VITAL INFORMATION FOR A VITAL LIFE®



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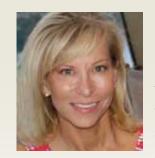
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1ST QUARTER 2023



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e're well into the year now—how are you doing on your resolutions? My main resolutions are/were to do something for my mind, body, and soul every day, which translates into learning something new every day, doing something vigorous every day, and meditating every day. I can't actually take credit for these ideas (that goes to another person), but I loved them enough to make them my own. What I will take credit for is sticking

to them (at least on most days). I've found that, unlike a deprivation type of resolution (I'm going on a diet!), it's been easy to stick to these practices because they get me out of my head and make me feel like a better version of myself. I'd call that a win-win.

One of the most fascinating things I've learned about is the James Webb Space Telescope, also called Webb or JWST. It's a large, space-based observatory, optimized for infrared wavelengths, which enable JWST to look further back in time to see the first galaxies that formed in the early universe, and to peer inside dust clouds where stars and planetary systems are forming today. Check out page 13 for some photos from its first year in orbit. They are truly "out of this world!"

For days that it's too cold to walk or run, I've created a playlist of my favorite songs that get me dancing. According to our friends at Saint Francis LIFE, that's just as good to keep me heart healthy. They've got more great tips for you on page 4 that will carry you through Heart Month and beyond.

Congratulations to the Delaware Quality of Life Coalition (DQOLC) Awards of Excellence winners! Meet Delaware Hospice's winners and nominees on page 11. Thank you for your dedication to improving end-of-life care.

Even though we haven't had much cold weather yet this year, it's sure to be coming. Preparation is key if you're caring for an older loved one. Your Own Home shows us exactly what needs to be done to be ready on page 5. And speaking of being ready, as they say, forewarned is forearmed. Scammers keep coming up with new ways to steal money. Senior Medicare Patrol shares the latest on page 8.

Now that you're armed with some new information time to go do something vigorous!

Enjoy! Karyn and Heidi



EDITOR IN CHIEF Karyn Cortez karync@vitalmagonline.com

> CREATIVE ART DIRECTOR Heidi Atwell

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TO YOUR HEALTH

What Seniors Need to Know About Taking Paxlovid

By Judith Graham, Kaiser Health News

new coronavirus variant is circulating, the most transmissible one yet. Hospitalizations of infected patients are rising. And older adults represent nearly 90% of U.S. deaths from COVID-19 in recent months, the largest portion since the start of the pandemic.

What does that mean for people 65 and older getting COVID for the first time or those experiencing a repeat infection? The message from infectious disease experts and geriatricians is clear: seek treatment with antiviral therapy, which remains effective against new COVID variants.

The therapy of first choice, experts said, is Paxlovid, an antiviral treatment for people with mild to moderate COVID at high risk of becoming seriously ill from the virus. All adults 65 and up fall in that category. If people can't tolerate the medication - potential complications with other drugs need to be carefully evaluated by a medical provider - two alternatives are available.

First things first: develop a plan for what you'll do if you get COVID – before you get it. Where will you seek care? What if you can't get in quickly to see your doctor, a common problem? You need to act fast since Paxlovid must be started no later than five days after the onset of symptoms. Will you need to adjust your medication regimen to guard against potentially dangerous drug interactions?

Being prepared proved essential when I got COVID in mid-December and went to urgent care for a prescription. Because I'm 67, with blood cancer and autoimmune illness, I'm at elevated risk of getting severely ill from the virus. But I take a blood thinner that can have lifethreatening interactions with Paxlovid.

Fortunately, the urgent care center could see my electronic medical record, and a physician's note there said it was safe for me to stop my blood thinner and get the treatment. (I'd consulted with my oncologist in advance.) So, I walked away with a Paxlovid prescription, and within a day my headaches and chills had disappeared.

Just before getting COVID, I'd read an important study of nearly 45,000 patients 50 and older treated for COVID between January and July 2022 at Mass General Brigham, a large Massachusetts health system. Twenty-eight percent of the patients were prescribed Paxlovid, which had received an emergency use authorization for mild to moderate COVID from the FDA in December 2021; 72% were not. All were outpatients.

Unlike in other studies, most of the patients in this one had been vaccinated. Still, Paxlovid conferred a notable advantage: Those who took it were 44% less likely to be hospitalized with severe COVID-related illnesses or die. Among those who'd gotten fewer than three vaccine doses, those risks were reduced by 81%.

A few months earlier, a study out of Israel had confirmed the efficacy of Paxlovid, the brand name for a combination of nirmatrelvir and ritonavir, in seniors infected with CO-VID's omicron strain, which arose in late 2021. (The original study establishing Paxlovid's effectiveness had been conducted while the delta strain was prevalent and included only unvaccinated patients.) In patients 65 and older, most of whom had been vaccinated or previously had COVID, hospitalizations were reduced by 73% and deaths by 79%.

Still, several factors have obstructed Paxlovid's use among older adults, including doctors' concerns about drug interactions and patients' concerns about possible "rebound" infections and side effects.

Dr. Christina Mangurian, vice dean for faculty and academic affairs at the University of California-San Francisco School of Medicine, encountered several of these issues when both her parents caught CO-VID in July.



First, her father, 84, was told in a virtual medical appointment by a doctor he didn't know that he couldn't take Paxlovid because he's on a blood thinner, a decision later reversed by his primary care physician. Then her mother, 78, was told, in a separate virtual appointment, to take an antibiotic, steroids, and over-the-counter medications instead of Paxlovid. Once again, her primary care doctor intervened and offered a prescription.

In both cases, Mangurian said, the doctors her parents first saw appeared to misunderstand who should get Paxlovid and under what conditions. "This points to a major deficit in terms of how information about this therapy is being disseminated to front-line medical providers," she told me in a phone conversation.

Michael Osterholm, director of the Center for Infectious Disease Research and Policy at the University of Minnesota, agrees. "Every day, I hear from people who are misinformed by their physicians or call-in nurse lines. Generally, they're being told you can't get Paxlovid until you're seriously ill which is just the opposite of what's recommended."

The potential for drug interactions with Paxlovid is a significant concern, especially in older patients with multiple medical conditions. More than 120 medications have been flagged for interactions, and each case needs to be evaluated, taking into account an individual's conditions, as well as kidney and liver function. The good news, experts say, is that most potential interactions can be managed, either by temporarily stopping a medication while taking Paxlovid or reducing the dose.

In nursing homes, patients and families should ask to speak to consultant pharmacists if they're told antiviral therapy isn't recommended.

About 10% of patients can't take Paxlovid because of potential drug interactions. For them, Veklury (remdesivir), an antiviral infusion therapy delivered on three consecutive days, is a good option, although sometimes difficult to arrange. Also, Lagevrio (molnupiravir), another antiviral pill, can help shorten the duration of symptoms.

Many older adults fear that after taking Paxlovid they'll get a rebound infection - a sudden resurgence of symptoms after the virus seems to have run its course. But in the vast majority of cases "rebound is very mild and symptoms - usually runny nose, nasal congestion, and sore throat - go away in a few days," said Dr. Rajesh Gandhi, an infectious-disease physician and professor of medicine at Harvard Medical School.

Gandhi and other physicians I spoke with said the risk of not treating COVID in older adults is far greater than the risk of rebound illness.

Side effects from Paxlovid include a metallic taste in the mouth, diarrhea, nausea, and muscle aches, among others, but serious complications are uncommon.



Are You Heart Healthy?

eart disease is one of the top causes of death in the U.S. The CDC stated about 697,000 people died from heart disease in 2020. Many adults are at risk of heart disease without even knowing it.

February is American Heart Month, a great chance to check your heart health. It is important to watch some of these warning signs:

- Shortness of breath or irregular breathing
- Always feeling tired
- Chest discomfort: pressure, pain, pinching, or burning
- Pain or pressure in the left shoulder or arm
- Irregular heartbeat
- Heartburn, stomach, or back pain
- Unable to exercise for longer periods of time
- Feeling dizzy or lightheaded

Paying attention to these signs and making healthier choices can lower your risk.

Stay in the know about heart attack causes

Many heart attack triggers are common things we all might experience:

- A lack of sleep is not good for your heart, can raise blood pressure, and cause inflammation. Try to get a full eight hours of sleep every night.
- Overeating a big meal can raise stress hormone levels. Certain fatty foods can also cause a jump in a kind of fat in your blood, possibly hurting blood vessels.
- Overdoing it at the gym can be risky. Extreme exercise is the cause of a little over 5% of heart attacks.
- For those with asthma, the odds of a heart attack are increased up to 70%.

With some risks out of your control, there are many that you can control.

Try making small changes to your day-to-day:

- Add fiber like oats, apples, and avocado to your meals.
- Raise your heart rate by dancing.
- Laugh more! Lowering stress levels improves heart health.
- Stand up: Sitting for long periods can negatively affect heart health.
- Cut down on salt and fat.
- Clean up: vacuuming, mopping, and other cleaning activities can give you a workout.
- Add more heart-healthy fats, such as fish and nuts, to your diet.

When your heart isn't healthy, it affects your whole body. Cells won't work as well, and exercise or even light activity can cause shortness of breath, fatigue, or chest pain.

Studies have also shown a connection between mental health and heart problems. Over a third of heart attack patients have clinical depression, and many heart issues are linked to dementia or memory loss.

Whether seniors are looking to change their physical health and/or mental health, there are many community resources available to them. Local senior centers, city halls, and health centers offering care through a Program of All-Inclusive Care for the Elderly (PACE) can help.

Saint Francis LIFE has PACE centers in both the Wilmington and Newark areas that offer the services of doctors, nurses, rehabilitative therapists, and other supports. Through PACE, seniors can find support in making changes that help not only their heart health, but their whole health.

To see if you or someone you know qualifies for Saint Francis LIFE services, reach out today! Call 302-660-3380 or visit us at www.saintfrancislife.org.

Sources: https://www.healthline.com/health/healthy-heart-tips#do-housework https://www.cdc.gov/heartdisease/risk_factors.htm https://www.webmd.com/heart-disease/features/never-ignore-symptoms

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Staying Safe During Extremely Cold Weather

4 Safety Measures for Extremely Cold Weather Conditions

Spring is on its way, but we're still liable to have a few more cold snaps before it's here to stay. We all know to be cautious about slippery conditions, but hypothermia is a real danger for seniors. It is important to check in and make sure they are warm enough, both indoors and out. When you do, make sure to check for signs of hypothermia. Signs would include slowed or slurred speech, sleepiness or confusion, shivering or stiffness in their limbs, poor motor/body control, and slow reactions or weak pulse.

The National Institute of Aging recommends the following safety measures:

Make sure the home is warm enough. Set the thermostat to at least 68 to 70 degrees. Even temperatures from 60 to 65 degrees can result in hypothermia in older people.

Have them wear long underwear under their clothing along with socks and slippers. Use a blanket or afghan to cover their legs and shoulders and have them wear a hat or cap. A person can lose a great deal of body heat quickly if their head is cold. When going outdoors, make sure your loved one wears a hat, scarf, and gloves or mittens to prevent loss of body heat. Remember the hat is essential. And LAYER, LAYER, LAYER. It is important to have several layers of loose clothing to trap warm air. Natural fabrics are best, such as wool, cotton, and silk. Silk has properties that make it most like the human skin, so if you can put an underlayer of silk garments against their skin and a silk scarf under their hat it will provide further insulation.



Check with their doctor to see if any prescriptions or over-the-counter medications might increase the risk of hypothermia. Hypothermia is a real risk for seniors. Visit the Your Own Home Care blog at https:// www.facebook.com/YourOwn-Home for more tips on how to keep them safe.

At Your Own Home In-Home Senior Care, we care about you and your family. Your Own Home, LLC provides personalized In-Home Care Plans that meet a person's every need, from companionship to medication management to housekeeping and everything in between. Call us today at 302-478-7081 or email info@ yourownhomecare.com to find out how we can help you or your loved one. We're here for you!

Sources: Next Avenue and NIA

Personalized and Affordable Support for Independent Seniors

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TO YOUR WEALTH

Capturing Asset Value in Family Business Exit Requires Modest Planning & Execution

By Karyn Cortez

Managing wealth entering "the Golden Years" is a good problem to have.

But, as good problems go, it becomes a bigger issue when one's wealth is earned via self-employment in a family-owned small business. Families whose wealth is tied up in family business assets have a host of problems that others who can simply go online and check a balance, or balances, don't have.

For a quick review of issues and strategies, we sat down with Sam Waltz, of Wilmington, DE, one of the MidAtlantic's best-known experts on family-owned businesses, valuations, and business-exit planning.



A Vietnam-era veteran of U.S. Army Counterintelligence, a founding publisher of the *Delaware Business Times*, and an early-out DuPont Company executive who in 1993 launched his own firm, SamWaltz.com Strategic Capital & Business Counsel, Waltz also is a credentialed member and former elected global president of his industry's professional society.

We asked him about three important areas of family-owned business exits:

1 How and when does a family business owner plan her or his exit?

2 What and how should a family 2^{What} and how should a family during the statement of the maximize 2^{What} and 2^{What}

the value of the asset?

 $3^{\rm What}$ surprises are in store that are often not considered?

Waltz replies:

In his Seven Habits of Highly Effective People, legendary author Stephen Covey encourages us, "Begin with the end in mind!" Hopefully, today's family business owner has also taken the planning advice of another author, John Worrillow, who says "every business should be built to be sold!"

Planning the exit

In my experience, many family business owners don't begin to focus on exiting until retirement is 1 to 3 to 5 years in sight, or until they encounter an unexpected event, e.g., a health issue, the death of a spouse or child, or other events. Sometimes, it is the heirs who must focus on the exit.

What's important to note is that any exit should be preceded by planning. While it's never too late to start, that 1-3-5 years runway can allow the principal and the principal's family to maximize value on exit.

Understand the value of the asset

Understanding business valuation is essential to maximizing it. Having said that, recognize that no absolute objective value exists to be discovered, as body temperature or weight does. Rather, business value—like beauty— is often in the eye of the beholder. It's an imprecise art, certainly not a science.

If one were doing "a bell curve" of business valuation, in my view, about 65%-75% of transactions in the last decade in the family business space would have been at 3x-5x EBITDA, or net profit, for businesses in the \$5mil to \$50mil revenue range. For example, a \$10mil revenue business with 10% net profit (\$1mil) might sell for \$5mil, before adjustments, and a \$5mil revenue business with 6% net profit (\$300,000) might sell for \$750,000 to \$1mil before adjustments. Many variables, of course, could intervene to perhaps shape dramatic departures in those estimates, but consider them illustrative.

Maximize value

Valuation in many ways "depends on where you stand." For instance, a bookkeeper or accountant approaches the process quite differently than does someone who works in marketing "doing deals." It's like the difference for a mechanic between servicing a traditional internal combustion engine (ICE) and servicing an electric vehicle (EV).

In his book *Built to Sell*, John Worrillow looks at eight of what he calls "drivers" in business valuation. In my own journal, I note 15 of what I call "risk issues" in business valuation. Continuing to recognize that business valuation is subjective within a range—and dependent on market forces, of course, two important lessons, or tools, emerge for the family business entrepreneur.

First, along with its annual P&L (profit and loss statement) and Balance Sheet, every family should include a Business Valuation of its asset. Second, recognize that valuation can be "remediated" and increased, within months, certainly within years, by the thoughtful and prudent owner receiving good counsel.

Don't be taken by surprise

Among the surprises a family business owner may face are issues involving taxes and family members' expectations.

Effective, strategic planning for a liquidity event can dramatically alter "the take" of the tax man from the settlement table. For example, the use of an ESOP—an Employee Stock Ownership Plan—to transfer ownership, whether to a multigenerational group of family members or to a group of managers or employees, can dramatically shelter gains that might otherwise seem to be taxable.

Regrettably, planning an exit may also expose the fact that the business owner(s) have not had an open dialogue with the next generation, with siblings of family members in the business, or with former family owners' descendants. Family feuds can erupt that appear irreconcilable across generations.

No one wants to sponsor arguments over the management of a family business, yet it happens every day by accident, by sins of omission as well as commission. It's about "managing expectations," and it's never too late to engage in a thoughtful, structured, and managed dialogue to head off that painful surprise.

If you have questions for Sam, he can be reached via email at SamWaltz@ SamWaltz.com or by phone at 302-777-7774.



"If you have resources, if you have freedom of choice, if you have the ability to not just spend money, but spend time and create things or do things that touch other people, you are rich."

—Seth Godin

••• An RLT is for YOU

Learned a new acronym recently: BLUF. Bottom Line Up Front. I understand this is a military communications tactic intended for speed and simplicity in reports and emails. The idea is to put the most important details first. I'll give you an example. BLUF: An RLT is for YOU.

Yes, a Revocable Living Trust (RLT) is an excellent estate planning document for you to include in your overall estate plan. Does it seem too broad to assume that this idea applies to all our readers? It's not. This trust is a common estate planning tool that helps clients avoid probate, acts as an incapacity tool, and clearly outlines what a client wishes to happen to their assets and personal property when they pass away.

Probate is the legal process by which a decedent's assets are administered, whether there was a valid Will or not. It's a common misconception that having a Will avoids this courtmanaged process. The Probate process includes, but isn't limited to, filing the Will, appointing an Executor, collecting assets, recording those assets on a formal inventory, paying bills, filing taxes, preparing accounting(s), and distributing assets to heirs. This process occurs over a minimum timeline of eight months and requires several fees, including the 1.25% (Sussex County) probate fee calculated from the total value of the decedent's assets.

In Delaware, the threshold for when probate is required is very low; it is triggered when a person individually owns \$30,000 or more in assets and/or real estate. Those thresholds apply to most of our community. In other words, most of our community can anticipate their loved ones will experience the lengthy timelines, publicity, and expense of the probate process at their passing. This reality is unknown and unintended by most.

The solution? Clients who wish to make the settling of their affairs faster and easier use a Revocable Living Trust to replace their traditional Will. The RLT is created with the client(s) as the initial Trustee and with language that thoroughly describes how their assets should be distributed at their later death. With the RLT established, the client(s) and their trusted advisors retitle their assets into the name of the RLT, similar to the process that a woman follows to change her last name after marriage. At the client's death, their assets are titled in the name of the RLT, rather than in their individual name(s), allowing the estate to avoid the probate process entirely and be privately administered by the terms of the Trust.

Out-of-state assets, like real estate, can also be included in a Delaware resident's RLT, avoiding probate in DE *and* in the other state(s).

All good Trusts include a succession of Trustees; the most trustworthy, prudent, and reliable persons the client can name to carry out their wishes when they can no longer act for themselves. This succession of Trustees can step into the role of acting Trustee during the creator's incapacity.

Here's a common example. Suppose the creator of an RLT is diagnosed with dementia and it's no longer possible for them to make sound legal and financial decisions. Their successor Trustee(s) could step into the role of acting Trustee(s) and begin managing the Trust assets on the creator's behalf and per their wishes. This seamless transition ensures that the creator of the Trust is still supported by their own monies without a delay in access to funds. It also creates the opportunity for the successor Trustee(s) to do strategic asset protection planning if health care concerns warrant the need.

When clients pass away, their successor Trustee(s) assume the responsibility of carrying out the wishes within the document. These wishes might include leaving a legacy to family and friends, benefitting charitable and religious organizations, taking care of pets, and more. The RLT and accompanying documents allow details of what should happen to personal possessions, too. Just like a traditional Will, parents of minor children can include a nomination of guardian(s) within the Trust document.

It's true that we've met a few clients over the years who've had the opinion that they don't care about what happens after they pass away, or how complicated and expensive it is, because they won't be here. That opinion is okay, too. Otherwise, an RLT is for YOU.

Brought to you by your friends at Procino-Wells & Woodland, LLC, with offices in Seaford and Lewes, Delaware.

How the SECURE 2.0 Act is Making Big Changes to Your Retirement Saving

Key items to know about the Secure Act 2.0:

Required Minimum Distributions (RMD): As most of you know, you are required to take money out of your retirement accounts at a certain age. It used to be 70.5, although most recently it changed to 72. With the new Secure Act that age is pushed back even further. If born in 1950 or earlier, you are still at the age of 72 (or 70.5 age) for RMDs. However, if you are born between 1951-1959, you now aren't required to take funds out until age 73. For those of you who are born in 1960 or later, that age is pushed back even further to 75 years old.

Roth Accounts

There have been a sweeping number of changes to Roth Accounts. For starters, if you have a Roth 401(k) you are no longer, starting in 2024, required to take RMDs at all on these accounts. This more closely aligns the law with Roth IRAs. Additionally, you are now eligible to open and fund a Roth Simple IRA and SEP IRA. This is a huge improvement for small business owners wishing to offer or contribute to a Roth account.

Sticking with the Roth news, now if you contribute to a Roth 401(k), and have an employer match, those match dollars will go into the Roth portion of your 401(k) not the pre-tax portion as it previously had. One thing to note, those dollars will be taxable to the plan participant. Furthermore, if you earn \$145,000 or more and are 50 years or older, you MUST contribute your catch-up dollars into the Roth 401(k) not pre-tax 401(k).

529 to Roth IRA: Starting in 2024, if you have a 529 that has been opened for at least 15 years, you can now contribute up to \$35,000 of those funds to a Roth IRA in the beneficiary's name, regardless of earning limit. Note: transfers are subject to contribution limits (ex. \$6,500 this year).

Surviving Spouse Beneficiary: In 2024, if your spouse predeceases you, there is the option

to treat the age requirements surrounding the retirement account as if the decedent was still alive. This is beneficial if the deceased spouse is younger than you are.

Increased Catch-up Provisions: Starting in 2025 if you are age 60, 61, 62, or 63 your catch-up amount on your 401(k) plan will be the higher of \$10,000 or 150% of the regular catch-up contribution amount indexed for inflation.

Qualified Charitable Contribution: Starting in 2024 the QCD amount is now indexed to inflation. The amount you previously could pull out and send directly to a charity was \$100,000. Moving forward, this amount will go up each year based on inflation figures. This is a great charitable tool for those so inclined and at the appropriate age.

Brought to you by Andrew Rosen and our friends at Diversified, LLC.

TO YOUR WEALTH

Medicare Fraud and Abuse – Not Your Grandma's Types of Scams

By Mary Anne Bonafair, Outreach and Education Coordinator, SMP

Remember the plot of that wonderful musical of the '50s, *The Music Man*? Professor Harold Hill came to town selling the town's folks the idea of new instruments and uniforms for the town band. All they had to do was hand over their money and he would supply them with wonderful, shiny new instruments and fancy uniforms. We all know how that turned out.

Today's Medicare scams seem on the up-and-up

Medicare beneficiaries are subject to similar scams every day. Have you seen the ads on late-night television offering wrist or knee braces or devices that will keep you pain-free? All you need to do is give them your Medicare number and they will do all the work. So, you hand over your Medicare number, and in a week or two the box arrives.

To your surprise and dismay, the braces are either ill-fitting, poorly constructed, or simply not therapeutic. You try to send them back, but the company is either less than responsive or just says, "Well, don't worry, Medicare paid for them." But that isn't the end of it. In a month or two, another box comes, and then another. It could take months until the issue is resolved, and all the while, the bills are being paid by Medicare.

Protect yourself from Medicare scams

How do Medicare consumers prevent this from happening again? First, whenever you have an issue requiring an intervention like a brace or appliance, you should be seen by a healthcare professional and get an order from them for the device.

Next, make sure you deal only with a reputable durable medical equipment company. Reliable DME companies know the importance of professionally-made healthcare equipment. These products are durable for long-term use, are fitted to the client's needs, and are of good quality.

Senior Medicare Patrol can help

Who can help you resolve these issues or those involving unwarranted charges to Medicare for services not received? Where do you turn? Senior Medicare Patrol is a federallyfunded organization with offices

DELAWARE SENIOR MEDICARE PATROL UPCOMING EVENTS

February 25, 2023 – Rehoboth Health Fair, starts at 9:00 a.m. at Atlantic Sands Hotel & Conference Center, 1 Baltimore Ave, Rehoboth Beach DE 19971. Please stop at our table to say hello!

March 07, 2023 – Medicare Fraud and Abuse Presentation, 2:00 p.m. at the Lewes Library, 111 Adams Avenue, Lewes, DE 19958.

March 29, 2023 – Medicare Fraud and Abuse Presentation, 2:00 p.m. at the South Coastal Library, 43 Kent Avenue, Bethany Beach, DE 19930.

Please call libraries to inquire whether registration is necessary. And as always, call your local libraries to get the days and times of our monthly information table visits.



Preventing Medicare Fraud

throughout the U.S., U.S. Virgin Islands, Puerto Rico, and Guam.

SMP's federal grant charges the organization with empowering Medicare beneficiaries, their families, and caregivers to prevent, detect, and report suspected Medicare fraud and abuse. Through our outreach and education, Medicare beneficiaries are offered tools to assist them in recognizing potential errors, fraud, or abuse. These might be found in their quarterly statements (Medicare Summary Notice) or in suspicious requests for their Medicare number for "testing," like COVID testing or genetic testing to rule out 'many potential diseases," checking that their Medicare number is "accurate," or even attempts to enroll folks in Medicare programs.

Tools to prevent fraud

The Medicare trust fund loses billions of dollars each year to fraud and abuse. Each of us, as beneficiaries or family members responsible for a loved one, should have access to all the tools we need to fight these losses.

How would having these tools have helped in the scenario above? The Medicare beneficiary would have



reviewed their quarterly statement, identified the "brace" charges, called their primary care office to ask if it had been approved, and, armed with the information, they would have called Senior Medicare Patrol. In this case, we would have asked some basic questions and then, most likely, connected the beneficiary to one of our complex-case workers. A case would have been established and we would have worked with the client to see it through to its resolution. It may be that we must turn it over to higher authorities that can charge potential scammers-and that's a good thing! Our goal is to assist Medicare beneficiaries in reducing the cases of scams, fraud, and abuse resulting in less money lost from the Medicare Trust Fund.

Delaware Senior Medicare Patrol offices are located in New Castle and Milford. We are active in most libraries monthly with an information table, and are available to do presentations at senior centers, service clubs, and social and business groups. If you have an interest in one of our presentations, have noticed an error, or would like to report suspected fraud or abuse, please contact us at 302-255-9642 for New Castle County and 302-424-8657 for Kent/Sussex counties.

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Empowering Seniors to Prevent Health Care Fraud

Preventing Medicare Fraud

Senior Medicare Patrol (SMP), through a Federal grant,

provides outreach and education to Medicare beneficiaries, families, and caregivers, to **Prevent**, **Detect**, and



Report Medicare fraud, abuse, and errors. The Medicare Trust Fund



loses upwards of \$80 BILLION a year due to fraudulent practices. **YOU** can help put a dent in that number by learning how to prevent,

detect, and report potential fraud and abuse. Consider having SMP join your next group, service club, or caregiver meeting. Our presentations are short and free. For more information or a presentation, call:

1-800-223-9074 or 302-424-8657

Proteger, detectar, reportar fraudes, abusos y errores de Medicare



TO YOUR WEALTH

5 tips to earn the highest interest rate on a savings account

By René Bennett, Bankrate.com

hough the rates on savings accounts have remained low at many big banks, there have been significant rate increases at online and community banks over the past year. The Federal Reserve's rate hikes throughout 2022 translated to higher rates on top-yielding savings accounts.

While inflation is still outpacing rates on savings, getting a higher yield can better help you keep up with inflation, as well as earn returns on money that would otherwise remain stagnant.

Here are some tips to help you get the best rate on your savings.

1. Research current savings account rates

The first step to get the best annual percentage yield (APY) is to understand what's considered competitive in the current interest rate environment. The best savings accounts today pay around 4 percent APY. Meanwhile, the national average is 0.19 percent APY.

Compare rates at multiple brickand-mortar banks, online banks and credit unions. Online banks tend to pay higher rates than traditional banks. Local credit unions are notfor-profit, member-owned institutions that distribute their profits to their members. This may translate into higher savings rates.

2. Compare high-yield savings accounts online

Most high-yield savings accounts are from online banks (though not all of them), so make sure you're comfortable banking online. Online banks are just as safe as regular banks.

When comparing accounts, look for features and associated fees. Most of these can be found in fee schedules and disclosures. Some things to look out for include:

Monthly maintenance fees

- Minimum balance requirements
- Transaction limits and penalties
- Automated savings features
- Options for transferring money in and out of the account
- Past account problems such as data breaches

If the bank has low or no fees and helpful tools, consider that in your evaluation. You may be willing to choose a bank with a slightly lower APY if its tools help you save more money over time.

3. Avoid tiered interest rates

Some banks offer tiered interest rates to reward customers who maintain higher balances. However, you can find top-yielding accounts that pay the same yield across all balances. If you end up stashing all of your money into a savings account to meet the balance requirement, you might miss out on other investment opportunities. Plus, if you need to withdraw some of the cash in a tiered-rate savings account, your rate might drop.

4. Avoid teaser rates

Banks may offer teaser or promotional rates, which are attractive interest rates used to get new customers to open a savings account. Banks may significantly lower the teaser rate after just a few months.

You may also have to maintain a minimum balance and meet other requirements to get the high rate. Always check the fine print explaining the rate's terms.

5. Consider switching banks

A Bankrate survey from 2022 found that, on average, consumers have stuck with the same savings account for nearly 17 years. One of the top reasons cited? "It's the account I've always had."

But if your current savings account is only offering average or below average rates, it might be time to switch banks. With some of the top rates at over 4 percent APY, it's an opportunity you could be missing out on if you settle with a familiar but low-paying account.

Ways to Spot a Timeshare Scam

Timeshare scams can often be spotted before you're victimized. Here are a few red flags to watch out for

Unprompted Initial Contact

Very few legitimate companies will reach out to potential customers without having first been contacted by you. If a company you've never heard of initiates contact by phone, fax, email or even direct mail, assume that it's suspicious activity. Notify your home resort immediately.

Outlandish Promises

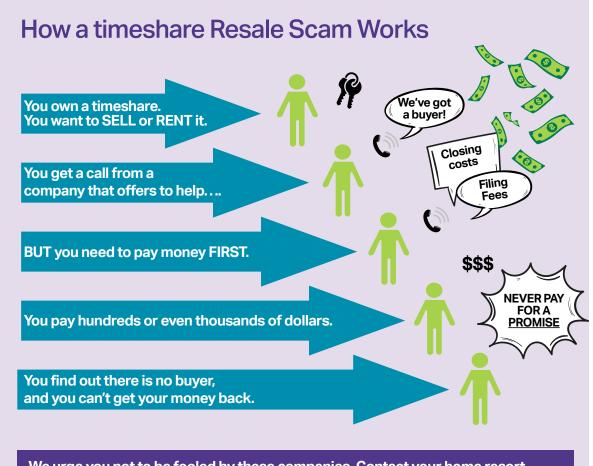
Timeshare resale scammers often promise they have a buyer who is ready and willing to pay a lot in order to get you to send them money. Be cautious; no one can promise a quick sale. If something sounds like it's too good to be true, it most likely is.

Upfront Fees

If any company asks you to pay out money upfront, run. This is one of the staples of a timeshare resale scam. Any legitimate company that will help you sell your property won't ask for hundreds or thousands of dollars before the sale goes through.

Do Your Research

Don't be tricked by a fancy address or professional-looking website. Contact the State Attorney General and local consumer protection agencies in the state where the reseller is located, as well as the Better Business Bureau, to determine if there are any existing complaints.



We urge you not to be fooled by these companies. Contact your home resort before falling victim to any of these companies. You bought your timeshare to create many special memories. Let's keep it that way!

CAREGIVER'S CORNER

Each year the Delaware Quality of Life Coalition (DQOLC) holds the Awards of Excellence Dinner to celebrate individuals who have made outstanding contributions to improving end-oflife care. This year, Delaware Hospice is pleased to announce that we had four Excellence Award winners and nine nominees!

Individuals across the state nominated colleagues and peers for the awards in seven categories, including clinical and administrative services. Hospice and palliative clinicians from outside Delaware and Pennsylvania served as judges to select the winners from among the nominees.

Dr. Ralph DeMario, Recipient of the John J. Goodill Physician of Excellence Award

Dr. DeMario is Delaware Hospice's team physician for Kent County, Sussex County, and the Delaware Hospice Center. Dr. DeMario was lauded as an expert in medication management as well as an exceptional physician and partner to work with on a daily basis. In addition, Dr. DeMario readily speaks to various healthcare audiences and educates on best practice end-of-life options.

Christina Hathaway, Recipient of the Administrator Award of Excellence

Christina is the Revenue Cycle Manager for Delaware Hospice's finance office, where she serves as an exceptional resource on billing matters and the electronic medical records system. Christina readily researches information for clinicians and options for patients and families. She always makes herself available to talk with patients and families about services from a billing perspective, advising them on steps they need to take and putting their minds at ease so they can move forward with the care they urgently need.

Ginna Keil, Recipient of the Advanced Practice Clinician Award of Excellence

Ginna came to Delaware Palliative several years ago as a newly graduated nurse practitioner. She fully immersed herself in study and in learning the field, ultimately completing her CAPC (Center to Advance Palliative Care) designations. Since completing her orientation period, Ginna has evolved into one of the most driven, compassionate, and professional nurse practitioners on our team. She not only has a resoundingly positive impact on the management of her patients' complex symptoms, but also serves as a source of comfort and a wonderful listener who cares about her patients in a holistic manner.



Alison Fullmer (volunteer), Recipient of the Unsung Hero Award of Excellence

Fourteen-year-old Alison Fullmer rallied her technology skills and her immense compassion to help a homebound grandmother virtually attend her granddaughter's wedding. This thoughtful young volunteer even brought flowers to help the grandmother-of-the-bride properly celebrate the occasion. Alison's enormous heart will one day serve her well in her aspirations to become a hospice nurse.

Additional Delaware Hospice Nominees

Joyce DiCello (volunteer), Unsung Hero Krista Hardy, Counseling Professional Marcella Martin, Counseling Professional Ariel Mutter (volunteer), Counseling Professional Elizabeth Wolf, Counseling Professional



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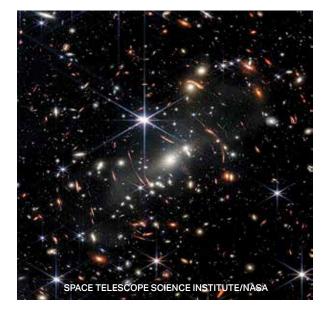
GOIN' GREEN

Here are the most striking images from NASA's Webb telescope one year after reaching its destination.

The telescope is currently orbiting more than 1 million miles from Earth.

By Mary Kekatos

The Webb telescope, which was launched on Christmas Day in 2021, was a collaboration between NASA, the European Space Agency, and the Canadian Space Agency with the goal of studying the formation of the universe's earliest galaxies, how they compare to today's galaxies, how our solar system developed and if there is life on other planets. It uses infrared radiation to detect objects in space and can view celestial bodies that are generally invisible to the naked eye.



Distant galaxies

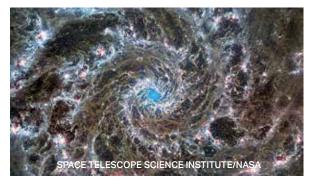
The image of the galaxy cluster SMACS 0723 is the "deepest and sharpest infrared image of the distant universe to date," according to NASA. Thousands of galaxies can be seen in the image but, according to NASA, it covers the size of the equivalent of someone holding a grain of sand at an arm's length distance.

It was also the first time the public understood how much more powerful Webb is than its predecessor, the Hubble Telescope, which only sees visible light, ultraviolet radiation and near-infrared radiation.



Cosmic Cliffs

This image shows new details about the Carina Nebula, located in the Milky Way Galaxy. Just the edge of the nebula can be seen, but the image shows hundreds of baby stars that were previously masked by a cloud of gas and dust. The area, referred to as the Cosmic Cliffs, shows a "giant, gaseous cavity" as young stars that were recently born push down ultraviolet radiation and create the jagged-looking edge. The cloud-like structure of the nebula contains ridges, peaks and valleys an appearance very similar to a mountain range.



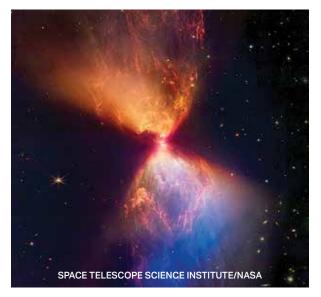
Phantom galaxy

First released Aug. 30 by the ESA, Webb captured an image of the Phantom Galaxy, which is located about 32 million light-years away from Earth. The telescope has revealed gray filaments forming a spiral pattern winding outward from the center of the galaxy. These spiral arms are traced by blue and pink and represent regions in which stars are forming. The very heart of the galaxy is colored blue and has speckles, which are young stars that are forming around the nucleus of the galaxy.



Pillars of creation

The Pillars of Creation are young, bright-red stars within a billowing cloud of gas and dust. The elephant trunks, a type of interstellar matter formation, are located in the Eagle Nebula, which is about 6,500 to 7,000 light-years away from Earth.



Fiery hourglass

The James Webb Space Telescope catches a fiery hourglass as a new star forms in an image released, Nov. 16, 2022. Hidden in the neck of this "hourglass" of light are the very beginnings of a new star, known as a protostar. This protostar is a hot, puffy clump of gas that is only a fraction of the mass of the Sun. As it draws material in, its core will compress, get hotter and eventually begin nuclear fusion to create the star.



Coldest ice ever measured

This image by NASA's James Webb Space Telescope's Near-Infrared Camera (NIRCam) features the central region of the Chamaeleon I dark molecular cloud, which resides 630 light years away. The telescope shows the frozen form of elements, including carbon, hydrogen, oxygen, nitrogen, and sulfur, that create starts and planets.

"We're not talking ice cubes," NASA wrote in a social media post on Jan. 23. "This molecular cloud is so cold and dark that various molecules have frozen onto grains of dust inside. Webb's data proves for the first time that molecules more complex than methanol can form in the icy depths of such clouds before stars are born."

ABC News' Max Zahn contributed to this report.

HAVE SOME FUN

Crossword By Dave Fisher

	1	2	3	4	5			6	7	8	9	10		
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		58							59					

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Answers on page 8

ACROSS

- 1. Stage
- 6. Review
- 11. They connect points
- 12. Two words with the same letters
- 15. Make unhappy
- 16. Freshwater ducks
- 17. Consumed
- 18. What's left
- 20. Farewell
- 21. Coil
- 23. Tall woody plant
- 24. Alliance
- 25. Tartness
- 26. Pigeon-__
- 27. Eager 28. Initial wager
- 29. Type of cereal grass 30. It surrounds a painting
- 31. Parochial
- 34. Torso
- 36. Cooking container
- 37. German baroque composer
- 41. Adult male sheep (plural)
- 42. Resorts
- 43. Dull pain
- 44. Gesture of farewell
- 45. Not that
- 46. Alumnus
- 47. American Dental Association
- 48. Pressman
- 51. Unit of energy
- 52. Entertaining lavishly
- 54. Argue
- 56. Introduce
- 57. Measuring instrument

1ST QUARTER 2023

- 58. Eve infections
- 59. Patriarch

14

- DOWN 1. Army unit
- 2. Secret lair
- 3. Additionally
- 4. Fortune teller
- 5. Slave
- 6. Forayed into
- 7. Empower
- 8. Enclosure
- 9. How old you are
- 10. Quandary
- 13. No particular person
- 14. Millisecond
- 15. Chip dip
- 16. Bugging
- 19. Brown ermine
- 22. Suppose
- 24. Squishy seat
- 26. Tick-
- 27. Malayan isthmus
- 30. Conforms to
- 32. N N N
- 33. Cut of beef
- 34. Dealer
- 35. Lays waste to
- 38. Land
- 39. Lease
- 40. Row of shrubs
- 42. Gleams
- 44. Distort
- 45. Instant
- 48. Frolic
- 49. Border
- 50. Genuine
- 53. Astern
- 55. Partially opened flower

SALMON WITH CHIMICHURRI SAUC

Try this recipe for a quick and easy weeknight dinner. While chimichurri sauce is traditionally made with Italian (flat-leaf) parsley, this sauce is made with cilantro, which gives it a delicious twist.



INGREDIENTS

- 2 lb salmon (or 4 fillets)
- 1 lemon
- 1/4 cup finely grated parmesan cheese
- ¹/₂ cup panko crumbs
- 1 t garlic
- 2 Tb olive oil
- 1/2 t salt
- 1/4 t pepper

DIRECTIONS

- 1. Heat oven to 425°F. Spray baking dish with non-stick spray. Place salmon in baking dish skin side down.
- 2. Using a sharp knife, make 15 horizontal slits in the fish, being careful not to cut through to skin. Then make one long, lengthwise slit, again without cutting through to the skin.
- 3. Season with half the salt and pepper.
- 4. Finely zest lemon, reserving citrus for serving.
- 5. In a small bowl, mix zest, parmesan cheese, garlic and remaining salt and pepper. Sprinkle over fish. Lightly press mixture into slits and press into salmon.
- 6. Drizzle olive oil over fish.
- 7. Place in the oven and bake for 10 minutes, about 4 to 6 minutes per half inch of thickness. Check the internal temperature of the salmon with an instant read thermometer. Continue cooking until it reaches 135 to 140 degrees. You want the salmon to be a nice opaque pink color but don't want to overcook it. While the fish is baking, make the sauce.

• small amount of water only if needed (sauce is too thick to

Place all ingredients into a blender or food processor and

Thanks go out to reader Nancy Cason in Cary, NC for contributing this

pulse until mixed. Add small amounts of water if needed.

CHIMICHURRI SAUCE

• ¹/₂ cup olive oil

2 garlic cloves

blend)

delicious recipe!

• ¹/₂ t dried oregano

• salt and pepper to taste

• 1 cup fresh cilantro leaves and tender stems • 1/4 cup white wine vinegar (maybe even less)

Serve sauce over fish with sliced lemon.

••• Sudoku

Fill in the blank squares so that each row, each column and each 3-by-3 block contain all of the digits 1 thru 9.

4	3			2			5	
							3	9
		6			1		7	
				1			4	2
6	8			9			1	3
1	4			8				
	1		4			6		
5	2							
	6			3			8	1

Answers on page 8

(courtesy of KrazyDad.com)

Can You Dig This 1940s Slang?

The 1940s were a time of enormous change in the U.S. America rebounded from the Great Depression, entered World War II, and benefited from advancing technology. Many of the terms coined in that decade are still used today.

Cooking with Gas. This idiom originated in the early '40s as an advertising slogan. As gas stoves began to replace wood-burning stoves, the phrase conveyed the superiority of using gas power. "Cooking with gas" meant behaving more efficiently and productively.

Buzz. Feeling a buzz? That means you're just a tiny bit tipsy from alcohol, drugs, or perhaps even adrenaline or caffeine. With the end of Prohibition in 1933, the '40s were full of slang terms for drunkenness, including "buzzed" and "sauced."

Geezer. In British Cockney slang from the 1880s, a "geezer" was a man in a mask or disguise. By the time the term crossed the pond in the '40s, it meant "old man," which is how the word is still used in American English today. In contemporary British slang, however, "geezer" means a man of any age, but specifically, the type of guy who would be called "dude" or "bro" in the States.

Gobbledygook. Think back to reading a complicated instruction manual, or perhaps listening to a high-level college math lecture. For many of us, those might as well have been "gobbledygook." Former TX Congressman Maury Maverick coined this word in a 1944 memo banning his staff from using bureaucratic language. "Stay off the gobbledygook language. It only fouls people up. For the Lord's sake be short and say what you're talking about." Mav-erick defined the word as "talk or writing which is long, pompous, vague, involved."

Passing the Buck. Pushing responsibility onto someone or something else is "passing the buck." During the frontier days, a knife with a buckhorn handle was often used to indicate the dealer in a poker game. If the player didn't want to deal, he could skip by "passing the buck" to the next player. The gambling phrase was adopted during WWII to refer to the way some countries avoided confronting threats, and became so popular President Harry Truman had a sign on his desk that famously read, "The buck stops here."

The Funny Pene

A linguistics professor was lecturing his class one day. "In English," he said, "A double negative forms a positive. In some languages, though, such as Russian, a double negative is still a negative. However, there is no language wherein a double positive can form a negative."

A loud voice from the back of the room piped up, "Yeah, right."

Who Reads Newspapers? One way to look at it.

- The Wall Street Journal is read by the people who run the country.
- The New York Times is read by people who think they run the country.
- The Washington Post is read by people who think they ought to run the country.
- USA Today is read by people who think they ought to run the country but don't understand The Washington Post.
- The Los Angeles Times is read by people who wouldn't mind running the country if they could spare the time.
- The Boston Globe is read by people whose parents used to run the country.
- The New York Daily News is read by people who aren't too sure who's running the country.
- The New York Post is read by people who don't care who's running the country, as long as they do something scandalous.
- The San Francisco Chronicle is read by people who aren't sure there is a country, or that a country is a good idea in the first place.
- The Miami Herald is read by people who are running another country.
- The Chicago Tribune is read by people who live in the Midwest, which readers of the other newspapers don't think is part of the country.

And a few funny one-liners to brighten your day:

- Two guys walked into a bar. The third guy ducked.
- I decided to take up meditation. It's better than laying around doing nothing.
- How do you get a country girl's attention? A tractor.
- What would the Terminator be called in his retirement? The Exterminator.
- What did Tennessee? The same thing as Arkansas.
- What do you call a fake noodle? An impasta.
- You're American when you go into a bathroom and when you come out, but what are you while you're in the bathroom? European.
- Sundays are always a little sad, but the day before is a sadder day.
- Shouldn't the "roof" of your mouth actually be called the ceiling?
- What did the juicer say to the orange during selfquarantine? Can't wait to squeeze you!
- What's Forrest Gump's password? 1forrest1



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