



**Savannah: Ghosts,
stories, history**
page 16



**Dieting: Forget
the calories**
page 10



**Brightening up
outdoor spaces**
page 30

Find Index of Caregiving Services on page 5

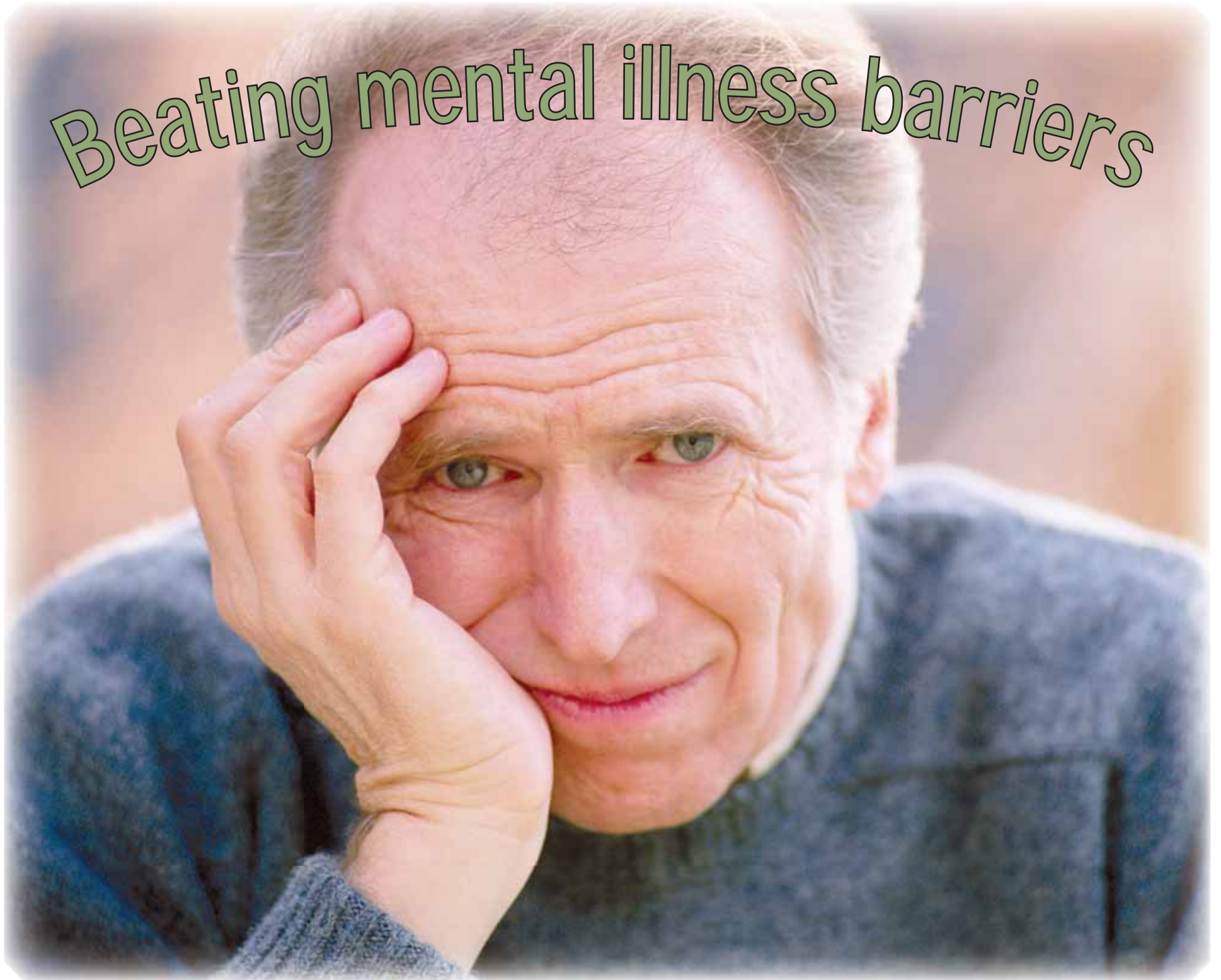
fifty plus advocate

40th
year

Published Monthly / FREE / June 2014 / Vol. 40 / No. 6 / 32 pp.

CENTRAL MA EDITION

Beating mental illness barriers



PRE-SORT STANDARD
U.S. POSTAGE PAID
PERMIT NO. 697
WORCESTER, MASS.

CURRENT RESIDENT OR

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

Read Back Issues of the

fifty plus
advocate

www.fiftyplusadvocate.com



"A Lifetime of Friendships!"

55 years
& older



ALL UTILITIES INCLUDED!

- Converted from a 9-hole golf course, Lincoln Village offers beautifully landscaped country setting with the convenience of living in the city.
- Resident service coordinators with regular trips, social clubs, and free seasonal concerts.
- Convenient to bus lines & medical transportation is accessible.
- Private entry-way with on screen intercom entrance
- 24 hour on-site security officer and emergency maintenance.

At Our Community Center:
Indoor and outdoor pools.
Weight room and saunas.

Wait Lists Open for the following:

- One Bedroom in the high-rise for 55+.
Minimum monthly income requirement of \$1,590.00
- Rents starting at \$746

LINCOLN VILLAGE
Affordable Housing


Call us today to tour the property.

37 Pleasant Valley Drive, Worcester
(508) 852-2521; TTY: (508) 439-2370

OFFICE HOURS : Monday thru Friday 8:00a.m. - 5:00p.m.



Financed by MHEA



If you didn't know
we offer a
\$0 premium* plan
in your area,
get to know us ...

TUFTS  Health Plan
Medicare Preferred

We have the state's largest Medicare Advantage plan membership — with more than 90,000 members in Massachusetts. Highly rated — with 4.5 out of 5 stars** in 2014. An extensive network of top doctors and hospitals in your area. And a \$0 premium* HMO plan with medical, prescription, vision and fitness benefits.

Find out more today.

**Call 1-877-442-3150 (TTY: 1-888-899-8977)[†]
or visit: thpmp.org/hmo**

*You must continue to pay your Medicare Part B premium.

**Medicare evaluates plans based on a 5-Star rating system. Star Ratings are calculated each year and may change from one year to the next.

[†]Tufts Health Plan Medicare Preferred representatives are available Monday – Friday, 8:00 a.m. to 8:00 p.m.

Tufts Health Plan Medicare Preferred is an HMO plan with a Medicare contract. Enrollment in Tufts Health Plan Medicare Preferred depends on contract renewal.

The benefit information provided is a brief summary, not a complete description of benefits. For more information, contact the plan. Limitations, copayments and restrictions may apply. Benefits, premium and/or copayments may change on January 1 of each year.

H2256_2014_228 Accepted

Choose to live in a warm and caring community



- Spacious 1 Bedroom Apartments
- Non Smoking Building
- Central Air-Conditioning
- All Utilities Included
- Ample Parking
- Laundry Rooms on Each Floor

- 24 Hour Emergency Maintenance
- Library and Community Rooms with Large Screen TV, Computer & Free Internet
- Conveniently located near Hospitals, Shopping Centers and Downtown Worcester
- Small Pets Welcome

Village at Ascension Heights

42 Vernon Street, Worcester, MA • 508-752-5590



Office Hours: Mon. & Fri. 2pm-5pm; Tues., Wed. & Thurs. 10am-3pm

To receive an application please call 508-752-5590



To qualify a person must be at least 62 years of age and meet HUD annual low income guidelines.

NEWLY REMODELED APARTMENTS with a contemporary flair



- Contemporary styled 1 & 2 bedroom apartments
- New kitchens with built-in microwaves and granite-like countertops
- Small pets welcome
- Heat and Hot water included
- Bus route / ample parking
- Beautiful landscaped grounds with gazebo

• Within the building amenities include:

- A Theater-like media center
- Handicap-accessible lounges on every floor
- Library equipped with two computers and free internet access
- Physical fitness center
- Game room with billiard table
- Community room with bingo board and large screen TV

Green Hill Towers

27 Mount Vernon Street, Worcester, MA 01605 • OFFICE OPEN DAILY 8:30AM - 5:00PM

To receive an application please call 508-755-6062 TDD# 508-755-0228

Available occupancy to income eligible mature adults (age 62 years & older) or permanently disabled. Applicants must meet HUD annual low income guidelines. Preference is given to individuals 62 and older.



Managed by

CORNERSTONE
Corporation

Financed by MHFA



FEATURED STORIES

Narrowest budget gap since 2008	9
Feds hike Advantage pay estimate	9
Medicare fraud arrests	11
Medicare overtreatment in billions	11
New procedure detects sleep apnea	14
Revisiting 1964 World's Fair	21
Treat introduced at World's Fair	21
Obamacare: Hefty fees for drugs	22
Make your own laundry detergent	23
Boomers living communally again	27
U.S. approves diabetes drug	29

DEPARTMENTS

Caregiving Tips	20
Feeling Healthy	10
Focus on Senior Services	14
Home Improvement	30
Just My Opinion	7
Money Matters	24
Resource for Caregivers	18
Reverse Mortgage	26
Travel	16
Viewpoint	8



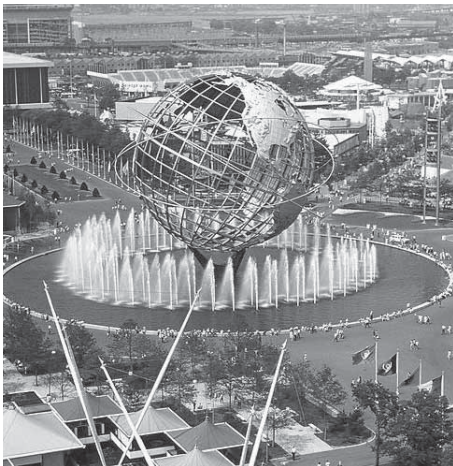
Sleep
detection

14



Hefty
cost

22



Remembering
1964

21



Living
together

27

ABOUT THE COVER

Local group helps aging with mental health problems p. 6

■ INDEX OF SERVICES IN THIS ISSUE ■

ADULT DAY CARE

Adult Day Club at Dodge Park..... p. 16

ADVOCACY

AARP..... p. 7

AFFORDABLE SENIOR HOUSING

Lincoln Village..... p. 2

ASSISTED / INDEPENDENT LIVING

Eisenberg Assisted Living..... p. 31

ATTORNEYS, ELDER LAW

Durbin & Veglia Attorneys at Law .. p. 25

Estate Preservation Law Offices p. 27

Ingle Law p. 31

AUTO DETAILING

Haddad Auto Detail p. 14

CEMETERIES

St. John's Cemetery & Mausoleum .. p. 24

Worcester County Memorial Park p. 26

CLEANING SERVICES

Clean Team p. 28

CREMATION SERVICES

Shaw-Majercik Funeral Home p. 27

EYE CARE SERVICES

Keamy Eye & Laser Center p. 13

FITNESS PROGRAMS

Active Rx p. 19

FUNERAL PLANNING SERVICES

Senior Market Life Insurance p. 25

FUNERAL SERVICES

Miles Funeral Home..... p. 25

HEALTH CARE INFORMATION

SHINE Program p. 22

HEARING & SPEECH SERVICES

Worcester State Audiology..... p. 10

HOME CARE

Associated Home Care p. 17

BrightStar Lifecare p. 13

Century Homecare p. 19

JHC HomeCare p. 23, 31

HOSPICE

JHC Hospice p. 31

HOSPITALS

Saint Vincent Hospital p. 32

MEDICARE PREFERRED

TUFTS Health Plan p. 3

MORTGAGE FINANCING

Direct Finance Corp. p. 30

NURSING HOMES

Golden LivingCenters, Fitchburg .. p. 15

Golden LivingCenters, Worcester .. p. 15

Jewish Healthcare Center p. 31

Knollwood Nursing p. 13

Odd Fellows Home of MA p. 31

REAL ESTATE SERVICES

SellMomsHouse.com p. 19

REST HOMES

Dodge Park p. 18

SUBSIDIZED HOUSING

Bet Shalom Apartments p. 12

Coes Pond Village p. 12

Colony Retirement Homes..... p. 17

Emanuel Village p. 11

Green Hill Towers p. 4

Hawthorne Hill p. 10

Illyrian Gardens..... p. 11

Uxbridge Millville Housing p. 22

Village at Ascension Heights..... p. 4

VOLUNTEER SERVICES

Rachel's Table p. 28

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

State mental health advocates help older adults beat illness

By Brian Goslow

WORCESTER —

For some battling mental health issues, it's all about taking those tiny steps that have been avoided over an extended period of time — and having programs available to help them break old patterns. For older individuals suffering emotional issues, the challenges can be greater. The Massachusetts Aging and Mental Health Coalition (MAMHC) is there to help.

At its recent annual conference at the College of the Holy Cross, there were plenty of examples given of how properly presented self-management programs can help reverse the debilitating patterns of depression for older adults.

Robert Schreiber, medical director of the Massachusetts Healthy Living Center of Excellence, shared the story of Mary, a 60-year-old woman with agoraphobia who hadn't regularly left her apartment for years because she was paralyzed with anxiety and an ongoing fear of the people that were around her; she wanted to travel to see her out-of-town daughter and grandchildren.

Thanks to Mary's participation in the My Life My Health: Chronic Disease Self-Management Program (CDSMP), an action plan was developed that took Mary from short walks in her hallway to walks outside her apartment and then walks down her street, literally taking the small steps that culminated in her being comfortable enough to book a flight for an extended stay with her family.

Based on a model developed at the Stanford University Patient Education Research Center in the early 1990s, the CDSMP program is overseen in the state by the Massachusetts Healthy Living Center of Excellence and Elder Services of the Merrimack Valley, Inc. in conjunction with Hebrew SeniorLife.

The six-week, two-and-a-half-hour-per meeting CDSMP workshops are offered to adults living with the challenges of one or more persistent health conditions and are intended to encourage discussion, action planning, brainstorming, problem solving and decision making; participants receive "The Living and Healthy Living Book" and a CD with relaxation exercises on it.

Offered statewide since 2007, over 4,000 older adults have gone through the program at over 200 sites, including senior centers, healthcare organizations, adult day health programs, assisted living facilities, nutrition programs, hospitals, clinics, senior housing and family caregiver support programs.

"Some of the people are overweight, some have high blood pressure and some have medical conditions that affect their everyday life," said Susan Poludniak, Healthy Living

Program Manager for Elder Services of the Merrimack Valley, Inc.

The topics covered include dealing with difficult emotions, physical activity and exercise, communication skills, medication usage and making informed treatment decisions that lead to a feeling of achievement that can greatly improve not only a person's mind, but also health.



Callahan

"We want them to succeed," Poludniak said. "When they succeed with a goal in their activity plan, we see incremental behavioral changes. Positive change is happening."

Poludniak said the findings from a 2013 national study of CDSMP effectiveness, which surveyed 1170 participants, are significant. They included:

- a 10 to 16 percent decrease in fatigue, pain, shortage of breath and sleep problems;

- a 12 percent increase in the number of participants who are "moderately active" at the end of the program vs. at the beginning;

- a 21 percent improvement in depression;
- a 6 percent improvement in quality of life; and

- odds of an emergency room visit were reduced 32 percent over a 12-month period.

In a separate presentation, Schreiber noted that CDSMP participation led to better health and healthcare value and lower cost; the post-program estimated savings is \$713.80 per participant.

During her presentation at Holy Cross, Poludniak shared a letter from one of the program's participants, Helen Lamoureux, who participated at the Chicopee Senior Center.



Susan Poludniak, manager of the Healthy Living Program for Elder Services of the Merrimack Valley, Inc.; Melissa Donovan, assistant director of the Healthy Living Program; and Robert Schreiber, medical director of the Massachusetts Healthy Living Center of Excellence

"This program has made me aware that setting simple goals and carrying them out, turning negative thoughts into positive ones, following a healthy diet and exercise program and taking prescribe medicines can lead to a productive life, even while living with chronic arthritis," Lamoureux wrote. "I hope more seniors can avail themselves of this educational program."

A second, unnamed person, a caretaker for one of the program's participants, wrote that the workshop had helped her husband

deal with problems with many aspects of the depression he suffered related to having Parkinson's disease. "He learned how to make weekly action plans and solve problems related to his condition," she wrote. "These weekly workshops helped him to get out and meet other people, share his stories, and build lasting friendships."

Those unable to physically attend the workshops or who live in areas where they aren't offered can participate online.

Melissa Donovan, assistant director of the Healthy Living Program, said program leaders first try to identify what factors may be causing depression, then they identify healthy activities that might help the participant. "Depression isn't a normal process of aging," Donovan said, adding that there are many people who aren't willing to talk about their depression or what's causing it.

Untreated depression is the number one risk factor for people 65 and older committing suicide. "A large percentage of them saw their doctor the day or week before the suicide," Donovan said, observing that depression is often ignored.

Depression is also a huge barrier to healing — especially with diabetes," she said. "We're trying to lower health care costs and by not diagnosing depression, we're not going to get there."

Stress can also have a major impact on health. Meditation, said keynote speaker Ann Webster, can be a significant factor in reducing stress. Webster is staff psychologist and instructor in medicine at Harvard Medical School and the director of the Benson-Henry Institute for Mind Body Medicine at Massachusetts General Hospital. "Being quiet for an hour is one of the most refreshing things you can do," she said during her presentation, "Aging Without an Expiration Date: Mind Body Medicine for Successful Aging."

Mass General's Mind/Body Program for Successful Aging is a nine-week program that teaches relaxation exercises that combine daily periods of silent meditation and diary keeping, which has the dual purpose of getting participants to review their daily conduct and how each act affects them and to slow down their day.

"People walk around with pain and store it away," Webster noted. "It's a matter of calming down and getting in touch with what's inside of you. This can be done by writing it down — and down again. I want my patients

to know what happens to their bodies when they have stress — it affects their central nervous system, somatic nervous system and automatic nervous system." She said physical stress holds warning signals that when ignored, can lead to major health problems.

People who are steadfast in following

through on the program tend to have certain characteristics she calls, "The Five Cs": commitment, control, challenge, community and closeness, which they passionately engage in as a result of successfully following through on the program's goals and in many instances, reinventing their lives.

"A lot of the people who are in my groups are retired or they're widows or widowers; they're isolated and don't have face-to-face contact, so I want them to vitally engage their life," Webster said.

To do this, she asks them to close their eyes and think about and identify

what they want in terms of their career, educating their mind, relationships, creative things, play, health, spirituality, as a volunteer and self-transformation. Upon opening their eyes, they share their findings, some of which were clear goals for things they wanted to achieve in the weeks, months and years ahead.

The program's success stories include a man who was once housebound but now regularly serves tea and coffee to visitors at a local hospital and a woman who achieved her longtime dream of becoming a beekeeper. "Now she's passing out little jars of honey to everybody," Webster said. "So it's an extremely important exercise and it reverberates the rest of people's lives."

Getting the necessary help for mental health problems can be doubly difficult for those with disabilities — especially when dealing with people who think their situation leaves them unworthy of the time, effort and money needed to assist them in living a better life.

Denise Karuth of Florence faces health challenges that include being legally blind, multiple sclerosis, hypochondria and a pain syndrome that can leave her unable to talk for one to two weeks at a time. She has also suffered from shingles. Some medications tend to make things more confusing for her. She gets around with an electric wheelchair and the assistance of a beloved guide dog, Fendi.

In addressing "Reframing Aging with Disability: From Impairment to Possibility" and how she has survived her doubters, Karuth, the former director of the Boston Self Help Center, said a key component of



Karuth with Fendi

STATE page 29

fifty plus
advocate

Central 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
Staff Reporter: Brian Goslow: ext. 135
Travel Writer: Victor Block
Art Director: Susan J. Clapham
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. 126

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

Generation gap will have serious implications if we ignore the signs

By Sondra Shapiro

The “generation gap” was a term popularized in the '60s to describe the divide between Baby Boomers and their parents. We Boomers were rebels, politically and socially, much to the chagrin of our parents' generation.

The rabble-rouser moniker has stuck with us throughout the decades. As we enter old age, we 76 million are still redefining the status quo. We are also becoming our parents, in many ways. And, like our parents before us, we are finding ourselves on one side of a new generation gap with the younger generation of Millennials (those born between 1982 and 1997), an 80 million-member powerhouse that is reshaping the political and social landscape.



Just My Opinion

This gap was brought to my attention while getting my daily dose of Jon Stewart's *Daily Show*. I was half asleep when Stewart's guest, Paul Taylor, who oversees demographic, social and generational research at Pew Research Center, said, “(We) Boomers made a lot of noise in our 20s and now we have gotten more conservative.” That my liberal, devil-may-care generation is becoming conservative was enough to capture my interest. Now that I was fully awake, things got more interesting.

Taylor was promoting his new book, *The Next America*, which examines the different generations and the country's changing demographics. As Stewart introduced Taylor, he used the word “showdown,” to describe the relationship between Boomers and Millennials. But since comedy is the *Daily Show*'s bailiwick, Taylor jokingly followed by saying, “It's hard to wage a generation war from their childhood bedroom.” They like mom and dad and “have gone from being kids to roommates,” Taylor said. So, what about this showdown?

My head was spinning after the interview. I just kept thinking about that word “showdown.” So, after a long sleepless night, I ran out and bought a copy of Taylor's book, which I found delves into where our nation is headed as the influence of the boomer generation begins to take a back seat to the next generation. Taylor contends the future holds a dramatic social, racial and economic shift.

Filled with meticulous research, the message should serve as a warning to current and future political leaders. The status quo will doom us.

The book describes and contrasts the differences among the four main generational groups: The Silents, Boomers, GenXers and Millennials. But the takeaway was the relationship between Millennials and Boomers.

There are many differences between my cohort and this younger group. While we couldn't wait to flee the nest, Millennials are staying put, mostly because they can't find jobs. They are delaying marriage and

children because they don't have the means to provide for a family. Promos for Taylor's book warn that 20-somethings are at risk of becoming the first generation in American history to have a lower standard of living than their parents do.

Because Millennials are experiencing a stunted adulthood, the rumblings among them are low. They are not yet thinking about the future and their retirement security. According to Taylor, the Great Recession has also banded the generations together.

“What's so fascinating is there isn't any tension at the moment,” he said during the NPR interview. “You have a generation coming in that isn't wagging its finger with blame at mom or grandma; in fact, they're living with mom and grandma. ... There's a lot of generational interdependence ...”

Now the word “showdown” began to make sense. Though it has been delayed, it could happen.

Consider:

- Social Security, a pay-as-you-go system, has today's workers paying for current retirees. When Social Security began, there were 42 workers per retiree. By the time my entire cohort is dipping into the program, around 2035, there will be two workers per retiree.

- Medicare's trust fund insolvency is slated for 2033 if nothing is done to fix it.

“The math of those programs does not work,” Taylor said during a National Public Radio (NPR) interview. “Everybody who looks at the demographics knows that those systems are going broke within 15 or 20 years and the longer you wait, the more the burden of the solution is going to fall on the Millennials.”

This burden will likely create animosity toward the Boomer generation, only to be exacerbated by my generation's proclivity to spend and not save, thereby placing more responsibility on taxpayers to help support us.

The national debt continues to rise largely because of the behavior of our generation and the leaders we have spawned who aren't smart or courageous enough to find workable solutions. Social Security and Medicare together accounted for 38 percent of federal expenditures in fiscal year 2012, according to federal government statistics.

I recall a comment made to me years ago by a Concord Coalition head: “The only way things would get done is if both parties held hands and jumped off the cliff together. No one wants to be the first to put forth the details. It's self-preservation.”

Millennials tend to be very liberal. Taylor credits them for delivering the election and re-election of President Obama. Yet, that support has eroded lately. “They are now about a 15 or 16 percent of the electorate. By 2030, they will be about 30 percent of the electorate. So the simple demographic churn assures that they will become very important. Woe be it to the politician who doesn't understand who they are and doesn't understand their dreams and aspirations and fears. At the moment, it's hard to find it in Washington.”

Taylor, the astute statistician, said during



WAKE UP AND START DREAMING.

If you're ready to explore something new, move on or change direction, AARP can help. With our guidance, you'll join a community of people who, like you, are reimagining what's next. We'll help you realize your goals and dreams. If you don't think Real Possibilities when you think AARP, then you don't know “aarp.” Find the right tools for your inspiration today at aarp.org/possibilities



Real Possibilities in

Massachusetts

GENERATION page 8

Technology can help reduce social isolation among seniors

By Michael E. Festa

Isolation — due to the death of a spouse, loss of friends and companions, and distance away from loved ones — puts millions of older Americans at risk of poor health and prolonged loneliness.

The AARP Foundation reports that as many as 17 percent of older Americans are impacted by social isolation. There are many reasons why someone age 50 and older becomes isolated from family and community: injury or illness, loss of independence or mobility, financial stress or a job change. As such, it's easy to become homebound, disconnected and isolated.

Most people value connections to family and friends, community, work and to organizations that appreciate their efforts and contributions. Those connections define who they are and what matters most to them. By helping them become more connected to their community, Internet activity can help ease feelings of depression and isolation among those 50 and older.

The 2013 AARP Attitude, Trend & Opinion Monitor (ATOM) survey of the U.S. population age 50 and older



found that:

- Mobile device usage among the 50+ population is 85 percent.
- Email, surfing websites, reading news and getting travel directions are the most common activities of age 50+ smartphone users.
- Three quarters (74 percent) of adults age 50+ own

AARP and You

e-reader or tablet).

- Social-networking usage is reported by 52 percent of older adults.
- Privacy is a concern for many older adults. Only 17 percent of those age 50+ is very confident that their data are kept private online.

Though the incidence of technology use is increasing in those 50 and older, millions of Americans who aren't familiar with computer and online technology are still at risk of social isolation. If you would like to learn how to use a computer to stay better connected with your friends and family; use the Internet to obtain news and information; learn how to email; and help close the technology

some type of computing device (desktop, laptop,

gap between you and your grandchildren, AARP has the program for you.

AARP TEK (Technology Education and Knowledge) is a comprehensive technology education program geared towards the 50+ audience. Though millions of older adults already use personal technology in their everyday lives, there are still many more who want to learn the ins and outs of using smartphones and tablets (i.e. iPad, etc.) to enhance their lives and discover a world of new possibilities. AARP TEK provides understandable training on how to use personal technology to live a better life.

Learn more about what AARP TEK can offer you by visiting www.aarptek.org to find out more about using tablets, social media, online safety, digital entertainment and staying connected.

For more information, please contact AARP Massachusetts at 866-448-3621 or email at ma@aarp.org. You may also visit our website at www.aarp.org/ma.

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; Like us at www.facebook.com/AARPMMA and follow us on www.twitter.com/AARPMMA.

Paul Ryan: 'Path To Prosperity' or road to nowhere?

By Al Norman

In April, U.S. Congressman Paul Ryan, R-WI, introduced a federal budget resolution for 2014 that was equally controversial with past budgets from Mitt Romney's running mate. Ryan dubbed his budget, the "Path to Prosperity." But the National Council on Aging listed a number of ways in which the Ryan budget, for seniors, looked more like a road to nowhere:

1. It repeals the Affordable Care Act (ACA). The proposal eliminates Obamacare provisions that reduce the "donut hole" prescription drug costs; keep frail seniors in their homes; improve access to Medicare prevention services (such as falls prevention, and a free annual wellness visit); improve chronic care education, reduce Medicare fraud, improve nursing home quality and reduce hospital readmissions. It would, however, maintain Medicare cuts found in Obamacare.

2. It significantly cuts non-military programs. Funding for Older Americans Act programs like Meals on Wheels, family

caregiver support, job training, senior centers and disease prevention programs — all would suffer significant cuts.

3. It cuts Medicare in four ways. The proposal would increase the Medicare eligibility age, raise the deductible amount for doctor visits, penalize or prohibit people from buying first-dollar private Medigap coverage and increase monthly premiums for middle-class seniors with incomes over \$46,000 per year.

4. It cuts and block grants Medicaid. Medicaid covers almost two-thirds of long-term care costs for older Americans. The proposal cuts this safety net by \$732 billion, hurting frail, vulnerable seniors who depend on it. Block granting Medicaid means states would get a limited pot of money for Medicaid health care that could run out.

5. It completely restructures Medicare. It provides a "premium subsidy" that could significantly increase Medicare beneficiaries' out-of-pocket costs because the contribution amount would not keep pace over time with the cost of care. Those who remain in the traditional program also could be forced

to pay higher premiums.

6. It cuts food stamps. The proposal would cut an additional \$137 billion — on top of the \$8 billion already cut recently from the Supplemental Nutrition Assistance Program (SNAP) — which helps hungry older adults afford healthy food.

7. It cuts the Supplemental Security Income (SSI) program. SSI affects more than 2 million low-income seniors. Cuts to SSI would drive the nation's most vulnerable seniors into extreme poverty.

Critics of Ryan's budget charged that it was politically motivated, because Ryan knew that the Democratically-controlled Senate would never pass it, making it just a symbolic vote to be used in next fall's mid-term elections.



Push Back

The worst provisions in this budget bill are the ones that radically change Medicare and Medicaid — two health care programs that seniors rely on. These programs would be more efficient if they were combined, and if all Americans had access to a Medicare plan. For now, we have Obamacare, which is built on a private insurance model with all the administration, overhead, advertising and profiteering that comes with it.

A single Medicare plan, with one large risk pool, no stockholders and low administrative costs, would be the path to prosperity. By contrast, the Ryan budget looks more like the road to nowhere.

Al Norman is the executive director of Mass Home Care. He can be reached at info@masshomecare.org, or 978-502-3794.

► Generation

Cont. from page 7

the NPR interview, "We've got to rebalance the social safety net so it's fair to all generations; the numbers just don't work going forward. That cries out for political leadership."

During my early years as a reporter, I covered issues pertaining to the parents and grandparents of Boomers. A re-occurring message was that they wanted to leave the world a better place for their children and grandchildren. The programs that came from that generation and its leaders mirrored that sentiment.

If I could talk to those people today, I know their first concern would be to protect the youth of this country.

Yes, we have allowed our children to move back home during tough times. Perhaps we have coddled them a bit too much, contributing to their stunted matu-

ration. It seems, though, that there is a disconnect with the love we feel for our children and grandchildren and the bad behavior we and our political leaders are engaging in that could financially help to bankrupt them.

The impending showdown can be nipped in the bud. If the generations could work together to preserve the benefits that previous generations have, Millennials would have a chance to enjoy the same career, family and government benefits that we have enjoyed.

Then, the only "generation gap" we would need to concern ourselves with is our children's choices in music, clothes and other cultural and social behaviors.

Sondra Shapiro is the executive editor of the Fifty Plus Advocate. Email her at sshapiro@fiftyplusadvocate.com. Follow her online at www.facebook.com/fiftyplusadvocate, www.twitter.com/shapiro50plus or www.fiftyplusadvocate.com.

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**
advocate
131 Lincoln St., Worcester, MA 01605

U.S. on track for narrowest budget gap since 2008

WASHINGTON — The U.S. government ran a big surplus in April, thanks to a flood of tax payments that helped keep the budget on track for the lowest annual deficit in six years.

The Treasury Department said that April's surplus totaled \$106.9 billion, down slightly from last April's \$112.9 billion surplus. The government typically runs a surplus during April, when individual tax returns are due and corporations make quarterly tax payments.

Through the first seven months of the 2014 budget year, which began Oct. 1, the deficit totals were \$306.4 billion. That's down 37 percent from the same period last year.

The Congressional Budget Office (CBO) is forecasting a deficit of \$492 billion for the full budget year. That would be the narrowest gap since 2008.

In 2008, the government recorded a deficit of \$458.6 billion, which was the deficit up to that time. But that record was soon eclipsed as the government ran annual deficits surpassing \$1 trillion for the next four years. Those deficits reflected a deep recession. The downturn reduced tax revenue and increased government spending to stabilize the financial system and pay benefits for people who had lost jobs.

So far this budget year, revenue totals \$1.74 trillion, up 8.2 percent from the same period in 2013. Revenue has been boosted by a stronger economy, which means more people working and paying taxes, thereby reducing the deficit.

Government spending totals \$1.6 trillion, down 8.2 percent from a year ago. The decline reflects efforts by Congress and the administration to trim spending.

After peaking at \$1.4 trillion in 2009,

the deficit has been falling. Last year, it dropped to \$680.2 billion.

Over the next decade, CBO is projecting that the deficits will total \$7.6 trillion, \$286 billion less than it projected in February. The biggest factor in the improvement is \$165 billion less in projected spending on health insurance subsidies for policies sold through exchanges created by the Affordable Care Act. Those policies are proving less costly than CBO originally thought, mainly because of tighter management of treatment options.

The CBO is forecasting that the deficit will fall to \$469 billion in 2015, before rising again and topping \$1 trillion annually starting in 2023. Spending on the government's major benefit programs, including Social Security and Medicare, as baby boomers retire, will drive the increases.

Republicans have accused Obama of failing to propose significant cost-cutting measures to reduce soaring entitlement costs. Democrats counter that Republicans would rather impose sharp cuts on necessary government programs than impose higher taxes on the wealthy.

Neither side is expected to make major concessions in this congressional election year. But the budget wars of the past three years are likely to subside this year after an agreement was reached in December on the broad outlines for spending over the next two years. The agreement will allow Washington to avoid the showdowns that culminated in October's 16-day partial shutdown of the government.

The cease-fire in the budget wars also includes legislation that will suspend the government's borrowing limit through March 15 of next year. The puts off another battle over raising the debt ceiling until a new Congress takes office in January. — AP

Government hikes Medicare Advantage pay estimate

The government has raised its payment estimate for Medicare Advantage plans months ahead of a busy election season during which cuts to the program promise to be a key focus for politicians and voters.

The Centers for Medicare and Medicaid Services (CMS) said that 2015 payments to the plans should increase less than 1 percent overall. That compares to a drop of nearly 2 percent that the government forecast in February.

Analysts expect actual funding to fall when many other variables are considered. But the drop shouldn't be as steep as they initially forecast.

This might lead to fewer changes for the plans, which serve nearly 16 million people, or about 30 percent of all Medicare beneficiaries. The government has squeezed rates for the past few years in part to help fund the health care overhaul. Insurers that run the plans say they've had to trim benefits, drop doctors and leave markets as a result.

"It's a good day for (the) plans," said Matthew Eyles, an analyst at market research firm Avalere Health.

Medicare Advantage plans are privately run versions of the government's Medicare program for the elderly and disabled people. The government subsidizes the coverage, and insurers generally offer dozens of different plans in every market. Many come with extras like dental and vision coverage that are not available with standard Medicare.

The government has paid insurers who run Medicare Advantage plans more per enrollee than the cost of care for people with traditional Medicare coverage. But that is being scaled back in part to help pay for the overhaul, the massive federal law that aims to provide insurance for millions of uninsured people.

The government is still scaling back funding for the coverage, but it also made some adjustments to how plans are compensated for the health status of their enrollees, Eyles said. — AP

Do You Want FREE HOUSING INFORMATION mailed to you?

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.



Affordable 55+ Apartments:

- ☐ Lincoln Village - Worcester



Assisted Living Facilities:

- ☐ Eisenberg Assisted Living - Worcester



Rest Homes:

- ☐ Dodge Park - Rest Home, Worcester



Subsidized Apartments:

- ☐ Bet Shalom - Worcester
- ☐ Colony Retirement - Worcester
- ☐ Emanuel Village - Worcester
- ☐ Green Hill Towers - Worcester
- ☐ Illyrian Gardens - Worcester
- ☐ Village @ Ascension Heights - Worcester



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-2

Dieters move past calories, food makers follow

By Candice Choi

NEW YORK —

Obsessing over calories alone is becoming passé.

The calorie counting that defined dieting for so long is giving way to other considerations, like the promise of more fiber or natural ingredients. That is chipping away at the popularity of products like Diet Coke, Lean Cuisine and Special K, which became weight-watching staples primarily by stripping calories from people's favorite foods.

Part of the problem: "Low-calorie" foods make people feel deprived. People now want to lose weight while still feeling satisfied. And they want to do it without foods they consider processed.

Kelly Pill has been dieting since her son was born more than 30 years ago. But the 54-year-old resident of Covina, Calif., made changes to her approach in recent years. She doesn't eat Lean Cuisine microwavable meals as often because she doesn't find them that filling. She also switched to Greek yogurt last year to get more protein.

"Regular yogurt is really thin," Pill said. "It was low in calories, but it wasn't filling."

It's not that people don't care about calories anymore. Nutrition experts still say weight loss comes down to burning more calories than you eat.

But dieters are sick of foods that provide only fleeting satisfaction and seem to make them hungrier. The new thinking is that eating foods with more protein or fat will make dieters less likely to binge later, even if they're higher in calories.

"People are recognizing that it's not enough to just go on a diet and lose weight. Nutrition comes more into play," said Margo Wootan, director of nutrition policy at the Center for Science in the Public Interest, a health advocacy group.

Many top brands are trying to keep up with the trend:

- Special K cereal's sales are down 7 percent in the past two years, according to IRI, a market research firm based in Chicago. Kellogg last year rolled out "Special K Nourish" hot cereals that tout a blend of grains such as quinoa and barley. A Kellogg executive noted at the time that people are looking for nutritional benefits rather than just reduced calories.

- Nestlé's Lean Cuisine saw a 27 percent drop in sales in the past four years, according to IRI. So, the company introduced an "Honestly Good" line that boasts of natural ingredients and offers more gener-

ous servings at about 390 calories per box, rather than the 300 calories for regular Lean Cuisine meals.

- Both Diet Coke and Diet Pepsi saw sales volume fall by nearly 7 percent last year, according to the industry tracker Beverage Digest. That was steeper than declines for their full-calorie counterparts.



Executives at Coca-Cola Co. and PepsiCo Inc. blame customers' move away from artificial sweeteners and say they're working on sodas using natural low-calorie sweeteners. The drinks are likely to have more calories than traditional diet sodas, but the thinking is that people will accept the tradeoff to avoid artificial ingredients.

- Weight Watchers updated its famous "Points" system in 2010 to consider the protein content of food. It also introduced a "Simply Filling" option that lets people eat from a list of "power foods" without counting points.

"We know that while calories are calories, how satisfied you are with eating those calories makes a difference," said Karen Miller-Kovach, chief scientific officer at Weight Watchers.

Perhaps most emblematic of calorie counts as a marketing gimmick are the 100-calorie snacks that flooded the market a decade ago. Some food companies are retreating from the strategy.

In the past four years, sales of 100-calorie snack packs of Oreos have plummeted 72 percent, according to IRI. Parent company Mondelez International Inc. also has pruned varieties from its 100-calorie lineup and now offers only four.

Mondelez spokesman Richard Buino said the company is focusing on healthy snacks that are about "more than an arbitrary calorie amount."

Frito-Lay also made its last shipment of 100-calorie pack Cheetos and Doritos this past summer. The chipmaker's new "ready-to-go" packs still have about 100 calories, but the trait is no longer advertised on the bag's front.

The sales declines for diet brands are a reminder that what's in vogue today may also eventually be seen as marketing gimmicks.

In fact, Miller-Kovach of Weight Watchers points to a pitfall: The belief that a food is wholesome is sometimes used to justify eating too much, she said — in other words, consuming too many calories.

"Just because something is simple doesn't mean it's going to give you your desired weight loss," she said. — AP



Do you have difficulty hearing?

Hear to your full potential and visit the **Worcester State University Speech-Language-Hearing Center.**

Our licensed and certified audiologists provide hearing evaluations, hearing aids, hearing aid services and communication therapy at an affordable cost to the community.

Call **508-929-8055** to make your appointment today. Convenient early morning and evening appointments are available.

➔ www.worcester.edu/hearing



**WORCESTER
STATE
UNIVERSITY**

Speech-Language-Hearing Center - Ghosh Science and Technology Center, Room 115 - 486 Chandler Street, Worcester, MA 01602

Hawthorne Hill Elderly Housing

Phase I & II • 106 Main Street, Rutland, MA 01543



**Bright & airy one
bedroom units,
both subsidized
and non-subsidized.**

Elderly & disabled rental units.

"62 years of age or older,
handicap/disabled regardless of age."

Eligible tenants pay 30% of monthly income.

HUD Section 8 Subsidy and USDA/RD Rental Assistance.

To obtain applications, please call Brenda
at **508-886-6920 • TDD 1-800-439-2370**

Laundry Facilities • Community Rooms • Accessible Units

"This institution is an equal opportunity provider and employer"



Overtreating Medicare patients may cost billions

CHICAGO —

A new study suggests that in a single year, up to 42 percent of Medicare patients got at least one medical procedure they didn't need — overtreatment that cost as much as \$8 billion.

The treatments included prostate cancer screening for men beyond the age most experts recommend, and imaging tests in older women for osteoporosis at too frequent intervals. The treatments also included invasive heart and kidney procedures that research has shown are no better than medicine, and potentially more risky.

What's new: The findings are in an analysis of Medicare claims data for 1.3 million patients in 2009. The researchers devised a list of 26 "low-value" procedures they determined reflect likely overuse. The list was compiled from research evidence and recommendations from several medical groups.

Lead author Aaron Schwartz of Harvard Medical School's health care policy department and colleagues acknowledged that Medicare claims may lack details about patients that might justify some procedures. But using more conservative

Doctors get paid more for ordering more procedures. And fear of malpractice lawsuits is also often cited as contributing to overtreatment.

criteria, they still found that 25 percent of patients received at least one wasteful service, totaling almost \$2 billion.

The results are only a snapshot and the researchers said there are likely many other procedures that are sometimes performed with little benefit for Medicare patients.

The context: A 2012 Institute of Medicine report on overall U.S. health spending concluded that about 30 percent, or \$750 billion, reflects overtreatment, excessive costs and other problems.

The new study also follows the government's release recently of Medicare billing records for 880,000 physicians and other health care providers, data that consumer advocates and others said might indicate whether some doctors are providing quality cost-effective care or ordering needless services. That data revealed vast differences in Medicare payments, and an agency administrator said Medicare would look into doctors and others who received huge reimbursements, which could suggest overtreatment.

Reasons and reactions: The authors said it's not clear why doctors may be ordering needless services, but that sometimes patients may demand procedures they mistakenly think will benefit them.

Doctors also get paid more for ordering more procedures. And fear of malpractice lawsuits is also often cited as contributing to overtreatment.

Policymakers, doctors and patients themselves should pay attention to the results, the researchers said.

Patients should know they can question their doctors about which procedures are really necessary and whether less invasive and less costly options are available. — AP

Medicare fraud sweep nets 90 arrests across United States

MIAMI —

The latest Medicare fraud sweep has netted 90 arrests in six cities involving false billings to the health care program of an estimated \$260 million.

Miami U.S. Attorney Wifredo Ferrer said more than half of the arrests were in South Florida, long the nation's leader in health care fraud. Arrests were also made in Houston, Detroit, Los Angeles, Brooklyn and Tampa, Florida.

Among those arrested were 27 health professionals, including 16 doctors, as well as some Medicare beneficiaries who authorities say sell their entitlement to the highest bidders. Another emerging fraud trend is misuse of Medicare's prescription drug benefit through shady pharmacies.

"They each tried to use the Medicare program as their own personal ATM," Ferrer told reporters. "This is unacceptable."

Since 2007, Medicare Fraud Strike Force teams in nine cities have brought charges against about 1,900 people who falsely billed the taxpayer-funded program more than \$6 billion.

The Department of Health and Human Services (HHS), meanwhile, has temporarily halted enrollment of providers considered high-risk in five locations and removed 17,000 providers from the Medicare program since 2011, HHS officials said.

David O'Neil, acting chief of the U.S. Justice Department's criminal division, said authorities are using HHS billing data to identify patterns that lead to Medicare fraudsters, as well as traditional law enforcement techniques such as telephone wiretaps, undercover officers and hidden cameras.

"We will bring to justice those who loot our nation's health care funds, and we will recover what has been stolen," O'Neil said. — AP

"Country Living in the City."



1 bedroom and efficiency affordable HUD subsidized apartments. Rent is 30% of adjusted income. Heat and utilities included. 62 years or older or disabled.

Professionally managed by Barkan Management Company.

For an application or an appointment call 508-753-7217.

ILLYRIAN GARDENS, Inc.

545 Salisbury Street, Worcester, MA 01609



Waiting List Now Open!

Come see us first...



EMANUEL VILLAGE
apartments offer affordable senior living to persons who are 62 and older or mobility impaired.

We offer studio, one-bedroom and mobility impaired accessible apartments.

Applications being accepted for income eligible seniors and/or mobility impaired adults. HUD subsidized
Includes all utilities and free parking. Near bus line and shopping.



A program of
Lutheran Social
Services of NE

EMANUEL VILLAGE
59 Evelyn St., Worcester, MA 01607
508-753-7474 • www.lssne.org



2 percent of Americans have new hips, knees

By Marilyn Marchione

It's not just grandma with a new hip and your uncle with a new knee. More than two of every 100 Americans now have an artificial joint, doctors are reporting.

Among those over 50, it's even more common: Five percent have replaced a knee and more than 2 percent, a hip.

Surgery is not for people who haven't first tried exercise, medicines and weight loss.

— Dr. Joshua Jacobs

"They are remarkable numbers," said Dr. Daniel J. Berry, chairman of orthopedic surgery at the Mayo Clinic. Roughly 7 million people in the United States are living with a total hip or knee replacement.

He led the first major study to estimate how prevalent these procedures have become, using federal databases on surgeries and life expectancy trends.

More than 600,000 knees and about 400,000 hips are replaced in the U.S. each year. But until now, there haven't been good numbers on how many people currently are living with new joints. The number is expected to grow as the population ages, raising questions about cost, how long the new parts will last, and how best to replace the replacements as they wear out over time.

Why the boom?

"People are aware that they're a success" and are less willing to put up with painful joints, Berry said.

The term "replacement" is a little misleading, said Dr. Joshua Jacobs, chairman of orthopedic surgery at Rush University Medical Center in Chicago and president of the American Academy of Orthopaedic Surgeons. What's replaced is the surface of a joint after cartilage has worn away, leaving bone rubbing against bone and causing pain and less mobility.

In a replacement operation, the ends of bones are removed or resurfaced and replaced with plastic, ceramic or metal materials.

Arthritis is the main reason for these operations, followed by obesity, which adds stress on knees and hips. Baby boomers are wearing out joints by playing sports and doing other activities to avoid obesity. Knee replacement surgeries have more than tripled in the 45-to-64 age group over the last decade, and nearly half of hip replacements now are in people under 65, federal numbers show.

"It's not for anybody who has pain in the joint," Berry warned. Surgery won't help people with pain and stiffness from arthritis, but whose joints are not damaged, said Berry, who gets royalties from certain hip and knee implants.

Surgery also is not for people who haven't first tried exercise, medicines and weight loss, Jacobs said.

But for a growing number of people, it can mean a big improvement in quality

of life. Mary Ann Tuft, 79, who owns an executive search firm, said her right knee was painful for a decade before she had it replaced in 2005.

"I live in downtown Chicago and take a lot of walks along the beach. I could barely walk a block" by the time the operation was done, she said. "I'm very social, but I found I would avoid going to cocktail receptions where you had to stand a long time."

She felt better right from the beginning after the operation. "You don't even know you have it in there, which is amazing," she said.

Cynthia Brabbit, a dental hygienist from Winona, Minn., had hip replacement in 2007 when she was 52. She developed hip problems in her 20s that distorted her gait and even caused one leg to grow longer than the other.

"I was running marathons, doing half marathons, playing tennis," but the problem grew so bad she couldn't even walk more than half a mile, she said.

"Now I can walk a hour a day," Brabbit said. She is training for a 100-mile bike ride this summer. "What a world of difference."

Not all patients have fared as well, though. Implant recalls and big patient lawsuits show the danger when a device is flawed.

Last June, Stryker Corp. recalled certain hip implant products because of corrosion and other problems. Recently, another device maker, Biomet, agreed to pay at least \$200,000 each to hundreds of people who received artificial hips that were later replaced.

And in November, Johnson & Johnson agreed to pay \$2.5 billion to settle roughly 8,000 patients' lawsuits over an all-metal hip implant it pulled from the market in 2010.

Even good implants can fail over time — about 1 percent or fewer fail

each year. After 10 years, more than 90 percent of them are still functioning, Jacobs and Berry said.

It costs about \$20,000 for a knee or hip replacement, but a recent study suggests they save those who receive them in the long term, because they reduce lost work days and improve mobility.

"There's a cost for not doing the procedure," Jacobs said.

To help a joint replacement succeed and last, doctors recommend doing physical therapy to strengthen bones, muscles and the new joint. Other tips include maintaining a healthy weight, cross training so you don't overdo one type of activity or sport, spending more time warming up and letting muscles and joints recover between workouts. — AP



Bet Shalom / Apartments

Bet Shalom Apartments is an attractive subsidized complex dedicated to serving 62 years of age and older as well as mobility impaired of any age. It is located at 475 Chandler Street in Worcester, Mass. The property has 95 one-bedroom apartments. Several units are barrier free with easy access for the mobility impaired.

All units include the following:

- Central heating
- Stove and refrigerator
- Electricity and Air conditioning
- Emergency pull chords
- Wall to wall carpeting
- On-site parking.

In addition, the property has one laundry room with economical card-operated machines and one community room for use by residents. There is 24-hour emergency maintenance service and the maintenance superintendent lives on site. There is also a management office located on site.

Call the office today @ 508 791-1188 to receive your application.

Professionally Managed by Barkan Management Company.



"Currently a smoke free community!"

Welcome Home to Affordable 1 & 2 Bedroom Apartments



COMMUNITY AMENITIES INCLUDE:

- Heat and Hot Water
- Off Street Parking
- 24 Hour Maintenance
- Computer Center • Fitness Room
- Library • Sewing Center
- On-site Laundry Facilities
- Weekly Shopping Bus
- Social Activities for Residents

Please call 508-756-3594 for an application TDD (800)439-0183

Must income qualify. 55 years or older, disabled/handicap regardless of age.

Coes Pond Village

39 First Street, Worcester, MA 01602



Treat the Cause of Dry Eyes Not Just the Symptoms.



Ask Dr. Keamy about *LipiFlow* by Tear Science.



JEAN E. KEAMY, MD

Keamy Eye & Laser Centre is the first dry eye center in Worcester County to offer this innovative treatment for Dry Eyes.

**Call 508.835.87333 to see
if LipiFlow is right for you.**

KEAMY 
Eye & Laser Centre

24 Lyman St., Suite 130, Westborough, MA 01581
508.836.8733

www.drkeamy.com

Like us on
facebook

PRIVATE HOME CARE WHEN YOU NEED IT!

*Allows you
to stay in the
comfort of your
own home.*



BrightStar Care® improves the quality of life of those entrusted to our care.

- › Caregivers
- › Companions live-in/out
- › Available to you 24/7
- › Skilled nursing care
- › Certified Nursing Assistants
- › Licensed, bonded & insured
- › Meal preparation
- › Light housekeeping
- › Errands, shopping & transportation
- › Bathing assistance
- › Medication management

Please Call Us!
508 282 5020


BrightStar®
MAKING MORE POSSIBLE
LIFECARE

www.brightstarcare.com

Locally owned and operated · Serving all of Worcester County



*“State of the Art
Healthcare
Environment”*

We offer:

- Long-term and short-term care
- Ancillary Services:
dental, eye, podiatry provided at
the nursing center.

- Respite and Hospice Care
- PT/OT/ST Rehab services; 7 days a week
- Full time Physician Assistant
- Continuing care community

- Restaurant-style dining room
- Bright and airy rooms
- Cable TV and telephones available in each room
- Resident computer with free access to internet
- Pet therapy through Tufts Veterinary Program

Schedule a
tour today
call 508-853-6910

**Knollwood
Nursing Center**
YOUR PARTNERS IN CARE

“A part of Briarwood Continuing Care Retirement Community”

87 Briarwood Circle, Worcester, MA 01606

508-853-6910

www.knollwoodnursingcenter.com

New sleep aid procedure now available locally

By Brian Goslow

NORTH ANDOVER —

Dr. Steven J. Rinaldi, owner of Andover Smiles and a practicing dentist for almost 30 years, has used different devices in assisting patients suffering from sleep apnea, the not-so-silent health problem that affects 20 million people nationwide, most of whom have no idea that it's not only keeping them — and sometimes their partner — from getting a good night's rest, but could also threaten their lives.

Thanks to a new computer program, Rinaldi can now provide a truer diagnosis of those potentially suffering from sleep apnea.

"Apnea, by definition, is lack of oxygen, so when you're sleeping and breathing, there's no air getting in and getting to vital organs," Rinaldi said. "People who have apnea, it's not only that the chances of heart attacks and strokes and diabetes are increased because of the apnea, (they're affected) on a daily basis — they're tired, suffer memory loss and irritability and they're moody."

Thanks to a new computer program, Rinaldi can now provide a truer diagnosis of those potentially suffering from sleep apnea, a common disorder in which there are pauses in breathing or shallow breaths during sleep. The episodes can last from a few seconds to minutes and may occur 30 times or more an hour, according to the United States Department of Health & Human Services. Typically, normal breathing then starts again, sometimes with a loud snort or choking sound.

Disruptive loud snoring and sleep apnea are frequently confused, but they're not

the same thing — and it's crucial to know the difference. "Seventy percent of the people who snore have sleep apnea; so 30 percent, they just snore and there's no apnea," Rinaldi said. "If it's just snoring, no big deal. You can deal with the social things."

While sleep apnea is a medical condition, typically, dentists are the professionals who treat it. As part of the intake process at Rinaldi's practice, patients fill out a screening form that asks whether they suffer from a sleep disorder. If they have difficulty sleeping and the symptoms suggest they're possibly suffering from sleep apnea, Rinaldi suggests they return for a free consultation on available options to treat it.

Patients' breathing patterns are measured by an EccoVision computer program through sound waves sent into the windpipe to determine the size of the person's air way and whether that air way, during the breathing and exhale process, collapses, getting smaller and allowing less air to get through, which causes apnea.

In the past, sleep studies had to be conducted at a study facility. Now, Rinaldi is able to provide patients with the Apnea Risk Evaluation System (ARES), which they take home and wear overnight. They're instructed to remove anything that could disrupt their sleep patterns during the night, such as TV or loud noises.

"It has different attachments that measure your heart rate, your breathing rate, how many times you stop breathing — so how many episodes there are per night, where basically, oxygen's not getting through and how long that occurs," Rinaldi said. "Each time it occurs, there's that lack of oxygen going to the heart and into the brain."

The patient returns to his office the

watermarkmedical + Innovative Technology

ARES™
UNICORDER

Convenient
Accurate
Cost - Effective
Patient Friendly



following day and Rinaldi downloads the recorded information onto his computer, where it's then forwarded to sleep physicians who make the diagnosis.

If the person does in fact have apnea and chooses to treat the problem, Rinaldi will test and fit him or her for an FDA- and American-Academy-of-Sleep-Medicine-approved appliance intended to reposition the jaw in a way that allows the most air to enter the windpipe and reduce the apnea, resulting in a better night of sleep.

"We're doing it with all these different sizes and when you find the location where most of the air is getting in, that's where you take the impressions and the bite to make these actual appliances," he said.

It can take up to three weeks to get used to wearing the new appliance, Rinaldi said, "because it's opening the jaw, the jaw's being moved forward, so the facial muscles have to get used to it."

Being able to offer the service is professionally satisfying, Rinaldi said, because he's changing and improving lives doing it. "If they're sleeping better because of an apnea appliance, their life is better, which from my end, is rewarding and satisfying."

Dr. Steven J. Rinaldi can be reached at Andover Smiles by calling 978-475-9141 or

by email at steve@andoversmiles.com; for more details on a free snoring or sleep apnea consultation, please visit sleepapneasnorringma.com.

This article is one of a series that appears monthly in the Fifty Plus Advocate outlining solutions to many problems mature adults face. If you feel your business would like to participate in this series, call Reva Capellari at 508-752-2512, ext. 5. Archives of articles from previous months can be found at www.fiftyplusadvocate.com.



Rinaldi



Free Scratch Removal

(\$30 value)

with interior and exterior package!

- Hand Washing/Waxing
- Interior Cleaning
- Interior Shampooing
- Dent and Scratch Removal



TWO LOCATIONS

3 Union St., Westboro **508-366-6260**
(near Westboro Rotary)

Brosnihan Sq., Worcester **508-755-5250**

HADDAD
Auto Detail
SINCE 1978

Visit www.haddadautodetail.com for more info and prices.

Support our ADVERTISERS



Please let them know you saw their ad in the

fifty plus
advocate

Thank you in advance for your help!



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 LivingCenter – Attleboro

27 George Street
Attleboro, MA 02703

Golden LivingCenter - Chetwynde

1650 Washington Street
West Newton, MA 02465

Golden LivingCenter – Cohasset

1 Chief Justice Cushing Hwy
Cohasset, MA 02025

Golden LivingCenter – Dedham

1007 East Street
Dedham, MA 02026

Golden LivingCenter - Dexter House

120 Main Street
Malden, MA 02148

Golden LivingCenter - Elmhurst

743 Main Street
Melrose, MA 02176

Golden LivingCenter – Garden Place

193 Pleasant Street
Attleboro, MA 02703

Golden LivingCenter - Heathwood

188 Florence Street
Chestnut Hill, MA 02467

Golden LivingCenter - Lexington

840 Emerson Garden Road
Lexington, MA 02420

Golden LivingCenter – Oak Hill

76 North Street
Middleboro, MA 02346

Golden LivingCenter - Melrose

40 Martin Street
Melrose, MA 02176

Golden LivingCenter – Norwood

460 Washington Street
Norwood, MA 02062

Golden LivingCenter – Plymouth

19 Obery Street
Plymouth, MA 02360

Golden LivingCenter – Wedgemere

146 Dean Street
Taunton, MA 02780

Golden LivingCenter - West Newton

25 Amory Street
West Newton, MA 02465



We are here for you seven days per week.

DIRECTCONNECT
POWERED BY GOLDEN LIVINGCENTERS

Call Golden LivingCenters' for more information.

Toll free: 888-243-4646

Fax: 479-478-2588

directconnect-boston@goldenliving.com



This facility welcomes all persons in need of its services and does not discriminate on the basis of age, disability, race, color, national origin, ancestry, religion, gender, sexual orientation or source of payment.
GLS-09894-12 D033

Savannah lives through stories, history

By Sondra Shapiro

Savannah may conjure thoughts of John Berendt's 1994 book and subsequent movie, *Midnight in the Garden of Good and Evil*, about a murder that took place in the Mercer House.

While the book captured the atmosphere — eccentric characters, breathtaking architecture, oozing with drama, history and charm — a visit provided context and substance.

"The dead are very much with us in Savannah. Everywhere you look there is a reminder of things that were, people who lived. We are keenly aware of our past," uttered a character in Berendt's book.

Indeed, the spirit of James Oglethorpe, who founded what is America's first planned city, was ever present as we navigated architecturally rich streets, anchored by pastoral squares. If the book represents anything, it shows how Savannah inspires storytelling. To that end, my husband and I joined a few walking tours.

Savannah Dan provided a colorful, easy to digest version of Savannah history. Architectural Savannah, led by Jonathan Stalcup, a graduate with a master's degree from Savannah College of Art and Design, conveyed a deep knowledge of architecture and history bringing the city to life. Finally, since Savannah is purported to be the most haunted city in the country, we enlisted spirit guide, Andee Higgins, of Blue Orb, who enlightened us with the stories behind some of Savannah's famous haunts.

A theme began to emerge among our guides that all Oglethorpe accomplished would have been lost had it not been for a group of concerned women in the 1950s, who single-handedly saved historic structures from the wrecking ball, and a restoration movement in the 1970s. The efforts of conservationists helped save more than 1,200 of Savannah's stately homes that had fallen on hard times.

We learned about how the invention of the Cotton Gin in 1793 helped revive an economically struggling community. We heard many tales surrounding the three-day visit to the city in 1825 by Marquis de Lafayette, who had fought at George Washington's side. And we were privy to divergent opinions of the life-long friendship between Civil War General William Sherman and Savannah businessman Charles Green, who lent his Gothic Revival mansion to the general to use as his headquarters, believing the goodwill gesture would save the city from



Savannah Dan

(photos by david budnik)

moss, serene squares rich with greenery and monuments that were true works of art.

We started our first day with Savannah Dan, a self-proclaimed "Southern gentleman" wearing a seersucker suit and wide-brim hat, who greets his group in Johnson Square. It is here that we first heard the name Oglethorpe and learned of his utopian ideals that helped create the city in 1733. King George II granted a charter for the colony to primarily act as a buffer zone protecting South Carolina from the advances of Spanish-owned Florida.

Oglethorpe allowed citizens to worship as they pleased — though no Catholics were allowed — and rum, law-yers and slavery were forbidden (for a time).

As our affable guide walked us through seven squares, we heard colorful renditions of historical milestones, folklore and some pop culture references.

Stalcup's architecture tour, which covered the city's founding to the present, included many easily overlooked but important details. Our guide walked us through all the architectural periods in chronological order.

With his gift of making history and architecture easily digestible, the two hours flew by. Stalcup spoke of Oglethorpe's idealistic vision for the colony and its original four squares, Johnson, Percival (now Wright), Ellis and St.

destruction. Sherman spared the city and bestowed it upon President Lincoln for Christmas.

Though the city offers many hop-on, hop-off trolley tours, the 2.5 square mile area, comprised of 22 squares, was easily walkable, allowing us to bask in the lushness of massive live oak trees dripping with Spanish

James (now Telfair). As the city grew, it added more squares. At its peak, there were 24.

We learned how war, commerce, worldwide archeological expeditions, transportation methods and active burial grounds influenced architecture.

Lost among stately brick and stucco mansions, the unassuming 1760 Christian Camphor house is the oldest surviving home in Savannah. Only the upper wooden portion of the home is original.

The earliest structures had a raised basement and two full floors — bedrooms on the top floor and public areas such as dining and parlors on the first floor. Service areas — kitchen and laundry — were in the basement. Because streets were mostly made of sand, raised basements were the norm and helped protect the home from swirling dust and stench.

Stalcup's admiration for the city's first architect, British transplant William Jay, was evident as he spoke of the construction of the English Regency, Owens-Thomas House, circa 1819. The mansion — which features one of the earliest, urban slave quarters in the South, indoor plumbing and striking architectural elements — was Jay's first major commission in Savannah.

Haunted tours seem de rigueur after dark, as a profusion of hearses crammed with exuberant ghost hunters hit the streets. Our method of investigation began by foot at 10 p.m. as Higgins led our group of 15 through neighborhoods seemingly filled with ghosts. Even the local CVS is purported to be haunted. Needless to say, we fought the urge to check under the bed before retiring for the night.

We saved our visit to the Mercer-Williams House for last. As typical of our visit, the presence of the dead seemed to linger. We expected that Jim Williams, the only person in Georgia ever to be tried four times for the same crime — the murder of his assistant, Danny Hansford, on May 2, 1981 — would appear as we meandered from room to room to gaze upon priceless furniture, paintings and accessories.

If you go ...

Visit Savannah, www.visit-savannah.com; Savannah Dan, 912.398.3777, www.savannahdan.com; Architectural Savannah, 912-604-6354, www.architecturalsavannah.com; Blue Orb Tours, 912-665-4258, www.blueorbtours.com.



Stalcup talks about the Owens-Thomas House.

Our adult day care is there for you.

- Supervised care up to 12 hours per day. More affordable than any other care option.
- The day club allows members to spend the day in a comfortable, stimulating environment.
- Perfect for working caregivers or to give you a respite from caregiving.
- Memory impaired welcome.
- Daily Activities Include: *Exercise, Music, Art and Intergenerational Programs, among others.*
- Meals included.
- You can choose a schedule that fits your lifestyle; 1 day or as many as 7 days a week.
- Transportation in our safe van or handicap bus is available.



"Caring for your family members since 1967."

THE ADULT DAY CLUB at Dodge Park

101 Randolph Road, Worcester, MA • www.dodgepark.com

Call Ben or Mike at 508-853-8180 for a free, no obligation tour.

DAY CLUB AVAILABLE 7AM - 7PM, SEVEN DAYS A WEEK. YOU CHOOSE ONLY THE HOURS YOU WANT!

LET OUR FAMILY TAKE CARE OF YOUR FAMILY

As a family-owned and operated company, we understand just how important it is for family members to find the best quality home care for a loved one needing assistance. Caring for your loved one with personal attention, compassion and trusted caregivers is our highest priority.

IN-HOME CARE SERVICES

- Home Health Aides / Personal Care
- Homemakers / Companions
- Meal Preparation / Medication Reminders
- Live-in Care / 24-Hour Care
- Dementia / Alzheimer's Care
- Nursing Care / Caregiver Respite

Contact us for a
Complimentary Assessment
508.556.5555

info@associatedhomecare.com
www.associatedhomecare.com



Fully bonded and insured
Long-term insurance accepted

Serving over 100 communities.

Serving Central
Massachusetts
with offices in
Worcester and
Leominster.

BEVERLY • BOSTON • BURLINGTON • LEOMINSTER • LYNN • MARBLEHEAD • NORTH ANDOVER • SPRINGFIELD • WORCESTER



Subsidized senior housing with a meal program option that makes us different!



Colony Retirement Home III is
congregate housing for seniors. Enjoy
nutritious "Home Cooked Meals," served
in our attractive dining room with your
neighbors and friends.



COLONY RETIREMENT HOMES III : Congregate Housing
101 Chadwick Street, Worcester
(508) 755-0444



All apartments at Colony Retirement
Homes receive rental assistance
through the HUD section 8 program.
Rent is 30% of your adjusted monthly
income. Rent includes all utilities
except phone and cable TV.

Call Monday thru Friday,
9am to 5 pm for more information.

Colony Retirement Homes I are
garden style studio apartments, located in
a country-like setting. A short walk takes
you to shopping centers, banks, restaurants
and the bus line. A little bit of the country
adjacent to the city.



COLONY RETIREMENT HOMES INC. I
485 Grove Street, Worcester
(508) 852-5285



COLONY RETIREMENT HOMES

Worcester, MA Not For Profit Corporation www.colonyretirementhomes.com



Retirees help caregivers cope with hospital stays

By Lauran Neergaard

WASHINGTON —

Edwin Pacheco was in and out of the hospital for months. He'd survived one organ transplant and desperately needed another. But he wasn't the only one suffering. Few people asked how his wife was holding up as she kept vigil, cornered hard-to-understand doctors and held job and family together.

"Everybody was like, 'Oh, you're a good caregiver.' But inside, I'm dying," Minerva Pacheco of New York recalled of those tumultuous days.

Then one day in the intensive care waiting room at Montefiore Medical Center, a pair of strangers introduced themselves as volunteer coaches for caregivers and offered a shoulder. It's part of an unusual program that recruits retirees and specially trains them to help overwhelmed family members cope with a scary hospital stay — for their own health, and so they can better care for their loved one.

"The caregiver needs to be taken care of, too," said Montefiore coach Dave Wolfe, a retired high school guidance counselor who spotted Pacheco's distress. "If they're sick, or they break down, feel helpless or

hopeless, they're not going to be too helpful to the patient."

The coaches offer more than emotional support and a sympathetic ear. They're trained to help people navigate a complex hospital system and to help them locate community resources that may ease the strain, too.



They can track down a doctor to answer a caregiver's questions. Or find someone to translate all the medical jargon. Or alert a professional to signs of depression. Or gently probe about just how prepared the family really is for continuing care at home: Are they comfortable giving injections, or cleaning a wound — or might they need some more planning with the discharge team?

Today's caregivers "are being asked to do

a lot of things they're really not equipped to do," said social worker Randi Kaplan, who directs the Montefiore Caregiver Support Center. The program evolved as the hospital realized, "we're ignoring a very, very overstressed population."

Millions of Americans regularly care for older or impaired adult relatives or friends, and a hospitalization only adds to the stress. Yet research shows that patients who have supportive care from family or friends during a hospitalization fare better.

"You don't eat right, you don't sleep right," said Pacheco, who hadn't known she could seek help for herself as her husband worsened between his first transplant in December 2012 and the one that finally restored his health last summer. "You're scared to ask what's next."

Families need an advocate, said Dr. Paul Levin, Montefiore's vice chairman of orthopedic surgery, who tells the volunteer coaches, and medical students, how caregivers can get lost in the shuffle.

Years ago, Levin's oldest daughter had a roller-blading accident and was run over by a bus, suffering life-threatening injuries while at college hundreds of miles from home. In a hospital where he knew no one, even Levin had a hard time cornering doctors, got conflicting reports and once watched his daughter wheeled off to deal with a dangerous complication without any

explanation.

"I'm a trauma specialist who knows the system, knew the questions to ask, but I couldn't get a straight answer," Levin said.

Many hospitals offer support groups for caregivers, or services from a social worker or other professional.

The volunteer coaches are different: Retirees with no background in health care undergo training to support caregivers in hopes that families will let their guard down with a peer. They make daily rounds through Montefiore's waiting rooms and nursing stations to offer the services of the support center, where families can talk with a coach or a social worker, research caregiver resources online or just relax in a quiet room.

There are no statistics on similar volunteer initiatives, but Montefiore and a handful of community hospitals have modeled programs on one at Northern Westchester Hospital in New York.

"This caregiver coach idea is very innovative," said Lynn Feinberg of AARP, who tracks efforts to help caregivers — and says too often what's missing is someone to call at a moment's notice, rather than awaiting a monthly support group meeting. "Utilizing retirees is really a win-win, to provide that basic emotional, practical support and advice."

RETIREES page 20

Caring for your memory impaired loved one!

Dodge Park Rest Home provides a unique dementia and Alzheimer's program tailored to meet your loved one's specific needs. Our home-like environment is usually at half the cost of a nursing home and with only a One (1) Year Look Back!!!*



ATTENTION VETERANS OR THEIR SURVIVING SPOUSES!

You may be entitled to monthly benefits as much as \$2,019 to help offset long-term care. Call 508-853-8180 for more information.



If your loved one's funds are ever depleted they will still be able to stay at Dodge Park*

**Subject to EAEDC approval.*

* The new Tax Reduction Act of 2005 mandated that seniors spend-down all of their combined assets before the sick spouse can qualify into a nursing home. The act requires a 5-year look back for any transfers by seniors designed to deprive the state of those available resources to pay for the nursing home. **In a Rest Home setting it is only 1 year look back!!!**

Monthly Support Groups "Open to Public"

- 1st Tuesday of every month for spouses of individuals with memory impairments.
- 2nd Tuesday of every month for children of parents with memory impairments.

- Medical Director Dr. David Weinstock
- Geriatric Psychiatrist consultant Dr. Philip Gottlieb
- 24 hour a day RN services
- Dementia specific activity program 7 days a week
- Outing and professional entertainments
- **All inclusive ADL care** at no additional charge.
- Freshly prepared meals

DODGE PARK
REST HOME AND DAY CLUB

101 Randolph Rd., Worcester, MA www.dodgepark.com
Call Ben, Mike or Carrie at 508-853-8180



Trust Us to Sell Your House or We Will Buy It!

No matter what your situation

- Downsizing
- Inherited Property
- Mom or Dad going into Assisted Living

No realty commission applies when we buy your home. We handle all repairs and clean-out!

Rely on us to help define your options, determine the best price and get results fast!

Contact David Dowd and our experienced team at Prudential Stephan Realtors now for:

Free Home Pricing Analysis and Moving Strategy

SELL
using the power of Prudential Real Estate Network, or...

We will BUY your property "as is" — all cash, no realty commission, no-clean out required!

Free Services to Help Organize, Downsize, Pack & Move
Take what you want. We handle the rest!



David J. Dowd
Founder of Sell Mom's House

Call David Today
774-696-6124
david@sellmomshouse.com

SELL MOMS HOUSE.COM
Helping Families Transition



ActiveRx
Active Aging Centers

BALANCE. STRENGTH. INDEPENDENCE.

ActiveRx provides the place, programs and people to help aging adults restore their strength and improve their function, using a PROVEN, results-driven, physical therapy and total body fitness strengthening system. We call it Strengththerapy™.

Call or visit us online to schedule your initial evaluation

Join for 12 months and receive an extra month free!

ActiveRx Westborough
Active Aging Center
24 Lyman Street, Suite 140
Westborough, MA 01581

Visit 2014.ActiveRx.com or
Call (508) 329-1163
to find out more!

You **can** Choose How You Age

ActiveRx.com

When it comes to Home Care choose Century



PLANNING TO GO FOR SURGERY SOON?
Call us to discuss post-operative care prior to hospital admission.

We also have staff who speak: Spanish, Vietnamese, Nepali, and Albanian to make servicing your family easier.



Century is nationally accredited and Medicare Certified home health agency. We offer post-surgery and disease management care to patients in their own home. Our services include:

- Skilled Nursing Care
- Post-surgery care
- Medication management (IV, injections and med planning)
- Chronic disease care (Diabetes, Hypertension)
- Home Health Aides
- Occupational Therapy
- Physical Therapy
- Speech Therapy
- Medical Social Services
- Private Duty Care

Our services are covered in full by most insurance companies including Medicare, Medicaid and most other major health insurance plans. Call today to discuss the options available for your loved one.

Our Experienced Case Managers are only a phone call away to discuss your healthcare options as the need arises. We help you find local resources, some of which may be offered free of charge. As your home care agency, we are your advocate, working hard to find the best resources that you are entitled to.

For personalized service call
Linda Belsito directly at 774-961-9871.

Main Office: 17 Converse Street, Worcester
1-888-292-1809 **www.centurycare.com**

Accredited by
Community Health
Accreditation Program



Care provider goes above and beyond the call of duty

By Marianne Delorey ©

In the *Sound of Music*, the nuns sing *How do you solve a problem like Maria?* because Maria is not well suited to life in the Abbey. In the world of elder care, I have had a similar quandary. Although I will spare you the singing, if I could give this a title, it would be, "How do you explain the solution that is Liz?"

Liz does not work for my company, but we are lucky enough that her company provides service to our residents. Liz is a home health aide. She helps get the residents out of bed, washed up and dressed for the day. She cleans their apartments, does their shopping, washes their clothes, makes sure they take their medications and gets them breakfast. This is a standard job description for a homecare worker.

What makes Liz exceptional is her ability to focus on details for each person while seeing the big picture in our building.

We joke that Liz doesn't walk through our building. When we see her, she bounces. Her unbridled energy and enthusiasm show in everything she does. She brings smiles to all of her residents, but also to the families of those she serves and to the housing staff, who know that when Liz is around, everyone is better off.

Liz pays attention to the details that



Caregiving Tips

make her clients live comfortably. She is cheerful and upbeat with people who are sometimes inclined toward depression and sadness. When someone doesn't feel like taking a shower, she tells them the temperature is just right and that "the spa" is waiting for them. She makes sure to get the soaps and moisturizers they like so that when they are done, they truly do feel better.

Liz pays attention to the details of others. When she is heading to the store for a client, she will often check on other residents who don't have caregivers to see if they need anything while she is out. When there is a bad storm and families can't come, she will pick up milk on her own time for residents so they don't try

to get out.

Liz sees the bigger picture. In her spare time, Liz writes beautiful calligraphy and posts inspirational messages for our residents on the bulletin board. She makes a point to check in with management when there is something that they need to know about. These issues can range from an overuse of the laundry machines to concern about a resident. If she sees something that needs to be done or that can become a bigger problem, she will make sure to take care of it or make sure someone else knows well in advance.

Liz also understands how her role supports the role of the family. One of her clients reported that because Liz cares for her so well, when family members visit, they actually get to spend quality time together instead of running to the store or doing housework.

As we prepare for the graying of

America, our society needs to find ways to promote and appreciate our caregivers. This appreciation needs to come not only from the elders and their families, but from society as a whole. Next time you see a caregiver in action, validate the work they do. Encourage them to pass on their skills to the next generation of elder care providers. We will need more and more people who have that perfect balance of hard work and compassion to fill the growing need for elder care workers. Let's not shortchange ourselves as we age. Let's create the Solution that is Liz.

Marianne Delorey, Ph.D. is the executive director of Colony Retirement Homes. She can be reached at 508-755-0444 or mdelorey@colonyretirement.com and www.colonyretirementhomes.com. Archives of articles from previous issues can be read at www.fiftyplusadvocate.com

Retirees

Cont. from page 18

It takes strong supervision to know the boundaries, cautioned Carol Levine of the nonprofit United Hospital Fund, which provided a startup grant to Montefiore and has created online caregiver guides.

"They are not there to be nurses or social workers," she said. Instead, the program "really treats people with respect and dignity and understanding that they're in a difficult situation."

Montefiore put its 21 volunteers through

a training course that stresses those boundaries, teaches nonjudgmental listening and lets them role-play difficult situations. The support services don't expire when the patient goes home, Kaplan said. Caregivers still can call or come in indefinitely, but there are no home visits.

Does the program make a clinical difference? The hospital has begun a pilot study comparing whether cancer patients stick with a grueling chemotherapy-and-radiation treatment better when their caregivers are coached in providing support.

Like many of the coaches, Wolffe, 69, had been a caregiver. He sought out Montefiore's

support center while his wife, Janet Lipson, was undergoing complex cancer treatment. When she recovered, the couple became volunteer coaches to give back.

Wolffe recalled a mother of three with terminal cancer whose own parents didn't understand how badly chemo sapped her strength until Lipson explained it. Later, Wolffe brought in professionals for advice on telling the young children about their mother's illness.

Mostly, Wolffe said, caregivers need to vent: "Sometimes I know I have to bite my tongue because I want to say something. But they just need me to listen." — AP

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

fifty plus
advocate.com

Over 30,000 visitors
each month!

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



Let our experts help you!



Revisiting NYC's 1964 World's Fair, 50 years later

By Beth J. Harpaz

NEW YORK —

You can just barely see them through the window of the No. 7 subway as it rattles into the elevated station in Corona, Queens: a gigantic steel sphere, two rocket ships and towers that appear to be capped by flying saucers.

These unusual landmarks are among a number of attractions still standing from the 1964 World's Fair, which opened in Flushing Meadows Corona Park 50 years ago, with marvels ranging from microwave ovens to Disney's "It's a Small World" ride to Belgian waffles with strawberries and whipped cream.

But visiting the area today is as much about 21st century Queens as it is a walk down memory lane. Many of Queens' contemporary cultural institutions — like the Queens Museum and the New York Hall of Science — grew out of fair attractions and incorporate original fair exhibits.

Other relics are stupendous in their own right, like the Unisphere, a 12-story steel globe so glorious to behold, you almost feel like you're seeing Earth from outer space. There's also a modern zoo, an antique carousel and outdoor sculptures.

Here's a guide to celebrating the 50th anniversary of the 1964 World's Fair on a visit to Queens.

The neighborhood — On weekends, Flushing Meadows Corona Park is packed with people from the dozens of ethnic groups that populate Queens, speaking many languages, eating food from around the world and playing soccer with a seriousness of purpose often found among those who grew up with the sport. That makes for "a wonderful unique experience," said Janice Melnick, Flushing Meadows Corona Park administrator.

And yet, as you walk out of the 111th Street train station, there's something about Corona that also brings to mind an older,

simpler New York. No hipsters here; no luxury condo skyscrapers. Instead, you'll find modest brick apartment buildings and single-family homes, pizzerias and diners, barber shops and variety stores. That throwback sensibility adds a layer of nostalgia to the experience of revisiting fair sites, especially for boomers who attended the event as kids.

"I think for many people, the fair represents this last moment of true optimism," said Melnick. "We were looking into the future, and the future was going to be bright. That really struck a chord with a lot of people."

The Unisphere — The fair's best-known symbol, an elegant steel globe, has appeared in movies like *Men in Black* and *Iron Man 2*. Visitors enjoy setting up photos so that they appear to be holding the world in their hands. Located in the park, outside the Queens Museum.

New York State Pavilion — You can't miss the towers topped by flying saucers, surrounded by 100-foot-high (30-meter-high) concrete pillars. This was the New York State Pavilion, where visitors rode elevators to an observation deck above an enormous suspended roof of translucent colored tiles. Today the structure is padlocked, rusted and cracked, with preservationists and critics fighting over its future.

Queens Museum — The museum is housed in a building that dates to the 1939 World's Fair, which marks its 75th anniversary this year. It also briefly housed the United Nations General Assembly after World War II. Exhibits include posters from both fairs and a replica of Michelangelo's "Pieta," which was shown in the Vatican Pavilion during the '64 fair.

The museum's most famous display, the "Panorama of the City of New York," is a

scale model of the city that debuted at the '64 fair. The panorama includes models of each of the city's 895,000 buildings built before 1992, along with every street, park and bridge, on a scale of 1 to 1,200. The island of Manhattan is 70 feet long, the Empire State building 15 inches tall.

Located in the park, near the Willets Point stop on the No. 7 train. Wednesday-Sunday, noon to 6 p.m.; adults, \$8, children under 12, free.



The Unisphere, a 12-story steel globe

Rockets and New York Hall of Science — Two NASA rockets stand 100 feet high (30 meters) outside the New York Hall of Science, a museum that opened a few years after the '64 fair, replacing a temporary pavilion. The rockets were part of a space park at the fair that captured the excitement of the era's quest to get a man on the moon.

Towering over the Hall of Science is an undulating concrete building called the Great Hall, an architectural marvel that was an original fair site. Undergoing renovation now, it's due to reopen in October, when visitors will be able to experience the other-worldly interior covered in blue stained glass.

The Hall of Science has undergone a series of renovations over the years and

today houses exhibits exploring everything from microbes to the science of basketball. It also has a small but worthwhile display in a second-floor hallway of brochures, tickets and other memorabilia from the fair, along with a first-floor display of photos of World's Fairs going back to the 19th century.

Located at 47-1 111th St. Monday-Friday, 9:30 a.m.-5 p.m., weekends 10 a.m.-6 p.m.; adults, \$11, children 2-17, \$8.

Queens Zoo — A geodesic dome from the '64 fair serves as the zoo's walk-through aviary. The zoo specializes in North and South American animals, ranging from bears to pumas.

Located at 53-51 111th St. Daily 10 a.m.-5 p.m. (5:30 p.m. on weekends); adults, \$8, children 3-12, \$5.

Carousel — The carousel dates to the early 1900s and was brought to Queens for the '64 fair from Coney Island, Brooklyn. Located outside the zoo, near 111th Street and 55th Avenue. Open weekends and school holidays, 11 a.m.-7 p.m., \$3.

Outdoor sculptures — Flushing Meadows Corona Park is home to several sculptures commissioned for the fair, including "Rocket Thrower," "Freedom of the Human Spirit," "Form" and "Forms in Transit."

Getting there: No. 7 train to 111th Street in Queens; walk down Roosevelt Avenue toward the Hall of Science at 47th Avenue. You'll see the rocket ships come into view over an auto parts store. The zoo, Unisphere and art museum are nearby, though it's a lot of walking. The next stop on the train, Mets-Willets Point, is closer to the Unisphere, art museum and a bike rental station. By car, take the Grand Central Parkway to the Tennis Center. — AP

She sold Belgian waffles at the 1964 World's Fair

By Ula Ilnytsky

NEW YORK —

The notion of introducing a new food to the American public is almost inconceivable in an era of TV chefs, global cuisine and foodie websites.

But that's what happened 50 years ago at the 1964 New York World's Fair in Queens, N.Y., when a family from Belgium introduced Belgian waffles, topped with fresh whipped cream, powdered sugar and sliced strawberries.

Once Maurice and Rose Vermersch and their daughter MariePaule began serving the delicacy, there was no turning back the crowds.

"From the moment we opened there was a line. We couldn't see the end," recalled MariePaule Vermersch, 66, who helped her parents serve an average of 2,500 waffles a day during the fair, which opened 50 years ago on April 22, 1964. "It was wild."

They were supposed to be called



Enjoying Belgian waffles at the 1964 World's Fair (ap photo/bill cotter)

Brussels waffles — named for the Belgian capital, where they were a specialty — but her mother soon realized many Americans didn't know where Brussels was.

The Vermersch family first served the treat two years earlier at the 1962 World's Fair in Seattle, and for years after they made the waffles at the annual New York State

Fair in Syracuse. But it was at the 1964 event in New York City that the waffles became a sensation.

Compared to American waffles, the Belgian treat was light, crispy and fluffy. To this day, baby boomers fondly recall the memory of enjoying them at the fair.

Vermersch said that for years she ran a coffee shop, MariePaule's Authentic Belgian Waffles, in her current home of Albuquerque, New Mexico, that featured a picture of the 1964 World's Fair.

"People would look at the name and see the picture and say, 'I ate those waffles at the World's Fair,' and they'd pick up the phone and call their parents," said Vermersch, who returned to New York to

attend the fair's 50th anniversary celebration, and also to care for her 95-year-old mother, who lives in Queens. "I couldn't believe how often that would happen."

What made the waffles so good? Vermersch cited a special cast-iron pan that heats up to 500 degrees. "As soon as the batter touches the grill, it gets crispy

on the outside and soft on the inside," she said. "You don't want to put anything syrupy on it or it will turn it into a sponge."

They served the waffles with whipped cream, adding hand-sliced strawberries for color.

Waffles in the United States date back to the Pilgrims, who were familiar with them from time spent in the Netherlands, which has a similar waffle culture. And during the latter part of the 18th century, "waffle parties" were all the rage.

Vermersch said she vowed never to create an instant mix because the recipe requires fresh, carefully prepped ingredients: pure vanilla, fresh yeast or self-rising flour, melted but cooled sweet butter and eggs at room temperature, with egg whites added at the end.

But that's as much information as she'll divulge. About 12 years ago, she sold the Maurice Authentic Belgian Waffle recipe to a Syracuse family on the condition that it be served only at the New York State Fair. The exact recipe, she says, is a secret. — AP

Obamacare plans bring hefty fees for certain drugs

By Kelli Kennedy

MIAMI —

Breast cancer survivor Ginny Mason was thrilled to get health coverage under the Affordable Care Act despite her pre-existing condition. But when she realized her arthritis medication fell under a particularly costly tier of her plan, she was forced to switch to another brand.

Under the plan, her Celebrex would have cost \$648 a month until she met her \$1,500 prescription deductible, followed by an \$85 monthly co-pay.

Mason is one of the many Americans with serious illnesses — including cancer, multiple sclerosis and rheumatoid arthritis — who are indeed finding relatively low monthly premiums under President Barack Obama's law. But some have been shocked at how much their prescriptions are costing as insurers are sorting drug prices into a complex tier system and in some cases charging co-insurance rates as high as 50 percent. That can leave patients on the hook for thousands of dollars.

"I was grateful for the Affordable Care Act because it didn't turn me down but ... it's like, where's the affordable on this one?" said Mason, a 61-year-old from West Lafayette, Indiana who currently pays an \$800 monthly premium.

Before the federal health law took effect, Mason paid slightly more for her

monthly premium on a plan that didn't cover her arthritis or pain medications and some routine doctor's visits.

Avalere Health, a market research and consulting firm, estimates some consumers will pay half the cost of their specialty drugs under health overhaul-related plans, while customers in the private market typically pay no more than a third. Patient advocates worry that insurers may be trying to discourage chronically ill patients from enrolling by putting high cost drugs onto specialty tiers.

Brian Rosen, senior vice president for public policy for The Leukemia & Lymphoma Society, said the group studied premiums and benefits for patients with blood cancer in seven states, including Florida, California, Texas and New York. They found 50 percent co-insurance rates for specialty drugs on several plans in Florida and Texas, while the highest co-insurance rates on California plans were 30 percent, and in New York, co-pays were typically

\$70.

Under the law, insurers can't charge an individual more than \$6,350 in out-of-pocket costs a year and no more than \$12,700 for a family policy. But

patients advocates warn those with serious illnesses could pay their entire out-of-pocket cap before their insurance kicks in any money.

"The challenge is for the sickest patients, the ones that need access to these specialty drugs, the costs are going to come in most cases from that out of pocket cap ... they are likely to hit that \$6,350 ceiling and in some cases quickly," said Rosen.

Insurers say prescription drugs are one of the main reasons health care costs are rising.

"Spending on specialty drugs is growing rapidly. It's unsustainable," said Clare Krusing, spokeswoman for America's Health Insurance Plans, a trade group that represents the private insurance industry.

Only 1 percent of prescriptions writ-

ten in 2012 were for specialty drugs, but they accounted for 25 percent of the total cost of prescription drugs, according to a study by America's Health Insurance Plans.

Insurers can generally choose to put whichever drugs they want into the specialty tier of a plan. Generic drugs for blood pressure or cholesterol typically fall into categories that require patients to pay less than \$20 out-of-pocket. But patients can end up spending significantly more when they pay for a percentage of a specialty drug's cost. Two of the most frequently prescribed specialty drugs in recent years include the cancer drug Avastin, with an \$11,000 average annual price per patient, or a hypertension drug like Letairis, which costs \$32,000 per year, according to health insurers.

Even before the Affordable Care Act took effect, insurers had increasingly begun requiring patients to pay a percentage of the drug costs instead of a flat co-pay, but experts say patients often spend more for their prescriptions in plans offered under the health law because of the co-insurance.

"There's a significant percentage of plans that are using co-insurance of 50 percent or higher," said Caroline Pearson, who tracks the health care overhaul for Avalere Health, which studied plans in 19 states. "It is gener-



OBAMACARE page 25

Affordable Subsidized Housing for Seniors

HUD Section 8/202 Elderly
Income level not to exceed:

One Person: \$36,400⁰⁰

Two Person: \$41,600⁰⁰

**Currently accepting applications for:
Crown and Eagle in Uxbridge, MA
Millville Heights in Millville, MA**

Features include:

- Heat and Hot water
- Wall-to-Wall Carpeting
- Electric Range & Refrigerator
- On-site laundry
- Parking
- On-site management and Resident service coordinator

Must be at least 62 years of age or meet other housing requirements (as defined under 202) and meet income guidelines.

For more information, call **508-278-3535 • TTY/TDD: 711**
Uxbridge/Millville Regional Housing

99 E. Hartford Ave., Uxbridge, MA 01569 / **508-278-3535**



Managed by The Community Builders, Inc, Turning Vision into Reality
<http://www.tcbinc.org>



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 Milford Senior Center, The Massachusetts Councils on Aging and other local agencies.

Making your own laundry detergent can be easy

By Jennifer Forker

It's convenient to pick up some laundry detergent at the store, but it's not difficult to create your own.

Soap and water are a time-tested duo against dirt and germs, and homemade cleaners can carry away grime without added chemicals or perfumes.

All it takes are a few, simple ingredients to make laundry detergent — liquid or powder — and fabric softener. Then cut down on drying time and static cling by tumbling wet clothes with homemade dryer balls.

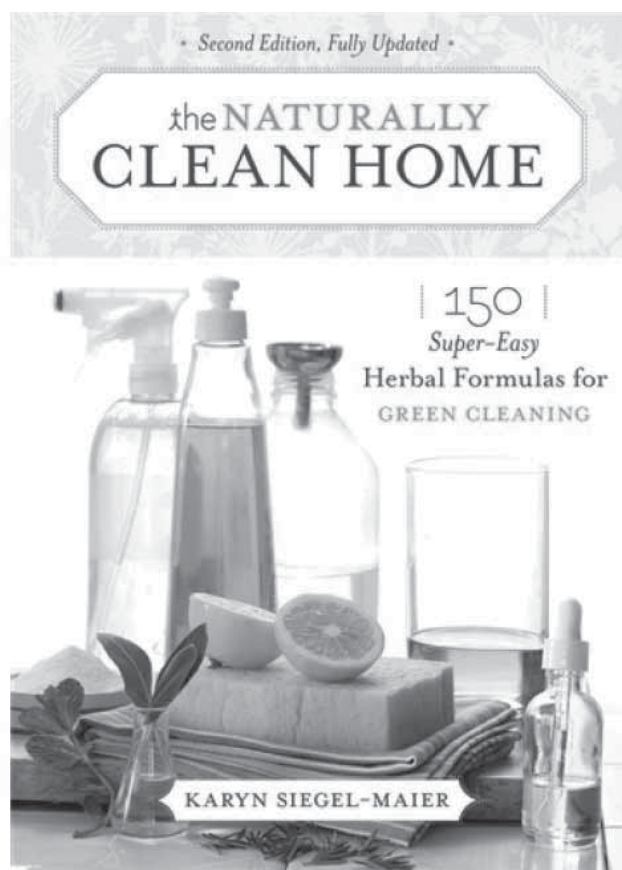
Faith Goguen Rodgers' switch to homemade cleaners began a few years ago after she used a commercial-brand cleaner on the bathtub.

"I'd cleaned it, and then I really didn't want to get in it. The bleach smell and feel — it didn't feel good," she said.

"You save a ton of money making your own," she said, especially if you buy ingredients in bulk.

Homemade cleaners, particularly laundry soap, lack much odor, but a pretty scent can be added with essential oils. This lifts the laundry-detergent-making project up a notch — adding some olfactory fun.

"You and your family can get creative and come up with your own signature laundry scent," Rodgers writes on *The Little Herbal Book*, where she posts her natural cleaning



recipes. "Our laundry comes out clean and smelling fresh."

Her favorite combinations of essential oils for laundry detergent include lemon and eucalyptus, orange and geranium, and grapefruit and lavender.

Sherri Griffin's foray into homemade laun-

dry soap began when she got a rash and wanted something gentler than store-bought laundry detergent. She started researching alternatives, and recommends checking out what's in commercially made products on the Environmental Working Group's website.

An Orlando, Fla., nurse, Griffin started a blog, *Overthrow Martha*, to educate people about natural cleaners. Besides sharing a fabric softener recipe, she recommends simple-to-make dryer balls. Dryer balls decrease drying time, eliminate static cling and decrease wrinkles, she said. Essential oils can be added to them every few loads to softly scent clothes.

"I often hear that people can't give up the fresh smell they get from using dryer sheets, but what people don't understand is that smell comes from chemicals," said Griffin.

Karyn Siegel-Maier shares laundry and other "green" cleaning formulas in *The Naturally Clean Home* (Storey, 2008). The publisher recently posted her recipes for liquid and powder laundry detergent at its blog — *Inside Storey* — to "sanitize, soften and scent clothes and linens, naturally."

Some recipes from these experts:

Rodgers' Homemade Laundry Detergent (powder)

Supplies:

3 cups washing soda (similar to baking soda; look for it near laundry products at the supermarket)

3 cups borax

1 cup baking soda

1 bar of castile (olive oil-based) soap, such as Dr. Bronner's Pure Castile Soap Pure, organic essential oils (optional)

Directions:

1. Grate the bar of soap into a small bowl and set aside.

2. In a large mixing bowl, combine the washing soda, borax and baking soda. Mix well to get rid of clumps. Add the essential oils, if desired. Mix them into the powder well to avoid clumping.

3. Add the grated soap and mix ingredients together.

4. Store detergent in a half-gallon mason jar or other well-sealed container. Use 2 to

4 heaping tablespoons per load of laundry.

Basic Laundry Liquid Formula from Siegel-Maier's *The Naturally Clean Home*

Supplies:

2 1/4 cups liquid castile soap

1/4 cup white distilled vinegar

1 tablespoon glycerin

3/4 cup water

10 to 15 drops essential oil of your choice (or skip the essential oils by using a scented liquid castile soap)

Directions: Combine all the ingredients in a plastic container or squirt bottle. Shake once or twice before adding to the wash. Use 1/4 cup per average load; 1/2 cup for extra large or heavily soiled loads.

Griffin's Natural Laundry Fabric Softener

Supplies:

3 cups white vinegar

1/4 cup rubbing alcohol

20 drops of essential oil (optional)

Directions: Combine all ingredients in a glass jar and shake. Add to the fabric softener dispenser of washing machine.

Griffin's Wool Dryer Balls

Supplies:

100 percent wool yarn

Pantyhose

Essential oil (optional)

Directions:

1. Wrap wool yarn around two or three fingers at least a dozen times, then make a bow by wrapping yarn tightly around middle of wrapped yarn. Bring the two sides together and continue wrapping tightly in different directions to make a small ball the size of a lemon. Repeat to make several balls.

2. Push the wool balls into one pantyhose leg, knotting the pantyhose between each ball so they don't touch. Run through the washer with a load of towels on hot cycle, then, toss into dryer on hot. Once dry, remove from pantyhose. Each ball should appear "felted" — the wool fibers tightly adhered. Snip any loose strands.

To use:

1. Scent balls with essential oil, if desired (it'll last a few loads).

2. Toss at least two balls into dryer with wet laundry. — AP

SAVE THE DATE!

Monday August 4th, 2014

The Haven Country Club

(Formerly known as
Mt. Pleasant Country Club)

**369 Cross Street
Boylston, MA**



**Don't miss this
opportunity to support the
Jewish Healthcare Center ~
it's "FORE" a great cause!**

**The Jewish Healthcare Center's
39th Annual Golf Classic**

Please visit our website at www.jewishhealthcarecenter.com
or call Debbie Aurelio at (508) 798-8653, ext. 2121
for more details

Support our ADVERTISERS

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

Thank you in advance for your help!

5 signs U.S. job market may finally be accelerating

By Josh Boak

WASHINGTON —

Few people responded to the March U.S. jobs report with cheers. But there may be reasons to applaud in the months ahead.

Hiring in March was close to the economic recovery's steady but hardly explosive monthly average of the past two years: 192,000 added jobs. The unemployment rate remained 6.7 percent for the second straight month.

That wasn't the blockbuster figure predicted by some economists, who figured hiring would take off in March after a winter when factory orders, home sales and auto buying were slowed by severe weather.

Yet tucked into the March jobs report and other recent indicators were hints of stronger job growth ahead:

Hiring over the past 12 months has outpaced population growth. More workers in the prime 25- to 54-year-old age group are finding jobs. The winter freeze was less destructive to hiring than had been assumed. Layoffs have declined since February. And an increase in hours worked suggest that incomes will rise.

Here are five signs that the U.S. job market may finally be picking up:

•Job growth vs. population growth —

For much of the recovery, the economy suffered from a fundamental problem: The U.S. was adding more people than jobs.

Employers hired 2.4 million people in 2012. That sounds decent. But it's less impressive when you consider this: The working-age population swelled by 3.8 million that year, according to the employment report's survey of households. A similar gap existed in 2013.

The share of the population with jobs — the so-called employment-population ratio — ended both 2012 and 2013 at 58.6 percent. That was down sharply from 63 percent before the recession started in late 2007.

But encouragingly, the trend reversed itself in March: About 2.35 million people were hired over the preceding 12 months. That was slightly more than the rise in population over the same period. The employment-population ratio ticked up to 58.9 percent, its highest level since August 2009.

When an economy adds fewer jobs than people, it loses some ability to accelerate. The economy is carrying more weight and less muscle.

Some of this reflects an aging population: More baby boomers are retiring. But

another factor is that some people who hunkered down at colleges during the recession have emerged with new degrees and brighter career prospects. And they've started to look for jobs.

Can the gains continue? Tough to say. But the U.S. is faring better than it should considering that the vast baby boom generation has begun to retire.

•Prime-age workers are returning — After the Great Recession ended in mid-2009, a declining share of 25- to 54-year-olds were working. Roughly 80 percent of this age bracket had been employed before the downturn. The figure sank as low as

74.8 percent toward the end of 2010.

But it recovered in March to 76.7 percent, the best reading since February 2009.

"People have gone back to get training and educated and will be more aggressive" and "possibly getting better-paying jobs," said Scott Anderson, chief economist at Bank of the West.

•Escaping winter — Winter saw snow trapping cars on highways in southern states; chronic school closings in the northeast and widespread flight cancellations that disrupted businesses.

Experts are still figuring out how badly the snowstorms disrupted the economy. But hiring never succumbed to the freezing temperatures as much as economists had feared. Revised figures show that 197,000 jobs were added in February and 144,000 in January — a combined 37,000 more than initially estimated.

Other corners of the economy are emerging from hibernation. Auto sales, for example, rose 6 percent to 1.5 million vehicles in March after dismal figures the previous two months.

•Fewer layoffs — The jobs report provides a "net" figure. The 192,000 jobs that employers added in March results from a simple equation: Jobs filled minus jobs cut. The government calculates the total number of jobs compared with the previous month, while accounting for seasonal variations.

So when companies lay off fewer workers, the net jobs figure should rise. And layoffs have indeed declined. The government reports weekly on applications for unemployment benefits. These applications are proxies for layoffs. During March, 71,000 people fewer people sought benefits than in February.

•Longer hours — The average work-week rose to 34.5 hours from 34.3 hours

FIVE page 26



Pre-planning guarantees your wishes are met.

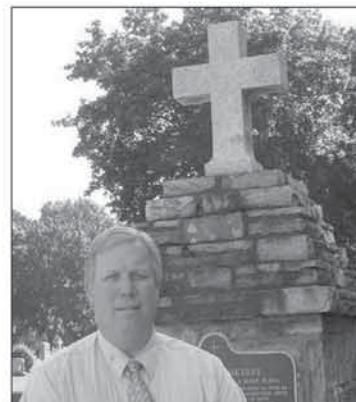


The loss of a loved one, young, old, expected, or unexpected is traumatic. Making the final arrangements with your funeral home and choosing the cemetery and the final resting place adds more trauma to a very sensitive time. At that time we are asked to make decisions very quickly. All this being said, we can be of assistance in the pre-planning portion and extend to all families an opportunity to benefit from our experience along with easy payment plans and burial options.



The benefits of pre-planning are significant. Our office will be happy to assist you in your family pre-planning process. Pre-planning is practical and economical.

- Spares loved ones the agony of making hasty decisions while under great emotional stress
- Avoids inflation by purchasing at today's prices
- Avoids the tendency for emotional "overspending"
- Selections are less limited than in the future
- Affords the piece of mind that comes with the knowledge that everything will be handled according to your wishes



A message from the director...

I have worked with many families during the difficult time of the loss of a loved one and know the importance of pre-planning. You will reduce your family's anxiety and make sure your own wishes are carried out by scheduling a no-obligation, information meeting with my office.

— Robert Ackerman, Director

St. John's Cemetery and Mausoleum

260 Cambridge Street, Worcester, MA 01603 • 508-757-7415 Office Hours: Monday - Friday 8:00am - 4:00pm; Saturday 8:00am - Noon

► Obamacare

Cont. from page 22

ally a lot higher than what we see in private insurance."

Once they pay more than several hundred dollars, Pearson says patients start to abandon their medications.

William Hurd signed up for a Cigna plan with a \$616 monthly premium that covered him and his wife in December. The government kicks in about \$900 a month in tax credits. Hurd, a 61-year-old diabetic who works a construction job in Orlando, was eager to fill his insulin prescription along with two other medications. But he was shocked when the pharmacy said he would have to pay \$1,400 out of pocket for a 90-day supply. He was under the impression that prescriptions were part of the plan and thought he only had a \$10 co-pay for prescriptions.

"I already had the plan. I was in and I was ready to cancel it. If I've got to pay \$1,000 more dollars for drugs ... then it's not worth it," he said.

Fortunately, Hurd called his doctor and was able to switch to a cheaper brand of insulin and ended up paying only \$112.

"This was an extremely expensive misunderstanding," said his insurance broker, Leslie Glogau.

She ran into her own problems with she switched from a private insurance plan to one on the exchange and

learned one of her prescriptions was cancelled under the new plan, prompting numerous appeals.

Patient stories in the media have been seized by both political parties, who have put a sometimes misleading spin on successes and failures under the law. Advocacy groups asked about prescription costs repeatedly stressed how beneficial the law is for people with pre-existing conditions, but they still worry about affordability.

***Under the law, insurers
can't charge an
individual more than
\$6,350 in out-of pocket
costs a year***

Insurers and health navigators say patients are finding it complicated to figure out which drugs fall into which price categories.

For example, advocates say there's inconsistency on the Multiple Sclerosis drugs and treatments covered by the insurers and whether they can be altered on a per-patient basis.

"This is very much a work in progress," said Bari Talente, executive vice president advocacy at the National Multiple Sclerosis Society. The organization recently addressed the issue at a conference in Washington with more than 300 other MS advocates. — AP

"Funeral Expense" Life Insurance Coverage

- First Day Coverage.
- Affordable Premiums Will NEVER Increase.
- Whole Life Coverage. (NOT TERM)
- Issue ages 55-85.
- Most Medical Conditions Accepted.
- Up to \$25,000 in Face Amounts.



To Pre-Qualify Call: 978-632-1995

**SENIOR MARKET
LIFE INSURANCE GROUP**

Philip L. Girouard

11 A Street, Gardner, MA 01440

Local Agent, MA Lic. #1817563

Just How Well Prepared Are You?

- ❖ Elder Law
- ❖ Wills and Trusts
- ❖ Living Wills
- ❖ Estate Planning
- ❖ Power of Attorney
- ❖ Health-care Powers of Attorney
- ❖ Real Estate Law
- ❖ Tax Issues
- ❖ Corp. Business Law
- ❖ Long-Term Care Planning
- ❖ Guardianships



Josephine L. Veglia
Attorney at Law

Member: National Academy Elder Law Attorneys



Durbin & Veglia
ATTORNEYS AT LAW

Josephine L. Veglia
John F. Durbin
(Retired)

275 R Main Street Oxford, MA 01540
www.durbinandveglia.com

508-987-3981
508-987-3982
Fax: 508-987-1317

Memories

Creating Meaningful Funeral Ceremonies
and Gatherings

**We can help your family capture the
special life of your loved one.**

Memory tables and boards - share the special moments of a lifetime with photo and hobby displays

Music - provide a soothing background that sets a comforting tone for our gathering

Video tribute - display a lasting keepsake of treasured memories

Eulogy - express your love and precious memories

We're available to answer all your questions.



Serving all faiths

1158 Main St., Holden • 508 829-4434

Richard S. Mansfield, Director 100 Worcester Rd., Sterling • 978 422-0100
www.milesfuneralhome.com

Your Advance Planning Information Center

Know the true cost when making a decision

By Alain Valles

With recent improvements made by the federal government to the reverse mortgage program, the cost of most reverse mortgages have dropped by more than 30 percent. But cost should be viewed in terms of your goal to be financially independent, stay in your home and have peace of mind about your financial future. Below are the most important cost issues to consider.

Reverse Mortgage

Cost compared to a traditional mortgage — Obtaining a conventional loan is less expensive than most reverse mortgage loans. The exact calculation is based on many factors, but a rough rule of thumb is for a \$300,000 home the cost of a reverse mortgage will be about \$9,000, compared to about \$4,000 for a traditional mortgage.

► Five

Cont. from page 24

in February. That doesn't seem like much — just 12 minutes more. But those extra minutes help boost incomes, Deutsche Bank economist Joseph LaVorgna said in a research note. Hourly workers are taking home more pay over the course of a week — about \$17 more than they did at this time last year.

Judging from tax receipts, that's hav-

ing “a significant impact on household income creation,” LaVorgna said. And consumer spending is the lifeblood of growth, accounting for about 70 percent of the economy.

Higher incomes should fuel spending. Economists are already citing the increase in auto sales as a sign of more robust spending to come. Based on March's “strong auto sales, this seems to be providing plenty of firepower for discretionary consumer spending,” said Jay Feldman, an economist at Credit Suisse. — AP

But the out of pocket costs are about the same for both types of loans, and the \$5,000 difference is added to the loan amount, not required up front.

The extra cost pays for the federally guaranteed advantages of never making a mortgage payment for the rest of your life, a guaranteed equity line that grows, a monthly check for life, or the ability to receive tax free cash, to name just a few benefits. Another advantage: Many homeowners would not qualify for a traditional bank loan, while a reverse mortgage has more lenient qualification guidelines.

Cost to move — Many people don't factor in the cost of moving: the Realtor commission of up to 6 percent, home improvements, the moving company and hiring someone to get rid of personal belongings. There is also the emotional cost of downsizing.

Selling a \$300,000 house can cost over \$30,000. And where will you live? Can you afford to pay rent? Even moving in with relatives is seldom free. A reverse mortgage gives

you the option to afford to stay in your own home and remain financially independent.

Cost of indecision — This can be the biggest challenge for seniors contemplating a reverse mortgage. Putting off a decision only makes it more expensive. New guidelines are scheduled to be issued that will reduce the number of people who will qualify for a reverse mortgage. Just as important, the interest rates on reverse mortgages are at an all time low. When they increase you will get less money. There is nothing more frustrating than saying, “I should have gotten a reverse mortgage when I had the chance.”

Costs of misinformation — Our loved ones and trusted advisors have our best

interests at heart. But when it comes to reverse mortgages, more often than not the advice being given is based on what they overheard — not the facts. Not everyone should get a reverse mortgage. But everyone should understand the pros and cons in order to make his or her own decision.

Alain Valles, president of Direct Finance Corp., was the first designated Certified Reverse Mortgage Professional in New England. He can be reached at 781-878-5626 x224, or by email at av@dfcmortgage.com or visit www.lifestyleimprovementloan.com. Articles from previous issues can be read on fiftyplusadvocate.com.



Support our ADVERTISERS

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

Thank you in advance for your help!

Worcester County Memorial Park introduces The Good Grief Social Group

GOOD GRIEF is a social group for the purpose of meeting people who have experienced a loss in their lives.

Worcester County Memorial Park is proud to have developed a “new” group for those men and women who are looking to meet new people in the area for socializing.

At Worcester County Memorial Park, we have a great after care program, which tries to stay in touch with families who have lost a loved one. So many times people we visit feel lost and are left to figure out how to move forward and enjoy life. Most have friends, but a lot of friends are married making them feel like a third wheel or intruding. You may find yourself feeling



this way.

This is NOT a grief support group. It is for those who are now ready to meet new people and have fun and enjoy other's company. Our goal is to provide

activities throughout the year.

You may want to get together once a month to be around others and enjoy fellowship. You may want weekly dinners, or you may want to get together for movies, cards, or day trips.

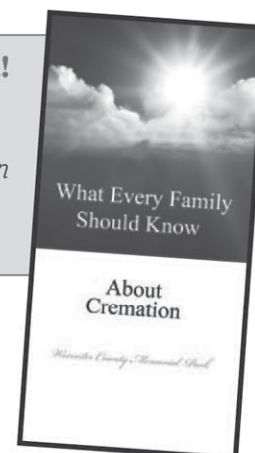
We started the group in May and it really has taken off! We would love you to join us. Every get-together we have new people join and everyone makes

them feel welcome! Our intention is for this not to be a dating service but rather to garner new friendships.

**UPCOMING GOOD GRIEF
SOCIAL GROUP EVENTS**
Introductory Open House
Weds., June 11, 5:00p.m. - 8:00p.m.
579 Pleasant Street, Paxton
R.S.V.P. to Marie at 508-791-5905

**Police, Fire, EMS,
and Veterans.**
Free burials benefits.
Limited Space, call Today!

Free Cremation Booklet!
We have created 12 buildings in our Heritage Garden. Our free booklet will explain all cremation options. Call for your free, no obligation booklet.



Worcester County Memorial Park
217 Richards Avenue, Paxton, MA 01612 • 508-791-0350 • www.wcmp.org

Baby boomers may opt for communal living again

By Craig Smith

PITTSBURGH —

A generation of Americans who embraced communal living in the 1960s is again considering that concept and other ways to coexist as they near retirement.

This time, they've traded peace signs for dollar signs.

"By force of sheer volume, the (baby boomers) who in 1968 thought they would change the world, by 2028 actually will," said Andrew Carle, founding director of the Program in Senior Housing Administration at George Mason University in Fairfax, Va.

Over the next three decades, one in five U.S. citizens will turn 65 or older, Carle said. They'll control more than half of the discretionary income, influencing entertainment, travel, food, retail, technology and housing.

Even now, seniors are redefining their living arrangements through cohousing communities, cooperative households and niche communities, experts said.

Baby boomers, those born between 1946 and 1964, might be more open to such ideas, having tried similar arrangements when they were younger, said Robert Schulz, director of the University of Pittsburgh's Center for Social and Urban Research.

And there's a practical side.

"As baby boomers age, getting appropriate support will be a challenge," Schulz said. "Traditionally, children supply that support for their parents, but baby boomers had few children, so group housing has the potential for people to provide for and support each other."

The nation's aging population is a major public health challenge of this century, according to the National Centers for Disease Control and Prevention (CDC) in Atlanta.

Researchers for some time have warned about "the 2030 problem" — the year when America's 78 million baby boomers will be ages 66 to 84. Their numbers could create far-reaching implications for the public health system and place unprecedented demands on services, the CDC said.

Some experts believe the crunch is here.

"You don't have to project out that far. The problem is here now," said Stephen M. Golant, a gerontologist and geographer at the University of Florida who predicts that by the end of the decade, more than 98 million Americans will be 65 or older.

With health care professionals in short supply and high demand, retirement communities providing access to them will have appeal, experts said.

Not all boomers will move from homes

"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 future generations.

www.estatepreservationlaw.com
508.751.5010

Main office in Worcester MA, with satellite offices in Leominster, Braintree and Cape Cod.

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.



Curious about Cremation?

Contact Shaw-Majercik Funeral Home and find the answers to your questions.

We offer one of the area's largest selections of cremation urns, cremation caskets and services at affordable prices.

Includes

- Transportation in Worcester County and Windham County
- Obtaining Legal Permits
- Professional Staff Services
- Preparation
- Crematory Fee
- Cremation Container

***\$1350⁰⁰**

Complete Worcester County and Windham County, CT

*prices may change if we incur increases by providers

If you are considering cremation —
Call us today —
Why pay more?

We guarantee the lowest prices on traditional funerals.

Shaw-Majercik Funeral Home



"Because We Care"

ESTABLISHED 1910 • RICHARD D. MAJERCIK, DIRECTOR

"Serving All Faiths" 100 YEARS OF CONTINUOUS SERVICE Veteran owned

48 School Street, Webster, MA 01570

508-943-6278 • www.shaw-majercik.com

1-800-279-7429

► Living

Cont. from page 27

in which they've lived for years.

Margie Castello, 49, and her husband, Louis, 51, of Renfrew in Butler County, plan to age in place. They ride Harley-Davidsons and recently bought a motor home. They want to continue an active lifestyle.

"We've done things to make it easier on us so we can get up and go," she said.

Boomers who do move won't go quietly to retirement homes like those that housed their parents. They've built more than 100 cohousing communities across the country and are exploring options such as university-based retirement communities.

Cohousing can be multi-generational and emphasizes privacy but with social contact among members, advocates say. Residents live in private homes but share facilities such as a common house, courtyards, playgrounds or gardens. People typically gather at least once a week for a meal.

"What's the best thing about cohousing? We know our neighbors really, really well," said Joani Blank, 75, of Oakland, Calif., a former board member of the Cohousing Association of the United States. "What's the worst thing? We know our neighbors really, really well."

Three such communities are forming in Pittsburgh — one in East Liberty, another in Sewickley and a third in Larimer, said Stefani Danes, an architect and Carnegie Mellon University professor

who is helping plan the Sewickley project.

"This is the right time, now that our kids are gone, to downsize into something that makes sense for aging," said Danes, 59, of Franklin.

Scilla Wahrhaftig, 70, gave up a big house near Frick Park for one of the renovated row houses that make up the Borland Gardens Intentional Community in East Liberty.

"I loved the idea of sharing, but I wanted my privacy," Wahrhaftig said.

East Liberty Development Inc. acquired the row houses, which were in foreclosure, said Kendall Pelling, project manager, who believes the idea could grow.

"It gives people a sense of community," he said. "One of the amenities with cohousing is the people."

Developers of Hundredfold Farm, a cohousing community near Gettysburg, have completed 10 of 14 single-family homes planned for 75 acres that include a working Christmas tree farm, community vegetable and flower gardens, and a common house.

"We're more family than neighbors," said Bill Hartzell, 53, a founding member of the community and cohousing association board member.

The project encountered some opposition when the group started talking about it in 1997, but members plodded along.

"Other efforts have come and gone over the past two decades, but Hundredfold Farm is nearing the finish



line," Hartzell said.

For three Mt. Lebanon women, helping one another started with a cat.

Louise Machinist, Jean McQuillin and Karen Bush began their experiment in cooperative householding eight years ago when Bush, 64, a consultant, needed someone to watch her cat during a West Coast trip.

Machinist, 66, a psychologist, volunteered to watch Beardsley. A one-month trip stretched into a year, and Bush began repaying her friend by taking her on trips. Before long, the three divorced, professional women — McQuillin, 67, is a nurse — established their "Old Biddies Commune."

They bought a house together and share the costs of maintenance, utilities and other bills. They hope their unique "intentional community" becomes a

model.

"We want people to learn from this," said Bush, 64.

The women wrote a book, *My House, Our House: Living Far Better for Far Less in a Cooperative Household*.

University-based retirement communities offer people a chance to return to their alma maters or another campus where they can participate in school programs — from classes to concerts and sporting events.

Fifty to 75 such communities might exist across the country, said Carle, who is trying to confirm the number. The potential for their growth is large, since there are about 4,400 colleges

and universities.

The Village at Penn State, an apartment and cottage complex within walking distance of the State College campus, caters to people in their 70s.

"This is an active, vibrant community. The residents are so busy," said Lucille DeFronzo, vice president of sales and marketing for owner Liberty Lutheran. "There's a great camaraderie here."

Niche communities are another emerging concept for which experts see potential.

Grateful Dead fans? Someone could build a retirement community just for you.

"These are not goofy ideas," Carle said. "When you have 78 million people, you have critical mass to do whatever you want." — AP

BREAKING NEWS

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!

Too Busy or Too Tired to Clean? Relax. We can do it for you!

We'll clean your home or business from floor to ceiling and everything in between. Certified Service for all your residential, commercial and industrial needs.

24 HOUR • HOME AND OFFICE

- Carpets • Floors
- Great Commercial Rates



The Clean Team

508-341-8683

508-886-6199



VOLUNTEERS NEEDED

MISSION:

To end hunger in Greater Worcester and to reduce the waste of nourishing food.

VOLUNTEER DRIVERS:

Are needed year round to distribute excess food to emergency feeding programs

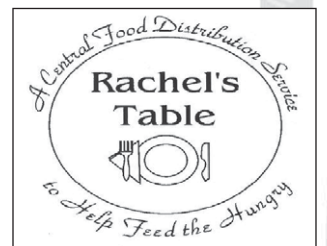
- in their own vehicles • Sundays - Fridays
- time to suit your schedule
- drive as much or as little as you would like

VOLUNTEER DISPATCHERS: Are needed year round to arrange for the distribution of excess food • work out of your own home

- 1 shift/month, Sundays: 9 a.m. - 1 p.m. or Weekdays: 9 a.m. - 2 p.m.

BE PART OF THE SOLUTION

Contact Lissa at 508-799-7699 • VISIT: www.rachelstable.org



► State

Cont. from page 6

achieving your best possible level of wellness is knowing your limits — and dealing with them.

"Who has something they don't do well — perhaps using computers or taking criticism?" Karuth asked those in attendance, noting that people don't wear T-shirts advertising their shortcomings. "You don't want to show you're vulnerable," but in not doing so, she said, "it doesn't show your full self."

For her, living with a visual disability has been like wearing that T-shirt. "It labels you before you have an identity," she said.

Despite her long list of health issues, Karuth has the power to make a room smile. She shared historical research on how people with disabilities have been judged over the years.

Karuth faced challenges getting an education. "I was mistreated for my clumsiness (due to her blindness) by other students and teachers until I graduated at 17," Karuth said, adding that those closest to her didn't offer her the support she needed. "My family didn't understand what I was going through because there were no common experiences."

Living in Brighton while attending Boston College, she spent dozens of hours waiting in freezing cold weather for a commuter train into Boston because either no one would take the time to help her board or there wasn't what was needed for her to get onboard herself. "Drivers regularly didn't have the key for the handicapped ramp," she said. "Finally, one day, a driver took his key off his key ring and told me he was giving me my own key."

Ableism — discrimination or prejudice

against individuals with disabilities — can be carried out through avoidance behaviors that include turning away, staring, avoiding physical contact and emotionally distancing.

"People with disabilities are seen as weak and needing help," she said. They aren't "deserving of charity or having little to look forward to in life and shouldn't expect to marry and have children," Karuth said, adding there is a belief that "one should not raise the hopes of people with disabilities and we should not have expectations of them."

When faced with these kinds of attitudes, she said, people with disabilities feel they shouldn't attempt to pass themselves off as or act normal; they should remain in the closet or they should deny the impact of the disability, which causes some whose life would be vastly improved by use of a wheelchair to not use it, having been convinced by others that it would be a prison. They also avoid asking for help when they need it.

"They tend to overcompensate and underestimate their self worth, skills and ability and as a result, isolate themselves and lower their expectations," Karuth said in her talk. "In many instances this leads to engaging in substance abuse and feeling despair and isolation."

The fact she's made it despite all the obstacles life has thrown at her — and finding a way to smile, Karuth stood as proof that those with handicaps have just as much to contribute to society as anyone else, if not more. "As you can see, the problem isn't the disability, it's the oppression," she said.

Older residents with disabilities — be they physical or mental — face a double whammy when it comes to having the services they need funded.

"It's a very subtle thing to provide ser-

vices for people as they age," said MAMHC chair Jim Callahan. "Being marginalized as you age is worse if you have a disability. It's a challenge to have people feel that they're important, that they have choices, that they're part of their community and have meaningful relationships. It's important for them to have services provided in the right way."

Frank Baskin, LICSW, noted that the proposed 2015 state budget has no funds budgeted for senior mental health services. "We asked for \$350,000," he said, noting that MAMHC has requested the restoration of Geriatric Mental Health line item 9110-1640 under the Executive Office of Elder Affairs.

"From 2007-2009, the legislature appropriated money to fund geriatric mental

health services through the Executive Office of Elder Affairs," said an MAMHC letter to state legislators. "This funding was discontinued in 2010, even though the problem continues to grow."

Noting that one in four people age 55 and older will experience behavioral health disorders that are not part of the normal aging process, the letter said restored funding would allow once again for services to elders in crisis that would include in-home mental health counseling as well as training on elder mental health issues for first responders, care managers, nurses, social workers and other providers and would ultimately save the state money by avoiding more expensive institutional placements.

U.S. approves diabetes drug with new approach

WASHINGTON —

The U.S. Food and Drug Administration (FDA) approved a new diabetes drug from Bristol-Myers Squibb and AstraZeneca that uses a novel approach to reduce blood sugar.

Farxiga is a once-a-day tablet designed to help diabetes patients eliminate excess sugar via their urine. That differs from older drugs that decrease the amount of sugar absorbed from food and stored in the liver.

The drug is the second product approved in the U.S. from the new class of medicines known as SGLT2 drugs. In March, the FDA approved Johnson & Johnson's Invokana, which also works by eliminating excess sugar through patients' urine.

The agency cleared Farxiga tablets for patients with type 2 diabetes. The approval marks a comeback for the drug, which was previously rejected last year after studies

raised concerns about links to bladder cancer and liver toxicity.

Ten cases of bladder cancer were found in patients taking the drug in clinical trials, so Farxiga's label warns against using it in patients with the disease. A panel of FDA advisers recently said that the uptick in cancers was likely a statistical fluke, and not related to the drug. But the FDA is requiring Bristol and AstraZeneca to track rates of bladder cancer in patients enrolled in a long-term follow up study. The companies will also monitor rates of heart disease, a frequent safety issue with newer diabetes medications.

The most common side effects associated with Farxiga included fungal and urinary tract infections. The drug can be used as a stand-alone drug or in combination with other common diabetes treatments, such as insulin and metformin. — AP

Promote your services in New England's most award winning print & online media!



Recently, in Buffalo, NY, there was an annual competition for excellence among senior newspapers and web sites from all the corners of the United States.

Independently judged by the University of Missouri School of Journalism, the Fifty Plus Advocate Newspaper and www.fiftyplusadvocate.com were the big winners.

In twelve categories we were awarded eleven first place and one second place certificates of excellence.

With over 100,000 readers and web site visitors every month, this is where you should promote your services.

fifty plus
advocate

Contact Donna at 508-561-8438
or e-mail ddavis@fiftyplusadvocate.com to receive
no obligation information on our affordable rates.

fiftyplus
advocate.com

Bright ideas for outdoor furniture

By Kim Cook

Earthy hues that blend into the landscape tend to dominate the outdoor furniture market. Understated woods, metals and cushions are easy-to-incorporate neutral elements.

But outdoor spaces also offer the chance to be more adventurous than we are inclined to be indoors.

Maybe bolder balconies and peppier patios on your redecorating radar?

"Vibrant color has dominated the home furnishings arena since last fall, and after an unusually cold winter, the time's ripe for bright color to become a focus for our outdoor spaces. Color is a great energizer," said Jackie Hirschhault, marketing vice president for the American Home Furnishings Alliance, based in High Point, N.C.

Aimee Beatty, in-house stylist at Pier 1, said lively outdoor pieces give people a way to make a statement: "Incorporating pops of color with furniture and accessories adds personality and flare."

She suggests adding a colorful bench to the patio to coordinate with a more traditional or neutral dining set. "One new piece is a simple, budget-friendly way to make a big impact," she said.

"Brightly colored furniture is also a quick way to punch up a small space," she added. A bistro table and chairs in playful hues sets the stage, and you don't need much more than a few additional pieces to create an inviting space,

even if it's a tiny terrace.

Pier 1's Paris-inspired Neely Bistro Set comes in red or peacock blue rust-resistant cast aluminum. Frontgate's powder-coated aluminum side and bar chairs in fresh colors like aqua and melon come in whimsical designs like curlicues and floral motifs.



The Rock Point acacia wood bench can be had in red, marine blue or dandelion yellow, and has the added benefit of being foldable for off-season storage. Synthetic rattan chairs are weather resistant and come in an array of clean, crisp brights like ocean, purple, orange and yellow. (www.pier1.com)

Z Gallerie's Madison garden stool comes in gold for a touch of metallic flair. You'll also find the Mimosa lantern, featuring a filigreed Moroccan motif in mandarin, white, lemon and aquamarine. (www.zgallerie.com)

A patio umbrella is a quick and inexpensive style changer. Start the party by setting up Hayneedle's shaggy acrylic Palapa umbrella, a 6-foot-wide hula skirt on a pole with thatched strips of acrylic in lime, whiskey, raspberry pink or lemon yellow. (www.hayneedle.com)

Walmart has a well-priced basic market umbrella that can be had in a fresh sunny orange, deep green or canary yellow. (www.walmart.com)

Grandin Road's op-art Lulu planter in a loopy black-and-white graphic would be an exclamation point to colorful outdoor furniture. Their Sea Life collection of outdoor pillows includes stylized starfish and sand dollars

in brilliant hues. (www.grandinroad.com)

Usable as either planters or beverage receptacles, LED-embedded resin GardenGlo containers provide glowing illumination in a range of colors. (www.gardenica.com)

Consider adding a few glowing orbs to the garden, pool, pathway or anywhere you'd fancy ambient light. A remote control lets you run through a variety of soft colors or switch to just white. They'll last eight hours on one battery charge. (www.frontgate.com)

Seattle-based designer Nicole Ketchum creates light-weight acrylic chandeliers in 11 colors that can be hung from trees, deck roofs or anywhere you'd like. Choose a faux ornate pattern or an octopus. (www.chandelierbynk.com)

Outdoor polypropylene rugs add color and give outdoor spaces a more finished, room-like look. Horchow's Geometric Twist collection puts a crisp white graphic on a tangerine, lime or navy background for preppy punch, while Dash & Albert's indoor/outdoor rugs feature East Asian graphic motifs, chevrons and sailing stripes. (www.horchow.com)

Dash and Albert's new outdoor pillow collection includes exuberant retro-Hawaiian prints, sea horses, crewel florals and bubble patterns, all in a riot of fun-loving colors. (www.dashandalbert.com)

Designer Elaine Smith has come up with a collection of outdoor pillows that reflects a childhood surrounded by global art, and a love of both fashion and nature. "I like using and reimagining traditional motifs, and creating designs with a timeless feel," she said.

Smith's done an Asian toile pattern in a pretty aqua/white combination, a zebra print in chocolate or blue and a hula skirt motif in a kaleidoscope of tropical hues. (www.authenteak.com) — AP

SENIORS! Get the Cash You Need



400 Trade Center • Suite 5900, Woburn, MA 01801
www.LifeStyleImprovementLoan.com

If bills are piling up and you are short of cash,
another loan payment is the last thing you want!
Get cash from your home with a Home Equity
Conversion Mortgage and stop worrying!

- Pay off your mortgage and other debt
- Get tax-free cash from your home
- Stay in your own home
- Homeowners age 62+
- Start enjoying life again

Call Steve Becker, Senior Loan Specialist (NMLS #9975)
for a personal consultation:

Office (781) 569-5044 • Cell (781) 249-0083

**Weekend or Evening Appointments
Available in the Comfort of Your Home!**

"Only the Very Best for Your Loved Ones"

**Deficiency free
rating 2013
by DPH**

Odd Fellows Home of MA

Skilled Nursing and Rehabilitation Facility
Serving the Greater Worcester Community
for Over a Century

- Long-term, 24-hour Skilled Nursing Care
- Short-term Rehabilitation & Post-surgical Care
- Respite Care • Hospice Care
- Dementia Care with Secure Unit
- Dietary and Nutrition Services
- Experienced Rehabilitation Services
 - Physical Therapy
 - Speech Therapy
 - Occupational Therapy
- Wound Care
- I.V. Therapy
- JCAHO Certified



Call to schedule a tour: **(508) 853-6687**

104 Randolph Rd., Worcester, MA 01606

info@oddfellowshome.com

www.oddfellowshomema.com



YOU DON'T KNOW THE WHOLE STORY ABOUT MASSACHUSETTS MEDICAID!

There is Medicaid money to help you get the care you need at home, an assisted living residence or nursing home. You don't need to be poor. Your spouse will not be left at risk. You paid taxes for years, it's time the government helped you. Follow the rules and let your hard-earned dollars pay you back for the care you or your loved one needs. Our **FREE** report outlines the benefits and what it takes to qualify.

Call now for your free special report.

Call anytime 1-508-281-7900

**Ingle
Law**

ESTATE PLANNING AND ELDER LAW
PUZZLES WORTH SOLVING



TRACEY A. L. INGLE, ESQ.

56 CENTRAL STREET, SOUTHBOROUGH, MA 01745

www.IngleLaw.com



Caregiving services that you can count on as your needs change

At Jewish Healthcare we have a number of services that will help in the caregiving of your loved ones. They range from skilled home care services following a hospitalization; an assisted living community when your loved one needs a safe environment; short term rehabilitation services to help them recover from surgery and other temporary issues; as well as nursing home care and end-of-life options.

When you put your parents under our care you don't have to worry about transitions to other services with the passage of time. We offer you the comfort that you need to care for your loved ones.

- Skilled Home Care Rehabilitation Services.
- Short Term Inpatient Rehabilitation.
- Hospice services in the location of your choice.
- Assisted Living.
- Long Term Care.



JEWISH HEALTHCARE CENTER

629 Salisbury St., Worcester, MA

(508) 798-8653

www.jewishhealthcarecenter.com

EISENBERG ASSISTED LIVING

631 Salisbury St., Worcester, MA

(508) 757-0981

www.eisenbergal.com

JHC HomeCare

629 Salisbury St.

Worcester, MA

(508) 713-0538

www.jhchomecare.com



JHC Hospice

In Memory of Selig J. Glick

629 Salisbury St., Worcester, MA

(508) 713-0512

www.jhchospice.com

You Have the Right to Choose Following Your Hospitalization... Choose the Best!

World-Class Health Care in the Heart of Worcester

THE CENTER FOR MUSCULOSKELETAL SERVICES

There's a world of choices when it comes to orthopedic care. At Saint Vincent Hospital, we have surgeons who are experts in joint replacement, spine, foot, and hand problems, as well as sports injuries. We also provide a less complicated approach to hip and knee replacement. And we offer pre-surgery visits to answer any questions and post-surgery rehab services to help you recover fast. Actually, when it comes to orthopedic care, there's really only one choice. **For more information, please call 1-800-201-0574**



SAINT VINCENT HOSPITAL
Center for Musculoskeletal Services

stvincenthospital.com/orthopedics

Designated as a

**Blue
Distinction®
Center+**
for Knee and Hip Replacement



MASSACHUSETTS

Blue Cross Blue Shield of Massachusetts
is an Independent Licensee of the
Blue Cross and Blue Shield Association



Saint Vincent Hospital
accepts most major
insurance plans including:



*If Saint Vincent Hospital is included in your medical plan's provider network, it does not guarantee that the services rendered by Saint Vincent are covered under your specific medical plan. Check your official plan documents, or call the number listed on your ID card, for information about the services covered under your plan benefits.