

Training on How To Lower Healthcare Costs for Families, Companies, and the Nation

This Series by J. C. Spencer is dedicated to the vast army of individuals with a passion for helping others and a concern about the rising costs of healthcare. This Healthcare Plan as it unfolds is a Plan that YOU can get involved with by helping educate others within your own sphere of influence. Do not take this Plan lightly because IT WILL WORK. Every component has been tested. It is based in education and taking step-by-step action which can make for a better life for your family while saving money. Every participant and volunteer within this army for healthcare change can feel safe working within this Plan regardless of what he or she is doing today. The Plan is not to ask anyone to sell or promote any product or service. We will make available FREE information plus other Educational materials to readers through our Book Store and Store Front. Individuals, other non-profit organizations, companies, physicians, healthcare professions, and the general public may wish to participate in our Affiliate Program to help share this knowledge with others. Study the FREE material available and invite others to discover how, together, we can have a growing impact and actually lower the cost of healthcare for your family, your company, and yes, the nation. Local publications, newspapers, and magazines are welcome to reproduce this Series in unedited version as long as the exact following credit is used: This article is reproduced with permission from J. C. Spencer and The Endowment for Medical Research, a 501(c)(3) non-profit public charity based in Houston, Texas. More information is available at www.endowmentmed.org

Training on How To Cut Healthcare Costs Has Begun

We will be posting here a detailed step by step plan how individuals, families, and governments can slash healthcare costs in very deliberate ways while improving evidenced based healthcare.

The answer to the healthcare crisis is TO STAY WELL.

Of course, we all know that, but the public has been thinking in the drug box. Prevention is not in the drug box. Addressing the cause instead of the symptom is thinking outside the drug box.

Healthcare costs, let me rephrase that, sickness care costs are out of control and causing families and companies (large and small) to face bankruptcy. Health insurance is out of reach for more and more families. Insurance companies are increasing premiums every opportunity they can.

What is a family to do?

Become aware, become educated in ways and means that the general public does not know for staying well and about how to save money in healthcare costs. This website is dedicated to the purpose of education. I address much of this concept in my book, ***Expand Your Mind - Improve Your Brain***, and will be expanding on those thoughts in this section of the **Sugar Science Forum** and in this educational media.

Stay tuned for some new food for thought.

First installment for cutting healthcare costs.

The Wall Street Journal recently printed an article entitled ***Dealing with the Cost of Alzheimer's*** which you can read at the end of this installment about cutting healthcare costs. Rising healthcare cost is becoming more serious and bringing down corporations and destroying the life savings of families.

In helping set the stage for our detailed plan for cutting healthcare costs, let me quote brief statements from my book ***Expand Your Mind - Improve Your Brain*** Chapters 4 and 38 before the *Wall Street Journal* article:

In the mid 1990s, it cost \$1,000,000 to store a terabyte (TB) of information in a computer. Today that same amount of data can be stored for less than \$300 on disk and only \$60 on tape. Solid state capabilities may soon bring that cost even lower.

Storage capacities are now being measured in petabytes (PB). A petabyte is 2 to the 50th power (1,125,899,906,842,624) bytes. A petabyte is equal to 1,024 terabytes.

Oh, to be able to have the kind of advancements in healthcare savings that we have had in computers and data storage savings. I submit to you, that IT IS POSSIBLE. Part of that concept was presented at the **Glycomics Medical Conference** by Lory Moore, JD. (The Conference was sponsored by **The Endowment for Medical Research** of Houston, Texas.) I will discuss later in the book ways to cut healthcare costs in America by over One Trillion Dollars (\$1,000,000,000,000) annually. You draw your own conclusion and let me know if you think the plan will work.

Poor memory and poor cognitive activity are devastating, not only for individuals with poor cognitive activity, but for everyone who loves them. I am seeking more practical ways to safely improve brain function because I have seen families experience untold delight as the clock seems to turn back for loved ones with Alzheimer's, Parkinson's, and Huntington's diseases. There is another major benefit. The economic impact on healthcare costs could be savings in the billions of dollars.

My objective and calling is to help discover ways to safely improve brain signals. It may be by learning how to best activate more neurons and cause a proliferation of more functional

neurons.

A friend, whose husband has Alzheimer's, told me that after giving him a particular nutritional supplement, she had noticed more positive cognitive activity WITHIN MINUTES. I told her that was impossible because the capsule could not dissolve that quickly. She responded that she had taken it out of the capsule and put the nutrient in his apple sauce.

Wow! This anecdotal information was significant. Brain activity had been triggered quickly. I knew we were onto something very exciting, but how could we prove it? By applying reverse engineering, we may be able to determine what is actually happening. The supplement that the spouse of the Alzheimer's patient had given him was a special blend of a standardized dioscoria precursor complex to dehydroepiandrosterone. The amount of dehydroepiandrosterone in your brain is normally six and one half times as much as the amount that is in your bloodstream, but according to Ward Dean, MD in his book *Smart Drugs*, it is much decreased or missing in Alzheimer's patients.

My objective is to discover every possible way for improving brain function, with the foremost thought of, "DO NO HARM", and then design an integrated system that will work better than any single component. As you read this, you may be surprised at what you discover about how to make the brain work more effectively.

Special events, a particularly pleasant event or an event you choose to participate in, holds a hierarchical organizational place in the brain. The time period around that event will remain clear in your memory years later. Your perception of an event determines if it is positive or negative. Your attitude affects your whole nervous system and determines if event data are stored for your good or your harm. Your neurons are trained to be receptive to your will. Now, that's a quantum thought.

Going to Chapter 38, I wrote:

Integrating glycomics with standard of care has the possibility of delaying the onslaught of dementia, Alzheimer's, and other neurodegenerative diseases.

The economical impact this discovery can have on the nation is astounding. There are currently some six million (6,000,000) Alzheimer's patients in the United States with an expected fifteen million (15,000,000) within the next few years. The current cost of caring for these victims is estimated at \$75,000 per person year per year. That is an annual economic burden of four hundred and fifty billion dollars (\$450,000,000).

Delaying the onset of Alzheimer's for 15 million patients just one year could result in a national savings of \$1.125 trillion (\$1,125,000,000,000) minus normal living costs, still leaving a savings of approximately \$1 trillion.

Now the *Wall Street Journal* article.

Dealing With the Cost of Alzheimer's

When Theresa Kraus's mother was diagnosed with Alzheimer's disease in 2005 at age 87, Ms. Kraus figured that she could manage the health-care bills if she combined her mother's savings and her own. But the size of those bills proved larger than anyone anticipated.

To start, the mother moved in with Ms. Kraus, who had to pay for care almost 24 hours a day, seven days a week. An extra person in the house meant higher costs for food and utilities. Additional expenses -- including medicine, co-payments for doctors' visits and adult diapers -- amounted to \$200 to \$300 a month.

By the time her mother passed away in March, Ms. Kraus had run through her mother's savings -- as well as the money that Ms. Kraus had put aside for her daughter's college education. Ms. Kraus, a teacher in Rochester, N.Y., is now tens of thousands of dollars in debt. She says she doesn't regret a penny of the money spent, but adds that the impact on her finances was devastating.

"You never think you are going to outspend the money you [have] saved," she says.

An Alzheimer's diagnosis is the start of a long, hard road. Naturally, health-care questions must be resolved, but at the same time, families need to address a host of financial issues. They range from the logistical -- tracking down deeds or making sure family members have access to bank and savings accounts -- to budgeting and assessing the potential costs of care.

"These are conversations that need to be had early and often," says Donna Schempp, program director for the California-based Family Caregiver Alliance.

Patients Participate

Tackling tough questions at the outset can give Alzheimer's patients the chance to express their wishes, which can go a long way toward avoiding family disputes down the road.

"People in the early stage of the disease, no matter how old, can still retain a lot of abilities and be able to participate in their own planning," says Peter Reed, senior director of programs for the Alzheimer's Association.

Legal issues, such as determining who will have power of attorney once the person is no longer able to make decisions, should be a top priority. Says Marguerite Angelari, an elder-care law professor at Loyola University Chicago School of Law: "Decision-making capacity is going to start to decline...and, if needed, you want to be able to have someone step in immediately."

If the person with Alzheimer's lives on his or her own, household bills should be sent to someone else, and others should have the ability to monitor spending. "Sometimes when

people are in the early stages of dementia they spend money inappropriately or build up unpaid bills because they aren't able to keep track," Ms. Angelari says.

Outlining a potential budget can help avoid unpleasant surprises later.

If there's a long-term-care insurance policy, review details of the coverage. And as daunting as it seems, when considering questions about home care and nursing homes, talk to an expert on your state's Medicaid to understand eligibility rules.

That kind of help can sometimes be found at a state agency on aging, in the office of an elder-law attorney, or with an organization such as the Alzheimer's Association, which has staff members who also offer help on setting up a budget.

Central to financial planning will be decisions about where the care will take place, such as an assisted-living facility, nursing home or in a family home. Continuing-care retirement communities have grown in popularity, but they generally require a large initial investment. Adult day care is more common, but also comes with a cost.

Paying Family Members

Some family members will want to help provide care. For those thinking about quitting a job or working part time, be sure to weigh the costs beyond losing a salary. Such a move will cut into retirement savings and Social Security, not to mention potentially lead to the loss of medical insurance.

One increasingly popular option is to have a family member act as a paid caregiver. But that approach is more complicated than just writing a check; if you end up applying for Medicaid, such payments could be viewed as transfers of assets, which could delay eligibility. The solution is to have a so-called personal-care contract put in place, which specifies the care being provided and the pay.

"You want to formalize it as much as possible," says Loyola's Ms. Angelari. "And you want to work with an attorney that doesn't just know the state law; you want one that knows what's going to be acceptable to the Medicaid office."

Then, as Ms. Kraus found out with her mother, expenses pop up unexpectedly. In addition to adult diapers, many people with advanced Alzheimer's may need costly liquid nutritional supplements. If there are physical impairments as well, home modifications may be needed.

Getting Started

To get started, a number of resources are available online. Both the Alzheimer's Association (alz.org) and the Family Caregiver Alliance (caregiver.org) provide tip sheets with an overview of the many issues to consider, as does the National Institute on Aging, at www.nia.nih.gov/Alzheimers.

The Alzheimer's Association also has a hotline, 1-800-272-3900. It's staffed 24 hours a day.

The National Institute on Aging can be reached at 800-438-4380.

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http://online.wsj.com/article/SB121408672863794575.html?mod=googlenews_wsj

Second installment for cutting healthcare costs.

Healthcare costs are a major danger to families, companies, and in fact, the country as a whole. Two factors that are a danger to our economy are HEALTHCARE and ENERGY. I am convinced that as we put our focus on healthcare (instead of sickness care) WE CAN LOWER COSTS along the same pathway that computer technology has been lowered. Over the last number of years while there have been great advances in computer technology, the costs of that technology has come down.

My first computer did not even have a hard drive and cost (if I recall correctly) around \$10,000. It was a console and operated with two large floppy drives. The first hard drive computer I bought was 10 Mega bytes (Mb) and the salesman told me that I would never fill it. Now we are dealing in really big bytes: gygabytes, terabytes, and petabytes. If computer scientists had continued to think in the same box they were thinking in when I bought my first computer, we would all be living in that same very expensive box. The plan was to always improve the technology, make it better for less money.

The general public and healthcare professionals have been thinking in the pharmaceutical box. And the pharmaceutical box has become very expensive. I am told that it costs approximately \$600 million to get a label claim on one accepted drug. Others have told me that the figure of \$600 million is not correct. In fact, it is closer to averaging \$1 billion per drug because, to keep the figure lower, they roll into the calculation other failed drugs that were not approved. I have no exact figures to support that assumption. But we can all agree that the drug box is too expensive.

More of the general public, more companies, and more physicians are understanding that something must be done but they do not know what to do. Insurance companies do not want to contribute to lowering healthcare costs because the higher the costs, the higher the premiums, the more money they make. Instead of having a genuine concern for the well being of others, greed has almost consumed the sickness industry. The doctors are caught in the middle, uneducated in knowing what to do. They have been living for too long in the pharmaceutical box. And like the fleas in the jar that keep hitting the lid, they cannot jump out when the lid is removed because they have been conditioned.

The plan that I will present in my next installment for lowering healthcare costs will include so much more than my just saying, "Study and use glycomics." It will include saying, "The answer to the healthcare crisis is STAYING WELL." The plan will call for helping people focus on the pathway of wellness and prevention instead of sickness. The plan will call for more education in what is available outside the drug box that is a lot lower in cost without the harmful side effects.

To accelerate the inevitable paradigm shift in sickness care to wellness will require a number of factors.

(a) An understanding that a really great idea or new concept normally takes forty years marching around the mountain of confusion before it is accepted. It took about that long after the medical community learned that lemons and limes TREATED and CURED SCURVY. It is reported that over a million people died of scurvy between the time they knew what to do and the time they actually did it. And still today we are not allowed to put a label on the lemon. Glycomics is about twenty years old. The lemon is evidence based and the public demand it. Glycomics is evidence based and the public will demand it.

(b) It will take education, education of the general public and education of the physicians and other healthcare professionals. That is our dedication.

(c) But proper change cannot be made quickly when there is such a strong attraction for the status quo that the change will cost more time and/or money to make the change. Why would anyone want to make a change to something better when the something worse is paid for by the government or insurance? Only the educated would do that. Why would a sick person want something better when it is easier to just let the others take control and solve the problem while someone else pays for it?

(d) It will require a person taking control of his or her own life. But if it still costs more, that is a difficult choice even though he knows it is the best thing to do.

So, to lower healthcare costs, it will certainly help if we can see money saved instead of seeing increased costs. If families can save money for thinking outside the drug box and have a giant team looking out for their well being, then they will be willing to consider the new plan.

A lot of pieces have to be put in place and all this sounds so complicated, but I assure you that in my Third Installment for Cutting Healthcare Costs, IT WILL BE EXPLAINED AND IT WILL BE CLEAR AND IT WILL BE SIMPLE. AND IT WILL EVEN BE LEGAL.

The format for making sure the plan is easily understood, I will have a training area to be viewed. To introduce the plan, we will also have an introduction similar to what we have for explaining why you would want my book, Expand Your Mind - Improve Your Brain. (Link to this introduction is found in the wording directly under the book on the Home Page at www.endowmentmed.org) Another example is the introduction to why a person would want

to use the healthful sugar trehalose. That link is also found on the Home Page under the picture of a bag of trehalose.

Stay tuned for the Third Installment for Cutting Healthcare Costs.

Third Installment on cutting healthcare costs - Count Down to the National Access to The Plan

We are getting closer to unveiling the plan to lower healthcare costs. In fact, some major pieces of the plan will be revealed in this article. Within the next few weeks, I will take the lid off of the National Access Plan for lowering healthcare costs in America, in all fifty states. Each piece of the plan now has government approval in all fifty states.

You ask, "Is there really an answer to the healthcare crisis? One of our corporate partners in the plan recently conducted a survey of its customers. The results of the survey were very interesting and surprising. A vast majority of our partner's customers believe, according to the survey, that national healthcare or national insurance for healthcare will handle their health [challenges]. I believe these customers are wrong. The owner and CEO of this company (one of our partners) believes the vast majority of his own customers are wrong.

In his response to the survey, he and I agree completely. In this article, I have blended his words and mine below.

Let us all understand: our healthcare (really sickness care) system is in crisis. It is broken. Quite simply, it does not work. As a result, no one can afford to get sick whether he or she has insurance or not.

OUR HEALTHCARE SYSTEM DOES NOT WORK for a person to wait until he or she is sick, injured, or becomes seriously ill to address healthcare issues.

OUR HEALTHCARE SYSTEM DOES NOT WORK for us to do screenings which result in treatments using prescription drugs that deplete our bodies of essential and/or vital nutrients. The difference in essential and vital in the mind of the FDA is that essential means that your body cannot manufacture that nutrient (as in vitamin C). Vital in the rules of the FDA indicates that although you need that nutrient, your body can manufacture it naturally. Normally, however, requires more time and energy than you have. Your body just **DOES NOT GET AROUND TO PRODUCING THE VITAL NUTRIENTS.**

Most people have no idea that different drugs deplete our bodies of these nutrients that often causes a compounding of the health challenge. To verify what I am saying, go to the search engine (Dogpile, Google or what ever) on your computer and type in three

words: (1) name of drug in question; (2) side; (3) effects. That will give you more information than you wanted to know. Qualified sources, studies, and reports will allow you to arrive at your own understanding.

Missing nutrients may cause stroke, cancer, and depression. One very simple example is food containing vitamin C. Without this nutrient, you will get scurvy. Every nutrient has a benefit and the depletion of that nutrient can be catastrophic. Ask your doctor if he knows the nutrient or nutrients that are depleted because of the drug you are taking? When you are on virtually any drug, **THAT DRUG CAN SERIOUSLY COMPOUND THE NEED FOR NUTRITIONAL SUPPLEMENTATION.**

Depletion of vital nutrients with drugs is the reason those who are under sickness care are in even more need for supplementation. Research now shows, and is supported by the AMA, that we need nutritional supplementation to remain healthy.

OUR HEALTHCARE SYSTEM DOES NOT WORK even to have the very BEST group insurance in the world and have the rates go up to \$20,000 a year for a family once the policy is used for a serious illness. Many times, the policy is cancelled altogether.

OUR HEALTHCARE SYSTEM DOES NOT WORK if insurance does not pay to keep you healthy but pays hospitals to fill beds.

OUR HEALTHCARE SYSTEM DOES NOT WORK if insurance does not pay to keep you healthy but pays doctors to do surgeries.

OUR HEALTHCARE SYSTEM DOES NOT WORK if insurance does not pay to keep you healthy but pays higher and higher costs for dangerous toxic pharmaceutical drugs when they are not needed. I am not saying they are never needed. I am talking about their over use.

We all know that the answer to the healthcare crisis is to **STAY WELL.**

Insurance as it exists today IS NOT and WILL NOT be the primary solution to the healthcare crisis.

The **SOLUTION** to the healthcare crisis is for you to have access to **NATIONAL HEALTHCARE** that keeps you healthy and free from disease. The solution is to extend the bio-markers of aging, keep a person well and productive for the benefit of family and society. We should all agree that the longer a person can remain productive to society and family the better is that individual, the family, and society.

Hundreds of Billions of Dollars would be saved IF major health insurance companies paid for natural healthcare providers who have products designed to keep people healthy without drugs and surgery.

Do not wait on insurance companies to do this even if their claims would be reduced in

excess of fifty percent. They will not pay to keep you healthy because their profits are based on the ratio between what they pay out and the cost of insurance. With the high the cost of insurance the more profits they make. Insurance companies want high premiums and a larger and larger cash flow.

For us together to turn around the healthcare crisis will require each of us to take control of our own health and use health insurance only as catastrophic sickness and accident coverage.

You will be able to clearly see and understand the plan I am presenting.

There are eight components, which at first glance seems quite complex, but in reality the plan is simple. It requires all eight components to achieve and work together to give the true meaning of NATIONAL HEALTHCARE that will save families hundred or thousands of dollars, companies thousands or tens of thousands of dollars and the nation literally billions of dollars WHILE THE PLAN IS DESIGNED TO INCREASE THE HEALTH OF THE INDIVIDUAL, FAMILY, AND NATION.

The eight components of the plan are not new but they are uniquely arranged to function properly. About 100,000 individuals have participated in the least used component. The key to the plan is linking the components in such a way they that function together to achieve the best benefit to the family or individual.

Let me give you an example of the importance of the arrangement of these eight components. The arrangement is paramount. In glycomics, the study of sugars, the way molecules are arranged give the sugars their function. The healthful sugar trehalose gives us a graphic example. Trehalose is very simply two glucose molecules. So are some other sugars. So, what makes trehalose so special? It is the bond, the way the two glucose molecules are linked together. One molecule is turned upside down. I had one of the most sophisticated laboratories in the world use different highly technical means to analyze the trehalose molecule and I have written reports that trehalose is pure and nothing more than two glucose molecules.

My point is that the bonding of the eight components together in the plan to lower healthcare costs in America need to be bonded exactly right to achieve the desired functions and have the assurance they will remain bonded correctly.

One of the functions, one of the objectives, of the National Access Plan that I plan to introduce in my next installment is **FOR YOUR NUTRITIONAL SUPPLEMENTS AS WELL AS ALL YOUR HEALTHCARE NEEDS TO BE DEDUCTIBLE FROM FEDERAL INCOME TAX.** If we achieved this one objective it would be outstanding. But, stay tuned, you will be delighted at what you are about to learn and be able to implement very soon.