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Protect against other drivers with uninsured motorist coverage

Texas law requires drivers to have liability coverage on their vehicles.

But some drivers fail to get coverage. Warning sign: More than 2.6 million state-registered vehicles are not matched to an insurance policy. That's 12% of the state's registered vehicles.

So, it could pay for you to consider uninsured/underinsured motorist coverage, which insurance companies must offer when you buy auto insurance. If you don't want it, you have to turn it down in writing.

If you add uninsured/underinsured coverage, you'll have extra financial protection after an accident involving a driver with little or no insurance. The coverage pays your car repair and medical bills. You'll have to pay a \$250 deductible for car repair.

Related tips:

- Uninsured/underinsured coverage also pays to replace the property in your car, a rental car if you need it, your medical bills, and pain and suffering costs. If you don't have this coverage, your collision coverage will pay to repair your car. But you won't get these extra coverages and your deductible will likely be higher.
- If an accident leaves you with long-term care needs or you aren't able to work, your health plan probably won't cover those costs.



Mike's Blog

Auto Insurance Increases. Why and What You Can Do To Help!

On average, Americans will be paying almost \$1,900 annually for car insurance in 2023, new data reveals. This information is based on the research conducted for the Article, written by Mary Or "Revealed – how much more will Americans be paying for car insurance in 2023", in the December 2022 Article of Insurance Business America Magazine.

Insurance Trends report for 2022, which includes insight into what is ahead for the industry in the coming year, is predicting that the average American driver will be paying 16% more for car insurance by the end of 2023 than they were at the beginning of 2022. This is a national average. Texas and Louisiana have historically, experienced higher insurance rates and residents in Texas and Louisiana can expect higher increases.

Car insurance will cost the average driver over \$1,900 this year, representing a 9% increase this year, 9% increase last year and a crushing 31% increase from 2020, Why?

Factors that have caused insurance premiums to create the cost hike throughout 2023 are; the rising cost of car repair and medical expenses, higher driving rates, higher accident rates, and the potential for more frequent natural disasters. Our agency has been monitoring these trends and look for unique ways to combat the rising cost of insurance for our clients. As members on several insurance carrier advisory boards, we have heard the same things – RATES WILL INCREASE in 2023. While most of our markets have taken modest increases in rate to combat inflation, we have seen markets like GEICO, take on huge increases.

What Can I Do? – I can't afford huge increases in auto premiums

We understand that rate increases impact all our clients. We are here to help and will do whatever we can to assist in finding you the best value in the market for your auto insurance coverage. We are independent and work with hundreds of insurance carriers. Not all policies are the same, not all carriers are the same. We can search to find you a market that meets you and your family's specific needs. Our carriers offer unique discounts and if you do not currently have your auto insurance with us, call us to see what we can do.

Discounts include:

- Low Mileage
- Policy Bundling
- Telematics
- Occupational Discounts
- Education
- Multi-Car
- Driver Assist
- Good Grades (student drivers)
- Many more – too many to list

If you do not have your auto insurance with our agency and opened your auto insurance renewal to see a 10% – 20%+ increase, call our agency at 800-362-2809. If you have your insurance with our agency, rest assured, we are shopping to make sure you continue to receive the best value in the market through our agency. You can call or visit us at <https://go.getagreatquote.com/autonew>

Call us at 800-362-2809 – We have been here for 32 years and will be here when you need us!

Continued from Page 1-Protect against other drivers with uninsured motorist coverage

- Uninsured/underinsured motorist coverage pays if you're in a hit-and-run accident and the other driver can't be found to pay for damage.
- You can usually add uninsured/underinsured coverage in \$5,000 increments. A rule of thumb is to add at least enough property damage coverage to replace your vehicle. Ask your agent what coverage works for you.

Please give ABM Insurance & Benefit Services a call should you have any concerns regarding uninsured motoristst at 281-448-3040 or visit www.getagreatquote.com.

Ford Recalls 422,000 SUVs Because Rear View Camera Display May Fail

By David Shepardson

Ford Motor Co is recalling 422,000 sport utility vehicles in the U.S. because the video output may fail, preventing the rear view camera image from displaying.



The recall covers 2020 through 2023 Ford Explorer, Lincoln Aviator, and 2020-2022 Lincoln Corsair SUVs with a 360-degree camera.

The recall expands and replaces prior Ford callbacks for the same issue in 2021 and 2023. Ford last year updated the image processing module (IPMB) software in an effort to address the issue.

Ford said on Thursday it is "working together with suppliers to identify root cause and provide the correct remedy as quickly as possible."

The National Highway Traffic Safety Administration (NHTSA) said the loss of the rear view camera image can reduce the driver's rear visibility, increasing the risk of a crash.

Owner notification letters are expected to be mailed on June 26.

Last year, Ford said it had reports of 17 minor crashes relating to the recall issue and more than 2,100 warranty reports but no reports of injuries.

The NHTSA in August 2021 opened an investigation after Ford in 2020 recalled 620,246 vehicles for another rear camera issue. The investigation is reviewing if Ford had recalled the vehicles in a timely fashion and if it recalled enough vehicles.

ABM Bad Joke Of The Month...

Did you hear the joke about the bed?

Well, it hasn't been made yet.



Dog-Related Claims Cost \$1 Billion in 2022

by AnneMarie McPherson Spears

Over the past 10 years, the average cost per dog-related claim has risen 131.7% across the U.S., an increase attributable to increased medical costs, as well as social inflation.

Dog bites and other dog-related injuries cost homeowners insurers more than \$1 billion in 2022, a 28% increase over 2021, according to the latest claims data analysis from Insurance Information Institute (Triple-I) and State Farm.

The increase comes despite the number of claims decreasing by 2.2% last year—there were 17,597 dog-related injury claims in the U.S. in 2022, down from 17,989 in 2021. However, the average cost per claim was \$64,555 in 2022, a 32% increase from the \$49,025 average in 2021. As a result, the total claims cost for 2022 clocked in at \$1.13 billion, up from \$882 million in 2021.

Over the past 10 years the average cost per dog-related claim—which isn't just limited to dog bites, but also includes dogs knocking down and injuring children, cyclists, or the elderly—has risen 131.7% across the U.S., an increase which the study attributes to increased medical costs, as well as social inflation.

Five states accounted for one-third of the dog-related claims in 2022, with California leading, followed by Florida, Texas, New York and Michigan. California also has the highest average cost per claim at \$78,818.

"Homeowners and renters insurance policies typically cover dog bite liability legal expenses, up to the liability limits (typically \$100,000 to \$300,000)," Triple-I noted, adding that carriers may also have different underwriting procedures for certain dog breeds.

"Some insurers are taking steps to limit their exposure to such losses. Some companies require dog owners to sign liability waivers for dog bites, while others charge more for owners of breeds such as pit bulls and Rottweilers and others are not offering insurance to dog owners at all. Some will cover a pet if the owner takes the dog to classes aimed at modifying its behavior or if the dog is restrained with a muzzle, chain or cage," Triple-I said.

About 69 million U.S. households own dogs, according to the American Pet Products Association. With National Dog Bite Prevention Week April 9-15, Triple-I recommends ways in which dog owners can take responsibility, including training classes for their pets, teaching kids the basics of dog safety, and other ways to prevent pets from causing harm.

In addition to behavioral training and responsible pet ownership practices, an umbrella policy or pet liability coverage may also be a good option for pet owners.

Does your policy cover animal liability? Not all policies do. Contact your homeowners insurance agent to see if coverage is included, especially if you own a dog. You can reach us at 800-362-2809 with questions.



ABM Bad Joke Of The Month...

What is the scariest plant in the forest?

Bam-BOO!



10 Things Not Covered By Medicare

These are some out of pocket expenses you may have for common medical care/procedures

Medicare typically covers the majority of older Americans' health care needs, from hospital care and doctor visits to lab tests and prescription drugs. Here are some needs you may have that aren't part of the program — and ideas on how you might pay for them.



1. Nursing home care

Medicare pays for limited stays in rehab facilities — for example, if you have a knee or hip replacement and need inpatient physical therapy for several weeks. But if you become so frail or sick that you must move to an assisted living facility or nursing home, Medicare won't cover your custodial costs at all. (Nursing homes average about \$90,000 a year for a semiprivate room and more than \$100,000 for a private room. Costs vary based on where you live and what facility you choose.)

Solution: Planning for nursing home care is a big issue, with lots of choices and decisions. Consider Long Term Care Insurance when you are younger. But for those with limited income and savings, Medicaid might help fill in the gaps.

2. Concierge care

Some physicians and their practices require a membership fee in order for them to treat you. They advertise that this makes them more responsive and available to their patients. The fees, which can run in the thousands of dollars a year, vary depending on the concierge or boutique practice. Medicare will not cover these fees. Note that once you've paid that fee, if your doctor participates in Medicare he or she must offer all the services Medicare does with the same copays and coinsurance rules applying, so keep in mind that what you are paying for is really just convenience to reach out to your doctor.

Solution: You can either pay the fee or find another doctor. You might talk to your physician about the terms of when you have to pay. Some states have laws that provide consumer protections for these arrangements. If your provider accepts Medicare assignment, then paying a fee really isn't necessary. This would only benefit you in the case that they don't and if you really want to see that doctor and find the cost to be worth it.

3. Chiropractic care

Original Medicare does not cover most chiropractic services or the tests that a chiropractor orders, including X-rays. Medicare Part B does pay for one manual manipulation of the spine by a chiropractor or other qualified provider to correct a vertebral subluxation, which is basically a partial dislocation of a spinal vertebra from its normal position.

Solution: There are some Medicare Advantage plans will cover chiropractic services, so check with your plan. These benefits can change from year to year. Some chiropractors offer payment plans to help you pay for this care.

Meet Our Representative



Maura Guevara Mendez

Name Maura Guevara-Mendez

Title Renewal Specialist

Email maura@getagreatquote.com

How long have you worked at ABM 4 years

What do you do at ABM I handle personal lines renewals and also assist with customer service

What do you love about your job being able to help people and give them clarity when in doubt

Why do you think ABM is a great company we are a FAMILY

Fun Fact about yourself I own over a 100 pair of shoes, I have a pit-bull who I named MANGO and I am from El Salvador

4. Podiatry

Routine medical care for feet, such as callus removal, is not covered. Medicare Part B does cover foot exams or treatment if it is related to nerve damage because of diabetes, or care for foot injuries or ailments, such as hammertoe, bunion deformities and heel spurs.

Solution: If you face these costs, you may want to set up a separate savings program for them. Some Medicare Advantage Plans will cover routine medical care for feet, so for those that are diabetic and suffer from neuropathy, we highly recommend considering a plan that will.

5. Opticians and eye exams

While original Medicare does cover ophthalmologic expenses such as cataract surgery, glaucoma, macular degeneration, detached retina, etc., it doesn't cover routine eye exams, glasses or contact lenses. Nor do any Medigap plans, the supplemental insurance that is available from private insurers to augment Medicare coverage. Some Medicare Advantage plans cover routine vision care and glasses.

Solution: For some people, it makes sense to buy a vision insurance policy for a few hundred dollars a year to defray the cost of glasses or contact lenses. There are some really affordable options to consider.

6. Dental

This is probably the most common question we get. Original Medicare and Medigap policies do not cover dental care such as routine checkups or big-ticket items, including dentures and root canals. There is little to no dental coverage with Medicare at all.

Solution: Some Medicare Advantage plans offer dental coverage. If yours does not, or if you opt for original Medicare, consider buying an individual dental insurance plan or a dental discount plan but talk with your dentist to see if it makes sense as sometimes cash pay is the best way to go.

7. Hearing aids

Medicare covers ear-related medical conditions, but original Medicare and Medigap plans don't pay for routine hearing tests or hearing aids which can be quite costly.

Solution: If you are in a Medicare Advantage plan, check your policy to see if it covers hearing-related needs. If it doesn't, or if you have original Medicare, consider buying insurance or a membership in a discount plan that helps cover the cost of such hearing devices. Also, some programs are available to help people with lower incomes get much needed hearing support. You can also pay as you go. Congress passed legislation in 2017 that allows some hearing aids to be sold over the counter without a prescription. Medicare beneficiaries with mild to moderate hearing loss can now buy hearing aids at drugstores and other retail outlets without a prescription.

8. Massage therapy

Original Medicare does not cover massage therapy, which is often used to help reduce chronic pain, although research suggests it may provide short-term, but not long-term, relief. When it comes to pain management, Medicare does cover chiropractic care in certain limited circumstances (see above) as well as physical and occupational therapy when prescribed by a doctor. Some Medicare Advantage plans might cover some massage therapy. It's best to discuss with your agent to find out if the plan you are considering does.

Solution: See whether your health care provider can recommend a pain management strategy that Medicare does cover. If you are set on getting massage therapy, the likelihood is you'll have to pay for it yourself.

9. Cosmetic surgery

Medicare doesn't generally cover elective cosmetic surgery, such as face-lifts or tummy tucks. It will cover plastic surgery in the event of an accidental injury or if needed after another treatment, such as breast reconstruction following a mastectomy. In some cases it will cover Botox treatments for nerve pain or severe migraines.

Solution: If non medically necessary cosmetic surgery is something you are considering, you may want to set up a separate savings program for them.

10. Overseas care

Original Medicare and most Medicare Advantage plans offer virtually no coverage for medical costs incurred outside the U.S.

Solution: Some Medigap policies cover certain overseas medical costs. If you travel frequently, you might want such an option. In addition, some travel insurance policies provide basic health care coverage — so check the fine print. Finally, consider international travel medical insurance for your adventures abroad. It's a low-cost policy that will transport you to a nearby medical facility or back home to the U.S. in case of emergency as well as cover an array of services that wouldn't typically be covered by a regional medical policy.

10 Ways to Protect Your Personal Information

By Stephen McGraw

Identity theft affects millions of people each year and can cause serious harm. Protect yourself by securing your personal information, understanding the threat of identity theft, and exercising caution.

Here are 10 things you can start doing now to protect yourself and your loved ones from identity theft:



1. Protect your Social Security number by keeping your Social Security card in a safe place at home. Don't carry it with you or provide your number unnecessarily.
2. Be careful when you speak with unknown callers. Scammers may mislead you by using legitimate phone numbers or the real names of officials. If they threaten you or make you feel uneasy, hang up.
3. Create strong, unique passwords so others can't easily access your accounts. Use different passwords for different accounts so if a hacker compromises one account, they can't access other accounts. Check out the Federal Trade Commission's password checklist for tips.
4. Never give your personal or financial information in response to an unsolicited call or message, and never post it on social media.
5. Shred paper documents that contain personal information, like your name, birth date, and Social Security number.
6. Protect your mobile device from unauthorized access by securing it with a PIN, adding a fingerprinting feature, or using facial recognition. You can also add a password and adjust the time before your screen automatically locks.
7. Regularly check your financial accounts for suspicious transactions. You can also request and check a free credit report from each of the three credit bureaus every year: TransUnion, Equifax, and Experian.
8. Avoid internet threats by installing and maintaining strong anti-virus software on all your devices—including your mobile device and personal computer. Use a virtual private network (VPN) to stay safe on public Wi-Fi. Do not perform certain activities that involve sensitive data, like online shopping and banking, on public Wi-Fi networks.
9. Protect yourself on social media by customizing your security settings and deleting accounts you no longer use. Also, double-check suspicious messages from your contacts, as hackers may create fake accounts of people you know.
10. Never click on any link sent via unsolicited email or text message—type in the web address yourself. Only provide information on secure websites.

We encourage you to create your own personal my Social Security account to track your earnings record. Contact us if you see suspicious work activity on your record—you could be a victim of identity theft.

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Awesome help with my insurance needs! Thanks to Mike Alexander and Crystal Calaway for their over the top service.

- Sharon H.

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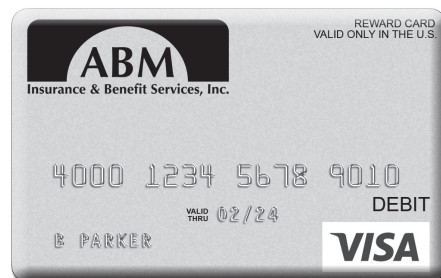
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