

fifty plus

a d v o c a t e

41st
year

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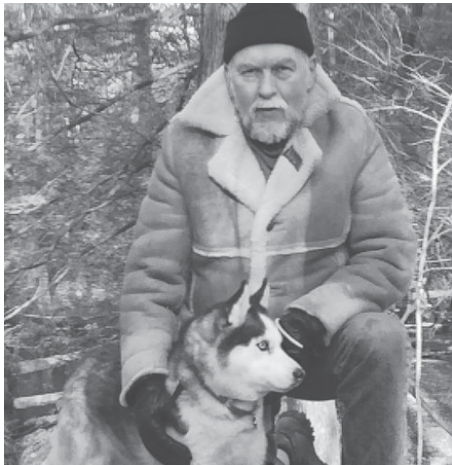
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Social Security is not a political toy

By Sondra Shapiro

Seventy-five years ago, May Fuller, 65, received the first Social Security check. The amount was \$22.54. Fuller filed her retirement claim on Nov. 4, 1939, having worked under Social Security for a little short of three years.

You may or may not be a fan of Obamacare, but one thing is clear: It has provided a diversion from the problems that plague Social Security, a program that has helped sustain Fuller and millions since.

The most recent trustee report revealed the retirement trust fund should run dry by 2034 and the program would take in only enough payroll taxes to pay 75 percent of benefits.

The Social Security trust fund, which pays the benefit, has two components: the retirement fund (OASI) and the Disability Insurance Trust Fund (SSDI).

The struggling disability program is slated to run dry in 2016. Through the years, 11 times to be exact, Congress has allocated the funneling of funds to the SSDI under both Democratic and Republican administrations, the last time being in 1994.

Now recent action by House Republicans might have put Social Security right back front and center by halting the practice of allocating additional funds into the struggling disability program. The action could result in a 20 percent cut in disability benefits by late next year for the approximately 9 million beneficiaries.

The move by the new GOP majority in Congress might be interpreted as a tactic to ultimately make cuts to the retirement and disability programs. Indeed, the ruling actually states that it is blocking the cash transfusion unless it goes along with a larger plan to improve Social Security solvency, by either trimming benefits or raising taxes.

Social Security is a pay-as-you-go system — today's workers and employers pay for current retirees through a 12.4 percent combined tax on wages up to \$118,500.

Beneficiaries usually get more in benefits than they and their employers have paid into the system.

While the program has more than \$2.7 trillion in reserves, the retirement portion has been paying out more in benefits than it collects in payroll taxes since 2010. The trust fund should run dry by 2034 when the program would take in only enough payroll taxes to pay 75 percent of benefits.

Compared to 1935, when the Social Security Act was passed, people are living ever longer lives, so they will be collecting benefits for more years.

The Urban Institute reported an average-earning male who reached age 65 in 1960 received \$6.39 in Social Security benefits for every dollar he paid in Social Security taxes.

Workers, who reached age 65 in 2010, receive 92 cents for every dollar paid in taxes, and workers who reach age 65 in 2030 will receive only 84 cents for every dollar in payroll tax contributions.

Compounding the issue, the birth rate has been declining since 1964; the ratio of workers supporting each retiree is shrinking.

According to the Social Security Ad-

ministration, in 1940 there were 159 workers for every four retirees. As of 2010, that ratio has shrunk to two workers supporting nine retirees.

All of this information may lead to the conclusion that Social Security is unsustainable; at least many in the new Congress

would want you to believe that.

The disability program, which has been paying out more than it collects since 2005, may provide the chink in the armor Republicans could exploit. Consider the recent words by the Social Security trustees: "While legislation is needed to address all of Social Security's financial imbalances, the need has become most urgent with respect to the program's disability insurance component. Lawmakers need to act soon to avoid automatic reductions in payments ..." Such words make a case to redirect funds into the program. So, why would Congress refuse to do so? A rationale, offered by the TPM electronic news site, suggests that the Republican ruling to halt the transfer of funds may be political. Congress could allow for small infusions into the program with a payback deadline that would coincide with the next election. "By setting up a series of forcing events, the argument goes, Republicans would be able to create an ongoing crisis atmosphere around Social Security that would create a pretext for dramatic changes to the 80-year-old program," TPM reported.

In a lot of ways this ploy makes sense since one must tread easy when discussing tinkering with the very popular entitlement, hence subtle moves leading to the goal of making structural changes to the program — presuming Republicans take the White House.

In the past, Democratic and Republican administrations have assigned task forces to look into ways of fixing the beleaguered Social Security program. Each time, these groups have either come up short or made suggestions — such as privatization — that have proven to be unworkable.

In 2011, the president introduced the controversial chained CPI proposal that would have altered the inflation formula used to determine cost-of-living increases for retirees, trimming the average benefit by roughly \$30 a month. The non-partisan Congressional Budget Office gave the example of a \$216 billion savings between fiscal years 2014 and 2023.

When you consider Social Security has cut the poverty level in half among seniors since FDR signed the act in 1935, the future of the middle class depends on its solvency. A bit of tinkering could solve its problems long term. There is no need to change the basic structure.

Why not consider raising the retirement age for collecting Social Security faster — the age for full benefits has been rising gradually to 67 by 2017.

Ratchet up the age for collecting benefits early, since it has not increased at all.

Or lift the cap on how much income is subjected to the Social Security tax. It seems illogical that a person making more than the cap pays no more in taxes.

FDR could never have imagined the vast



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Fifty Plus Advocate

March 2015

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Ashton Applewhite fighting against aging stereotypes

By Brian Goslow

We marched in the 60s; now we're all 60. It's time to use those same voices to make change.

The quote comes from a participant at the first meeting of The Radical Age Movement, a New York-centered but nationwide grass roots group that “challenges traditional notions of aging and introduces new ideas for building co-creative and interdependent communities.” Author Ashton Applewhite shared the quote on her Twitter page (twitter.com/thischairrocks).

The twitter account is an offshoot of the 68-year-old Brooklyn resident's “This Chair Rocks: pushing back against ageism — which affects everyone” blog (thischairrocks.com) that she brought to the Internet in 2007. She uses social media to promote the blog.

“I'm a little bit of a technophobe and it is a bit of a struggle for me, but I am possessed by this cause and the need to raise awareness of ageism, and clearly if I'm going to do that, I need to use the tools of the day,” Applewhite said. “It's very useful. I've met many good people. I've gotten work through it. I've done the groundwork because that (social media) is where the next generation does a lot of its communicating.”

And communicate she does, sometimes one person at a time, starting with a reporter's question. When asked if having pro-active civic, political and cultural organizations like the Radical Age Movement allows members of her generation to revisit the excitement of their youth, she's quick to scold. She points out that the phrasing of the question holds an age bias that suggests the most passionate civil participation takes place in people's younger years.

And she's right. The question is ageist.

“I don't like the suggestion that it (social activism) might make you reminiscent of your youth,” Applewhite explained. “When we say we feel young, we use ‘young’ as a substitute for feeling energetic or feeling important or feeling engaged.”

She said it's important to use words that apply to any age because the symptom or activity being described is of the moment, not because a certain age has been reached. “Sometimes we say, ‘I feel old,’ when what we really mean is, ‘I feel tired,’ ‘I feel miserable’ or ‘My feet hurt.’ What's really going on is your feet hurt, and they can hurt at any age.”

“I would hope — and I do think — that a movement is starting to happen, that the Radical Age Movement involved people of all ages because ageism affects young people as well as old people — it affects our whole life,” Applewhite said.

“Its most drastic effects are on old people because of the focus on the youth culture, but teenagers, in particular, also feel it extremely. It affects 20-year-olds who get depressed

because they're not having the most fabulous careers and sex and everything every minute which they (feel they) should be because they're 20.”

The expectations of what life should be like at certain ages is presented through the imagery and messages put forth by mass media and advertising and can serve as an oppressive measure, turning people into products with an expiration date. “That's a trauma by society,” she said. “Not all women who are 30 think, ‘I'm over the hill now.’”

Perhaps no bigger stigma hovers over a segment of the United States population than those who've been burdened with being called baby boomers, those folks who were born between 1946 and 1964. Applewhite doesn't love the term ‘baby boom’ because it implies homogeneity and puts its 76.4 million people (according to the April 2014 figure from the U.S. Census Bureau) into a single classification. “In an ideal world, I wouldn't generalize about generations at all, but let's face it, it's a handy term,” she said.

While she hopes all generations will participate, Applewhite thinks the heart of the Radical Age Movement will be people in their 50s, 60s and 70s.

“My generation is both starting to accept the fact that we are aging — which is a good thing — and pushing back against it,” she said. There's a double edge to the activism in that while it promotes taking down the barriers of expectations of people based on their age, it's also important that we remember that although proper maintenance can benefit our body and its physical and mental capabilities, we shouldn't ignore the realities of time.

“We feel we need to try to stay healthy to stay mobile, but I think it's also a little delusional to think you can exercise and do vitamins, and work your way out of aging. You can't, so you have to be careful that it's not a form of age denial,” Applewhite said. “We have to be accepting of the fact that we are aging.”

On the other hand, as we reach the ages of 50, 60, 70, we have been conditioned to dread each of those timeline marks as a terrible step towards decrepitude, dementia and depression. “And we get there and it's not that bad,” Applewhite said.

One of the things that's refreshing about



Applewhite biking through Vietnam

talking to Applewhite is her admission that she too, at one time, believed these stereotypes — and that we all have a lot of work to do to reverse and change them.

“I hugely overestimated the percentage of people over 65 in nursing homes,” she said. “It's 4 percent. I was astonished to hear that, just to learn, maybe I was more ignorant than other people, going into this, that the vast majority of people live independent lives until they come down with whatever kills them. They live independently, they enjoy their lives — they probably have some memory loss since cognitive capacity does diminish — but older people are functioning effectively in the world.”

She said the long-held belief that older people are depressed also doesn't hold up to study. “Older people actually have better mental health than young or middle aged people,” she said.

As a society, older folks need to learn not to accept these stereotypes. “Most people don't know these very basic facts and are stuck in a way more negative view of late life so that when they encounter discrimination, they don't challenge it,” Applewhite said. “When they forget something, they think, ‘Oh, it's because I'm 65,’ forgetting that when they were in high school, they couldn't find the car keys either.”

The same way of thinking applies to those pesky aches and pains. “If my knee hurts, I think, ‘Oh my knee hurts because I'm 65 and I'm getting

old,’” she said. You think that discomfort is a result of your age — without ever thinking your other knee doesn't hurt.

So how to overturn these long held beliefs? Let's start with the workplace, where older folks might feel the reason they can't

get a job is because of their age. “Well, you might need to hone your skills,” Applewhite said. “You might need to present yourself differently in the world.”

While she's not saying anti-older worker bias doesn't exist in a society that says older people aren't worth as much as younger people, part of her mission is to let people know that not one of the myths about older people in the workplace holds up. If business owners would look at the data, they would have a different perspective.

“(Older people) learn things just as well,” said Applewhite. “They are more job loyal. They are happy to learn new things. They are receptive to training. They stay on the job longer.”

All social change begins with awareness, she said. “The first step in any movement is to look at our own biases, which is uncomfortable because they're unconscious or unseen and no one wants to acknowledge that they're biased or that we're all biased,” she said.

As an example of how attitudes can change, she cited the way women were portrayed for decades as being less competent, less intelligent and unable to handle positions of authority.

“For a long time, until the women's movement, women just bought that,” Applewhite said. “Before (Betty Friedman's 1963 book) *The Feminine Mystique* came along, these middle class housewives, if they were unhappy, just thought, ‘I need a better washing machine or a fluffier soufflé.’ And they blamed themselves (for being unhappy).”

Applewhite thinks there's little difference in ageist attitudes toward older people based on their sex, but pointed out that for many white men, the first time in their life they experience being a minority and being discriminated against on the basis of something they can't change is when they retire.

“Since everyone ages, men are hostage to that as well as women,” she said. “The process of coming to terms with your changing identity and feelings of diminished visibility and lack of power are pretty universal.” Many older women, she added, are doubly victimized in life, having experienced sexism and now ageism.

While changing institutional attitudes toward aging might seem like a monumental task, individual attitudes may be even more difficult to reverse as many of those propagating them actually think they're being supportive.

“If somebody calls me ‘young lady,’ that's ageism,” Applewhite explained. “I'm not a young lady — it's patronizing and insulting to be called a young lady. It's the same with ‘You look good for your age.’ That's ageism. I may look good or I may look bad, but when you say you look good for your age, what you're saying is, ‘Oh, everyone your



Applewhite on a rafting trip

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STEREOTYPES page 7

Read more at www.fiftyplusadvocate.com

Local author's book offers soldiers' take on Afghanistan war

By Brittney McNamara

HUDSON —

In his new book, local author Mike Walling recounts the war in Afghanistan, but many of the words in the book are not his own.

Through stories from veterans, Walling's *Enduring Freedom Enduring Voices: U.S. Operations in Afghanistan* tells of what the war was like for those fighting it. The book chronicles veteran voices, giving readers a perspective Walling said is not often heard.

Walling's fifth book is an account of the nation's operations in Afghanistan from 2001 to 2013. Flowing through the war chronologically, the book focuses not on the larger geopolitical motives, but instead on the people who lived it and fought daily.

"I give the context of what occurred, then put you on the ground with people who were there, in the helicopters or gunships, in the cockpits of the men flying close air support," Walling said.

Walling, a former first class petty officer in the Coast Guard, said he hopes the book will contextualize the war.

"When you're watching the news, reading the paper, you're getting an ice cube off an iceberg of a story," he said. "I try to put people on the ground, I want them to taste the dirt, feel the air, and feel what it's like to all of a sudden get ambushed."

Beyond what he wants, however, Walling said the book is about doing justice to those who serve in the military. Taking away political motives and showing those who have dedicated their lives to defending their country, Walling said, tells a different story of the war.

"No matter what people think of the war, they've always supported the troops," he said. "I hope (readers will) get a better understanding of what these people went through on sometimes multiple tours."

➤ Stereotypes

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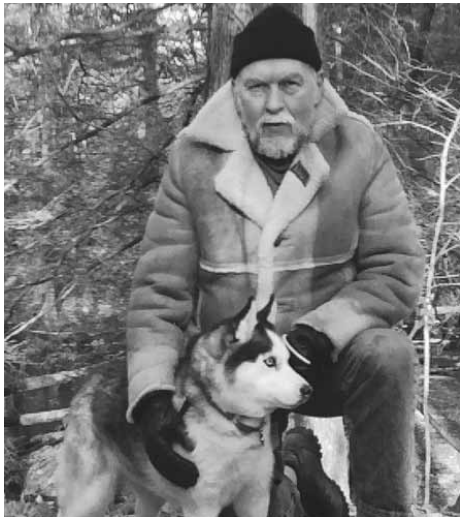
age looks worse than you.'

"There are two problems with that: It's a compliment that comes at the expense of everyone else your age but also it's based on the assumption that people at a given age look a certain way."

Applewhite has come up with a snappy answer to those comments with the aim of creating an "aha" moment. "When they say, 'You look good for your age,' I just say, 'You, too' — and then people have to stop and think, 'Gee, I thought I was being nice. Why didn't it feel like a compliment?' It didn't feel like a compliment because you made me think of my age."

She does admit these can be tough ethical calls. "It's really important to try and figure out accurate, low key ways for how people can change their attitudes or just point out a better way of phrasing something or approaching a situation as an effort to catalyze that all-important change in attitude.

"You don't want to be finger wagging — you want people to come to their own realization, like, 'Gee, I've been thinking about that a certain way and I have to change' — and that's a hard thing to do



Walling has spent five decades collecting stories from veterans from World War II, Korea, Vietnam, Iraq and Afghanistan. His research has taken him across the United States as well as abroad to such places as Afghanistan, Bosnia-Herzegovina, Croatia, Great Britain, Newfoundland, Nova Scotia, Russia and Afghanistan.

Walling said he got many never-before-told stories from military personnel while interviewing them at home and on bases in Afghanistan, simply because he was the first to ask. Many of the stories, he said, were heart wrenching.

"It was ripping my soul out," Walling said. "To understand, to a point, what they've gone through and what they have to live through for the rest of their lives is tough."

Walling said he feels it's his duty to record these stories since he has an outlet to do so. Though he said he doesn't know if there's something to learn from his book, there are truths that aren't always recognized.

"There are a lot of people out there who risk their lives routinely for a whole bunch of other people who don't have to or are unwilling to," Walling said. "That's what it amounts to." — AP/The MetroWest Daily News

without feeling defensive."

One way Applewhite furthers those discussions is through the "Yo, Is This Ageist?" offshoot of her blog (yoisthisageist.com), in which she responds to questions from her readers. (It's based on the similarly thought-provoking 'Yo, Is This Racist?' website).

Recent topics included whether it was proper for *The New York Times* to call New England Patriots quarterback Tom Brady "ageless," whether the way Madonna and Miley Cyrus portray themselves onstage creates an unrealistic desire for physical perfection and whether an otherwise healthy 70-year-old character on the TV show *House* should have been given a heart transplant.

Applewhite's website has a series of options to help. She's putting together a template for consciousness raising that will be downloadable for free. "The first step is to look at what's happening inside yourself. The second step is to try and move that out in the world and these conversations are the tool."

She spent much of the past year writing a book, tentatively titled, *This Chair Rocks: The Pro-Aging Manifest*, which she's currently shopping to publishers.

Its main message?

"Living means aging and aging means living."

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Mature motorists worse at texting and driving

DETROIT —

Older, more mature motorists — who typically are better drivers in many circumstances — are much worse than their younger counterparts when texting while driving, according to a Wayne State University interdisciplinary research team in the Eugene Applebaum College of Pharmacy and Health Sciences.

“The Effects of Texting on Driving Performance in a Driving Simulator: The Influence of Driver Age” explores the relationship between texting, driving performance and age. Randall Commissaris, associate professor of pharmaceutical sciences and Doreen Head, assistant professor of occupational therapy, said the results were surprising because they contradict those of other studies examining the connection between age and distracted driving.

“Generally, people believe that younger drivers are more easily distracted and therefore would be more susceptible to the dangers of

texting and driving,” said Commissaris. “However, our study — which included drivers ranging in age from 18 to 59 — demonstrated just the opposite. Although texting while driving had a negative impact on drivers of all ages, younger drivers were less distracted by texting, and older drivers’ performance was much worse because of their texting.”

Findings were based on the observation of participants who demonstrated proficiency at texting with one hand, owned smartphones and indicated they were prolific texters. On average, about 50 percent of all subjects had lane excursions — or crossed from one lane to another — while texting. But what shocked Commissaris and Head most was that as the age of drivers increased, so did the percentage of lane excursions. One hundred percent of drivers who were between 45 and 59 years old made lane excursions while texting as compared to about 80 percent of subjects between 35 and



44, almost 40 percent of participants between 25 and 34, and nearly 25 percent of drivers between 18 and 24.

“There is a perception that more-experienced drivers can text and drive more safely because they can manage distractions better than less-experienced drivers,” said Head. “Not only are adults sending the wrong message because they are telling young people to

do as they say, not as they do, but they are also putting themselves and others in harm’s way.”

Commissaris and Head plan to examine the impact of age on driving and texting further. They hope to find out why age difference is a factor.

“It is possible that, relative to younger drivers, older drivers spend more of their texting time looking at their cell phones and not at the road; this could increase driving errors in our older drivers,” said Commissaris. “Alternatively, it is possible that older drivers do not differ from younger drivers with respect to the time spent looking at their phones, but they are more distracted by texting while driving because they are less able to manage the cognitive demands of multitasking. Of course, it is possible that both of these factors may be contributing to the greater extent of texting-induced impairment of driving observed in older drivers. — Newswise

Members of Stockbridge club have met monthly since 1892

By Jenn Smith

STOCKBRIDGE —

They believe in education and enlightenment. They believe in community and charity. And they believe in the tradition of social networking over a proper high tea.

They are the ladies of the Tuesday Club of Stockbridge, who have continued to consistently meet since the group was first convened in 1892 among a group of

women belonging to St. Paul’s Episcopal Parish.

These women began calling together meetings a couple times a month in their homes, according to historic records, bringing together around 45 women.

According to current Tuesday Club Vice President Carole Owens, a historian, private members-only men’s and women’s “clubs” came into vogue during the 19th century, but for different purposes.

“There were men’s clubs, like the Lenox

“Our mission is to bring good to the community and provide cultural opportunity to its members.”

— Mary Hoeltzel

Club, that were built around a social something, like golf, polo, poker. Men’s clubs centered around sport and dining,” she said.

Norman Rockwell, for example, often

enjoyed supper with the Thursday Evening Club of Pittsfield.

“Women’s clubs were generally a daytime gathering. If you were a woman in the 19th century, you would not go out alone, and certainly wouldn’t go out at night. In those times, women weren’t educated past a certain point, so they were trying to enrich their knowledge,” Owens said.

In the early 1920s, the Tuesday Club

CLUB page 20

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Environment trumps genetics in shaping immune system

By Lauran Neergaard

WASHINGTON —

How a person's immune system does its job seems to depend more on environment and the germs he or she encounters than on genes, says new research that put twins to the test to find out.

After all, the immune system adapts throughout life to fight disease, said Stanford University immunologist Mark Davis, who led the work.

And while young children's immunity may be more influenced by what they inherit from their mother and father, the study showed genetic influences waned in adulthood.

"Experience counts more and more as you get older," said Davis, director of Stanford's Institute for Immunity, Transplantation and Infection.

Scientists know there is tremendous variation in how the immune systems of healthy people function. Davis asked if that's more a matter of nature or nurture, by comparing 78 pairs of twins with identical genetic makeups to 27 pairs of fraternal twins, who are no more alike genetically than any other siblings. Traits shared by the identical twins

are more likely to be hereditary.

His team used blood samples from the twin pairs, who ranged in age from 8 to 82, to track more than 200 activities and components of the immune system. In three-quarters of the measurements, differences between pairs of twins were more likely due to non-heritable influences — such as previous infections or vaccinations, even nutrition — than genetics, the researchers reported in the journal *Cell*.



Then they compared the oldest twins, 60 and over, to those under age 20, when the immune system is still maturing. The youngest identical twins had far more immune similarity than the oldest. That makes

sense, as older twins presumably haven't lived together in years and have had different exposures since childhood, they concluded.

When the researchers gave flu vaccine to participating twins, they found no sign that genetics determined how many flu-fighting antibodies were produced.

Most intriguing, the researchers found infection with a virus so common that most adults unknowingly carry it had a dramatic effect. Cytomegalovirus, or CMV, is dangerous to those with weak immune systems

but harmless for most people, and prior research has shown it can rev up parts of a healthy immune system. Sure enough, the Stanford team examined 16 pairs of identical twins where only one had CMV, and found big differences in nearly 60 percent of the components studied.

Does that mean people should try to prime the immune system, rather than working so hard to avoid germ situations?

"I'm a strong believer in the power of dirt," Davis said with a laugh, but this study actually can't offer health advice.

"This just says the environment plays a

huge role in shaping what your immune system looks like," he explained.

Investigating how that happens is important, said Dr. Megan Cooper, a pediatric immunologist and rheumatologist at Washington University School of Medicine in St. Louis, who wasn't involved in the study. She noted that autoimmune diseases tend to run in families but whether someone born genetically susceptible gets sick may be shaped by their exposures.

"It's when you get those infections" that may be key to the impact on the immune system, she said. — AP

Do heart patients fare better when doctors away?

By Lindsey Tanner

Doctors joke that if you're going to have a heart attack, the safest place would be at a big national gathering of heart specialists. But a new study suggests some older hospitalized heart patients may fare better when these doctors aren't around.

Survival chances were better for cardiac arrest patients and for the sickest heart failure patients if they were treated at teaching hospitals during the two biggest national cardiology meetings, compared with those treated during weeks before and after the meetings. Also, some of the sickest heart attack patients got fewer invasive proce-

dures during meeting days, versus those treated at other times — but that didn't hurt their odds of surviving, the nine-year study found.

The findings were only at teaching hospitals, typically affiliated with medical schools and involved in doctor training and sometimes research; these are the workplaces for many doctors who attend major medical meetings. No differences were seen in death rates at non-teaching hospitals.

The evidence is only circumstantial and the study lacks information on whether the patients' own doctors actually attended the meetings.

HEART page 10

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Reducing belly fat is key to optimum exercise results

By Matt D. Essex

Toward the end of 2014, you probably missed the breaking news that could impact your New Year's resolution. CBS reported on the results of a 12-year long study conducted by the Harvard School of Public Health. Working with subjects an average age of 58, it focused on which type of exercise is most effective for reducing belly fat as we age.

Healthy Lifestyle

According to the study, waist circumference or "belly fat" has actually been shown to be a very important marker for many serious health conditions including: Diabetes, cardiovascular disease, COPD and metabolic syndrome.

Whether you're an avid exerciser or one of the millions who resolved to get back in

shape and be more active in 2015 — you want to ensure the type of exercise you are investing time doing provides the most bang for your buck.

The Harvard study, which was summarized by Jessica Firger at CBS News as follows:

"Long-term weight training is associated with less waist circumference increase, [while] moderate to vigorous aerobic activity is associated with less body weight gain in healthy men (over 50 years of age). Further studies are needed among women, older men and other ethnic groups to compare the frequency, volume and intensity of weight training on waist circumference change."

As is typical with most research it ends with a cliffhanger. Design your 2015 exercise plan with this in mind: After age 40 men and women begin losing approximately 1 to 2 percent of lean body (skeletal muscle) mass per year, on average. This one seemingly basic

fact actually has domino-like implications for our health.

If you decide to add strength activity to your lifestyle, here are some tips to ensure the best results:

- Don't use the chair and the bands. There are several chair-based classes that promote themselves as strengthening. In reality, they're just aerobic activity classes in disguise. They don't offer enough resistance to stimulate your muscles and bones to get stronger. If you're not chair bound your activity doesn't need to be chair-based.

- Light weight and high repetitions won't strengthen muscle. If you're not pushing each muscle and bone to a point of fatigue it won't get any stronger. Light weights and high repetitions performed to an arbitrary number is typically aerobic activity.

- Make sure your body is ready for strength activity. If you've never lifted weights or it's

been a while, start with an evaluation to ensure you're ready. Work with qualified experts who specialize in strength and aging if you are a novice to strength activity. When hiring a professional make sure they are familiar with updated research and have appropriate credentials.

- Get social. The power of strength activity rises exponentially when it becomes part of your way of life. A strong social network — friends you are working out with, family who see your results and encourage you, and health professionals who help you find your motivation and inspiration — makes a huge difference in long-term success.

Matt Essex — Founder ActiveRx. He can be reached at messex@activerx.com Call ActiveRx in Westborough for additional information at 508-329-1163. "Archives of articles from previous issues can be read at www.fiftyplusadvocate.com"

► Heart

Cont. from page 9

"The solution is not to get the cardiologists to have meetings every week," said Dr. Anupam Jena, a Harvard Medical School economist and internist and the study's lead author. Identifying specific treatments that were given or not given during meeting times would be a better solution that might lead to better outcomes, Jena said.

It might be that doctors who don't attend the meetings are less inclined to try the most invasive treatments, and that a less intensive approach is better for the sickest patients, Jena said.

The study was published in a recent issue of *JAMA Internal Medicine*.

The research is provocative and might help doctors figure out how to lower patients' death rates throughout the year, said Dr. Rita Redberg, the journal's editor.

Redberg is a cardiologist at a teaching hospital at the University of California, San Francisco. She usually attends the national American College of Cardiology and American Heart Association meetings, but said she does not think her absences have affected patient outcomes.

"I'm from a big academic institution so there's always coverage while I'm gone," Redberg said.

The authors analyzed 30-day death rates

for Medicare patients hospitalized during the annual meetings in the spring and fall, which typically draw thousands of doctors. Data included nearly 3,000 patients at teaching hospitals during meeting days from 2002 through 2011. The comparison group was about 18,000 patients hospitalized on the same days during the three weeks before and three weeks after the meetings.

The 30-day death rates for meeting-day versus non-meeting days patients were:

- 60 percent versus 70 percent for cardiac arrests.
- 18 percent versus 25 percent for the sickest heart failure patients.
- No difference for the sickest heart

attack patients: about 39 percent for both groups.

Among the heart attack patients, the meeting-days group had fewer heart stent procedures to open blocked arteries. The researchers found no difference in rates for a few invasive procedures for cardiac arrest and high-risk heart failure patients, but said there may have been differences in other treatments not included in the study that might explain the results.

Dr. Patrick O'Gara, president of the American College of Cardiology, said the study's observational design makes it impossible to know if the national meetings had any effect on patients' survival. — AP



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Family celebrates a milestone birthday at sea

By Ellen L. Weingart

With my mother-in-law's 90th birthday approaching, it didn't take our family long to decide that a seven-day Caribbean cruise would be the ideal way to celebrate this remarkable lady.

We chose to sail aboard Holland America Line's Westerdam from Ft. Lauderdale, Fla., with port stops in Grand Turks and Caicos, Puerto Rico, St. Martin and Holland America's private island in the Bahamas, Half Moon Cay.

Ruth is no typical 90-year-old, assuming such a person exists. She lives independently in her own apartment in New York, exercises daily, takes advantage of the city's museums, regularly attends the theater, is up on all the latest books and movies and keeps in touch with family and myriad friends via e-mail. We wanted to make sure she had a birthday celebration that matched her amazing vitality and zest for life.

Cruises provide activities for every age and interest so with our group of eight including Ruth's three baby-boomer children, their spouses and her 17-year-old granddaughter, we were sure we'd all have a wonderful time. We were not disappointed.

From the time she boarded, there was no doubt that Ruth's birthday would be celebrated in style. A happy birthday sign and a sparkly ribbon decorated her cabin door and her cabin was festooned with birthday balloons. Passengers celebrating a special event can also extend the festivities with flowers, wine, photos and other gifts purchased on board.

But the highlight for us was the birthday dinner in the Pinnacle Grill, Holland America's fine-dining option serving elegant beef and seafood dishes at a reasonable upcharge. We made reservations for Ruth's birthday soon after booking the cruise, notifying the restaurant of the milestone we

would be celebrating and arranging for a birthday cake and champagne to mark the occasion.

From the moment we walked in, it was clear that Ruth was the star of the evening. She was warmly welcomed by the maitre d' and as soon as Ruth found out he was from Germany, they embarked on a lively discussion of the various places she visited on her trips to Germany. Both the service and food were impeccable, topped off by a delicious birthday cake.

The cruise provided us with many opportunities to be together, something that has happened all too rarely with our family scattered geographically. The Westerdam is classified as "mid-sized" (1,900 passengers) and was small enough that we would run into one another at the Lido Deck cafeteria at breakfast and lunch. Similarly, we'd see each other at the pool or in one of the ship's beautiful lounges.

The family always met for dinner, frequently going on together to take in the evening's entertainment, including a family-appropriate ventriloquist, a comic and two production shows with computer-generated scenery. Or we would gather in one of the various lounges to listen to music ranging from rock to classical. And we would meet for the daily trivia competition where our wide range of age and accumulated knowledge made us competitive — although we never won.

But we also had ample opportunity to pursue our individual interests.

The gym rats among us, primarily 90-year-old Ruth and one of my sisters-in-law and her spouse, spent early mornings on the treadmill, watching the sea pass in front of the gym's large, ocean-facing windows.

My other sister-in-law and her daughter took advantage of the onboard spa for some mother and daughter pampering.

Those of us on board with a culinary bent, could indulge ourselves with the almost daily live cooking show at the Culinary Arts Center featuring one of the Westerdam's top chefs and some tasty samples.



Ruth (third from l) celebrates her birthday with her family at the Pinnacle Grill.

My husband and I, mindful that the New England winter was only just getting started, spent time around the pools and in the hot tubs.

For younger families, Holland America also provides supervised activities for children, including Club Hal for children ages 3 to 12, and The Loft, an "adult-free" area where teens 13 to 17 can enjoy music, games, movies or just hang out. Nighttime baby-sitting is also available.

Port stops also offered activities for every age group and interest, ranging from kayaking, snorkeling, biking and horseback riding, to island tours, lolling on the beach and of course, shopping. In St. Martin, my husband and I elected to take an art tour, visiting various artist studios and enjoying the marvelous scenery. Other family members enjoyed the port area shopping. In Grand Turks, we stepped off the ship to discover a whole history of the United States space program that we had little previous knowledge of. And there were stops where we just elected to stay on board and enjoy the ship.

Upon our return to Ft. Lauderdale, the celebration continued with Ruth's two grandsons and their families, including her three little great-granddaughters, joining the festivities.

If you go ...

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How to choose the right hearing aid for specific needs

By Linda A. Johnson

Tired of making people repeat themselves? Is cranking up the volume on the TV no longer enough help?

That's a signal it's time to get your hearing checked and consider a hearing aid. In the last several years, the technology has advanced tremendously, hearing aids have become less conspicuous and insurance coverage has improved.

"This is not your grandfather's hearing aid," yet many people have that outdated view, said audiologist Carolyn Smaka, editor of the website www.audiologyonline.com.

Today, virtually all hearing aids are digital and they do far more than boost volume. They're essentially minicomputers, precisely programmed for each patient, to boost sounds and adjust tones where they need it most, much like the way stereo equalizers adjust various frequencies to produce the best sound, said Smaka.

They're also pricey: Most run from \$1,000 to \$6,000 each, including follow-up. Nearly everyone needs two, and they usually must be replaced about every five years.

"People should realize that their hearing loss is much more noticeable than any hearing aid will be," said Kim Cavitt, an audiology consultant in Chicago and president of the Academy of Doctors of Audiology.

About 30 million U.S. teens and adults have impaired hearing, often caused by excessive noise at work or leisure, such as loud music. That includes nearly 1 in 10 adults aged 55 to 64; 1 in 4 aged 65 to 74; and half those 75 and older.

Hearing impairment can cause frustration, social isolation and depression, so hearing aids can greatly improve daily life, though they can't completely restore hearing.

With all the available options, selecting a device is complicated, but most manufacturers provide a trial period entitling you to a refund if you're not satisfied.

Here's a roadmap:

- Talk with your doctor. A thorough exam is essential, as about 15 percent of patients with hearing problems are found to have ear infections, medication side effects, benign tumors or other problems hearing aids can't fix, Cavitt said.

- Seek recommendations. If a hearing aid is appropriate, it's crucial to pick a hearing professional who answers all your questions and listens to your concerns. Options include an audiologist, who has a master's or doctoral degree, or a hearing aid dispenser, who may be equally knowledgeable but may not have an advanced



degree. Be sure to ask about qualifications and fees in advance.

Start with your doctor, but also ask relatives and friends who have a hearing aid, or search the databases of professional organizations, such as www.audiology.org.

- Check insurance coverage. The initial evaluation normally is covered, but until recently the hearing aid, fitting and follow-up were rarely covered, except by the Veterans Administration. Today, roughly 30 percent of plans cover at least some of that, according to Cavitt. Your out-of-pocket costs may limit what options you choose.

- Interview a couple hearing aid providers. Besides an initial evaluation, you'll need a fitting that includes programming the device and training on insertion, clean-

ing and battery changing, plus two to three follow-ups to fine tune the hearing aid's settings.

- Get tested. At this stage you should receive a 45- to 60-minute test analyzing your hearing loss, such as whether your problem is mainly with low frequencies or high frequencies. High frequencies usually go first as you age, making it difficult to understand children and women.

- Discuss your specific problems. For many, that's trouble talking on the phone and hearing conversations at a party or restaurant. For those still working,

it may be difficulty participating in office meetings.

Knowing those details will help your audiologist pick the most suitable device. If it's programmable, you can have multiple settings for specific situations, such as quietly listening to music, trying to hear over all the background chatter at church bingo or carrying on a conversation when you're driving and can't watch the passenger's face.

- Review optional features. If you want multiple settings for different sound situations, you might consider a remote control to switch between settings.

HOW page 20

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Gov. Jane Swift got it right on Home Care

By Al Norman

In the middle of January 2015, a group of six elder advocacy groups wrote a letter to Gov. Charlie Baker, urging him not to cut the state's home care budget for seniors. The governor has the option to use what are known as his "9c" powers to reduce funding without legislative approval. The letter was sent to Gov. Baker around two weeks before any cuts would be announced.

I was asked by a reporter who saw our letter to the governor, "How do you know that home care is on the cuts list before the list comes out?" I replied: "Because we're always on the list."

Unfortunately, this is the history of programs to help seniors live at home:

- In July of 1990, Gov. Michael Dukakis cut \$7 million from the home care program, and the following December, another \$4 million.

- In 2002, Gov. Jane Swift proposed cutting \$6.5 million from home care in 9c cuts — but later withdrew the plan.

- In October of 2008, Gov. Deval



Patrick cut \$7 million from home care, and in November of 2014, he cut another \$1.5 million from home care.

Push Back

Of all these governors, Jane Swift was the one who realized that cutting care at home made no sense from a financial point of view. In 2002, I led a group of seniors to meet with Gov. Swift's Secretary of Administration and Finance, Mike Sullivan. We met in his office for 45 minutes. A few days later, Gov. Swift released a list of 130 budget items that were being cut — but home care had been removed from the list. Swift told the media: "Cuts to direct services to folks in home care eventually show up on your balance sheet in a more expensive way." She understood that investing in home care provides an immediate return: a senior today who is eligible for nursing facility care — but who is kept at home instead — saves taxpayers the cost of a nursing facility today.

Since the year 2000, a total of 4.5 million patient days have been cut from the MassHealth nursing facility budget.

This year, the reduced level of nursing facility use will save state and federal taxpayers \$853 million. We call that "the home care dividend."

The federal government for several years has been begging states to shift their spending away from institutions, and towards home care. They have a vested interest, because they pay for half of the MassHealth program. Massachusetts will receive roughly \$110 million in new federal funding this year because the Commonwealth has agreed to invest more funding in home and community-based services. But at the same time, Gov. Patrick cut home care just three months ago. It makes no sense to tell the federal government we will spend more on home care, and then cut home care. But that's what the Patrick administration did.

The first governor to use the phrase "community first" was Mitt Romney. In 2006, it was Romney who signed legislation I helped write, the "Equal Choice" law, which says that people on MassHealth have the right to be care for in the "least restrictive setting." Gov. Patrick was prepared to file a federal waiver to increase home care funding.

At one point in the budget process, Patrick had requested \$41 million for a so-called "1115 waiver" to encourage "flexible service options in the community for those who might otherwise need to seek services in a facility setting." But by June 2009, the 1115 waiver had been abandoned, and home care was facing cuts. The recession had started — a downturn from which the home care budget has still not fully recovered. The home care accounts today are lower than they were in fiscal year 2009 — seven years ago.

Home Care is a smart investment that attracts more federal revenue, and gives seniors the care they want, where they want it. For the cost of one nursing facility bed, we can keep six elders at that same level of care at home.

Gov. Swift was right: Cutting home care "eventually shows up on your balance sheet in a more expensive way."

I believe that Gov. Baker will recognize a good return on investment when he sees it.

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

Obama challenges GOP again, this time with budget

By David Espo

WASHINGTON —

With higher taxes on the wealthy and billions in new spending, President Barack Obama's no-balance budget lays down an audacious challenge to Republicans who swept to full control of Congress last fall and now claim a mandate to eliminate deficits over the next decade.

Analysis

Make that the second audacious challenge in the past three weeks — coming after a State of the Union address in which Obama threatened to veto Republican legislative priorities and demanded lawmakers enact his own.

Then, as now, his objective was in part to help Democrats in Congress recover from their election drubbing, and in part to position them and his party as the champion of the middle class in advance of the 2016 campaign. To do that, he tars Republicans as apostles of a "mindless austerity" that has

set back the economic recovery and was woven into a recent history that includes a partial government shutdown and flirtation with default.

The word "austerity" appears seven times in a 17-page introduction, none of them favorable and usually attributed to Republicans and described as mindless or needless.

Now, Obama and budget say, those days are over.

To make the point, he called for about \$1.5 trillion in tax hikes, mostly on wealthy corporations and individuals as well as smokers. Enacting new immigration policies like the ones approved in the Democratic-controlled Senate last year is estimated to raise another \$500 million in higher tax revenue over a decade, as immigrants freed from the threat of deportation enter the workforce.

Spending is roughly flat: \$50.3 trillion over a decade in the president's budget, compared with \$50.4 the Office of Management and Budget calculates would otherwise be spent. Within those totals, though, Obama proposes hundreds of billions in cuts to

Medicare providers on one side of the ledger, and nearly \$500 billion in new highway and bridge construction, free community college for two years and other, smaller programs such as a National Park Service Centennial Initiative.

Further irritants to Republicans are embedded in the administration's tax-and-spending plan, including steps to fight climate change that they have ridiculed and the continued existence of the health care plan the GOP has vowed to uproot.

By Obama's reckoning, this all adds up to persistent deficits, estimated at \$687 billion in 2025 despite what the administration predicts will be relatively strong economic growth and low unemployment.

Obama is at pains to say that's not so bad after much higher deficits in recent years. "The key test of fiscal sustainability is whether debt is stable or declining as a share of the economy," he says in his budget message. "The budget meets that test."

That may be fine for Obama and Democrats in Congress, but Republicans are betting their political election gains on a different test entirely.

"Our budget will balance, and it will help promote job creation and higher wages, not more government bureaucracy," House Speaker John Boehner said in a statement that also said the president wants to "impose new taxes and more spending without a responsible plan to honestly address the big challenges facing our country."

Republicans have passed a 10-year balanced budget through the House each year since they took power in 2011. The Senate, now under GOP control, intends to do the same thing, according to Sen. Mike Enzi, R-Wyo., chairman of the budget panel. In a statement, he and Rep. Tom Price of Georgia, head of the House Budget Committee, said Obama is advocating more spending, more taxes and more debt.

If they succeed in agreeing on a balance budget plan, House and Senate Republicans will be obliged to pass separate legislation to make it happen, deep spending cuts included.

Judging from his State of the Union speech and his budget, Obama will be waiting.

With a veto pen and a talk about the perils of austerity. — AP

► Social

Cont. from page 5

numbers we baby boomers would represent and the impact we would have on the program. He never could have predicted that people would live so much longer and healthier lives. Yet, his original premise to keep retirees out of poverty still exists.

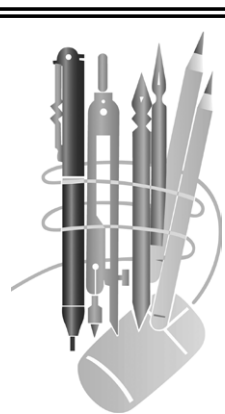
According to the Center on Budget and Policy Priorities, almost 90 percent of people aged 65 and older receive some of their family income from Social Security. Without those benefits, 44.4 percent of

older Americans would have incomes below the official poverty line.

Just consider Ida May Fuller, who by the time she died at age 100 in 1975 had collected \$22,888.92 in benefits. She once told a reporter that the money, "come pretty near paying for my expenses."

For these reasons, Social Security should be above political opportunism — no matter which party rules.

Sondra Shapiro is the executive editor of the *Fifty Plus Advocate*. She can be reached at sshapiro@thefiftypluslife.com. Read more at thefiftypluslife.com.



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After the diagnosis of Alzheimer's disease

By Micha Shalev

Are you kidding me, I have what? It can't be true. It has to be a mistake. When you first receive a diagnosis of Alzheimer's, it can feel like the world is slipping away from you. It can be hard to move at all, much less stay positive and start making the future plans that will make the later stages of the disease easier both for you and those around you. You are really "angry". It's normal to have these feelings but the important thing is to find ways to cope, and continue to have fun and laugh.

There are several methods and diagnostic tools to help determine fairly accurately whether an individual with memory problems has possible or probable Alzheimer's disease or some other memory or neurological problem.

Possible Alzheimer's disease is defined as a dementia that could be due to another condition. Probable Alzheimer's disease

means there are no other causes for the symptoms that can be found.

Some individuals with memory problems have a condition called amnesic mild cognitive impairment (MCI) that often precedes Alzheimer's disease (AD).



Caregiving Tips

Individuals with MCI have more memory problems than normal for individuals their age, but their symptoms are not as severe as those seen in AD. Not all individuals with MCI develop AD. A definitive diagnosis of Alzheimer's disease can only be determined by an autopsy of the brain after death. At specialized centers, doctors can diagnose AD in a living person correctly up to 90 percent of the time.

A physician will diagnose Alzheimer's in a living person by:

- Asking questions about an individual's overall health, past medical history, ability

to perform daily activities, and changes in behavior and personality.

- Conducting memory tests, problem solving, attention, counting, language skills and other abilities related to brain functioning.

- Carrying out medical tests of blood, urine, or spinal fluid.

- Collecting information provided by family members or other caregivers about changes in a person's day-to-day function and behavior which may help in diagnosis.

- Performing brain scans, such as an MRI, PET scan or a CT scan.

A complete diagnostic workup for AD is lengthy and costly and may take as long as a year or more before a final diagnosis is made. After the diagnosis is made, the family and patient may need considerable guidance and counseling.

Family members often wonder whether they should tell their loved one of the diagnosis. While it is devastating to learn that your loved one has AD, it is frequently more stressful to be aware of the signs and

symptoms and yet have no answer for the problem. The family and the patient should agree before the diagnosis is made so appropriate actions are taken. Not knowing always presents the risk of the person finding out accidentally. Open and honest communication is usually the best, but some families have their own reasons for choosing a different path. Families often look to healthcare professionals for guidance. However, physicians are advised to disclose the diagnosis to their patient.

The American Psychiatric Association recommends advising Alzheimer's disease patients and their families of the need for financial and legal planning due to the patient's eventual incapacity.

Micha Shalev MHA CDP CDCM CADDCT is the owner of Dodge Park Rest Home and The Adult Day Club at Dodge Park located at 101 Randolph Road in Worcester. He can be reached at 508-853-8180 or by e-mail at m.shalev@dodgepark.com or view more information online at www.dodgepark.com

Not always easy enforcing rules in housing community

By Marianne Delorey©

I've been in property management for most of my adult life. It is a great job and one that has provided me with a fair amount of excitement but mostly, a sense of doing something important. I help people. I provide them with housing that is safe, attractive and affordable. Mostly, I have worked with the elderly and people with disabilities.



Housing Options

for all sorts of issues — minor ones like smoking to major ones like dealing drugs. Of all these people, the one I am most grateful for was a man I'll call Jim. Jim had to go. He was getting to the point that he was "interfering with the quiet enjoyment" and "interfering with the management of the property." Both of these terms are somewhat vague, but

encompass a wide range of behavioral problems. Honestly, I forget the exact nature of Jim's infractions. I remember him as a bit of a know-it-all and not a person I wanted to know better. The community was definitely better off without him. I don't remember losing any sleep the day he left.

But, as fate would have it, I would run into him again. I had run into former tenants before. It could get awkward asking after them knowing that I put them on the street, but I tried to be polite and show that I cared, even if I could not take them back. In this case, however, the conversation was brief, but not at all awkward.

I was walking down the street when a car driving past stopped in traffic. Jim jumped out of the driver's seat and opened the door, calling to me, "Marianne."

One of the hard parts of my job has always been enforcing the rules. I wasn't a natural boss. I was too kind to see the big picture and in the early days, I let a lot of people get away with behavior that created problems for the community. It took me a long time and some amazing mentorship early in my career to understand how much better it is for everyone (including the offending tenant) to hold people accountable for their own actions. Still, nobody goes home at the end of the day and celebrates because they won an eviction. Even when enforcing the rules is necessary, nobody in the helping professions wants to see someone suffer, even when it is self-inflicted.

I've played a hand in evicting people

thank you that I never thought I'd get. Sometimes knowing that the hard parts of your job are important is enough. But on that one occasion, I had proof.

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

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Is a home equity line of credit a fit for you?

By Alex Veiga

Rising home values and low interest rates are a powerful combination for homeowners looking for more financial breathing room.

The trend, fueled by the two-year housing recovery, has helped spur many borrowers to take out a home equity line of credit against the value of their home.

Such a loan, also known as a "HELOC," can give borrowers more financial flexibility and typically at a lower interest rate than a credit card. But HELOCs can also pose risks, should interest rates rise sharply or home values plummet.

When the housing market crashed in late 2007 it wiped out the equity many borrowers had in their home, prompting lenders to slash their available credit. Others overextended themselves financially, assuming home prices would continue to rise and boost their ability to use borrow more money against their equity.

That's not deterring many homeowners from using a portion of their homes' value as a piggy bank. Available credit extended via HELOCs to U.S. homeowners jumped 27 percent to \$120 billion in the 12 months ended June 30, according to Experian Decision Analytics data.

"It's important to think about whether the payments are affordable and whether it's worth putting the equity in your house

at risk," said Debbie Goldstein, executive vice president at the Center for Responsible Lending.

Here are five tips to help determine whether a HELOC is right for you:

1. Know the basics — Home equity lines of credit essentially function like a credit card or a traditional line of credit. Borrowers can tap a portion of their available credit, pay it off, and use it again for the term of the credit line or draw period, which is typically 10 years.

After that, any unpaid balance converts to a loan that must be repaid over a predetermined period, typically 10-20 years. In some cases, a lender will require payment in full at the end of the draw period.

One key benefit HELOCs have over standard bank loans that are not secured by real estate is borrowers can deduct their interest payments on balances up to \$100,000 against their tax liability.

2. Consider the interest rate — Because the terms of HELOCs can vary, it's essential to understand how interest rates will be applied on your loan.

Beyond determining the length of the draw period and starting interest rate, you'll want to know whether the terms of the loan include payment in full at the end of the



draw period, and how much time, if any, you'll have to pay back the balance.

Lenders generally base the starting interest rate on HELOCs on the prime rate. Look for lenders that offer to cap that prime rate over the life of the loan, which will protect against a spike as rates fluctuate over the draw period.

Interest rates on HELOCs have been trending lower this year. The average now is around 4.87 percent, according to Bankrate.com. That's based on a \$30,000 line of credit with a combined loan-to-value ratio of 80 percent. The loan-to-value ratio is determined by weighing how much a borrower would owe on home loans against what the

property is worth.

Many economists predict loan rates could go higher beginning next year, when the Federal Reserve is expected to start raising interest rates.

3. Don't assume you'll qualify — Having equity in your home doesn't automatically qualify you for a HELOC.

Expect that lenders will want to review your credit and income history going back a couple of years, as well as a couple of months of bank statements.

"They're going to look at your ability to have saved, your ability to have cash reserves," said Cyndee Kendall, regional mortgage sales manager at Bank of the West. "Do you have the wherewithal to pull from savings to make a payment if need be."

The size of your credit line will also depend on how much equity you have relative to any other mortgages on the property. This is assessed by determining your combined loan-to-value ratio.

It's generally calculated by adding what you currently owe on your mortgage with the proposed credit line amount, then dividing that total by the home's current

EQUITY page 19

Pre-planning guarantees your wishes are met.

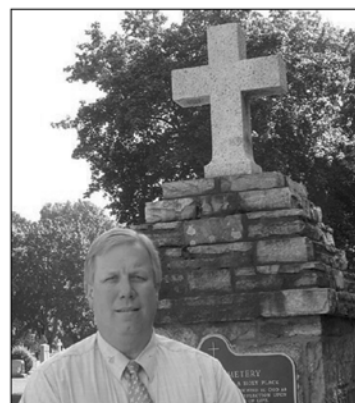


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- Avoids inflation by purchasing at today's prices
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- Selections are less limited than in the future
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A message from the director...

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

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Wake up your lazy asset with new lending option

By Alain Valles

If you are like most people your two largest retirement assets are your investment savings and your home. However, due to its illiquidity, the home is seldom part of the retirement planning conversation. It has simply been too hard to turn home equity into ready cash.

But a paradigm shift is occurring in retirement planning. Real estate is no longer a disregarded or "lazy" asset on the household balance sheet.

Insightful financial advisors and their clients are including home equity as part of goals-based retirement planning thanks to a new financial product called the R-LOC™ (Retirement Line of Credit), which provides access to this critical asset to help ensure long-term retirement success.

The R-LOC is an advanced, yet simple planning strategy that can solve the retirement quandary of balancing future quality of life desires and needed cash flow requirements, while offering protection against the uncertainties of inevitable life events. One of the greatest advantages of an R-LOC is it does not detract from an existing retirement plan. On the contrary, an R-LOC complements and strengthens your current strategies and provides the opportunity to better fund



Reverse Mortgage

your plan.

The R-LOC capitalizes on the features of the improved federally insured Home Equity Conversion Mortgage (HECM), also known as a reverse mortgage. Past reverse mortgage programs had high costs and other negative features. The new HECM program has drastically reduced costs by over 40 percent in most situations, while affording homeowners increased benefits and protection.

As a result, the retirement financial planning conversation has changed. The R-LOC is intended for a wider range of people who desire to optimize their current retirement plans without changing their lifestyle and standard of living.

An R-LOC allows a homeowner 62 years old or older to have access to a percentage of their home's equity for use today or for a rainy day. In essence, an R-LOC provides a new source of tax-free cash if desired, or as it is needed. The cash can be received as a lump sum, a monthly check for life, and/or as a line of credit that may be accessed at a later date. All this without giving up control and, most importantly, providing the option to never again make a monthly mortgage or home equity loan payment.

R-LOC features include:

- Access to tax free cash when needed;
- Line of credit that grows over time

regardless of home value;

- No required monthly mortgage payments;
- Pays off current mortgage and other debts;
- Supplements your Social Security; and
- May close in a trust or life estate.

Invest a few moments to learn how an R-LOC can improve your ability for a successful retirement plan at www.retirementloc.com.

mentloc.com.

Alain Valles is President of Direct Finance Corp. with over 25 years of experience. He has a Masters in Real Estate from M.I.T., an MBA from The Wharton School and achieved the Certified Senior Advisor designation. He can be reached at 781-724-6221 or by email at av@dfcmortgage.com. Read additional informational articles on www.fiftyplusadvocate.com.

► Equity

Cont. from page 18

appraised value.

For example, someone who owes \$200,000 on their mortgage, wants a \$30,000 HELOC and whose home is valued at \$350,000, would have a combined loan-to-value ratio of 65.7 percent.

Most lenders won't approve HELOCs where the borrower's combined loan-to value ratio is above 80 percent.

Most lenders won't approve HELOCs where the borrower's combined loan-to-value ratio is above 80 percent, though some go as high as 90. Ideally, borrowers need at least 20 percent equity, said Mike Kinane, retail lending senior product manager at TD Bank.

4. Weigh the risks — Relying on a

fixed-rate loan to pay back the balance of a HELOC years into the future means you won't know what that rate is for many years and could end up paying significantly more over time.

"That (rate) will be whatever the market rate is at that moment 10 years from now," Kendall said.

5. Consider another option — If you need funds that you know you won't be able to pay off within a couple of years, consider a home equity loan, said Kevin Meehan, certified financial planner at Wealth Enhancement Group.

Such loans also tap home equity, but generally come with a fixed principal and interest payment. This eliminates the potential shock payment risk of a variable interest rate.

"Instead of accessing a HELOC, if you have debt elsewhere, it might be the better long-term decision to roll it all together ... where you have longer to pay it off with no interest rate risk," Meehan said. — AP



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Feds propose ending '3 Day Hospital Rule' for Medicare

The federal agency that oversees Medicare and Medicaid accounted in early December that it is proposing a series of changes to the rules that affect Accountable Care Organizations and their elderly patients.

The Centers for Medicare and Medicaid Services (CMS) released its much anticipated accountable care organizations (ACOs) proposed rule titled, "Medicare Program; Medicare Shared Savings Program; Accountable Care Organizations." According to the group Leading Age, there are several proposals that could impact the long-term care community:

- Waivers for the skilled nursing facility (SNF) 3-day stay requirement.
- Waivers for referrals to post-acute care settings.
- Transitional care management codes (TCM).

For decades, Medicare has had what's called the "3-Day Stay Rule," which required a patient to have a three-day stay in a hospital in order for Medicare to pay for a stay in a skilled nursing facility. Medicare is only a short-term payer of nursing facility care —

but without this prior three day hospital care, it will pay nothing for nursing facility care. CMS wants to waive the rule for ACOs because they believe a waiver of this requirement would allow ACOs to achieve cost savings and to improve care coordination that would incentivize them to participate in the ACO program. CMS notes that they believe the greatest savings could be achieved by permitting the elimination, where appropriate, of the entire prior hospital stay and improving quality of care for patients who can receive appropriate care through a direct admission to a nursing home. Massachusetts already has a waiver just for people who are enrolled in an ACO in the Commonwealth.

In a second area under consideration,



CMS would give the ability to recommend high-quality nursing facility and home health agency (HHA) providers whom they have established relationships, rather than presenting all options equally.

CMS has proposed allowing some ACOs to waive the requirement that a hospital "not specify or otherwise limit the qualified provider which may provide post-hospital home services." CMS indicate that they are not considering a complete waiver of the requirement that a hospital, as part of the discharge planning process not specify or otherwise limit the qualified providers that are available to a patient.

However, under a waiver discharge planners in hospitals would have the flexibility to recommend high quality post-acute providers

with whom they have relationships (either financial and/or clinical) for the purpose of improving continuity of care across sites of care.

CMS acknowledges that such a waiver would not cover a situation in which a post-acute provider paid the ACO participant or ACO provider/supplier to be included as a recommended post-acute provider. In addition, CMS emphasizes the need for ACOs to respect the patient or patient's family's preference regarding the choice of a post-acute provider.

CMS is also taking comments on Transitional Care Management (TCM) codes, which pay a patient's physician or practitioner to coordinate the patient's care in the 30 days following a hospital or SNF stay. CMS believes that providing separate payment for the treatment physicians provide patients prior to discharge ensures better continuity of care for these patients and helps reduce avoidable readmissions. But the CMS rules do not require doctors to coordinate post-discharge care with any of the community groups already providing such care.

➤ Club

Cont. from page 8

of Stockbridge moved out of homes, and began holding regular meetings in the St. Paul's vestry space. In 1972, when the parish re-purposed the space to become a nursery school, the Tuesday Club relocated with the blessing of the First Congregational Church, to the church's Jonathan Edwards Room at 4 Main St., where the women still gather today.

"The Tuesday Club of Stockbridge is large in thought, word and deed, in the spirit of education, community and giving," Owens said.

"The object of the organization is to foster interest in literature, art, music, history, science and civic affairs and to promote cordial relationships among members, and also to sponsor and support programs for the welfare of the community" said current president, Claudia Shuster. "I attribute our longevity to the maintaining of these objectives as paramount. In addition our formal teas represent a tradition that many hold dear."

Most of the ladies of the group are of retirement age. While the majority of its 50 or so members are Stockbridge

residents, membership has also been extended to include women from West Stockbridge, Lee, Pittsfield, even New Lebanon, N.Y.

They meet at 2 p.m. on the third Tuesday of each month, following the traditional academic calendar year.

While the speaker portions of their meetings are open to both women and men of the public, one must be invited then formally apply to become a Tuesday Club member. Upon acceptance, she then agrees to pay club dues in addition to serving on the Tea Committee or another Tuesday Club subcommittee.

"Their practice is a wonderful step back in time, and at the same time, the topics are very up to date," said Stockbridge Library Archives and Museum Curator Barbara Allen.

Allen said the library maintains most of the original Tuesday Club records of meetings and milestones.

"Our mission is to bring good to the community and provide cultural opportunity to its members," said Mary Hoeltzel, who chairs the programs committee.

She's been a Tuesday Club member for nine years, joining when she moved to Stockbridge and into her aunt's house.



Rockwell once spoke before the Tuesday Club of Stockbridge. He is pictured in his studio, circa 1970.

"My aunt, Dorothy Brown, was a long-time member," Hoeltzel explained. "I live in her house and I inherited the Tuesday Club from her."

Guest presenters of the past have included Dr. Austen Fox Riggs, the namesake of the town's psychiatric research and residential facility; illustrator/painter Norman Rockwell; sculptor Margaret French Cresson, daughter of sculptor Daniel Chester French, among other luminaries.

During the time of past President Miss Alice Byington, who served from 1896 to 1908, members would stage a play written by her.

Coming up, James Kraft and Wendy

Power Spielmann will co-present "Love Poetry: From Ancient April marks the Tuesday Club's annual benefit presentation, which this year will feature Barrington Stage Company Artistic Director Julianne Boyd and Playwright Mentoring Project Director Kim Stauffer. Musicologist Jeremy Yudkin is expected to present in May.

In June of each year, the ladies review their remaining dues and donations collected over the year, and select a beneficiary or two to support with the money. Past recipients include local food pantries, Kids 4 Harmony and other local youth programs of the state Department of Children and Families, and other nonprofits.

Moving forward, Owens said she hopes the Tuesday Club continues to balance tradition while keeping up with the times, which she says has been key to the group's longevity.

"For me, I believe, it's community that's been key. It's just wonderful to have a community of women who know you, who care about you, and who you can care about," she said. "We celebrate together, we mourn together, and together, we look after the greater community, too." — AP/The Berkshire Eagle

➤ How

Cont. from page 14

Feedback control, which prevents loud squealing and whistling, is a must.

You likely will want directional hearing aids; they have two or three microphones, which helps you focus on what you want to hear and can reduce annoying background noise.

If you use a cellphone, ask about hearing aid compatibility. For example, there's an iPhone app for that can stream a call directly into your hearing aids.

But you may not need the most advanced bells and whistles. Those include hearing aids that are water-resistant and ones with accessories such as a penlike device that streams TV audio.

•Consider appearance. Options include devices that hook behind the ear, sit in the outer ear, or are in the ear canal and nearly invisible.

•Discuss price options. In general, the smaller and more sophisticated the device, the higher the price.

Beware of "bargains," though. Some hearing aids can be bought online, but most Internet offerings are really just personal sound amplifiers. Although they sell for as little as \$100, they're not regulated and are only for people who want volume boosted a bit.

•Review the warranty. Hearing aids typically are covered for one to three years, and the first year may include replacing lost ones — a common problem, since they're so small. An extended warranty might be smart. — AP

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World War II POW reflects on experiences

By Brian Steele

WEST SPRINGFIELD —

One of the most striking things about Bart Hastings is his humility. Another is his willingness to discuss a part of his life that others with the same experience would rather forget.

Hastings, an 89-year-old World War II veteran, was captured by German soldiers in 1944 while fighting near the Belgian border. He spent more than five months as a prisoner of war, forced to build roadblocks during the day and sleep on a wooden pallet in a basement in Neubrandenburg.

He was just 19 years old.

Hastings enlisted at 17 through the Army Specialized Training Program, which allowed him to go to college before joining the armed forces. But the program was shut down just three months later, and, as part of 335th regiment of the 84th infantry division, he boarded a ship to Liverpool, England.

After crossing the English Channel to France, and working their way toward Belgium and the Netherlands, the troops encountered enemy forces and Hastings had his rifle shot out of his hand. He wasn't wounded, but the company lost 200 men and he and 100 others were captured.

It was the first time he had ever seen combat.

During an interview with MassLive.com, Hastings repeatedly shrugged off any suggestion that he had endured hardship, calling himself "lucky" to have survived uninjured. Despite the poor food supply in Stalag II-A, and his significant weight loss, he speaks

of his captivity as if he were describing a bad day at work.

"It wasn't really back-breaking labor. It was more tedious, if you want to call it that," he said.

Surviving on a diet not fit for sustaining life was a challenge, but Hastings found a way. He said fellow prisoners bribed the guards with cigarettes and were allowed to take quick trips to a nearby village to get food. Then they sold some of it to Hastings for more cigarettes, which came in the occasional care package from the Red Cross.

Hastings' sense of humor, aided by a quick wit and a tendency toward gentle self-deprecation, was evident throughout his recollection. He laughed while talking about how he and his fellow POWs occasionally weakened rail lines to sabotage the labor they were performing for the Germans. He casually dropped in a mention of debilitating frostbite to his feet.

One might expect that he and his fellow prisoners were rescued in a hail of gunfire, gallantly freed by his countrymen. But what really ended his captivity was an open gate and the total disinterest of the elderly guards, who knew the war was over when Russian troops started closing in.

"Two years earlier," he said, "I don't know what they would have done to us, but they would have done something."

"We didn't want to be liberated by the



Russians, so we just started walking west," said Hastings. "We were in pretty good shape. You had to be."

But who could endure a seven-day trek after spending nearly half a year subsisting on almost nothing but soup? Hastings and his comrades could, and they did, finally reaching an airfield controlled by Allied forces.

Perhaps surprisingly, it was there that some of the men lost their lives.

"Several of the fellows died because they gorged themselves on food," he said, leading the Allies to carefully ration it out so the men's bodies could adjust. After a month, he was sent back to the United States, where he helped prepare soldiers for fighting in Japan.

After the war, he was discharged and returned to his hometown of Worcester to study electrical engineering at Worcester Polytechnic Institute. Instead of using that education to ply his trade, he joined the Boy Scouts of America, lived in several places in the northeast, and finally settled in West Springfield in 1977. He retired 10 years later.

When he first came to West Springfield, there were "seven or eight" other POWs in town. Today, he is the only survivor.

He works two days a week delivering mail between schools in town, and sells tickets during The Big E. If he quit his jobs, he could collect more money in veterans'

benefits, but "I choose to keep active."

"I get more than I think I deserve sometimes," he said, speaking of his 75-percent disability payments and extra assistance because of his ex-POW status. "I'm pretty physically fit. I don't have any real problems."

Hastings was awarded the Bronze Star for valor and kept other mementoes from his time in the service. His combat infantry badge is his favorite. He intends to leave them all to his three children.

War in the modern era is much different, he said, saying that politicians force the military to take a "piecemeal" approach. But, as it always has been and always will be, war is Hell, and "there's a lot more stuff that can kill you."

Nevertheless, Hastings believes everyone should join the service; he supports the Israeli government's mandate of two years for most citizens. The benefits are not just financial. They include the instilling of discipline that lasts a lifetime.

The 17-year-old who joined the Army, endured more than five months of captivity, and survived one of the most brutal wars in human history, is now a mentally tough and physically fit 89-year-old with an obvious sense of peace about his experiences. And, decades later, he proudly wears the hat that denotes his veteran status, lights a candle every year in Westfield in honor of POWs, speaks highly of the town he lives in, and loves the United States of America.

"We live in a great country," he said, "despite all the problems. Plenty of people want to come here." — AP/MassLive.com

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Improving the kitchen in small or big ways

By Melissa Rayworth

Another holiday season has passed, and with it the marathon cooking and baking sessions. The hours spent using every kitchen appliance and inch of counter space had a potential benefit more lasting than a good meal: When we really use our kitchens, we discover what does and doesn't work in this very important room.

Remodeling a kitchen can be expensive and challenging, but you can make substantial cosmetic changes with just the help of a painter and electrician, said interior designer Betsy Burnham of Burnham Design in Los Angeles. And if you're ready for even bigger changes, it's still possible to stay on budget and create a gorgeous kitchen with a minimum of stress.

Step one is deciding what really needs to be done. Can you work with the appliances and cabinets you've got, or is it time for a full-scale remodel?

Step two is the budget, coming up with a realistic estimate for each expense, said designer Brian Patrick Flynn of Flynnside Out Productions.

Then, the fun can begin. There are areas where a little improvement can go a long way.

A smoothly functioning kitchen has space for everything to be stored away, within reasonable reach. Can you achieve that with your current cabinets? If so, Flynn suggests keeping them and just replacing or refinishing

the doors. "Cabinetry installation adds a lot to a budget," he said, "so saving by simply reusing what you've got can be a massive help."

If your cabinet doors are stained wood, consider painting them. Then, change the hardware. Drawer pulls and cabinet door handles "can make or break the look of the space," said Lee Kleinhelter of the Atlanta-based design firm Pieces. Take time choosing new ones.

Flynn agrees: "I always use high-end hardware regardless of how high or low my budget is," he said. "Adding an interesting metal and finish to your doors just really adds character and uniqueness. You can never go wrong with dull black pulls and knobs, and I'm also a huge fan of antique brass. When it comes to silver tones, I try to stay classic and go with polished nickel."

If you do need to add or replace cabinets, Burnham suggests having them custom-made. It can be expensive (Flynn estimates that ready-made cabinets cost about one-third as much as lower-end custom designs). But they are worth the investment, Burnham said. "You'll get well-made pieces, built to your needs, that will last through time, kids and tons of use."

Rather than adding cabinets with doors, she suggests installing drawers. "Deep drawers provide excellent storage for pots and pans, and even oversize plates," Burnham said, "and banks of drawers just look cool."

Painting kitchen walls can be "a quick, inexpensive solution to a kitchen remodel on a low budget," Kleinhelter said, and "any color can work." But she advises clients that kitchen decor "should work with the rest of the house." Bring in colors that appear in nearby rooms, or stick to a neutral palette.

If you're trying to update your kitchen's look, Burnham said "there's been a shift from the once-ubiquitous all-white kitchen toward gray-painted cabinets, and we've found ourselves experimenting with color." Her office is currently designing one kitchen "that's predominantly a sophisticated cream color, and another that will have dark, olive-green cabinets and a textured, black-stone countertop."

Homeowners are also getting more creative and saving money with materials like concrete. Concrete tile is "an inexpensive material that comes in an incredible array of colors and patterns," Burnham said, and "it

works for backsplashes or kitchen flooring, and really makes a statement."

Try mixing affordable elements with higher-end ones: "Basic butcher block is my favorite countertop because of its classic appeal, and it's insanely affordable. By juxtaposing it with a unique backsplash, like a mosaic marble or rustic stone, it looks more high-end," Flynn said. "My biggest splurge on kitchens is usually my lighting and backsplashes."

And choose colors and materials you'll be happy with long-term, rather than something trendy. "Classic and simple is where it's at," said Burnham.

A new table and chairs can update a kitchen's look and make it more comfortable. But it's tempting to sacrifice function for style. Don't.

"We all live in our kitchens," said Kleinhelter, "so it is important to have comfortable and durable seating."

Stools are popular, and Burnham said designers in her office love the simple, clean look of a row of stools arranged along a bar or kitchen island. But, she said, comfort is key: "We find most clients like seats with backs and arms."

Also, choose seating that's easy to clean and durable. "I love to use vinyls or faux leathers," said Kleinhelter, "because it is so easy to clean, but still looks polished."

Burnham's favorite for seating: the natural texture and style of rattan. — AP



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