecting assets during your lifetime. Preserving them for the next generation.

[www.estatepreservationlaw.com](http://www.estatepreservationlaw.com)  
508.751.5010

Main office in Worcester, MA, with satellite offices in Braintree, and Hyannis, MA.

For our **FREE** brochures, *Long-Term Care Planning, The Medicaid/MassHealth Application Process, and Estate Plan: Without one you are living on the edge*, please call 508.751.5010.



## ► Markets

Cont. from page 17

than three times what younger customers pay, compared with six times or seven times today.

If all this sounds too good to be true, remember that nothing in life is free and change isn't easy.

Starting Jan. 1, 2014, when coverage takes effect in the exchanges, virtually everyone in the country will be required by law to have health insurance or face fines. The mandate is meant to get everybody paying into the insurance pool.

Obama's law is called the Affordable Care Act, but some people in the new markets might experience sticker shock over their premiums. Smokers will face a financial penalty.

Many people, even if they get government help, will find that health insurance still doesn't come cheaply. Monthly premiums will be less than the mortgage or rent, but maybe more than a car loan. The coverage, however, will be more robust than most individual plans currently sold.

Consider a hypothetical family of four making \$60,000 and headed by a 40-year-old. They'll be eligible for a government tax credit of \$7,193 toward their annual premium of \$12,130. But they'd still have to pay \$4,937, about 8 percent of their income, or about \$410 a month.

A lower-income family would get a better deal from the government's sliding-scale subsidies.

Consider a similar four-person family making \$35,000. They'd get a \$10,742 tax credit toward the \$12,130 annual premium. They'd have to pay \$1,388, about 4 percent

of their income, or about \$115 a month.

The figures come from the nonpartisan Kaiser Family Foundation's online Health Reform Subsidy Calculator. But while the government assistance is called a tax credit and computed through the income tax system, the money doesn't come to you in a refund. It goes directly to insurers.

Obama's law is the biggest thing that's happened to health care since Medicare and Medicaid in the 1960s. But with open enrollment for exchange plans less than 10 months away, there's a dearth of consumer information. It's as if the consumer angle got drowned out by the political world's dispute over "Obamacare," the dismissive label coined by Republican foes.

Yet exchanges are coming to every state, even those led by staunch GOP opponents of the overhaul, such as Govs. Rick Perry of Texas and Nikki Haley of South Carolina. In their states and close to 20 others that are objecting, the exchanges will be operated by the federal government, over state opposition. Health and Human Services Secretary Kathleen Sebelius has pledged that every citizen will have access to an exchange come next Jan. 1, and few doubt her word.

But what's starting to dawn on Obama administration officials, activists, and important players in the health care industry is that the lack of consumer involvement, unless reversed, could turn the big health care launch into a dud. What if Obama cut the ribbon and nobody cared?

"The people who stand to benefit the most

are the least aware of the changes that are coming," said Rachel Klein, executive director of Enroll America, a nonprofit that's trying to generate consumer enthusiasm.

"My biggest fear is that we get to Oct. 1 and people haven't heard there is help coming, and they won't benefit from it as soon as they can," she added. "I think it is a realistic fear."

Even the term "exchange" could be a stumbling block. It was invented by policy nerds. Although the law calls them "American Health Benefit Exchanges," Sebelius is starting to use the term "marketplaces" instead.

Polls underscore the concerns. A national survey last October found that only 37 percent of the uninsured said they would personally be better off because of the health care law. Twenty-three percent said they would be worse off in the Kaiser poll, while 31 percent said it would make no difference to them.

Insurers, hospitals, drug companies and other businesses that stand to benefit from the hundreds of billions of dollars the government will pump in to subsidize coverage aren't waiting for Washington to educate the public.

Blue Cross and Blue Shield plans, for example, are trying to carve out a new role for themselves as explainers of the exchanges. Somewhere around 12 million people now purchase coverage individually, but the size of the market could double or triple with the new approach, and taxpayers will underwrite it.

"Consumers are expecting their health insurance provider to be a helpful navigator to them," said Maureen Sullivan, a senior vice president for the Blues' national association. "We see 2013 as a huge year for education."

One goal is to help consumers master the "metals," the four levels of coverage that will be available through exchange plans — bronze, silver, gold and platinum.

Blue Cross is also working with tax preparer H&R Block, which is offering its customers a health insurance checkup at no additional charge this tax season. Returns filed this year for 2012 will be used by the government to help determine premium subsidies for 2014.

"This tax season is one of historical significance," said Meg Sutton, senior advisor for tax and health care at H&R Block. "The tax return you are filing is going to be key to determining your health care benefits on the exchange."

Only one state, Massachusetts, now has an exchange resembling what the administration wants to see around the country. With six years in business, the Health Connector enrolls about 240,000 Massachusetts residents. It was created under the health overhaul plan passed by former Republican Gov. Mitt Romney and has gotten generally positive reviews.

The Connector's executive director, Glen Shor, said Massachusetts has proven the concept works and he's confident other states can succeed on their own terms.

"There is no backing away from all the challenges associated with expanding coverage," Shor said. "We are proud in Massachusetts that we overcame what had been years of policy paralysis." — AP



## Come See Your Best Option Over Nursing Home and Assisted Living

- Oosterman's Rest Homes of Melrose and Wakefield provide personalized care in the comfort of a home-like environment.
- Our loving care is 7 days a week, twenty four hours a day, 365 days a year.
- Home-cooked meals, a secure and safe environment and a comfortable setting are some of our amenities.

Visit us on the web!  
[www.oostermanresthome.com](http://www.oostermanresthome.com)



93 Laurel Street, Melrose



706 Main Street, Wakefield

Call for a tour of our homes:  
93 Laurel Street, Melrose 781.665.3188  
706 Main Street, Wakefield 781.245.4778



## Seniors Helping Seniors®

### In-Home Services For Seniors By Seniors

*Seniors Helping Seniors® is an exceptional program of care & caring that matches seniors who want to provide services with those who need services.*

- Companionship
- Organization
- Overnight supervision
- Personal grooming & dressing
- Light Housekeeping
- Doctor's Appointment, Day Surgery
- Shopping
- Transportation
- Meal Preparation
- Mobility Assistance
- Companion Care also available for family functions/parties



**SENIORS Helping SENIORS®**  
...a way to give and to receive®

**Call us today.**

*It's just like getting a little help from your friends.  
If you're interested in becoming a provider, we would like to hear from you too!*

**508-485-1765**

©2008 Each office is independently owned and operated.  
All trademarks are registered trademarks of Corporate Mutual Resources Incorporated.



## ► Money

Cont. from page 16

of them adults, eventually would gain health coverage if all the states agree.

Adding up the Medicaid costs under the law, less than \$100 billion in state spending could trigger nearly \$1 trillion in federal dollars over a decade, according to the nonpartisan Urban Institute.

"It's the biggest expansion of Medicaid in a long time, and the biggest ever in terms of adults covered," said Mark McClellan, who ran Medicare and Medicaid when George W. Bush was president.

"Although the federal government is on the hook for most of the cost, Medicaid on the whole is one of the biggest items in state budgets and the fastest growing. So there are some understandable concerns about the financial implications and how implementation would work," McClellan said.

A major worry for states is that deficit-burdened Washington sooner or later will renege on the 90-percent deal. The regular Medicaid match rate averages closer to 50 percent. That would represent a significant cost shift to the states.

Many Republicans also are unwilling to keep expanding government programs, particularly one as complicated as Medicaid, which has a reputation for being inefficient and unwieldy.

As Obama's law was originally written, low-income people would not have had to worry or wait. Roughly half the uninsured people gaining coverage under the law were expected to go into Medicaid. The middle-class uninsured would get taxpayer-subsidized private coverage in new insurance markets called exchanges.

But last year, the Supreme Court gave states the right to opt out of the Medicaid expansion. The court upheld the rest of the law, including insurance exchanges and a mandate that virtually everyone in the United States have health coverage, or face a fine.

The health care law will go into full effect next Jan. 1, and states are scrambling to crunch the numbers and understand the Medicaid trade-offs.

States can refuse the expansion outright or indefinitely postpone a decision. But if states think they'll ultimately end up taking the deal, there's a big incentive to act now: The three years of full federal funding for newly eligible enrollees are only available from 2014 through 2016.

So far, 17 states and the District of Columbia have said they'll take it. That group includes three Republican-led states, Arizona, Nevada and New Mexico. Arizona Gov. Jan Brewer was prominent among GOP leaders who had tried to get the law overturned.

An additional 11 states, all led by Republicans, say they want no part of it. Perry says it tramples states' rights.

The remaining states are considering options.

In some cases, GOP governors are trying to persuade balky legislatures led by Republicans. Hospitals treating the uninsured are pressing for the expansion, as are advocates for the poor and some chambers of commerce, which see an economic multiplier from the infusion of federal dollars. Conservative foes of "Obamacare," defeated at the national level, want to hold the line.

The entire debate is overshadowed by some big misconceptions, including that

the poor already have Medicaid.

Many of them do, but not all. Medicaid generally covers low-income disabled people, children, pregnant women and some parents. Childless adults are left out in most states.

The other misconception is that Medicaid is so skimpy that people are better off being uninsured.



Obama

Two recent studies debunked that.

One found a 6 percent drop in the adult death rate in states that already have expanded Medicaid along the lines of the federal health care law. A second looked at Oregonians who won a lottery for Medicaid and compared them with ones who weren't picked and remained uninsured. The Medicaid group had greater access to health care, less likelihood of being saddled with medical bills, and felt better about their overall health.

Skeptics remain unconvinced.

Louisiana's health secretary, Bruce D. Greenstein, is concerned that the Medicaid expansion could replace private insurance for many low-wage workers in his state, dragging down quality throughout the health care system because the program pays doctors and hospitals far less than private insurance. He says the Obama administration and Congress missed a chance to overhaul Medicaid and give states a bigger say in running the program.

"Decisions are made by fiat," he said. "There is not any sense of a federal-state partnership, what this program was founded on. I don't feel in any way that I am a partner." The Obama administration says it is doing its best to meet state demands for flexibility.

But one thing the administration has been unwilling to do is allow states to partly expand their Medicaid programs and still get the generous matching funds provided by the health care law.

That could have huge political implications for states refusing the expansion.

These numbers explain why:

Under the new law, people making up to 138 percent of the federal poverty line, about \$15,400 for an individual, are eligible to be covered by Medicaid.

But for most people below the poverty line, about \$11,200 for an individual, Medicaid would be the only option. They cannot get subsidized private coverage through the new health insurance exchanges.

So if a state turns down the Medicaid expansion, some of its low-income people still can qualify for government-subsidized health insurance through the exchanges. But the poorest cannot.

Federal officials say their hands are tied, that Congress intended the generous federal matching rate solely for states undertaking the full expansion. States doing a partial expansion would have to shell out more of their own money. — AP

# Do You Want FREE HOUSING INFORMATION mailed to you?

## 55+ RETIREMENT COMMUNITY

☐ **Fairing Way-**  
South Weymouth



## ASSISTED LIVING FACILITIES

☐ **Oosterman's -**  
Methuen, Wakefield



Please check off all the facilities that you would like to receive free, no obligation information from. You can check off as many locations as you like. Your name will not be used for any other purpose. Fill out the coupon, cut out and mail back to us at the address below.

## SUBSIDIZED APARTMENTS

☐ **Congregational Retire.**  
Home - Melrose



☐ **Cushing Residence -**  
Apts., Hanover



☐ **Lamplighter Village -**  
Canton



☐ **Sherwood Village -**  
Apts., Natick



# fifty plus advocate

## FREE HOUSING INFORMATION (PLEASE PRINT CLEARLY)

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone\* \_\_\_\_\_

Attn: Free Fifty Plus Housing Information  
Fifty Plus Advocate, 131 Lincoln St., Worcester, MA 01605

\*We cannot process without your phone number. It will be used only in regard to the properties that you have marked.

z-3  
3.13



## Putting the 'kitsch' back in your kitchen

By Sarah Wolfe

Kitchens have become so serious. All that granite, dark wood and stainless steel. The heart of the home these days is more like a sleek and severe shrine to haute cuisine.

But kitchens don't have to be as stressful as an episode of *Top Chef*. Designers are increasingly turning to retro, whimsical touches like coffee cup wallpaper, bright vintage dishware patterns, and colorful appliances and electronics to bring the fun back into this increasingly streamlined room.

"I think we're reaching back to simpler times, when America was kind of on track and things were looking up. ... It's something that hits an emotional chord," said Rosanna Bowles, founder and owner of the Seattle-based Rosanna Inc. tableware line.

Here are some fun and simple ways to put the "kitsch" back into your kitchen.

### Wallpaper and wallcoverings

Ditch the staid neutrals in favor of a fun wallpaper, said Gina Shaw, a designer with Pennsylvania-based York Wallcoverings.

The company's new Bistro 750 collection features a savory mix of fanciful fruit, cutlery, kitchen utensils and coffee cups in cheery colors like teal, salmon and lime.

"We really wanted to create wallpapers



that would work in today's kitchens, where families gather, eat, drink and socialize — a fun, bistro atmosphere," Shaw said.

Anthony Carrino and John Colaneri, hosts of HGTV's *Kitchen Cousins*, introduced a retro feel in one of their recent kitchen makeovers by attaching paneling from Inhabit Living in a basket-weave pattern to the walls.

"After you install the panels, you can caulk the seams, sand them down a bit, put some primer on and add a big pop of color," Carrino said.

### Appliances

Also big in kitchens right now are retro appliances that look like they belong in grandma's 1950s kitchen but run like their modern-day cousins.

Carrino and Colaneri brought some quirk to a country kitchen by installing a retro range and hood set from Colorado-based Big Chill, which offers fridges, stoves and even dishwashers in any color but stainless steel, accented by chrome trim.

"It looks like a classic car. ... It's like having a Bosch or Frigidaire with that kind of dependability but you've got that cool, retro feel to the whole thing," Carrino said.

Kitchenaid and some small manufacturers also now make blenders, mixers and other appliances in funky colors like pistachio and tangerine to add panache to countertops.

### Countertops

Speaking of counters, don't think you're relegated to granite, solid surface or laminate choices.

Try something fresh and unique like the Motivo embossed collection by California-based CaesarStone, which is primarily advertised as a wall treatment but which Carrino used as a surface for kitchen countertops.

"We saw it and bought it on the spot," he said. "We designed it into the first kitchen we could find. It is absolutely gorgeous."

The collection comes in lace and crocodile patterns, and adds texture to a space by combining matte and glossy finishes in an unusual way, Carrino said.

### Dishware

Carry the kitschy feel to your cupboards and display shelves with dishes bedecked in whimsical floral or bird patterns, and glassware in Depression-era hobnail or Mid-century Modern lines, said Bowles.

Even a quirky red polka-dotted cookie tray or serving piece can dress up an otherwise traditional all-white table.

Those looking to save money can look to family heirlooms, Bowles said. "Shop either your mother's closet or your grandmother's closet and you'll find amazing things."

### Accents

Atlanta-based artist Jordan Sandlin and her husband, Jeff, have embraced the kitchen in their mid-century, split-level home by doing away with its old "buyer-friendly" neutral color scheme in favor of robin's-egg-blue cabinets, red Formica countertops, vintage light fixtures, and plenty of thrift store and estate sale finds.

A collection of screen-printed serving trays dating to the 1950s line the wall above the kitchen cabinets, while a recent find — an original, signed Charlie Harper print of two white eagles set against a light gray background — dresses up a barren wall.

A red-and-white, 1950s formica table, vinyl chairs, old bourbon bottles and vintage plates further separate their kitchen from today's pack of "granite-covered kitchen monstrosities," the couple said. — AP

Read previous issues of the  
**fifty plus**

advocates.com

On-line at [www.fiftyplusadvocate.com](http://www.fiftyplusadvocate.com)



Now all four editions of the *Fifty Plus Advocate* newspaper are on-line for an entire year.

**Miss an issue? No problem!** Download it to your computer and read it at your leisure. Save important information for future reference.

Currently serving the mature market of Massachusetts with four monthly editions

in Boston, Boston South, Boston Metro-West and Central Massachusetts.

For advertising information call  
Donna Davis at 508-752-2512, ext. 130.

## "Storm Troopers" Volunteer Drivers Needed for Meals on Wheels Routes

We are seeking volunteers to deliver meals in bad weather to our homebound clients, when our regular drivers are not able to do so.

**Our mission is that no one goes without a meal, and we make every effort to deliver that promise!**



### Requirements:

- Application
- CORI check
- Reliability
- Good driving skills
- Availability on quick notice
- A 4-wheel drive vehicle would help



Follow Me on Twitter  
@SouthShoreElder



Please Contact our Volunteer Coordinator:  
781-848-3939 x 430

# Support our ADVERTISERS

Please let them know you saw their ad in the **fifty plus** advocate

**Thank you in advance for your help!**



# Do-it-yourselfers give new life to old dinnerware

By Hillary Speed

**V**intage dishware doesn't have to gather dust in the china cabinet.

Outdated table settings, such as a stack of your grandmother's old plates or a bundle of used mugs you scooped up at Salvation Army, can find fresh life with a little TLC. All it takes is a marker or a drill and a basic plan.

"I always find it a bit sad when things so loved by previous generations are thrown on the scrap heap," said lifestyle blogger Anna Nicholson, based in Yorkshire, England.

"I'm always looking for ways things can be reused, upcycled and overhauled to fit in with our 21st century style."

Here are some ways to spruce up old china and dollar-store dishes:

The popular craft-swapping website Pinterest is full of plate-decorating projects that tap into the "magic" of magic markers.

Nicholson, whose blog is *angel in the north* ([www.angelinthenorth.com](http://www.angelinthenorth.com)), uses Sharpies to personalize vintage floral plates. In one set, she adorned each plate with a letter in the word "EAT," to display in the kitchen. In another, she used four plates to spell out the word "HOME."

She prints her own letter cutouts, using the font Bodoni MT, onto thick paper or cardstock. She traces around the letters onto the old plates with a pen, then goes over the outline with a Sharpie and fills it in.

"This is an easy project, but you do need a steady hand," she said.

Others take the Sharpie idea to another level and — if the dishes are ovenproof — bake the marker on to make it permanent. Many crafting blogs call for drawing with a Sharpie and baking the ovenproof dish at 350 degrees for 30 minutes.

Christine Dinsmore, based in Portland, Ore., has used the Sharpie method for free-handing original drawings. On her blog, *The Plumed Nest* ([www.theplumednest.com](http://www.theplumednest.com)), she shows how she drew original monster pictures onto plates for her children.

That's when she got inspired to draw her own kid-friendly characters.

Dinsmore advises using non-toxic Sharpie paint pens, found at most craft stores and online. Also, she recommends cleaning plates gently, never with an abrasive sponge or dishwasher.

Other bloggers suggest ceramic or glass paint if the dish will have frequent contact with food.

Danielle Warner of the blog *The Yarn to Tell* ([theyarntotell.wordpress.com](http://theyarntotell.wordpress.com)) recommends Delta PermEnamel paint for a more painted — rather than drawn — look. It's also available at craft stores or online.

Sometimes, old china is no longer in one piece. But that shouldn't stop you from turning it into something special.



Anna Nicholson uses Sharpies to personalize vintage floral plates.

Do-it-yourselfer Ashley Hackshaw, editor of the blog *Lil Blue Boo* ([www.lilblueboo.com](http://www.lilblueboo.com)), was inspired to find a use for chunks of a broken Tiffany vase that she had received as a wedding gift.

"I couldn't bear to throw away the beautiful pieces, so I decided to start making them into useful items," said Hackshaw, of Palm Desert, Calif.

Her answer: key chains.

Once you find a piece you like, the main job is to drill a hole and smooth the edges. You can use a household drill, using a carbide drill bit to make the hole, and sandpaper and steel wool for the edges.

Make sure to wear protective eyewear and dip the piece in water to keep it cool, Hackshaw said.

Or you can use a rotary tool and attach-

ment set, she said.

Then, just thread a key ring through the hole, and you have a meaningful and practical new use for an old chunk of china.

If you have beautiful old pieces of china that you rarely use, why not turn them into something else?

Marceli Botticelli of Franklin, Mass., runs an Etsy store called Tea Times Creations ([www.etsy.com/shop/TeaTimesCreations](http://www.etsy.com/shop/TeaTimesCreations)). It offers tiered stands, made out of old china that can be used as serving platters or "tidbit" trays for anything from jewelry to loose change or keys. She also sells jewelry and nightlights made out

of repurposed table settings and teacups.

For the DIYer, Botticelli sells kits that come with drill bits, fittings and instructions. And if you're too sheepish to drill your own holes into your precious antique plates, she offers to do it for you.

One of the biggest challenges in repurposing old china for any project, she said, is finding the right piece.

"I am inspired by many different things," she said. "It can be the color, the pattern, a theme."

One client brought her a plate with an extremely rare pattern; the client had been collecting china since she was 8, and had never found another plate like this one.

"I said a prayer, took a deep breath and I drilled into the plate," Botticelli said. — AP

## Affordable Living at its Best

Now Accepting Applications for 62 Years or Older

Income Guidelines: \$32,550 single / \$37,200 couple

Applications for the under 62 permanently disabled is now closed.

- Heat and hot water included
- Qualified Applicants pay 30% of adjusted income
- 24 hour emergency maintenance
- Seasonal trips
- Monthly activities include: exercising classes, birthday parties, book mobile, blood pressure screens and podiatrist
- Manicured walking paths with garden plots
- Ideally located in Natick residential bus route
- Pets okay under 20 lbs.



Relax in Park-like setting



Comfortable floor plan

## Sherwood Village Apartments

143~145 Mill Street, Natick, MA 01760

Call at 508-651-1811 for details





# Enhancing Lives Through Innovative Healthcare

That's our mission at Golden LivingCenters. We strive to help you return to your active life after surgery or illness. Combining 24-hour nursing with our exclusive Golden Rehab therapy, clinical expertise and professionally-trained staff, we provide a well-rounded recovery plan to meet your specific needs. Our goal is to help you regain mobility and independence so you can enjoy an enhanced quality of life.

golden  
rehab™

**Golden LivingCenter – Heathwood**

188 Florence Street • Chestnut Hill, MA 02467  
(617) 332-4730

**Golden LivingCenter – Gloucester**

272 Washington Street • Gloucester, MA 01930  
(978) 281-0333

**Golden LivingCenter – Lexington**

840 Emerson Garden Road • Lexington, MA 02420  
(781) 861-8630

**Golden LivingCenter – Dexter House**

120 Main Street • Malden, MA 02148  
(781) 665-7050

**Golden LivingCenter – Melrose**

40 Martin Street • Melrose, MA 02176  
(781) 665-7050

**Golden LivingCenter – The Elmhurst**

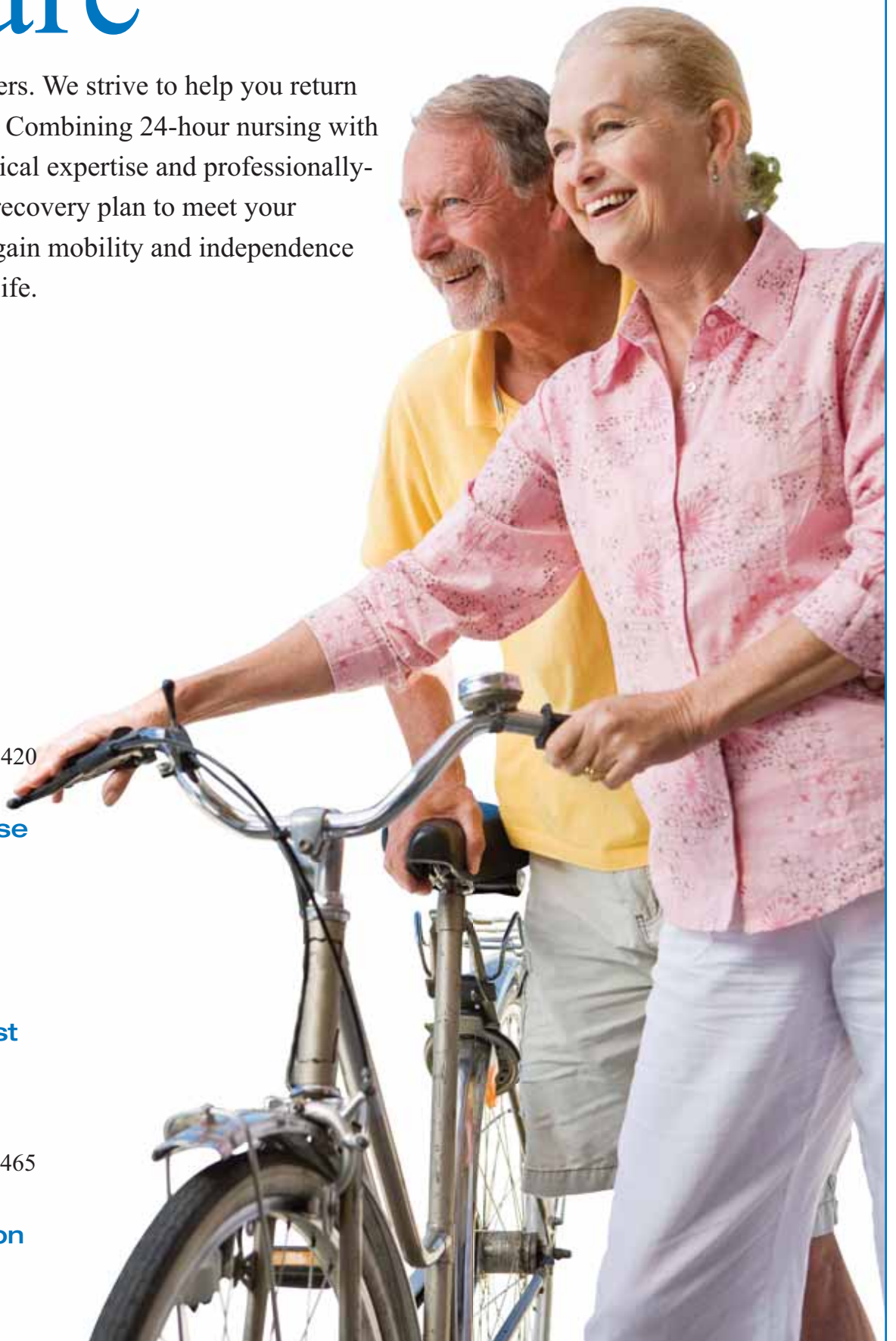
743 Main Street • Melrose, MA 02176  
(781) 662-7500

**Golden LivingCenter – Chetwynde**

1650 Washington Street • West Newton, MA 02465  
(617) 244-5407

**Golden LivingCenter – West Newton**

25 Amory Street • West Newton, MA 02465  
(617) 969-2300



[www.GoldenLivingCenters.com](http://www.GoldenLivingCenters.com)

age, disability, status as a Vietnam era veteran, qualified special disabled veteran, recently separated veteran, or other protected veteran, or source of payment. GLS-06867-11-IE