



# Web Eagle

September 2016

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

**For producer use only.**

**United Security Assurance  
2016 Producer Incentive Program**

 **Mission Accomplished!**  
**New Opportunities with USA**

Last month, we were pleased to announce the completion of a major reinsurance transaction. Now we want to reward you for your loyal business the best way we know how ... with **CASH**.

We are excited to provide you with an opportunity to increase your earnings with us through our 2016 producers' incentive program, "**Mission Accomplished! New Opportunities with USA**". You can receive cash bonuses for every USA LTC, HHC, STHHC, LSS, or LSS Select applications you submit. [View program rules.](#)

For more information about this exciting program or to learn more about our insurance plans, call our Marketing Department at 800-USA-3044.

### Ordering Supplies

USA licensed producers can order directly from our website or contact our Forms Coordinator, at 800-USA-3044 (ext: 131).

### 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 LTCi products are featured on

## A Study of Older Americans

Earlier this month, The Federal Interagency Forum on Aging-Related Statistics published a report entitled, "[Older Americans 2016: Key Indicator of Well-Being](#)". This 179-page report pulls together statistics from 16 governmental agencies and features aging-based demographics, behaviors, health risks, and health care services data. You will find just about every statistic you can think of on the U.S. aging population. Here are several interesting industry related stats we lifted from the report.

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### Visit Us



- In 2014, 46 million people age 65 and over lived in the United States
- The older population in 2030 is projected to be 74 million
- Chronic health conditions differed by gender in 2013–2014. Women reported higher levels of asthma and arthritis than men. Men reported higher levels of heart disease, cancer, and diabetes.
- In 2013, about two-thirds of people who had difficulty with one or more activities of daily living (ADLs) received personal assistance or used special equipment
- In 2014, about 1.2 million people age 65 and over were residents of nursing homes. Nearly 780,000 people of that age lived in residential care communities such as assisted living facilities. In both settings, people age 85 and over were the largest age group among resident



## Nurse's Nook<sup>1</sup>

*by Nurse Deb*

The topic for this month's article is **Hepatitis**. Sources referenced in this article were gathered from Medicine.net., World Health Organization, Hep B Foundation, and

WebMD.com.

Hepatitis an inflammation of the Liver. There are five main hepatitis viruses:

1. **Hep A** (HAV): is the only common food borne disease preventable by vaccine. Poor sanitation leads to easier transmission of the disease. It travels in feces either from person to person or from contaminated water or food.
2. **Hep B** (HBV) (also called serum hepatitis): is a potentially serious form of liver inflammation. It occurs in both rapidly developing (acute) and long lasting (chronic) forms. It is one of the most common chronic infectious diseases worldwide. (An effective vaccine is available that will prevent the disease in those who are later exposed.) Hep B lasting longer than 6months is said to be chronic. In Hep B acute cases, many will not develop symptoms, while approximately 1 in 5 infected people will develop severe symptoms such as jaundice and flu like symptoms, nausea, pain in the right upper part of the abdomen (where the liver is), joint swelling and pain like arthritis. If the infection keeps getting worse the liver cells die off and this can be Life threatening.
3. **Hep C** (HCV): is spread primarily by blood-to-blood contact and can be associated with IV drug use, poorly sterilized medical equipment and transfusions. This chronic infection can be treated with medications. The estimated cure rate with these newly developed medications are said to be 80-95%. HCV is the leading

- reason for liver transplants. (No vaccine for Hep C is available). Many die from Cirrhosis due to HCV.
4. **Hep D** (HDV): occurs in patients who also are infected by Hep B or develops later when infection by Hep B has entered the chronic stage. Hep D can be quite severe, but is seen only in patients already infected by HBV. Chronic Hep D is a more serious disease than Chronic Hep B or Hep C. It can spread within households when personal items such as a razor or toothbrush are shared.
  5. **Hep E** (HEV): is a rare form of liver inflammation transmitted via food or drink handled by an infected person or through infected water supplies where fecal matter may get into the water. Hep E does not cause chronic liver disease and there is no vaccine or treatment for it.

Autoimmune Hepatitis is a chronic disease in which the body's immune system attacks the normal cells of the liver, causes inflammation and liver damage. It is a serious condition that may worsen over time if not treated and can lead to cirrhosis and liver failure.

There are some new medications claiming to be able to "cure" Hepatitis C. (Harvoni, which is a combined drug of Sofosbuvir and Ledipasvir, is one of the drugs but there are more on the market.) There may not be enough data to support the claim of a "cure" as yet since the drugs are fairly new. More time may be needed to see if the patient remains in a Hepatitis free state.

When dealing with an applicant who says they have Hepatitis you should ask the following questions:

- When were you diagnosed?
- What type of Hepatitis do you have? (Do you know how you contracted it?)
- How has it affected you? Do you suffer from fatigue, jaundice, fever, pain, periods of confusion or esophageal varices?
- Have you had any recent flare ups?
- When were your last Labs and do you know your liver function test results?
- Have you ever been treated for it? If so, with what medication?
- Has your doctor ever recommended dialysis or discussed getting on a transplant list?
- Do you drink alcohol? If so, how much? Has your Doctor told you not to drink alcohol?
- What other co-existing conditions do you have and what are all your medications?

The responses to these questions can help us better underwrite the potential applicant. Please feel free to call on our expert underwriting for a more in-depth pre-qualification.

For additional information on how we underwrite specific medical conditions or to speak with one of our qualified underwriters, call us at 800-USA-3044. Requests for future topics are always welcome.

<sup>1</sup>All 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.

The information presented in this article is provided solely for informational purposes and is for agent use only. The information provided is accurate and current as of the time of publication. The topic discussed is general in nature and no guarantee of coverage is implied. Products and benefits are not available in all states.

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## Connect with USA

We are fortunate to have great producers. We want to make sure you have the opportunity to connect with us, and most importantly, with each other. Whether it's to share stories, or to communicate with like-minded agents you can find us listening at our social media sites.

We may not be able to answer all questions though; so if you require an immediate response, please contact us by phone at 800-872-3044.



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