

Senior Focus

Will SS be reduced in the future?

Dear Rusty: I started Social Security about 2 years ago, and I thought that the monthly benefit amount stated to me by Social Security in their letter was guaranteed. That written amount was what I based my decision on to retire. Now I hear on the news that we may have to take a 24% reduction in the future. That will make me and millions of other seniors homeless.

Dear Anxious: The reason you're now hearing about the possibility of a future reduction in Social Security benefits is because the SS Trustees 2021 Report to Congress was just released. This report, usually published in April, recaps the program's financial status at the end of the preceding year and provides Congress with a very detailed analysis of Social Security's (and Medicare's) financial picture. The Trustees report that, beginning in 2021, Social Security income will be less than needed to pay benefits, with the gap to be made up from Trust Fund reserves. Unless Congress makes some changes to the SS program, that trend will eventually result in the Trust Fund running dry, requiring an across-the-board cut in benefits.

This latest report predicts that the combined Trust Funds, which now hold nearly \$3 trillion in reserves, may be fully depleted by the year 2034 - one year earlier than last year's 2035 prediction. Although the 2034 date is new news this year, the mid-2030s potential depletion date has been reported for years, and it is not a new issue. Indeed, the 2019 report predicted 2034 as the possible depletion date and last year's report predicted an improvement to 2035.

One obvious reason for the one-year acceleration in the new report is the economic effect of the COVID-19 pandemic. While it certainly isn't good news, the fact is that the bad news isn't as bad as many pundits predicted. Some were suggesting that the depletion date may be as early as 2029, but the economy rebounded faster than

expected. Depending on how you look at things, the depletion date only changing by one year could be viewed as positive considering the economic impact of the pandemic. Rest assured that the matter will receive continued analysis in the months ahead.

But here's the bottom line:

It is extremely doubtful that Congress will ever let the Social Security Trust Funds be fully depleted, necessitating a benefit cut to all recipients. To allow that to happen would be political suicide because over 64 million people rely on Social Security. Is your benefit guar-

Ask Rusty

anteed? Yes, but only within the boundaries of current law, which says that Social Security is allowed to only pay benefits using its own money (from payroll tax income, interest income, income tax revenues and Trust Fund reserves). No benefits will be cut for as long as the Trust Fund can make up the difference between income received and benefits paid. But if there are no reserves to make up the difference, then (by law) Social Security can only pay out as much as it brings in.

Congress already knows how to fix this issue and avoid a cut in Social Security benefits. What is missing is the bipartisanship and the political will to accomplish it, because neither side currently appears receptive to solutions offered by the other side. Congress may continue to drag its feet on this issue, as has historically been done, until urgency demands action.

But I believe you can rest assured that Congress will eventually find the fortitude to restore Social Security to long-term solvency before any benefit cuts are made. You can help by calling your Congressional Representative and demanding that they adopt a bipartisan attitude toward Social Security reform. A good place for Congress to start would be by adopting the reform proposed by the Association of Mature American Citizens.

Senior Day at County Fair

Ready for some fun, seniors? The Brazoria County Fair has a special day just for you! Senior Citizen's Day is on Tuesday, October 19, at the Brazoria County Fair Grounds in the auditorium.

It is a day full of fun and is for ages 55+. Get there at 8 a.m. for registration, doughnuts and time to mingle.

From 9:30 a.m. to 1:30 p.m., there will be fair exhibits, vendor booths to check out, and lunch will be served.

Make sure to wear comfortable shoes, since you might be walking around quite a bit. This event is free for all seniors, so join in on the fun! The Fair parade in downtown Angleton kicks off the festivities on Saturday, Oct. 16, from 10 a.m. to noon. You can see the parade travel down 288-B from Kroger and head downtown and then turn left onto Hwy. 35. Get there early to set up a chair and get a good spot. Please be aware part of 288-B and Hwy. 35 will be closed shortly before the parade begins until after it ends.

For more information about fair fun, go to www.BCFA.org, call the office at (979) 849-6416 or see the special pull-out fair guide section in this issue of The Bulletin.



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Alzheimer's drug - Is it safe?

Judith Graham
Kaiser Health News (TNS)

The approval of a controversial new drug for Alzheimer's disease, Aduhelm, is shining a spotlight on mild cognitive impairment - problems with memory, attention, language or other cognitive tasks that exceed changes expected with normal aging.

After initially indicating that Aduhelm could be prescribed to anyone with dementia, the Food and Drug Administration now specifies that the prescription drug be given to individuals with mild cognitive impairment or early-stage Alzheimer's, the groups in which the medication was studied.

Yet this narrower recommendation raises questions. What does a diagnosis of mild cognitive impairment mean? Is Aduhelm appropriate

for all people with mild cognitive impairment, or only some? And who should decide which patients qualify for treatment: dementia specialists or primary care physicians?

Controversy surrounds Aduhelm because its effectiveness hasn't been proved, its cost is high (an estimated \$56,000 a year, not including expenses for imaging and monthly infusions), and its potential side effects are significant (41% of patients in the drug's clinical trials experienced brain swelling and bleeding).

Furthermore, an FDA advisory committee strongly recommended against Aduhelm's approval, and Congress is investigating the process leading to the FDA's decision. Medicare is studying whether it should cover the medication, and the Department of Veterans Affairs

has declined to do so under most circumstances.

Clinical trials for Aduhelm excluded people over age 85; those taking blood thinners; those who had experienced a stroke; and those with cardiovascular disease or impaired kidney or liver function, among other conditions. If those criteria were broadly applied, 85% of people with mild cognitive impairment would not qualify to take the medication, according to a new research letter in the Journal of the American Medical Association.

Given these considerations, carefully selecting patients with mild cognitive impairment who might respond to Aduhelm is "becoming a priority," said Dr. Kenneth Langa, a professor of medicine, health management and policy at the University of Michigan.

Dr. Ronald Petersen, who directs the Mayo Clinic's Alzheimer's Disease Research Center, said, "One of the biggest issues we're dealing with since Aduhelm's approval is, 'Are appropriate patients going to be given this drug?'"

Because this medication targets amyloid, a sticky protein that is a hallmark of Alzheimer's, confirmation of amyloid accumulation through a PET scan or spinal tap should be a prerequisite. But the presence of amyloid isn't determinative: One-third of older adults with normal cognition have been found to have amyloid deposits in their brains.

Because of these complexities, "I think, for the early roll-out of a complex drug like this, treatment should be overseen by specialists, at least initially," said Petersen of the Mayo Clinic.

Arvanitakis of Rush University agreed. "If someone is really and truly interested in trying this medication, at this point I would recommend it be done under the care of a psychiatrist or neurologist or someone who really specializes in cognition," she said.

According to the National Institute on Aging (NIA) Trusted Source, the more education you have, the lower your risk of getting AD.

You have lower odds of getting AD if you keep your brain active in old age by doing activities such as: taking classes, learning languages, playing musical instruments, doing group activities and interaction.

Senior Focus

NOMINATE A SENIOR

Send their picture and their story to stephanie.bulletin@gmail.com

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