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The FRANK C. BROWN COLLECTION of
**NORTH CAROLINA
FOLKLORE**

THE FOLKLORE OF NORTH CAROLINA COLLECTED BY DR. FRANK C. BROWN
DURING THE YEARS 1912 TO 1943 IN COLLABORATION WITH THE NORTH CARO-
LINA FOLKLORE SOCIETY OF WHICH HE WAS SECRETARY-TREASURER 1913-1943

IN SEVEN VOLUMES

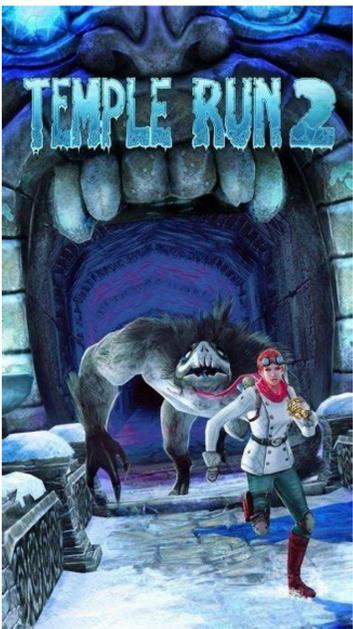
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Skip to headerSkip to main contentSkip to footerYou just left a meeting with your financial adviser, and your nest egg is looking bulletproof, with a projected worth of well over \$1 million at age 95. But wait a second, are you sure about that?If your financial projections look too good to be true, they might well be, for a variety of reasons. When the pandemic hit home in March 2020, the stock market crumbled and many people saw their investment portfolios drop. Fortunately, the markets eventually recovered; but the sudden drop caused many people to review their investments and projections. While reviewing a new client's portfolio at that time, we learned that his previous adviser projected his net worth as double our estimate by age 70. Naturally, the client was confused by the different scenarios. We discovered that the underlying growth assumptions the former adviser used were far too optimistic, giving the client an unrealistic view of his financial future. It's easy for any adviser to make a financial plan look unbreakable when using unrealistic assumptions. The true value of a financial plan comes from testing its resistance under difficult conditions. To do this, financial advisers typically conduct a "stress test." The test typically examines how a financial plan will fare during a future unexpected event, such as a recession or major geopolitical event, and allows you to adjust accordingly. For example, if you are near retirement and your portfolio is heavily weighted in stocks, an unexpected recession may send it plummeting by double digits. Although there may be no recession in sight, stress testing would allow you to adjust your portfolio in advance to safeguard it from potential future harm. It's a good idea to consider asking your financial adviser to conduct this test. Here are four areas to discuss to ensure your plan will hold up: Most financial advisers build a conservative growth rate into their projections — 5% annual growth is a common rate. While changing the growth by even a couple of percentage points may seem irrelevant, it can monumentally alter the trajectory of your projection. Take this scenario: A 45-year-old has \$1 million in investments and saves \$20,000 annually. If we omit taxes and assume a realistic 5% annual rate of return, his portfolio will grow to around \$4.3 million by age 70. However, if this person's adviser assumes a higher return, the projections show a scenario that is likely unrealistic. For example, at a 9% annual growth rate, his investments at age 70 to be valued at \$10.3 million. Our research shows that the average investor loses 4% of their annual returns from simple mistakes stemming from investment selection, fee management and emotional trading. Not accounting for this principle in your plan's growth rate assumptions may inflate your projected future assets. Our advice: Lean toward conservative growth assumptions to ensure your financial plan can withstand the unpredictability of future market returns. It's not surprising \$100,000 had greater spending power in 1950 than it does today. This can be seen in something as simple as the price of milk, which in 1950 was 83 cents. Today, the average price per gallon is around \$3.60. As we know, some expenses can have higher cost-of-living adjustments than others, such as health care or even education costs. Due to the ever-growing cost of living, accurately depicting inflation is necessary when developing your financial projections. Otherwise, your projections may misrepresent your future reality. Our advice: Since the cost of living will rise in the future, make sure your account for this growth in your financial projections. For most general living expenses, we typically like to assume an inflation rate of 2.5%. While working on a plan with another client, she reported she was spending around \$120,000 annually, or about \$10,000 per month. When asked to map her annual expenses for one year, she realized she was spending closer to \$140,000. We discovered that the additional \$20,000 primarily came from home improvement costs, roughly \$500 a month on takeout/Amazon orders, and other miscellaneous one-off expenses that tend to go overlooked. This difference is significant. Compounded over time, this spending rate will affect her income in retirement. Rather than lasting through age 95, her assets would be depleted at around age 80. Using this information, we were able to get her back on track toward meeting her financial goals. While taking the time to monitor your annual expenses is important, even with a budget in place, unaccounted-for expenses are bound to appear. The stress test can account for additional expenses that are typically overlooked, such as home upgrades, car repairs or any other unanticipated one-off costs. Our advice: It's a good idea to partially overstate annual spending level to account for future, unknown costs. While everyone's spending situation is different, grossing up annual expenses anywhere from 5% to 10% allows the plan to account for future unknown costs. Whether it's a forced early retirement or a bear market, stress testing your financial plan will help account for other uncertainties in the future. It will not only test the plan's strength, but also your individual financial flexibility. Knowing a plan can withstand a 30% market dip provides peace of mind. A test can also simulate the financial impact of taking a dream vacation or providing gifts to your favorite charity, giving you more freedom to spend your money in retirement. Navigating from your expected financial plan to these "Plan B" scenarios can display the robustness of your financial plan against unforeseeable risks. Our advice: While it's fine to look at the most likely financial scenario, consider a worst-case scenario, too. People often make their best financial decisions when they understand the potential consequences of when a plan doesn't work out. There is no doubt that future events will have an impact on our financial future. It could be an unexpected job loss or even another pandemic. By using realistic assumptions and mapping out all relevant scenarios, you can help make certain your plan can still deliver on your goals once these difficult conditions occur. This article was written by and presents the views of our contributing adviser, not the Kiplinger editorial staff. You can check adviser records with the SEC or with FINRA. Wealth Planner, McGill Advisors, a division of CI Brightworth. How Big Will the Fed Rate Hike Be? Wall Street's Top Minds Weigh In interest rates The Fed rate hike announcement is due out Wednesday afternoon, and markets are anticipating another monster increase. September 20, 2022 Your Guide to Roth Conversions Special Report Tax Breaks A Kiplinger Special Report February 25, 2021 What Are the Income Tax Brackets for 2022 vs. 2021? tax brackets Depending on your taxable income, you can end up in one of seven different federal income tax brackets — each with its own marginal tax rate. September 20, 2022 Looking for the Best Rate on a Fixed Annuity? Shopping Around Really Pays Off annuities Some annuities pay significantly more than others, so doing your research to compare rates and keeping key factors in mind can score you a much better... September 23, 2022 Social Security Is Pushing You to Work Longer — Can You Still Afford to Retire Early? social security To get your full Social Security benefit, you may have to work longer than you'd like. If you really don't want to wait to quit work and start taking... September 22, 2022 The Power of Debt: It Isn't All Bad personal finance We hear the warnings constantly: Debt will ruin your finances. The reality is that some debt isn't bad. In fact, a securities-backed line of credit ca... September 21, 2022 They Lost a Spouse but Bounced Back: 5 Women's Financial Stories Women & Money A look at how five widows got their financial lives in order and got to a better, brighter, more empowered place. They did it, and so can you. September 20, 2022 Medicare may be in trouble, but it is not going bankrupt. According to a 2021 report by the Biden administration, the Medicare Hospital Insurance (HI) trust fund will be depleted if healthcare expenses continue to exceed money flowing in. Without new legislation, it's estimated that by 2026, Medicare Part A may only be able to pay for 91% of the costs it covers today. Tom Werner / Getty Images The Medicare HI trust fund supports Medicare Part A. This part of Medicare pays for inpatient hospital care as well as hospice. For people who are discharged from the hospital, it also covers short-term stays in skilled nursing facilities or, as an alternative for people who choose not to go to a facility, it covers home healthcare services. Medicare Part A is funded by the Medicare HI trust fund but because Medicare Advantage plans (Part C) also cover Part A benefits, they receive partial funding from the Medicare HI trust fund too. Medicare Parts B and D have other sources of funding, the main one being what you pay in monthly premiums. Medicare payroll taxes account for the majority of dollars that finance the Medicare HI trust fund. Employees are taxed 2.9% on their earnings—1.45% paid by themselves and 1.45% paid by their employers. People who are self-employed pay the full 2.9% tax. The Additional Medicare Tax for high-income workers puts an extra 0.9% tax (3.8% total) on earned or invested income beyond \$200,000 if you are single, or \$250,000 if you are married. Monthly premiums account for a smaller proportion of Medicare HI trust fund financing. The majority of Americans do not pay a monthly premium for Part A, though they will pay deductibles, coinsurance, and copayments for services rendered. Premiums are free for people who have contributed 40 quarters (10 years) or more in Medicare payroll taxes over their lifetime. They have already paid their fair share into the system, and their hard work even earns premium-free coverage for their spouse. People who have worked less than 40 quarters, on the other hand, will be charged a monthly premium, and those dollars add up quickly. The Part A premium for people who worked between 30 and 39 quarters is \$274 per month (\$3,288 per year) in 2022. For those working less than 30 quarters, the cost increases to \$499 per month (\$5,988 per year). The money collected by taxes and in premiums makes up the bulk of the Medicare HI trust fund. Other sources of funding include income taxes paid on Social Security benefits and interest earned on trust fund investments. Altogether, the Biden administration report suggests these dollars may not be adequate to meet the demands of the growing Medicare population by 2026. The Census Bureau reported 76 million births between 1946 and 1964, the so-called baby boom. Of course, the number of baby boomers will always be in evolution. Consider the fact that not all baby boomers will live to 65 years old and that "new" boomers in this age group will enter the country by way of immigration. With all factors

considered, it is estimated that 8,000 to 10,000 Americans turn 65 years old every day and will do so through 2029. By 2030, it is expected that 20% of the U.S. population will be eligible for Medicare. Not only are thousands of people reaching Medicare age every day, but life expectancy is also on the rise. A Social Security Administration calculator notes a man who turned 65 on April 1, 2019 could expect to live, on average, 84.2 years. A woman who turned 65 on the same date could expect to live, on average, 86.7 years. As people live longer, they are more likely to develop medical problems. Around one-third of people between 65 and 84 years of age have at least two to three chronic medical conditions. A little less than a quarter of them will have four to five. More people living longer means more medical problems and higher healthcare spending. As the number of chronic medical conditions goes up, the Centers for Medicare & Medicaid Services (CMS) reports higher utilization of medical resources, including emergency room visits, home health visits, inpatient hospitalizations, hospital readmissions, and post-acute care services like rehabilitation and physical therapy. This is reflected in the National Health Expenditures (NHE) every year. In 2019, NHE averaged \$11,582 per person, accounting for 17.7% of the Gross Domestic Product. That number is expected to increase by 5.4% every year through 2028. Medicare beneficiaries have high out-of-pocket costs too. In 2016, people on Original Medicare (Part A and Part B) spent 12% of their income on health care. People with five or more chronic conditions spent as much as 14%, significantly higher than those with none at 8%, showing their increased need for medical care. Taken together, these factors could deplete the Medicare HI trust fund at a rate not matching the dollars coming in. Unemployment rates increased dramatically during the pandemic, with job losses into the millions. This decreased direct financing for the Medicare HI trust fund through payroll taxes, at least for the short term. Also, funds have been directed from the Medicare HI trust fund to combat the pandemic as part of the Coronavirus Aid, Relief, and Economic Security (CARES) Act. With these costs in mind, updated projections had been made about the solvency for Medicare. Near the peak of unemployment in 2020, David J. Shulkin, MD, ninth secretary of the Department of Veterans Affairs, projected Medicare could become insolvent by 2022 if pandemic conditions persisted. The Committee for a Responsible Federal Budget was somewhat more optimistic, with expected solvency by 2023. However, in their 2021 report, CMS explains there were several offsetting variables during the pandemic that helped maintain the previous projection of 2026. Bankruptcy is a legal process that declares a person, business, or organization unable to pay their debts. Medicare is not going bankrupt. It will have money to pay for health care. Instead, it is projected to become insolvent. Insolvency means that Medicare may not have the funds to pay 100% of its expenses. Insolvency can sometimes lead to bankruptcy, but in the case of Medicare, Congress is likely to intervene and acquire the necessary funding. If Medicare is going to care for American seniors over the long run, something is going to have to change. Ideas on how to accomplish this have been controversial and have included the following: Close tax loopholes. Not everyone pays their fair share of Medicare taxes. When establishing businesses, many people take advantage of tax loopholes that legally allow them to avoid those taxes. Closing those loopholes could prevent businesses from sheltering their earnings and could increase the amount of dollars coming into the Medicare HI trust fund. Decrease excess payments by Medicare for after-hospital care. When you leave the hospital, you may require care in a skilled nursing facility or rehabilitation facility. Alternatively, you may receive care through a home health agency. The 2021 report from the Medicare Payment Advisory Commission (MedPAC) shows that Medicare payments to providers and agencies of after-hospital care have "consistently and substantially exceeded costs" for the past decade. Correcting these overpayments will save the Medicare HI trust fund billions of dollars. Decrease Medicare benefits: No one wants to pay the same amount for less. As it stands, many people argue that Medicare does not cover enough. For example, Medicare does not cover the cost of corrective lenses, dentures, or hearing aids even though the most common things that happen as we age are changes in vision, dental health, and hearing. This already leaves many Americans without some of the basic health services they need most. However, one of the positive outcomes of the Build Back Better Act is that hearing aids will be covered by Medicare starting in 2023. Increase the age for Medicare eligibility: Republicans like former congressman Paul Ryan have proposed increasing the Medicare age to 67 years. While this would decrease the number of people that become eligible for Medicare in any given year, this would put a burden on seniors to pay for more expensive private insurance plans in the meantime. This could affect not only personal savings but when seniors would be able to afford retirement. Increase out-of-pocket expenses for beneficiaries: Increases in Medicare premiums, deductibles, coinsurance, or copayments could help bolster the Medicare HI trust fund dollar-wise, but can seniors afford it? The majority of seniors are on a fixed income as it is, and healthcare costs are disproportionately rising. Increase Medicare payroll taxes: More taxes? This is what former President Ronald Reagan did with the Medicare Catastrophic Coverage Act of 1988. The law aimed to add a prescription drug benefit and to prevent seniors from catastrophic health costs after hospitalizations, but the law was repealed within a year due to a lack of public support and an uproar regarding associated tax hikes. Are Americans going to feel differently about tax increases today? Reform how Medicare Advantage plans work. Medicare Advantage plans do not run the same way Original Medicare does. Insurance companies have to make proposals to the government to be able to offer their plans. If their plans are approved, the government will pay them a fixed amount every month for each beneficiary, paying more for people who have more chronic conditions. These insurance companies are also offered quality bonuses if they adhere to federal standards. The government could decrease Medicare costs if they adjusted the criteria for bonuses, and increased overall competition between plans. Decrease Medicare fraud, waste, and abuse: Private insurance companies run Medicare Advantage (Part C) and prescription drug plans (Part D). The Department of Justice has filed lawsuits against some of these insurers for inflating Medicare risk adjustment scores to get more money from the government. Essentially, they make it look as if you are sicker than you are so that the government will increase how much it pays them. Some healthcare companies and providers have also been involved in schemes to defraud money from Medicare. Identifying causes of fraud, waste, and abuse could save Medicare hundreds of millions of dollars every year. Decrease how much Medicare pays doctors: Healthcare access is the biggest concern with this proposal. Would fewer doctors accept Medicare for payment if they thought they would not be fairly compensated? As it stands, there is already an impending doctor shortage because of limited Medicare funding to support physician training. The announcement by CMS that the Medicare HI trust fund could be insolvent within five years is a warning sign. Older Americans are at risk for having decreased access to health care when they need it most. Many legislative proposals are in the works to protect Medicare but some of them shift more of the costs onto seniors who are already living on a fixed income. As it stands, Social Security benefits have been flat. With marginal increases in the Cost of Living Allowance over the past several years, seniors are already forced to stretch their dollars. With an aging baby boomer population, Medicare is at risk for insolvency by 2026 or even sooner. Specifically, hospital and after-hospital care benefits are at risk. If we continue down the current path, beneficiaries could face an increase in out-of-pocket costs. Policy changes are needed to protect Medicare and those who need it.

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