



# AgingOptions

RESOURCE GUIDE  
2014 PIERCE COUNTY

## LIFEPLANNING RESOURCES FOR THE RETIREMENT YOU WANT

- *Health*
- *Financial*
- *Family*
- *Housing*
- *Legal*



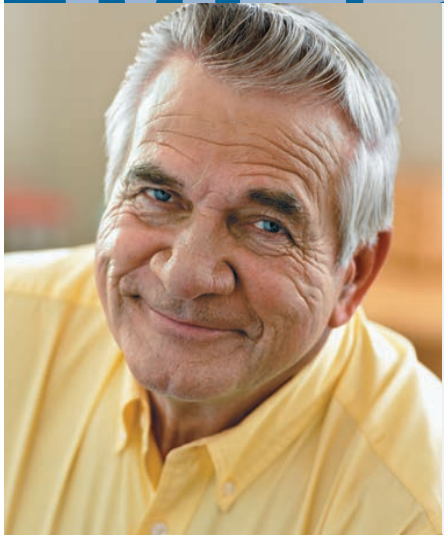
[www.AgingOptionsGuide.com](http://www.AgingOptionsGuide.com)

[facebook.com/AgingOptionsGuide](https://facebook.com/AgingOptionsGuide)





# Hello MEDICARE



If you're turning 65 or are ready to retire, you should know that at UnitedHealthcare® our goal is to make health care work for you. We've designed our products around what you've told us is important. We've created programs to help you live a healthier life. And we surround you with people who are there for you.

**\$0 monthly premiums** for medical and Part D coverage

**\$15 copay** for primary care visits

**Large provider network** for easy care access

## Call today.

If you're new to Medicare, ready to retire or losing your employer plan, find out how you can enroll today.



**1-855-491-3752, TTY 711**

8 a.m. – 8 p.m. local time, 7 days a week



**EnrollUHC Medicare.com**



You must continue to pay your Medicare Part B premium.

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, formulary, pharmacy network, provider network, premium and/or co-payments/co-insurance may change on January 1 of each year.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract. Enrollment in the plan depends on the plan's contract renewal with Medicare.

Y0066\_131004\_161316\_FINAL\_SPRJ16998 Accepted

283575







# JOHNSON NAGAICH

## Elder Law & Estate Planning

**Elder Law**  
**Estate Planning**  
**Probate**  
**Guardianship**  
**Special Needs Trust**



Johnson and Nagaich PS, is a holistic elder law firm that helps families plan for, pay for and coordinate the long-term care of elderly loved ones.

*Our mission is to help our clients and involved family members plan for and live their lives on their own terms through care management and asset preservation services.*

**Contact Us Today for More Information  
or to Schedule an Appointment!**

**1-877-ELDER-47  
(35337)**

**[www.elder counselor.com](http://www.elder counselor.com)  
31919 Sixth Avenue South | Federal Way**



## Welcome To The AgingOptions Resource Guide

The oldest members of the Baby Boom generation started turning 65 beginning Jan. 1, 2011 and for the next 19 years an estimated 10,000 Baby Boomers will do so each day. By 2030, when all the members of the Baby Boomers (26 percent of the population) have celebrated their 65th birthday, fully one-fifth of the U.S. population will be at least 65 years of age.

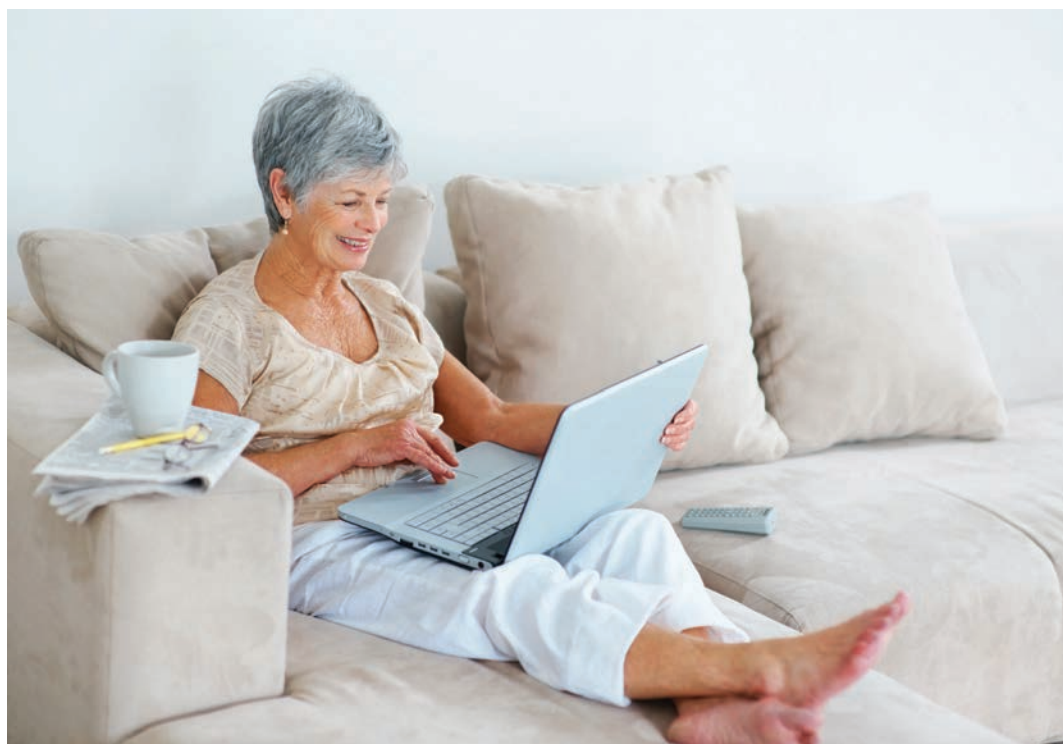
For most Baby Boomers on the threshold of retirement, hitting age 65 represents the end of their working lives and the beginning of a life filled with travel, spending time with family and friends and generally doing the things that their work life got in the way of accomplishing. But, retirement also brings with it worries about losing assets to medical and long term care costs, having to deal with institutional care and becoming a burden on others according to a 2013 Merrill Lynch study. A study in 2009 found that older adults experienced fewer of the benefits of aging than younger adults expect to enjoy when they grow old.

Why is that? About one-in-five Americans 65 and older say they have a serious illness. One-in-six report they can't pay their bills. One-in-seven cannot drive. One-in-ten feel they aren't needed or are a burden to others. Yet few of those problems are planned for in traditional retirement planning. For those who do engage in planning solutions are often fragmented and ineffective.

Proper retirement planning, on the other hand, coordinates a comprehensive array of services to address healthcare, housing, financial and legal issues. Proper planning can help you to:

- Avoid institutional care if possible;
- Choose the most appropriate housing alternative if remaining at home is no longer possible;
- Protect your assets not just from probate and estate taxes but also from uncovered long-term care and medical costs; and
- Avoid becoming a burden on your loved ones should you become incapacitated

This guide is a primer designed to help you identify these issues and help you to develop a comprehensive and meaningful *LifePlan* for a better retirement.



**Publisher/Editor-in-Chief**  
Rajiv Nagaich, JD LL.M.  
Elder law attorney and senior partner of the law firm, Johnson and Nagaich P.S.

He is a member of the Washington State Bar Association and American Bar Association.

He sits on the Elder Law Advisory Board of John Marshall Law School in Chicago, Illinois.

He is on the board of the Center for Medicare Advocacy, Inc. in Washington, D.C.

He is also a Board of Director of national and state chapters of the National Academy of Elder Law Attorneys, and is the founding member and past president of the Life Care Planning Law Firms Associations.

He also hosts the weekly AgingOptions radio show on KTTH AM 770, Saturdays from 10 a.m. - Noon.





## Volume 9

**Publisher/Editor-in-Chief**  
Rajiv Nagaich, JD LLM

**Editor**  
Bonnie Dickson

**Contributing Writers**  
Bonnie Dickson  
Jamie Nagaich

**Creative Services – Print and Online**  
Bonnie Dickson

**Multi-Media Advertising Sales**  
Richard Busch  
Mary Ellen Coupland

**Executive Administrator**  
Saket Sengar

**Accountant**  
Ruchi Sengar  
David Orona

**Delivery & Distribution**  
Richard Kear

**Published by:**  
Nagaich Holdings LLC, DBA,  
Aging Options Resource Guide  
LLC  
31919 6th Avenue South  
Federal Way, WA 98003

253-941-7200

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



# Table of Contents

|           |  |
|-----------|--|
| <b>5</b>  | LifePlanning   |
| <b>7</b>  | Who Needs A LifePlan®  |
| <b>9</b>  | Hiring A Financial Planner   |
| <b>12</b> | Reverse Mortgages  |
| <b>14</b> | Medicaid and the Middle Class  |
| <b>15</b> | Veterans Benefits Can Help Pay for Long-Term Care                              |
| <b>17</b> | Living Longer Than You Planned   |
| <b>18</b> | Ending a Marriage Can Throw a Wrench in Your Retirement Plans                  |
| <b>21</b> | Your Health Promotes Independence and Saves Money                              |
| <b>22</b> | Studies Show That Neighborhoods Can help or Hinder ‘Aging In Place’            |
| <b>25</b> | Medigap or Medicare Advantage?   |
| <b>28</b> | How You Live Determines How You Age  |
| <b>29</b> | Cost of Alzheimer’s Expected to Skyrocket                                      |
| <b>30</b> | Five Myths About Exercising for Older Adults                                   |
| <b>33</b> | Why Bother Hiring a Geriatric Physician  |
| <b>34</b> | Concierge Medicine Offers Another Option to the Traditional Approach to Health |
| <b>39</b> | Move by Choice Rather Than by Crisis   |
| <b>40</b> | Paying the Caregiver   |
| <b>42</b> | Senior Housing Options   |
| <b>45</b> | Choosing to Age in Place means Choosing to Live Where You Can Walk             |
| <b>46</b> | NORCs (Naturally Occurring Retirement Communities)                             |
| <b>48</b> | Is a Move the Best Option?   |
| <b>58</b> | Should You Hire an Elder Law Attorney  |
| <b>60</b> | Avoiding Running Afoul of the Tax Man When You Hire a Caregiver                |
| <b>62</b> | Annuities  |
| <b>64</b> | Should You Sign a Nursing Home Agreement?                                      |
| <b>67</b> | Staying Engaged with Life  |
| <b>68</b> | Living Longer  |
| <b>70</b> | Successful Aging Through Competitive Sports                                    |

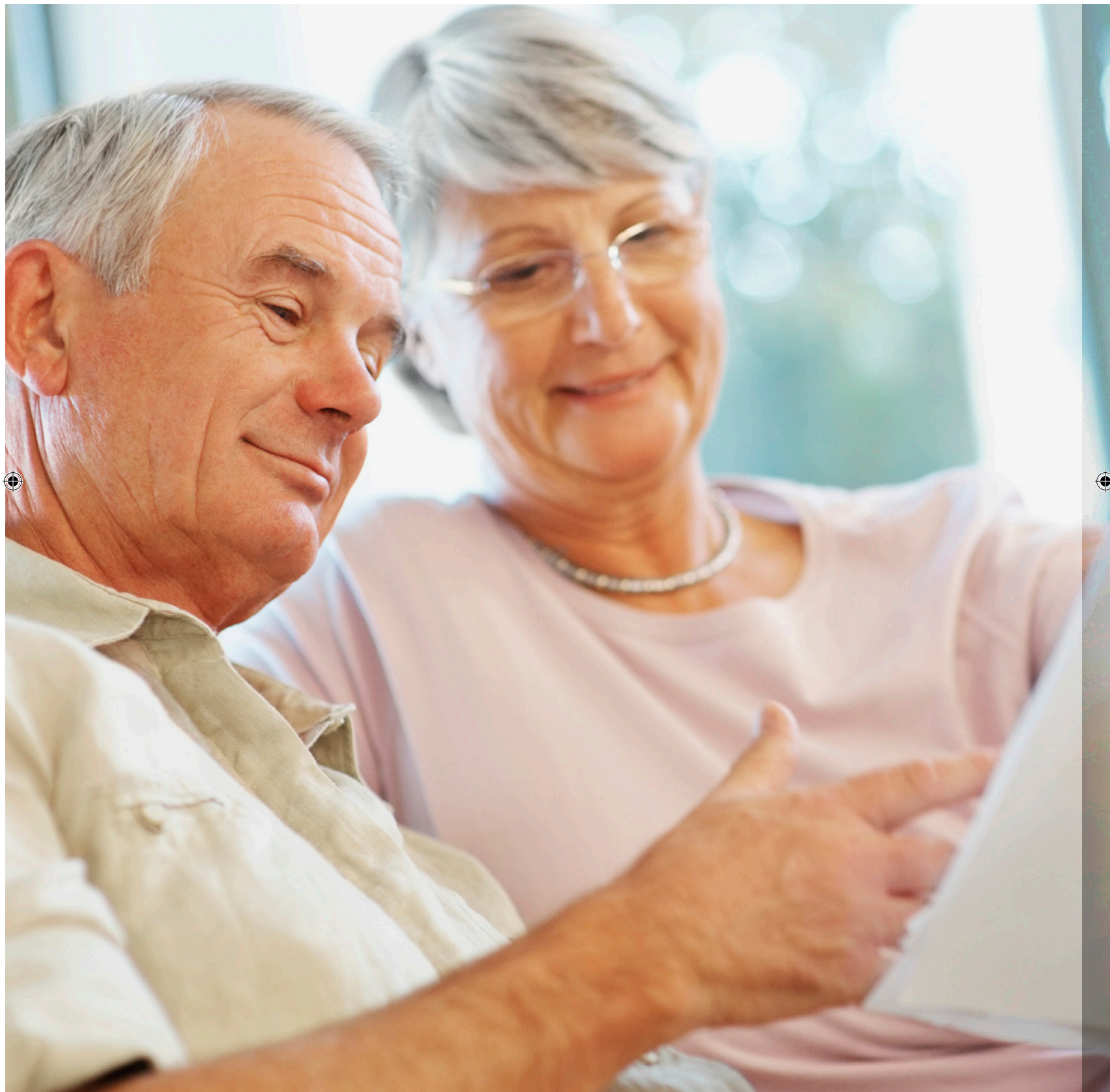
## Pierce County Resource Guide

|           |                     |
|-----------|---------------------|
| <b>19</b> | Financial Resources |
| <b>36</b> | Health Resources    |
| <b>52</b> | Housing Resources   |
| <b>65</b> | Legal Resources     |
| <b>71</b> | Leisure Resources   |

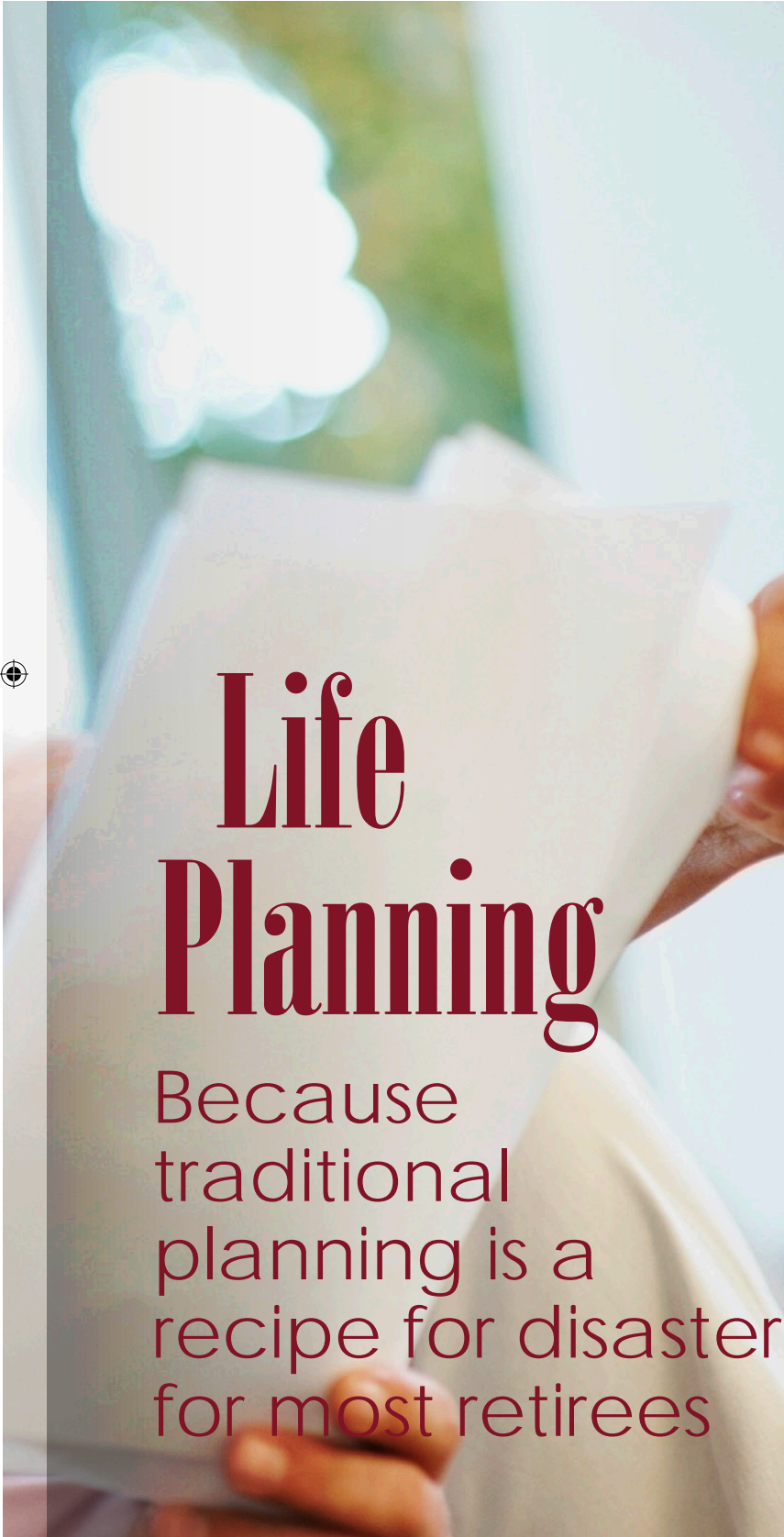
*We are Proudly Printed in the USA!*



**When you look in the mirror, are you shocked to see the face that looks back at you? That's exactly what is happening on a global scale according to Global AgeWatch Index 2013, the first-ever overview of the wellbeing of older people around the world. What did they discover? The world is no better prepared for aging than the average American citizen, which is to say not prepared at all.**







# Life Planning

Because  
traditional  
planning is a  
recipe for disaster  
for most retirees

A political cartoon from 2013 showed a map and dozens of pins. Every pin said, “You are here.” When you hire a financial planner and a housing professional and a lawyer and a doctor, that’s the sort of map you’ll get. Everyone thinks they are right when they tell you where you are. No one is necessarily lying. But no one person knows the entire story. It’s like the children’s story about the elephant and the six blind men. Each man believes he is right and the others are wrong but each man only has a part of the reality of what an elephant is.

That’s what fragmented planning is. You think you have all the information and have made good solid choices but because you are looking at separate instances you are unaware of how they relate to each other and how a decision in one arena will impact other areas. In contrast, a LifePlan is a methodically developed strategy that coordinates the five major aspects of aging (health, housing, finance, legal and family) within a framework designed to: protect your assets from uncovered medical expenses and long term care costs; help you avoid undesirable institutional care; and avoid becoming a burden on loved ones if incapacity strikes.

The goal of LifeCare Planning is to promote and maintain the good health, safety, well-being, and quality of life of elders and their families. Elders and their families get access to a wider variety of options for care as well as knowledgeable guidance from a team of compassionate advisors who help them make the right choices about every aspect of their well-being.

Life Planning Law Firms rely on an inter-disciplinary team that works to identify present and potential future care needs, and locate appropriate high-quality care. This approach relies less on crisis-oriented transactions and more on the development of on-going relationships with families.

The heart of the elder-centered law practice, a Life Plan defines, organizes, prioritizes, and mobilizes every aspect of elder care. In addition to traditional asset-focused elder law services such as estate



planning, asset preservation, and public benefits qualification, a LifePlan typically includes provisions for care coordination, family education, health care and financial decision-making, care advocacy, crisis intervention, support and other services. Every LifePlan is designed to achieve three primary objectives:

- Make sure the elder gets appropriate care, whether at home or in a residential facility, to maintain the quality of life that he or she desires.
- Locate public and private sources to help pay for long-term care while resolving issues created by the high cost of care.
- Offer peace of mind that results when the right choices are made to ensure loved ones are safe and getting the right care while preserving family resources.

LifePlanning Law Firms use a model called the Elder Care Continuum to help individuals understand the natural progression of aging.

In this analysis, an individual's journey might begin with total independence. As his or her health declines however, that independence gradually begins to decline as well. Initially, that decline may only mean the reliance upon additional help to make meals or maintain mobility. At some point, the decline begins to impact activities of daily living (frequently referred to as ADLs). ADLs involve physical functions such as being able to bathe or toilet. It may also become difficult to continue socializing with others without assistance due to inability to drive. As each of these areas declines, it impacts the health, mobility, housing and financial resources of the individual.

Your initial meeting with a LifePlanning Law Firm may focus on your place on each line of the Elder Care Continuum. Gaps in care can then be identified and solutions discussed for closing those gaps. When your customized LifePlan is developed, it defines, organizes, prioritizes, and mobilizes every aspect of care, to maintain the quality of life that you desire.

## Do you have a LifePlan?

A plan which includes the key factors in your aging and retirement plan such as Health, Housing, Financial and Legal, and how they impact you and your family? If not, then you should visit us online to learn more about it:

[AgingOptions.com](http://AgingOptions.com)



**AgingOptions**  
PROTECTING ASSETS • PRESERVING QUALITY OF LIFE





# Who needs a LifePlan<sup>TM</sup>?

## If you're a Baby Boomer, you will

By 2050 there will be 2 billion people over the age of 60 in the world, meaning there will be more old people than there will be children under the age of 15. By then, 65 countries will have populations in which the elderly will make up 30 percent or more of the population and 80 percent of those elderly will live in emerging and developing economies according to the World Health Organization (WHO).

In a global survey, the United States ranked number 8 in a comparison of 91 countries, came in 36th for income security and 2nd for employment and education. To keep things in perspective, the percentages were a great deal poorer. If we think of those percentages as grades, the United States never scored better than a C+/B- for any of the criteria.

The world's governments are failing on so many levels to prepare for a future dominated by the need to care for a growing elderly population. All of which is to say that if you are hoping Uncle Sam will help you with the aging process, you've only to look at our recent stall out in the government to realize that you're best off with an alternative plan and if you are hoping to leave American soil for greener pastures you really have very few options. Which puts the ball right back in your court.

So how will you plan for a time in which you will need more resources, better health and better access to the help you need? We must choose to look at the future and realize that our families will need to be a part of our future care and that for that to happen they need to be a part of the discussion now while that care and those resources aren't needed. And we can recognize that the choices we make today will impact us for the rest of our lives. Those choices include when to take Social Security, where to live, how we care for our health and yes even how we spend or save our money in order to start the journey towards our best life and death.

For most Americans, planning for the end of life will rank right up there cost-wise to purchasing their last

home. The average cost of final arrangements for a loved one in the United States is around \$10,000. Making legal arrangements for disposition of assets, powers of attorney, trusts and/or other estate planning documents may cost tens of thousands more depending on the estate. Yet, contrasts those cost with the costs of having a loved one spend one year in a nursing home which starts on the low end at around \$80,000 and proceeds quickly to \$100,000 or more. The national average for assisted living facilities runs around \$3,550 a month. At home care is in comparison a more reasonable average of \$42,000 a year for full time care but still well outside the average family's abilities. And scarily, those costs have only to do with housing costs and nothing whatsoever to do with the health care costs associated with medications, medical procedures or hospitalizations.

A recent study from the Center for a Secure Retirement found that Baby Boomers are "largely uninformed and unprepared for the day-to-day care they may need in retirement" with nearly three-fourths of middle-income Boomers having no plan for their retirement care and only 20 percent having a rough idea for how they'll receive care. Nearly half of middle-income Boomers have not discussed how they wish to receive care and 56 percent haven't talked about how they'll pay for it. That last shouldn't come as a surprise as most of them significantly underestimate the likelihood of needing long term care and most haven't a clue as to how much all that care will cost and a significant (78 percent) share of them think that Medicare will pay for long term care and 34 percent have never heard the term long term care insurance. Frankly, that's a lot of things to get wrong about something that is just on the horizon for a large share of our population.

Throughout this magazine, we'll look at how a LifePlan can change the conversation about retirement, both the good and bad of it, to give you proactive and productive steps that put you in charge of your future.



“I believe that the biggest mistake that most people make when it comes to their retirement is they do not plan for it. They take the same route as Alice in the story from “Alice in Wonderland,” in which the cat tells Alice that surely she will get somewhere as long as she walks long enough. It may not be exactly where you wanted to get to, but you certainly get somewhere.” ~ Mark Singer, Certified Financial Planner and author.







## Hiring a Financial Planner

If you think only the wealthy need financial planners, think again. Anyone who has spent a sleepless night worrying about whether or not they've socked enough away for their child's college fund, or their own retirement account or how a parent's sudden downturn in health will affect their own finances knows you don't have to be rich to need a trusted advisor.

The trouble is anyone can call themselves a financial planner. So what you want is a Certified Financial Planner (C.F.P.). That's a person who has met educational and experience requirements and has passed an exam on an array of financial topics.

To find a C.F.P., ask people you trust for recommendations. Keep in mind that if you have a young family your needs will be different than a retiree's, so ask someone with similar needs and lifestyle as your own.

You can also go online to search a database of people who have passed the C.F.P. standards. And of course you can also find a listing of trusted business partners such as the Preferred Partners program at AgingOptions.

Most C.F.P.s earn their salary one of two ways. They either get paid a flat fee by you for their time and advice or they earn commissions on products they sell. Some earn money both ways. Planners that earn commissions may or may not be acting in your best interest. If you decide you wish to work with someone who earns commissions, make sure you ask them if they intend to operate as a fiduciary. A fiduciary is a legal term requiring a C.F.P. to recommend the best product for you even if it earns them less money. Get it in writing if they are going to be a fiduciary.

Some C.F.P.s believe so strongly that commissions create a conflict of interest that they belong to the National Association of Personal Financial Advisors ([www.napfa.org/](http://www.napfa.org/)), an organization of more than 1,300 fee-only financial planners.

Once you've put together a list of potential C.F.P.s, call each planners office to find out if they work with people at your financial level. Set up a meeting with at least three of your choices and bring a list of questions to determine whether the



relationship would be beneficial to you.

So how do you go about hiring a financial planner or financial advisor rather than hiring a highly paid salesperson? One thing you can't do is go looking for financial expertise like it's something you can pull out of the vending machine. Expect to interview several prospects. Here are some questions to ask before you hire someone:

- What services do you provide?
- What types of clients do you specialize in?
- Can I see a sample of a financial plan?
- What is your investment approach?
- How much contact do you have with clients?
- What other costs will I incur?
- How did your investment solutions change after the 2008 crisis?
- If something happens to you, what happens to me?
- Do you do background checks on your staff?

It's just as important to look at how your potential advisor reacts to being questioned as it is to look at what his/her answers are.

The point of hiring a financial planner is to hire someone who presumably has more time and definitely more expertise to...well...plan your finances.

So you might be shocked to discover that the *New York Times* broke a story in 2013 on how JPMorgan Chase brokers are pressured to follow a script selling the bank's own products regardless of the performance of those products. It's not the first time banks have gotten their hands slapped for conflict of interest which is why it's shocking but then again not, that a huge bank such as JPMorgan Chase would get accused of "prioritizing profit to the detriment of its clients." The surprising thing isn't that the *New York Times* broke a story about a bank with problems with conflict of interest but rather that the *New York Times* broke another story about the same bank with the same issue in 2012 (and also in 2011) and yet people continue to go to JPMorgan Chase for investments and continue to make the bank one of the richest.

If you think of financial planning as a five-course meal at a fine restaurant says elder law attorney, Rajiv Nagaich, the menu may say it has five-courses to it and



### A financial planner should:

- Review your last two income tax returns and look at all of your assets, wills, insurance policies, estate and retirement planning documents to assess your current financial situation.
- Identify financial needs and goals and create a financial plan to help you achieve them.
- Be able to explain financial options and instruments, offer advice on other professionals to help you execute your plan.
- Review your progress to keep you on track with your plan.

it may even charge as if it is a five-course meal. But when it comes time for actually sitting down in the restaurant there is no salad, there is no dessert, there's only the main course and to top it off you get what the restaurant wants to bring you rather than what you ordered. Financial planning involves multiple layers of planning but the majority of the people doing financial planning out there are just giving you the main course. Your questions beyond just investing are how much money should I invest, how much money will I need, what is the right age for me to retire, etc. These issues have nothing to do with how your money is invested but they have a significant impact on how you're going to invest the money. Most of us are paying financial advisors exactly what they are asking but instead of the five-course meal they promise they are only giving us the main course.

That's not to say that there aren't capable advisors working at banks and brokerage firms or even that you can't find high quality advisors at places with bad reputations. It does mean that you need to shop carefully for an individual (rather than a company) that you can work with.



# INTEGRATED

Financial  Services

HELPING INDIVIDUALS & FAMILIES WHO  
SEEK:

- Conservative Investment Strategies
  - A Reasonable Rate of Return
  - Reasonable Liquidity
  - Tax Efficiency



**Gary Imel, CLU ChFC, *President & Founder***



**253-851-0717 | [WWW.IFSSOUTHSOUND.COM](http://WWW.IFSSOUTHSOUND.COM)**

Securities and advisory services offered through Madison Avenue Securities, Inc. (MAS), member FINRA/SIPC & a Registered Investment Advisor.



## Reverse mortgages

Using your home to help you “age in place”

For most Americans, their house is their most important asset. Not only from a financial point of view in that it can be worth more than what you paid for it but also from an emotional point of view. It's where you raised your family, its neighborhood and neighbors are familiar and comfortable for you. For those and other reasons, nearly 90 percent of Americans 65 and over view their home as the place they want to live in as long as possible and 80 percent believe their current residence is where they'll always live according to AARP.

Most people will need to be able to draw from Social Security, savings and retirement plans to finance their retirement. But sometimes unexpected expenses come up. If your health makes living in your home unsafe or a health problem (even one that you fully recover from) leaves you with a large bill and not enough income to pay that bill how do you unlock the equity you've built up to handle those kinds of crises? That's the sort of question that reverse mortgages otherwise known as Home Equity Conversion Mortgage (HECM) loans were created to answer.

### Traditional loans versus reverse mortgages

In a traditional loan situation, a homeowner owes a debt to a bank and over time gradually pays that debt down resulting in the homeowner having equity in the home. Lenders offering traditional loans verify income and perform a credit check to ensure that the borrower can make monthly payments. Those monthly payments gradually pay down the debt and the homeowner's value in the home increases. That increase is called equity.

Contrast that method to a reverse mortgage. Unlike a

traditional home loan, the loans are available only to homeowners at least 62 years old or older and they turn the concept of a loan on its head by having the equity decrease over time by cashing out that equity rather than increasing it and also by not requiring repayment from mortgage borrowers until the homeowner sells the home, dies, fails to pay property tax or insurance premiums or moves. The amount the borrower owes continues to grow and the value of the equity shrinks. By not requiring payment, homeowners don't have to pass credit checks nor do they have to have income at least that has been the case until changes Congress put into place via the Reverse Mortgage Stabilization Act take affect.

That act amended the National Housing Act with respect to reverse mortgages to authorize Housing and Urban Development (HUD) to establish additional requirements as necessary to improve the fiscal safety of the reverse mortgage program. Additional requirements include requiring homeowners to undergo a financial review before being approved for a loan and requiring a set-aside for taxes and insurance.

For a number of reasons but primarily because home loan requirements have eased to the point that people now buy more expensive homes with a lot less down, retirees are often entering retirement still owing money on their homes. Over half of the American population age 55 to 64 carries a home mortgage according to a paper released at the 15th Annual Joint Conference of the Retirement Research Consortium and they are more likely to enter retirement with debt. Perhaps more surprisingly, almost half of individuals 65-74 had





mortgages or other loans on their residences, a third had credit card debt and a quarter had installment loans amounting to two-thirds of Americans in that age bracket holding some form of debt. The percentage of people with debt who were on the verge of retirement rose from 64 percent in 1992 to 71 percent by 2008 and the value of that debt rose from \$6,200 in 1992 to \$19,100 in the same time frame.

### Loan of last resort

Originally reverse mortgages were designed to help cash-poor older people stay in their homes, as a loan of “last resort.” But boomers ages 62 to 64 now represent 20 percent of prospective borrowers (62 is the earliest age you can apply), according to a recent survey by MetLife Mature Market Institute. Two-thirds of people considering a reverse mortgage today are under 70. The current average age of reverse mortgage borrowers dropped by nearly four years since 1990. The loss of pensions, the downturn in the economy in 2008, and inadequate savings have all impacted the ability of many retirees to meet the financial demands of retirement. According to the National Council on Aging (NCOA), about 44 percent of reverse mortgage borrowers have incomes under 200 percent of the federal poverty level (\$22,980 for a single individual). Increasingly, reverse mortgages are becoming part of retirement planning.

Before reverse mortgages, if a homeowner needed funds, he or she could access the equity in their home either by selling the home or borrowing against the home. Selling the home meant giving the home up and borrowing against the home meant needing to make payments. Neither option appealed to many older homeowners. A reverse mortgage provides a third option for people not planning on leaving their homes to their children. Money that is freed up by a reverse mortgage can be distributed in several ways:

- As a lump sum cash payment;
- As a regular monthly advance;
- As a credit line account; or
- In a combination of any of those payments.

The amount available for borrowers depends on four factors:

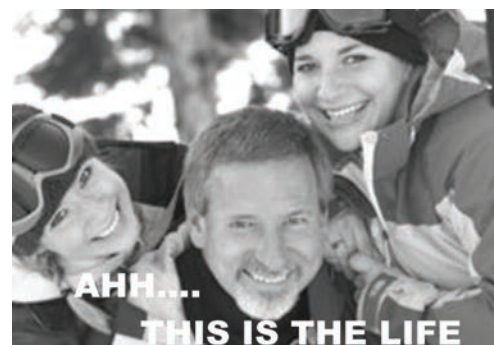
- The age of the youngest borrower (older is better but the youngest borrower must be 62)
- Current interest rate
- Lesser of appraised value of the home or the HECM

FHA mortgage limit or the sales price

- Initial Mortgage Insurance Premium, either HECM Standard or HECM Saver.

Getting a reverse mortgage is a decision that should be weighed carefully. For one thing, just like a mortgage, reverse mortgages have fees associated with closing costs such as a loan origination fee, appraisal, title search and insurance, surveys, inspections, recording fees and other fees. Those fees are relatively high—as much as 5 percent of the loan amount. Another reason to be careful before choosing to get a reverse mortgage is that getting a reverse mortgage may impact your ability to access government programs such as Medicaid and VA benefits and community programs since these programs use income and or other means-tested criteria for determining eligibility.

An elder law attorney or financial advisor with experience in these areas should be consulted prior to taking out a reverse mortgage. That said, a reverse mortgage can be the vehicle that allows you to continue to age in your own home. To read more on reverse mortgages, ask for our white paper on the topic.



Retirement should be one of the most enjoyable times in life, yet many people are financially unprepared for it.

It doesn't have to be that way. By listening to your needs, I can prepare a retirement plan designed to help you enjoy retirement.

Please contact me today.

### **RAYMOND JAMES®**

Jim Chaffee - Branch Manager  
Raymond James Financial Services, Inc.  
Member FINRA/SIPC  
32015 1st Avenue South  
Federal Way, WA 98003  
(253) 838-0710  
800-743-4111  
jim.chaffee@raymondjames.com

Life, Well Planned



# Medicaid and the middle class

Two populations of middle-class Americans benefit from Medicaid: the elderly and children with disabilities. Congress created Medicaid as an entitlement program in 1965 to provide low-income families and individuals with medical coverage. If there hadn't been any changes to the program it would still be just a program for the poor. However, by the 1980s, Americans were living longer but with diseases that resulted in nursing home stays that bankrupted middle class families. As a result, new laws were put into place that turned Medicaid into a program to protect middle class couples from being forced into poverty.

That's what we have today. Those laws made it possible for a spouse to retain assets and income to preserve some of a couple's life savings because only a very small percent of the population can afford the staggering cost of a nursing home (in the Seattle-area around \$90,000 per year) for the average two-to-three year nursing home stay.

In his 2012 Convention speech, Bill Clinton differentiated it from Welfare and called Medicaid, "a vital safety-net for middle-class families." Total Medicaid spending in 2010 was a little under \$400 billion but \$123 billion (about one-third) paid for nursing home care. A Kaiser Health Tracking Poll asked people how important Medicaid was for them, 61 percent said that Medicaid was important to them, and of those individuals, 49 percent said it was because either they or someone they knew depended on Medicaid to pay for long-term nursing care.

So why do elder law attorneys provide Medicaid planning to clients? Most states require nursing home residents to spend virtually all their money (to as little as \$2,000, but more for a married couple) before they can qualify for assistance. Because the government doesn't want to pay for care if the individual has funds of their own to pay for it, there is a period of time in which asset transfers or gifts are looked at. A person with moderate income who must enter a nursing home may eventually need to rely on Medicaid to pay for care. But many states leave the well spouse with too little in protected assets to provide them with enough resources to continue to live at home and Medicaid makes no allowances to repay family members for providing care

prior to nursing home care. Medicaid planning then is about moving assets either by spending them down or by transferring them in order to qualify for Medicaid and still compensate for care or provide for the other spouse.

Many people try to gift money or property to family members in order to qualify for Medicaid. However, done incorrectly transferred property triggers a sanction period that is not necessarily one-to-one. For instance if the gift was for \$10,000, Medicaid doesn't make the person ineligible for \$10,000 of nursing home care. Instead the individual might become ineligible for two months of nursing home care based on \$5,000 being the "cost" of one month in the nursing home. But nursing home care for one month might be as high as \$20,000 a month so a two month penalty could cost the family \$40,000 from a \$10,000 transfer.

In addition, the problem with Medicaid is that it doesn't pay for an individual to have a quality life in the nursing home. If assets can be protected, they can then be used to pay for things like bath aides, private rooms and other types of assistance that are considered extras. While most people put off considering the cost of long term care until it is needed, the earlier you can begin the process of protecting your assets, the more assets you can protect.

Medicaid planning is complex and making the wrong steps can cost you hundreds of thousands of dollars. Talk with an elder law attorney about steps you can take now to protect your assets down the line.

**For information on Medicaid Resource Standards for this year or for examples of court cases about Medicaid, please go to [www.AgingOptions.com](http://www.AgingOptions.com) or contact us for a white paper on Medicaid transfers.**



# Veterans benefits can help pay for long term care

The VA offers veterans and survivors two categories of benefit programs.

The first is the Veterans Pension which provides veterans and their families tax-free supplemental income to assist them with coping with financial challenges. To be eligible for the program the veteran must have at least 90 days of active duty service with at least one of those days during a wartime period. Veterans who entered active duty after Sept. 7, 1980 generally need to have served at least 24 months with at least one day during a wartime period (see note below).

Eligibility for most VA benefits is based on discharge from active military service under other than dishonorable conditions. In addition to meeting the minimum service requirements, the veteran must be:

- Age 65 or older, OR
- Totally and permanently disabled, OR
- A patient in a nursing home receiving skilled nursing care, OR
- Receiving Social Security Disability Insurance, OR
- Receiving Supplemental Security Income

And the veteran must have a family income less than the amount set by Congress in which case, if approved, the VA will pay the difference between the countable family income and the yearly income limit which describes the veteran's situation.

The second benefit program is the Survivors Pension benefit (Death Pension) which is a tax-free monetary benefit payable to a low income, un-remarried surviving spouse and/or unmarried children of a deceased veteran

## Retirement Ready?

- Is enjoying your retirement to the fullest of importance to you?
- Does your investment portfolio keep you up at night?
- Are you concerned about the volatility in the market and how it is affecting your income?



Then call us today to schedule an appointment for a clear, complimentary second opinion. We help our clients navigate the challenges of today's complex investment environment utilizing an integrated approach that helps you manage and achieve your financial goals. We believe face to face meetings are essential and our purpose is to help you realize your aspirations.

### Arnie D Bergman, ChFC and Devin Loughlin

Financial Planners

Financial Services Representatives

Registered Representatives

Investment Advisor Representatives

[abergman@metlife.com](mailto:abergman@metlife.com)

(253) 473-7079 ext. 114

2702 S. 42nd St. Suite 101

Tacoma, WA 98409

See us at [www.bergmanloughlin.com](http://www.bergmanloughlin.com)



# MetLife®

Premier Client Group

[Metropolitan Life Insurance Company \(MLIC\), New York, NY 10166. Securities products and investment advisory services offered by MetLife Securities, Inc. \(MSI\)\(member FINRA/SIPC\) a registered investment advisor. MLIC and MSI are MetLife Companies.](#)

with wartime service. Here is the VA form you'll need to fill out. The un-remarried spouse may be any age but a child must be:

- Under 18, OR
- Under age 23 if attending a VA-approved school, OR
- Permanently incapable of self-support due to a disability before age 18

In addition, if you are eligible for the pension, you may also be eligible for two supplemental (Improved) pension programs: Housebound Benefits or Aid & Attendance (A&A). Both programs are designed for veterans and their spouses should they need assistance with Activities of Daily Living (ADL) such as bathing, dressing, eating due to the beneficiary having physical or mental limitations. Housebound and Aid & Attendance are monetary benefits that are paid in addition to the basic pension rate.

#### HOUSEBOUND BENEFITS:

This benefit is available to eligible veterans and their spouses who live at home. The benefit is less than the Aid & Attendance benefit and is available to qualifying veterans and spouses who reside in an assisted living facility or in their own home. To meet the qualifications for household benefits, the veterans must have a single disability rated at 100 percent and have other disabilities rated independently at 60 percent or more OR is permanently housebound due to the disabilities. Medical evidence of the disability is required. The veteran or the spouse cannot receive both Aid & Attendance and Housebound benefits at the same time.



#### AID & ATTENDANCE BENEFITS:

If the veteran requires the aid of another person in order to perform ADLs or if the veteran is bedridden due to disabilities or the veteran is a patient in a nursing home due to mental or physical incapacity or the veteran has eyesight that is corrected to 5/200 or less in both eyes or has concentric contraction of the visual field to 5 degrees or less, an increased monthly pension amount may be added to the monthly pension.

To apply for Veterans Benefits for the first time, the veteran must submit a copy of their DD-214, DD-215 or for WWII veterans their WD form. To request your military records, you'll need access to a printer and have Adobe Acrobat Reader software.

Benefits are technically available the day after a veteran transfers assets to meet financial requirements, however, veterans should be aware that the transfer of assets can negatively impact their future Medicaid eligibility. **It is critical to speak with an elder law attorney before transferring any assets.**

A wartime period is at least one of the following:

- World War I (April 6, 1917 – November 11, 1918)
- World War II (December 7, 1941 – December 31, 1946)
- Korean conflict (June 27, 1950 – January 31, 1955)
- Vietnam era (February 28, 1961 – May 7, 1975 for Veterans who served in the Republic of Vietnam during that period; otherwise August 5, 1964 – May 7, 1975)
- Gulf War (August 2, 1990 – through a future date to be set by law or Presidential Proclamation)

Note: There's no single one answer, no simple solution for what is right for everybody. Even if you are eligible for Medicaid or VA Benefits, it's important to take a look at the needs of the individual and make a determination as to whether it makes sense for you (or your loved one) to claim benefits or to look elsewhere for a solution. The aim of using those benefits is to maximize the quality of life for the beneficiary and that will not be accomplished by using the same solution in every case.





# Living longer than you planned

## A (sort of ) tongue-in-cheek look at living too long

Retirement planning would be easy if we all came with a drop dead date, kind of like the use-by-date on a milk carton. That's what financial planners say. Tell them exactly how long you'll live and they can plan for it; start waffling and it gets harder to plan.

Say your family always dies in their early 70s. You could start collecting your Social Security benefits at age 62 (otherwise known as early retirement) based on the fact that the break-even age is about 78 if you claim early rather than wait until full retirement (age 66 or 67 depending upon your birth date). Here's the problem, let's say you have a rare genetic mutation and you live to age 84. It sucks to be you, right? Those extra 10 years or so might seem a godsend except that you planned that life would be over by now and you wouldn't be paying for your granddaughter's wedding present. You planned that you wouldn't have made friends with the neighbor and wanted to have your own wedding. You certainly wouldn't have planned that except for needing some help with the housework; you're basically hale and hearty. Eighty-four isn't even very old. It's the average life expectancy for women. Even guys can live this long. It's certainly feasible.

Here's something sad though. What seems like an okay amount of money (definitely not a great amount of money no matter when you retire) today will seem pretty insignificant in 10, 15 or 20 years so that if the really sad thing happens and you live an unfortunate length of time and we'll be pessimistic here and only plan that you'll live until your 80s, you're going to get tired of rice and beans.

It's kind of hard to change your mind when you hit 75 and still haven't fallen victim to the family disease. Jobs aren't nearly as plentiful for 70 year olds as they are for someone in their 60s in case you suddenly find yourself needing a little bit more money in your bank account each month. The price of gas and even that carton of milk generally keep going up and up and up. What you could buy with your Social Security check 10 years ago will cost more today and we'll not even discuss the effects tying Social Security to a chained CPI will have on your check should that ever happen.

Yep. Things will look pretty sad if you planned to die in your 70s. They'll look even sadder because people who get it in their heads that a certain date is the end-all and be-all, are likely to make the same sort of plan for all their important decisions (health, housing, legal, and financial) so it doesn't just impact how much money you have at the end of the month but whether or not you can live comfortably in your house and how much you're paying for doctor visits and on and on. The problem just escalates.

I'm reminded of California preacher, Harold Camping, who went on the news that the end of the world would come on Dec. 21, 2012. People actually planned for it. They quit their jobs, spent their money and planned to party as though there weren't a Dec. 22, 2012. All the partying in the world didn't stop Dec. 22, 2012 from happening.

Television personality, Willard Scott use to congratulate people on the air when they reached 100 years of age. No one does that any more and for a good reason. There are 72,000 centenarians in the United States this year and there's likely to be 1 million by the time the last Baby Boomer celebrates their 65th birthday in 2050. Do you imagine that all those people honestly thought they would live that long? That's why economist, Larry Kotlikoff, a frequent contributor to Social Security stories, advises people to consider Social Security as insurance against the mistake of failing to die on time. Plan accordingly. There are no bonus points for being right but you can't afford to be wrong.

**Interested in more articles on Social Security including information about maximizing benefits? Go to [AgingOptions.com](http://AgingOptions.com) for stories such as:**

- "When married men claim Social Security too early"
- "Should you spend down your retirement to maximize your Social Security benefits?"
- Or call us for a white paper on Social Security benefits for divorced, widowed, married or single individuals



# Ending a marriage can throw a wrench in your retirement plans

It used to be that the incidence of divorce among people 50 and over was very small compared to the rest of the population.

In 1990, less than 10 percent of people in that age group dissolved their marriages. Twenty years later, 25 percent of individuals getting divorced were 50 or older. One in three Baby Boomers is single. Single Boomers are more vulnerable economically and socially and tend to also have poorer health.

The financial implications for gray divorces (the name given for divorces among older couples) are not completely known since there is little research so far but it doesn't take a study to understand that a retirement plan for two people that is split in half will be a great deal less comfortable for either member of the relationship than when it was still whole especially if there wasn't much of a plan to begin with.

Depending on the financial expert, retirement costs 30 percent to 50 percent more for divorced Baby Boomers than for Boomer couples. While younger divorce couples have years to make up the economic losses, for Baby Boomers close to retirement, their window of opportunity is rapidly closing.

If you are 50 or over, considering divorce should include reviewing the financial consequences especially for women as they already bear the burden of lower wages, shorter work lives and longer overall lives.

Here are some recommendations for divorcing couples who are staring retirement in the face:

- Hire a financial advisor when you hire the divorce lawyer. The pool of money will now be split in half. The lawyer and the advisor can work together to help create a settlement to lessen the financial impact of the divorce.
- It will take time to rebuild credit, savings and investments. That may mean postponing retirement, reducing your lifestyle or saving a lot more.
- Provide less support to your adult children.

You can also add to that list:

- Look at long term care planning. For married couples, the first individual to fall ill or disabled is generally cared for by the well spouse. That option goes away due to a divorce and as it's likely one of, if not the most expensive aspect of aging, considering how it will be handled in the future needs to be at the forefront of retirement planning.

Social Security planning should also factor into retirement planning. Married couples have a great many options for maximizing their Social Security benefits. When you're thinking about your Social Security benefits, keep in mind that a marriage can add hundreds of dollars a month to your benefit even if the marriage has since been dissolved or your spouse has since died. If you need claiming information on Social Security benefits, please e-mail us at [info@agingoptions.com](mailto:info@agingoptions.com) for white papers that cover those topics.

Just as a marriage can improve your Social Security benefit outlook, it can also hurt your benefits. It's important to understand how a late-life marriage can impact your benefits if you choose to make such a move prior to age 60.

There is often a societal assumption that the higher breadwinner in a marriage is the man. While that may have been the case in the past, it is becoming less the case as the Boomers age. Social Security is gender neutral, meaning that benefit claiming strategies for married, divorced or widowed individuals work for either gender. Don't automatically assume that because you are male, that you have fewer claiming options. It's always best to consult with a Social Security expert to solidify Social Security planning.

New Social Security regulations also provide benefits to Same-Sex couples regardless of which state they live in.

If you are retiring or retired and already divorced and are considering a marriage, please ask for our white paper on Second Marriages by contacting us at [info@agingoptions.com](mailto:info@agingoptions.com).



# AgingOptions

## RESOURCE GUIDE

### Financial Advisors

| Name  | Addresss                             | City        | Phone          |
|---|--------------------------------------|-------------|----------------|
| Arnie Bergman<br>(Please see our ad on page 15)                 | 2702 S 42nd St Ste 101               | Tacoma      | (253) 473-7079 |
| First Priority Financial<br>(Please see our ad on page )        | 16218 Pacific Highway South Suite B3 | Spanaway    | (800) 710-9502 |
| Integrated Financial Services<br>(Please see our ad on page 11) | 5401 32nd Ave NW, Ste201             | Gig Harbor  | (253) 851-0717 |
| Raymond James<br>(Please see our ad on page 13)                 | 32015 1st Avenue South               | Federal Way | (253) 838-0710 |

Please see our story on page 9 on how to hire a financial planner

### Social Security

| Name                          | Addresss               | City     | Phone        |
|-------------------------------|------------------------|----------|--------------|
| Social Security Branch Office | Ste A 2608 S 47th St   | Tacoma   | 800-772-1213 |
| Social Security Branch Office | 811 South Hill Park Dr | Puyallup | 800-772-1213 |

Please see our story on page 17 on Social Security benefits

### Veterans Benefits

| Name                                    | Addresss                | City    | Phone          |
|---|-------------------------|---------|----------------|
| AMVETS                                  | 5717 South Tyler Street | Tacoma  | (253) 472-2552 |
| Homeless Veterans Reintegration Project | Puget Sound Region      |         | (800) 562-2308 |
| Seattle Regional Office                 | 915 2nd Avenue          | Seattle | (800) 827-1000 |
| Tacoma Vet Center                       | 4916 Center St, Ste E   | Tacoma  | (253) 565-7038 |
| WA Department of Veterans Affairs       |                         |         | (800) 562-0132 |
| Veterans Estate Management Program      | Puget Sound Region      |         | 800-562-2308   |



**“Your health is your most important asset...without your health, you have nothing. And if you’re less fit than you could be, you’re sacrificing not just dollars, but days — or years — from your life.” ~J.D. Roth (Finance Writer)**







# Your Health

Promotes independence and saves money

**W**hy should an elder law attorney be concerned about your health? Everything to do with aging is wrapped around whether or not you remain healthy as you age.

Will you run out of money? The chances you will increase dramatically if you need to move to specialized housing or need specialized care of any sort.

Will you be able to remain in your home? People with two or more chronic diseases often find that they cannot.

Will you be a burden on your children? It depends upon what you consider a burden but the chances increase that your children will be involved in the financial, housing, legal or health areas of your life if you allow your health to slide to the point that you yourself cannot remain in charge of them.

From what we now know, good health isn't something you start at 60. That's not to say you can't start at 60 and see some real benefits. You can start at 93 and see some benefits. For the optimum amount of benefits though, you need to start being concerned about and working at being healthy when you are in your 20s, 30s and 40s. Barring that, you should start today.

Staying healthy means eating right, exercising, getting enough sleep and staying socially engaged.



Pick your final home carefully

# Studies show that neighborhoods can help or hinder 'aging in place'

By just about any measure or study, people overwhelmingly want to grow old at home—by as much as 90 percent according to AARP. Dan Buettner, author of *Blue Zones* studied places where people lived the longest and how they achieved that. He argues that medications, exercise and supplements are resources that we don't use and don't work because we don't stick with them. According to Buettner, if you want to change the long term health of people you must change an entire system and that begins with the policies of the places we live.

So, do you live in a healthy neighborhood? Where you choose to live and indeed where you choose to die are important considerations that may mean the difference between having diabetes and not having diabetes, having heart problems and not having heart problems so before you automatically hunker down with a refusal to budge you should be aware of research about neighborhoods.

## Where you live determines your health care

Researchers found in one study that where you live not only dictates how much health care seniors receive but also which medications doctors prescribe for them. The research is new but the results are not. Seniors often get prescribed medications deemed high risk (and listed in the Beers Criteria) but the study also showed that treatment options that are proven beneficial to seniors were often ignored for no apparent reason than from which part of the country they live in.

The report is part of the Dartmouth Atlas Project and has occurred annually for about 20 years in an effort to understand the geographic differences in the use of medical services. This was the project's first look at prescription drug use. The point of the study was to find ways to improve patient care and maximize the value of Medicare Part D spending by finding the source of the variation and responding to it.

The study found no correlation between higher drug

spending and effective care. In an analysis of high risk medications, the study found that some regions "appear to selectively use high-risk and discretionary medications at high rates while, in relative terms, forgoing effective drug therapy."

The study authors concluded that "(r)egional variation in the use of prescription medications has important implications for patients. The findings presented in this report suggest that region of residence influences the quality of prescription care received, as demonstrated by variation in both effective and potentially harmful medication use."

## Good neighborhoods prevents stroke

In the U.S., stroke is the leading cause of disability but researchers think they may have found a way to lower that risk. Researchers in a University of Michigan study found that living in a tight-knit neighborhood lowered the risk of stroke among adults 50 and over. The study published online in *Social Science & Medicine* looked for stroke predictors as a way to make inroads on the estimated \$25.2 billion in annual direct costs associated with stroke. This study looked at the positive social climate that impacts a neighborhood's health when neighbors view each other with a higher level of trust.

Feeling connected builds what researchers term social cohesion. That connectedness was associated with a lower risk of stroke by up to 48 percent (about the same difference in strokes as that between a smoker and a non-smoker). Variations in neighborhoods are well documented. Over the years, several studies have indicated that neighborhoods negatively impact the physical or mental health of neighbors through environmental factors. Neighborhoods have been studied in relationship to violence, child development and childbearing practices but researchers in the last decade or so have begun to look at the positive health aspects associated with neighborhoods independent of individual-level attributes.

# SOUTH SOUND SURGERY

AUBURN SURGICAL CENTER



## SPECIALTIES

General Surgery  
Advanced Wound Care  
Advanced Laparoscopic & Minimally Invasive Surgery  
Varicose Vein Treatment  
Colonscopy & Endoscopy  
Hernias & Hemorrhoids

John Conrad, MD  
General Surgeon / Wound Care Specialist

***You all work as a team for the betterment of the patient. My thanks is hard to express, but my appreciation is real.***

- Teri T.

***Couldn't find a better group of doctors and nurses...dedicated to their work... Thank you for caring so much!***

- Phyllis G.

***I want to thank everyone for the EXCELLENT service and care I received! ... Dr. Conrad did such an exceptional surgery that I have virtually no pain afterwards. A big thank you!***

- David S.

***I can't thank you enough! I'm so glad we found you!***

- Lori L.

***I don't worry about coming in because everybody takes good care of me.***

- Dorothy S.

***What a great group of people to have for medical care; and what a superb doctor!***

- Don W.

***One of the most comfortable medical experiences I have had.***

- Curtis T.

FAX: (253) 394-0020  
101 2nd St NE | Auburn

(253) 394-0125



Studies such as this may have important policy implications. Investing in social capital such as making neighborhoods walker friendly, planning meeting places and constructing attractive green areas benefit the health of neighbors. Some studies seem to indicate that those factors are a distinctive form of social capitalism especially among women.

It isn't necessary to wait until your town or county chooses to invest in a neighborhood to begin to take advantage of these studies. Certainly, at many points of your life, you were already aware of "good neighborhoods" and "bad neighborhoods." It makes sense to choose to live in a neighborhood that provides the best opportunities.

### Green spaces prevent diabetes

There are some cities and neighborhoods that just seem to make you breathe better but do they really? Australian researchers have found that people living in areas with more green spaces have significantly lower rates of type 2 diabetes than those with less green space. Many cities already have policies in place to green them up in order to protect ground water resources or keep areas cooler or even to increase the time people spend shopping at their stores. Those findings may help cities that are already looking for ways and reasons to invest in green spaces to have more reasons to do so. We know that providing people with green spaces and walking paths creates a bit of "if you build it they will come" mentality but these researchers are directly tying in the investment in access to open spaces to the healthiness

of its citizens. The researchers found that diabetes rates dropped as green space increased so that individuals living in spaces with 40 percent or more green space had 8 percent of their population with diabetes whereas those neighborhoods with 20 percent or less green space had diabetes rates of 9.1 percent. Those areas with more green space also had a lower prevalence of high-fat diets, fewer smokers and higher rates of individuals eating five or more fruits and vegetables a day.

A lot of people fight a move to a senior living facility only to discover that they are vastly healthier, participate in more activities and enjoy life more once they've made the move because senior living facilities make it easy to get good food, socialize and see the doctor. That's not to say that you can't have those things in your own home and in your current neighborhood. It's that those things are built into senior living environments. If they are not built into your neighborhood's environment and you want to continue to live in your own home you either need to find a new neighborhood or you need to work at getting those things in your neighborhood while you have the energy and time to push it in the right direction. If you are already thinking about moving, make it a priority to find a neighborhood with a high level of trust between neighbors, significant amounts of green space and a high walkability score.

---

Call AgingOptions for a copy of the Beers Criteria mentioned at the beginning of this article.





# Medigap or Medicare Advantage?

Medicare Advantage and Medicare Supplement (also called Medigap) are two entirely different things but many people confuse the two of them. Choosing which one will work best for you will depend upon your needs and circumstances as well as how much effort you want to put in to the process of selecting a plan.

## MEDIGAP

Medigap has been around since Medicare and refers to the plan's ability to fill the "gaps in protection from original Medicare (Part A and Part B).

**Medigap plans are standardized in that each Plan A covers the same things as any other Plan A and so on and provides a uniformity of coverage in the 47 states that offer it.** (Massachusetts, Minnesota and Wisconsin offer their own programs.) So if you choose a more expensive plan, you are paying strictly for a perception (either rightly or wrongly) of better service.

*Part A and Part D together make up original Medicare, which covers benefits on a fee for service (FSS) basis.*

**Medigap only covers the gaps in covered expenses.** This means that it does not cover uncovered expenses such as dental, vision or hearing.

**Medigap also does not cover prescription drug coverage needs.** Those who have a need for prescription drug coverage need to purchase Part D (except with the rare exception of some early Medicare beneficiaries). If you exclude drug coverage from the comparison between Medigap plans and Medicare Advantage plans, any standard Medigap plan will contain more benefits than any standard Medicare Advantage plan, however, some Medicare Advantage programs offer benefits beyond those found in Part A and Part B.

**Medigap plans always require an additional**

FRANCISCAN HEALTH SYSTEM



**Helping people live each day with dignity and comfort.**

*Franciscan Hospice and Palliative Care provides expert end-of-life care.*

If you or a loved one find yourself with a life-limited illness, competent, compassionate care is within reach. We provide individualized care designed to meet each person's unique physical, emotional and spiritual needs, with a focus on effective pain management and quality of life.

Franciscan Hospice is currently seeking volunteers in Pierce County. If you would like to learn how to become a Hospice Volunteer with Franciscan and volunteer in your community, please call 253-534-7050.

To contact Franciscan Hospice and Palliative Care, call 1-(866) 969-7028

FOR ADVANCED MEDICINE AND TRUSTED CARE, CHOOSE FRANCISCAN.

† CATHOLIC HEALTH  
INITIATIVES

**Franciscan Hospice  
and Palliative Care**



**monthly premium.** But because the plans are much more comprehensive than Medicare Advantage they are significantly less risky for those who may have major medical needs or have lower incomes allowing them to budget for out-of-pocket expenses.

**One other thing that differentiates Medigap from Medicare Advantage is that Medigap has no network.** This means that individuals are able to go to any provider that accepts Medicare and be covered.

## MEDICARE ADVANTAGE

Medicare Advantage plans provide an alternative to Medigap plans.

**They are private insurance company contracts that provide Medicare Part A and Part B coverage but depending upon the insurer and the specific plan may also include additional benefits not offered under Medigap.** Most Medicare Advantage plans offer a prescription drug program and may also offer additional benefits such as dental, vision, hearing, gym memberships, discounts for some medical supplies and transportation to and from medical appointments. Some may even waive the three midnight hospital stay requirement before approving nursing home coverage.

**Medicare Advantage plans are often but not always cheaper than Medigap plans at least on paper and sometimes there are no monthly premiums for Medicare Advantage plans.** The plans are a vital source of coverage for low-income beneficiaries. Forty-two percent of Medicare Advantage plans had incomes below \$20,000 and most (35 percent) cite the lower costs as the reason for choosing Medicare Advantage Coverage.<sup>2</sup>

**Medicare Advantage plans are not standardized and they are often network-based meaning that you must see their providers usually through one or more of the following options:** An HMO or health maintenance organization that uses a primary care physician to coordinate patient care;

A PPO or preferred provider organization similar to an HMO but not requiring a primary care physician and offering more flexible options around out-of-network care;

That network may mean that if you are traveling out of network that you may be subjected to additional fees and/or may not get support for non-emergency care. There is almost never coverage for traveling outside the United States.

And finally a PFFS or private fee-for-service that does not limit care to networks but offers no guarantee that a doctor or hospital will accept the plan.

That network may mean that if you are traveling out of network that you may be subjected to additional fees and/or may not get support for non-emergency care. There is almost never coverage for traveling outside the United States.

## CHOOSING BETWEEN MEDIGAP AND MEDICARE ADVANTAGE PLANS

Before making a decision between Medigap and Medicare Advantage plans you'll need to research the benefits of every plan that you are considering on these merits:

- Monthly premium
- Deductibles
- Provider restrictions
- Benefits
- Anticipated costs associated with your typical use of any healthcare options (doctors, hospitalizations, prescription drugs, preventative care, etc.)

Making a decision between types of plans or between Medigap and Medicare Advantage plans can be daunting. Healthcare is a major financial decision for people 65 and over and likely to impact them the rest of their lives. In cases where a person's health takes a major downturn, that choice may be more or less permanent. If you are either unwilling or unable to put the effort into comparing all the variables, your best bet will be Medigap rather than Medicare Advantage.

Choosing which type of plan to go with does not have to be done alone. In fact, a *reviewjournal.com* article suggested that all healthcare enrollees, regardless of their age should consult a financial advisor before choosing a plan.

For more information on Medicare and Medigap, ask for our white papers on these topics.





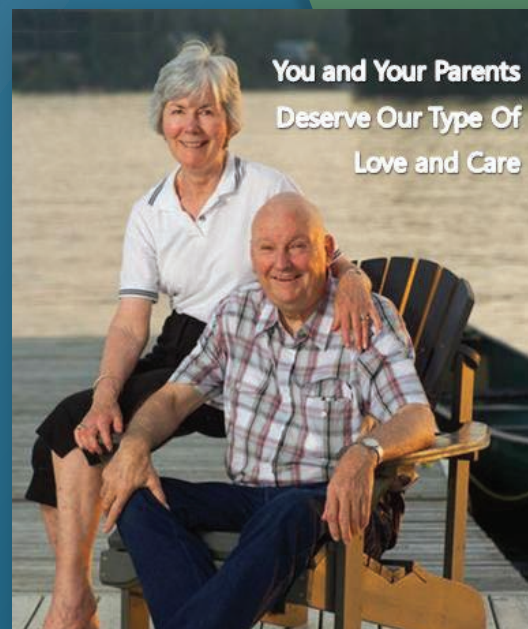
## A&B Homecare and Staffing, INC.

***We Make Life Easy, As Easy As A&B!***

Providing Professional, Compassionate Care  
In Pierce and King Counties for Over 11 years

- Providing Loving
- Caring Companionship
- Peace of Mind
- Security
- For a few hours...  
or all day!
- One day a week...  
or everyday!

Professional, Licensed, Bonded and Insured



***Complete Care  
For the  
Entire Family***



**Call Today For a FREE  
In Home Assessment**

**24 Hour Care  
7 Days Per Week  
Meal Preparation  
Housekeeping  
Transportation  
In-Home hair Care**

***Find us in [www.adultcareguide.com](http://www.adultcareguide.com)***

4424 6th Ave, Tacoma, 98402  
32700 Pacific Hwy S. Ste #14, Federal Way, 98003  
[www.aandbhomeworkinc.com](http://www.aandbhomeworkinc.com)  
[mail@aandbhomeworkinc.com](mailto:mail@aandbhomeworkinc.com)

**253 - 274 - 0044 - Pierce County  
253 - 877 - 9507 - Pierce County  
888 - 535 - 0044 - Toll Free**





## How you live determines how you age

Cell aging could be slowed with lifestyle changes

It's no secret that a healthy life is a product of eating right, getting enough sleep, reducing stress and exercising but most studies look at how those changes impact your weight or your heart or some other major system. Now there's a study at the cellular level that found that lifestyle changes that included eating more fruits and vegetables, spending time meditating or doing yoga and managing stress increased the length of telomeres.

Telomeres are the caps on our chromosomes that block the ends of the enzymes. Dr. Dean Ornish, founder of the Preventive Medicine Institute and lead researcher in the study likens them to the plastic caps on our shoelaces. As we age, those caps get smaller. What the study tried to do was look at telomeres in individuals who didn't change their lifestyles and also at telomeres in individuals who did change their lifestyles and found that those that made changes had an increased length in their telomeres. The more changes people made to their lifestyle, the more changes were evident in the telomeres. Since shorter telomeres are associated with increased risk of developing chronic diseases and also of decreased lifespan, the study authors hoped to show that increasing the length of the telomeres showed the opposite response.

In some respects, the study doesn't tell us anything we don't already know. Ask any doctor, regardless of specialty or even lack of specialty and they'll tell you not to smoke, eliminate any excess weight, get regular exercise and regular sleep, eat right, be socially engaged,

and reduce stress. That message hasn't changed much in decades. But, we often think we are genetically engineered for certain things, here's a study that says it's within our ability to change at least some of that engineering, re-engineering if you will that part of us that has seemed unchangeable.

More studies would have to be undertaken to corroborate any sort of conclusions that can be drawn from the study. Still, it's interesting that long term (the study was for 5-years) changes in lifestyle affected cells in such a way that those changes could potentially prevent or even reverse some common chronic diseases such as heart disease, early-stage prostate cancer, and type 2 diabetes.

If you are like most people approaching retirement or already in retirement, you hope to spend those years traveling, enjoying your family and otherwise making use of the extra time you have available but those dreams depend upon having your health. Retirement is made up of many aspects but without health you'll be forced to accept something less. For instance, if you're not healthy, you may be forced to move somewhere that provides help or you may have to pay for help in the home. Those costs add up. Meaning that, the cost of not caring for your health can be the financially equivalent to choosing to not be able to take a cruise or choosing not to be able to visit where your great-great-grandfather was buried. Your health is your greatest asset. Protecting it should be your greatest priority.

# Cost of Alzheimer's expected to skyrocket

The *New England Journal of Medicine* published an article in April 2013 that found that the financial burden along with the number of people projected to get dementia will more than double within the next 30 years. Previous information had mostly come from the advocacy group, the Alzheimer's Association.

The research, led by an economist at the RAND Corporation found that nearly 15 percent of people aged 71 or older have some form of dementia. By 2040, the number of people expected to have Alzheimer's or some other form of dementia will reach 9.1 million people.

One major cause for concern is the Baby Boomer generation had fewer children. According to the Centers for Disease Control and Prevention (CDC), the average number of children per family peaked at 3.7 between 1940 and 1957. However, since 1972, the average family size leveled off to approximately two children per family. In addition, approximately 20 to 25 percent of Baby Boomers are childless. Research in

2010 found that a projected 30 percent of baby boomers who will need assistance will lack care from spouses or adult children. Being unmarried reduces the likelihood of having personal care and increases the likelihood that you will end up in a nursing home.

While it's true that childless and especially childless and unmarried older adults need to proactively find solutions for aging issues, even adults with children may find that the geographical distance from their family members or family dynamics may prevent those children from playing an active role in their caregiving later in life.

Regardless of whether or not you get Alzheimer's, planning for future disability won't ever be a wasted effort. Putting plans in place through living wills, advanced directives, conversations with your support community (family, neighbors etc.), and Powers of Attorney will help to get your legal house in order and relieve stress.



**Pulmonary**  
Consultants, PLLC

Breathe easier. Sleep better. Live healthier.

OVER  
**25**  
YEARS

The premier provider of pulmonary critical care and sleep medicine in the Pacific Northwest.

**Comprehensive care for  
breathing and sleep problems**

**Our Services Include:**

- Sleep Medicine
- Pulmonary Rehabilitation
- Pulmonary Care
- Asthma Care



[www.pulmonaryconsultants.org](http://www.pulmonaryconsultants.org)

**Call Us:**  
**253.572.5140**

**Offices In:**

- Tacoma
- Gig Harbor
- Puyallup
- Federal Way

Trust Pulmonary Consultants for leading-edge comprehensive care and breathing/sleep solutions. Call us at 253.572.5140 or use our online form (at [www.pulmonaryconsultants.org/request-an-appointment](http://www.pulmonaryconsultants.org/request-an-appointment)) to schedule your consultation.





# Five myths about exercising for older adults

Have you eliminated your movement-based activities and replaced them with sitting-based activities?

In a recent survey, 65 percent of seniors admitted that they had two or more chronic conditions but most were apathetic about doing something to improve their health. The *United States of Aging Survey* by the National Council on Aging found that one-fourth of seniors indicated they did no exercise despite concerns about maintaining their quality of life and health and a slightly higher percentage expected their lives to get worse in the next five years. A third of all seniors have taken no steps to prevent having a fall. So you'd think that there would be a reason or a barrier of some sort to cause people to say that they won't take even minor steps to improve their chances of aging healthy but in fact the survey found that 46 percent of all seniors did not find the lack of energy, money, willpower or insurance were the deciding factors to do nothing. They chose to do nothing because that was their choice.

Exercise helps to build muscle and bone strength or maintain it if you already have it. People with chronic pain conditions such as arthritis, osteoarthritis, back pain or other conditions can improve their overall condition by strengthening the muscles of their stomach, hips and thighs. Stronger muscles can take weight and stress away from joints while repeated mild stress to bones helps them to maintain their calcium content and structure. Repetitive motion can help lubricate joint surfaces and help lessen joint stiffness and achiness. Here are some other reasons it's important to stay active.

A study by the World Health Organization (WHO) found that despite our longer lives we aren't living better. Most of us will live a decade or longer with disabilities or poor health. WHO recommends that older adults (65+) get at least 150 minutes of moderate exercise or 75 minutes of vigorous exercise each week.

If you are like most people, you've developed a list of reasons why those recommendations pertain to someone other than yourself. Here are five of the most used excuses for not applying yourself physically to the task of staying out of a nursing home.

## **I'm already too far out of shape to ever recover.**

It's true that if it's been awhile or you've never exercised you need to take some precautions. Ideally you would have a chat with your doctor and he or she could recommend some light exercises for starting out. One of the easiest exercise options is to go for a walk. Walking requires very little equipment (appropriate clothing and comfortable shoes) and you're liable to already have what you need. The benefit to walking is that no one but you has to know your goal. Your goal could be to walk to the mail box this week and then to gradually increase that distance over weeks until you reach the length of your block and then around the block.

## **I'm too old.**

Jack LaLanne, the fitness guru once said, "The only way you can hurt the body is not use it. Inactivity is the killer



Pacific Wound Healing Centers  
care starts. healing beings.



Dedicated to Providing  
The Most Advanced  
Outpatient Clinical Wound Care

*uncompromising care*

*"He and his staff made this difficult time for me a much easier experience.*

*I have now healed completely,  
but will always think  
of everyone there with  
fond memories."*

Kathy L

Combining Compassionate Care With  
The Most Advanced Care Treatments

*"You were so kind and nice. Thank you for explaining things to us and  
for just being yourself. Dr. Conrad, you and your nurses were great."*

Carolyn and Eric S.

Our Goal Is To Exceed  
All Expectations!

*"My experience with Dr. Conrad and his staff was very good and  
(they were) helpful with everything from appointments to handling my  
insurance. Dr. Conrad was very up front with me and he and his staff  
made sure I was taken care of during my surgery and recovery. I would  
not hesitate to see him again."*

David K.

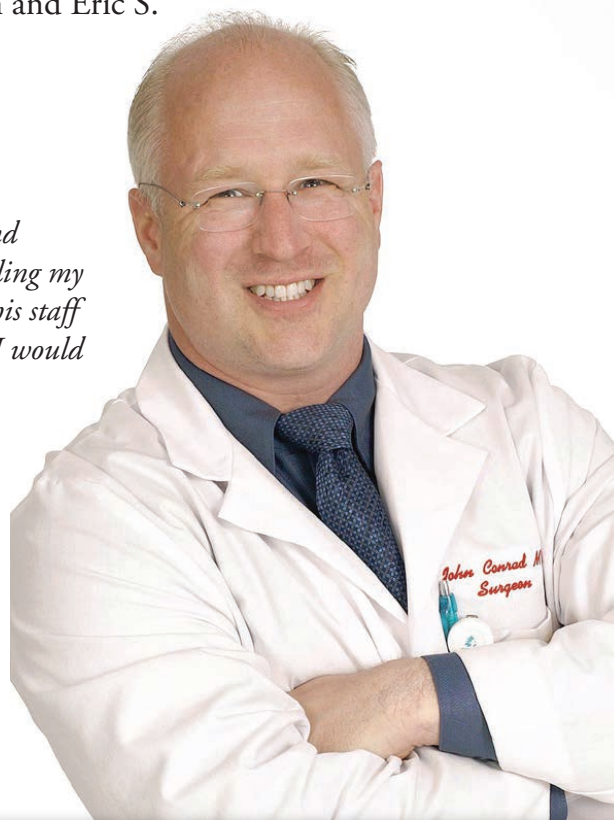
*I cried when I left (the wound care center). They (the  
staff) became like part of the family."*

Gay H.

**(253) 394 - 0125**

**Fax: (253) 394 - 0020**

**101 2nd St NE | Auburn**



**John Conrad, MD**  
General Surgeon  
Wound Care Specialist





and, remember, it's never too late." LaLanne said his life was transformed when as a 15 year old boy struggling with bulimia and headaches, he heard a lecture by pioneering nutritionist Paul Bragg. "After the lecture I went to his dressing room and spent an hour and a half with him. He said, 'Jack, you're a walking garbage can.'"

LaLanne was an early proponent of lifting weights. At a time when doctors were preaching that lifting weights would likely cause people to have heart attacks, LaLanne was opening one of the first fitness clubs and was one of the first to suggest that the elderly, women and disabled should also exercise.

As people age, they tend to lose muscle mass in a condition known as sarcopenia. That reduced muscle strength is one of the major causes of disability as we age. We might not even notice the first signs of our increasing disability (or age) thanks to what Dr. Mark Lachs, a geriatric physician and writer of "Treat Me, Not My Age" calls an embarrassment of riches when it comes to the human body. We have so much excess capacity beginning at birth that it's not until much later in life that we begin to notice the lack of capacity (for most people that time is between 80 to 90). Lachs says that we can "tweak" that time-frame so that you never experience severe disability and you delay a future date with a wheelchair or walker.

### **I'm too busy.**

How busy will you be when you can no longer live unassisted? You can get a decent amount of exercise by working out 20 to 30 minutes three times a week. You can do your exercises in 10 minute increments. You could exercise simply by running (or walking) in place whenever a commercial comes on. A 2007 study published in the "Monthly Labor Review" on how Americans spend their leisure time found that at that time, individuals 65 to 69 watched an average of 3.1 hours of television a day. The study also found that those 70 and over watched an average of 3.8 hours of television a day. Those numbers are for women. Men watched even more television.

### **I might fall.**

Exercises not only build strength and tone muscles but they strengthen our balance. For those people truly concerned that they might fall while exercising, there are exercise options that don't require leaving a chair. One such program is Sit and Be Fit created by Mary Ann

Wilson, an RN in the field of post-polio rehabilitation and geriatrics. Her program has won awards for years and can be found on PBS and YouTube.

### **Exercise is boring.**

Routines can make work of even the most fun activities so it's little wonder that many people consider the daily drudge of an exercise program to be... well the physical equivalent of going to the dentist. But exercise comes in many shapes and sizes and while it can be a chore to create workouts that continue to be fresh and exciting day after day, you've only to hang out in the morning at your nearest shopping mall to find people who look happy and engaged as they troop around the inside of a giant box. Mall walkers make use of having buddies to chat with to help them stay engaged but you can achieve many of the same sort of benefits by having workout buddies, whether it's a pickup game of hoops (yes, seniors can play basketball) or dancing, gardening, swimming or Tai Chi. Having a group of friends in the same activity will make the time fly and force you to be accountable for your exercise routine. Who knows you might get good enough to try out for the Washington State Senior Olympics.

## American Medical Rental & Supply

*Providing medical supplies and equipment to healthcare staff and patients.*

|  |   |  |
|--|---|--|
| <b>4358 S. Washington</b><br><b>Tacoma, WA 98409</b><br><b>Phone # 253-473-3055</b><br><b>Fax # 253-475-0356</b> | <b>Store hours for both locations</b><br><b>Monday - Friday 9am to 5pm</b><br><b>Open Saturday 9am to 4pm</b> | <b>1812 E. Main</b><br><b>Puyallup, WA 98372</b><br><b>Phone # 253-848-1254</b><br><b>Fax # 253-845-3402</b> |
|--|---|--|

**-Wheelchairs**  
**-Orthopedics**  
**-Walkers**  
**-Lift Chairs**  
**-Hospital Beds**  
**-Pediatrics**

**-Compression Stockings**  
**-Power Mobility**  
**-Bathroom Safety**  
**-Oxygen**  
**-CPAP/Bi-Level**  
**-Nebulizers**

**-Urological**  
**-Incontinence**  
**-Wound Care**  
**-Diabetic Supplies**  
**-Home Aids**  
**-Knee Scooters**

Find us online at:  
[www.americanmedicalrental.com](http://www.americanmedicalrental.com)



# Why bother hiring a geriatric physician?

If it made sense to hire a pediatrician for your children's health doesn't it make sense to hire a geriatrician for the health of a geriatric?

Geriatric physicians have completed a residency in either Internal Medicine or Family Medicine but in addition have one to two years in the study of the medical, social and psychological issues of individuals 65 and over. Rather than concentrating on just the treatment of physical problems, a geriatrician will address issues such as memory loss, arthritis, osteoporosis and mobility issues and recognizes how those health conditions impact his/her patients on a social and emotional level.

Some tests and procedures that make sense for younger members of society not only don't make sense any longer but actually pose a risk for the elderly. One study found that physicians routinely prescribed drugs to elderly patients that were specifically advised against for older patients because of severe side effects or the tendency of the drugs to stay in their systems for longer

than prescribed. In a study, researchers found that one out of five seniors were prescribed medications from a list of 110 drugs to avoid prescribing to the elderly. About 5 percent of the seniors had been prescribed at least two medications from the list. The study looked at six million men and women who were enrolled in Medicare Advantage plans.

In another study of veterans that was reported in an online article for JAMA Internal Medicine, the frequency of treatment for prostate cancer among men ages 85 and older did not decrease with age and that those who underwent biopsy received aggressive treatment. For older men who underwent prostate cancer treatment, almost 14 percent had new-onset urinary incontinence and a similar percent had new-onset erectile dysfunction.

Call AgingOptions at 1(877) 76-AGING for a copy of the Beers Criteria mentioned in this article.

**Orchard Park**  
HEALTH & REHAB BY revera



## For when you need us.

If an accident, illness or surgery has left you or someone you care about in need of skilled nursing or rehab care, Orchard Park Health and Rehabilitation Center can help. Our care services are designed to help you achieve the highest quality of life and independence possible.

Call today for more details.

- Long Term Care
- Rehabilitation
- Semi & Private Rooms

253-475-4611  
4755 South 48th St

[reveraliving.com](http://reveraliving.com)

# Concierge medicine offers another option to the traditional approach to health

It's often called concierge, boutique, retainer, or subscription-based medicine but whatever it's called, it's a direct health care practice that's becoming more popular with physicians. There are 28 practices or individuals currently offering this service in Washington. In 2013, the Washington state Office of the Insurance Commissioner reported that 13,373 patients had enrolled in direct practice.

So why choose to pay an additional \$25 to \$72 or more per month for care when you already pay for insurance? Part of the answer is that the doctors using this business model have far fewer patients and can provide more in-depth preventive care.

An estimated 1.5 million Americans are under the care of a private-physician. Doctors in private pay practices have more time to spend with patients and can offer extensive annual physicals. That additional time to educate and talk to patients about prevention can pay off in better overall health.

A recent study published in *The American Journal of Managed Care* found a 79 percent reduction in hospital admissions for Medicare patients who received care from a MDVIP-affiliated practice. MDVIP is the country's largest network of private physicians.

A *Forbes* article in March of 2013 offered Concierge Medicine as an option for patients seeking better medical care especially with looming doctor shortages. The Affordable Care Act aggravated an already dire situation by bringing even more patients into a mix in which huge numbers of doctors retire (because they are Baby Boomers and would have anyway), not enough doctors are being given residencies and poor work situations brought on by low reimbursement rates have combined to create a perfect storm.

One way that doctors have responded is that an increasing number of them have chosen to open Concierge medical practices. Medical practices offer patients the ability to pay a monthly fee for enhanced services such as 24/7 access, e-mail consultations, longer appointments and same day appointments. "The recipe and mechanism for these improved metrics is quite simply the much

better doctor-patient relationship and unrestrained access and communication that is generally "standard" within these concierge models," said Dr. Rob Emerick of Choice Cardiovascular in Gig Harbor. Dr. Emerick left traditional medicine to start his own clinic where his goal is to have no more than 150 patients. In contrast, the average U.S. primary care physician carries 2,300 cases in the traditional medical system.

Another provider is Dr. Jerry Mixon. After practicing in the traditional medical model for twenty-three years, Dr. Mixon founded the Longevity Medical Clinic. His internal medicine practice's focus led him to develop protocols for concentrating more on preventative care rather than treating illnesses in an acute treatment setting.

Neither of these physicians replaces their patient's primary care physician but rather coordinates their efforts with the primary care physician.



**Enjoy life...  
with LASIK!**

Not all LASIK procedures are created equal. Trust your precious eyesight to the team of highly respected eye surgeons at Cascade Eye & Skin Centers. Our doctors are at the forefront of eye surgery techniques, offering blade free (IntraLase), all-laser custom LASIK.

**CASCADE**  
Eye & Skin Centers, P.C.

**Eye Care Services**

- LASIK with IntraLase® and Custom Vue® • PRK
- Medical and cosmetic eyelid surgery and brow lift
- Cataract surgery • Glaucoma • Macular degeneration
- Intraocular lens implants (including multifocal lenses)
- Diagnosis and treatment for retinal conditions
- Comprehensive eye care for adults, adolescents & children
- Optical shop • And so much more!

**When experience counts, we're the ones to see!**

**253.848.3000**  
www.cascadeeyeskin.com

Puyallup Auburn University Place Gig Harbor Bonney Lake



# New to Medicare?

- What are my options?
- Which plan is right for me?
- How do I choose?



## Get the answers you need!

Humana is one of the country's more experienced healthcare companies, serving people with Healthcare for more than 50 years. Turn to Humana to help you find a plan that's right for you! Our licensed sales representatives are happy to talk with you on the phone or visit you at home.

## GET ANSWERS! CALL TODAY!

**1-800-819-2691 (TTY: 711)**

**8 a.m. to 8 p.m., Monday through Friday**

# Humana®

Humana is a Medicare Advantage organization and a stand-alone prescription drug plan with a Medicare contract. For accommodation of persons with special needs at sales meetings, call 1-800-819-2691, TTY: 711, 8 a.m. to 8 p.m., Monday through Friday.

Y0040\_GHHHFHCHH Accepted





# AgingOptions

## RESOURCE GUIDE

### Concierge Doctors

| Name                           | City       | Type of Providers  | Monthly Cost | Phone          |
|--------------------------------|------------|--------------------|--------------|----------------|
| Choice Cardiology              | Gig Harbor |                    |              | (253) 432-4466 |
| DirectCareMD/Heritage          | Olympia    | 1 MD/ 1 ARNP/ 1 DO | \$61         | (360) 704-2362 |
| Hirsh Holistic Family Medicine | Olympia    | 1MD/ 1 ARNP        | \$100        | (360) 464-9965 |
| Paladina Health Group of WA    | Tacoma     | 2 MD               | \$64         | (253) 272-0269 |
| Qliance Medical Group          | Tacoma     | 14 MD/ 3ARNP       | \$84         | (253) 254-7380 |
| Vantage Physicians             | Olympia    | 2 MD/ 4 ARNP       | \$95         | (360) 438-1161 |

For information on Concierge Doctors, see the story on page 34

## Geriatric Care Providers

| Name   | Address                          | City        | Phone          |
|--|----------------------------------|-------------|----------------|
| Dr. Conrad (Please see our ad on pg 23 & 31 )      | 101 2nd St. NE                   | Auburn      | (253) 394-0125 |
| Pulmonary Consultants (Please see our ad on pg 29) | 34509 9th Ave S Ste 104          | Federal Way | (253) 661-3288 |
| Choice Cardiology                                  | 4423 Point Fosdick Dr Nw Ste 300 | Gig Harbor  | (253) 432-4466 |
| Pulmonary Consultants (Please see our ad on pg 29) | 11511 Canterwood Blvd NW         | Gig Harbor  | (253) 851-2235 |
| Pulmonary Consultants (Please see our ad on pg 29) | 2920 S Meridian                  | Puyallup    | (253) 604-4599 |
| Pulmonary Consultants (Please see our ad on pg 29) | 316 Martin Luther King Jr 401    | Tacoma      | (253) 572-5140 |
| Pulmonary Consultants (Please see our ad on pg 29) | 2121 S 19th St                   | Tacoma      | (253) 301-6850 |
| Pulmonary Consultants (Please see our ad on pg 29) | 1708 Yakima Ave #203             | Tacoma      | (253) 572-5140 |

|  |   |   |
|--|---|---|
| <p><b>Enumclaw</b></p> <p>Mary Ballard MD</p> <p><b>Lakewood</b></p> <p>Deepshikha Bhasin MD</p> <p>Margaret Gaines MD</p> <p>Steven Gist MD</p> <p>Hui Hong MD</p> <p>Godofredo Mateo MD</p> <p><b>McChord</b></p> <p>Charles Wolf MD</p> | <p><b>Orting</b></p> <p>Dieter Eppel MD</p> <p><b>Puyallup</b></p> <p>John Putnam MD</p> <p><b>Spanaway</b></p> <p>Alona Garcia PT</p> <p><b>Tacoma</b></p> <p>Shiraz Ahmed MD</p> <p>Ranjy Basa MD</p> | <p>Catherine Beaupain-Anderson PT</p> <p>Poonam Bhagia MD</p> <p>David Cameron MD</p> <p>Sharon Falzgraf MD</p> <p>Robert Flack MD</p> <p>Luther A. Frerichs MD</p> <p>Deborah Hammond MD</p> <p>Marvin Hayami MD</p> <p>Wanda Jirau-Rosalay MD</p> |
|--|---|---|

|                         |                    |                     |
|-------------------------|--------------------|---------------------|
| Ray Krueger MD          | David Munoz MD     | Monica Sethi MD     |
| Mary Lim DO             | Oscar Ortega MD    | Jerry Sullivan MD   |
| Douglas Louie MD        | Lisa Plymate MD    | Iris Tio-Matos MD   |
| Kathleen Magonigle ARNP | Richard Pulido MD  | Kristine Tiuseco MD |
| Joseph McCarthy MD      | Joseph Regimbal MD | Richard Waltman MD  |
| Thomas Michels MD       | VanEssa Sage PT    | Peter Weber DO      |
| Royce Morrison MD       | John Selden PT     | Nouansy Wilton MD   |

For information on Geriatric Doctors, see the story on page 33

## In-Home Care, Home Health & Hospice Agencies

| Name   | Address                  | City             | Phone          |
|--|--------------------------|------------------|----------------|
| Franciscan Hospice and Palliative Care<br>(Please see our ad on pg 25) | 2901 Bridgeport Way West | University Place | (253) 534-7000 |
| A&B Homecare<br>(Please see our ad on pg 27)                           | 4424 6th Avenue          | Tacoma           | (253) 274-0044 |

|                              |                                |  |
|------------------------------|--------------------------------|--|
| <b>Fife</b>                  | Always Best Care               | Maxim Healthcare Services                      |
| First Choice in Home Care    | At Home Care                   | MultiCare Good Samaritan Home Health & Hospice |
| <b>Lakewood</b>              | Catholic Community Services    | Puget Sound Home Health Care                   |
| ResCare Home Care            | Family Resource Home Care      | ResCare Home Care                              |
| <b>Sumner</b>                | Gentiva Health Services        | Right At Home                                  |
| Arcadia Home Care & Staffing | Good To Be Home Care           | Sound Options, Inc                             |
| <b>Tacoma</b>                | Home Instead                   | St. Joseph Hospital Hospice                    |
| A & B Home Care              | Jewel Senior Manor             | Visiting Angels                                |
| Advanced Health Care         | Korean Women's Association     |  |
|                              | Lutheran Community Services NW |  |

## Medical Supplies

| Name   | Address               | City        | Phone            |
|--|-----------------------|-------------|------------------|
| Washington Eldercare   | 31919 6th Ave So      | Federal Way | (253) 951-2537   |
| American Medical Rental & Supply (Please see our ad on pg 32)    | 1812 E. Main          | Puyallup    | (253) 848-1254   |
| MedEx - Medical Equipment, Supplies, Rentals, and Mobile Repairs | 16314 Pacific Ave S.  | Spanaway    | (253) 536-1796   |
| American Medical Rental & Supply (Please see our ad on pg 32)    | 4358 S. Washington    | Tacoma      | (253) 473-3055   |
| Humana (Please see our ad on pg 35)                              | 8411 Pacific Hwy East | Tacoma      | (253) 926-8971   |
| Shield Healthcare  |                       |             | (800) 720-7440   |
| United Healthcare (Please see our ad on pg 2)                    |                       |             | 1-(855) 491-3752 |





“There is nothing like staying at home for real comfort.” ~Jane Austen







# Move by choice rather than by crisis

It used to be that the choice of where you wanted to age was pretty simple. You could choose to remain at home, move in with a family member or go to a nursing home. Today, the options can be overwhelming. That's why it's important to begin the process of looking at where you intend to spend your last days early on because even the old choices have gotten complicated.

Take for instance the concept of staying at home. Sounds simple except how does that look? Does it refer to the current home you're living in, a different home you'll have time to create memories and friendships in, or does it involve having a child or other family member move in with you? If you stay in your current home, what changes need to be made to make it safer for you to remain or does your home already make safe aging possible? Will you hire someone to care for you, become part of a village concept and pay a fee for services or join formally or informally with your neighbors to care for each other? If the people in your neighborhood move or die, will you still want to live in that neighborhood?

These are a lot of questions. Then you add on things like transportation, meals and costs and suddenly the world opens up to a dizzying amount of information.

In the next few pages, you'll find information about these housing options:

- NORCs (Naturally Occurring Retirement Community)
- Village Concept (connecting neighbors to services)
- Walkable Neighborhoods (getting around)
- Moving to the city

Other options include Adult Family Homes, Independent or Assisted Living Facilities, and Adult Communities. Please visit our website for additional housing stories but whatever you do begin the conversation today about what retirement looks like from the housing point of view because if you wait until you can't wait any more, your options are likely to be very much limited, costly and likely less than what you hoped for.





## Paying the caregiver

Almost 30 percent of Americans provide care for someone who is ill, disabled or aged according to the Family Caregiver Alliance.

Informal caregivers shoulder a greater and greater portion of care for their loved ones as hospitals shorten the lengths of stays, medications and therapies provide better management of chronic conditions and the health care field experiences a shortage of available personnel to care for individuals. The result is that the time spent caring for someone needing care has grown and the types of care requires more skill than simple companionship and meals. The impact to the life of the caregiver is a wearing away of their own health and their finances.

Generally the caregiver is a woman and women face an uphill climb financially already due to lower wages and longer lives. Taking time off to provide care might seem logical as well as nurturing however, the long term affect is an average \$324,000 in lost wages, Social Security and pension benefits over a lifetime according to a MetLife and Caregiving Alliance 2011 study.

Even in-home care can be tremendously expensive. Many people think that choosing to either provide for care or to pay for care are the only two options. But, there are other options that won't decimate either your health or your finances as much.

State Medicaid programs are required to recover certain Medicaid benefits paid on behalf of an individual for services such as nursing home services, home and community-based services and related hospital and prescription drug services. They may also have the option of recovering payments for other Medicaid

services. In Washington, DSHS may file a lien or make a claim against any property including real property in order to repay the state for payments associated with Medicaid and long-term care services. However, like most rules associated with the federal and state governments, there are exceptions. For instance, a home can be transferred without penalty to a:

- Spouse,
- Any sibling with an equity interest in the home who has lived for at least one year in the home prior to the date of Medicaid eligibility,
- Dependent children under the age of 21
- A blind or disabled child

The Medicaid recipient does not need to be living in the home at the time of the transfer and DSHS cannot recover property solely owned by either a spouse or a child.

There is one other time that a transfer can be made without penalty. Individuals with more than one or more chronic conditions and who would otherwise be moved into a nursing home but are able to remain at home due to the care of a child who has lived at home for a period of two years prior to the date of COPES coverage or institutionalization may also have a home transferred to that child in exchange for that period of care. However, making an incorrect transfer can potentially cost you the money you thought you might save so it's best to get professional help either through a geriatric care manager or an elder law attorney.





When the road to recovery doesn't mean going directly home, know that you have options for short term rehabilitation and recovery. Our comprehensive care team of clinicians and therapists will work with you to reach your individual rehabilitation goals to get you back home or to a lesser level of care.

Call or visit any of our facilities to inquire about post hospital care and short term physical rehabilitation for events such as:

- Orthopedic Surgical Procedures
- Stroke Recovery and other Neurological Events and Conditions
- Cardiac Events or Surgical Procedures
- Oncology Recovery
- Post-Surgical Recovery
- Wound Care

Let us be your resource and your guide on your road to recovery.



**100% Employee Owned**

**Health and Rehabilitation  
of North Seattle**

13333 Greenwood Avenue North  
Seattle, WA 98133  
(206) 362-0303 | Fax: (206) 364-7208

**Alaska Gardens Health  
and Rehabilitation Center**

6220 South Alaska Street  
Tacoma, WA 98404  
(253) 476-5300 | Fax: 253-476-5365

**Seattle Medical and  
Rehabilitation Center**

555 16th Avenue  
Seattle, WA 98122  
(206) 324-8200 | Fax: (206) 324-0780

**Canterbury House**

502 29th Street Southeast  
Auburn, WA 98002  
(253) 939-0090 | Fax: (253) 939-4313

**Shelton Health and  
Rehabilitation Center**

153 Johns Court  
Shelton, WA 98584  
(360) 427-2575 | Fax: 360-427-2563

**Enumclaw Health and  
Rehabilitation Center**

2323 Jensen Street  
Enumclaw, WA 98022  
(360) 825-2541 | Fax: (360) 825-4351

**Talbot Center for  
Rehabilitation and Healthcare**

4430 Talbot Road South  
Renton, WA 98055  
(425) 226-7500 | Fax: 425-226-4195

*Our Commitment to Caring*

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





# Senior housing options

There's no place like home but where will your home be when you retire?

It isn't always the best option to stay in your current home nor is it always possible. Long-term care can be expensive regardless of where you get it. You'll need to balance your future and current care needs with your budget to find appropriate housing.

About 75 percent of boomers currently live in single family homes but those numbers are likely to change in the next few years. For one thing, while we were in the midst of the "Great Recession" many seniors hunkered down and stayed in the homes they raised their families in but as the housing market climbs out of its dive and it's possible once again to sell a house, more and more seniors are likely to be looking to make the move to a continuing care community, assisted living or some other senior housing situation. They all have one thing in common. Whatever flavor housing you're looking at, you'll need to carefully assess the costs and conditions before signing on the dotted line.

Senior housing has its major pluses as indicated by the annual 5.2 percent growth that industry is expected to see in the next few years. If you are an active senior, having someone else take care of the day-to-day maintenance and repair on your home and yard, providing activities and trips and even the social interactions that might be more difficult to access from your stand-alone home is one reason this industry continues to grow. If you've

slowed down a bit, having someone around in case of an emergency, having access to care and having access to the amenities that are usually very close by is yet another. If you've ever been on a cruise ship or spent time in a luxury resort and thought this is the life, that's what many equate moving to senior retirement communities as.

Regardless of whether you stay put or move to some sort of senior living option, you'll need to make a careful evaluation of your budget. Before you buy into a community make sure you do your due diligence and get a solid idea of what foreclosures and dues defaults are like.

Retirement communities come in all shapes and sizes. They can run the gamut between mobile homes to Continuing Care Retirement Communities (CCRCs) and everything in between. Making a budget of your anticipated expenses can help you narrow down your choices. If you had someone come in to do an assessment of your home and based on that discussion you are considering moving, or you've talked to a geriatric care manager, you can narrow down your choices to what makes a better fit for you. Here's a list of the major types of senior housing and a brief description of each.

## Independent living communities

Like the name suggests, don't look to independent



living communities for assistance with activities for daily living (ADL) although you can bring such help in. Beyond that the sky is really the limit. They range from apartment complexes to houses (in this area they are often called cottages) and come in a wide array of costs from subsidized and on up. Some communities are designed around hobbies such as golf, many have spas, pools, classes, lectures or are designed around a theme such as Asian culture and the list goes on. If you have an interest, you're sure to find it reflected in an independent living facility. If you look around an independent living community you'll quickly realize that everyone in the community is in the same age. Typically, the average cost of independent living facilities starts at about \$2,000 a month and go up from there. Before you make the move to independent living other things to consider are:

- Whether your health will make this your last move or one of several moves. If you think this might be the first of several moves, consider a Continuing Care Retirement Community (CCRCs)
- Are you comfortable with both the initial investment and monthly fees which can include homeowners association fees? Check to see how much will it cost to

add on services you might need later on.

- How long will it take to be able to make the move? Even in this economy, there is often a waiting list and you may need to wait months to get in.

### Assisted living communities

For people needing help with some ADLs, including help with medications or housekeeping, an assisted living community can provide the reassurance of 24-hour staffing. Depending on the type of housing options you want you may have a small kitchen in your residence or the meals may all be served in a group dining area. Usually there are common areas for socializing where you can find libraries, computer rooms and other recreational pursuits. An assisted living community is a good choice if you don't need round the clock care and supervision but you need more assistance than can be accessed either in an independent living community or in a home.

Costs for assisted living vary with the residence, apartment size and the types of additional services you need. It's often less expensive than home health care or nursing care in the same location. Nationally, the



### *A Memory Care Community*

- 36 Private Rooms
- Warm, homelike atmosphere
- Secure building and large backyard
- Licensed Nurses on staff
- Community living areas with fireplaces
- Three delicious meals served daily + snacks
- Short Term Stays Available



Like us on Facebook!

3615 Drexler Drive • University Place  
Washington • 98466  
253-460-3330 • [www.acaringplace.net](http://www.acaringplace.net)

### AFFORDABLE STUDIO APARTMENT AVAILABLE IN SENIOR COMMUNITY

*Rent not to exceed 30% of adjusted  
monthly income*

#### Harbor View Manor

A friendly comfortable  
169 unit Affordable  
Senior Housing High-Rise  
Community in Central  
Downtown Tacoma  
location is now accepting  
applications. Applicants  
must 55 years of age  
or older and subject to  
approval by Tacoma Section  
8 "Project Based" funding  
program. Maximum annual  
income limits apply.



Applications may be picked up and  
returned to the following location:

Harbor View Manor  
919 South Fawcett Street  
Tacoma, WA. 98402  
(253)272-5552  
TDD 800-545-1833 ext. 478



average monthly charge is around \$3,500. Additional charges may include laundry and housekeeping, although some providers include those items with the base charge. While assisted living is generally paid for privately, there are veterans subsidies and section 8 housing subsidies that can help pay for a portion of the housing costs.

### Continuing Care Retirement Communities (CCRCs)

These are also known as fee-for-service continuing care retirement communities. They offer residents the option of independent living, assisted living, nursing care and other long-term care services under one contract. Most CCRCs include an entrance fee of usually \$100,000 or more and a monthly fee that will depend upon the needs of the resident, the type of service contract, additional services provided. Additionally, residents generally experience a 3 percent to 6 percent increase in monthly fees each year. They offer various payment plans which include:

- **Life Care:** The most expensive option but like the name suggests it offers unlimited assisted living, medical treatment and skilled nursing care without additional charges.
- **Modified:** This contract offers a set of services for a specified period of time. When the time expires, other services can be obtained but for a higher monthly fee.
- **Pay as you go:** The initial enrollment fee is generally lower but assisted living and skilled nursing care are charged at their market rates.

One risk is that most CCRCs will only refund a portion of the fee or none at all if the resident changes their mind and wishes to leave the community or dies. In response, some CCRCs now offer guarantee refunds at a certain percent based on the entry fee you pay. Another risk is that since the resident is paying for future services, it will be important to ensure that the CCRC will still be operating and able to provide the care already paid for. AARP offers a list of things to look for if you are looking at the CCRC option.

About 75 percent of boomers currently live in single family homes but those numbers are likely to change in the next few years. For one thing, while we were in the midst of the “Great Recession” many seniors hunkered down and stayed in the homes they raised their families in but as the housing market climbs out of its dive and it’s possible once again to sell a house, more and more

seniors are likely to be looking to make the move to a continuing care community, assisted living or some other senior housing situation. They all have one thing in common. Whatever flavor housing you’re looking at, you’ll need to carefully assess the costs and conditions before signing on the dotted line.

### Multigenerational Households

Over 51 million Americans live with at least two generations of adults under one roof. That’s a 60 percent increase in multigenerational households since 1990 according to the U.S. Census Bureau. Americans on the whole haven’t lived in multigenerational families since the end of World War II but a combination of our current economic woes, a rapidly aging society and a shifting demographic has caused many to take another look at it as a viable option.

Multigenerational families can pool resources and share costs, provide opportunities for increased educational opportunities and allow the generations to spend time and really get to know each other. Researchers in one study found that 82 percent of individuals living in multigenerational households felt that it “enhanced family bonds.”



**Helping Seniors Maintain their Independence**

**Providing In-Home Care Services:**

- Personal Care & Bathing
- Housekeeping & Laundry
- Meal Preparation
- Transportation to Doctors, Shopping & Errands
- Respite Care
- Trained & Screened Caregivers

**Call our branch near you:**

- Everett 425-428-2600
- North Seattle 206-368-7667
- South Seattle 206-329-4695
- Bellevue 425-289-1257
- Kent 253-850-6415
- Federal Way 253-839-3700
- Tacoma 253-272-2675
- Lakewood 253-584-2311
- Olympia 360-570-8000



**www.ResCareHomeCare.com**





# Choosing to age in place means choosing to live where you can walk

Is your neighborhood walkable? That question has become more and more of a selling point for people looking to move. There is a growing interest in having neighborhoods and cities become more walkable and because people are often willing to pay more for housing in areas that embrace walkability, there is growing economic reasons for developers to build those types of communities.

A walkable city is one where daily errands do not require a car. Sanjeev Sanyal, president of the Sustainable Planet Institute and Global Strategist at Deutsche Bank defines it as “allowing an average citizen to use walking as an important, if not dominant mode of transport for work and leisure.” It may seem odd to have the president of a global bank talking about walkability but according to Sanyal, walkable neighborhoods provide cheap, low technology solutions to issues of environmental, economic and social sustainability while also generating more economic value to a successful city.

It's not just that walkable cities are healthier—people in walkable neighborhoods weigh 6 to 10 pounds less than those who don't according to [www.walkscore.com](http://www.walkscore.com). But people who walk in their neighborhoods are more likely to know their neighbors, be actively involved in their community and be happier and healthier. People who live in walkable communities feel that they have more friends, feel their neighborhoods are safer and are more active.

What makes a city or neighborhood walkable? The most critical factor is sidewalks or walking paths. Other criteria are: crime rate (perceived or real), aesthetics, distance to destinations such as shopping areas, parks or playgrounds, and comfort (are there benches and shelters for instance). According to another study, the average age at which driving was given up was 72 years but the average age people intended to give up driving was 79 years. If your neighborhood isn't walkable, how do you propose to age in place?



## Freedom, Friends, Fun!

Harbor Place at Cottesmore offers Independent and Assisted Living in surroundings that are elegant, comfortable and affordable. Enjoy your retirement at Harbor Place, where you can experience gracious hospitality and fun social, recreational and educational events in a resort-style atmosphere.

## Amenities & Services

- Monthly lease with no buy-in, utilities included
- Variety of spacious apartments (Studios, Alcoves, 1 & 2 Bedrooms)
- On-site wellness staff 24/7
- Restaurant-style fine dining
- Scheduled transportation
- Weekly housekeeping included
- Indoor pool and hot tub
- Fitness centers and putting green
- On-site salon and full-service spa
- Billiards and game rooms
- Computer lounge, libraries and theater
- Wide variety of social, educational and recreational programs and cultural events

1016 29th Street NW  
Gig Harbor, WA 98335  
**253.853.3354**  
[www.HarborPlaceRetirement.com](http://www.HarborPlaceRetirement.com)







## NORCs

### A natural way to age-in-place

Since the 1950s Americans have moved away from city living to suburban living leaving a significant portion of the 50 and older crowd living on the outskirts of cities, away from easy access to doctors, grocery stores and even neighbors that they know. When transportation was an easy option because everyone had two cars in their driveway, that didn't seem to be a problem but as we age our ability to continue to drive is often hampered by physical as well as mental challenges. Those suburban communities frequently don't have access to shopping, doctors or friends within a short (less than a mile) walk. And, unlike city living, bus transportation is often non-existent or sparse.

As a result Baby Boomers are flocking to urban areas known for the vitality, energy and youth cultivated for younger hipsters. The amenities appeal to a growing number of people in their 50s and 60s who are trading peace and quiet for intense and energized by replacing their suburban homes with condos and apartments in downtown neighborhoods from Seattle, Washington to New York City.

The parents of the boomers often chose to retire in warmer climates or in age-restricted communities but some speculate that boomers are finding the urban environment's enforced minimalism appealing. Smaller, more efficient condos and apartments relieve them of many of the maintenance burdens of the suburbs. In the city, there's no yard to maintain, the need for private vehicles can more or less disappear and the time not

spent doing those things and caring for those things can be easily spent on nearby museums, shops, theaters and concert halls that aren't as readily accessible in the suburban environment.

Online real-estate brokerage Redfin, estimates that more than a million baby boomers moved from neighborhoods 40 to 80 miles outside downtown city areas to within five miles of the downtown of the nation's 50 largest cities between 2000 and 2010.

The trend really began in the 1990s but the recession put a kink in things. Now with the economy warming up some developers known for creating hip neighborhoods focused on bringing in young money are finding that many of those same qualities that appealed to the 20-somethings and 30-somethings are highly desirable for boomers. As a result, cities are scrambling to meet the demand not just for more housing but for improved walkability, proximity to public transit and venues from everything from eateries to entertainment.

If you live in the city, you presumably live in an apartment or condo. What city-dwellers have that their suburban or rural fellows do not have as easily is a built-in care system.

One thing to come out of this silver migration is a focus on community building within the urban environment. About ten years ago, a community in Boston created the "village" model with the Beacon Hill Village. Each village helps connect members to a local network of



service providers and volunteers that help members meet needs that might prevent them from staying at home. Unlike the Assisted Living facilities or the Adult Family Home models or any of the other senior living options, the village concept requires more elbow grease than money. It requires dedicated people who don't just say they want to age-in-place but put in the foundation blocks so that they can. It's obviously not an idea for everyone and the Continuing Care Retirement Communities and all the other senior residences are not in any jeopardy of losing out to the village concept but if you really want to age in your current home, you're going to need to make some investments, not just in your home but also in your community.

For instance, if you always see the same person in the hallway every night when you get home from some outing, you're fairly likely to recognize when that person quits being there or begins to need help. That built-in system is what some social scientists are calling NORCs, which stands for Naturally Occurring Retirement Communities. NORCs occur when a large number of people move into a community when they were younger and then remain as they age or a large number of seniors

move into an area as younger members move out. The benefit, older residents say, is that they can potentially remain in their apartments for the rest of their lives.

A housing-based NORC can be found in an apartment or a cluster of multiple buildings but NORCs can also be found in neighborhoods of one-and two-family homes. Rather than needing to move to another location to find services and programs for aging members of society, those residents that live within NORCs reap the benefit of having those programs such as health and social services come to them.

As the nation ages, it's becoming apparent that even if every single senior wanted to live in a senior residential facility rather than remain in their current neighborhood, there simply aren't enough places to make that happen. NORCs are one answer to the dilemma of how to age safely at home. They began springing up about 20 years ago. AARP estimates that as many as a quarter of all seniors may live in NORCs. NORCs can provide volunteer services like computer help or yard work or can provide opportunities for activities such as classes in yoga or art. The neighborhoods reap the benefit of having healthier communities.



**NOW IN OUR 13<sup>th</sup> YEAR!**

- 24 Hour Personal Care Provided
- Owner Has 22 Years Of Geriatric Experience & 11 Years Of Physical Therapy Rehab
- Bright Cheery Private & Semi-Private Rooms
- Beautiful, Well-Maintained Homes
- Dementia / Alzheimers Care
- Hospice / End Of Life Care
- Wheelchair Accessible
- Transportation Arrangements To Medical Appointments
- Caring, Compassionate, & Professional Staff
- Entertaining Activities with Family and Community.




*... Where Family is Always First*

**We are committed to providing professional compassionate assistance in a safe and nurturing environment, ensuring a life of dignity and independence for seniors in our community.**

[www.familyfirstafh.com](http://www.familyfirstafh.com)  
**(253) 853-2033**  
 4700 Point Fosdick Drive NW  
 Suite 312, Gig Harbor, 98335  
[julie@familyfirstafh.com](mailto:julie@familyfirstafh.com)



# Is a move the best option?

## Balancing the elder's need for security, comfort and routine with the younger generation's need to ensure safety and peace of mind

Daily routines bring comfort. Changing things up often brings stress even if the reason for the change is a good one. Let's face it, on the job, we talk about how change is a good thing (and secretly wonder if it's so wonderful why anybody has to tell us so) but once we're home, we get comfortable in the fact that Junior has baseball practice on Tuesdays so we all eat at the pizza place on the way home every Tuesday.

Why should it be any different when it involves a parent or our own aging? We look around and suddenly recognize that Mom can't see well enough to drive any more. Dad's fallen twice in the last month. These are serious issues that often cause the adult children of seniors to begin looking at alternative housing arrangements often to the dismay of their parent who enjoys the feeling of independence and control over their environment that they get living at home. So how do you balance the elder's need for security, comfort and routine with the younger generation's need to ensure safety and peace of mind?

Many families simply don't. Rather than trying to create plans when siblings can't agree on even minor things or finding options when an elder draws a hard line in the sand, some families avoid those uncomfortable topics altogether until a crisis forces action. That's not to say that a crisis will occur or that a move is imminent but realistically, for most people a health crisis will occur and if the current place of residence is not capable of providing a safe, secure, accessible environment, a move will occur at significant financial and emotional costs to the family and afford little to no opportunity to seek expert advice.

Ideally, before a crisis occurs, a conversation (more likely several) has occurred to begin the process of identifying how the elder wants their needs met and siblings, no matter how antagonistic their relationships with each other, have put aside their differences in order to do what's best for their parent. Unfortunately, we don't live in that ideal world. However, there are ways to move closer towards it.

Our homes weren't originally built with older bodies in mind. A typical senior today lives in a 1970s-style home, often with multiple floor levels. To allow seniors to remain at home, most homes will need to be retrofitted with ramps, grab bars, chairlifts for stairs, easy access showers and other accommodations. Houses aren't the only things that will need modifications. Sidewalks need access for wheelchairs and walkers, stairs need two sets of rails and lighting needs to be brighter just about everywhere.

Dr. Mark Lachs, in his book "Treat Me, Not My Age" wrote "We've been building things for generations expecting few people to live past fifty but when they do we're surprised when the environment becomes unmanageable." He goes on to say that "most dwellings in existence today can be modified to meet the needs of just about everyone at every age." That's not to say that

*Come and see what everyone's been talking about!*



We've found that many of our new residents are referred to us by the folks that live at Stafford Suites and their families

Stop by and see why they have such wonderful things to say about us.

 **Stafford**  
SUITES  
Assisted Living Community  
"Where the living is easy"

15519 62nd St Ct E., Sumner  
(253) 862-1818  
www.StaffordSuites.com

Proudly serving our residents and their families since 1999



he doesn't believe that a move shouldn't be in the future of some people. Sometimes modifications can simply be outstripped by overwhelming physical or mental issues.

We are an immigrant culture whose forebears were immigrants and while our contemporary moves are generally modest as compared to the moves our forebears made, they have much in common with those earlier moves. Primarily they are stressful. Moving is about loss, the loss of friends, familiar places, family members, even our identity. A move eliminates our ability to know where everything is in our universe and causes us to become disoriented. This is especially true as we age.

In a 2009 brief discussing the financial and psychological effects of moving on older Americans, the study authors divided older Americans who move into two groups: those who move as a positive or proactive decision (the Planners) and those whose reaction to a change in circumstances such as their health forced them to move (the Reactors). The brief determined which participants belonged to which group by looking at whether or not the participant had undergone a shock (loss of spouse, worsened health, loss of a job) or not. The financial

consequences of a move were found to differ between the two types of movers. Those who moved as a response to a shock (the Reactors) saw an average decline in home equity of \$26,000. While those who moved for other reasons (the Planners) experienced an average increase in home equity of nearly \$33,000.

Yet, the impact of moving is not limited to the financial well-being of the person. In the same study, the authors calculated the impact of moving on the psychological wellbeing of the participants and found that generally, a Planner who moved saw positive changes in their psychological well-being as compared to a Planner who didn't and Reactors who moved had a less negative impact than Reactors who didn't move. In other words moving helped even for those who had experienced shock although the effect was relatively modest for them.

Increasing attention has been paid to the stress caused by moving. Enough so that it even has its own name: Relocation Stress Syndrome (RSS). RSS is a formal nursing diagnosis characterized by physiologic and psychologic disturbances that occur as a result of a patient being transferred and was formerly used when



RETIREMENT &amp; ASSISTED LIVING COMMUNITY

*It's all about choices....*

Silver Creek Retirement and Assisted Living Community is located in Puyallup, Washington near area hospitals, shopping and services.

Our community provides the services you need, delicious meals, and a host of amenities in a gracious setting that has been designed with your comfort and security in mind.



17607 91<sup>st</sup> Ave E | Puyallup, Wa 98375  
RetirementPerfected.com

**253.875.8644**

- Activities Lounge
- Library and Resident Computer Lounge
- TV & Game Room
- On Site Beauty & Barber Shop
- Happy Hour Lounge
- Garden Potting Room
- Private Dining Room for Resident and Family Special Occasions
- Private Mailboxes
- General Store

*We're the Perfect Choice....*



discussing changes such as a move to a nursing home or assisted living facility without the consent of the individual. But according to an article at *Caring.com*, RSS affects people regardless of whether or not the move comes as a result of their own decision or in response to medical or mental needs. RSS can occur even if the move is from one room to another.

The symptoms of RSS include exhaustion, sleep disturbance, anxiety, grief and loss, depression and disorientation and may lead to increased falls, self-care deficits and weight loss. It's important to keep in mind that by remaining too long in a home that isn't appropriate for remaining in seniors may be increasing their discomfort and negatively impacting their health when they are ultimately forced to make the move anyway.

Even worse, according to a 2010 MetLife Report called "Rethinking Solutions to the Home Care Challenge" the problem with many senior housing situations is that they are "organized to provide care at a certain level of need, sometimes too much or too little for a particular individual. As a result, a housing arrangement often becomes a poor match, requiring residents to move multiple times, such as from a home to a hospital because of a health episode, then to a nursing home for rehabilitation, then back to the home, then on to assisted living for longer term care, etc." So that even a decision that seemed right at the time can become less appropriate as time goes on.

The point isn't to discourage people from making a move or even making the move to stay but to avoid trivializing what a move means to the individual making (or not making) the decision to move. It's an important decision with potentially life-altering ramifications and should take into consideration as much as possible all the parties involved. Questions to ask before making the jump to moving include:

### **Is there a way to improve safety in the home?**

Universal Design is the concept of designing a home to meet the need for safety, comfort and convenience of everyone regardless of age, size or ability. Some components of a universal design home are no-step entries, wide doorways and hallways, reachable controls and switches, easy-to-use handles and controls, low or no-threshold showers with built-in benches or seats. If an individual wants to remain living in a home but

is open to moving to a new home built with Universal Design practices in mind, it's usually less expensive to make those changes pre-construction than as a result of remodeling a home with traditional design features. Universal Design concepts can improve the livability of a home environment by designing a home that is environmentally friendly, requires less maintenance and is easily adaptable.

### **Could someone move in with them or could they move in with someone?**

Living alone can be dangerous to your health. Apart from the effects of loneliness which are dire enough, scientists found that those living alone had significantly higher risks for death and cardiovascular death. Other problems that arise from living alone include an increased risk of poverty, trip and fall risks without a means of alerting others should they experience trauma, and difficulty getting around running errands. A growing number of people are choosing and thriving in multi-generational housing.

### **Can a home care service provide the necessary services to keep a loved one safe and healthy?**

If it's a matter of laundry needing to be done, dishes washed, a reminder to take medication, meals prepared or checkbooks balanced, there are private enterprises that will address them for a fee that isn't likely to rival the price of moving.

Do they need someone to actually provide medicine to them or do they just need a reminder? Home care will provide reminders and handle what is referred to as non-skilled care but which means care that doesn't require a nursing degree of some sort. Home health care on the other hand can provide the kind of care you might see in a hospital or nursing care environment such as wound care, injections, intravenous therapy and health monitoring such as blood pressure checks, heart rate and temperature checks. Review medical needs and health conditions to see if your loved one really needs around the clock care.

### **Warning signs that the current situation is no longer safe for an older adult:**

- Medication management issues
- Poor eyesight
- Social isolation
- Forgetting appointments
- Unable to keep up with daily chores and housekeeping







- Poor nutrition or malnutrition
- Home safety hazards such as poor lighting and loose carpeting
- Unable to pay bills on time

**Takeaways for family members:**

If you are a family member working to move a senior, make sure to incorporate the senior into the planning of the move both from the decision to move and in the actual process. Don't negate their concerns. Keep them informed about why they are moving and point out positive aspects of the move. Provide time for the senior to get used to the idea and listen to their input.

Be flexible. Even if you just love an option, honor the senior's preferences and need to maintain control over their own life.

**For family members and seniors:**

Do a thorough assessment of options. Take into consideration current health and possible future health issues. Many healthcare organizations can help make assessments of an individual's current and future healthcare or housing needs.


Whether it is you or someone you love who is moving, blunt the impact of the move by trying to keep a schedule that is as normal as possible. Make sure family and friends know about the move and ensure that things like utilities and phone service are available immediately.

Take special care of any personal objects that have special meaning or significance and will be making the move. Take care when broaching the subject about any sorting, donating or cleaning that may need to be done. Start with a little bit at a time. Consider starting somewhere that has less meaning such as a bathroom or kitchen.

Plan the move so that it doesn't feel rushed and so that there is plenty of time to handle emotional moments.

Consider hiring someone to help. A move to live with a relative or other caregiver or to senior residential housing will likely require downsizing and leaving behind prized belongings, a process that can be overwhelming and emotional. One way to make the transition easier and to eliminate family dynamics is to hire a professional senior move manager.





## Tacoma Lutheran Retirement Community



*Comfortable & Affordable Senior Living for over 75 Years!*

*Live well!* Independent Living, Assisted Living, Short-term Medical Care, In- & Out-Patient Therapy, Long-term Care, Dementia and Hospice Care.

253.752.7112 [www.tacomalutheran.org](http://www.tacomalutheran.org) All faith's welcome!





# AgingOptions

## RESOURCE GUIDE

### Adult Family Homes

| Name   | Address                 | City       | Phone          | Medicaid |
|--|-------------------------|------------|----------------|----------|
| Family First<br>(Please see our Ad on page 47) | 4001 59th Street Ct. NW | Gig Harbor | (253) 857-5172 | N        |
| Family First<br>(Please see our Ad on page 47) | 2904 138th Street NW    | Gig Harbor | (253) 858-3897 | N        |
| Family First<br>(Please see our Ad on page 47) | 5305 81st Ave NW        | Gig Harbor | (253) 509-0263 | N        |
| Family First<br>(Please see our Ad on page 47) | 8219 Dogwood Lane NW    | Gig Harbor | (253) 858-8873 | N        |

#### Bonney Lake

A Haven Of Peace, Inc  
Bonney Lake Adult Family Home  
Living Well Adult Family Home LLC  
Maple Point Adult Family Home  
Serenity View  
The Whispering Rose

#### Buckley

B's Place Two  
Foothills Adult Family Home

#### Eatonville

Fern Caldwell Adult Family Home  
Serenity Acres Adult Family Home

#### Edgewood

Edgewood Country Retreat Inc  
Edgewood Manor Adult Family Home

#### Fircrest

Golden Acres Adult Family Home  
Thomas Inn Adult Family Home

#### Gig Harbor

Carlyn Adult Care Home LLC  
Elizabeth Page Adult Family Home

Estate Living Gig Harbor Inc  
Family First  
Gapp Adult Family Home  
Gig Harbor Adult Family Home  
Gig Harbor Group Home  
Harbor Heritage Adult Family Home  
Harbor Heritage Adult Family Home, LLC  
My Other Home Inc  
Sound Garden Care Home LLC  
Soundview Care Home  
Wauna Shores Adult Family Home Inc

#### Graham

A Agape Home  
A Whispering Hope Adult Family Home  
Garden Of Eden  
Ginger Creek Adult Family Home  
Heavenly Acres I  
Heavenly Acres II  
Kym's Cottage Inc

#### Lakebay

Rest Stop Inc

#### Lakewood

1 St. Care Adult Family Home LLC

A Grace Joy Adult Family Home II LLC  
Absolute Care Adult Family Home 2  
Affordable Oakbrook Adult Family Home  
Aiko Adult Family Home  
Alani Adult Family Home  
Amazing Grace Adult Family Home  
Angel Of My Service Mind  
Angels' Lighthouse Adult Family Home  
Autumn Living Villa, LLC  
Bethel Home 1  
Bethel Home 2  
Bethel Home 3  
Bethel Home 4  
Blessed Adult Family Home  
Bridgehaven  
Camelot Court Adult Family Home #1  
Camelot Court Adult Family Home #2  
Care Home At The Meadows  
Cartiers Adult Family Home  
Casa De Alegre LLC  
Coralwood Adult Family Home  
Crested Crane Adult Family Home Inc  
Crystal Cottage Adult Family Home  
Fannie & Earl Careful Caring

For the complete listing, visit our website [AgingOptionsGuide.com](http://AgingOptionsGuide.com)



Golden Given Adult Family Home LLC  
Grace And Hope Adult Family Home LLC  
Grace Garden LLC  
Gravelly Lake Adult Family Home Corp  
Great Care Manor  
Heart Of Gold Adult Family Home LLC  
Hidden Lake Adult Family Home LLC  
Hidden Lake Adult Family Home LLC  
Ivy Manor Adult Home  
Jade Park Care Center  
Kalei's Corner Adult Family Home  
Kare Home  
Katies Adult Family Home  
Laocadie Maison  
Lochburn Adult Family Home  
Maple Adult Family Home  
Maria'S Adult Family Home LLC  
Montevista Adult Homecare, LLC  
Morning Star Adult Family Home  
Morning Star Adult Family Home 3  
My Brothers Keeper Adult Family Home 2  
Olympia Home In Lakewood  
Over The Hill Adult Family Home  
Paradise View Adult Family Home LLC  
Rainbow House  
San Lorenzo Adult Family Home LLC  
Serenity Manor Adult Family Home, LLC  
Sunshines Haven Adult Family Home  
Sylvia's Place II LLC  
Sylvia'S Place III  
Sylvia'S Place LLC  
Touching Lives  
Visions Adult Family Home LLC  
Woodville Adult Family Home, LLC  
Comfort And Care Adult Family Home  
Livewell Adult Family Home

### McKenna

Maria Luz Adult Family Home

### Milton

Assisted Living Alternatives  
Avalon Adult Home Care

### Orting

PG Adult Family Home

### Puyallup

24 Hour Quality Care Adult Family Home  
A Better Choice Adult Family Home, LLC  
AAA Amazing Grace  
Above And Beyond  
Assurecare Adult Home, LLC  
Bellah Adult Family Home  
Boys Next Door Adult Family Home  
Brian Roberson Adult Family Home  
Campbell'S Adult Family Home, LLC  
Campbells Adult Family Home  
Caring Arms Adult Family Home II  
Caring Arms Adult Family Home Inc  
Chi Adult Family Home  
Comfort Care Adult Family Home  
Country Living Adult Family Home  
Garden Of Eden  
Golden Adult Family Home  
Hallmark Manor Adult Family Home  
Imnay'S Adult Family Home  
Imnays Adult Family Home  
Joyce'S Adult Family Home  
Kind Hearts Adult Family Home LLC  
Lili's Family Care  
Lois'S Place LLC  
Love & Laughter Adult Family Home Inc  
Noreen Adult Family Home  
Ohana Adult Homecare LLC  
Pioneer House  
Puyallup Adult Family Home  
Samarinias Adult Family Home  
Sam'S House LLC  
Silhouette Adult Family Home  
South View Adult Care  
Stewart Garden  
Sunrise Ridge Adult Family Home  
The Artful Lodger  
Vista Adult Family Home  
Welcome Home At Heritage Glen  
Welcome Home On 94th  
Welcome Home On South Hill  
William And Stacey Adult Family Home  
Woodland Adult Family Home

Young At Heart Assisted Living  
Better Place Adult Family Home #2 LLC

### Roy

Anderson'S Adult Care  
Anderson's Adult Family Home 2

### Spanaway

Assurecare Adult Home, LLC  
Bethel Care, LLC  
Bethesda Adult Home Care  
Country Living Adult Family Home  
Divine Adult Family Home  
Emanuel Adult Family Homes, LLC  
Fountain Of Life Adult Family Home LLC  
Imnays Adult Family Home  
Mann Care Home  
St Nino Adult Family Home  
St Nino Adult Family Home II

### Steilacoom

Sound View Senior Living LLC  
St Therese Adult Family Home

### Sumner

Mountain View  
Sumner Cottage  
Sumner Meadows Adult Family Home Inc

### Tacoma

A Caring Place Adult Family Home LLC  
A Home Away From Home  
Abbott House  
Absolute Care Adult Family Home  
Ace Care  
Algaras Adult Family Home  
Ananda  
Anawim  
Ann Walker'S Adult Family Home  
Anna'S House, LLC  
Autumn Homes  
A-Z Adult Family Home V  
Barb'S Place  
Bay Bridge Care Home  
Bernadette Jones Adult Family Home LLC  
Best Care Adult Family Home  
Best Of Oakes Adult Family Home LLC  
Beta Adult Family Home





# Adult Family Homes-cont'd

|   |                                     |   |
|---|-------------------------------------|---|
| Bethany Adult Family Home               | Junett Place Adult Family Home LLC  | The Arbor Rose Inc                        |
| Bethel House                            | Lighthouse Adult Family Home        | The Dugger House                          |
| Browns Point Adult Family Home          | Loving Family Home Care             | The Farmhouse                             |
| Care Haven Adult Family Home            | Madison Manor                       | The Golden Rings Adult Family Home        |
| Caring Hands Adult Family Home II       | Magic Hands                         | Three Cedars                              |
| Caring Hands Adult Family Home LLC      | May Flower Adult Family Home LLC    | TLC Dupont Adult Family Home              |
| Charming Adult Family Home              | Mayers Adult Family Home            | Trinity Homecare LLC                      |
| Comfort Haven Adult Family Home LLC     | Michelle's Place                    | Villa Vecchio At Dash Point               |
| Compassion & Care Adult Family Home LLC | Mischelle's Assisted Living         | Warner House, LLC                         |
| Cozy And Comfort Care                   | Miss Shell'S Adult Family Home      | Young At Heart Adult Family Home 3        |
| Elitecare Adult Family Home LLC         | Morning Sun Adult Family Home       | <b>University Place</b>                   |
| Ellie's House                           | Mountain Hwy Care Center            | Bernadette Jones Adult Family Home LLC    |
| Equi Luv N Care                         | Narisa Adult Family Home            | Grace Joy Adult Family Home               |
| Fairview Adult Care Home                | Ocean Ridge Care Home               | Grandview Adult Family Home               |
| Fullness Of Joy Adult Family Home       | Partners In Care                    | Kims Adult Family Home                    |
| Gentle Care Adult Family Home           | Pleasant Oak Adult Family Home #2   | Living Life Care Home At University Place |
| Golden Age Adult Family Home LLC        | Renaissance Court Adult Family Home | Living Life Care Home On Willow Lane      |
| Golden Rule Adult Family Home           | Rose Crest Adult Family Home        | Mamas Delight Home Care LLC               |
| Hermie's Adult Family Home II           | Rose Crest II Adult Family Home     | Marino Home                               |
| Hermie's Adult Family Home III          | Roseann Care Center                 | My Brothers Keeper Adult Family Home      |
| Herminia Culla Adult Family Home        | Roseann Care Center 2               | Oas Gardens Adult Family Home             |
| Hopespring                              | Sacred Heart Adult Family Home      | Ocean Breeze Care Home                    |
| House Of Hope Adult Family Home         | Sanders Estates Adult Family Home   | Serene Gardens                            |
| Immanuel Adult Family Home              | Share Adult Family Home             | Sound View Care Center                    |
| Island View Adult Family Home Care      | Sheridan Adult Family Home II       | Villa Cynthia LLC                         |
| Jeremiah Adult Family Home              | Soundview Manor Adult Family Home   | Whispering Hope Adult Family Home         |
| JL Adult Family Home Care               | Sunny Meadows Adult Family Home LLC | Young At Heart Adult Family Home 2        |
| Jomimar                                 | Suzie's Comfy Home                  |   |
| Joyful Living Adult Family Home         | The Arbor Rose Inc                  |   |

## Alzheimer's/Memory Care

| Name  | Address              | City             | Phone          |
|---|----------------------|------------------|----------------|
| Olympic Alzheimer's Residence, A Prestige Expressions Community | 3025 14th Ave NW     | Gig Harbor       | (253) 851-5306 |
| Clare Bridge Of Puyallup  | 8811 176th St. East  | Puyallup         | (253) 445-1300 |
| Cascade Park Gardens  | 4347 S. Union Ave    | Tacoma           | (253) 475-3702 |
| Pioneer Place Alzheimer Residence Of Tacoma                     | 11519 24 Avenue East | Tacoma           | (253) 539-3410 |
| Hearthside Manor<br>(Please see our ad on page 43)              | 3615 Drexler Dr. W   | University Place | (253) 460-3330 |

# Assisted Living

| Name  | Address                      | City       | Phone          | Medicaid |
|---|------------------------------|------------|----------------|----------|
| Harbor Place at Cottesmore<br>(Please see our ad on page 45)                | 1016 29th St NW              | Gig Harbor | (253) 853-0300 | N        |
| Silver Creek Retirement & Assisted Living<br>(Please see our ad on page 49) | 17607 91st Ave E             | Puyallup   | (253) 875-8644 | N        |
| Stafford Suites (Please see our ad on page 48)                              | 15519 62nd St E              | Sumner     | (253) 862-1818 | N        |
| Tacoma Lutheran Retirement Community<br>(Please see our ad on page 51)      | 1301 North Highlands Parkway | Tacoma     | (253) 752-7112 | Y        |

|   |   |   |
|---|---|---|
| <p><b>Bonney Lake</b></p> <p>Cedar Ridge Retirement &amp; Assisted Living Community</p> <p><b>Buckley</b></p> <p>Heritage House Buckley</p> <p><b>Dupont</b></p> <p>Patriots Landing Operations Llc</p> <p><b>Gig Harbor</b></p> <p>Clare Bridge At Shoreline View<br/>Emeritus At Gig Harbor<br/>Harbor Place At Cottesmore<br/>Olympic Alzheimer'S Residence, A Prestige Expressions Commun<br/>Sound Vista Village Inc<br/>The Lodge At Mallard'S Landing</p> <p><b>Graham</b></p> <p>Country Cottage</p> <p><b>Lakewood</b></p> <p>Maple Creek Residential Care</p> <p><b>McKenna</b></p> <p>Nisqually View Residential Care</p> <p><b>Milton</b></p> <p>Mill Ridge Village</p> | <p><b>Puyallup</b></p> <p>Clare Bridge Of Puyallup<br/>Emeritus At Puyallup<br/>Emeritus At The Courtyard<br/>Meridian Hills Assisted Living<br/>P A M Group Home<br/>Silver Creek Retirement &amp; Assisted Living Community<br/>Valley Community Inn Inc</p> <p><b>Spanaway</b></p> <p>Emerald Care Center Inc<br/>Lauradel Group Home<br/>Mcgee Guest Home</p> <p><b>Sumner</b></p> <p>Franklin House<br/>Stafford Suites</p> <p><b>Tacoma</b></p> <p>Cascade Park Gardens<br/>Cascade Park Vista<br/>Charlton Place<br/>Franke Tobey Jones<br/>Gibraltar Senior Living, Llc<br/>Hope Guest Home</p> | <p>Kats Care Center<br/>King'S Manor Senior Living Community<br/>Kleiner Group Home<br/>Life Manor Assisted Living<br/>Living Hope Care Center<br/>Merrill Gardens At Tacoma<br/>Narrows Glen<br/>Northwest Retirement Center<br/>Pacific Avenue Residential Care<br/>Peoples Retirement Community<br/>Pioneer Place Alzheimer Residence Of Tacoma<br/>Spring Ridge Retirement Community<br/>Tacoma Lutheran Home - Retirement Community<br/>The Village Retirement And Assisted Living<br/>Waller Road Home<br/>Weatherly Inn<br/>Wynwood Of Allenmore</p> <p><b>University Place</b></p> <p>Bridgeport Place<br/>Hearthside Manor</p> |
|---|---|---|

We do our best to provide you with accurate and up to date information.  
Please let us know if any of our listings contain typographical errors, inaccuracies, or omissions.  
Thank you ~ editorial@agingoptions.com

# Continuing Care Retirement Communities (CCRCs)

| Name                                    | Address                        | City          | Phone          | Medicaid |
|---|--------------------------------|---------------|----------------|----------|
| Judson Park Health Center               | 23620 Marine View Drive South  | Des Moines    | (206) 824-4000 |          |
| Wesley Homes Health Center              | 1122 South 216th Street        | Des Moines    | (206) 824-3663 |          |
| Briarwood At Timber Ridge               | 100 Timber Ridge Way Nw        | Issaquah      | (206) 824-3663 |          |
| Arbor Village                           | 24121 116th Ave SE             | Kent          | (253) 856-1600 |          |
| Panorama City Conv & Rehab Ctr          | 1704 Sleater Kinney Road SE    | Lacey         | (360) 456-0111 |          |
| Covenant Shores Health Center           | 9107 Fortuna Drive             | Mercer Island | (206) 268-3039 |          |
| Regency on Whidbey Retirement Community | 1040 SW Kimball Drive          | Oak Harbor    | (360) 279-0933 |          |
| Corwin Center At Emerald Heights        | 10901 - 176th Circle Northeast | Redmond       | (425) 556-8192 |          |
| Emerald Heights                         | 10901 176th Circle NE          | Redmond       | (425) 556-8100 |          |
| Bayview Manor                           | 11 West Aloha Street           | Seattle       | (206) 284-7330 |          |
| Cristwood Nursing And Rehabilitation    | 19301 Kings Garden Drive North | Seattle       | (206) 546-7400 |          |
| Exeter House                            | 720 Seneca Street              | Seattle       | (206) 622-1300 |          |
| Horizon House                           | 900 University Street          | Seattle       | (206) 624-3700 |          |
| Mirabella Seattle                       | 116 Fairview Avenue N          | Seattle       | (206) 254-1400 |          |
| Park Shore                              | 1630 43rd Avenue East          | Seattle       | (206) 329-0770 |          |
| Skyline at First Hill                   | 725 9th Ave                    | Seattle       | (206) 405-4100 |          |
| The Hearthstone                         | 6720 East Green Lake Way North | Seattle       | (206) 525-9666 |          |
| The Kenney                              | 7125 Fauntleroy Way Southwest  | Seattle       | (206) 937-2800 |          |
| Northwoods Lodge                        | 2321 Schold Place Northwest    | Silverdale    | (360) 698-3930 |          |
| Riverview Lutheran Care Center          | 1841 East Upriver Drive        | Spokane       | (509) 489-4466 |          |
| Rockwood At Hawthorne                   | 101 East Hawthorne Road        | Spokane       | (509) 466-0411 |          |
| Rockwood South Hill                     | 2903 E 25th Ave                | Spokane       | (509) 536-6650 |          |
| Josephine Sunset Home                   | 9901 272nd Pl NW               | Stanwood      | (360) 629-2126 |          |
| Warm Beach Health Care Center           | 20420 Marine Drive Northwest   | Stanwood      | (360) 652-7585 |          |
| Franke Tobey Jones                      | 5340 North Bristol             | Tacoma        | (253) 752-6621 |          |
| Tacoma Lutheran Retirement Community    | 1301 N Highlands Parkway       | Tacoma        | (253) 752-7112 |          |
| Quarry, The                             | 415 Southeast 177th Avenue     | Vancouver     | (877) 778-2779 |          |
| Washington Odd Fellows Home             | 534 Boyer Avenue               | Walla Walla   | (509) 535-6463 |          |
| Living Care Retirement Community        | 3801 Summitview Avenue         | Yakima        | (509) 965-5240 |          |

**For information on CCRCs and other housing options, see the story on page 38 or contact our office for a white paper for more in-depth information.**



# Independent Living

| Name  | Address               | City       | Phone          | Medicaid |
|---|-----------------------|------------|----------------|----------|
| Harbor Place at Cottesmore<br>(Please see our ad on page 45)                | 1016 29th Street NW   | Gig Harbor | (253) 853-0300 | N        |
| Silver Creek Retirement & Assisted Living<br>(Please see our ad on page 49) | 17607 91st Ave East   | Puyallup   | (253) 875-8644 | Y        |
| Harborview Manor<br>(Please see our ad on page 43)                          | 919 South Fawcett Ave | Tacoma     | (253) 272-5552 | N        |
| Tacoma Lutheran Retirement Community<br>(Please see our ad on page 51)      | 1301 N Highlands Pkwy | Tacoma     | (253) 752-7112 | Y        |

|  |   |  |
|--|---|--|
| <b>Bonney Lake</b>                         | The Highlands at South Hill                     | Norpoint Village                           |
| Cedar Ridge Retirement & Assisted Living   | Merrill Gardens at Puyallup                     | Pointe Defiance Village                    |
| <b>Gig Harbor</b>                          | Silver Creek Retirement & Assisted Living       | StoneRidge at the Park                     |
| Laurelwood Apartments                      | Willows Glen-Holiday Retirement                 | Tacoma Lutheran Retirement Community       |
| The Lodge at Mallard's Landing             | <b>Tacoma</b>                                   | Tahoma Terrace                             |
| Merrill Gardens at Gig Harbor              | Charlton Place Assisted Living                  | The Village Retirement and Assisted Living |
| Peninsula Independent Retirement Living    | Franke Tobey Jones                              | Village Retirement & Assisted Living       |
| Sound Vista Village Inc                    | Gibson Gardens                                  | Villas at Union Park                       |
| <b>Orting</b>                              | Harbor Place Townhouses                         | Weatherly Inn                              |
| Mountainview Estates/Lakeshore Communities | Harbor View Manor                               | Wright Park House - Pan Pacific            |
| <b>Puyallup</b>                            | Life Manor Independent Affordable Senior Living | <b>University Place</b>                    |
| Emeritus At the Courtyard                  | Merrill Gardens at Tacoma                       | Bridgeport Place                           |
|  |   | The Cottages at Peach Creek                |

# Skilled Nursing Facilities

| Name  | Address                  | City   | Phone          |
|---|--------------------------|--------|----------------|
| EmpRes Health Care Management<br>(Please see our ad on page 41) | 6220 S Alaska St         | Tacoma | (253) 476-5300 |
| Orchard Park<br>(Please see our ad on page 33)                  | 4755 South 48Th          | Tacoma | (253) 475-4611 |
| Tacoma Lutheran Home<br>(Please see our ad on page 51)          | 1301 N Highlands Parkway | Tacoma | (253) 752-7112 |


|                                |  |  |
|--------------------------------|--|--|
| <b>Gig Harbor</b>              | Kindred Transitional Care And Rehab -Rainier Vista | Avamere Heritage Rehabilitation          |
| Cottesmore Of Life Care        | Life Care Center Of Puyallup                       | Avamere Skilled Nursing Of Tacoma        |
| Manor Care Health Services     | Linden Grove Health Care Center                    | Franke Tobey Jones                       |
| Rocky Bay Health Care Facility | Puyallup Nursing And Rehabilitation Center         | Heartwood Extended Health Care           |
| <b>McKenna</b>                 | <b>Tacoma</b>                                      | Kindred Transitional Care And Rehab      |
| Nisqually Valley Care Center   | Alaska Gardens Health And Rehabilitation Center    | Manor Care Health Services               |
| <b>Orting</b>                  | Avamere Georgian House Of Lakewood                 | Park Rose Care Center                    |
| Washington Soldiers Home       |  | Tacoma Nursing And Rehabilitation Center |
| <b>Puyallup</b>                |  | University Place Care Center             |



“ We’ve put more effort into helping folks reach old age than into helping them enjoy it. ” ~Frank A. Clark







**I**t's been at least 10 years since every news agency in the nation began proclaiming the approaching Boomer retirement wave. So by now you are not surprised that the fastest growing segment of Americans is the elderly. What that means to those of us who are prone to cynicism is that there are a lot of people looking to aging individuals for their paychecks.

Some of those people, and I would suggest that it's most of those people, are legitimate businesses recognizing a need and wanting to provide a service. Still, it's tough to not wonder what is chaff and what is wheat. Your grandfather for instance probably never hired an elder law attorney so the question you might ask is what about today's environment would suggest that you should hire one?

Elder law focuses on parts of the law pertaining to seniors but what does that mean exactly. Why, for instance, can't you hire any lawyer to create your will and draw up your estate plan? And the answer is that you can. However, someone who isn't versed in things like Medicare and Medicaid can actually cause unintended affects that can harm your estate.

Medicaid has complex rules and provisions that are ill-understood by the majority of lawyers so that something as run of the mill as a trust requires specific language to withstand a Medicaid examination. Why should anyone care about Medicaid? You probably don't if you have several million dollars in assets but if you are like most of us, the specter of long term care is hovering over your shoulder. An uncovered span of time in a nursing home can cost upwards of \$100,000 a year or more. With so many people living 20, 30 or more years after retirement, having one spouse impoverishing the remaining spouse after a long term stay in a nursing home is often sadly reality. Planning the transfer of assets to preserve them without undercutting Medicaid benefits for the remaining spouse requires in-depth knowledge of the process.

No one used to spend any time at all looking at Social

Security benefits. You came of age to claim and then poof like magic you claimed. But suddenly making an ill-timed decision on when to claim benefits or whose benefits to claim can cost you hundreds of thousands of dollars.

Long term care insurance costs insurance companies and policy holders a great deal of money and aren't always a great deal for either one so having someone knowledgeable about reading long term policies and making recommendations isn't just useful, it's a priority.

Americans often spend 10 years or more with disabilities before we die. Nursing home policies can reduce patient's rights but often get signed when patients or their family members are under great duress from sudden health issues.

Elder law attorneys approach the law holistically usually incorporating aspects of planning from several professions beyond the legal field including housing, financial, quality of life, long term care and health. One significant difference between an elder law attorney and an estate planning attorney is that an elder law attorney seeks to preserve your assets for your benefit while you are still alive rather than trying to make sure that your children get the biggest inheritance possible.

Hiring a lawyer of any sort can be a major project in and of itself. It is even more so with Elder Law Attorneys because many people wait until they are in an emotional crisis situation before looking for professional assistance.

If you are looking to hire an elder law attorney, ask your friends if they have hired one and get referrals. Contact the National Academy of Elder Law Attorneys (NAELA) and once you get a few names, speak with the lawyer directly to find out how long he or she has been practicing, whether or not elder law is the attorney's specialty and whether there is a consultation fee. You can also go online and find the attorney's website and find out what review sites such as Avvo.com and LawyerRatingz.com have to say about them. Do your research before you hire.





# Avoiding running afoul of the tax man when you hire a caregiver

Are you an employer and don't know it? You might reasonably wonder how you could possibly fail to recognize when you hired your first employee but if you have hired a senior caregiver you are in jeopardy of running afoul of the IRS.

The IRS considers tax evasion a serious problem—so much so that the IRS and the Department of Labor (DOL) have announced enhanced enforcement and collection efforts with one of their primary targets being domestic employment. Let's back up a moment and look at how you could possibly be an employer without realizing it and then what you do about it.

First, how do you know you have hired an employee? Say that Mom needs a bit of help around the house. Maybe she needs someone to do the heavier housework, drive her to the doctor and the grocery store and provide some companionship. As a result, you hire someone to come in for a few hours every day. Did you hire someone through a home health agency? It's important to ask that agency if they file taxes for their caregivers. If the answer is yes, you have no liability when it comes to reporting or remitting any taxes so you're okay and that would be the end of this story. If instead the answer is that you are responsible for taxes or you hired someone who "works for themselves," you have hired an employee.

You might ask yourself why your new employee isn't an independent contractor rather than an employee. That's a common mistake. An independent contractor might put a new roof on your home or do lawn maintenance but the law determines a worker's independence by the use of a test. That test examines how much control the employer has over the worker. If you have the right to determine who cares for your

mom, how that person performs the job, when that person works, in other words if you have control over an individual's work environment, you are the employer because ultimately you call the shots. An independent contractor, by contrast, is hired to complete a specific task and gets to make the decisions necessary for completion of that job, the task is limited in scope and is as needed.

As mentioned before, not filing correctly is considered tax evasion. Tax evasion comes with back taxes and penalties. You have four primary tax duties if you hire an employee.

- You must withhold Social Security and Medicare taxes from paychecks each pay period. You are not required to withhold Federal Income tax but doing so protects your employee from a large tax burden at the end of the year.
- You must file tax forms with the Washington Employment Security Department and with the IRS on a quarterly basis.
- You must pay the employer's portion of Social Security and Medicare as well as federal and Washington unemployment insurance taxes as well as a small employment administration fund tax.

- You must prepare a W-2 at the end of each year and distribute it to each employee. You must also file Form W-2 Copy A and Form W-3 with the Social Security Administration and file Schedule H with your personal income tax return.

You can find a tax and labor summary for the state of Washington at <http://www.breedlove.com/Answers/State-Nanny-Tax/WA/Overview>.

In addition, if your employee becomes injured while working for you, you'd be held liable for any





costs related to an injury including medical expenses and disability payments.

**Gotcha 1:** For families that have a small business, it might be tempting to put your caregiver on the company payroll. This would allow you to make use of procedures that are already in place but alas there's a problem. The first is that businesses take tax exemptions for employees so the language of the law requires those employees to be "direct contributors" to the success of the business. The IRS has ruled that caregivers are not direct contributors and thus has determined that taking deductions for a caregiver constitutes an illegal tax deduction. It is also illegal to put a caregiver on the company's insurance plan.

**Gotcha 2:** Household employees are considered non-exempt and are therefore entitled to earn overtime pay for all hours over 40 hours in a seven-day work week. There are two exemptions to this. You can hire live-in employees in some states without paying overtime and employees that provide companion care are exempt (but the rules for this are going to change in 2015). There are likely additional changes in the works as some states are looking at and passing domestic workers bill of rights.

Why would anyone choose to hire a caregiver independent of an agency if all these rules apply? By the time you hire a caregiver legally, you may not save any money. Therefore, the benefit lies in the degree of control you have over the situation. You might already know someone that you trust who would be a great fit for your mom, or you may just like the control that comes from knowing that it's easy to get rid of someone you don't like or to hold onto someone that you do like. Depending upon the agency you hire, some chores you might want done can run outside of the agency's scope and they won't perform them. It's important to weigh the benefits of one over the other and if you decide you want to hire an employee rather than a firm, get advice from a good elder law attorney on how to proceed. You can also find accounting firms that will help small employers with the tax and financial obligations you incur when you hire an employee. An elder law attorney can help you find help there as well.

## We can help if your loved one is experiencing:

- Frequent emergency room visits or other health events
- Depression or suicidal thinking related to living alone or the loss of a spouse or partner
- Behavioral issues reported by staff at an assisted living facility or nursing home
- Problems with police, emergency medical teams, neighbors or social services



# BETTER

CARE MANAGEMENT

31919 Sixth Avenue South  
Federal Way, WA 98003  
Phone: 253.941.7200





# Annuities

Annuities have been around since the Middle Ages when Dutch and German cities and monasteries raised money by the sale of life annuities.

Annuities are a financial contract in the form of an insurance product between an individual and an insurance company in which the seller (the insurance company) provides a series of future payments in exchange for an immediate lump sum payment or a series of regular payments prior to the paying out of the annuity.

Dennis Miller, in an Investopedia article, wrote that “you are better off with no annuity as opposed to the wrong one.” That isn’t to say that he doesn’t believe they are ever appropriate. Simply put, you shouldn’t buy an annuity unless it will work for you and for many people it isn’t the right tool.

## THE GOOD

At one time, annuities were sold as a vehicle to make it possible for anyone to have a pension. Annuities can offer a degree of certainty to retirees by paying out a fixed stream of payments over a specified period of time. They were simple enough to make them useful for people who wanted absolutely nothing to do with managing their own finances. According to Fool.com, for those who fear the potential loss of all their money because of poor investments choices, that guarantee can be very important. Other good things about annuities are that there are no heavy record-keeping requirements and there are no investment limits.

### Desirable if:

- IRAs, 401(k) and other tax deferral plans have been maxed out
- You will keep it for at least 15 to 20 years
- You are in a 28 percent tax bracket or higher today but

expect to be in a lower income tax bracket at retirement.

- You need a “guaranteed” income for life in retirement

## THE BAD

As a Kiplinger article says, “Seniors are often bombarded with pitches for annuities, and there’s a reason for that: Annuities can be extremely profitable for the agent who sells them.” Over the years, annuities lost their “glow” for a variety of reasons. Chief among them:

- **Market performance**-You can still lose money according to the Washington State Insurance Commission. Most insurance companies only guarantee you will receive 90 percent of the premiums you paid plus interest at a specified minimum rate. If you didn’t earn enough you could lose some of your paid premium.
- **Too expensive**-An Investopedia article says that the old joke about annuities is that you make a fortune on the headline and the fine print takes it all back. Introductory rates often act as loss leaders and then when rates are adjusted and the fees kick in all the benefits disappear. Annuities in the past were prone to hidden fees and as a result many states now regulate the percentage of annuities you can hold in your portfolio.

The state of Washington has a pamphlet on what you need to know before buying an annuity. You can find that here. Here’s a list of fees you’re likely to run across:

- **Commission**-People think of annuities as an investment, but they are actually an insurance policy and the nice person selling you the annuity is getting a cut of your return or principle for selling it to you.







- Underwriting-Fees for those who take a risk on the benefits
  - Fund management-management fees for any investment in mutual funds
  - Penalties-If you pull your contributions out before you are 59 ½, the IRS will get 10 percent and a surrender charge of between 5 percent and 10 percent will be charged. You can transfer your annuity from one insurance company to another but if the check comes to you while in the process of transferring, you could be stuck with fees there as well. Because of surrender charges, any annuity should be considered a long term investment. If you decide to replace your annuity, the agent must provide a notice on the pros and cons of doing so.
  - Tax opportunity cost-Your 401(k) is a better option for tax deferral unless you have maxed out your contributions to it. During the accumulation phase, annuities provide a tax advantage however annuity gains are taxed at ordinary tax rates. If your income tax rate will have dropped during the period of time that the annuity is accumulating, you could still come out on top but that's an individual determination.
  - Tax on Beneficiaries-Assets which appreciate over time have what is called a step-up in basis when they are left to beneficiaries. Basically, that assigns a new value to the asset based on the market price at the time of transfer. However, annuities don't offer the same protection and your beneficiaries are likely to be charged taxes on gains.
  - Lack liquidity-If you die, you die but what if instead you live and now you can't work or you have high medical costs. Now you have a greater need for the money you don't have access to.
  - Lack of security-Annuities were created to provide just that but if the insurance company goes under, your money may be lost. You can check on an insurer's rating at on the Washington State Insurance Commissioners website to make sure an insurance company has a rating of at least A+.
- Income must begin being distributed immediately;
  - The annuity contract must be irrevocable and must be set up with a non assignable settlement option;
  - The income payout must be constant; and
  - The state must be named as beneficiary.

### Other Issues

•Limited ability to pass on wealth to heirs-In a report out by the Congressional Budget Office, the authors wrote, "Economic modeling dating back to Yaari (1965) shows that individuals who do not aim to leave bequests to future generations should put all of their investments into annuities rather than alternatives such as bonds." The paper goes on to say, "This paper models decisions about purchasing annuities in a context where individuals learn new information about their health status over time (that is, with stochastic mortality risk). In that context, the value of an annuity declines when an individual experiences an adverse health shock that lowers her life expectancy. Because of that valuation risk, risk-averse individuals will not want to fully annuitize their investments when they face higher costs or lower income in bad health. We find that most households should not annuitize any wealth. The optimal level of aggregate net annuity holdings is likely even negative."(emphasis added)

•Investment limitations-According to the Motley Fool, "We strongly believe that Foolish investors can generally do far better for themselves elsewhere." Actually they call the investment choices "so-so, ho-hum, quasi-mutual fund subaccounts."

### Options

So if you choose not to buy an annuity, what other options do you have?

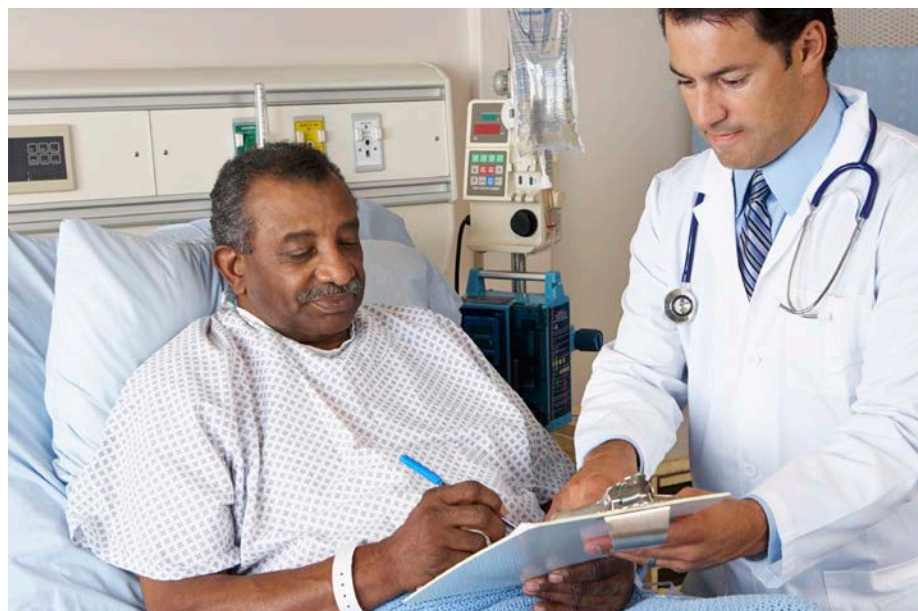
•Wait on Uncle Sam. If you have other income, it's best to wait as long as possible to collect on Social Security. Those benefits act as an inflation-adjusted annuity without all the fees. If you think of Social Security as an annuity, says the author of "Should You Buy An Annuity From Social Security?" the increases earned from claiming at a later age are designed to be "actuarially fair" whereas commercial annuities have marketing, management and risk bearing costs that must be added to the actuarial price.

•Get professional help. Check out our Preferred Partners list for professionals in the financial industry who understand how financial decisions can impact your eligibility for government benefits.

### Medicaid

For those facing the possibility of long-term care and who may eventually have to rely on Medicaid to pay part or all the costs of care, annuities must qualify as Medicaid-friendly in order to generally be counted as income rather than as an asset (assets are subject to spend down for Medicaid). Those qualifications are:





## Should you sign a Nursing Home Admission Agreement?

Admitting a loved one to a nursing home can be very stressful. In addition to dealing with a sick family member and managing all the details involved with the move, you must decide whether to sign all the papers the nursing home is giving you. Nursing home admission agreements can be complicated and confusing, so what do you do?

If possible, have your attorney review the agreement before signing it. Read the agreement carefully because it could contain illegal or misleading provisions. Try not to sign the agreement until after the resident has moved into the facility. Even if you have to sign the agreement before the resident moves in, you should still request that the nursing home delete any illegal or unfair terms.

Two items commonly found in these agreements to pay close attention to are a requirement that you be liable for the resident's expenses and a binding arbitration agreement.

A nursing home may try to get you to sign the agreement as the "responsible party." It is very important that you do not agree to this. Nursing homes are prohibited from requiring third parties to guarantee payment of nursing home bills, but many try to get family members to voluntarily agree to pay the bills.

Signing the agreement as a responsible party may obligate you to pay the nursing home if the nursing resident is unable to. If possible, the resident should sign the agreement him- or herself. If the resident is incapacitated, you may sign the agreement, but be clear you are signing as the resident's agent. Look over the

agreement for the term "responsible party," "guarantor," "financial agent," or anything similar. Before signing, cross out any terms that indicate you will be responsible for payment and clearly indicate that you are only agreeing to use the resident's income and resources.

Many nursing home admission agreements contain a provision stating that all disputes regarding the resident's care will be decided through arbitration. By signing it, you are giving up your right to go to court to resolve a dispute with the facility. The nursing home cannot require you to sign an arbitration provision, and you should cross out the arbitration language before signing.

The following are some other provisions to look out for in a nursing home admission agreement.

- **Private pay requirement.** It is illegal for the nursing home to require a Medicare or Medicaid recipient to pay the private rate for a period of time. The nursing home also cannot require a resident to affirm that he or she is not eligible for Medicare or Medicaid.
- **Eviction procedures.** It is illegal for the nursing home to authorize eviction for any reason other than the following: the nursing home cannot meet the resident's needs, the resident's health has improved, the resident's presence is endangering other residents, the resident has not paid, or the nursing home is ceasing operations.
- **Waiver of rights.** Any provision that waives the nursing home's liability for lost or stolen personal items is illegal. It is also illegal for the nursing home to waive liability for the resident's health.



# AgingOptions

## RESOURCE GUIDE

### Elder Law Attorneys

| Name  | Business Name     | Address                | City        | Phone          |
|---|-------------------|------------------------|-------------|----------------|
| Rajiv Nagaich<br>(Please see our ad on page 3)  | Johnson & Nagaich | 31919 6th Avenue South | Federal Way | (253) 838-3454 |
| Gregg Hirakawa<br>(Please see our ad on page 3) | Johnson & Nagaich | 31919 6th Avenue South | Federal Way | (253) 838-3454 |
| Lauren Roddy<br>(Please see our ad on page 3)   | Johnson & Nagaich | 31919 6th Avenue South | Federal Way | (253) 838-3454 |
| Jerrica Seeger<br>(Please see our ad on page 3) | Johnson & Nagaich | 31919 6th Avenue South | Federal Way | (253) 838-3454 |

|                  |                                |                       |                                   |
|------------------|--------------------------------|-----------------------|-----------------------------------|
| Federal Way      |                                | Linda Lysne           | Vandenberg Johnson & Gandara      |
| Nancy Lee        | The Law Office of Nancy J. Lee | Robert Michaels       | Smith Alling,PS                   |
| Sumner           |                                | Tanya Pemberton       | Pemberton Law Office              |
| Suzanne Thompson |                                | Eileen Peterson, CELA | Gordon, Thomas, Honeywell, LLP    |
| Wininger         |                                | Jonete Rehmke         | Rehmke & Flynn, PLLC              |
| Tacoma           |                                | Darol Tuttle          | Law Office of Darol Tuttle        |
| Robin Balsam     |                                | Timothy Williams      | Law Office of Timothy E. Williams |



**AgingOptions**  
RADIO SHOW

**Every Saturday**  
**10am - 12pm**  
on



*'AgingOptions'*  
is the only program  
focusing on elder care &  
how to manage your personal  
& parental elder care needs.

**Hosted by**  
**Elder Law Attorney**  
**Rajiv Nagaich**

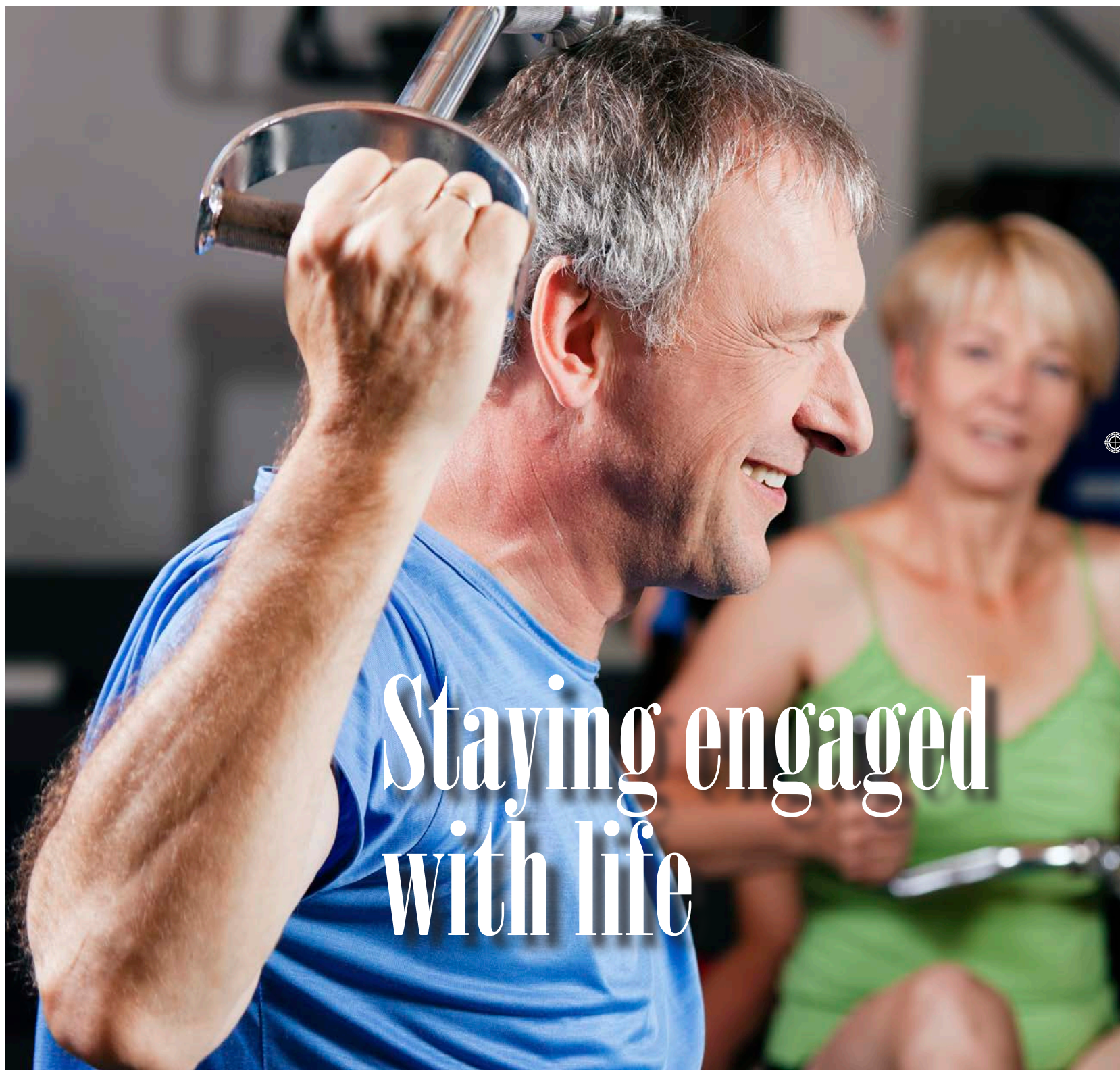
**(877) 76-AGING (24464)**  
**www.AgingOptions.com**

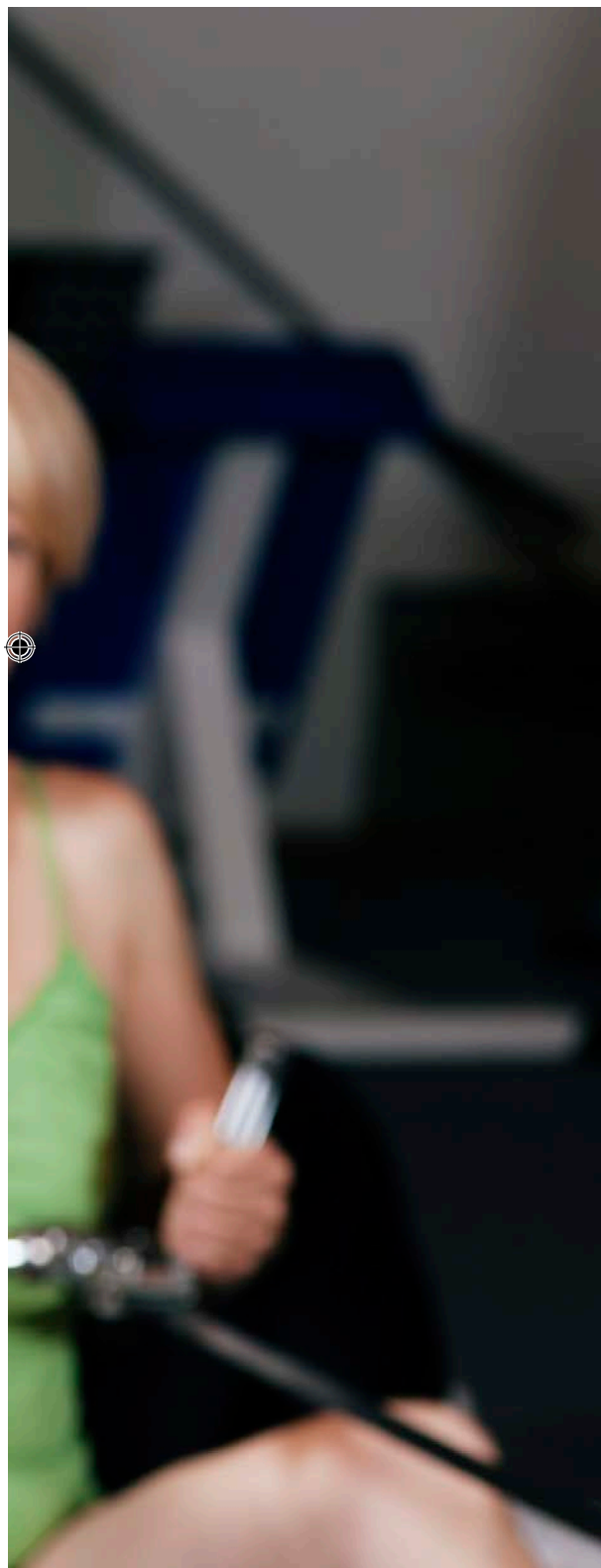






“It is in his pleasure that a man really lives; it is from his leisure that he constructs the true fabric of self.” ~Agnes Repplier





“Leisure, by most accepted definitions, is time separated from the normal routine of work, business and chores. As a means by which individuals realize meaning, leisure encompasses a wide spectrum of activities that are physical (i.e., gardening, playing sports), cognitive (i.e., reading, playing chess), and/or social (i.e., social conversations).” That’s a quote from a research paper in 2012 that looked at competitive sports for older adults as a means to promote successful aging. As the quote suggests, healthy aging is not only a function of exercise, it’s about a balance of activities that promote growth, self esteem and increased vitality the frequency of which was a significant factor in predicting life satisfaction.

In 1994, a study noted that variety, frequency and the perceived benefits of leisure activities were positively correlated with life satisfaction and that older adults should be actively involved in planning leisure activities that fit their preferences and capabilities to help enhance their well-being. Yet another study, two years earlier linked serious leisure activities to a career due to the combination of special skills, knowledge and experience pursued by the individuals involved.

An English proverb goes, “All work and no play make Jack a dull boy.” The expression was originally used to warn parents not to work their children too hard or they would become dull (stupid). Today, we most often hear it as a reference to adults where dull has changed its meaning to boring rather than stupid. However it’s meant and whomever it refers to, it continues to be as relevant today as it was then. Having leisure activities as a dedicated part of life will help you to remain vital and functionally young. That’s something we all need.







## Living longer

The good life must include a sense of purpose

We often envision retirement as a time of leisure but Dan Buettner says in a *Ted Talk* on living to 100 that the two most dangerous years of your life are the year you are born and the year you retire.

You've successfully navigated the first but avoiding the dangerous coastline of the second requires consciously choosing to live healthier and that doesn't just mean eating right, getting plenty of sleep and exercise, there's some touchy-feely stuff involved too, in fact quite a bit. Scientific studies have shown some basic factors for long life include: a plant-based diet; regular, low-intensity activity; an investment in family; a sense of faith; and having a purpose. For those on the cusp of retirement it means that while you're planning your retirement, plan how you'll use your retirement.

Dr. Robert Butler, (called the George Washington of Geriatric care) found that people who have a strong sense of purpose in their lives lived longer than those who didn't have a clearly defined purpose. Those who woke up in the morning with clear goals not only lived longer-they lived better. In *Life (Part 2)*, Butler says he

doesn't recommend retirement for anybody. Instead you should retire to something; that you must be productively engaged in doing something meaningful.

The Japanese have one of the highest life expectancies in the world and scientists attribute much of that to their notion of *ikagai*, which is a belief that life is worth living. A study done in the 1990s found that Japanese who said that they did not have *ikagai* or were uncertain if they did were more likely to die than those who did have it and that the lack of *ikagai* was particularly associated with death due to cardiovascular disease. For the Japanese, finding *ikagai* requires contemplation and soul searching because its discovery brought satisfaction and life meaning. One of Japan's areas most studied in longevity studies is Okinawa Island. Okinawa is famous for the longest disability-free life expectancy in the world yet it is the poorest prefectures in Japan. Okinawan's reach ages similar to those in the rest of Japan but they grow older in a much better state of health and scientists attribute that to a social support system that includes hobbies, a social network and a spiritual life.

We're online!

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

Visit our website to find more detailed information, photo galleries, maps & directions, and contact information for senior-related services including • senior housing • legal matters • financial planning • health businesses • and more!



In a study out of UCLA's Cousins Center for Psychoneuroimmunology and the University of North Carolina, researchers found that humans have two types of happiness and that they had surprisingly different effects on the human genome. The first kind of happiness, known as eudaimonic well-being is the kind of happiness found from having a deep sense of purpose and meaning in life. Those people had low levels of inflammatory gene expression and strong expression of antiviral and antibody genes. People with high levels of hedonic well-being, a type of happiness associated with consumption or self-gratification showed the opposite. What's interesting about the study was that people experiencing happiness through either the eudaimonic or hedonic well-being appeared to have the same high levels of positive emotions however, their genomes were responding very differently. The researchers concluded that it isn't happiness that brings benefits to our health but rather having a purpose that does. As one of the researchers, Barbara Frederickson from the University of North Carolina-Chapel Hill said, "Empty positive emotions are about as good for you as adversity."

Having a sense of purpose is not limited to a certain age.

A study in 1997 looked at people in a nursing home that were split into three groups. The first was a control group and was given nothing. The second group was given a speech, a movie and a plant. The movie was given on a specific date. A nurse was assigned to care for their plant. The third group was given a speech in which the director told the participants that they had to take responsibility and make decisions for themselves. They were told to attend a movie but they were given the choice of two different nights to see the movie. They too were given a plant but told that they had to take care of the plant. The study looked at the group 18 months later and found that the impact of being given control over their lives lasted 18 months later. The residents in the experimental group were happier and more active than the control groups and they had a lower mortality rate.

Find something you value and focus your energy, your life and your time to it and you'll live longer, live better and enjoy the journey more. If you are a caregiver, recognize those same criteria exist for the person you care for. Giving someone a purpose will improve their well-being and slow their decline.

## Puget Sound's New Transportation Leader

**TransPro and Around The Sound** have combined to provide the largest special needs transportation service in Western Washington, covering the entire Puget Sound area. With over 130 vehicles, safe transportation on your schedule has never been so convenient.

Specializing in:

- Alzheimer's/Dementia
- Ambulatory Passengers
- Wheelchairs
- Stretcher/Cot Transport
- Crutches or Walkers
- Bariatric



To schedule a ride:  
**253-476.8726**  
**transpro.org**

To schedule a ride:  
**253-858-7088**  
**around-the-sound.net**

Serving all of Western Washington



## Successful aging through competitive sports

Think you've aged out of the opportunity to win Olympic gold? It's time to take another look.

If you're over 50 and you want to earn a medal in the Olympics, your best bet would be to compete in archery, sailing, shooting and equestrian events where your lack of speed isn't likely to impact your chances. And while seven people over the age of 50 competed for the U.S. in the 2012 Olympics, no one over the age of 50 has won a medal recently. But, that doesn't mean you're stuck with being an armchair competitor. Luckily, the youngsters can't compete in the Washington State Senior Olympics and that clears the way for you.

Study after study tells us that staying (or getting) physically active and exercising regularly can prevent or delay disease and disability, manage stress and improve your mood. Studies also indicate exercise is an effective way to improve or maintain cognitive function. In fact the Mayo Clinic says that exercise is your best bet for avoiding Alzheimer's disease. One study that looked at mice bred to develop Alzheimer's-type plaque in the brain found that physically active mice had 50 to 80 percent less plaque than sedentary mice.

For women especially, participating in senior sports may be the first time they've participated in any sport because Title IX, the 1972 measure that outlawed sex discrimination in educational institutions receiving federal financial assistance, didn't exist while they attended school or college. Even for those women who attended schools with sports programs for women, women were often considered too fragile to play strenuous sports and unable to buck up against the strain

of serious competition. Medical professionals warned women and occasionally men of the possibility of injury to organs while exercising. In the 1930s, doctors were still warning women that certain sports could harm a woman's reproductive system and it wasn't until the 1984 Olympics that women were allowed to run in the marathon.

Now, it seems, everyone is extolling the virtues of being in shape. To obtain the most benefit requires vigorous and frequent participation. In other words, you need competition. Just as competition in the market place is good for driving innovation and greater choice, athletic competition drives performance, development and perhaps most importantly, competition eliminates boredom from exercise routines. It also generates a drive to learn and master new skills and to pursue improvement of old skills.

Each state in the United States holds Senior Games for individuals 50 and over. Those who qualify at the state competitions are eligible to participate in the biannual nation games. The Washington State Senior Games is in its 18th year. The multi-sport event will be held in July of this year at various sites throughout the South Sound and expects 2,000 participants in 20 events including Archery, Racquetball, Rock Climbing and Track and Field events. This year is a national qualifying year. For more information on the Washington State Senior Games, call (360) 413-0148.

# AgingOptions

## RESOURCE GUIDE

### Senior Citizen Centers

| Name   | Addresss                   | City             | Phone          |
|--|----------------------------|------------------|----------------|
| Bonney Lake Area Senior Center                   | 19304 Bonney Lake Blvd     | Bonney Lake      | (253) 863-7658 |
| Buckley Senior Center                            | 811 Main Street            | Buckley          | (360) 829-0190 |
| Eatonville Multi-Purpose Center                  | 305 West Center Street     | Eatonville       | (360) 832-6805 |
| Fife Senior Center                               | 2111 54th Avenue East      | Fife             | (253) 922-0900 |
| Key Peninsula Community Services                 | 17015 9th Street Court KPN | Lakebay          | (253) 884-4440 |
| Lakewood Senior Activity Center                  | 9112 Lakewood Drive SW     | Lakewood         | (253) 798-4090 |
| Milton Senior Center                             | 1000 Laurel                | Milton           | (253) 922-6586 |
| Orting Senior Center                             | 120 North Washington       | Orting           | (360) 893-5827 |
| Puyallup Senior Center                           | 212 West Pioneer           | Puyallup         | (253) 841-5555 |
| Salvation Army Puyallup/South Hill Senior Center | 4009 9th Street SW         | Puyallup         | (253) 537-4854 |
| Steilacoom Community Center                      | 2301 Worthington Street    | Steilacoom       | (253) 581-1076 |
| Sumner Multi-Purpose Center                      | 15506 62nd East            | Sumner           | (253) 863-2910 |
| Beacon Senior Center                             | 415 South 13th Street      | Tacoma           | (253) 951-5083 |
| Lighthouse Senior Center                         | 5016 East A Street         | Tacoma           | (253) 591-5080 |
| Mid-Counrty Community Center                     | 10205 44th Avenue East     | Tacoma           | (253) 531-8412 |
| Point Defiance/Rustin Senior Center              | 4761 North Baltimore       | Tacoma           | (253) 756-0601 |
| Spana-Park Senior Center                         | 325 152nd Street East      | Tacoma           | (253) 537-4854 |
| Tillicum/American Lake Gardens Community Center  | 14916 Washington Avenue SW | Tacoma           | (253) 584-1280 |
| Unversity Place Senior Center                    | 2534 Grandview Drive W     | University Place | (253) 564-1992 |

## Senior Groups

| Name                   | Phone          | Name                         | Phone            |
|------------------------|----------------|------------------------------|------------------|
| Center at Norpoint     | (253) 591-5504 | Merry Mixer Dance Club       | (253) 219-2522   |
| Fircrest Senior Club   | (253) 564-8177 | Tacoma Banjo Club            | julouhau@aol.com |
| Gig Harbor Senior Club | (253) 858-8284 | Wright Park Community Center | (253) 591-5331   |
| Learning is ForEver    | (253) 241-4166 |                              |                  |

Follow us on Facebook to keep informed about new advertisers, local events and other great information

AgingOptions Resource Guide - Facebook.com







# Additional Resources

## Certified Aging in Place Specialists

| Name                              | Phone          |
|-----------------------------------|----------------|
| Fine Design Interior Remodeling   | (253) 538-0828 |
| Frank & Sons Construction         | (253) 476-8042 |
| Neu Construction Inc.             | (253) 229-3189 |
| Phase II, Inc.                    | (253) 241-9809 |
| Rainier Construction & Remodeling | (253) 581-4050 |

| Name                        | Phone          |
|-----------------------------|----------------|
| Reier Construction          | (253) 305-0753 |
| Renewal Addition Remodelor  | (253) 682-1990 |
| Shattuck & Associates       | (253) 845-6245 |
| Sweatman Young Incorporated | (253) 863-3786 |
| York Enterprises LLC        | (253) 752-3189 |

## Daily Money Managers

| Name            | Phone          |
|-----------------|----------------|
| Lisa Galoia     | (253) 564-0404 |
| Madhuri Hosford | (206) 478-6621 |

| Name             | Phone          |
|------------------|----------------|
| Michael McKinney | (360) 432-9420 |

## Support Groups

| Name                         | Phone          |
|------------------------------|----------------|
| ALS (Lou Gehrig) Association | (866) 786-7257 |
| Arthritis Foundation         | (800) 746-1821 |
| Alzheimer's Association      | (800) 272-3900 |
| Caregiver Support Group      | (253) 697-8400 |
| Diabetes Association         | (253) 272-5134 |

| Name  | Phone          |
|---|----------------|
| Hearing Speech & Deafness Center                          | (253) 535-4202 |
| Northwest Parkinson's Foundation                          | (877) 980-7500 |
| Sisters of Hope Brothers of Faith<br>Cancer Support Group | (253) 572-2683 |
| TACID   | (253) 565-9000 |

## Struggling with mom's failing health?



AgingOptions Can Help:

- ✦ Coordinate Home Care
- ✦ Find Suitable Housing
- ✦ Locate Money to Pay Care Costs
- ✦ And More.....

**STOP STRUGGLING....**

**Call (877) 76-AGING (762-4464)  
or visit [AgingOptions.com](http://AgingOptions.com)**





# Look as young as you feel.

## SKIN CARE SERVICES

Adult, adolescent & pediatric dermatology

Mohs surgical center, treating all forms of skin cancer

Fraxel® & CO<sub>2</sub> Fraxel re:pair™

Dermal fillers • Microdermabrasion

Laser hair removal • Chemical peels

Facials • Permanent cosmetics

Tattoo removal • Latisse™

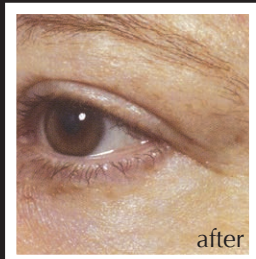
# CASCADE

*Eye & Skin Centers, P.C.*

Rediscover fresh, healthy skin. You can look 10 years younger!



before



after

Fraxel® treatment



before



after

CO<sub>2</sub> Fraxel re:pair™ treatment

Call today to schedule your appointment.

## 253.848.3000

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

Puyallup Auburn University Place Gig Harbor Bonney Lake





AgingOptions is **THE LEADER** in providing a collaborative model that brings together the best talent from the health care, housing, financial, and legal fields... and focuses this talent on your unique situation.



1(877) 76-AGING  
(24464)



AgingOptions.com  
facebook.com



Offices in Federal Way,  
Edmonds, & Bellevue



AM 770  
Saturdays  
10am-Noon

**(877) 76-AGING**

\$9.95

ISBN 978-0-9894708-5-8

50995 >



9 780989 470858

