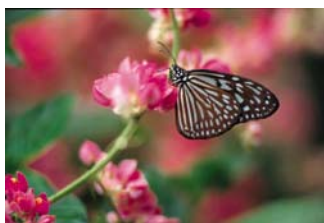


CLIENT NEWSLETTER



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Spring is Here!

LETTER FROM THE PRESIDENT

Dear Clients,

This quarter's newsletter was designed to reveal **the truth** as it plays out in today's horrific media manipulations. My time in Washington, DC and Tallahassee was very revealing as to the divisions in political parties, agendas, and focus. I was always taught *a house divided would never stand*. It's my observation that a consumer driven focus, which is the whole purpose of our Congress, Senate, and House appears to take second place.

Inside this newsletter you will find the opinions regarding healthcare of the three remaining candidates running for President of the United States. Our Governor here in the State of Florida has recently proposed a limited benefits solution to Florida's uninsured and underinsured market. **Consumers beware of the political agendas involved in such frivolous band-aids.** A limited benefits product is what it is: limited benefits. Several years ago Hillary proposed a similar solution, and the same proposal has come up both State-wide and Federally since.

Frivolous why? A limited benefits policy traditionally

covers two doctor's office visits a year, and consumers who exhaust that limited benefit self fund after that. For hospital services, a limited benefit plan would pay anywhere from \$100 a day to \$1K a day, and then the consumer self funds after that. What if your hospital bill for a three-day stay totaled \$30K? For example, \$1K/day x 2 = \$3K. A limited benefit would feel useless to a consumer who seeks a viable solution to today's healthcare crisis and now is exposed to a \$27K loss.

According to National and State statistics, the real issue of healthcare costs today is the rising cost of healthcare itself. Inflation is out of control in this industry. Lifestyles are as well: habits such as smoking, drinking, obesity, lack of exercise to name a few. Over-stressed Americans have played havoc on the average American's auto immune system. Consider: 20 years ago a medical test consisted of an X-ray and blood work. Today? Injectable MRIs, ultrasounds, upper & lower GIs, CT scans, colonoscopies, mammograms, and extensive DNA testing when blood work is done. Today all of these are con-



sidered regular testing. Perhaps Americans should not be so caught up in the political notions from above but instead truly look up and **seek the truth** and demand lower costs of healthcare, a consumer driven solution, and take responsibility for their lifestyle and habits and be proactive versus reactive to this crisis.

As promised, over the next few months I will continue to **seek the truth** for both myself and each of you and will do so for us, our freedom to change, and our free enterprise healthcare system in America. Stay tuned.

In addition, MSA is happy to announce several new additions to our growing staff, as noted on Page 2.

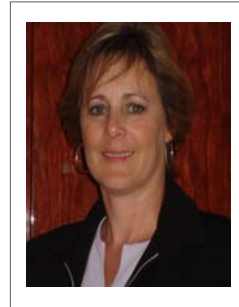
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Maryann@msamarketing.com

WELCOME JEFF & MELODY!

MSA is pleased to introduce new members to our Corporate team: Jeff Sadler, Long Term Care & Disability Liaison, and Melody Overland, Corporate Sales Associate.

Jeff Sadler began his career as an underwriter in the disability income brokerage division of the Paul Revere Life Insurance Company following his graduation from the University of Vermont in 1975. Disability income and long term care insurance have been the primary focus of his career, leading to the founding of Sadler Disability Services, Inc with his father, Raymond Sadler, in 1989.

Over the last several years, he has authored a number of insurance books, including *the Long Term Care Handbook* (3 editions—1996, 1998, and 2003), *How To Sell*

Long Term Care Insurance (2001 and 2006), *Disability Income: The Sale, The Product, The Market* (2 editions—1991 and 1995), *How to Sell Disability Income* (2005), and *The Managed Care and Group Health Handbook* (1997), all published by the National Underwriter. Other books include *Business Disability Income* (1993) and *Understanding LTC Insurance* (1992).

He has been very active in the industry, currently serving as a member of the National Association of Health Underwriters' Long Term Care Working Group. He is a past president of the Central Florida Association of Health Underwriters, the Florida Association of Health Underwriters, and the Central Florida General Agents and Managers Association. He is a past

winner of the Stanley Green-spun Health Insurance Person of the Year award and the NAHU Distinguished Service Award.

Melody Overland brings with her a previous career that focused on 27 years of business development, people skills, and retail services through ownership of her own Design Studio in which she offered a diverse array of services: hair design, various skin & body services, and permanent cosmetic make up. She joined a US Design Team that afforded her travel throughout the US and Europe to train with top colleagues.

Melody came to the insurance industry in 2003 through Voluntary Benefits. There she had the opportunity to further her education and branch out into all phases of the industry. She became a member of the

Tampa Association of Independent and Financial Advisors and is serving as Co-Chair for the Government Relations Committee. Her desire is to become a board member and make a difference in our industry.

Melody is a volunteer for the Red Cross Disaster Team and also volunteers for the ASPCA animal shelter as a Feline/Canine foster "parent". Her other passion is the care pregnancy center where she has had the opportunity to serve as counselor to pregnant teens.

Melody's goals at MSA are to continue educating the public on healthcare options as well as assist the client with goal development that will protect families and their assets. She aspires to further her personal goals through continuing education that afford various designations in our industry.

LEGISLATIVE CORNER

CANDIDATES' POSITION ON HEALTHCARE

Senator Hillary Clinton



Following is a review of the finer points of Senator Clinton's current proposal.

Individuals and employers would be able to purchase their health insurance coverage in three ways:

1. They could purchase traditional private coverage
2. They could buy into an expanded version of the Federal Employees' Health Benefit Plan (FEHBP)
3. They would have the opportunity to purchase a public version of the Health Choices Plans.

The public plan would be based on the Medicare infrastructure.

In addition to creating two purchasing options for individuals and businesses, Clinton would place coverage requirements on both. Her plan offers no specifics but appears to endorse an individual mandate for coverage by stating, "Individuals will be responsible for getting and keeping insurance in a system where insurance is affordable and accessible." She would also impose an employer mandate to provide coverage on large employers and require them to contribute toward the cost of premiums.

Clinton feels that in a reformed system where all Americans are covered and risk is spread extensively, administrative costs would be dramatically reduced. It is NAHU's (National Association of Health Underwriters) observation that in every state that has attempted to limit the ability of health plans to rate for insurable risk and instead has mandated some form of community rating combined with guaranteed-issue, the result has been much higher rates for all insured individuals—not the cost savings Clinton predicts.

Clinton's plan calls for the creation of a new government agency to fund private and public research on the best and most efficient treatments and pharmaceuticals. Her plan also provides a vague outline of potential tax credits for individuals and businesses. The credits would be indexed over time and designed to make consumers more price-conscious when making health plan choices.

Clinton proposes refundable tax credits for small businesses to help them finance coverage for their employees. To qualify, small employers would have to offer "quality coverage" and "benefits like what members of Congress receive." The plan suggests groups of 25 and less could receive a 50% premium credit and medium-size employers could get less. She also proposes a limited tax credit for qualified private and public retiree health plans to help offset catastrophic medical expenditures. And finally Clinton would expand Medicaid and SCHIP to cover more childless adults.

Senator John McCain



Senator McCain is convinced that containing medical care costs is the key to a successful health reform program. Furthermore, he would promote "rapid deployment of 21st Century information systems."

To reduce pharmaceutical costs, McCain plans to encourage the development of generic and biologic drugs. He supports allowing prescription drug importation from other countries, and would develop unspecified safety protocols to protect Americans from the potential dangers of imported medicines.

McCain is in favor of tort-reform legislation that he hopes will eliminate frivolous lawsuits and prevent excessive damage awards.

McCain has proposed a number of specific private-market reforms. The centerpiece of his reform ideas would be to eliminate the current federal income tax exclusion for employer-provided health insurance benefits and to replace it with a \$2,500 individual (or \$5,000 for families) federal health insurance tax credit available to all health insurance purchasers both group and individual policies.

Another idea McCain has is to allow for the sale of multiyear health insurance policies, which he believes will be less expensive than traditional annual policies. He would also like to see health insurance policies

sold "across state lines," meaning that a resident of one state could purchase a product that is now currently only licensed and available in another.

McCain supports allowing individuals to purchase health insurance through any organization or association they choose, including their employers, church, or professional association, and through the individual health insurance market. These policies would be portable across all jobs and would imply that these association plan policies would actually be individual policies. Whether or not these plans would have to be fully insured or if they could be self-funded is not noted.

Access to coverage is another area that Senator McCain has prioritized. In particular he wants to provide better access to care to the temporary and chronically uninsured, as well as those living in areas where access to physicians is often limited.

Senator Barack Obama



Senator Obama has put forth the most conservative health plan of all the Democrats, although it still involves much more government intervention than any competing Republican proposal. He is working on a bipartisan health insurance reform bill.

CANDIDATES' POSITION ON HEALTHCARE CONTINUED FROM PAGE 3

Obama has put forth a three-part plan to improve the nation's healthcare system.

Part one would involve working with states, employers, and private health plans to guarantee coverage for every American. He proposes creating a new public insurance



program to be made available to uninsured Americans who do not qualify for Medicaid or SCHIP or do not have access to em-

ployer-based coverage. This new government program would offer coverage on a guaranteed-issue basis, and the benefit design would be based on the FEHBP model and be inclusive of preventive care, maternity, mental health care, and disease-management programs.

Obama plans to offer fair premiums for this coverage as well as minimal deductibles and co-payments, but amounts are not specified. He also plans to offer subsidies for low-income individuals who do not qualify for either Medicaid or SCHIP, but the amount is not included in his plan details.

Obama feels his new public plan will save money in that it will require limited paperwork for enrollees and providers. How licensed health insurance producers will be involved in this enrollment process is not noted in his plan.

Obama proposes the creation of a national health insurance exchange "to help individuals who wish to purchase a private insurance plan." It would appear to be structured as a regulatory authority over private insurers. Coverage offered through the exchange would be guaranteed-issue

and premiums would have to be "fair and stable" and could not be determined on the basis of health status. The exchange proposal does not indicate whether or not licensed health insurance producers would be used by the new exchange.

Employers that "do not offer meaningful coverage or make a meaningful contribution to the cost of quality health coverage for their employees" would be required to contribute an unspecified percentage of their payroll toward the new nation health plan.

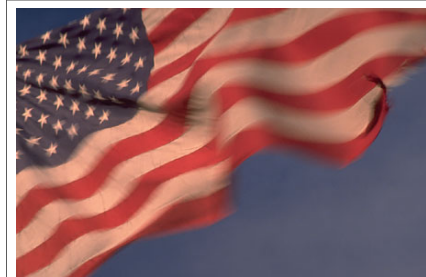
The second part of the plan involves ideas to lower healthcare costs and improve quality of services. He proposes a reinsurance plan for small employers. While NAHU feels that reinsurance program options have the potential to help reduce small-business and carrier health insurance costs, it is important that any such program be structured correctly so as to not negatively affect existing functioning reinsurance markets and pools.

He proposes reducing healthcare costs and supporting patients through increased disease-management programs, use of care-management and medical home models, increased transparency and pay-for-performance mechanisms, and efforts to reduce disparities in healthcare treatments. He also supports requiring hospitals and providers to collect and publicly report costs and quality measures like data on preventable medical errors, staffing ratios,

hospital-acquired infections and disparities in care and cost. Consumers and providers will have decision-making tools available to them.

Unlike other Democratic candidates, Obama recognizes the impact that the cost of medical malpractice insurance is having on our nation's health expenditures. He favors "strengthening antitrust laws to prevent insurers from overcharging physicians for their malpractice insurance."

To reduce costs, Obama is proposing major changes to the insurance and pharmaceutical industry and private Medicare plans. For the pharmaceutical industry, he plans to allow for reimportation of prescription drugs from other countries, provided the drugs are safe and costs are lower. He would increase the use of generic drugs and "prohibit large drug companies from keeping generics out of the market."



Finally Obama would repeal the ban on direct negotiation with drug companies by the federal Medicare program and slash reimbursements to providers participating in private Medicare Advantage plans.

The final part is a focus on preventive care, wellness, and public health. He will lead an effort to develop national and regional public health strategies and undertake a review of federal policies and programs including agriculture, educational, environmental and health policies to assess and improve their effect on our national public health.



2nd Quarter Meetings:

*GCHU Board Meetings
April 1, May 6, June 3
at the Sarasota Library on
Fruitville*

*GCHU Membership
Meetings
April 14, May 12, June 9
at the Bonfish on
University in Sarasota*

*Michele will represent her
clients at both meetings.*

GoldenRule®

A UnitedHealthcare Company

HSA ACCOUNT UPDATES

OptumHealthBankSM

Please note: On March 3, 2008, Exante Financial Services and Exante Bank began operating as OptumHealth Financial Services and OptumHealth Bank, respectively. New Health Saving Account Cards and a PIN mailer were sent out to customers in separate mailings. Once the card is activated by the customer, it can be used it at:

- Any point-of-service location (such as a doctor's office or pharmacy) that accepts MasterCard® debit cards.
- Any ATM displaying the MasterCard brand mark (\$1.50 per transaction).

In addition to OptumHealth's fee, the bank/ATM you use to withdraw finds will charge you its own fee (variable by bank) for the transaction).

Your customer can get their account information day or night, through:

- Toll-free customer service—representatives are available to assist you Monday through Friday, 9 am to 7 pm Eastern time at 1-866-234-8913.

- Interactive voice response for self-service, 24/7
- OptumHealthFinancial.com

If you have not yet begun funding your HSA account, Optum is a great solution. To open your account, you may call Optum direct.

If you have any questions, please call our office for details!



Tips on Efficiency

As you're completing your time log, place a check mark or some special notation alongside any activities that were affected by such time robbers as:

- *Interruptions (on the phone or in person)*
- *Tasks that should/could have been delegated*
- *Procrastination or indecision*
- *Unclear priorities*
- *Lack of productivity*
- *Putting out fires (crisis management)*
- *Lack of personal knowledge or training to do the task at hand*

Take special note if the same one or two of these time robbers pop up again and again. That's valuable information.

After two weeks, summarize the hours into the categories you've established and study the results. Any surprises? Do certain things jump out at you? Are some activities taking a greater percentage of your time than you expected?

Don't expect what you don't inspect.

LETTER FROM THE PRESIDENT CONTINUED FROM PAGE 1

Please welcome **Jeff Sadler** and **Melody Overland**.

Based on MSA's commitment to the baby boomers desperately needing for asset protection vehicles, MSA has added to our Staff nationally renowned Long Term Care and Disability author Jeff Sadler. Please welcome his assistance and feel free to contact him at 941-753-0031 to review any current policy you have or to ask any questions you may have in

either of these areas.

MSA would also like to welcome our newest addition to our health insurance department, Voluntary Specialist Melody Overland.

My time of late has been redistributed to developing solutions in today's health-care industry. While other solutions based competitors have dropped health-care out of their portfolios, MSA is committed to maintaining its focus and interest in consumer driven

solutions. I believe Melody and the other staff members to come in 2008 will support these efforts. Please welcome Melody and feel free to contact her any time at 941-753-0031.

Respectfully submitted,

Michele

LONG TERM CARE CORNER

Long term care costs – they are adding up fast!

Most of us aware of long term care but very few have done anything to plan for it in advance. Yet, every week more news comes in that should make this a more pressing issue to be resolved. For example:



1. The current cost in 2007 of a one-year semi-private nursing home stay is \$68,985, according to the Mature Market Institute. To put this in context, the average full four-year college degree in the US, including room, board, and tuition for public colleges is \$51,184, 25% less than a one-year

skilled facility stay. If we worry about financing children's college costs, how would we ever pay for LTC facility stays?

2. Instead of planning ahead, most of us are often forced to utilize family members as caregivers due to these high costs. Respondents to a 2007 survey of family caregivers report annual estimated out-of-pocket caregiving expenses of \$5,531, an amount representing more than 10% of the median income (\$43,026) of those surveyed, according to the National Alliance for Caregiving in November 2007. The most commonly

cited costs included food and household items, travel costs, care co-payments, and pharmacy costs.

3. Over 10 million Americans need long-term care services and support to assist them with life's daily activities, according to the Kaiser Family Foundation in December 2007. Moreover, they cited, that 42% of those in need are under the age of 65.

MSA has a variety of solutions to assist with your planning for long term care costs in the future. These solutions are imperative to protect your retirement and other assets. Be proactive and plan now!

UPCOMING EVENTS!

Our offices will be closed on May 26 in observance of the Memorial Day holiday. MSA would like to thank all of our veterans who have fought for our freedom in America. We at MSA understand and know **FREEDOM IS NOT FREE!** To all of our clients, our sympathy goes out to you for your losses.



As MSA strongly believes in **Independency**, our offices will be closed the entire week of the 4th of July in observance of **Independence**. July 1, from 4:00 pm to 7:00 pm, we are inviting all of our clients to come to our office for a celebration of **Independence**. Please mark your calendars now to stop by and celebrate our country's blood bought freedom in America!



INSPIRATION TO LIVE BY

There was a chemistry professor in a large college that had some exchange students in the class. One day while the class was in the lab, the professor noticed one young man, an exchange student, who kept rubbing his back and stretching as if his back hurt.

The professor asked the young man what was the matter. The student told him he had a bullet lodged in his back. He had been shot while fighting communists in his native country who were trying to overthrow his country's government and install a new communist regime.

In the midst of his story, he looked at the professor and asked a strange question. He asked: "Do you know how to catch wild pigs?" The professor thought it was a joke and asked for the punch line. The young man said that it was no joke.

"You catch wild pigs by finding a suitable place in the woods and putting corn on the ground. The pigs find it and begin to come every day to eat the free corn. When they

are used to coming every day, you put a fence down one side of the place where they are used to coming. When they get used to the fence, they begin to eat the corn again, and you put up another side of the fence. They get used to that and start to eat again. You continue until you have all four sides of the fence up with a gate in the last side. The pigs, which are used to the free

corn, start to come through the gate to eat that free corn again. You then slam the gate on them and catch the whole herd. Suddenly the wild pigs have lost their freedom. They run around and around inside the fence, but they are caught. Soon they go back to eating the free corn. They are so used to it that they have forgotten how to forage in the woods for themselves, so they accept their captivity."



The young man then told the professor that is exactly what he sees happening in America. The government keeps pushing us toward Communism/Socialism and keeps spreading the free corn out in the form of programs such as supplemental income, tax credit for unearned income,

tax cuts, tax exemptions, tobacco subsidies, dairy subsidies, payments not to plant crops (CRP), welfare,

medicine, drugs, etc. while we continually lose our freedoms, just a little at a time.

One should always remember two truths: There is no such thing as a free lunch, and you can never hire someone to provide a service for you cheaper than you can do it yourself.

God help you when the gate slams shut!

The government keeps pushing us toward Communism/Socialism and keeps spreading the free corn out in the form of programs



RECIPE CORNER

A REFRESHING (AND LOW FAT!) SPRINGTIME CAKE! ANGEL LUSH WITH PINEAPPLE

1 Can (20 oz) of DOLE® Crushed Pineapple, undrained
1 pkg (4-serving size) JELL-O® Vanilla Flavor Instant Pudding & Pie Filling

1 cup thawed COOL WHIP® Whipped Topping
1 prepared angel food cake
Seasonal Berries

Mix pineapple and pudding in bowl. Gently stir in whipped topping

Cut cake horizontally into thirds

Spread one-third pudding mixture over bottom layer of cake. Top with second layer. Repeat layering, ending with pudding. Refrigerate at least 1 hour or until ready to serve. Garnish with your favorite seasonal berries.



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Bradenton, FL 34207
6513 14th Street West # 139



Mission

*MSA Marketing is a unique mentoring agency which strongly believes in independency. We equip clients and colleagues with the tools and strategies necessary to access financial success. **Our agents represent the entire industry, not a specific company**, and educate and inform their clients with these tools and strategies as opposed to just selling them products. **Our agents have the opportunity to be vested**; therefore, they are in business for themselves but not by themselves.*

Vision

MSA Marketing's vision is to secure pension-like retirement income streams and debt free lifestyles for its clients and colleagues, while at the same time teaching both to save the free enterprise healthcare systems in America through Health Savings Accounts.

Goal

Educate and inform clients and colleagues by providing mentoring strategies and tools to assist both in understanding the simplicities of the health and financial service industries.



*Let your "Yes" be yes, and your "No", no . . .
James 5:12b*

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