What are my Medicare and Health Insurance Choices?

It is probably safe to say that trying to understand our health insurance choices is daunting and very confusing. When we are approaching eligibility at our 65th birthday there are so many questions. What does Medicare cover? What are Medicare Parts B and D? How does a Medicare HMO relate to Medicare? Does Medicare provide as much coverage as a Medicare HMO? What is “supplemental insurance”? Do we need supplemental insurance too?

Medicare is health insurance for people age 65 or older, people under 65 with certain disabilities, and people of all ages with End-Stage Renal Disease. It used to be a little more simple. At first Medicare really only had 2 parts, the free Part A to cover hospital treatments and Part B to

(Continued on page 2)
cover the services of other service providers that we had to pay a monthly “premium” to have. Part C was called choice and it meant we could assign our Medicare coverage to an insurance company and often get more coverage.

Then Part D, prescription medication coverage was added. Part D also required that we choose a private insurance company for our drug coverage.

So now we have the confusing muddle that is called “classic” Medicare - 3 parts – Part A, Part B and Part D. Part C is no longer called “choice”, but has been renamed “Medicare Advantage” and remains an alternative coverage to classic Medicare.

Medicare Part A helps cover care when a person is hospitalized. It also helps cover skilled nursing facility care, hospice, and home health care. Most people don’t pay for Part A because they paid Medicare taxes while working. If you do not qualify for Part A at no cost, you may be able to pay to have Part A coverage. In most cases, if you choose to buy Part A, you must also have Part B and pay monthly premiums for both.

Medicare Part B helps cover medically-necessary services like doctors' services, outpatient care, home health services, and other medical services that Part A does not cover, such as: Ambulance services, clinical laboratory services, eyeglasses, medically necessary home health services, dialysis services and supplies, and urgent care. Most people pay the standard premium amount, which is currently about $100 per month and often this is automatically deducted from their monthly Social Security check. Higher-income beneficiaries pay higher premiums for Part B and prescription drug coverage. If you don’t sign up for Part B when you are first eligible, you may have to pay a late enrollment penalty, which is calculated individually but in one example we saw would be an additional $50 per month.

Part D helps pay for prescription medications. Each Medicare approved prescription plan has its own list of covered medications, so it is important to select a plan that covers the medications you are currently using or expect to use. The federal government estimates the average total premium for a Part D prescription plan in 2012 will be $38 plus a standard deductible of $320 – this varies among plans.
and some plans have no deductible. **If you do not enroll in a Medicare prescription plan when you are first eligible you will also pay a penalty for late enrollment.** The penalty is dependent on how long it is after you were first eligible (which begins 3 months prior to the month you turn 65 and ends 3 months later) and the current amount of the national “base” premium. The penalty can be $15 or more each month.

The other alternative is for you chose enrollment in **Medicare Part C—Medicare Advantage.** The Medicare Advantage Plan is offered by private companies approved by Medicare. If you join a Medicare Advantage Plan, the plan will provide all of your Part A (Hospital Insurance) and Part B (Medical Insurance) coverage. Medicare Advantage Plans may offer extra coverage, such as vision, hearing, dental, and/or health and wellness programs. Most also include Medicare prescription drug coverage.

Medicare pays a fixed amount for your care every month to the companies offering Medicare Advantage Plans. These companies must follow rules set by Medicare. However, each Medicare Advantage Plan can charge different out-of-pocket costs and have different rules for how you get services (like whether you need a referral to see a specialist or also that you can only go to doctors, facilities, or suppliers that belong to the plan for non-emergency or non-urgent care). These rules can change each year.

The most common Medicare Advantage Plans are:

- **Health Maintenance Organization (HMO) Plans.** An HMO is a kind of health insurance and offers health care services to its members who pay a fixed cost each month for these services. Members must get their care from the doctors, hospitals and other providers who are in the HMO’s network.
- **Preferred Provider Organization (PPO) Plans.** A PPO is a group of physicians, health care providers of all types, hospitals and clinics organized by a private insurance company. These medical providers accept the PPO’s fee schedule and guidelines for its managed medical care, and PPO members can choose doctors and services from a list of preferred providers. PPO members can also go to doctors, specialists or hospitals that are not on the plan’s list, but this will usually cost more.

Which is better, Medicare Advantage Plans or classic Medicare that is not a Medicare Advantage Plan?

- Medicare Advantage Plans are required to provide all of the benefits under Part A and Part B and must cover at least all of the medically-necessary services that Medicare provides except hospice care. Original Medicare covers hospice care even if you are in a Medicare Advantage Plan.
- Medicare Advantage Plans are allowed to change the amount of co-payments and deductibles.
- People who are enrolled in classic Medicare can choose care from any doctor who accepts Medicare payments, while those enrolled in Medicare Advantage plans may only receive insurance coverage if seen by doctors or other providers who belong to the plan. People who are enrolled in a Medicare Advantage plan may have to obtain a referral to see specialists and may be limited to receiving care from specific hospitals or other providers.
- Many of the Medicare Advantage Plans also have extra benefits such as hearing, vision, dental,
and prescription drug coverage.

- Medicare Advantage plans may reduce the amount of the patient’s cost-sharing, or may provide benefits that are not covered by Medicare.
- People enrolled in classic Medicare can purchase Supplemental or “GAP” insurance to cover things that Medicare does not cover. In order to purchase some supplemental plans, people first are required to be enrolled in Medicare Part A and Medicare Part B and supplemental plans may only be available in some areas. Those enrolled in a Medicare Advantage plan do not need to purchase supplemental insurance.

How much does classic Medicare cost? If you do not have to pay anything for Medicare Part A, only pay about $100 for Part B, do not require any medications and you enrolled in Part D when you were eligible, your cost for basic Medicare coverage could be as low as about $100 per month. If you add a supplemental policy, which can cost anywhere from $50 to $300 or more per month, the cost of classic Medicare coverage, plus supplemental coverage to pay for things that Medicare does not cover, could cost between $150 and maybe $400 per month.

If you are not eligible for free Part A coverage, which can be purchased in some cases, you enrolled late in Part B and must pay a penalty, and enrolled late in Part D and have to pay that penalty, basic Medicare coverage can be very expensive. Major prescription drug expenses and not having supplemental insurance to cover other major medical expenses could increase monthly medical expenses to financially devastating levels.

People who have limited income and resources may qualify for Medicaid (MediCal) to help pay for Medicare Part A (Hospital Insurance) and/or Medicare Part B (Medical Insurance) premiums. Some states also have programs that can help pay Medicare expenses (like premiums, deductibles, and coinsurance). Call the Medicare phone number at the end of the article and ask if you qualify for help paying your Medicare premiums.

How much does a Medicare Advantage Plan cost? If you enroll in a Medicare Advantage Plan, you will have to pay your Part B premium, and you may pay a monthly premium for the services included in the plan, if the plan charges a premium. Each Medicare Advantage Plan can charge different out-of-pocket costs. Your out-of-pocket costs in a Medicare Advantage Plan depend on:

- Whether the plan charges a monthly premium.
- Whether the plan pays any of your monthly Part B premium.
- Whether the plan has a yearly deductible or any additional deductibles.
- How much you pay for each visit or service (copayments or coinsurance).
- The type of health care services you need and how often you get them.
- Whether you follow the plan’s rules, like using network providers.
- Whether you need extra benefits and if the plan charges for them.
- The plan’s yearly limit on your out-of-pocket costs for all medical services.

“Yesterday is rarely too early, but tomorrow is frequently too late.”

– Author Unknown
The monthly premium payable to a Medicare Advantage Plan varies. Each plan has its own prescription drug deductible (what you have to pay before anything is covered), which drugs are covered, health services deductions, and out of pocket spending limits (the maximum expense of medical care and services that you will be responsible for each year). Obviously the best plan is one where you pay no monthly premium, there are no deductibles, co-pays are low, all of your drugs and needed services are covered, and the out-of-pocket limit is the lowest. When you enroll in a Medicare Advantage Plan, you will not need to purchase supplemental or GAP insurance.

A person with limited income might qualify for help to pay for some healthcare and prescription drug costs through a Medicare program called Extra Help. To qualify for Extra Help, sometimes referred to as “low-income subsidy” (LIS), a person must have low income that is less than established limits. To find out if your income and resources qualify you for Extra Help, call the Medicare number listed at the end of the article.

People automatically qualify for Extra Help if they have Medicare and meet one of the following conditions:
- Have full Medicaid (or MediCal) coverage
- Receive help from Medicaid (or MediCal) to pay Medicare Part B premiums
- Receive Supplemental Security Income (SSI) benefits.

Making the best health care decisions is complicated. What is the best choice for one person may not be the best choice for another. Help making choices is available from several government sources:
- healthcare.gov is a website managed by the U.S. Department of Health & Human Services. If you do not have internet access, you may want to ask someone who does to help you access the information at this very helpful website.
- For more information about Medicare, visit medicare.gov, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. In addition to basic information about Medicare, a lot of information is also provided about supplemental insurance plans and Medicare Advantage Plans that are available in your area, including Medicare ratings of individual plans.
- To request an Official US Government Medicare Handbook, call 1-800-633-4227. It is available in Spanish, Braille, as an Audio CD and in large print (English and Spanish).

[SOURCES: healthcare.gov; medicare.gov; Webmd.com; opa.ca.gov; medhealthinsurance.com]

Don’t Delay Enrollment in Medicare When Eligible at 65

The Washington Post recently published an article about what can happen if we delay enrollment. According to information provided by Kaiser Health News, Robert Joseph, an Alvin Texas electrician, did not enroll when he turned 65 because he was still working and had company insurance. When he tried to enroll two and one-half years later, the penalty he was charged meant that his insurance would be more expensive for the rest of his life, and worse, he found himself completely without insurance for a full year until he could finally enroll!
**What is “Imitation Cheese”?**

Cheese is made from milk solids and is a concentrated dairy product. The “Imitation” product looks like cheese and has a texture that is similar to cheese, but it is usually made from partially hydrogenated vegetable oils. Originally made as an alternative to avoid the saturated fats in cheese, the partially hydrogenated fats in imitation cheese may also be a detriment if fat consumption is a concern.

Imitation cheese is less expensive than real cheese, but also has less flavor and doesn't melt well. It is available in most groceries, mostly in thin-slice or pre-grated form. It has a longer shelf life than real cheese, but is less nutritious.

[SOURCES: acs.org; wisegeek.com; supermarketguru.com]

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**The History of Aspirin**

Bayer Aspirin was first produced commercially in 1899 and originally distributed to physicians in powdered form.

In the 1800s, European researchers explored different forms of salicylic acid. Modern aspirin is actually made with the buffered compound acetylsalicylic acid. In the early 1890s, a German chemist at Bayer had made salicylic acid easier to digest and had been giving acetylsalicylic acid to help his father deal with his rheumatism.

By 1915, Bayer Aspirin was available to the public in tablet form. But the history of Aspirin begins long before Bayer’s products.

Natural sources of salicylic acid are found in jasmine, beans, peas, clover, some grasses and willow and myrtle trees. Many people around the world had long ago discovered uses for the wonder drug.

There are records of the Egyptian use of willow bark and myrtle to reduce pain and fever more than 4,000 years ago. Native American groups have an oral tradition of the use of willow leaves, bark and flowers to relieve pain, fight colds and reduce fevers. Greek and Roman physicians were prescribing the use of willow leaf to treat inflammation by 30AD.

Other uses for aspirin have multiplied over the years. The ability of aspirin to prevent heart attacks and stroke was first proposed in the 1940s, and confirmed by studies in the 1970s. There is now some evidence that aspirin may reduce the incidence of colorectal cancer.

The use of aspirin has potential dangerous side-effects though and should only be taken on the advice of a physician. For example, regular use can cause ulcers and gastrointestinal hemorrhage.

[SOURCES: aspree.org; cnn.com; cabrillo.edu; umm.edu]

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Do you enjoy reading this newsletter?
Do you tell others about things you have read?
Do you share information with your family or friends?
Maybe some of the things you read in Challenges are helpful?

Please take a moment to donate to our non-profit so we can continue to publish Meeting the Challenges......

Send your tax deductible donation to:

**ILP - Challenges**
6235 River Crest Drive, Ste C
Riverside CA 92507-0758.

Thank you!!

We invite corporate sponsorship of Meeting the Challenges. Please consider the goodwill benefits of showing your support for our aging and disabled communities.

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Braille Institute....(760)321-1111 Department of Rehabilitation (Riverside)....(951)782-6650
One of the Most Common Causes of Foot Pain

The most likely cause of heel pain is due to an inflammation of the thick tissue on the bottom of the foot. The condition is seen mainly in men between the ages of 40 and 70, but also can afflict younger people, especially athletes. The name for the condition is Plantar Fasciitis.

Symptoms of the condition include:
- a burning, stabbing, or aching pain in the heel
- stiffness or tightness in the arch
- mild swelling and redness may occur.

The pain is usually most obvious when taking first steps in the morning, as the ligament that attaches our heel to our toes relaxes at night when we sleep, but is strained when we stand and walk. After the tissues warm up, the pain will usually diminish, but then return after standing, walking, climbing stairs or after vigorous exercise. The pain may also be felt when getting up after a long period of sitting down. (NOTE: foot pain while in bed and reclining is not caused by Plantar Fasciitis.)

Causes of the condition include:
- wearing shoes that do not fit well or that have poor arch support (or not wearing shoes)
- walking, standing, or running for long periods, especially on hard surfaces
- having tight calf muscles
- having high arches or flat feet
- being overweight
- another common cause is arthritis.

In most cases, surgery is not required to stop pain and reverse the damage to the ligament. Treatment can include:
- make sure your shoes have good arch support and are cushioned
- rest the affected foot as much as possible for at least a week–avoid activities that make your feet hurt like walking or running on hard surfaces
- try heel cups or shoe inserts
- do calf and heel stretching exercises several times a day. A simple and effective exercise is to sit and extend your leg out in front of you–position a towel over your toes and pull your toes toward you, stretching your calf and heel, holding the position and repeating the stretch several times.

If the condition persists, seek medical consultation.

[SOURCES: ncbi.nlm.nih.gov; mayoclinic.com; webmd.com; plantar-fasciitis.org]

Riverside Transit Agency
Serving Western Riverside County
Customer Information Center: 951-565-5002

Corona Cruiser
Serving City of Corona
Customer Information: 951-734-9418

Pass Transit
Serving the San Gorgonio Pass
Beaumont: 951-769-8530
Banning: 951-922-3243

SunLine Transit Agency
Serving the Coachella Valley
Customer Information Center: 800-347-8628

Palo Verde Transit
Serving Blythe and surrounding area
Customer Information Center: 760-922-1140

Free, Unbiased ...Health Insurance Counseling —— Call HICAP @ 1-800-434-0222
Rising food costs, coupled with decreasing supportive services and a fixed or shrinking income often means that eating well has become more difficult.

One of our first thoughts might be to shift our grocery shopping to a super-center or warehouse store to save money. Does this really work? In fact, a US Department of Agriculture study last year found that the average price of groceries at a superstore was 7.5 percent lower than the same item purchased at a traditional grocery store. However, the amount of the discount varied to as low as only 3 percent in some cases. It was also true that discounts were higher in areas where the superstores had more competition.

Besides shopping at less expensive stores, we can do lots of other things to lower our food costs:

- Make meals less meat centered—use more vegetables and meat alternatives, such as dried beans and peas
- Instead of buying pre-processed things like already grated cheese, grate the cheese yourself
- Plan meals in advance and go to the store with a shopping list
- Cook larger quantities with the idea that multiple meals can result—eat the dish again the next day, freeze in portions for future meals, or use the left-overs to build new dishes
- Maybe join a food co-op or grow some of your own vegetables?
- Eating out less or not at all can greatly reduce food expense.

How we shop at the store can also impact how much we spend:

- Don’t buy things that are not on the list
- Do not shop when hungry or tired
- Buy generic brands when possible
- Pay attention to “unit pricing”—look at the shelf tags and buy quantities that cost less per ounce (but do not buy quantities of things that will not be used and will go to waste)
- Only use food coupons for items that you planned to buy anyway
- Avoid buying snack foods and soda pop
- Look for carts with fruits, vegetables, and breads that have been marked down in price.

Keep track of how much you spend per item and for each meal and make future shopping lists that emphasize the lowest food costs.

In some areas, food pantries and other free or very low cost foods may be available. Contact community services agencies for information about these services.

[SOURCES: msn.com; usda.gov; vt.edu]

Sweet Potato & Black Bean Enchiladas

Make the filling: Dice 1 small onion and peel and dice 1.5 pounds of sweet potatoes—sauté onion in 1 TBS of oil until softened, add sweet potatoes and diced tomatoes, season with spices of your choice, add 1/2 cup of water, bring to a boil, reduce heat and simmer for 40 minutes—let cool and mash mixture together. Pre-cook a pound of black beans (or use canned). Mix with rest of the filling (add queso fresco or other cheese if desired).

Finish Dish: Preheat oven to 350 degrees. Brush 9x13 baking pan with oil. Fill corn tortillas with filling, roll and place seam down in pan. Top with canned enchilada sauce and cheese—bake 15 minutes.

[Based on vegetariantimes.com recipe]
TRIP Volunteer Drivers of the Year
Presented by The Beverly Foundation

TRIP riders were asked to nominate volunteer drivers to receive this year’s Beverly Foundation “TRIP Volunteer Driver of the Year” award. Nominations included the reasons why their volunteer should be honored.

Every entry described a volunteer who was already a winner, but only two would be selected to receive this year’s award.

It was difficult to select the winners, and we were so impressed by everyone who was nominated, but this year’s Beverly Foundation TRIP Volunteer Drivers of the Year were Rachel Mendez, and Mary Louise Mushegan.

Congratulations to these honorees and all the wonderful TRIP volunteers who really do make a huge difference everyday!

Each day, hundreds of people who care about their friends and neighbors volunteer to drive them to the store, for doctor’s appointments and for many other reasons. If someone asks you to be their TRIP volunteer driver, please say YES. We will help out with a mileage reimbursement for the gas, but you will be the hero.

The volunteer escort-driver TRIP program is supported by Measure A tax funds through the Riverside County Transportation Commission, Older Americans Act funds through the Riverside County Office on Aging, a Regional Access Project Foundation Grant, and local funds from the City of Blythe.

Charitable Contributions from individuals and businesses are needed!!
Travel Training Gives You the Independence to Go......
by Ivet Woolridge and Consuelo Arias

EXCITING NEW SERVICE

Many times we stop ourselves from doing things because they are unknown and the unknown can be quite intimidating.

In this day and age, personal vehicles are our main source of transportation. They get us to work, to school, shopping, to visit friends, etc. But what do you we when we can no longer drive our vehicle? Do you know about the fixed route Bus? Have you thought about all the places that you can go using buses and trains? We can go to the doctor, out for dinner, grocery shopping, to visit your family, even to the beach—the possibilities are endless. You’re one stop away!

There is no reason to let fear stop us from riding the bus. Today’s buses have several cameras installed for our safety. And NOW the Riverside Transit Agency has the perfect way for us to learn all about the fixed route system.

Travel training is now available for any individual with physical, cognitive, and visual disabilities and older adults who want to learn how to ride the bus.

One of the most attractive aspects of the training is that it is FREE and once your training is complete you will also receive a Free monthly pass!!!!

You will learn:
- How to catch a bus
- How to board, ride, and exit the bus safely
- How to read the bus schedule and how to use buses to get where you need and want to go—where and when to catch the ride you need
- What to do in case of an emergency
- How to board the bus
- How to buy and use bus passes or request transfer tickets and change buses.

There are many benefits to using the bus:
- You gain the freedom to go anywhere, when you want to go
- Riding the bus is safe and easy
- It is easy to get on and off the bus, even if you cannot climb stairs, or need to use a walker, a wheelchair, or even a scooter
- You can plan trips with your friends and ride together
- Plus, riding the bus is a great way to make new friends!

You will learn:
- How to catch a bus
- How to board, ride, and exit the bus safely
• Riding the bus is very convenient—You do not need to schedule your rides in advance
• Riding the bus is very economical and inexpensive
• And RTA staff is committed to being helping us in every way they can—Customer service is available to answer all of our questions and even to help us with planning our travel.

To set up an appointment to being your travel training, call RTA at (951) 565-5002.

Riverside Transportation Agency is able to offer Travel training as one of their services thanks to a grant from the Riverside County Transportation Commission.

**Riding the Bus is Easy**
**Convenient**
**Safe**
**Economical**
**And Fun!**

The Independent Living Partnership (ILP) is committed to helping people to live independently in their own homes and communities. Our list of what is needed includes:

- **Transportation** that is available, usable, affordable and effective to get us where we need to go when we need to be there. In addition to public transportation services, ILP’s TRIP Program is intended to help those who cannot drive, have no family to help, and cannot use public services, to receive the transportation that is needed for them to remain independent.

- **Access to health care and other needed services**, as well as things that make our lives better and more fun. Spiritual fulfillment, entertainment and recreation may be equally as important as health and social services to maintaining an independent lifestyle.

- **Connection to community** so we are not alone and isolated. Families are a wonderful source of connection and support, but everyone needs to have social relationships with friends and neighbors—people to be with and to talk with.

- **Financial means or other support**. Having working income, retirement savings or Social Security for everyone is an essential thing that is needed for us to maintain our independence.

- **Adequate housing** that is safe, comfortable and supportive is a basic need.

- **Coping skills** that enable us to get the information we need to understand the challenges we face and to do the things that are necessary to remain independent. *Meeting the Challenges* is intended to help meet this requirement. Please donate today help us continue to publish and distribute *Meeting the Challenges*: Challenges Fund

6235 River Crest Dr., Ste C
Riverside CA 92507

(For every $5 you send you have another chance to win $500 in our February drawing!)

- **Supportive technology** that makes living in our homes safer and easier. This may include glasses so we can see, a walker so we can get around, an aid to help us open a jar, a phone so we can talk with people and call for help if it is needed—how many other thousands of things we can name?

“Simple can be harder than complex: You have to work hard to get your thinking clean to make it simple. But it’s worth it in the end because once you get there, you can move mountains.”

— Steve Jobs
Funding cuts to in-home and other supportive services for older adults and people with disabilities are putting a great deal more pressure on family caregivers.

Many of the supports that have been available for caregivers are going or already gone. Our family members and friends continue to require care:
- In-home services
- Health care
- Respite
- Food services
- Transportation services
- Caregiver support.

So where can we turn?

Call:
- local community services organizations
- regional Aging and Disability Resources Centers
- County Aging and Disability Services offices
- Veteran Services Agencies
- your area’s Regional Center
- Independent Living Centers
- Non-profit support organizations
- Commercial service providers.

Phone numbers for these organizations are listed in your phone directory white pages under “Government Offices—County” and in your phone directory yellow pages under:
- “Developmental Disabilities”
- “Home Care Services”
- “Nursing Home Alternatives”.
- “Senior and Aging”
- “Social Services”.

Resources on the Internet include:
- National Alliance for Caregiving, AXA Foundation Family Care Resource Clearinghouse
  http://web.raffa.com/nac/axa/
- National Family Caregivers Association
  www.thefamilycaregiver.org/caregiving_resources/
- Family Caregiver Alliance, Family Care Navigator
  http://www.caregiver.org/caregiver/jsp/content_node.jsp?nodeid=2083
- Eldercare Locator
  http://eldercare.gov/Eldercare.NET/Public/Index.aspx
- U.S. Department of Veterans Affairs
  www.va.gov
- Disability.gov
  www.disability.gov
- Social Security
  www.ssa.gov

As government funding decreases, the responsibility for our family, friends and neighbors increasingly falls to each of us individually.

TRIP is a volunteer driver service in all the communities in Riverside County and is the only answer to providing usable and friendly transportation for many who are alone and unable to use public services due to physical disabilities and chronic illness.

TRIP is an extremely low-cost and effective service, which is mostly relied upon by its users for transportation to access gravely needed medical services. Each trip we provide costs about 20% of what the same trip on Dial-A-Ride would cost, and includes a level of escorted personal assistance that other services simply cannot provide.

We encourage you to commit to help support this life-saving service in your community, as an individual or a business.

Please make a tax deductible donation to help your friends and neighbors today.

Send your extended hand to:
TRIP
6235 River Crest Dr., Ste C
Riverside CA 92507.

Thank you.
**Syringe Guide Makes Insulin Injection Easier**

The VialDock Syringe Guide offers a faster, easier way to withdraw the medicine from the vial.

The clear polycarbonate device is designed to clamp onto the head of a medicine vial for quick insertion of the needle and syringe. Two open grooves on either side allow you to hold the syringe while extracting the medicine. A built-in 2x magnifier makes it easier to read the calibrations to make sure the dosage is accurate. The Syringe Guide is available from many stores that sell diabetes supplies and costs less than $10.

**Penetrating Heat Relieves Sore and Stiff Hands**

Place mittens in the microwave to heat them up. Then slip them on to feel deeply penetrating moist and soothing relief of arthritis pain.

These and similar products are available from many stores for less than $10.

**Eating Aid Makes Grasping and Holding Utensils Easy**

Simply slide the utensil into the small plastic sleeve of the Utensil Hand Clip and the spring-action clip fits the hand snugly without pinching. It is available from many stores that sell assistive products and costs less than $10.

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**Are you a normal person?**

Or a movie star? If you are reading this issue of Meeting the Challenges, we need you to send us a few dollars so we can publish a Spring issue for you!

**Are you retired?** Or are you in the work force doing the things that help us all and just tired? We need you too! Please send us just a little of your Starbucks bucks to help keep us all meeting the challenges together.

**You could win $500.** And that could buy a few groceries for sure! Each $5 you send is an entry for the drawing. Send us $20 and we will send you four tickets.

**It’s up to you.** Do you want us to keep publishing Challenges? Mail your entries today to:

Challenges Fund
6235 River Crest Dr., Ste C
Riverside CA 92507

Or send us a tax deductible donation! The bigger the better! Thank you!

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**“If you want others to be happy, practice compassion. If you want to be happy, practice compassion.”**

—The Dalai Lama

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**Free, Unbiased ...Health Insurance Counseling —— Call HICAP @ 1-800-434-0222**
MUCHAS VECES NO HACEMOS COSAS PORQUE NUNCA LAS HEMOS HECHO Y SON DESCONOCIDAS, LO DESCONOCIDO PUEDE SER BASTANTE INTIMIDANTE. EN ESTOS TIEMPOS, VEHICULOS SON NUESTRA MANERA PRINCIPAL DE TRANSPORTE. USAMOS VEHICULOS PARA IR A TRABAJAR, AL COLEGIO, IR DE COMPRAS, VISITAR AMIGOS, ETC, PERO ¿QUÉ HACEMOS CUANDO YA NO LO PODEMOS CONDUCIR UN VEHICULO? ¿SABÍA USTED QUE Cuenta CON AUTOBUSES EN SU COMUNIDAD? ¿HA PENSADO EN TODOS LOS LUGARES QUE USTED PUEDE IR? ... LA PLAYA, EL MÉDICO, A CENAR, IR DE COMPRAS, A VISITAR A SU FAMILIA, LAS POSIBILIDADES SON INFINITAS.

SI USTED ES UNA DE LAS MUCHAS PERSONAS QUE TIENEN MIEDO DE VIAJAR EN EL AUTOBÚS O SIMPLEMENTE NO SABE POR DÓNDE EMPEZAR, LA AGENCIA DE TRÁNSITO DE RIVERSIDE TIENE LA FORMA PERFECTA PARA ENSEÑARLE TODO SOBRE EL SISTEMA DE RUTA FÍJA. Capacitación de viaje está disponible para cualquier persona con discapacidad física, cognitiva y visual y adultos mayores que tienen el deseo de aprender a viajar en el autobús. Uno de los aspectos más atractivos de la capacitación es que es GRATIS y una vez que su capacitación se ha completada también recibirá un pase mensual gratis!!!

USTED APRENDERÁ:
- Cómo tomar un autobús
- Cómo abordar, viajar y salir del autobús de forma segura
- Cómo leer los horarios del autobús
- Cómo abordar el autobús con una silla de ruedas, scooter o andador
- Cómo comprar y usar los pases de autobús y las transferencias
- Cómo cambiar de autobús

VENTAJAS DE UTILIZAR EL AUTOBÚS:
- Libertad para ir a cualquier lugar
- Puede viajar con sus amigos
- No hay necesidad de programar sus viajes con anticipación
- Atención al cliente es disponible para contestar todas sus preguntas

Recursos Para Personas Mayores........CONECCIÓN DE AYUDA...1-800-510-2020
Para empezar su capacitación llame a RTA al (951) 565-5002 y haga una cita para comenzar su entrenamiento. La Agencia de Transporte es capaz de ofrecer capacitación de viajes como uno de sus servicios gracias a la Comisión de Transporte del Condado de Riverside.

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Para servir mejor a los residentes del Este del Valle de Coachella que padecen ceguera o baja visión. Instituto Braille se complace en ofrecer TRANSPORTE GRATUITO A/ DESDE NUESTRO CENTRO DE RANCHO MIRAGE.

- Cuándo: Cada Lunes, Empezando 09 de enero de 2012
- Dónde: Centro de Servicios de Familia y Campesinos de Mecca, 91-275 66th Ave., Suite 100, Mecca, Ca 92254
  (Recogeran a las 8:30am, volverán a las 2:45pm)
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