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MESSAGE FROM THE EDITORS

In 2005, the staff of the brand-new Office of Policy and Publications Development had an idea: to create a magazine that would inform consumers about various facets of the Department of Consumer Affairs (DCA) and what it does, and also to bring the most up-to-date news and features on consumer trends and scams to the public.

Ten years, 38 issues, and more than 60,000 printed copies later, Consumer Connection remains DCA’s flagship publication. Three original staff remain; the rest have either retired or moved on. In the ebb and flow of 10 years, we have covered subjects such as elder abuse, food dating, prescription drug dangers, botched surgeries, landlord-tenant issues, smog checks, mixed martial arts, real estate matters, cybercrime, and much, much more—in English and, sometimes Spanish, through the eyes of five different designers, the voices of at least 10 different writers, and the sharp red pencils of six different eagle-eyed editors.

Why has this magazine been so popular? In large part, the content. The topics we present are current, interesting, and in tune with our audience. Another part? The quality. No matter how short-staffed or how long the furlough, the quality of writing and design remained high.

We are all consumers; what is important to you is important to us.

Along the way, the magazine and its staff have received recognition for their work via State, national, and international awards for design, writing, and photography. The magazine is known both inside and outside of the State. This year, someone posted a photo of a copy on Twitter of our spring issue sitting in the Governor’s Office—the first time that’s happened, as far as we know.

In 2009, we changed our name to the Office of Publications, Design & Editing. In February of this year, we added Digital Print Services to our title as DCA’s print shop came under our umbrella. Did you know that we print almost everything—from licensee letters to consumer brochures and booklets—right here in the building? We do. What you hold in your hand is a magazine written, designed, and printed entirely in-house by DCA staff—no outsiders allowed. Consumer news is our beat.

It always has been, and always will be. We’re proud of that.

And we’re proud to present our 10th anniversary issue. Turn the page; let us know how we’re doing.
You may initially be wary of a medical procedure that is more than 2,000 years old and involves needles. However, the Chinese ancient healing treatment of acupuncture is gaining wide acceptance as a complement or even an alternative to traditional Western medicine. Acupuncture has been shown to effectively treat a variety of health issues, depending on your condition and if you choose an experienced and licensed acupuncturist.

ACUPUNCTURE

Pointing You in the Right Direction
WHY NEEDLES?

In Chinese medicine, health is believed to be from qi (pronounced “chee”), the free flow of energy in your body. Acupuncturists believe disruptions in this flow are what cause illness and ailments, and so the placement of needles in strategic places on the body can provide healing and relief by unblocking the energy flow.

Terri Thorfinnson, Executive Officer of the California Acupuncture Board (Board), says “The foundations of acupuncture focus on restoring balance to the patient. Acupuncture is the healing aspect of our health care system … [and] plays an essential role in health and wellness.”

According to the University of California, San Francisco, Medical Center, acupuncture can be used to treat conditions such as:

- Side effects of cancer treatment
- Headaches
- Chronic neck and back pain
- Chronic fatigue syndrome
- Asthma
- Sports injuries
- Women’s reproductive health issues

Thorfinnson adds that it can also be used to treat diabetes, allergies, immune disorders, and addiction.

WHAT TO EXPECT

A huge advantage of acupuncture is that there are typically very few side effects—and if there are any, they are mild. According to the Board, during a treatment you can expect little or no pain or bleeding; however, there may be slight bruising. Your sessions may also include non-needle techniques, such as moxibustion (heat), magnets, cupping, acupressure, and herbal formulas.

As defined by Business and Professions Code section 4927(d): “‘Acupuncture’ means the stimulation of a certain point or points on or near the surface of the body by the insertion of needles to prevent or modify the perception of pain or to normalize physiological functions, including pain control, for the treatment of certain diseases or dysfunctions of the body … .”

During your treatment, your acupuncturist will select the points at which the needles should be placed. The number of treatments and the size of the needles—which, by law, must always be sterile and disposable, and only used once—depend on your condition.
SAFETY FIRST

The World Health Organization (WHO) states that acupuncture is generally a safe procedure, unless performed by an unskilled and inexperienced acupuncturist or if nonsterile needles are used. If done improperly, acupuncture can cause adverse effects such as infections, punctured organs, collapsed lungs, and injury to the central nervous system, according to a 2014 report by the U.S. Department of Health and Human Services' National Center for Complementary and Alternative Medicine.

Be aware that acupuncture is not the right treatment for all conditions. According to WHO, for health and safety reasons, it should not be used for:

- **Pregnancy**: Acupuncture may induce labor.
- **Medical emergencies and surgical conditions**: Alternatively, first aid should be applied, and you should go to a health care emergency facility.
- **Malignant tumors**: Acupuncture should not be used for treating a malignant tumor. However, acupuncture can be used to manage pain and alleviate side effects of treatments such as chemotherapy and radiotherapy.
- **Bleeding disorders**: Needling should not be used if you have a bleeding or clotting disorder, or if you're on an anticoagulant therapy or taking drugs with an anticoagulant effect.

FINDING AN ACUPUNCTURIST

Acupuncturists in California are licensed and regulated by the Board. To qualify as a licensed acupuncturist, the applicant must complete specific education, training, and exam requirements. The title of OMD, for Oriental Medical Doctor, may be used only by licensed acupuncturists who have a doctorate degree from a California-accredited, approved, and/or authorized educational institute. Physicians licensed by the Medical Board of California can also perform acupuncture, and a dentist or podiatrist licensed in California may also practice acupuncture if it's within the scope of their respective licenses and if they've completed the proper training.

The Board does not provide acupuncturist referrals, but check with friends and family members, as well as professional acupuncture associations—there is a list of associations on the Board’s website, [www.acupuncture.ca.gov](http://www.acupuncture.ca.gov). Once you have a list of possible acupuncturists, go to the Board's website to verify licenses and check for any past or pending disciplinary actions.

“There are many advertisements online for acupuncturists that are convenient, but consumers should check their [license] status on the Board’s website,” says Thorfinnson. Once you find a qualified and licensed practitioner, be sure to ask how many treatments are necessary and how much each will cost. Acupuncture treatment is a mandatory benefit in all health insurance plans in California, so you should call your health plan to find out coverage details.

“Under the Affordable Care Act, each state is given the choice of what benefits are considered ‘essential benefits’ and, therefore, are mandated to be included as a covered benefit in every plan,” says Thorfinnson. “Acupuncture is one of those mandated benefits in California as of 2014.”

For more information on acupuncture and acupuncturists’ licensing requirements, visit the Board’s website at [www.acupuncture.ca.gov](http://www.acupuncture.ca.gov).
The technology has transformed some manufacturing industries. Will consumer use of home 3-D printers continue to grow?

What if you had a favorite fishing reel that was rendered useless when a small internal part broke? If the reel was out of production and the part couldn’t be ordered from the manufacturer, your options would be few:

1) Scour the Internet or possibly trade shows for the possible longshot discovery of the part, or 2) junk it.

But what if you could make the part? Or, more specifically, print it?

Similar predicaments are becoming more common for hobbyists of all types thanks to 3-D printing. Once prohibitively expensive for nearly everyone outside a corporate manufacturing setting, 3-D printing technology has matured to the point that using a desktop 3-D printer at home has become a viable option for many.

While the day is still a ways off when 3-D printers are as common at home as document printers that spit out photos, homework assignments, and event tickets, there are signs mainstream use of 3-D printing may not be as far away as it sounds.

The printers create three-dimensional objects layer by layer from the bottom up, most commonly using molten plastics. Software comes with consumer 3-D printers that adjust settings according to the design of the object being printed.

The 3-D printing industry has grown at a staggering clip in recent years. According to business and statistics website Statista, manufacturers shipped just over 56,500 3-D printers worldwide in 2013. That number is projected to grow to about 244,500 units by the end of 2015 and jump to 2.3 million by 2018.

Both the methods of 3-D printing—also known in the industry as “additive manufacturing”—and the printers themselves vary widely. Commercial 3-D printers are being used to make everything from auto and airplane parts to prosthetics for children to clothes and pills. (In August 2015, the U.S. Food and Drug Administration approved the first prescription drug made through 3-D printing: a dissolvable tablet that treats epileptic seizures.)
Home 3-D printers mostly use a process called, alternately, filament deposition manufacturing (FDM), fused filament fabrication (FFF), or fused filament fabrication (FFF), according to Consumer Reports, which conducted lab tests on three different models of home printers. With this method, plastic filament (basically a thin cord that comes in rolls) is pushed through a heated “print head” that produces (“extrudes”) molten plastic or nylon in thin layers to produce an object.

Consumer 3-D printers are designed to sit on a desk or workbench, typically with a footprint similar to that of a larger desktop document printer. For these models, a typical build volume—or the space in which you create an object—is 6-by-6-by-6 inches to 10-by-10-by-10 inches.

Despite the rapid evolution of 3-D technology, drawbacks of cost and time remain for home users. Dozens of consumer 3-D printer models are available, most in the $300 to $10,000 price range, including many that are DIY kits. Printing times also vary greatly depending on the technology, size of the object, and the complexity of its design—as little as 30 minutes up to more than a day.

A tag for your dog’s collar or a wall-mounted hook for the garage, for example, would be quick and easy projects at home compared to, say, a working mechanical clock with two dozen parts to print. Toys, lamps, jewelry, and small sculptures are all popular objects to print.

For creating designs, Consumer Reports advises that those with “some technical background is ideal, so you’re comfortable using the software to create models.” For those without computer-aided design experience, there are several versions of 3-D modeling software that are free to download and easy to use, according to 3ders.org, which offers a free software list.

The other option for consumers is downloading designs from the Internet. Sites such as Thingiverse and Cubify have a seemingly endless inventory of designs to choose from, many of which are free. The Digital Store for 3-D printer manufacturer MakerBot features designs for a line of housewares by domestic maven Martha Stewart.

While 3-D printing has revolutionized the manufacturing process for many industries, home 3-D printing is still in its relative infancy. Whether a 3-D printer will become less of a consumer novelty and more of a practical tool for the home remains to be seen but, increasingly, it appears to be a possibility.
Be prepared by following these simple tips suggested by the Department of Consumer Affairs’ Bureau of Automotive Repair (BAR):

♦ Check your owner’s manual. Ensure your vehicle is up-to-date on its recommended maintenance schedule including changing the engine oil and filter, and checking the coolant, brake, automatic transmission, windshield wiper, and steering fluid levels.

♦ Carry tire chains. Make sure to have chains if you plan on driving in the mountains or foothills.

♦ Check your vehicle’s antifreeze/coolant level. Check the weather conditions. If you’re traveling in freezing weather, you’ll need to make sure the antifreeze/coolant will provide adequate freeze protection. A quality repair shop has a tool that can check the antifreeze/coolant.

♦ Pack a winter safety kit. Keep the kit in the trunk of your car. Items should include:
  ♦ Battery jumper cables
  ♦ Large flashlight and extra batteries
  ♦ Basic first aid supplies
  ♦ Extra blanket and warm clothing
  ♦ Battery-powered radio with spare batteries
  ♦ Tool kit (screwdriver, pliers, adjustable wrench)
  ♦ Bottled water and nonperishable food
  ♦ Highway safety flares in good condition
  ♦ Windshield ice scraper

♦ Check your car’s battery. Check the battery and battery cables for corrosion, cracks, and dirt. Corrosion and loose cables can affect the battery’s performance.

♦ Have the brake system checked. Visit the BAR website at www.bar.ca.gov to find a licensed brake station in your area. Have the licensed adjuster check the brake system, including pads and linings.

♦ Check your car’s interior and exterior lights. Make sure the turn signals, brake lights, and high beams work. Clean the lenses to get maximum visibility.

♦ Inspect the hoses and belts. Look for cracks, soft spots, or bulges in the hoses and belts. If you suspect a problem, a licensed repair facility can make the necessary repairs.

♦ Test the heater/defroster. Make sure the heater/defroster is working properly.

♦ Check your tires. Regularly check the air pressure in all tires and have your tires rotated at the manufacturer’s recommended intervals. Keep in mind that changes in altitude will affect your tire pressure. Check your tires for excessive wear, including the spare.

♦ Check the wiper blades. Change the wiper blades if worn or cracked, and refill the wiper fluid. Do not replace wiper fluid with water.

♦ Carry a cell phone. Make sure your cell phone is fully charged in case of an emergency.

By following these simple tips, you’ll be ready to hit the road this fall and winter and arrive safely to your destination. For more information, visit the BAR website at www.bar.ca.gov.
TIRE SAFETY

Tire safety and maintenance take on added significance in the winter when roads can be wet and slick. As the only part of the vehicle that has direct contact with the road, tires affect handling, braking, fuel efficiency, and safety. Traction suffers on wet roads when bald tires fail to channel water out from beneath the tread.

Checking your tires regularly is important to keep your vehicle in top shape, and The American Automobile Association (AAA) recommends doing an inspection monthly and always before a long trip. Regular tire checks allow motorists to more easily find a small problem, such as a nail in your tire, before it becomes more serious and expensive to fix. These recommendations from AAA will help you stay safe on roadways this winter.

Inflation

Properly inflated tires are an easy way to maximize gas mileage and extend the life of tires. They should be checked once a month with a gauge that measures PSI (pounds per square inch), and owning a quality gauge is recommended because those built into gas station air hoses are often inaccurate or broken. It’s important to note that recommended tire pressures are for cold tires so a check should be done before the vehicle has been driven.

Over- and underinflated tires can cause uneven wear and may lead to premature replacement. Additionally, the National Highway Transportation Safety Administration says motorists can save as much as 9 cents per gallon on fuel if their tires are properly inflated.

Tread

Good tread depth is essential for adequate traction, and a tread inspection should be part of a monthly tire check. The most accurate tread measurements are made with a simple tread depth gauge, which is available at any auto parts store. The other option for motorists is a traditional quarter test. This is done by inserting a quarter into a tread groove with the top of Washington’s head facing down. If the top of his head isn’t visible, the tire has at least 4/32 of an inch of tread and is in good condition. If the top of Washington’s head is visible, it’s time to consider replacement.

It is recommended to take measurements in three locations across the tire’s tread: 
(1) outer edge, (2) center, and (3) inside edge.

Maintenance

Three maintenance procedures, which should be done by an auto repair professional, are important to extend the life of your tires—rotation, balancing, and alignment. Tires on the front and rear of vehicles operate at different loads and perform different steering and breaking functions, causing unequal wear. For maximum performance and life of tires, it’s essential to rotate them. Well-balanced tires minimize wear. Newly installed tires or those that are repaired should be balanced. Wheel alignment is the measurement of the position of the wheels compared to specifications recommended by the manufacturer. If any alignment measurement falls outside the specified range, uneven tire wear can result, diminishing handling and fuel economy.

RESOURCES

National Highway Transportation Safety Administration: www.safercar.gov
MOBILE PAYMENTS

ARE YOU READY TO BE WALLET-FREE?

There are a variety of mobile payments out there, including Apple Pay, Samsung Pay, Android Pay, and Square Order. You can use a mobile payment to purchase products and services at different retailers, depending on which ones accept them. Some businesses, such as Starbucks and Dunkin' Donuts, have their own apps that you can only use at their stores.

To use a mobile wallet, you enter your credit or debit card information to the mobile payment app on your smartphone. When you want to pay for something at a store, you launch the app and the cashier scans the bar or QR code or you wave your smartphone over the card reader at the register. Then, you further authenticate the transaction with a PIN into a card reader or a fingerprint scan on the smartphone’s home button.

You can also add reward or loyalty cards to some of the mobile wallets, such as Android Pay and Apple Pay, to gain and use rewards. So in addition to your wallet and credit cards, you can leave reward cards or tags at home as well.

The convenience that mobile payment systems provide is a great benefit. But is that enough to make you want to use them?
Consumer Reluctance

Right now, most people are saying, “No.” According to the Federal Reserve System report Consumers and Mobile Financial Services 2015, only 12.9 percent of consumers polled used their smartphone to pay for a product or service at a store.

The top reason is that regular payment methods—credit and debit cards—are just as convenient. Another reason is consumers don’t yet trust mobile payment security, according to a May 2015 Money article. Others are simply not interested and don’t see any true benefits over using regular payment options.

Despite these hurdles, Forrester Research projects that by 2019, U.S. mobile payments will grow to $142 billion from $50 billion in 2014. As consumers recognize the convenience and ease of mobile payments and get more comfortable with security, more will decide to use them on their smartphones. According to Forrester, the largest growth in the mobile payment industry will be purchases made with apps and mobile websites. In addition, peer-to-peer finance mobile payments, such as with Venmo, Google Wallet, and PayPal, will become increasingly popular. Users of these services can, for example, easily split restaurant bills as users can pay each other through the app.

Secure Yourself

As far as security, unlike what many may perceive, mobile payment systems don’t directly access your credit card number and send it wirelessly to the register terminal. Instead, major systems such as Apple Pay and Android Pay use tokenization. Tokenized systems take sensitive data, like credit card numbers, and substitute them with a unique set of numbers and letters, a “token,” that would be meaningless to a cybercriminal. Host card emulation (HCE), is another security technology used in the Google Android operating system; it stores credit card information remotely, and doesn’t rely on chips or storage on the smartphone.

Even with the security layers of tokenization and HCE technology, take all precautions. Don’t leave your smartphone out in a vulnerable place, such as your back pocket or on a café table. Always put a password on your smartphone, and take advantage of any extra security settings, such as the two-step verification process, when available. Also, set up different passwords for each of the apps loaded on your smartphone, and do not access sensitive data or do financial transactions when using a public wireless network.

What’s in It for Me?

From the retailers’ perspective, there are plenty of incentives—retailers generally have to pay less per transaction to a mobile payment company than to a credit card company, can better track customer spending habits, and also speed up the time to complete a customer transaction.

However, for consumers, the incentives are less apparent. A 2014 report by business management consultancy Bain & Company states that “a clearer customer benefit remains the missing piece needed to trigger mass adoption of mobile payments.” Consumers enjoy the novelty factor of using mobile payments, plus the rewards and discounts are appealing. However, the report states that consumers still want more convenience with mobile payments—faster checkouts, the ability to check balances, etc. In addition, the current mobile payment industry and technology is fragmented, so you may be able to use your particular mobile payment at some stores, but not others.

What will it take for you to leave your wallet at home? This remains the multibillion-dollar question as the mobile payment industry and retailers scramble to find the answers.
The debate over whether amalgam (silver) fillings are bad for your health has been going on for at least 100 years. The majority of Americans have fillings (or dental restorations), and many of those restorations are dental amalgam, known as “silver” fillings. Dental amalgam, which contains about 50% mercury, used to be considered safe. The U.S. Food and Drug Administration (FDA) and other agencies now acknowledge that amalgam releases low levels of elemental mercury vapor. Scientists are debating about how much is released, and what levels are considered harmful.

In some countries, dental amalgam is classified as a medicine. The United States Code of Federal Regulations classifies amalgam as a prosthetic device, not a drug. Several countries have banned or restricted dental amalgam on both health and environmental grounds. The American Dental Association (ADA) supports amalgam use, while several small dental associations led by the International Academy of Oral Medicine and Toxicology (IAOMT) are focusing on banning it. Some U.S. cities have passed ordinances aimed at discouraging amalgam use.

Fillings are made of plastic and ceramic compounds. Because the material is tooth-colored, it has been used primarily to repair front teeth. The first resin compounds were not strong enough to withstand the high-pressure chewing in the molar areas; however, in the past 10 years, new technologies allow resins to be used as fillings in back teeth as well.

So what do you choose? The decision is yours. Your dental plan may or may not cover the cost of composite fillings. To find out more about different types of fillings and dental materials, read The Facts About Fillings from DCA’s Dental Board of California: http://www.dbc.ca.gov/formspubs/pub_dmfs2004.pdf. To find a dental professional who offers mercury-free dentistry, just type in mercury-free dentist, California, in the Google search engine; many options will come up. Don’t forget to check the license before having work done by any dental professional at www.dbc.ca.gov.
LASIK surgery is an increasingly popular alternative to glasses and contacts.
Ever since LASIK corrective eye surgery was introduced in the United States in 1998, it has become an increasingly popular alternative for consumers wanting to ditch their glasses and contact lenses.

According to the U.S. Food and Drug Administration (FDA), roughly 700,000 LASIK procedures are performed annually in the United States with a 95 percent satisfaction rate.

LASIK—the common term for laser-assisted in situ keratomileusis—is a procedure that corrects nearsightedness, farsightedness, and astigmatism by permanently altering the shape of the cornea (the clear, round dome at the front of the eye) using a laser. A blade or laser is used to cut a flap in the cornea, with a hinge left at one end of the flap. The flap is folded back, and a computer-controlled laser is used to remove a very specific amount of corneal tissue before the flap is replaced.

A type of refractive surgery, LASIK’s cost can be prohibitive—the industry standard is about $2,000 per eye. Because it is an elective surgery, health insurance usually doesn’t cover the cost of laser eye surgery. Insurance companies that offer a vision plan may provide partial coverage.

The outpatient procedure takes only minutes and is typically painless. Most patients return to work within a day or two, and the FDA recommends waiting one to three days following surgery for activities such as noncontact sports.

The success rate of refractive surgery is high, and many patients have dramatic vision improvements almost immediately; however, it’s important to have realistic expectations. According to the American Academy of Ophthalmology (AAO), LASIK allows people to perform most of their everyday tasks without corrective lenses—but those looking for perfect vision without glasses or contact lenses may be disappointed.
Consumers should be prepared for the possibility that a second surgery (called a retreatment or enhancement) might be necessary after a LASIK procedure, according to the AAO, or that you may still need glasses or contacts for activities such as reading or driving at night.

Like any surgery, potential risks and complications should be weighed when considering LASIK. Infection and inflammation are possibilities, AAO emphasizes, although those conditions can usually be cleared up with medications.

Some consumers experience side effects with LASIK. They include hazy vision, “dry eye,” glare, halos around lights, double vision, and difficulty driving at night. A second corrective procedure can often fix these symptoms, but the effects can be permanent for a small percentage of patients. In addition, the FDA warns that for some farsighted patients, LASIK benefits may diminish with age.

The FDA provides the following checklists for those considering a LASIK or other refractive surgery procedure.

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# Know what makes you a poor candidate

- **Career impact.** Does your job prohibit refractive surgery?
- **Cost.** Can you really afford this procedure?
- **Medical conditions.** E.g., do you have an autoimmune disease or other major illness? Do you have a chronic illness that might slow or alter healing?
- **Eye conditions.** Do you have or have you ever had any problems with your eyes other than needing glasses or contacts?
- **Medications.** Do you take steroids or other drugs that might prevent healing?
- **Stable refraction.** Has your prescription changed in the last year?
- **High or low refractive error.** Do you use glasses/contacts only some of the time? Do you need an unusually strong prescription?
- **Pupil size.** Are your pupils extra large in dim conditions?
- **Corneal thickness.** Do you have thin corneas?
- **Tear production.** Do you have dry eyes?

# Know the risks and procedure limitations

- **Over-treatment or under-treatment.** Are you willing and able to have more than one surgery to get the desired result?
- **May still need reading glasses.** Do you have presbyopia (an age-related condition that makes it more difficult to see very close)?
- **Results may not be lasting.** Do you think this is the last correction you will ever need? Do you realize that long-term results are not known?
- **May permanently lose vision.** Do you know a small percentage of patients may lose some vision?
- **Dry eyes.** Do you know that if you have dry eyes they could become worse, or if you don’t have dry eyes before, you could develop chronic dry eyes as a result of surgery?
- **Development of visual symptoms.** Do you know about glare, halos, starbursts, etc., and that night driving might be difficult?
- **Contrast sensitivity.** Do you know your vision could be significantly reduced in dim light conditions?
- **Bilateral treatment.** Do you know the additional risks of having both eyes treated at the same time?
- **Patient information.** Have you read the patient information booklet about the type of laser being used for your procedure?
Know how to find the right doctor

- **Experience.** How many eyes has your doctor performed LASIK surgery on with the same laser?
- **Equipment.** Does your doctor use an FDA-approved laser for the procedure you need? Does your doctor use each microkeratome blade only once?
- **Informative.** Is your doctor willing to spend the time to answer all your questions?
- **Long-term care.** Does your doctor encourage follow-up and management of you as a patient? Your pre-op and post-op care may be provided by a doctor other than the surgeon.
- **Be comfortable.** Do you feel you know your doctor and are comfortable with an equal exchange of information?

There is no universally accepted, best method for correcting refractive vision problems. The best option for consumers should be decided after a thorough examination and discussion with an ophthalmologist. If you are considering refractive surgery, you and your eye doctor should discuss your lifestyle and vision needs to determine the most appropriate procedure. Ophthalmologists are licensed by DCA's Medical Board of California; check the license before you choose a professional to do your procedure. Go to [www.mbc.ca.gov](http://www.mbc.ca.gov).

**RESOURCES**

- **U.S. Food and Drug Administration:** [www.fda.gov](http://www.fda.gov)
- **American Academy of Ophthalmology:** [www.geteyesmart.org](http://www.geteyesmart.org)
- **American Society of Cataract and Refractive Surgery:** [www.ascrs.org](http://www.ascrs.org)
Halloween may be over but that doesn't necessarily mean the end of costumes. Over the years, cosplay, or costume play, has gained in popularity, with an endless amount of products available to complete a look. In addition to the wigs, hats, props, capes, and makeup, costume contact lenses are an extremely popular cosplay accessory. Costume contacts can create looks such as large eyes of an anime character, vertical pupils of a cat, or red eyes of a demon-like character.

But beware—costume contact lenses can cause serious damage to your eyes if you're not careful.

Specialty contacts that are nonprescription can lead to:

- Irritation and pain
- Infection
- Scratched corneas
- Impaired vision
- Loss of eyesight

Buy your costume contact lenses from a licensed eye care professional (optometrist, an ophthalmologist, or a registered dispensing optician), or buy them from a reputable online vendor who requires a prescription. If you already wear contact lenses, ask your eye doctor for a copy of your current prescription.

For more information and to verify if an optometrist is licensed, contact the California State Board of Optometry at (916) 575-7170 or visit www.optometry.ca.gov.
Prescription drug abuse and misuse is injuring and killing thousands of Californians every year.
April Rovero lost her son Joey, 21, to prescription drug abuse in 2009. Joey Rovero was a college senior who died from a lethal combination of alcohol and prescription medications the day before he was to return home for winter break.

The medications that contributed to the death of Joey Rovero had been prescribed by a doctor just nine days before he died. That doctor was on trial in September for murder in the overdose death of Rovero and two other young men she prescribed medications to.

“Joey was a good kid. He had no history of trouble,” his mother said in a phone interview.

April Rovero, of San Ramon, recently told The Washington Post, “What our family has been through, losing our beautiful son, has been devastating. But we are just one family of many.”

Within months of her son’s death, April Rovero channeled her anguish into a goal of saving other families from losing loved ones to prescription drug abuse. She and her husband, Joe, founded the National Coalition Against Prescription Drug Abuse with the goal of generating awareness about the dangers of prescription drugs and reducing prescription drug-related overdoses and addiction.
DANGERS OF OPIOIDS

The Centers for Disease Control and Prevention (CDC) says the U.S. death rate from opioids, which include prescription pain relievers, tripled from 2001 to 2013. In 2013, more than 4,300 Californians died from drug overdoses. Of those deaths, nearly 40 percent were due to prescription painkillers.

That same year in California, 3,778 people were hospitalized and 6,108 required emergency room visits because of opioid misuse, according to the CDC.

Opioids are a class of narcotic drugs prescribed for severe pain. Some of the generic names for opioids include morphine, codeine, hydrocodone, hydromorphone, methadone, oxycodone, fentanyl, buprenorphine, and oxymorphone. Brand name opioids include Vicodin, Norco, Zohydor, Percocet, OxyContin, Roxicodone, Demerol, Dilaudid, Opana, and Suboxone. The street drug heroin is also an opioid.

Accidentally taking too much of a prescribed opioid, combining it with alcohol or other drugs, or abusing it can lead to overdose, depressed respiration, and death.

Taking opioids can result in tolerance, physical dependence, and addiction to the medications. Tolerance happens when the body adapts to the medication, making it less effective and requiring more to achieve the same results.

Physical dependence produces withdrawal by abruptly stopping the medication, rapidly reducing the dose, or reducing the drug level in your blood. Withdrawal symptoms include sweating, racing heart, palpitations, muscle tension, tightness in the chest, difficulty breathing, tremor, nausea, vomiting, and diarrhea.

Many addicted to opioid painkillers eventually turn to abusing heroin, a 2014 study in JAMA Psychiatry found. As an addict’s body needs more and more of the drug to achieve the same effect, the addict finds heroin—which works on the same parts of the brain as painkillers—to be cheaper and easier to get.

STATE TAKES ACTION

In 2014, the director of the California Department of Public Health formed a multi-agency State work group to tackle opioid abuse. The Medical Board of California, State Board of Pharmacy, and Dental Board of California participate in this work group, along with the Department of Justice and other public health agencies.

The CDC recently awarded the Department of Public Health a $3.7 million grant over four years to enhance the State’s multi-agency effort to combat opioid abuse.

The prescribing boards and the Board of Pharmacy are also working with their own licensees to address the epidemic. The Medical Board has updated its pain management guidelines to encourage greater caution in prescribing of painkillers.

The Board of Pharmacy is doing its part by educating pharmacists about their role in preventing opioid abuse and misuse. The Board recently
implemented emergency regulations allowing pharmacists to furnish—without a prescription—naloxone, the opioid overdose rescue drug, to anyone requesting it or at the pharmacist’s suggestion.

Consumers can do their part to fight this epidemic. Patients can work with their medical providers to look at all available options for pain relief before taking opioids, tell their physician about other drug use and addiction issues, and agree with their physicians to monitor and control their use of opioid pain relievers.

TAKING PRECAUTIONS

Rovero advises that patients should do their own research on the medications prescribed to them or their children. She said they should talk to their prescribers to find out if over-the-counter pain relievers might suffice rather than prescription painkillers.

“Medicine can save lives and has a beneficial value, but at the same time, it can have an absolutely devastating effect if not used properly,” she said.

Consumers should also ensure that all prescription drugs in their homes are kept in a safe place not easily accessed. A medicine cabinet in a bathroom is one of the worst places to keep prescription medications. Anyone who has access to that room—children, teens and their friends, housekeepers, service providers, etc.—could easily take any medications.

When teens are prescribed pain relievers, parents need to supervise the dosage and monitor refills. Parents should make sure their teens are taking the medication as directed and that the use is stopped when pain relief is no longer needed.

An adult should keep track of their family’s painkiller refills—needing refills more often than expected could indicate a problem. And once medications are expired or no longer needed, safely dispose of them or take them to a drug take-back event.

For more on the potential dangers of prescription drugs and necessary precautions to take when using them, visit the websites of the State Board of Pharmacy (www.pharmacy.ca.gov) and Medical Board of California (www.mbc.ca.gov).
For seniors who lack a source of income but who have built up a substantial amount of equity in their home, a reverse mortgage may be an attractive—but not necessarily a best—option.

Reverse mortgages—the vast majority of which are Home Equity Conversion Mortgages (HECM) that are insured by the Federal Housing Administration—allow those 62 and older to borrow against their home, supplementing their income rather than making scheduled mortgage payments to a lender.

A reverse mortgage can provide seniors with financial security for expenses such as medical bills and home repairs, and the ability to maintain a high quality of life during retirement. Additionally, a reverse mortgage can allow a borrower to remain in their home and keep its title, and the money received is generally not taxable income.

According to the California Bureau of Real Estate (CalBRE), there are many factors to consider before deciding if it makes sense for you to utilize a reverse mortgage, which is more complicated than a traditional mortgage and can be an expensive form of credit.
ADVANTAGES

- The homeowner makes no payments until the end of the term of the loan—which is defined as the time when the last eligible borrower permanently leaves or sells the home, when the homeowner dies, when a fixed due date occurs, or at the end of the loan term as it is otherwise determined.

- Mortgage payments can be eliminated by paying off existing loans with proceeds from the reverse mortgage.

- Several payment distribution options are available to a homeowner: a lump sum payment; equal monthly payments as long as the borrower lives in the home; equal monthly payments for a fixed number of years; a line of credit can be drawn on until it is exhausted; or a combination of these options.

- Your income and credit score are not potential hurdles to obtain a reverse mortgage because no payments are necessary until the loan ends.

- In the case of HECMs, independent counseling from a Housing and Urban Development specialist is required in advance—a critical, positive step to ensure a wise decision is made.

POTENTIAL NEGATIVES

- Cost. Reverse mortgages are generally more expensive than other loans, including home equity loans, particularly initially. Origination fees and closing costs can be significant, although they are typically rolled into the terms of the reverse mortgage. Servicing fees may also be charged over the life of the loan, according to the Federal Trade Commission (FTC), and in the case of HECMs, mortgage insurance premiums may also be charged.

- The equity in a home is reduced or possibly eliminated. This can pose a number of future problems such as affecting the estate that is scheduled to be distributed to a homeowner’s heirs, or stripping away money that could be needed if a borrower is forced into a long-term care facility.

- While income derived from a reverse mortgage is tax-free, the loan could affect a borrower’s eligibility for public assistance benefits such as Supplemental Security Income and Medi-Cal.

- A lender can force the borrower to repay the loan early in some instances if they do not keep up with property taxes, homeowner’s insurance, and maintenance.

- You owe more over time. As money is received through a reverse mortgage, interest is added onto the balance owed each month, meaning the amount you owe increases as loan interest adds up.

- Interest rates may change. Many reverse mortgages have variable rates, according to the FTC, which are linked to the financial markets. Variable-rate loans tend to provide more flexibility on how you receive money through a reverse mortgage. HECMs typically offer fixed rates but may limit your payout options to a lump sum at closing.

- If the reverse mortgage is not an FHA-insured HECM, it is important to confirm that the loan is “non-recourse,” meaning the liability to repay the reverse mortgage is limited to a borrower’s home. This assures that other assets or income, or the assets and income of your heirs, cannot be used for repayment.
Among the most important questions to ask yourself when considering a reverse mortgage: How much money do you need? What is your primary purpose for the funds? How long do you plan to be in your home? Is your home paid off or nearly paid for? How much can you qualify for through a reverse mortgage, and is that amount going to be sufficient for your financial goals?

Because reverse mortgages vary so greatly, it is important to consult a knowledgeable expert who can determine which product or products best fit your needs. Crucial variables to consider when shopping around include the type of interest rate, the amount of fees involved, and the type of payout schedule. Ask a counselor or lender to explain the Total Annual Loan Cost, which details the projected annual average cost of the reverse mortgage, including all itemized costs and fees.

Before you decide on a reverse mortgage option, research whether there is another type of loan that would be a less costly solution to your financial needs. Consumers should avoid sales pitches that sound too good to be true and high-pressure tactics to sell you a loan product you are not sure of.

**STUDY SHOWS ADS CAN BE MISLEADING**

In conjunction with a study by the Consumer Financial Protection Bureau (CFPB) that found advertisements for reverse mortgages left many older consumers with “misimpressions” about the product, the federal agency issued an advisory in June warning seniors to watch out for misleading or confusing ads.

The CFPB study—based on 97 ads found on TV, radio, in print, and on the Internet—consisted of interviews with dozens of homeowners age 62 and older. After viewing the ads, study participants were confused about reverse mortgages being loans, and they were left with false impressions that they are a government benefit or that they guarantee consumers can stay in their homes for the rest of their lives.

In addition, the CFPB study showed some consumers failed to understand key aspects of the loan “because the loan requirements were often buried in the fine print if they were even mentioned at all.” Many of the ads featured celebrity spokespeople or former politicians talking only about the benefits of reverse mortgages, the study found, and this contributed to participants’ feelings of trust.

Many of the ads implied financial security for the rest of a consumer’s life, according to the study, but the CFPB warned that a consumer “can tap into their equity too early and run out of funds to draw on.”

Following the study, the CFPB issued an advisory with three main takeaways:

- A reverse mortgage is a home loan, not a government benefit. Consumers need to know that the product has fees and compounding interest that must be paid.
- Reverse mortgage ads don’t always tell the whole story, such as that a consumer can lose ownership of their home.
- Without a good plan, a consumer can outlive the reverse mortgage funds. Consumers should have a financial plan that accounts for a long life so that if they tap into their home equity, they won’t do so too early and risk running out of retirement resources.


**RESOURCES**

- National Reverse Mortgage Lenders Association: reversemortgage.org
- California Bureau of Real Estate: www.calbre.ca.gov
- Department of Housing and Urban Development: www.hud.gov
Decades of drinking coffee, wine, tea, and soda can take their toll on what were once white teeth. To remedy the brown and yellow hues that appear over time, consumers have been regularly turning to teeth-whitening products and services.
Over the past 20 years, teeth whitening/bleaching has become one of the most popular esthetic dental treatments, according to the American Dental Association (ADA). Although considered by the ADA as “one of the most conservative and cost-effective dental treatments to improve or enhance a person’s smile,” know that teeth bleaching is not without risk. To make sure you get the results you’re looking for while also keeping healthy, here are some tips to follow before you whiten:

**SEE YOUR DENTIST FIRST**

Prior to any teeth whitening treatment, even with an over-the-counter (OTC) product, make an appointment with your dentist for a check-up and get his or her recommendations. Be sure you’re going to a licensed dental professional, and check license status on the Dental Board of California’s website, www.dbc.ca.gov.

Your dentist can advise you on how white you can expect your teeth to get, based on your age and overall dental health, as well as what are the best methods for you. According to the ADA, the dentist’s evaluation will also take into account your fillings, crowns, and very dark stains, which will likely look the same after teeth whitening. Your lifestyle and financial situation also need to be taken into consideration—in-office whitening can be pricey. Dentist-performed bleaching uses a stronger formula than at-home kits, so you generally need to go only once—however, the treatment is expensive and insurance rarely covers these procedures.

According to the Consumer Guide to Dentistry (www.yourdentistryguide.com), on average, in-office whitening costs $650, using take-home trays from a dentist costs $400, and OTC trays and whitening strip costs about $100.

**AVOID NONDENTAL VENUES**

Although experts say the risks of using bleaching products is relatively low, procedures done by nontrained individuals at venues such as mall kiosks or on cruises may not be a great idea. Potential side effects can include post-procedure teeth sensitivity, gum irritation, and pain. The ADA says these venues “present the image of a dental practice and professional supervision without providing the benefits of care from fully trained and licensed oral health care providers.”
DON'T WHITEN IF YOU'RE PREGNANT

There is a lack of studies that have been done on the effects of using teeth-whitening products while pregnant. Because of this lack of evidence, experts recommend not tooth whitening during pregnancy.

SKIP THE LIGHT OR LASER

Professionally applied products used by dentists contain 25 to 40 percent hydrogen peroxide concentrations and are sometimes used with a laser or light during the procedure. However, the ADA states that most studies conclude there are no additional benefits with light-activated systems.

FOLLOW INSTRUCTIONS

Products that are eligible for the ADA Seal of Acceptance contain 10 percent carbamide peroxide, which yields about 3.5 percent hydrogen peroxide. Keep in mind, however, that tooth-bleaching products are still unclassified by the U.S. Food and Drug Administration, so be careful using them and only use reputable products. Follow all instructions; for example, do not leave the strips or gels in too long, which can lead to teeth sensitivity and irritated gums. Also, even when using dentist-dispensed products, follow his or her instructions carefully.

DON'T GET ADDICTED

Experts report some users are going overboard using whitening products, with patients feeling their teeth are never white enough. Although the bleaching effect on your teeth is temporary and you do need subsequent whitening procedures to maintain white teeth, don't bleach too frequently. In general, you can safely whiten your teeth every six months. Overuse can lead to dental problems, such as severe pain and irritation, as well as translucent-looking teeth.

When administered properly, teeth whitening can be an effective—and safe—way to achieve those pearly whites. Just be sure to get your teeth checked out by a professional first and remember to always put your overall health before your appearance.

TEETH WHITENING

... WITH CHARCOAL?

As awful as it sounds and looks, brushing your teeth with activated charcoal to whiten and brighten is considered by some an effective beauty treatment.

Before you grab a charcoal briquette from your barbecue grill, understand that activated charcoal is very different from the coals you use in your grill.

Activated charcoal has been reheated at high temperatures that make it highly absorbent. Proponents of the DIY teeth-whitening method profess it as a “natural” tooth whitener, which binds, absorbs, and removes stains.

Is it safe? The American Dental Association has yet to evaluate activated charcoal as a whitening method. Some experts say that until further studies are done, brushing your teeth with activated charcoal is not advised, and it’s best to instead go to your licensed dentist for advice on whitening teeth with well-tested and trusted products.
Have you ever noticed how after October, time flies and before you know it, it’s the beginning of a new year?

RESOURCES
Bankrate: www.bankrate.com
Clark Howard: www.clarkhoward.com/
A cross-cut shredder is recommended because it slices paper and credit/debit cards horizontally and vertically into small bits, which makes it difficult for an identity thief to piece back together.

If financial housekeeping is on your to-do list before the end of 2015, start now. Here are eight tips to help get you in solid financial shape for the coming year:

1. **PURCHASE A GOOD SHREDDER**

2. **SEPARATE INTO TOSS-OR-KEEP PILES**

   - **Documents to Keep – Forever**
     - Tax returns and contracts
     - Real estate records
     - Last pay stub of a job when you leave an organization

   - **Documents to Keep – Seven Years**
     - Tax return documentation
     - Cancelled checks or checkbook duplicates
     - Home improvement records (ownership period, plus seven years)

   - **Documents to Keep – Limited Term**
     - Last pay stub of the year until you reconcile it with your W-2
     - All student loan payment receipts/statements until paid off
     - Car loan payment receipts/statements until paid off
     - Bank or ATM deposit slips until you reconcile your statements
     - Bank statements for one calendar year; store with tax returns if they will be used to prove deductions
     - Investment records: shred monthly and quarterly statements as new ones arrive; hold on to annual statements until you sell the investments

   - **Documents to Toss – Now**
     - Credit card statements that are more than three years old
     - Past insurance statements
     - Old utility bills, except the most recent one from your old address if you’ve moved
     - Paid bills/statements once you have something showing they’ve been paid

   Other recommended documents to keep forever are a credit report from each decade and a final credit card statement if you canceled the card.

3. **CHECK YOUR CREDIT REPORT FROM THE BIG THREE AND COMPARE**

   Every person is entitled to one free credit report annually (annualcreditreport.com) from each credit bureau—Equifax, TransUnion, and Experian. The end of the year is the perfect time to request a credit report to check if you have any unknown credit issues.
When it comes to passwords, one size does not fit all. It may be easier to have a single password for all of your online accounts (banking, investing, insurance, e-mail, social media, etc.) that you’ve used for years, but this practice is not wise. For each account, create strong passwords that are at least eight characters long, with unique characters and numbers included. While you’re at it, lock your smartphone with a password to stop anyone from accessing important content and accounts should it become lost or stolen.

Go over your security settings and whom you are sharing information and photos with on your social media accounts. The goal is to avoid connecting with strangers who might be scam artists—or be associated with scam artists—looking for ways to access your accounts, such as your online banking and investing accounts, according to an April 2015 *U.S. News & World Report* article.

If you have a flexible spending account (FSA) or health savings account (HSA) plan through your employer, you should review any changes you might want to make for the upcoming year because once they are set, they cannot be changed until the following year. With an FSA account, if you do not use the funds you set aside, you lose it. Now would be a great time to get a new pair of prescription eyeglasses because these funds cannot be rolled over into a new plan year. Check with your employer or plan administrator for restrictions and claim submission deadlines. An HSA differs because you can earn interest on the funds and roll them over into the next calendar year. After age 65, HSA funds can be used for other purposes other than health-related expenses.

Begin organizing your items for tax season early. Organizing receipts and records well before April will not only help to ensure that you have compiled everything needed to file your taxes, but you may discover another benefit—less stress.

- Max out your IRA and/or ROTH IRA contributions
- Review annual deductions/dependents
- Review your investment portfolio to ensure it is serving you properly
- Purchase or review life insurance policies
- Give a tax-deductible charitable contribution

There is a huge amount of free, helpful information available online for both the novice and the financially savvy alike (see Resources on page 28). However, if handling financial matters on your own is not your forte, you can enlist the services of a qualified tax preparer, such as a licensed Certified Public Accountant (CPA). To find a licensed and qualified CPA, visit the Board of Accountancy’s website, [www.cba.ca.gov](http://www.cba.ca.gov).
When deciding what to do with your sick or injured dog or cat, having to choose between letting your pet suffer or opting for euthanization is an unthinkable decision. However, because of the huge costs involved for veterinary medical tests, surgery, and treatments, choosing a favorable—and affordable—alternative isn’t always possible.
With Assembly Bill 2056 now in effect, however, pet insurance may help you avoid such tough choices. Prior to the law, relevant policy terms and conditions were vague and confusing; for example, when it came time to use insurance, policy holders found they were paying more money out of pocket than expected, not receiving care for pre-existing conditions, and only getting reimbursed for a fraction of the veterinary costs.

The new law now adds important consumer protections. Pet insurers have to disclose and give clear explanations of critical information regarding their policies, including reimbursement benefits as well as limitations on pre-existing conditions, coinsurance, waiting periods, deductibles, and annual or lifetime policy amounts. In addition, term definitions must be standardized and consumers will have a 30-day “free look” period in which a policy can be returned for a full refund.

If you’ve previously passed on pet insurance for your cat or dog, you may want to take another look. With the backing of AB 2056, along with your own proper analysis of different policies, buying a policy could be cost-effective.

What to consider

When starting your search for pet insurance, you’ll notice plans include elements similar to your own insurance policies—deductibles, copays, premiums, and limitations. Compare various plans based on these elements; for example, your monthly premiums can vary depending on what type of pet you have; your pet’s breed, age, and zip code; and type of coverage.

Similar to when looking for a plan for yourself, be vigilant and thorough in your search—request free quotes from different plans, understand terms and conditions, and check out sample policies. An August 2015 Consumer Reports article also suggests considering coverage with "simple, percentage-based payouts and no reliance on judgments of what’s 'reasonable,' to avoid your own future headaches. Find out how your premiums might increase as your pet ages."
The California Department of Insurance also recommends you ask pertinent questions:

- Does the coverage have an exclusion for pre-existing conditions?
- Is there a waiting or affiliation period before some or all of the coverage in the policy can begin?
- Does the coverage exclude costs for treatment of a hereditary disorder?
- Does the coverage exclude costs for a congenital anomaly or disorder, meaning your pet was born with it and it is causing or contributing to illness or disease?
- Is there a deductible or coinsurance clause that reduces reimbursements by a set amount?
- Is there an annual or lifetime policy limit?
- Will the renewal premium be increased if a claim is made?
- Is there a basis for reimbursement or formula for payment—for example, an insurer’s schedule of costs or “usual and customary” charges—for veterinary services other than the actual amount of the billed services?

As you're comparing plans to see which one is the best fit, check the Department of Insurance website, www.insurance.ca.gov/01-consumers/105-type/8-pet/pet-insurers.cfm, for a list of pet insurance companies in California. The list includes links to each plan's website, company profiles, and license and complaint history.

Even with the new pet insurance law in effect, be on alert before signing a policy. If anything isn’t clear, ask questions and get answers you understand. Don’t forget to also make sure your pet’s veterinarian and staff are appropriately licensed and qualified. Verify a license on the Veterinary Medical Board’s website at www.vmb.ca.gov.

PREVENTION FIRST

To avoid costly and unexpected vet visits in the first place, take a preventative approach to your pet’s care. According to Dr. Louise Murray, author of *Vet Confidential* and Vice President of the American Society for the Prevention of Cruelty to Animals (ASPCA) Animal Hospital, and Dr. Stephen Zawistowski, ASPCA Science Advisor, you can follow certain tips to save money on vet bills:

- Schedule yearly check-ups. It’s more costly to treat illnesses than to prevent them.
- Review your pet’s vaccines and find out which are optional and which are absolutely essential.
- Spay or neuter your pet, which can help prevent serious health issues down the road such as uterine, ovarian, and testicular cancer.
- Brush your pet’s teeth. Dental diseases can lead to heart and kidney problems and expensive procedures.
- Protect your pet from fleas and ticks, as infestations can lead to life-threatening anemia.
- Don’t smoke. Secondhand smoke affects pets, too, and can cause asthma, bronchitis, lymphoma, and oral, nasal, and lung cancers.
- Buy high-quality pet food formulated under the guidelines of the American Association of Feed Control Officials, and do not overfeed your pet, which can lead to obesity and other health problems.
What’s New with the Flu (Vaccine)?

Last year’s shot missed the mark. According to a CDC report, only 19 percent of the people who received a flu shot last year were less likely to visit the doctor for flu than people who did not get the shot, compared to 56 percent of the people who got a flu shot in 2012–13.

If you think the flu is not serious, you may want to reconsider. According to Dr. Dennis Cunningham, an infectious disease specialist at Nationwide Children’s Hospital in Columbus, Ohio, there are typically between 15 million and 60 million cases of the flu reported each year. In addition, more than 200,000 people with the flu are admitted to hospitals, and between 3,000 and 50,000 people in the United States die of the flu every year.

Everyone is susceptible to the flu, however, it is particularly dangerous for seniors and children. Last year, 322 senior citizens per 10,000 were hospitalized for the flu—the largest number in a decade. Flu shots are available at your doctor’s office, clinics, pharmacies, schools, and employers, as well as other locations. To find a location near you, use the CDC’s HealthMap Vaccine Finder at http://flushot.healthmap.org.

For more information about the flu and this year’s shot, go to www.cdc.gov/flu/about/season/flu-season-2015-2016.htm.
The holidays are here. Chances are that you’ll be hitting the malls and jostling with crowds, or perhaps shopping online in the comfort of your home.

According to the National Retail Federation (NRF), online holiday spending in 2014 topped $105 billion. Nearly four in 10 consumers—38 percent—used their credit card, the most in the NRF survey’s history and up from 28.5 percent the previous year.
Before you wear out the strip on your credit card and to ensure your holiday gift-giving season is only filled with cheer, here are some steps you can take to be a wise shopper and also avoid becoming a victim of credit card fraud and other scams:

**LIMIT CREDIT CARD USAGE**

Granted, this is easier said than done, particularly since credit cards are now such an integral part of our lives. Plus, during the holidays retailers offer incentives—usually discounts—on items when credit cards are used. Many stores will also lure consumers with new credit cards that initially have a zero interest rate. However, read the fine print. Frequently, this is merely an introductory offer and depending on your credit card balance, you could be hit with interest rates as high as 17.99 to 26.99 percent. If you must use credit, limit your usage. Don’t carry all your credit cards when you shop. This will also help prevent overspending and impulse buying.

**CLICK WITH CAUTION—KNOW YOUR E-TAILER**

Not all retail sites are created equal. Beware. There are many phony e-commerce sites that look real and offer phenomenal deals with hopes of getting your credit card number and other personal information. If you’re not familiar with the company, check around. Read the site’s user reviews and call the contact numbers listed to ensure they are legitimate. You should also look for “Trustmark” on the website, such as McAfee Secure, which means it has been verified and is safe. And never save your credit card information to any website.

**BE SMART WITH YOUR SMARTPHONE**

If you’re shopping via your smartphone, make sure it has reliable security measures such as creative passwords and that it’s fingerprint-protected just in case you lose it or it’s stolen. Also, watch for misleading holiday apps. They could have malicious software attached to them and once you click and download them, you may be putting your personal data at risk.
FAKE CHARITIES—DON’T GET SCROOGED

It’s only natural to be generous and giving during the holiday season. But there are some people who are eager to take advantage of your goodwill by pretending to represent a well-known charity. They may call you, send e-mails, or even come to your home asking for donations with hopes you’ll open your heart and, more importantly, your wallet. To find out if a charity is the real deal, always ask for the name, address, and phone number of the organization. Also check to see if it is registered by going to the Attorney General’s website, under the Registry of Charitable Trusts: http://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y. If the charity representative states that it is, demand to get the registration number. Don’t be pressured into providing any of your personal information. The Better Business Bureau Wise Giving Alliance offers information about national charities. You can call (703) 276-0100 or go to its website, www.give.org, for more information.

MONITOR YOUR STATEMENTS REGULARLY

Read your receipts and statements very carefully as soon as you get them. Most forms of holiday identity theft and credit card scams can be identified simply by regularly monitoring your bank and credit card accounts. Many financial institutions have automatic account alerts that notify you each time a transaction has been made on your account. You can call or visit your local branch to set this up. It’s quick and effective.

Remember, cybercriminals never take the holidays off, and they’re hoping that you’re not paying attention. Although it’s not always possible to prevent getting hacked and having your credit information compromised, implementing a few of these tips can go a long way to protect you and offer peace of mind beyond the holidays.

RESOURCES
AARP—Consumer Protection: www.aarp.org/money/scams-fraud
Office of the Attorney General—Charities: www.ag.ca.gov/charities
NEW PUBLICATIONS FROM DCA

A Consumer’s Guide to Auto Repair
www.bar.ca.gov/pdf/Auto_Rep_Guide.pdf
This brochure outlines consumer rights for motorists, the importance of following manufacturer guidelines in an owner’s manual, and finding a reputable auto repair shop before you need one. The publication also details how to file a complaint if problems arise with a repair shop.

Some Things You Need to Know About Smog Check in California
www.bar.ca.gov/pdf/Smog_Check_Brochure.pdf
This brochure provides valuable information on the State Smog Check Program, from how to find a Smog Check station to how to help your vehicle pass a Smog Check test. Other questions answered include “Is my vehicle subject to a Smog Check?” and “Are programs available to help if my vehicle fails?”

Winter Driving: Tips for Getting Your Car in Shape
www.bar.ca.gov/pdf/BARWinterTips.pdf
Winter has arrived, and this brochure helps motorists get their vehicle ready for inclement weather. It provides maintenance tips for cold temperatures as well as what items should be included when packing a winter safety kit for the roadways.

Summer Driving: Tips for Getting Your Car in Shape
www.bar.ca.gov/pdf/sumCarTips.pdf
This brochure provides motorists with useful tips to get their vehicles in condition to withstand the rigors of hot-weather driving, from testing the air conditioning to inspecting the hoses and radiator.
Consumer Guide to Alarm Companies

www.bsis.ca.gov/forms_pubs/alarmco.pdf

This publication discusses who can install and monitor an alarm system, important details that should be included in any contract with an alarm company, and the “evergreen” or “rollover” clause in an alarm company contract that provides for automatic renewal.

Consumer Guide to Locksmith Companies

www.bsis.ca.gov/forms_pubs/locksmith.pdf

For consumers considering hiring a locksmith, this brochure features information on what services a locksmith must be licensed to provide, questions to ask a locksmith before hiring them, and what are potential red flags to watch for during the hiring process.

A Consumer’s Guide to Chiropractic Care

www.chiro.ca.gov/publications/chiro_consumer_guide.pdf

This pamphlet provides consumers with details on what to expect during a typical visit to a chiropractor, what is involved in a chiropractic adjustment, how to select the right chiropractor, and what a consumer can expect at their first chiropractic appointment. Also available in Spanish.
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