Volume 3, Issue 2

THE LYFE ADVISOR

February 2020

Leading
Your
Financial
Education

#1 WORRY FOR RETIREES IN 2020
NOT HAVING ENOUGH MONEY TO RETIRE

By Thomas Shultz

February

Guaranteed income is something everyone needs throughout their retirement, and the right annuity can provide that.

If you need reliable, guaranteed retirement income, annuities can be one of your best options.

Why do I say that? For one thing, annuities can act as a hedge against longevity risk — the possibility that you will outlive your money. People are living longer than ever before and, as a result, the old 4% rule is no more.

According to this rule, if you begin by withdrawing 4% of your savings the first year of retirement and adjust subsequent withdrawals to account for inflation, you likely would not run out of money. However, longer lives make that a **LOT** more problematic.

Also, new research shows that the key to financial stability today is guaranteed income that ensures you can cover your basic living costs in retirement. As one of the greatest fears for pre and post retirees is running out of money, I believe we all need guaranteed income.

The Basic Pros and Cons of Annuities

Just about any investment comes with some risk, but specific types of annuities can help protect the money in the annuity from market downturns. If the market declines after you purchase a fixed or indexed annuity, the value of your account won't change.

There's a tradeoff for that stability, of course. Interest rates or earnings

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IT'S THE MONTH OF LOVE!

Inside This Issue

on fixed and indexed annuities tend to be lower because they are typically capped, so you may not earn the same yield as if you were directly invested in equities. But the floor is zero, which protects you against market loses.

Annuities shouldn't be purchased for growth. Let me repeat, annuities aren't the best vehicle for growth or to offset inflation. They also aren't necessarily designed to be part of a legacy plan (though there are options that can provide that benefit). If growth or legacy is at the forefront of your retirement goals, life insurance or equities would probably be a better fit.

But an annuity with an income rider can produce a contractually guaranteed income stream that will last as long as you live, no matter what happens to the markets or the economy. These days, with employer pensions rapidly disappearing, that's a role that needs to be filled in many retirement plans. People need monthly income they can count on when they no longer earn a paycheck.

Similar to Social Security, you can begin taking income at a specific age for a specific amount. If you allow your annuity plan to grow and you defer taking income for a specific period, you can create your own pension plan.

Annuities Are Only 1 Part of a Well-Rounded Plan

As we age, needs and values change, and various equities should remain an important allocation in pre-retirement and retirement. But as you get closer to retirement, you begin to consider preserving what you've saved. Reviewing these products and benefits is a key part of building a balanced financial plan that provides the income you'll need for years to come.

As a wealth manager and a fiduciary, we can use equities for income, through preferred stocks, dividends, bonds, REITS, etc. for our clients. The income that equities provide will fluctuate, as the value of those shares can rise and fall. In most situations the annuities will offer stronger income guarantees that you cannot outlive.

If there's a market downturn in the years just before you retire or early in your retirement — and you're relying on those investments for income — it could devastate your plan.

Oftentimes, retirees whose plans force them to sell their equities for income are stuck. Sometimes they simply can't wait for their nest egg to recover from a market correction. Or worse: They must keep making withdrawals to pay the bills.

But because of its reliability, an annuity can actually help protect the other investments in your portfolio. It allows your stock portfolio to continue appreciating in good times and bad, because you won't feel as though you have to sell those holdings for income when the market is down. It adds another level of diversification that insulates the entire plan.

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Adding an Annuity to Your Mix

How much should you put into an annuity for retirement planning? A lot depends on your age, risk tolerance, goals, income needs and how much you've managed to save.

It also depends on what your other income sources (Social Security, a pension) will provide, and if you're single or married. Generally, a mix of the various products between annuities and other investments is a realistic goal.

For us, we like to see a portfolio designed with various types of equities to help offset inflation, liquidity and for long-term growth, with annuities to provide that guaranteed income stream to cover your basic everyday living expenses to provide that monthly paycheck.

The bottom line is, if income is your concern, a fixed-index annuity can be a worthy tool for building a dependable and steady paycheck in retirement. We tell people to think of it as a do-it-yourself pension.

The critics are correct when they say annuities are complex and aren't a fit for every plan. It's important to understand how they work and if they make sense for your overall plan and income needs.

Like you, I have the same financial concerns, worries about my spouse, and providing for my children and future grandchildren. For me, annuities are a planning tool that can help off-set those concerns as much as possible.

Here at Lyfe Advisors, we take a lifetime approach to planning.

If you'd like to see what retirement could look like for you, we would love the chance to show you our skills!

Thomas Shultz

RETAIN YOUR 2019 MARKET GAINS BEFORE THEY FADE AWAY

SCHEDULE YOUR FREE, NO OBLIGATION PORTFOLIO CHECK-UP TO MAKE SURE THAT YOU'RE PREPARED TO WEATHER THE NEXT MARKET CORRECTION!

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25 Percent Of Middle-Aged Americans Worry They Can't Afford Health Care

A large fraction of Americans nearing retirement age are worried they can't afford health insurance now, much less when they quit working to enjoy the good life, a new survey shows.

One in every four people between 55 and 64 are not confident they'll be able to afford health insurance during the next year, and nearly half worry they won't be able to afford coverage once they retire, researchers report.

The innovations and protections created by the Affordable Care Act, also known as Obamacare, do not appear to have eased people's concerns about insurance costs.

The thought was that more people would have access to health insurance and perhaps for that reason they would be more confident about affording health insurance, but that hasn't been the case.

These numbers come from the National Poll on Healthy Aging, a survey of more than 10,000 Americans in their 50s and early 60s conducted in 2019. The survey was sponsored by AARP.

The poll occurred shortly after the Republicans' plan to repeal the Affordable Care Act failed in Congress, at about the same time as the open enrollment period for employers' insurance plans, Medicare, and plans sold through federal and state marketplaces.

High out-of-pocket costs associated with health plans could be one reason why people fret about affording medical care, researchers found.

About 1 in 5 people said out-of-pocket costs had prompted them to not receive care for a health problem or skip filling a prescription during the past year, survey results showed.

Further, people in fair or poor health were four times more likely to have avoided care. Those who purchased an insurance plan on their own, rather than through an employer, were three times more likely to have not received care or not filled a prescription due to the high cost.

When people are talking about affording health insurance in retirement, they're not just thinking about premiums. They're thinking about other costs they'd have to pay out of pocket, like copays for medications, being able to afford the copays when you see the doctor. Even if you have health insurance and it's a good plan, most individuals are burdened still with a lot of costs.

The political uncertainty surrounding the Affordable Care Act is also driving some of this worry, the survey found.

Two-thirds of the survey respondents said they were concerned how potential Cont. next page

changes to national health care reform could affect them.

These concerns aren't trivial -- they've had real consequences on people's decisions regarding retirement.

Nearly 1 in 5 people said they've kept a job in the past year to maintain their employer-sponsored health insurance, and 15% of those working say they've either delayed retirement or thought about it to preserve their insurance coverage.

This is becoming a serious issue and has been for many years. Before the Affordable Care Act, COBRA was the only real option for people in this age group to keep meaningful insurance if they had a health condition -- but the expense was out of reach for many.

Now, people can get good individual insurance that will cover their conditions, and get subsidies if their incomes are up to 400% of poverty -- but coverage is still often unaffordable to people just over that income guideline.

There are several other political proposals being floated that could ease some of these worries, including an early buy-in for Medicare, a public option for marketplace plans, and even the controversial Medicare-For-All. But in today's political climate, it's hard to say whether any of these might gain any real traction.

People aren't powerless in the face of these costs, though.

Folks can work with their human resources department or a health insurance navigator to make sure they've got the most affordable plan available to them, based on their individual health needs.

Keep in mind the most affordable plan for you might not be the plan with the lowest premium. An example would be a plan that may have a higher up-front premium but then for your specific health conditions or medications will have lower out-of-pocket costs for the types of specialists you need to see or the types of prescriptions you need to take.

People also should talk to their health care team about ways to control costs.

Studies have consistently shown that people talk very infrequently to their health care professionals about costs of care. Oftentimes when they do, there could be alternatives like a lower-cost medication that would work just as well or a different treatment pathway that would have lower out-of-pocket costs.

FEBRUARY 2020

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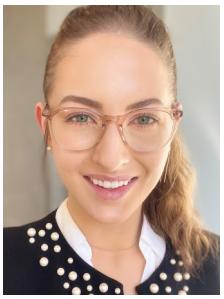
VICTORIA'S VALUES



My goal is to share tidbits and lessons that can help us all become better leaders not only of ourselves but to every person in our lives!

With January wrapped up, some feel a relief from having tackled the first month of our New Year's goals, others like myself feel bogged down by the constant yearning to have purpose, do better by others (and myself) and simply lead a healthier life in all aspects.

The issue we run into is feeling unmotivated by week 2-3, guilt from missing the mark or self-doubt wondering if this will even make a difference in the long run. With these thoughts running through my mind, I set off to find answers on what methods can help sustain long term goals.

GOALS / DIRECTION

Goals were never meant to be a destination but rather a ***Course Direction***.

1) Start with **one goal** and make it a **lifestyle change**. Stay disciplined **long enough** for the goal to eventually become second nature ***(60-90 days)*** then you can move onto a new goal.
2) More important than setting your course is **setting up routines** to make the goal happen. ***Our success as individuals rises and falls on our routines***.
3) I've never met a goal I've set, either because I've fallen short (from not having a routine set in place) or because when approaching the finish line, I'll heighten the goal to encourage constant purpose and growth. ***The point isn't to win the game but to keep playing it.***

Motivation is fleeting and was never meant to sustain a goal but rather ignite the fire to get started. Once going, all you need is enough until habit (or routine) takes over!

WINNING THE DAY

Have you ever gotten home at the end of the day and felt defeated? I know I have. Winning my everyday has changed the way I live. Instead of looking forward to an event or even looking back at my past wishing things were different, I've chosen to fall in love with my daily habits and routines which has me feeling like I've won the day! This keeps me focused on the now, happy and grateful for one more day of life.

The 5 Essential Things I Do Daily:

Read 15 minutes (currently reading "The One Thing")

Listen to a positive motivational podcast or audio station

Meditate for 15 minutes (visualizing where I want to be and who I want to become)

Report my daily progress to someone I trust

Plan for the next day

I would highly recommend these books for finding deeper purpose, setting direction, feeling healthier or even just helping you feel less worried!

"The One Thing" by Gary Keller

"How To Stop Worrying and Start Living" by Dale Carnegie

"Switch On Your Brain" by Caroline Leaf

"Make Today Count" by John Maxwell

Victoria Arnett

**IN THE MONTH OF JANUARY,
WE HAVE HAD 27 CLIENT REFERRALS!
THE AMOUNT OF GRATITUDE
WE HAVE FOR ALL OF YOU
IS UNMEASURABLE!**

We appreciate your referrals!

Your referrals are gifts to whomever you refer. By making a referral, you are giving them a chance to make a difference in their financial future. Thank you for helping spread the LYFE Advisor's message.

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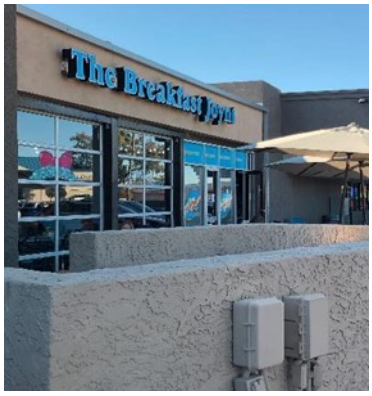
RITA'S CORNER

Every month, my husband and I enjoy trying out new breakfast places throughout the valley. This trip we brought my mother along with us and went to "The Breakfast Joynt" on Bell Road in Scottsdale.

"The Breakfast Joynt" is a locally owned business and have been in this area off and on for several years. They now have two locations in Scottsdale, one on Bell Road that we visited and the other is in the McDowell Mountain Marketplace. The outside décor is really cute with lots of windows and garage doors that they open in the spring and fall. Inside is bright and sunny with unusual circular booths. Our waitress was very friendly and attentive. They also have outside seating and are pet friendly.



What caught our attention on the menu was the "Build Your Own Omelet" selection. I chose the fruit substitution for mine and my husband, of course, selected hash browns and pancakes. My mother ordered a strawberry waffle.

Everything was going great and then the problems began. Our waitress continued to bring coffee and assure us our meal was coming. We waited nearly 20 minutes and then we received only half of it.

They delivered the 3-egg omelets first with no pancakes or fruit substitution for me and assured us they were on their way out next. We waited for some time and when no sides arrived, we went on and began eating our omelets so they weren't cold. They didn't look like typical omelets. They were quite large but very flat and round and to me, a bit overcooked. They weren't terrible but they were not yummy either. Finally, the pancakes came to the table nearly 15 minutes later and they were ok. My husband did love the hash browns though and my mother enjoyed her waffles.

Maybe this was an unusual situation for the kitchen staff and the manager did come out and talk to us.

We were disappointed with the service and the meal and will not be going back.

We have already started thinking of our next place and have decided on Butters Pancakes & Café. Hopefully, our experience there will be much more pleasant and tasty!

Rita Henderson

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Hack #16

MEDICARE'S PART D DOUGHNUT HOLE HAS CLOSED! MOSTLY...SORTA….

The drug coverage gap was widely loathed, but the new scheme may still leave some older Americans holding the bag.

With the new decade comes this long-awaited milestone: the Medicare Part D doughnut hole has closed. Hooray!

More than 61 million Americans are Medicare beneficiaries, and about 46 million of those are enrolled in Part D. The doughnut hole, more formally called the coverage gap, has been one of Part D's more detested features since the drug benefit took effect in 2006.

Part D initially suspended coverage at a certain dollar threshold, forcing beneficiaries to pay out of pocket for drugs until they hit a second threshold and coverage resumed.

In 2006, after meeting the deductible ($250 at the time), participants paid 25 percent of the negotiated cost of each prescription until the cost of their drugs totaled $2,250.

Then, they became responsible for all drug costs — 100 percent — until they'd spent $3,600, after which they qualified for catastrophic coverage and paid just 5 percent of the cost per drug.

By last year, those thresholds had risen to $3,820 to fall into the gap and $5,100 to climb out.

"It was designed that way because Congress had a self-imposed budget target," said Tricia Neuman, who directs the Medicare policy program at the Kaiser Family Foundation.

In order to afford low deductible, catastrophic coverage and protection for those with low incomes, lawmakers agreed to the doughnut hole. But what other kind of insurance works like that?

The Affordable Care Act began a decade-long effort to close that gap. In 2010, the Centers for Medicare and Medicaid Services estimated, 8 million Part D beneficiaries fell into the doughnut hole. So in 2011, federal rules started lowering costs for beneficiaries and increasing discounts required from drug companies, gradually reducing what beneficiaries paid while in the hole.

The final reduction, for generic drugs, slid into place on Jan. 1. Now, supposedly, there is no coverage gap. Federal regulations require that your plan (most Medicare beneficiaries can choose from nearly 30) average 25 percent cost-sharing for any drug.

Part D premiums have remained stable (averaging about $30 a month) for years; the proportion of Medicare beneficiaries with Part D has risen to nearly 75 percent, and now the doughnut hole has closed.

Should we applaud?

It's great that the doughnut hole is closing, but people will continue to be exposed to very high drug costs without Congressional action.

Why? Several reasons have to do with Part D itself.

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This year, after meeting the $435 deductible, you generally pay a flat price for each covered drug during the so-called initial coverage period. Different plans assign drugs to different tiers for which you pay specified amounts.

But once your total drug expenditures hit $4,020, you're responsible for 25 percent of the plan's negotiated cost per drug — not a gap, exactly, but a shift.

If you were paying $45 for a prescription that costs $200, your share is now $50 — not a major change. But for a $500 drug, you'll owe $125 until you reach the catastrophic threshold.

It can go from your flat co-payment to a much higher amount. In theory, 25 percent could come to less than your tiered price; often it goes the other way.

It will now take longer to climb out of the not-exactly-a-hole.

Last year, you qualified for catastrophic coverage when your out-of-pocket expenditures reached $5,100.

This year, you don't qualify until they hit $6,350, a big jump. The Affordable Care Act had maintained a lower threshold; this year, that provision ended. Once there, your co-payment is a flat $3.60 to $8.95, or 5 percent of the drug's cost, whichever is higher. (Not lower)

Part D has never capped out-of-pocket costs, even when you reach the supposedly safe shore of catastrophic coverage. Your 5 percent co-payment lasts the rest of the year.

"Think about expensive cancer drugs," Dr. Neuman said. "It can still be a big number."

All of this takes place against the backdrop of rising drug prices generally. From 2015 to 2019, more than a million Medicare beneficiaries each year passed the threshold for catastrophic coverage — more than twice the number when Part D began, according to a Kaiser Family Foundation analysis.

New hepatitis C, emphysema and leukemia drugs — which may have no generic alternatives — can cost beneficiaries more than $5,000 a year.

Deciding on a Part D plan remains dauntingly complex. Though advocates say most participants could save by comparing plans annually and switching to lower-cost options, only a small fraction do. Some have gone through considerable contortions to avoid rising costs.

Joel Lieberman, 76, a retired judge in Wellington, Fla., spends about $1,000 a year on seven drugs, mostly generic, for cardiac and thyroid conditions.

But he also takes Xarelto, a pricey brand-name blood-thinner. At roughly $1,400 for a three-month supply at his local pharmacy, in past years the cost would have dropped him into the doughnut hole.

"I have found a way around it," he said. For several years, he bought the drug from Canada at significant savings. Once he could no longer arrange that, he began ordering Xarelto from Israel, where a company charges him $698 for a year's supply, including shipping.

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He feels lucky to be able to pay that sum. “What about those people out there who end up taking their pills three times a week instead of every day because they can’t afford them?” he asked.

It’s hardly a hypothetical question. Last year, Kaiser surveys showed that nearly a quarter of people over 65 struggled to pay for medications.

Because of costs, 29 percent didn’t take drugs as directed, either not filling prescriptions, skipping or reducing doses, or substituting over the counter products.

Those polls also show broad public support for Congressional action to reduce prescription drug costs. At minimum, a bill passed by the House in December and one reported out of the Senate Finance Committee in July, plus the Trump administration’s proposed 2020 budget, would all cap out-of-pocket spending for Part D.

The House bill also authorizes the Department of Health and Human Services to negotiate prices with drug makers (as the Department of Veterans Affairs does) for both Medicare and private insurers. The original Part D legislation specifically prohibited that.

Unsurprisingly, there’s strong industry opposition to the House bill, and that makes it harder to see what could get through the Senate and be signed by the President.

But it’s also hard to see how Part D’s remaining conundrums, with their real-world effects on people’s health, get resolved without federal action.

The doughnut hole did close, but there are things that still need to be done to make this a more affordable program.

Let us help you navigate the Medicare Maze.

Give us a call at

480-626-0296

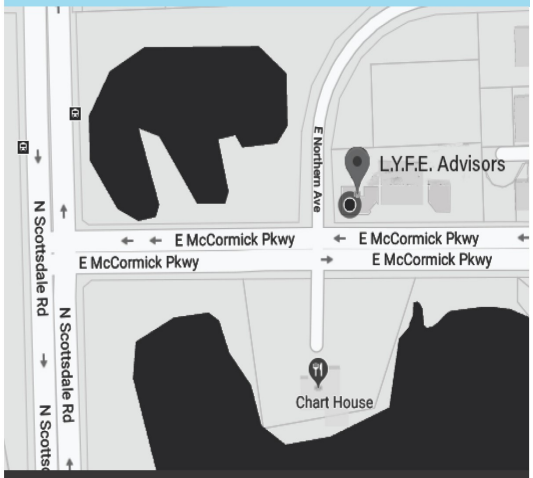
We are here to help!

Map to our NEW Scottsdale Office

7400 East McCormick Parkway, Suite A-100, Scottsdale, AZ 85258

Enter from E Northern Ave

(480) 626-0296



We’re across from Chart House on East McComick Parkway. First building on E Northern Ave.

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THE LYFE ADVISOR

February 2020

Sudoku

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

January Sudoku Solution

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

February Quiz

Question 1:
At one time, February was the last month of the year?

A. True
B. False
C. Huh?

Question 2:
How often does February have 29 days?

A. Every other year
B. Every four years
C. Every ten years

Question 3: Which famous rocker was born on February 4th?

A. Eric Clapton
B. Paul McCartney
C. Alice Cooper
D. Sting

Answers for January

Question 1: In January 2020, Ken Jennings, James Holzhauer and Brad Rutter will appear in the "greatest of all time" edition of what game show?

C. Jeopardy

Question 2: In the Chinese zodiac, 2020 is the year of what animal?

A. Rat

Question 3: Is 2020 a leap year?
B. Yes

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February 2020

Medicare Supplement Rates

Lowest Medicare Supplement Rates For 85258 Maricopa County

Gender	Age	Plan	Carrier	Premium*
Female	65	G	Humana (Value)	$99.96
Male	65	G	AARP United Healthcare	$115.42
Female	65	GHD	New Era Life	$40.37
Male	65	GHD	Humana (Value)	$49.05
Female	65	N	Aetna	$88.96
Male	65	N	AARP United Healthcare	$93.92
Female	66	F	Aetna	$131.78
Male	66	F	Blue Cross Blue Shield	$146.76
Female	66	G	Humana (Value)	$104.76
Male	66	G	AARP United Healthcare	$115.42
Female	66	GHD	New Era Life	$41.40
Male	66	GHD	Mutual Of Omaha	$50.44

Rates are accurate at the time of production. Included in the list are fraternal organizations, service organizations, and carriers with ratings above B+.
**Source: CSG Actuarial effective dates 02/01/2020*

Interest Rates

Highest CDs and Share Rates Highest National Rates

Duration	Institution	Yield to Maturity*
1 year	Northeast Bank	2.20%
2 year	Live Oak	2.20%
3 year	Comenity Direct	2.20%
4 year	Safra Bank	2.20%
5 year	Goldman Sachs	2.25%

Rates are accurate at the time of production. We include banks and federal credit unions in our national search. All have FDIC or NCUA Insurance. **Source: BankRate.com 02/01/2020*

Highest Fixed Annuity Rates

Highest Arizona Rates

Duration	Institution	Yield to Maturity*
3 year	F&G	2.70%
4 year	Guggenheim Life	2.70%
5 year	Sentinel Security	3.60%
7 year	Atlantic Coast Life	3.78%
10 year	Atlantic Coast Life	3.89%

Rates are accurate at the time of production. Excluded from the list are fraternal organizations, service organizations, and carriers with ratings below B **Source: AnnuityRateWatch 02/01/2020*

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Leading Your Financial Education

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2 AWFUL REASONS TO TAKE SOCIAL SECURITY BENEFITS AT AGE 62

Believe it or not, getting more checks isn't always the best thing

There are a few good reasons for starting to collect Social Security as soon as you become eligible, at age 62. It might make sense to start that early if you expect to have a short life or if you are forced into early retirement and need the money to help you stay out of debt.

If those scenarios don't apply to you, though, you're probably better off delaying benefits. Still, thousands of people start collecting Social Security at age 62 every year, often without giving it enough thought. Here are three of the worst reasons for claiming benefits right away.

BECAUSE YOU CAN

You've spent decades paying into Social Security, and it's understandable that you're ready to finally get some money out of the program. You'll get the most checks if you start benefits right away, at age 62, but you might actually cost yourself money over your lifetime.

You must delay benefits until your full retirement age (FRA) -- 66 or 67, depending on your birth year -- if you want the full scheduled benefit you're entitled to based on your work record. Every month that you claim benefits before your FRA will permanently reduce your checks, while every month that you delay benefits will increase your checks -- at least until you reach your maximum benefit at age 70.

YOU THINK SOCIAL SECURITY IS GOING BROKE

It's true that the Social Security trust funds are slated to be depleted by 2035 unless the government makes some changes to the program, but that does not mean Social Security is going to disappear, as many people believe. Even if the government didn't do anything, Social Security would still be able to pay out 80% of its scheduled benefits until 2090.

The government has discussed several proposals for keeping Social Security sustainable for future generations, but it hasn't made any decisions yet. Some of the suggestions, including reducing benefits and reducing cost of living adjustments (COLAs), could mean that your benefits won't stretch as far in the future, but you don't have to worry about Social Security going away. If you're worried about Social Security losing value over time, that could give you more incentive to delay benefits and claim later, when you're entitled to larger checks, so that each check will go further.

I'm not saying that claiming Social Security at age 62 is always the wrong choice, but if you were planning to do this because of one of the two reasons listed above, you might want to rethink things. Delaying benefits could prove much more beneficial over the long run, assuming you can afford to wait to begin collecting Social Security.

Medicare Workshops

1 Hour Presentation - Everything you need to know about Medicare. We explain how Medicare works and what you can expect before you choose!

THIS PRESENTATION HAS BEEN APPROVED BY MEDICARE

Glendale Foothills Library
Hummingbird Room
19055 N. 57th Ave
Glendale, AZ 85308
Tuesday, February 18th
1:30pm to 2:30pm

Fountain Hills Library
Conference Room
12901 N. La Montana Dr.
Fountain Hills, AZ 85268
Tuesday, February 18th
6:00pm to 7:00pm

Mesa Main Library
Saguaro Room
64 E. 1st Street
Mesa, AZ 85201
Wednesday, February 19th
1:30pm to 2:30pm

Glendale Main Library
Small Meeting Room
5959 W. Brown Street
Glendale, AZ 85302
Thursday, February 20th
5:30pm to 6:30pm

Tempe Pyle Recreational Center
Multi Purpose Room B
655 E. Southern Ave
Tempe, AZ 85282
Wednesday, February 19th
5:30pm to 6:30pm

Register online at
AZMedicare101.org

Or call us to reserve your FREE SEAT at
(480) 405-8444

"As a fiduciary, it is our responsibility to make sure that both the Health and Wealth areas of your retirement have been planned for accordingly. You can't have a sound financial plan without addressing both and here at LyfeAdvisors we believe that it starts with Healthcare! For the last 12 years, we have been helping thousands of retirees all throughout Arizona and we'd love to help you as well." - **Thomas Shultz, Managing Partner**

Medicare Workshops

1 Hour Presentation - Everything you need to know about Medicare. We explain how Medicare works and what you can expect before you choose!

THIS PRESENTATION HAS BEEN APPROVED BY MEDICARE

Mesa Dobson Library
Dobson Meeting Room
2425 S. Dobson Road
Mesa, AZ 85202
Monday, February 24th
4:30pm to 5:30pm

Peoria Sunrise Library
Community Room
21109 N. 98th Ave
Peoria, AZ 85382
Wednesday, February 26th
5:00pm to 6:00pm

Mesa Red Mountain Library
Program Room
635 N. Power Road
Mesa, AZ 85205
Thursday, February 27th
6:00pm to 7:00pm

Register online at
AZMedicare101.org

Or call us to reserve your FREE SEAT at
(480) 405-8444

"As a fiduciary, it is our responsibility to make sure that both the Health and Wealth areas of your retirement have been planned for accordingly. You can't have a sound financial plan without addressing both and here at LyfeAdvisors we believe that it starts with Healthcare! For the last 13 years, we have been helping thousands of retirees all throughout Arizona and we'd love to help you as well." - **Thomas Shultz, Managing Partner**