

Vintage Times

2018/2019

The Association of Retired Americans

People Who Care
Caring For You!

YOUR HEALTH IS
YOUR BEST ASSET—
PROTECT IT

Wellness is a State of Mind
Most Common Ailments of
Aging America

Special Diabetes Section:
The Growing Problem

Financial Wellness is Part of
Your Health, Too

Medicare Changes for 2019

Your ARA Benefits –
Summary Guide

**ARA Member Offers -
Special Pricing:**

Auto & Homeowners Insurance (p. 13)

Long-Term Care Insurance (p. 25)

Emergency Assistance for Travel (p. 31)



For Your Health!

Dear ARA Members,

As you reach each milestone birthday of your life (for many of us, that is now EVERY year!)... consider what you are doing each day, each week and each month to protect your health and make your coming years more enjoyable.

You have a lot of power when it comes to determining your future. You can choose to eat well, exercise, care for any chronic health conditions you have and protect your financial security.

Little steps today can mean you'll be taking more steps on your own in future years!

This issue of your *Vintage Times* includes information and resources to help you protect your health and well-being. With such easy access to information these days, it's sometimes difficult to know what to believe. That's why we list only reputable resources to help you in your journey.

That's also why we recommend that you consult a licensed insurance agent to assist with your financial health and security. Contact us by phone – 800-806-6160 – or email – ARA@ara-usa.org, and we can help you find an agent near you. Or send us an email through “Contact Us” at our website: www.ara-usa.org.

I also want you to know about a number of Special Offers for ARA members, including: Long-Term Care Insurance, Auto & Homeowners Insurance and Emergency Travel Assistance.

Sincerely,

John K. Smith

President & CEO

The Association of Retired Americans (ARA)

Vintage Times 2018/2019
The Association of Retired Americans

**6505 East 82nd St., Suite 130
Indianapolis, IN 46250-5507**

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Wellness is a State of Mind—at Any Age

Some call it “healthy aging.” It’s focusing on the basics of what keeps you in good shape. It doesn’t have to be difficult and, in fact, you can make it fun.

The first step is to *believe*, and that’s where your state of mind is important.

BELIEVE that feeling good is one of your primary goals.

BELIEVE that you have the power to be healthy.

BELIEVE that you can take action every day to put you in the state of wellness that you desire.

It’s more than “the power of positive thinking,” it’s the power of **positive action**.

By understanding the problem, you can create your own solution. That’s why the facts on these pages are important to you.

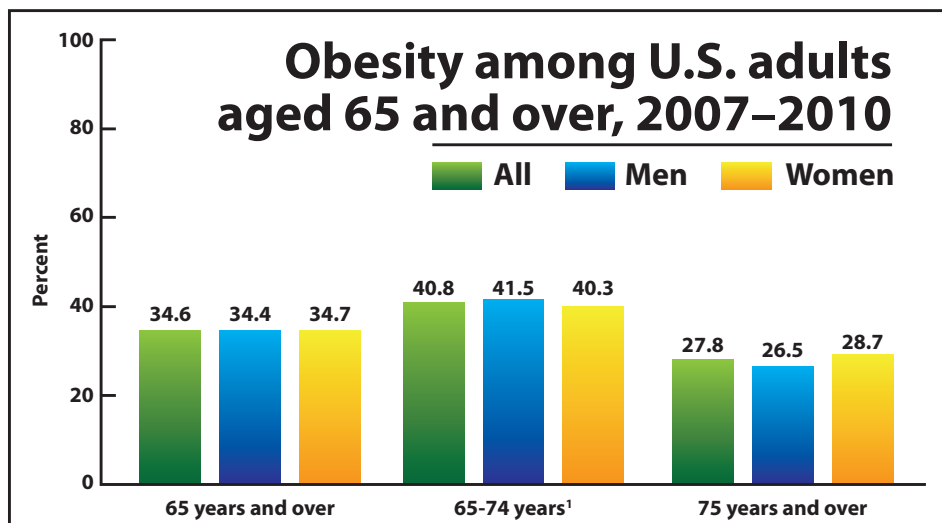
More of us than ever before!

Americans are living longer, and there have never been so many older adults in our nation.

- In 2014, 14.5% (46.3 million) of the U.S. population was aged 65 or older.
- That number is projected to reach 23.5% (98 million) by 2060.

And as our numbers are increasing, so is the *weight* of our numbers.

- Nearly 35% of adults aged 65 and over were obese in 2007-2010: 40% or 8 million aged 65-74 and nearly 28% or 5 million aged 75 and over.
- Since 1999, the percentage of obese older adults has increased, especially among older men.
- Obesity is less prevalent in the age 75 and older group. (*Could this be because fewer obese adults live to age 75?*)



¹Significantly different from 75 years and over.

SOURCE: CDC/NCHS, National Health and Nutrition Examination Survey, 2007-2010.

Chronic disease can be treated, controlled or prevented.

In this issue of the *Vintage Times*, we list the most common serious ailments for those in our aging population.

The good news is that you have the power to lower your risk for these diseases or reduce their impact on you. By taking action now, you can:

- Help lower your risk for obesity, Type 2 diabetes, heart disease, and certain cancers
- Help ward off depression and maintain bone and muscle health

Mental, emotional and financial fitness also affect your wellness.

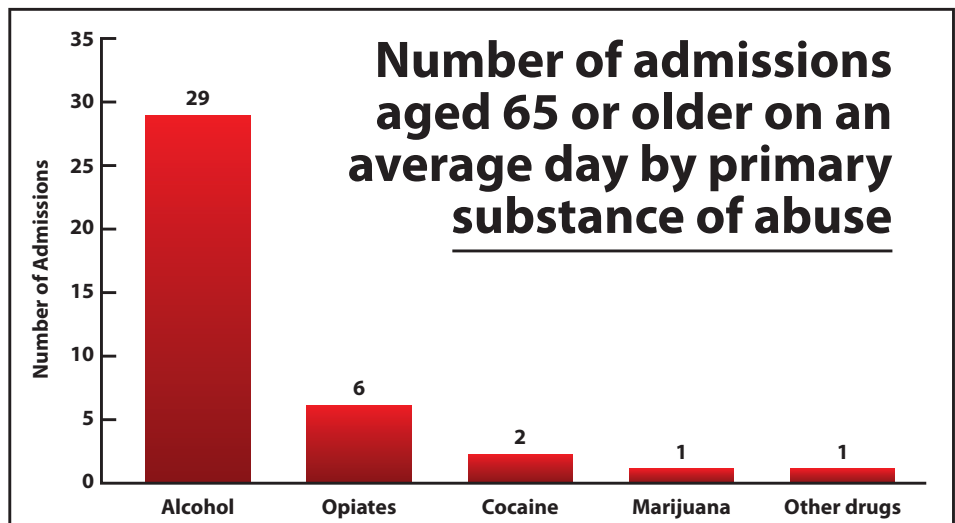
We say that wellness is a state of mind partly because your mind is an important factor in how you feel.

- Estimated 20% of those age 55+ have some type of mental health concern.
- Older men have the highest suicide rate of any age group. Men aged 85 years or older have a suicide rate of 45.23 per 100,000, compared to an overall rate of 11.01 per 100,000 for all ages.
- Depressive disorders can affect the course and complicate the treatment of chronic diseases.
- The rate of older adults with depressive symptoms increases with age, but in 80% of cases it is a treatable condition.
- Older Americans are not immune to the nation's substance abuse epidemic. On an average day, 6 million adults aged 65 or older used alcohol. Of those in substance abuse treatment programs, the vast majority reported alcohol abuse, but a growing number reported opiate abuse.
- Older adults who misuse opioids is projected to double from 1.2% in 2004 to 2.4% by 2020.

Financial wellness also can impact your mood and emotional security. Lack of sleep from worrying about money and other stress related impacts takes a toll on your physical and emotional health.

- 1 in 3 older adults does not feel secure economically.
- The vast majority of Americans have very little, if any, saved for retirement.

Somewhere in recent history, the concept of saving for the future got put aside by many. That makes it more important than ever to have protection today—along with beginning a savings strategy. *It's better to start earlier, but there is no earlier day than today to begin.*



SOURCE: SAMHSA, Center for Behavioral Health Statistics and Quality, Treatment Episode Data Set (TEDS), 2012.

If you need help to find insurance and financial planning assistance, the ARA is here! We can help you find a licensed professional insurance agent near you. Call us at 800-806-6160.

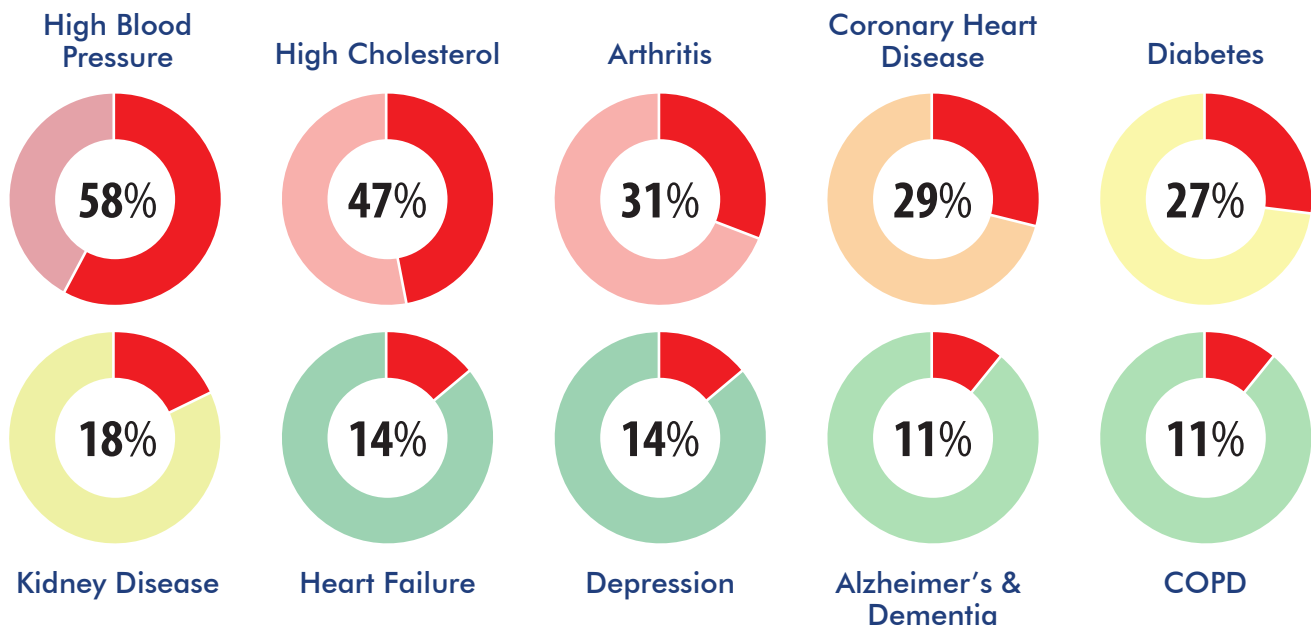
SOURCES: Health and Human Services (HHS) Office of Disease Prevention and Health Promotion, U.S. Census Bureau, Center for Disease Control and Prevention, HHS's Substance Abuse and Mental Health Services Administration, National Council on Aging.

Aging in America— The Most Common Ailments

If you don't have a chronic health condition now, chances are you *will* have one in the future.

The good news is that action you take now can limit the severity or help you avoid some of the most common ailments among older Americans.

The Top 10 most common chronic health conditions for adults age 65 or over*



Diet and exercise can help you avoid or lessen the severity of many of these conditions. See pages 10 & 11.

Diabetes afflicts over 25%. See our special section on diabetes in this issue.

*National Council on Aging/Centers for Medicare & Medicaid Services: <https://www.ncoa.org/blog/10-common-chronic-diseases-prevention-tips/>



DIABETES—The Growing Problem

By Ethan Leach

Nearly 10% of our population now has diabetes, and this disease is on the rise in the U.S.

Diabetes is a condition that causes high blood sugar, which can seriously harm the circulatory system and other organs. It is the 7th leading cause of death in the U.S., according to the Centers for Disease Control and Prevention.

Over 30 million Americans have diabetes.

- 23.1 million have been diagnosed.
- 7.2 million are undiagnosed but still face the same dangers.

Diabetes is often classified as either Type 1 or Type 2.

- Type 1 diabetics cannot make insulin, a hormone that allows the body to use the sugar in food as energy. They need to get insulin through injections or a pump.
- Type 2 diabetics have trouble making or using insulin. This can be brought on by a myriad of factors. Most diabetics in America are Type 2—90 to 95% of cases¹.

More cases, more concern

Diabetes is on the rise among children and adults in the U.S. Type 2 diabetes in children and adults was rare before the 1980s but has risen rapidly since then.

- Diagnosed cases of Type 2 diabetes in children and teens increased by nearly 5% annually from 2002 to 2012².
- Newly diagnosed cases of diabetes in adult Americans increased by roughly 90% from 1997 to 2007³.

But why?

The Centers for Disease Control lists the most dangerous risk factors for developing diabetes:

**Smoking • Obesity • Physical inactivity • High blood pressure
High cholesterol • High hypoglycemia¹**

Childhood obesity that continues into teen age brings with it an increased risk of adult-onset diabetes, in some cases up to 28 times as high². And while smoking in America is at an all-time low⁴, obesity rates have been climbing alongside diabetes for decades⁵, as has inactivity⁶ and high blood pressure⁷.

The good news!

Over 90% of diabetes cases in America are Type 2 and can be reversed or made better by living healthier. Don't let diabetes take control of your life or the life of a loved one, encourage them to take control!

1. Centers for Disease Control and Prevention. National Diabetes Statistics Report, 2017. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Dept of Health and Human Services; 2017.

2. Caceres, Vanessa. "Why Type 2 Diabetes Is on the Rise in Children and Teens." *U.S. News & World Report*, 25 July 2017.

3. State-specific incidence of diabetes among adults—participating states, 1995-1997 and 2005-2007. *MMWR Morb Mortal Wkly Rep*. 2008;57(43):1169-1173.

4. "Adult Cigarette Smoking Rate Overall Hits All-Time Low." Centers for Disease Control and Prevention, 26 Nov. 2014, www.cdc.gov/media/releases/2014/p1126-adult-smoking.html.

5. Hales CM, Carroll MD, Fryar CD, Ogden CL. Prevalence of obesity among adults and youth: United States, 2015–2016. NCHS data brief, no 288. Hyattsville, MD: National Center for Health Statistics. 2017.

6. "Facts & Statistics." President's Council on Sports, Fitness & Nutrition, The United States Department of Health and Human Services, 26 Jan. 2017.

7. Benjamin, Emelia J., et al. "Heart Disease and Stroke Statistics—2018 Update: A Report From the American Heart Association." *Circulation*, vol. 137, no. 12, 2018, doi:10.1161/cir.0000000000000558.



Rising Pressure: Diabetes and Insulin in 2018

By Ethan Leach

**Many Americans are being devastated by rising costs of insulin.
Make your voice heard to change the rules!**

As the rate of diabetes incidence has climbed in the last 30 years, so has the cost of insulin. And that has led to a state of extreme concern for the more than 23 million diagnosed diabetics in the U.S.

- Between 2002 and 2013, the average price for one diabetic's insulin increased more than threefold, from an average of \$40 per vial to \$130.

Since the 1980s, drug makers have been modifying their insulin ever so slightly, which ensures that there are no generic versions of insulin, suggesting that drug companies like Eli Lilly and Novo Nordisk have done so to corner the market and raise prices of this life-saving drug¹.

Rationing your insulin is dangerous

A 2018 Yale University study found that one in four diabetics are cutting back on their insulin to save money. This underuse causes dangerously high blood sugar levels. Middle-income diabetics were more likely to cut back on their insulin use, likely because many are ineligible for Medicaid but cannot afford better insurance or the out-of-pocket price. Though this study was conducted at only one clinic in New Haven, CT, experts believe this data represents what diabetics are facing around the country¹.

- *Alec Raeshawn Smith, a Type 1 diabetic, in 2017 reduced his insulin intake to make ends meet. At 26, Smith had just been removed from his parents' insurance plan and had decided to try to pay out-of-pocket for his insulin. While trying to ration his insulin to last until he could afford more, Smith was found dead in his apartment, having suffered from diabetic ketoacidosis, a complication resulting from a lack of insulin in the body².*

Why is the cost of insulin rising?

While there is no simple explanation, much of the blame lies with the pharmaceutical companies that produce the much-needed insulin.

- Drug manufacturers Eli Lilly, Novo Nordisk and Sanofi control 99% of the insulin market.
- There is no generic equivalent of the drug to boot.
- There is also a lack of transparency in the insulin market, with no one outside the industry knowing quite how the money made is shared among its drug makers, insurance companies, and pharmacy benefit managers (or PBMs), the middlemen who negotiate contracts and prices between drug makers and pharmacies².

Lobbying power

These powerful drug companies hold a substantial amount of power over those who could rein in rising drug prices and expose wrongdoing.

- Pharmaceutical companies made over \$12 million in political donations in 2017.
- Pharmaceutical industry lobbying spent over \$171 million in 2017 Affordable Care Act negotiations.
- The three biggest contributors were Eli Lilly, Novo Nordisk and Sanofi.
- Novo Nordisk, for which diabetes-related drugs are their main business, spent \$3.2 million lobbying in Washington in 2017, its largest lobbying effort ever. Also, the company’s political action committee, or PAC, spent just over \$400,000 on federal campaign donations, nearly double what it raised in 2015³.

There appears to be a correlation between Nordisk’s political spending and their profits: as the company’s sales went from hundreds of millions of dollars around the turn of the century to \$9 billion in 2017, their political spending efforts increased tremendously. And the price of a vial of Nordisk’s insulin Levemir has risen sharply, from \$144.80 in 2012 to \$335.70 in January 2018.

Although Eli Lilly and Sanofi are less reliant on diabetes-related drugs in their business, both spent more on political donations last year than Nordisk: Eli Lilly nearly \$550,000 and Sanofi just over \$527,000.

Investigations on price increases & the need for price transparency

These three pharmaceutical companies are currently under investigation for price increases that are believed to be suspiciously similar in their timing and size. Each company denies any wrongdoing or coordination³.

In the daunting face of “big pharma,” there are some who have tried to step up and alleviate some of the pain diabetics are feeling.

- In June 2017, Nevada passed a strict drug pricing transparency law that requires diabetes drug makers that have raised their list prices to disclose information about costs of making and marketing drugs, forces PBMs to disclose the rebates they negotiate with drug makers and that they keep, and requires pharma sales representatives to supply details of their conversations with healthcare providers⁴.

There are also proposals before Congress to lower insulin and other drug prices as well as reducing future hikes. These include proposals that would allow Medicare to negotiate prices for covered drugs, lower the difficulty for biosimilar alternatives to make it to market, and increase industry transparency by requiring companies to disclose and justify price increases. None of these have made it out of committees¹.

MAKE YOUR VOICE HEARD!

Diabetes care reform needs your voice. Here’s how:

- **Contact your representative and let him or her know you believe insulin should be affordable and that “big pharma” doesn’t control Washington. To find your representative, go to <https://callyourrep.co/> or call the Capitol at 1-202-224-3121.**
- **You can also donate to the American Diabetes Association, or another a charity that is looking for a cure to diabetes. The ADA has been fighting to cure diabetes since 1940, and every little bit helps them achieve that dream.**

1. Epstein, Randi Hutter. “Diabetes Patients at Risk From Rising Insulin Prices.” *The New York Times*, 22 June 2018. Web.

2. Picchi, Aimee. “The Rising Cost of Insulin: ‘Horror Stories Every Day.’” *CBS News*, CBS Interactive, 9 May 2018.

3. Hancock, Jay, and Elizabeth Lucas. “How High Drug Prices and Big Lobbying Budgets Go Together for Big Pharma.” *Fortune*, Fortune, 26 Apr. 2018.

4. Ramsey, Lydia. “Nevada Just Passed One of the Strictest Drug Pricing Transparency Laws in the Country.” *Business Insider*, Business Insider, 15 June 2017.

Eat Like Your Life Depends on it



What your mother or grandmother may have told you is true:

You should eat in moderation and emphasize variety.

Why? What you eat is the fuel that provides the energy and nutrients to run your body. Good nutrition helps you to do the things you want to do and live the life you want.

Nutrients include proteins, carbohydrates, fats, vitamins, minerals, and water.*

REMEMBER that water is part of your nutrition, too, even though it may not be shown on food group charts.

Variety, Variety, Variety

Here are some nutritional tips from the U.S. Department of Agriculture:**

- Focus on whole fruits – fresh, frozen, dried or canned instead of fruit juice.
- Vary your veggies – dark green, red, orange, legumes, etc.
- Make half your grains whole grains.
- Vary your protein routine – animal sources (seafood, meat, poultry & eggs) and plant sources (nuts, beans & peas, seeds and soy products).
- Dairy – move to low-fat or fat-free milk or yogurt



START TODAY with small changes!

*MedlinePlus, the U.S. National Library of Medicine: <https://medlineplus.gov/nutrition.html>

**<https://www.choosemyplate.gov/variety>

Don't Stop Moving!

Exercise is important at our age. No matter what shape you are in, if you keep moving, you'll be healthier.

If you haven't been very active or you plan to increase your activity, consult your doctor before you begin—just to be sure you have an exercise plan that will help & not hurt you.



Activities that keep you moving

Movement is the most important aspect of exercise. Many people like to combine this with productive or recreational activity. Here are some examples:

- Biking, hiking, rowing. If this is new to you, start slow.
- Dancing. Go out with friends, take a class, improvise with music you like.
- Gardening. From mowing to planting & weeding, this activity makes you stretch—and gets you out in the fresh air. With some planning, you can do a lot of it from a seated or kneeling position, if needed.
- Home repairs/decorating. Don't hire out what you can do yourself. Avoid ladders if you have balance problems, but painting and other types of chores get you moving and stretching your muscles.

Regular work-out sessions

There are endless ideas on types of exercise from Pilates to aerobic and Tai Chi.

- Online resources. Do a search for “exercise for seniors” and you'll find millions of ideas on workouts, including low-impact routines and those specifically to improve strength and balance.
- Gyms. Check out what is near you and see if equipment or trainers are suitable for your needs.
- Senior centers. Many have exercise equipment you can use and classes you can take. You'll also be able to socialize and meet some new people!

Chair Exercises

If you think you're not well enough or in good enough shape to exercise, you're wrong. No matter what condition you are in, there are ways to make movement a part of your life.

Do an online search for chair exercises, and you'll be amazed. Do these on a regular basis and you may even be able to move into more traditional exercises and enhance your activity level.

No matter what type of exercise you choose, the important thing: Keep moving!

BENEFIT UPDATES for ARA Members

For over 40 years, the Association of Retired Americans (ARA) has provided quality discounted benefits for members and families. We've made some important updates for ARA members as we help you save money!

BASIC PLAN:

Medical Benefit Changes - To access all your medical benefits from the ARA, use the WellCard! Upon arrival, make sure you register your card immediately.

Be sure to register your WellCard online. Follow the instructions below:

1. Go to www.wellcardhealth.com
2. Under "New Users" click on "Click Here" to get started.
3. Enter the Group ID (EH2006) and click "Continue".
4. Enter your Member ID and click "Continue".
5. Fill out your personal information and click "Continue".
6. Confirm information on page and click "Continue".
7. Read the agreement and click the box stating that you have read and agree to the plan terms and conditions. Click "Continue". Your WellCard has been registered.

ULTIMATE PLAN:

Dental Benefit Fee Schedule – Your Careington POS Dental Discount has significant savings for you. Here is the schedule of sample savings for you.

Description	*Regular Cost	**Plan Cost	Savings \$	Savings %
Adult Cleaning	\$126	\$64	\$62	49%
Child Cleaning	\$89	\$46	\$43	48%
Routine Checkup	\$73	\$33	\$40	55%
Four Bitewing X-rays	\$85	\$43	\$42	49%
Composite (White) Filling	\$201	\$103	\$98	49%
Crown (porcelain fused to noble metal)	\$1,424	\$795	\$629	44%
Complete Upper Denture	\$2,047	\$1,070	\$977	48%
Molar Root Canal	\$1,382	\$753	\$629	46%
Extraction-single tooth	\$240	\$109	\$131	55%

* Regular cost is based on the national average of the 80th percentile usual and customary rates as detailed in the 2015 FairHealth Report in the Los Angeles, Orlando, Chicago and New York City metropolitan statistical areas. ** These fees represent the average of the assigned Careington (PDNP) fees in the Los Angeles, Orlando, Chicago and New York City metropolitan statistical areas. *Prices subject to change.*

IMPORTANT OFFERS for ARA Members! Special Pricing for you:

- Long-Term Care Insurance (See page 25)
- Auto & Homeowners Insurance (See next page)
- Emergency Assistance for Travel (See page 14 and page 31)

Use Your ARA Benefits and NEVER PAY FULL PRICE AGAIN!

By using your ARA Member Benefits, you can save money each time you purchase services for:

DENTAL

VISION

HEARING

PRESCRIPTIONS

LAB TESTS, X-RAYS and IMAGING

24/7 DOCTOR

TRAVEL & LEISURE

AND MORE!



Auto & Homeowners Insurance SAVINGS

As an ARA Member, you have a great opportunity! You may be able to save hundreds of dollars by combining a variety of group discounts!

With just one phone call, see how you can start saving today, including:

- Multi-vehicle savings
- Credit for each year of claim-free driving (in states where available)
- Save up to 20% with a length of membership discount

Call 1-877-491-5089. Mention your discount code: DEC

**Please call the ARA National Office with any questions or for help.
1-800-806-6160 M-F 8:00 am - 4:00 pm (Eastern Time)**

Intro to Your ARA Quick Guide



On the next four pages, we have included a Quick Guide to your ARA Membership Benefits.

The ARA has two membership plans to choose from:

- ARA Basic Plan
- ARA Ultimate Plan

Your Quick Guide provides a brief overview of the features of these plans. For more information, go to www.aracares.com, consult your ARA Member Guide or call ARA at:

1-800-806-6160

REMEMBER: If you are an ARA Basic member now, you can easily upgrade your membership to ARA Ultimate. You'll be able to enjoy even more great benefits and savings with ARA Expanded! **Just call us at 1-800-806-6160.**

People Who Care Caring For You!

Emergency Assistance Plus (EA+) – Special Offer to ARA Members

If you are sick or injured while traveling, Emergency Assistance Plus (EA+) will get you home! And EA+ provides more than 20 emergency benefits that your health insurance or travel insurance generally will not cover.

Consider this example:

Paul and Nora set off on their "dream trip" – a 4,500 mile drive in their RV from their home in North Carolina cross-country to Alaska. After several weeks of leisurely driving, they arrived in Fairbanks, Alaska. Paul started having chest pains, so Nora took Paul to the hospital. The news was not good. The cardiologist told Paul he needed to fly home immediately for treatment – driving home could prove fatal. Paul's response was to hand his EA+ card to the doctor. EA+ immediately arranged flights for Paul and Nora to Atlanta, GA, and a hospital that could do the surgery. While this was going on, EA+ arranged for Paul and Nora's RV to be driven back to their home. Nora estimates that EA+ saved them upwards of \$5,000.00 for the tickets and the safe return of their RV.

**For less than 32 cents a day, you can have this same peace of mind.
And, for only about 8 cents more a day, you can include your immediate family.
This offer truly is too good to pass up. See page 31 for more details.**

ARA Membership Features QUICK GUIDE



NO AGE LIMITS!

Your Family Members Are Included
in Many Membership Features at No Extra Cost.

- Everyday Savings on:**
- ✓ Health Care
 - ✓ Travel
 - ✓ Prescriptions
 - ✓ Shopping
- *ARA BASIC PLAN
*ARA ULTIMATE PLAN

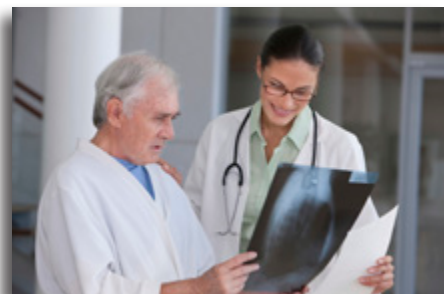
People Who Care Caring For You • 1-800-806-6160

ARA BASIC Plan Includes:

HEALTHCARE SAVINGS

- **Doctor Visits**—Savings of up to 30%. Pre-negotiated discounted prices at over 410,000 physicians and 45,000 supplementary provider locations nationwide.
- **Medical Bill Help**—Patient advocate to help you understand and negotiate your medical bills over \$500.
 - Risk-free savings: Review of bill is free. If you don't save money, there is no fee for the negotiation.
- **24/7 Doctor**
 - Access a medical professional via telephone or video conference from anywhere, anytime.
 - No charge for consultation with nurse.
 - Doctor consult within one hour for \$65 (7 a.m. to 10 p.m. EST); physician can prescribe medication, if appropriate.
- **Vision Discounts**
 - Savings of up to 50% on eye exams & eyewear at over 11,000 major chain and independent locations.
 - LASIK Savings of up to 50% at LASIK locations worldwide.
- **Dental Discounts**
 - Savings of up to 40% typical at over 100,000 dental locations.
- **NEW! Hearing Savings**
 - Free annual hearing screening for you and your extended family
 - Up to 70% off manufacturers' suggested prices for full line of high-quality hearing aids
 - Three-year repair warranty with new purchases at no additional charge
 - Three-year clean and check service at no additional charge
 - Three years of batteries included with every hearing aid purchase
- **Prescription Drug Discounts**
 - Local Pharmacy – Save up to 65% at more than 59,000 participating pharmacies nationwide (*including all major pharmacies*).
- **Diabetic Supplies**
 - Savings of up to 75% for ARA members and their families.
- **Lab Tests**
 - Savings up to 50% off usual charges for blood tests and other lab testing at participating certified labs.
- **Diagnostics/Imaging**
 - Savings up to 75% at over 3,500 accredited imaging facilities.
- **Pet Insurance** (*provided through Nationwide Pet Insurance*)
 - Discounts on a policy that covers accidents, emergencies, illness.

All of the above discounts (except Pet Insurance) provided as part of your WellCard Membership.



Please Note: WellCard partners are only responsible or liable for the service or materials they provide. This is NOT insurance, but does provide discounts at certain providers for health care services. The member must pay for all health care services but will receive a discount from those providers who have contracted with the program.

TRAVEL & LEISURE SAVINGS

- **Hotel Discounts**
 - ARA Worldwide Hotel Program - Average 10-20% savings.
 - Save up to 10% at Choice Hotels, with 5,800 locations worldwide.
- **Vacations and Tours**
 - Discounts on tours to all seven continents.
 - No Worries Travel Protection Plan
- **Car Rental Discounts**
 - Savings up to 25% at participating major car rental companies.



SHOPPING SAVINGS

- **Flower Discounts**
 - Save 15% on floral arrangements or non-floral gifts, including fresh flowers, plants, gourmet & specialty baskets, balloons, confectioneries, home & garden merchandise and much more.
- **Online Shopping—Cash Back**
 - Earn up to 30% cash back on your online purchases from more than 1,100 retailers.



Collette Shows You the World

Collette has been showing the world to people just like you for nearly 100 years. As a third generation, family-owned company we believe that travel is an essential part of living a healthy and fulfilled life.

In addition to visiting iconic must-see sites around the globe, Collette's 160 tours take travelers off the beaten path to really get to know and appreciate each destination. A partnership between ARA and Collette opens up exclusive offers and member benefits to make your travel dreams come true!

With Collette's No Worries Travel Protection Plan, you can cancel for any reason and receive a full cash refund right up to the day before departure! The world is waiting for you to make your move.

Save up to \$500 per person.

Visit www.aracares.com for more information.

ARA ULTIMATE includes ARA BASIC, PLUS:

- **LifeCard Plans Digital Vault**

- Provide your entire family with secure digital storage of key information and documents through an online portal. Purchase one of 4 plans and save 20% off regular price.



- **Careington POS Dental Discount**

- Save on most dental procedures at Careington's large network with a focus on neighborhood dentists.



- **VSP Vision Savings Plan**

- Discount vision program through private-practice VSP doctors.
- One rate of \$50 for eye exams, with purchase of prescription glasses.
- 15% savings on contact lens exams.



- **Hearing**

- Hearing aid low price guarantee; 40% discount on hearing exams; 2 years of free batteries; 1 year of follow-up care. Over 3,800 provider locations.



- **Podiatry Plan**

- 50% discount on provider's fee for initial exam and 20% discount on provider's normal fees for all other services and products at participating podiatric physicians.



- **Diabetic and Other Supplies**

- Save off retail prices: 20% to 30% on durable medical equipment; 20% to 40% on disposable medical supplies; 20% to 25% on nutritional supplements and daily living aids.



- **Vitamin & Nutritional Supplements**

- Save 10% on all products.

If you have ARA BASIC and would like to upgrade to ARA ULTIMATE, call us today at 800-806-6160!

THIS PLAN IS NOT INSURANCE and is not intended to replace health insurance. This plan does not meet the minimum creditable coverage requirements under M.G.L. c.111M and 956 CMR 5.00. This plan is not a Qualified Health Plan under the Affordable Care Act. This is not a Medicare prescription drug plan. The range of discounts will vary depending on the type of provider and service. The plan does not pay providers directly. Plan members must pay for all services but will receive a discount from participating providers. The list of participating providers is at www.ara-usa.org. A written list of participating providers is available upon request. You may cancel within the first 30 days after effective date or receipt of membership materials (whichever is later) and receive a full refund, less a nominal processing fee (nominal fee for MD residents is \$5, AR and TN residents will be refunded processing fee). Discount Plan Organization and administrator: **Careington International Corporation**, 7400 Gaylord Parkway, Frisco, TX 75034; phone 800-441-0380.

This plan is not available in Vermont or Washington.

Medicare Changes for 2019



Prescription Drug “donut hole” – There have been gradual savings each year on out-of-pocket costs while in the “donut hole” coverage gap in Medicare Prescription Drug plans. The coverage gap is closing over the next 2 years. In 2019, those who fall into the coverage gap:

- Will pay 25% on Part D-covered brand-name prescription drugs (the same percentage as you pay after your deductible on most plans) and
- Will pay 37% of the cost of generic drugs (7 percentage points less than in 2018)

Donut Hole Coverage Gap—In 2019, you will reach the donut hole gap later, but the gap will be almost the same amount as in 2018.

	2018	2019
Initial Coverage Limit - Coverage Gap (Donut Hole) begins	\$3,750	\$3,820
Coverage Gap ends	\$5,000	\$5,100
<u>Width of Donut Hole Gap</u>	\$1,250	\$1,280

At the time this issue was printed, the Medicare deductibles for 2019 had not been announced. ARA encourages you to consult an independent licensed insurance agent to fill in these figures below and to assist you in selecting your Medicare plan for 2019.

MEDICARE DEDUCTIBLES	2018	2019
Part A Deductibles Per Benefit Period		
Days 1 - 60 of Hospital Stay	\$1,340	\$ <input type="text"/>
Days 61 - 90 of Hospital Stay	\$335 per day	\$ <input type="text"/> per day
Days 91 - 150 of Hospital Stay	\$670 per day	\$ <input type="text"/> per day
Skilled Nursing Facility Coinsurance (Days 21 - 100 Per Benefit Period)	\$167.50 per day	\$ <input type="text"/> per day
Part B Deductible Per Calendar Year	\$183	\$ <input type="text"/>

DATES TO REMEMBER:

Oct. 15, 2018 – Dec. 7, 2018 – Annual Enrollment Period for Medicare Advantage and Part D Prescription Drug plans to take effect January 1, 2019.

Jan. 1, 2019 – 2019 Coverage and Costs Begin. New coverage begins if you switched. New costs and coverage changes also begin if you stay with your current coverage.

Jan. 1 – March 31, 2019 – **NEW Medicare Advantage Open Enrollment Period.** During this time period, individuals enrolled in a Medicare Advantage plan, including those newly-eligible for Medicare Advantage, may make a one-time election to go to another Medicare Advantage plan or Original Medicare. Individuals using this time period to make a change may make a coordinating change to add or drop Part D coverage.

For more information and to locate a licensed insurance agent near you, call 800-806-6160. Not affiliated with or endorsed by any government agency.

Part D – Prescription Drug Plans & The ‘Donut Hole’

- In 2019, the standard annual plan deductible for Part D Prescription Drug plans will increase to \$415, up \$10 from this year.

NOTE: Your deductible will be based on the Part D plan you select. Some Part D plans have lower or \$0 deductibles and co-pay amounts vary.

- **GOOD NEWS:** Beneficiaries will enter the “donut hole” a little later in 2019 than this year.
- The size of the donut hole will be slightly greater than in 2018.

See page 19 for the beginning and ending points of the donut hole.

- Beneficiaries will pay less for brand-name AND generic drugs while in the donut hole in 2019. See table below.



Under new rules, the donut hole for brand name drugs is closing in 2019. Beginning in 2019, you will pay no more than 25% of the cost of brand-name drugs when you are in the donut hole coverage gap. This is the same percentage you pay after the deductible on most Part D plans. In 2020, you also will pay no more than 25% of the cost of generic drugs.

	BRAND-NAME DRUGS: You'll Pay this Percentage in the Coverage Gap	GENERIC DRUGS: You'll Pay this Percentage in the Coverage Gap
2018	35%	44%
2019	25%	37%
2020	25%	25%

REMEMBER: You need to enroll in a Part D plan when you first become eligible—to keep from paying a penalty later. Part D plans change every year and your needs also may change. The plan you have this year may not be the right plan for you for 2019.

You can check on Part D plans available in your area at: www.medicare.gov/find-a-plan/questions/home.aspx. Once you have reviewed those, ARA recommends that you discuss your needs with an insurance agent.

**For more information and to locate a licensed insurance agent near you, call 800-806-6160.
Not affiliated with or endorsed by any government agency.**

Medicare Supplement Plans



Medicare does not pay all your health care expenses. If you choose original Medicare, you also may choose an insurance plan to supplement Medicare (sometimes called “Medigap”) -- to save you thousands of dollars when you need medical care.

There are 10 standardized Medigap plans, named by letters of the alphabet: A through N. “Standardized” means that each insurance company that offers a Plan C or Plan F, for example, has to provide the same benefits for that plan as every other insurance company. **However, there are differences in cost and service.**

ARA recommends that you consult an independent insurance agent to assist you in selecting a plan that is right for your needs and your budget.

Economical Choices

There are additional options available to the budget-conscious: Medicare Advantage (*see pp. 22 & 23*) and Medicare SELECT.

MEDICARE SELECT is a plan that gives you all the benefits of a traditional Medicare Supplement but costs hundreds of dollars less.

- You have freedom of choice for doctors or specialists. If a hospitalization is planned, you may visit any of the hospitals that are affiliated with the Medicare Select plan you choose.
- Through this special hospital affiliation, your premium is lower and the Part A hospital deductible is waived in any affiliated hospital or for emergency care in any hospital in the country.
- If you buy a MEDICARE SELECT policy, you also have rights to change your mind within 12 months and switch to a standard Medigap policy, if you so choose.

CHOICES VARY BY STATE

Your plan choices vary by state and area. Plans that were available in 2018 may not be available for 2019, or there may be changes in certain features and benefits.

Medigap Plans C & F no longer available to new enrollees beginning in 2020.

A new law states that Medicare Supplement plans will not be able to cover the Part B deductible for policies sold to those newly eligible for Medicare, effective for coverage on and after January 1, 2020. If your birthday is December 31, 1954, you are among the last group able to enroll in Plans C or F.

If you already have a Plan C or F, you can keep it.

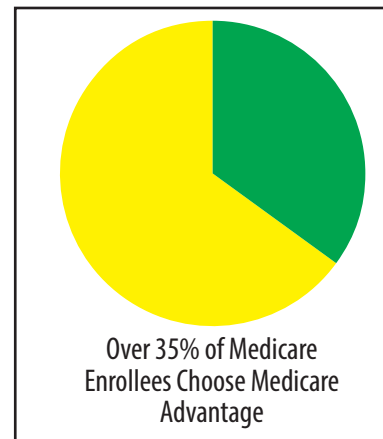
If you're in a Medicare plan, review the Evidence of Coverage (EOC) and Annual Notice of Change (ANOC) your plan sends you each year, usually in September. The EOC gives you details about what the plan covers, how much you pay, and more. The ANOC includes any changes in coverage, costs, or service area effective in January. If you don't receive an EOC or ANOC, contact your plan administrator.

**For more information and to locate a licensed insurance agent near you, call 800-806-6160.
Not affiliated with or endorsed by any government agency.**

Medicare Advantage – A Great Value

The number of Medicare beneficiaries choosing Medicare Advantage plans jumped again in 2018 to over 21 million, from 19 million in 2017.

- Enrollment in Medicare Advantage is expected to continue to grow, increasing to 50 percent of Medicare beneficiaries by 2025, according to the Congressional Budget Office.
- Top 5 states for number of Medicare Advantage enrollees in 2018: California, Florida, Texas, New York, Pennsylvania



Why is Medicare Advantage so popular?

- **MORE BENEFITS** – Many Medicare Advantage plans provide more benefits than the original Medicare plan.
- **LOWER COST** – When you choose one of these plans, you don't need a Medicare Supplement policy and, in most cases, Medicare Advantage will cost you less in premiums.
- **CARE MANAGEMENT** – These plans also can help you coordinate and manage your overall care. Certain Medicare Advantage plans include specialized care for people who need a large amount of health care services.
- **COMBINED WITH RX** – Some Medicare Advantage plans also cover prescription drugs, so you may not need a separate Part D Prescription Drug plan.

Medicare Advantage plans often have networks, and you must use the doctors or hospitals that belong to the plan. **Always be sure to ask if the doctor or facility you plan to use participates in your Medicare Advantage plan before you receive medical service.**

The Medicare Advantage plan you choose affects many things like cost, benefits, doctor choice, convenience and quality. That's why it is helpful to discuss your needs and budget with an independent insurance agent.

Qualifying for Medicare Advantage Plans is very easy. With most plans, the only requirement is that you are enrolled in Parts A and B of Medicare.

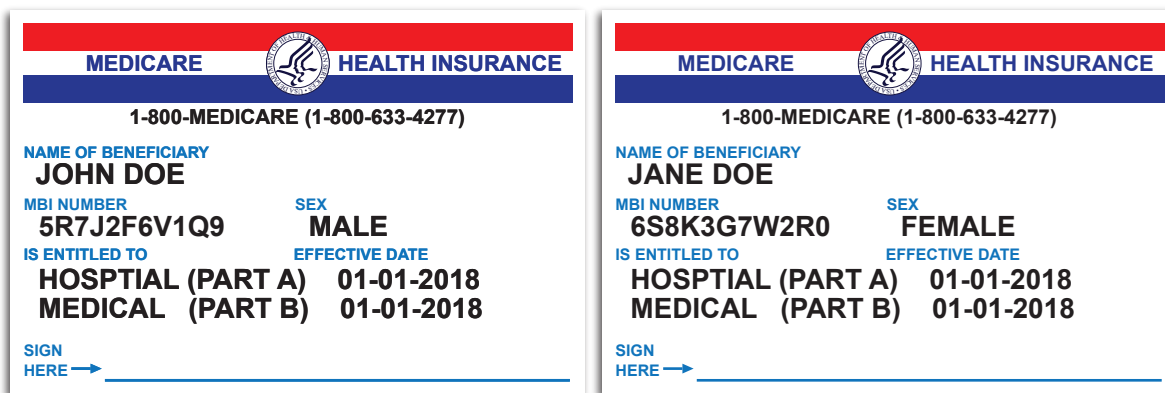
Your Medicare Advantage plan choices vary by state and area and may include:

- **Medicare Preferred Provider Organization (PPO)** – You are able to see any doctor or specialist you choose. If they are not in your PPO network, your cost will increase. You usually can see a specialist without a referral.
- **Medicare Health Maintenance Organization (HMO)** – You are able to visit doctors in the HMO network only. In most cases, you will be required to have a referral to visit a specialist.
- **Medicare Private Fee-for-Service (PFFS)** – You are able to see any doctor or specialist, but they must be willing to accept the PFFS's fees, terms and conditions. You do not have to have a referral to see a specialist.

- **Medicare Special Needs (SNP)** – Designed for people with certain chronic diseases or other special health needs. These plans must include Part A, Part B and Part D coverage.
- **Medicare Medical Savings Account (MSA)** – There are two parts to this plan:
 - (1) A high-deductible plan in which coverage won't begin until the annual deductible is met.
 - (2) A savings account plan where Medicare deposits money for you to use for health care costs.

For more information and to locate a licensed insurance agent near you, call 800-806-6160.
Not affiliated with or endorsed by any government agency.

REMINDER: New Medicare ID Cards



New Medicare cards—without Social Security numbers—are being sent to people on Medicare. This began in April 2018.

Congress set a deadline of April 2019 to replace all Medicare cards, so that a new identification number, a Medicare Beneficiary Identifier (MBI), will be used instead of your Social Security number. Your MBI will be a unique, randomly assigned 11-character code that is a combination of letters and numbers.

Once you receive your new card, there will still be a transition period through the end of 2019, during which you can use either card when you receive medical care.

The Association of Retired Americans has joined with Medicare Pathways, Inc. to help our members with one of the most daunting tasks associated with retirement:

Medicare

The qualified, licensed agents at Medicare Pathways can assist you with all things Medicare. From understanding your Medicare options to selecting a specific health plan, they've got you covered.

Get answers to questions such as:

- What is Original Medicare and are there other health care options?
- What do Medicare Parts A, B, C and D mean?
- What are the differences between Medicare and other health care options?
- Is Original Medicare enough coverage for me?
- Are my prescriptions covered?
- How much will it cost?
- Do I have deadlines to enroll?

When it comes to Medicare, you have choices – let Medicare Pathways help you find the best plan to fit your specific healthcare needs.



medicare
PATHWAYS

844.427.2756

Calling the number above will direct you to a licensed sales agent.

ARA Member Discount for Long-Term Care Insurance

Your Long Term View - What Matters Most to You?

What is your focus in retirement? Will you see your family more, travel the countryside and see the world, pursue a favorite pastime? As you get older, there's a chance you'll need help with life's daily activities. If that happens, what's your biggest concern:

- Ensuring you won't be a burden on your family?
- Staying in your home as long as possible?
- Protecting your retirement nest egg?

The need for long-term care has the potential to impact your connections to all you hold dear:

- **Your family** – Your connections with family members may be impacted when a spouse or adult child must take on the role of your caregiver
- **Your home** – Your connection to your home may dissolve when you can no longer manage to live there without help
- **Your nest egg** – Your connection to your financial independence may be weakened when the nest egg you worked a lifetime to accumulate, must pay for long-term care services

How Do You Stay Connected to What Matters Most to You?

Greater peace of mind is achieved by planning and preparing before the need arises. Everyone needs a Long-Term Care Plan, whether or not that plan includes insurance. A well prepared plan involves analyzing and understanding how you or your family members will provide for potential care needs, and both the financial and emotional impact that may have.

As part of your overall plan for retirement, including Long-Term Care insurance may help you pay for a portion of the care you need, reducing your out-of-pocket payment for long-term care services. With Long-Term Care Insurance, you use a small amount of your assets now to mitigate a large amount of risk later. With Long-Term Care Insurance, you may be able to strengthen your connections to your family, home, and nest egg by:

- Supplementing the care you receive from family members with professional caregiving services
- Receiving long-term care services you need in the comfort of your own home
- Protecting your retirement assets by supplementing your out-of-pocket payments with the benefits of a long-term care insurance policy

WHAT TO DO NOW?

Contact us today at 800.806.6160 to speak to a licensed agent and to learn about the association discount you are eligible for as an ARA member. There are many Long-Term Care solutions available, ranging from traditional coverage, Medicaid partnership policies as well as asset-based solutions that allow you to include full Return of Premium guarantees and Death Benefit features. We'll be happy to answer your questions and help you assess your long-term care needs. And as always, there's no cost or obligation to buy.

1

**UNDERSTANDING
THE RISKS**

2

**AVOIDING
MISTAKES**

3

**REDUCING
YOUR COSTS**

A 3-Step Guide to SMARTER Long-Term Care Planning



THE TIME TO PREPARE IS NOW

The need for long-term care is one of the biggest financial threats you could potentially face in life. This guide provides information and tips regarding long-term care planning and insurance protection.

A SPECIAL PLANNING GUIDE FOR KIPLINGER'S PERSONAL FINANCE READERS PRESENTED BY THE

American Association for Long-Term Care Insurance

ADVOCACY • INFORMATION • EDUCATION • STANDARDS

1 UNDERSTANDING THE RISKS

The Impact of Long-Term Care

Most people envision themselves living a long life, investing and planning throughout their working years to create a financially secure future where they can enjoy spending time doing the things they enjoy the most.

As part of your financial planning process, it's important to understand the potential impact that needing long-term care may have on your assets, your family, and your future.

Financial Impact

The reality is, the longer you live, the greater the likelihood that you may require long-term care. The costs associated with needing long-term care are significant. While it can take decades to accumulate the assets you'll need to retire comfortably, just a few years of paying for long-term care may threaten a lifetime of savings.

Emotional and Physical Burden

If you've ever been in a care-giving situation, you understand the physical and emotional toll it can take. While providing care to loved ones is an act of compassion, placing these burdens on spouses, children and other family members can create a significant emotional and physical strain, and is something that many people would like to avoid.

Consequences of Not Having a Plan

Waiting to address your long-term care needs — until the point at which you actually need care — may significantly impact your financial situation, your quality of life, and your ability to maintain your independence. Incorporating long-term care (LTC) insurance into your financial plan can help protect your assets, reduce the burden of care that would otherwise fall on family members, and enable you to receive care in the setting you most prefer, including your home.

Perhaps the greatest benefit: Long-term care insurance can allow loved ones to care ABOUT YOU. . . instead of having to care FOR YOU.

All references to statistics are based on data contained in the 2009, 2010 & 2015-16 editions of the LTCi Sourcebook published by the American Association for Long-Term Care Insurance. May be used with credit to the American Association for Long-Term Care Insurance.

What's Your Real Risk?

Many people find it hard to envision themselves needing hands-on assistance with basic living activities like bathing, getting dressed, and eating. So they avoid thinking about it altogether. The fact is that 70% of people who reach age 65 will require long-term care services at some point in their lives.¹

But perhaps the bigger unknown — and biggest risk — relates to the length of time for which you may need to receive care services. It's impossible to predict. Some may only need a few months of care. Others might need a few years. Others, such as those with dementia or Alzheimer's disease, might require 24-hour care for as long as 10 years.

As people take into account the current and future projected costs of care, and the potential impact to their families and finances, many find the risks simply too big to ignore. Long-term care insurance helps provide protection against these risks.

SMART FACTS

▶ The cost of care is expensive.

\$97,455 - Nursing Home
(1 year of care today)

\$45,000 - Assisted Living Facility
(1 year of care today)

\$911,690 Nursing home
\$421,017 Assisted living facility
(3 years of care in 30 years)

Growth estimates based on inflation factor of 4%
Source: Genwork 2017 Cost of Care Survey.

▶ Alzheimer's disease accounts for just over 20% of claims.

▶ Roughly \$7.8 billion in LTC benefits was paid out in 2014.

Source: American Association for Long-Term Care Insurance, 2015-16 Sourcebook.

REAL-LIFE EXAMPLES

The following are two examples of how LTC insurance coverage has helped protect people's assets while covering the cost of care over extended periods:

Female purchased a policy at age 43

- ▶ Annual premium of \$1,800
- ▶ Claim began three years later and has continued for 12 years
- ▶ \$1.2 MILLION IN BENEFITS PAID

Male purchased a 5-year policy at age 54

- ▶ Annual premium of \$2,560
- ▶ Claim began two years later and has continued for almost 7 years
- ▶ \$690,000 IN BENEFITS PAID

1 U.S. Department of Health and Human Services. National Clearinghouse for Long-Term Care Information

2 AVOIDING MISTAKES

The Planning Process

Once you understand the risks associated with needing long-term care, you're ready to start the planning process. As you weigh your decision to purchase LTC insurance, there are a variety of factors to consider. These include:

1. Where do you plan to live when you retire?
2. In which setting would you prefer to receive care? (For many people, it's in their home.)
3. How much of your long-term care expenses are you willing, or able, to pay out of your own pocket?

Below are a few common mistakes to avoid.

Waiting Too Long to Address the Issue

There are important reasons to address your potential long-term care needs sooner rather than later. Since the cost of LTC insurance is typically based on your age and health when you apply, the older you are when you apply, the higher your costs may be.

- ▶ The annual premium for a person who purchases a policy at age 50 can be significantly less expensive than the same policy purchased at age 60.
- ▶ While some employers offer LTC insurance coverage with few or no health questions, you'll typically have to go through an underwriting process when you apply for an individual policy. Through this process, the insurance company will classify you in one of up to 3 or 4 "risk" categories. The longer you wait to apply for coverage, the greater the likelihood that health issues may arise, and increase the cost of your policy, or even disqualify you from obtaining coverage in some cases.

Insuring One Spouse/Partner, But Not the Other

Today, a little over half of LTC insurance buyers are couples — representing 54% of the new policies sold. It is true that women are more likely to need long-term care. Thus, some couples look to insure just the greater risk.

However, this approach creates a far greater financial risk and emotional toll should a husband need care prior to his spouse. Regardless of which one is not covered, the risk of needing care — and the subsequent care-giving and financial responsibilities that follow — will impact the couple's quality of life and financial situation.

Assuming You Can Cover the Cost of Care

Without a long-term care insurance policy, you are essentially "self-insuring" your risk of paying for care. While wealthy individuals may have the financial means to cover their costs for care, this is not a viable strategy for the majority of people. Whether people overestimate their ability to pay for care over an extended period, or convince themselves that they'll never need care, the risk of needing and paying for care remains.

Whether you are wealthy or not, paying a reasonable insurance premium to transfer one of the biggest financial threats you may face can be a smart move towards protecting assets and loved ones.

HERE'S TO YOUR HEALTH

LTC insurance applicants declined coverage due to poor health:

Under age 50	12 %
Ages 50 - 59	17 %
Ages 60 - 69	25.0 %
Ages 70 - 79	44.0 %

Source: American Association for Long-Term Care Insurance, 2014 LTCi Buyer Study

COUPLES TIP

- ▶ Some LTC insurance carriers enable couples to link their policies in order to share benefits in the event one person's benefits are exhausted.

DID YOU KNOW?

- ▶ Women live longer than men. As a result, they are more likely to reach an age where they will be without their spouse and/or require long-term care.
- ▶ Over two-thirds (67.5%) of LTC insurance individual claim dollars are paid to women.

Source: American Association for Long-Term Care Insurance, 2010 LTCi Sourcebook

3 REDUCING YOUR COSTS

Variables That Impact Premium

Buying long-term care insurance is not an all-or-nothing decision. Most policies offer flexibility to meet your needs and budget. We've already mentioned one of the biggest cost reductions — buying sooner rather than later. In addition, once you have decided to apply for coverage, there are a variety of strategies you can use to help further reduce the cost of your policy.

Designing Your Policy

There are a number of policy design elements that can impact your premium, as well as the benefits you can expect to receive. Keep in mind that two policies with the same premium can deliver different benefits and result in different out-of-pocket costs. Here are a few basics to keep in mind regarding policy design.

Daily (or monthly) benefit amount

This is the maximum amount that your policy will pay on a daily or monthly basis. As a starting point, look at costs for care where you anticipate you will live and receive care. These costs can often be found on LTC insurance carriers' websites. You may live in a high cost area now, but plan to retire to a lower cost of care area. Either way, it's important that you guard against buying a daily amount that is too low, as it can trigger higher out-of-pocket costs in the long run.

Benefit period

This is the minimum number of years you can expect your coverage to last. Selecting a reasonable benefit period (at least 3 years, but generally not more than 10 years) can help you manage the costs of your policy.

Deductible / Elimination period

To help lower the cost of the policy, insurance carriers may require that you shoulder some portion of

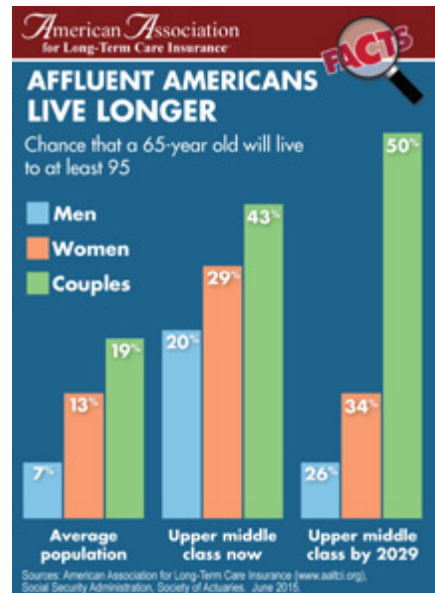
your cost of care. This can be in the form of a "waiting period" or the number of days you'd be required to cover your costs before benefits commence, or it could be a dollar amount or percentage of each claim that you are required to pay.

Inflation protection

Deciding how the coverage you buy today will still meet your needs in 20 or 30 years is an important consideration. There are a variety of strategies for ensuring your benefits keep up with the rising costs of care, and each has a different cost associated with it. Your financial or insurance professional can help you decide which one is best for you.

Optional riders

Many policies offer a variety of optional riders that can be used to further customize your policy or enhance your coverage. Your financial/insurance professional can help you determine which ones, if any, offer the most value for the additional premium that you'll pay.



Accessing Discounts

Many insurance companies offer various types of discounts you may qualify for. Two of the most common are preferred health and marital (or partner) discounts, which can enable you to reduce your premium anywhere from 10-40%.

Some Coverage Is Better Than None

Everyone has competing financial priorities. Consider how much of your cost of care you'd be willing and able to cover on your own. Even a "small" policy provides a degree of protection that you would otherwise not have. Decide how much you can start with based on your budget and be sure the company offers options to increase coverage over time, including how much you can increase and whether underwriting is required.

YOUR NEXT STEP

You've taken an important step by reviewing the information in this planning guide. One of the smartest next steps you can take is to simply talk with your loved ones about how long-term care may impact your family. If you have elderly parents or other relatives who have needed care, you may already see the need to plan ahead for your own needs.

Speak with your insurance or financial professional.
Find out what may be best for your situation.

ADVOCACY • INFORMATION
EDUCATION • STANDARDS

**For More Information go to the
ONLINE CONSUMER
INFORMATION CENTER**

**American Association for
Long-Term Care Insurance**
www.AALTCI.org



ARA APPLICATION FOR MEMBERSHIP
THE ASSOCIATION OF RETIRED AMERICANS®

6505 East 82nd St., Suite #130
 Indianapolis, IN 46250-5507

Phone: 800-806-6160 Web Address: www.ara-usa.org

PROVIDING SERVICE SINCE 1975

Name: _____ Birth Date: ____ / ____ / ____
First MI Last

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Office Phone: _____ Fax: _____

Mobile Phone: _____ Email Address: _____

Spouse's Name: _____ Birth Date: ____ / ____ / ____ Total Persons In Household: _____

Were you referred by an ARA endorsed insurance company? Yes No Company: _____

Product Type: Life Long Term Care Medicare Sup Annuity Agent Name: _____
Please Print

Agent Signature: _____ Agent Code: _____ Phone: _____

ARA MISSION STATEMENT:

“The Association of Retired Americans® is dedicated to a better living for mature Americans through benefit enhancement, communication of valuable resources, improved health care and health care services.”

QUALIFICATIONS:

The Association of Retired Americans® accepts applications for Associate Membership from person under age 45. Those under age 45 seeking membership may apply and join ARA, but may not vote on Association issues or participate in age-restricted programs.

“I acknowledge that this application for membership in The Association of Retired Americans® was not offered or accepted as an inducement for anything other than the benefits and services as stated in the membership brochure in effect on the date of this application.”

Applicant Signature: _____ Date: ____ / ____ / ____

ARA MEMBERSHIP OPTIONS

SHARE THE
OPPORTUNITY
WITH A
FRIEND TO
JOIN ARA

1 YEAR - \$30.00 3 YEAR - \$75.00 5 YEAR - \$125.00

LIFETIME MEMBERSHIP - \$250.00

Personal Check or Money Order Enclosed \$ _____
Amount Enclosed

CREDIT CARD AUTHORIZATION

New and renewal dues may be paid by credit card using this form To join ARA immediately using a credit card, call 1-800-806-6160.

Card Type: Visa MasterCard Discover American Express

Card Number: EXP DATE: ____ / ____

Member Signature _____ Date: ____ / ____ / ____

MEMBER BENEFITS KIT WILL BE MAILED FROM ARA HEADQUARTERS WITHIN 7 DAYS FROM RECEIPT OF APPLICATION.

HOURS OF OPERATION
 M - F, EXCEPT HOLIDAYS
 8 AM TO 4 PM EST 1-800-806-6160

**MEMBERSHIP DUES ARE NOT
 DEDUCTIBLE.**

Visit the ARA website at www.ara-usa.org



WE'LL GET YOU HOME

Any time you have an accident or sudden illness while traveling away from home, ARA Endorsed *Emergency Assistance Plus* provides a crucial safety net that helps pay for emergency medical transportation expenses your health or travel insurance generally will NOT cover. *EA+* steps in to provide Medical Evacuation, Medical Assistance, Travel Assistance, and Assistance for Companions.

EA+ is available to ARA members at over a 30% discount off the broad market rate.


ANNUAL RATES:


Worldwide protection for you when you travel away from home	\$114
Protect you and your family (<i>that's only \$30 more!</i>)	\$144


For more information, visit: www.EmergencyAssistancePlus.com/ara

WHAT YOU GET WITH EA+*


EA+ provides more than 20 emergency medical assistance services while you're traveling away from home. Here are some of the great services members have access to.


 **Air Ambulance or Emergency Medical Evacuation** if deemed medically necessary to get you to a more appropriate medical facility quickly if your current facility can't properly treat your medical condition.


 **Transportation Home** after hospitalization via a one-way airline ticket, coordinated and provided by *EA+*.

 **Nurse Escort** provided if deemed medically necessary to help ensure you get proper medical care during your trip home.

 **Return of Deceased Remains** service to bring your body home if you pass away while traveling.

 **One Round-Trip Economy Class Airline Ticket** to bring a loved one to your bedside if you're traveling alone and become hospitalized.

 **Vehicle Return** if you can't drive your vehicle back home because your medical condition prohibits it AND your companion can't drive it either.

 **Return of Traveling Companion, Children or Grandchildren** will be coordinated and provided in the event you are hospitalized, evacuated or pass away while away from home.

FAQs

Q. What if I get hospitalized hundreds of miles from home and neither my traveling companion or I can drive my car or RV back?

A. *EA+* will coordinate and provide for it to be driven to your home.

Q. What if I'm hospitalized following an accident and due to medical necessity have to be transported to a different facility that may be miles away?

A. *EA+* will get you to the closest appropriate medical facility for the help you need.

Q. How is *EA+* different from trip insurance?

A. *EA+* is not trip insurance. Unlike trip insurance, *EA+* protects you for a full year on any trip you take away from home. *EA+* also coordinates and provides for expenses usually not covered by trip insurance.

**This is only an outline of the plan's features. Please read your EA+ Member Guide carefully to understand all the services available to you, as well as any rules and regulations.*

Visit www.EmergencyAssistancePlus.com/ara

Or Call 1-844-292-4345



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