



Web Eagle

October 2018

Welcome to the Web Eagle, your monthly source for the latest product and industry news from United Security Assurance. For producer use only.

Quote of the Month

"The only person you are destined to become is the person you decide to be."

Ralph Waldo Emerson,
American essayist

e-Applications

You can access state-specific e-Apps for our **SecureHorizons** STC plan and LSS series of LTCi products at our [Agent Portal](#)*.

Faxing Applications

We can accept faxed applications with voided checks at this secure, toll-free number **888-976-5969**.

Download your copy of the [fax cover sheet](#).

Quoting Software

Our quoting software can be downloaded from our [website](#)*. Contact us if you are unable to download the quoting software, or if you would like to have an illustration done for you.

Our LSS and LSS Select

Increase Your Earnings

We appreciate your hard work and understand the vital contribution you make to the success of our business. You work hard, so you should play hard! Our new producer incentive program, "**Raffle Mania**", could fund your next play-time location. The program offers you the chance to earn raffle tickets toward a final drawing for a dream vacation. The program offers you the opportunity to earn raffle tickets to a final drawing for a dream vacation. For more information call our Marketing Team or [view the program rules](#).



SecureHorizons In New States

Attention Producers!... We are thrilled to announce the release of our newest short-term home health care plan, **SecureHorizons**, in **North Carolina and South Carolina**.

The plan features¹:

- One Risk Class
- Daily Benefit Amounts of \$50-\$150
- Benefit Periods of 90, 180, 300, or 360 days
- Zero-Day Elimination Period
- Issue Ages of 40-89
- Optional Facility Care Rider
- Optional Inflation Protection Riders



SecureHorizons is available in Georgia, Louisiana, Missouri, Nebraska, Oklahoma, Pennsylvania, and Texas; and we are

LTCi products, and *SecureHorizons* short-term home health care plan are featured on [StrateCision quoting platform](#).

Ordering Supplies

USA licensed producers can order directly from our Marketing Team, at 800-872-3044.

*This is a secured section of our site that requires [registration](#).

Contact Us

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working hard to bring this plan to additional states. Please call our Marketing Team at **800-872-3044**, if you would like to order supplies or request a proposal.

¹Optional riders not available in Pennsylvania.

AARP Public Policy Institute Report

A major demographic shift is happening. The population of Americans 85+ is projected to triple between 2015 and 2050. The growth in this age group is estimated to significantly outpace all other groups, once baby boomers begin turning age 85 in 2031. In comparison, the population younger than age 65 will increase by only 12 percent.

To help us better understand how long term care and services will affect the 85+ age group, the AARP Public Policy Institute released the newest edition of [Across the States: Profiles of Long-Term Services and Supports](#). This reference book compiles data and analysis on long term services and supports for each state, combining thousands of data points from a large variety of sources—including some original analysis not found elsewhere—into a single volume.

Statics for this article was cited from aarp.org

Underwriting Corner¹

By: Jennifer Howlett
Underwriting Supervisor

The *Underwriting Corner* topic for this month is **Benign** (non-cancerous) **Brain Tumors**.

Benign brain tumors are usually defined as a group of similar cells that do not follow normal cell division and growth patterns, and develop into a mass of cells that microscopically do not have the characteristic appearance of a cancer. Most benign brain tumors are found by CT or MRI brain scans. These tumors usually grow slowly, do not invade surrounding tissues or spread to other organs, and often have a border or edge that can be seen on CT scans. These tumors rarely develop into metastatic (cancerous or spreading) tumors. However, benign brain tumors can be life-threatening because they can damage the cells around them by causing inflammation and putting increased pressure on the tissue under, and around it, as well as inside the skull.

Symptoms of benign brain tumors often are not specific. The following is a list of symptoms that, alone or combined, can be caused by benign brain tumors; but unfortunately, these symptoms can occur in many other diseases: Vision problems, hearing problems, balance problems, changes in mental ability (for example concentration, memory, speech),

seizures, muscle jerking, change in sense of smell, nausea/vomiting, facial paralysis, headaches, and numbness in the extremities.

Studies to diagnosis a tumor include: CT scan or MRI to see detailed images of the brain; and/or Angiogram or MRA, which involve the use of dye and X-rays of blood vessels in the brain to look for signs of a tumor or abnormal blood vessels. The doctor may also ask for a biopsy to determine whether or not the tumor is cancerous.

Some benign brain tumors are:

- **Meningioma** - tumor arising from the membranes covering the brain and spinal cord; this accounts for about 20% of brain tumors
- **Schwannoma** (also termed acoustic neuroma) - tumor in the 8th cranial nerve arising from Schwann cells (insulating cells of the nervous system); this accounts for about 9% of all brain tumors
- **Pituitary adenomas** - pituitary gland tumor; this accounts for about 8% of brain tumors
- **Hemangioblastomasa** - vascular tissue mass, sometimes cystic; this accounts for about 2% of brain tumors

Treatment protocols are based on the patient's age, the location and size of the tumor, and the patient's overall condition. Brain surgery (craniotomy) with surgical removal of tumor and/or radiation therapy (conventional radiation, gamma knife, proton beam) are the main treatments. Often other drugs such as corticosteroids, that reduce edema (swelling) and help the brain heal, are part of the treatment plan. Rarely are benign tumors untreatable.

If your client states they have or had a benign brain tumor, please ask the following questions:

1. What kind of tumor did you or do you have?
2. What symptoms do you or did you have that led to the testing that diagnosed your tumor?
3. If your tumor was treated, how was it treated? Radiation (gamma knife)? Surgery?
4. Do you have any residual effects from this tumor? What are they?
5. How often do you have imaging done to monitor growth of an existing tumor; or to make sure there is no regrowth of a removed tumor?
6. Do you follow regularly with a neurosurgeon? Neurologist?

As always, our **Underwriting Team** is available to answer any additional questions you may have.

¹All information is intended as general knowledge only and is not a substitute for medical advice for specific medical conditions. We cannot and do not give medical advice. Individuals are always encouraged to seek medical advice for any specific health issues.

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Information for this article was obtained from the following sources:
https://www.medicinenet.com/brain_tumor_symptoms/views.htm
<https://www.webmd.com/cancer/brain-cancer/brain-tumors-in-adults#2>

Please note it is extremely important to obtain all the person's medications since some people have more than one diagnosis and may be on a medication that is on the "unacceptable/knock out list".

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