LIVING... PLANNING... DYING... Getting Your Affairs in Order

Resource Book

Bryn Mawr Presbyterian Church

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START HERE

Dear Friend,

You're in the right place. Planning for the end-of-life can be daunting, and this resource guide is here to help. Within its pages you'll find information and advice regarding various aspects of planning and care.

This resource guide is designed to provide you with general information to help you in your life planning. It is not intended as a "How To" to replace the advice of skilled professionals in the medical, tax or legal fields. However, it is intended to provide basic resources which can lead to further investigation.

This guide is designed to be used in tandem with "A Planning Guide," which is a separate booklet in the "Are Your Affairs in Order" series. If you do not have a copy of "A Planning Guide" please call Bryn Mawr Presbyterian Church at 610-525-2821 and we will send one. Furthermore, you can also find this booklet, as well as "A Planning Guide" on our website: www.bmpc.org.

You are not alone in this process. The entire Caring Ministries Team at Bryn Mawr Presbyterian Church is here to help you each step of the way. Planning ahead is an act of love. Taking the time to work through these various questions and suggestions is a gift to those you care about. We are here to help you ensure that your affairs are in order.

> Grace and Peace, The Caring Ministries Team:

The Rev. Brian K. Ballard, Associate Pastor for Pastoral Care and Senior Adults Carol Cherry, Parish Nurse Kiki McKendrick, Administrator, Middleton Counseling Center Renee Malnak, Parish Social Worker

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HEALTH INSURANCE AND LIVING ARRANGEMENTS

MEDICARE, OTHER GOVERNMENT INSURANCE AND LONG TERM CARE INSURANCE

<u>Medicare</u>

Medicare is a federal program that helps people 65 and over. It has two parts: Part A helps pay for hospital care as well as home health, hospice and skilled nursing care; Part B helps pay for doctor visits, medical equipment, preventive services, outpatient care, therapy, lab tests, x-rays, mental health and ambulance services. Medicare coverage can be provided through the original fee-for-service plan or through a Medicare Advantage Plan (Part C) (like an HMO or PPO).

Medicare's drug benefit (Part D) is outpatient prescription drug coverage for anyone with Medicare. If you want to get this coverage, you have to choose to participate and enroll in a private prescription drug plan and pay the premium. Some people may choose not to enroll; however, if the recipient does not enroll when first eligible, there could be a penalty if he enrolls later on. This penalty depends on whether there was a "creditable" coverage through another source. There are copays for prescriptions, and some plans have a coverage gap when the plan reaches its threshold. This gap in coverage is called the "donut hole." In 2020 if you are in the "donut hole," you will pay no more than 25% of the cost for your plan's coverage brand-name prescription drugs.

Original Medicare is coverage manged by the federal government. You can go to any doctors who are enrolled in Medicare. For those with Original Medicare, a supplemental policy can cover the deductibles and coinsurance that Medicare doesn't. Often called Medigaps, these plans are offered by private companies but are standardized by the federal government. No matter which company offers it, Plan A must equal Plan A in any company. Different lettered plans offer more or less services and costs can vary greatly from company to company.

Changes in your Medicare insurance can be made during the "Open Enrollment" period mid-October through early December.

For those who can't afford Medicare payments, there are federal programs that can help with the premiums. If you have any questions about Medicare, you can call the state health insurance program (SHIP) in your area.

Phone numbers for	the three county area are:	Chester County	610-344-5004
Delaware County	484-494-3769	Montgomery County	610-834-1040

<u>Medicaid</u>

Additional help with health care costs can be offered through the state's Medicaid program. Medicaid benefits are available to citizens of the USA over 65 or disabled and whose income and asset are very low. Because neither Medicare nor Medigap policies cover the cost of custodial nursing home care, individuals often need help paying for long term care in a nursing home. The financial requirements are very complicated and, especially when a person is married, careful analysis of income and expenses is needed. Elder Law attorneys are specially-versed in determining if a person might be eligible for benefits under Medicaid laws. In addition, only certain facilities accept Medicaid funds in payment of services. It is best to consult with an attorney early in the process since the rules are very stringent covering eligibility.

Veterans' Benefits

Veterans' Benefits are sometimes available for veterans (and spouses) who served at least one day during active war time. These can include health care and prescription benefits as well as aide and attendance benefits for those who qualify.

Long Term Care Insurance

Since neither Medicare nor Medigap policies cover the cost of custodial care whether in a nursing home or at home, other sources are necessary to finance this care. One option is to purchase insurance that covers the cost of nursing home or other long-term care.

Nursing home and home care costs are considerable. Over a period of years these costs could substantially reduce or eliminate the assets of many persons. Long term care insurance can be purchased from commercial insurers to cover part or all of the potential cost. The insurance premium depends on four factors:

- 1. the insured's age
- 2. the amount of daily benefits
- 3. the length of the waiting period before benefits begin
- 4. the length of time over which benefits are paid.

Deciding whether to purchase long term care insurance and choosing the best policy for you can be a challenge. There are more than 100 different companies writing some form of individual long term care policies. Some cover home health care as well as nursing home care and assisted living. It is important to consider whether you want coverage for both home and institutional care. Be sure to review the level of care the policy will cover and how it applies to services available in Pennsylvania.

The parish social worker is available to provide guidance for your health insurance questions: 610-525-2821

HOME HEALTH CARE AND COMMUNITY SERVICES

Home health care refers to services to recovering, disabled or chronically ill persons with treatment provided by licensed personnel in your home. Home health care services are appropriate whenever you need assistance that cannot be easily or effectively provided by a family member or friend whether the need is short or long term. You should assess your financial resources and insurance coverage to determine your ability to pay for these services.

Skilled Care Services at Home

This care is often needed after surgery, during a health crisis, or for rehabilitation therapy. Typically a doctor will refer you to a home health care agency or hospital visiting nurses department. Generally these services will be covered under Medicare, Medicaid and managed care plans. With this coverage there may be a co-payment, prior authorization requirements, and limits on the number of visits or type of services approved. In order to qualify for skilled care at home you must be homebound and have orders from a doctor for specific skilled care to be delivered. Usually these services are provided 2 to 3 times a week for 60 days or less. The following are services that can be provided if you qualify for skilled care: nursing care, certified home health aide, speech, physical or occupational therapies and social work services.

Private Pay Services at Home

A good deal of home care is paid for by individuals or family members. Some private insurances and long term care policies can be obtained to cover this non-skilled home care. There are various ways to identify private pay aides but you should always ask for references and make a complete background check on anyone you allow in your home. If you privately employ someone to assist you with home care, be aware of the tax withholding responsibilities, and other reporting that must be satisfied. As an alternative, you can contract with an agency to provide companions, personal care and homemaking. This type of service can be scheduled for as much as 24 hours per day/7 days a week. Depending on your needs, the cost of in-home private duty care may exceed the cost of a nursing home.

County Office on Aging:

Services are available from the Area Agencies on Aging located in each county of Pennsylvania. Anyone over 60 is entitled to a free assessment as well as information and referral for services. In addition, if income limits are met, services can be provided free of charge or at a nominal fee depending on income level. The numbers for area agencies in the three county area are:

- Chester County 610-344-6350
- Delaware County 610-490-1300
- Montgomery County 610-278-3601

Private Geriatric Care Managers

A geriatric care manager can be engaged privately to help assess need and arrange for services whether at home or in a facility. These professional helpers specialize in aging and should be members of the Aging Life Care Association. A listing of area workers can be found at www.aginglifecare.org. They can be especially helpful to family members who live at a distance.

Other Community Support Services

These may include adult day care, Meals on Wheels, personal emergency response systems, transportation assistance, telephone reassurance from volunteers, and friendly visitors. If you have further questions about any of these services, contact the church office at 610-525-2821 and ask to speak to the social worker or parish nurse.

Main Line Adult Day Center

This partnership of Bryn Mawr Presbyterian Church and Main Line Health, provides daytime physical and cognitive support to adults in need. You can reach them directly at 610-527-4220.

ASSISTED LIVING/PERSONAL CARE FACILITIES

Assisted Living Residences (ALR) and Personal Care Homes (PCH) are designed to assist seniors who need help with Activities of Daily Living (ADL) and find it challenging to remain in their own homes. Services might include assistance with eating, bathing, getting dressed, toileting and mobility as well as managing finances, transportation, medications, preparing meals and housework. In Pennsylvania both ALR and PCH provide 24-hour supervision for adults and adhere to state regulations determining how services are delivered. Some facilities have special units for those with dementia where activities and layout of the space is tailored specifically to that population. There are a variety of configurations for provision of this type of care including stand-alone units, units that are part of continuing care retirement communities (CCRCs) and licensed ALR or PCH. These facilities often have a daily or monthly fee structure and can sometimes be paid for by long term care insurance or veterans' benefits. There are many options for this type of care. Inperson visits can be helpful to compare options.

The BMPC social worker and parish nurse are available to provide a list of facilities and assist with information as needed. They can be reached at 610-525-2821.

SKILLED NURSING FACILITIES/NURSING HOMES

Skilled Nursing Facilities (SNF) or nursing homes provide professional medical services including 24 hour nursing care and various rehab therapies. Seniors may qualify for short-term skilled care after a hospitalization where Medicare sets limits on the number of days to be covered. Also some seniors who are too frail to live independently require ongoing long-term care in nursing homes. State and Federal regulations set guidelines for quality of care. Some SNF are stand-alone facilities and others are part of Continuing Care Retirement Communities (CCRCs). To evaluate the quality of SNF, ask if they are accredited by The Joint Commission on Accreditation of Healthcare Organizations (JCAHO). Financial statements and a record of monthly fee increases may be of interest.

CONTINUING CARE RETIREMENT COMMUNITIES

Every CCRC is different. When choosing a CCRC it's best to start early, visit friends who live in various communities, have a meal, and ask a lot of questions. You may ask for the annual disclosure statement measuring compliance with state regulations and inquire if they are accredited by the *Commission on Accreditation of Rehabilitation Facilities (CARF)*. Check which amenities and optional activities suit your life style. Consider making a deposit at one or more facilities to place you on the waiting list (you may need to wait several years to get a unit of your choice).

Because Continuing Care Retirement Communities (CCRCs) have provisions for several levels of care on campus, they allow seniors to live in one community even when service needs change. There is usually an entrance fee as well as a monthly service fee. Details of how the transition from independent living (as in a villa, cottage or apartment) to assisted living or skilled nursing care takes place varies according to the type of contract you sign. The three main types of CCRC contracts are:

- 1. Life care (Type A). This is the most costly because when skilled care is needed, the monthly charges do not change. There is a medical component to the monthly fee, beginning at admission.
- 2. Type B. This is similar to Type A, but only certain health services are included in the monthly fee. If needs increase there are additional fees.
- 3. Fee-for-service (Type C). Here the monthly fee is lower but you will pay for health care services as they are needed.

Entry fees vary greatly. A studio apartment at a church-related community may have a modest fee while a villa at the more exclusive communities may be as much as a comparable house. Most communities offer a choice of plans which affect the amount of the entry fee, monthly fee, and any refund returned when you leave or die. Those with lower fees often return nothing after the first two years of occupancy and others refund a portion of the entrance payment.

HOSPICE

Hospice provides pain and symptom management for people for whom active treatment is no longer appropriate.

Usually, to be admitted into a hospice program, the patient's doctor and the hospice medical director must certify that the patient is terminally ill with a life expectancy of six months or less. Always, something can be done to provide comfort. Practical assistance and emotional and spiritual support can be provided at a time when patients and their families may feel most alone.

When terminal illness strikes, social, psychological, financial and spiritual issues frequently accompany the physical deterioration. The interdisciplinary team helps the patient and family identify and cope with these issues. The hospice commitment to the family continues during the first year of bereavement.

Hospice care is a benefit under Medicare Hospital Insurance (Plan A) and is primarily delivered in the patient's home (but can be in a facility) under a plan of care established by the patient's attending physician and the interdisciplinary team. Medicare covers physician services, nursing care, social work, chaplain support, medical appliances and supplies, outpatient drugs for symptom and pain relief, home health aide and homemaker services, physical, occupational and speech therapy and medical services. In addition to these professionals, the patient's pastor is an important member of the team.

KNOWLEDGABLE & TRUSTED PERSONS

Accountant

An accountant's duties primarily focus on collecting, reviewing and compiling financial information for presentation in an orderly format. Certified Public Accountants (CPA) are licensed by the state in which they practice and must complete 80 hours of continuing education every two years to maintain their level of knowledge. Some CPAs specialize in taxes and financial planning. If your tax preparer is such an individual, he or she could be quite helpful in focusing your thinking on estate planning issues. Knowing your tax and financial information, the CPA could review your goals and discuss various ways to achieve them. When you meet each year to prepare your income taxes, it's a good time to review any changes in family circumstances and the tax law.

Your CPA could review the various entrance options for life care communities and suggest the financially best one for you. Also, with knowledge of your finances and current record keeping, the CPA may be able to consolidate your "paperwork" suggesting ways to make the information more readily available and presentable to you and your family. Many people look upon their CPA as a general financial advisor for life issues.

The Financial Advisor

Financial Advisor is a generic term generally referring to the individual most familiar with your financial information. This is the person in whom you have confidence and upon whose judgment you rely. When issues arise with your finances, you look to your "financial counselor" for advice.

In actuality, the "financial advisor" could be your attorney, accountant, insurance agent, financial planner or another. Whatever the professional designation, this is the individual you turn to for input on the issues affecting your financial well being. It is important to remember that no one has all the answers. The "financial advisor" should be ready to bring in other professionals as circumstances warrant to provide you with the most complete information and best recommendations for the specific facts.

Elder Law Attorney:

Elder law is an extension and refinement of estate planning. In addition to addressing general planning needs like wills, trusts and medical and financial powers of attorney, an elder law firm can help you with the following important questions:

- What type of care options and other resources exist?
- How do we pay for the right care and plan for future care needs?
- What is Medicaid and how does it apply to our situation? What about VA or other benefits?
- How do we deal with the cognitive impairment of our loved one?
- What legal documents should be in place and what provisions should they contain?
- Is a Power of Attorney adequate or do we need a guardianship? What is the difference?
- How do taxes come into play?
- How do we tie all of this into our testamentary wishes?

Having a competent elder law attorney can significantly reduce the stress you experience as a caregiver of an older adult or disabled person OR as an older adult or disabled person yourself. An experienced elder law attorney helps you ensure the best possible care while maximizing the financial resources you have available.

Pastor

Pastors, of course, have a primary concern for the spiritual welfare and health of their parishioners and the wider community. In many situations they are equipped to provide counsel and suggestions for decisions related to aging and a variety of issues related to having your "affairs in order." They should also know other resources in the community that can be of help. Consider talking with your pastor when:

- you are worried about the well-being of a loved one,
- when you want to make plans for your own funeral or memorial service,
- when you are wrestling with decisions about where to live and what kind of living arrangements you desire for your later years,
- when you are troubled or curious about your relationship with God.
- Pastoral care and counseling may be helpful in coping with health problems, adjustment to changes in mental and physical ability, spiritual and theological problems or end-of-life decisions. In every case, pastors are concerned with matters of the human spirit and the relationship between individuals and God as issues of living and aging confront us.

Counseling and mental health resources beyond the scope of what a pastor provides may also be useful in decision making. The Middleton Center at Bryn Mawr Presbyterian Church offers counseling and therapy on a sliding scale. 610-525-0766.

Health Care Providers:

Primary care providers are concerned primarily with physical health. An integrative approach to mind, body and spirit care is worth considering as we encounter health care challenges and decision making. The Caring Ministries team can assist in helping you access modalities such as yoga, exercise, meditation, body work and mindfulness.

COMPONENTS OF A GOOD ESTATE PLAN

Often people believe that if they have a will, their estate planning is complete. However, there is much more to a complete estate plan. A good plan should: make estate administration efficient, consider taxes (e.g., estate, inheritance and income), protect assets if you need long term care, and appoint someone to act for you if you become incapable of managing your affairs while you are alive.

All estate plans should include, at minimum, three important estate planning instruments:

- A power of attorney for finances
- A power of attorney for healthcare (with end of life provisions)
- A will

These are the basic documents but they are only part of the value of planning. The most important part of estate planning is considering what you want, discussing the options for your care, loved ones and assets and making a plan to carry out your wishes in the most efficient, humane and cost-effective way.

POWER OF ATTORNEY FOR FINANCE

A Power of Attorney (POA) allows a person, the Agent, to make decisions for another, the Principal. All POAs in Pennsylvania are durable unless they state otherwise. "Durable" means it is still valid if the Principal becomes incapacitated and ensures continued management of the Principal's property or healthcare. All POAs cease to be valid upon the death of the Principal.

Why would you want or need a POA? A comprehensive POA can prevent the need for guardianship if the Principal is cooperative. The Principal can always overrule the Agent unless there is a court order declaring the Principal incapacitated. If the Principal attempts to do something imprudent or dangerous with his property or himself, an entity (like a hospital, nursing home, bank, etc.) must honor his wishes until a court determines that he is no longer capable of making decisions. An impaired person cannot execute a POA. In that event, someone must obtain guardianship.

A POA can be a broad or as specific as necessary. The term broad refers to both powers that are given to the Agent and the assets that the Agent is authorized to control. A very simple POA gives the Agent a single power, such as the power to sign papers at the settlement of a house, while a comprehensive POA includes the power to manage your investments, access your bank accounts, pay your rent, make medical decisions for you, run your business and/or almost anything that you could do for yourself. The more comprehensive and precise the POA, the better it can do its job.

POWER OF ATTORNEY FOR HEALTH CARE AND ADVANCED HEALTH CARE DECLARATION

A durable health care power of attorney document designates someone you choose to make health care decisions for you if you are unable to do so yourself. An advanced directive or living will tells your family and health care providers what type of life sustaining measures you do or do not want if you have an end-stage medical condition and cannot express your wishes.

As part of the admissions process, hospitals are required by law to ask if you have executed a living will and, if you answer in the negative, the facility will offer you a form to do so. It can be challenging to consider this important decision under the stress of serious illness or hospitalization. It is better to contemplate the issue now and execute a declaration which clearly reflects your wishes. Consider this a fluid document which can be changed at any time even when facing end of life. For persons who are terminally ill and feel strongly opposed to any Emergency Medical Services (EMS) in the event that 911 is called, additional medical orders can be obtained to give the EMS team directions. These documents, which require a doctor's signature are:

- Out-of-hospital DNR (do not resuscitate) form
- POLST (Physician Orders for Life-Sustaining Treatment) form

Forms for advance care planning are readily available from health care systems and through the Caring Ministries office.

WILL

A will is a legally binding statement directing who will receive your property at your death, how it will be distributed and who will make sure the provisions are carried out. If you do not have a will, the state will determine how your property is distributed. A will appoints a legal representative (called an executor or a personal representative) to carry out your wishes. A will is especially important if you have children who are minors because it allows you to name a guardian for your children. However, a will covers only probate property. Probate is the legal process allowing a legal representative to transact business on behalf of a deceased person. This is necessary when the deceased person has assets in his or her name alone and the asset does not have a beneficiary listed or a joint owner. Many forms of property ownership pass outside of probate. Jointly owned property, property in trust, and property with a named beneficiary, such as IRAs or 401 (k) plans, and life insurance policies, all pass outside of probate and are not controlled by your will.

If you die without a valid will, the state laws for this situation (intestacy laws) determine how the property is distributed. Depending on the specific circumstances, these laws generally favor children, a spouse, parents and even grandparents and their lineal descendants in varying proportions. If there are no relatives within a certain degree the state takes the property.

If you already have a will, take it out and reread it. Do you understand what it says? Do you agree now with the arrangements you made earlier? Update your will if circumstances have changed. Marriage, death, divorce, birth, asset growth, moving to a different state or a change in estate tax laws are events that may prompt the need for you to revise your will. A good rule-of-thumb is to review your will at least once every five years.

GUARDIANSHIP

A guardianship is a legal relationship in which one person, the guardian, is granted both the responsibility and the authority to make decisions on your behalf if you have been judged by the court incapable of managing your own affairs.

If you have not appointed someone to make decisions for you and you become mentally incapacitated, the court will have to appoint someone to assist you. The person the law appoints may or may not be the person you would choose to make decisions for you. Your spouse does not have the legal right to make financial decisions for you unless he/she are designated a POA.

It may be necessary to have you declared incapacitated by a court to protect you or your assets from harm. A petition will be filed with the court. A judge will hear medical testimony to determine if you meet the legal definition of incapacity: whether your ability to receive and evaluate information is impaired to such an extent that you are unable to make safe decisions regarding your finances, medical care or living arrangements. An attorney is required, and anyone can oppose the appointment of a guardian.

A guardian must account to the court for his actions, file annual reports and seek court approval when he performs certain tasks (such as selling the incapacitated person's house or doing estate planning). There are certain asset protection tools that a guardian cannot use. In general, a POA is a better choice because you get to choose the decision maker and the decisions he or she can make.

TRUST

A trust is a legal arrangement through which one person (or an institution) called a "trustee" holds legal title to property for another person, called a "beneficiary." The "grantor" or "settlor" creates and usually funds the trust with assets. To fund a trust means to re-title assets into the ownership of the trust. The settlor defines in the trust document how the assets in the trust will be used. A trust can be revocable where the grantor can change the terms and remove property put in the trust, or irrevocable where, once the trust is established and funded with assets, it cannot be changed and the funds cannot be removed. It can be established during life or it can be established.

There are different reasons for placing assets in trust. Some use a revocable trust to avoid probate. Assets with a beneficiary or a joint owner will pass to that beneficiary or joint owner immediately upon death by operation of law without any action.

A revocable trust (often used for probate avoidance) provides no tax advantages over a properly drafted will. "Credit shelter" or "life insurance" trusts focus on reducing taxes for very large estates. Other trusts may be used to protect property from creditors, reduce estate or income taxes or help the grantor protect assets and qualify for Medicaid.

BENEFICIARY DESIGNATIONS IN CONTRACTS

When you plan your estate you need to make sure your retirement plan, life insurance and other beneficiary designations are up to date and are coordinated with your overall estate planning.

It is important to realize that life insurance, annuities, IRAs and pension plans are contracts and pass according to the beneficiary designation you stipulate in the contract. Usually you name a primary beneficiary and an alternate who would receive the proceeds if the primary beneficiary predeceases you. The beneficiary designations should be periodically reviewed to ensure that they reflect your current intent.

Additionally, it is possible to designate mutual fund accounts as well as bank CDs as payable on death accounts. This means the proceeds of the designated accounts will pass to the named beneficiary upon proof of death of the current owner. If you are considering this, it is important to make sure such designations are in keeping with your overall estate plan as incorporated in your will and/or trust documents.

OTHER CONSIDERATIONS

For those individuals who want to provide for family members and also leave assets to charitable organizations, there are a number of gifting options. Planning charitable gifts presents a wonderful opportunity to discuss your personal goals and beliefs with family members. In addition, there may be estate, income, and gift tax benefits from such gifting. Contributions to the Bryn Mawr Presbyterian Church Foundation or to the Presbyterian Church Foundation support the work of the church. Some persons consider endowing their pledge so that their annual giving can continue beyond their lifetime. Pamphlets are available in the church office, if you wish more information on the benefits of making gifts in these various forms.

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