

Preparing for Someday: Thinking and Planning Ahead

Compiled by the Ann's Choice
Wellbeing Committee

FOREWORD

Welcome to this guide, “*Preparing for Someday: Thinking and Planning Ahead*”, to help you plan for the future. It is intended to be a reference for you, with sections to be read as you need or choose, rather than to be read straight through from start to finish. We have tried to be comprehensive, to provide you with information that is in one place and is readily accessible to you.

At several places in the guide you will see listings of service providers. There is no order (other than, perhaps, alphabetical), preference, or endorsement implied in the listings - no recommendations are made or implied. The lists are provided simply to make you aware of options and are not designed to be comprehensive. They should give you, at least, a starting point for your decision making.

We hope that you find this document of assistance to you and your family as you look to the future.

The Embrace Wellbeing Team

TABLE OF CONTENTS

- 1.0 Introduction
- 2.0 Essential Conversations
- 3.0 Estate Planning
 - 3.1 Should You Work with an Attorney?
 - 3.2 Will
 - 3.3 Trust
 - 3.4 General Durable Power of Attorney
 - 3.5 Advance Directive, Living Will, Health Care Power of Attorney
 - 3.6 Where to Keep Your Documents
- 4.0 Funeral Planning
 - 4.1 Protecting Your Rights
 - 4.2 Cremation
 - 4.3 Green Burial
 - 4.4 Donation
- 5.0 Important Papers
 - 5.1 Basic Information
 - 5.2 Important Papers to Include
 - 5.3 Passwords
- 6.0 Transitions
 - 6.1 Home Health Services
 - 6.2 Rehabilitation Services
 - 6.3 Assisted Living/Personal Care
 - 6.4 Long Term Care
 - 6.5 Memory Care
 - 6.6 Palliative Care
 - 6.7 Hospice
 - 6.8 Useful Resources

- 7.0 Final Wishes
- 8.0 Be Prepared Checklist
- 9.0 When a Resident Dies at Ann's Choice
- 10.0 A Checklist for Afterwards
- 11.0 Writing the Obituary
- 12.0 The Death Certificate
- 13.0 Bereavement Support
- 14.0 How to Help Someone who is Grieving
- 15.0 Probate
- 16.0 Settling the Estate
- 17.0 Financial Matters
- 18.0 Social Security and Medicare
- 19.0 Credit Cards
- 20.0 Motor Vehicles
- 21.0 Veterans' Benefits For Spouses
 - 21.1 Survivors Pension
 - 21.2 Burial Benefits
- 22.0 Taxes, Taxes, Taxes
- 23.0 Additional Reference Materials
- 24.0 A Final Word

1.0 INTRODUCTION

Since its formation in 2022, the Embrace Well-being team has had the singular focus of providing services that enhance our lives here at Ann's Choice. As part of those efforts, we have compiled a handbook of information that should help you be prepared as you move through the inevitable transitions that accompany aging.

2.0 ESSENTIAL CONVERSATIONS

As a whole, people in our society are reluctant to discuss death and dying, even though it is an inevitable part of life. It is an uncomfortable topic for many of us, so we tend to avoid it. In fact, as reported by AARP ([How to Start Talking About End-of-Life Care \(aarp.org\)](https://www.aarp.org/living/health-care/advance-care/advance-care-planning/advance-care-planning-101/)):

“How we want to die is the most important and costly conversation Americans aren’t having. Consider these facts:

- Ninety percent of people think it is important to talk about end-of-life wishes with their loved ones, but only 27 percent have done so, according to a 2021 study published in the *Journal of Psychosocial Nursing and Mental Health Services*.
- One in 5 respondents to a 2018 survey by the Conversation Project, which works to promote greater discussion of end-of-life-care, said they’ve avoided the subject out of worry about upsetting their loved ones.
- A sizable majority of people say they want to die at home, but 60 percent die in hospitals or institutions.”

At some point in our lives we become aware of our own personal mortality and begin to confront the necessity of preparing for the eventual outcome. Preparing has several components:

- making or updating a will
- making or updating a financial power of attorney and naming an agent who can act on your behalf if need be
- making or updating advance directives and naming a proxy who can act on your behalf in health care decisions should you be unable to do so
- collecting your important papers into one location so that family members can easily find them

- making decisions about what matters to you and what your wishes are for care through the end of life
- most importantly, having conversations with your loved ones about all of this.

At an extremely difficult and emotionally challenging time, your loved ones will need to deal with all the details surrounding your death and your estate. It is important, then, that they have in advance as much information as possible about your final wishes and the disposition of your assets. You should be prepared and have one or more conversations with your family to share what they will need to know. It may seem difficult, even overwhelming, to broach these issues with your family. Some conversations are, relatively speaking, easy, such as working with an attorney to write your will, to establish a financial power of attorney with an agent to exercise it if necessary, and to construct a living will that names a healthcare proxy for you. Harder conversations may be those you have with your family members, who themselves may not want to contemplate your mortality. It is important that they understand not only your estate and finances, but also your wishes for care at the end of your life. It is difficult indeed to talk about this, but essential for everyone involved, and you may find that, once begun, the conversations are easier than you expected.

The Conversation Project, which focuses on discussions about health care choices, begins its guide to starting conversations about your wishes for care through the end of life by posing this:

“Try finishing this sentence:

What matters to me through the end of my life
is _____”

Some suggestions given include “being able to recognize my children; being independent; being able to spend time with the ones I love.”

A document from The Conversation Project ([The Conversation Project - Have You Had The Conversation?](#)), called “Your Conversation Starter Guide”, is a valuable resource and can help you organize your thoughts and preferences for health care as you near the end of life. It also provides guidance for how to plan your conversations, making what you think and

feel as clear as possible, not only to loved ones, but also to those who are involved in your healthcare. This document is available at no charge from the Conversation Project. Also available is a workbook titled “What Matters to Me: A Workbook for People with Serious Illness”, which helps you prepare to talk with the healthcare team about what is most important to you. It provides a straightforward way to share your goals and preferences about the care you receive.

You may also choose to complete a document called “Five Wishes”, which is available on-line ([About Five Wishes · Five Wishes](#)) or in print. The five wishes for end of life care include:

- the person you wish to make care decisions for you when you are unable
- the medical treatments you do or do not want
- how comfortable you wish to be
- how you want people to treat you
- what you want loved ones to know

This document “substantially meets” Pennsylvania’s legal requirements. It is especially useful for conversations with your healthcare team and provides an extra layer of assurance that your wishes are clearly understood.

You are likely to find that open discussion with family members may not be as awkward and uncomfortable as you might have thought, and that such conversations can provide clarity and a sense of relief to everyone involved. Simply knowing where all of your important documents are and what your wishes are helps your family to help you.

NOTES

3.0 ESTATE PLANNING

WHAT DOCUMENTS SHOULD YOU HAVE?

A comprehensive and effective estate plan includes 3 documents:

- A last will and testament
- A general durable power of attorney
- A living will/advance directive/health care power of attorney

3.1 SHOULD YOU WORK WITH AN ATTORNEY?

If you moved to Ann's Choice from another state, your estate plan documents may not meet Pennsylvania's legal requirements, and consultation with an attorney is strongly advised. Attorneys who specialize in elder law are most familiar with estate planning needs. Additionally, if you completed these documents several years ago, it might be worthwhile to re-examine them in case anything has changed in the interim. Although forms for these documents are available on-line, working with an attorney for estate planning has several advantages:

- Assurance that these documents comply with state laws (these laws vary among states, so a document executed in another state may not be valid in Pennsylvania)
- Documents will be well-drafted, because of the attorney's supervision
- Questions can be addressed by the attorney
- Because of his/her experience, the attorney may offer suggestions or notice issues that you were unaware of
- With the guidance of an attorney, your assets may be repositioned to protect your estate from taxes, probate costs, and catastrophic nursing home costs
- The attorney can keep original copies of the documents safely and privately

3.2 WILL

The will is a legal document that expresses your wishes for the management and distribution of your estate's assets after your death. (Historically, a document that disposed of personal property was called a "testament", whereas real property was disposed of in a "will". That distinction is no longer made, so a will disposes of both personal and real property.) The will permits you to select your heirs and to choose the person(s) best suited to be the executor of the estate. In addition, if there are young children, the will protects the right of an individual to choose a guardian for the children.

If a person dies without a will (intestate), laws of the state of Pennsylvania guide distribution of all of that person's estate that is not jointly owned or that has a designated beneficiary. An administrator, appointed by the Orphan's Court, handles debts and expenses of the estate and then distributes the estate's assets. Closest living relatives are favored in the distribution. Only rarely does the state take the property.

An important element of will writing is naming an executor for your estate. The executor is responsible for seeing that your wishes, as stated in the will, are carried out. In addition, the executor deals with the Register of Wills and Probate Court; identifies all assets, including all bank, brokerage, and retirement accounts, any property you owned, as well as an inventory of personal effects, such as collections, antiques, or other valuables; pays any outstanding debts, and carries out distribution of your estate as you have specified. These important tasks may be time-consuming. You may choose a family member or friend or you may select an attorney or financial planner with professional expertise. It is also possible to name more than one executor in order to have a backup plan in place.

A self-proving will is one in which you sign the will in the presence of two witnesses. Then, with a notary present, you and the witnesses sign affidavits stating that you all signed the will in one another's presence. The affidavits are notarized and attached to the will. This permits the probate court in Pennsylvania to accept your will ("prove" it) without needing to contact the witnesses who signed it. At present, most wills written with an attorney are self-proving.

3.3 TRUST

Although it is not an essential component of an estate plan, you may wish to establish a trust as part of your will. Simply defined, a trust is a legal document in which you give another person or an organization (the “trustee”) the right to use your assets for the benefit of a third party (the “beneficiary”). If the trust is included in your will it is known as a “testamentary trust” (also known as a “living trust” or a “revocable trust”) and only becomes effective after your death. As the name implies, you may revoke or amend the trust at any time, as long as you are mentally competent.

A trust must be formed under state law, so its form and content will vary from state to state. In addition to the living trust, several other types of trusts exist (12 or so) and consultation with an estate attorney is probably advisable. Trusts can help to avoid probate court, although because some assets cannot be part of a trust, it is unlikely that probate will be avoided entirely. When you establish a trust, the property covered by the trust is now legally titled to the trustee. Probate is concerned only with property that you own at the time of death.

Among other benefits, a trust may also help to reduce estate taxes, can assist children with special needs, and can provide income to beneficiaries over time; for example, a certain amount each year or at given milestones.

3.4 GENERAL DURABLE POWER OF ATTORNEY

A general durable power of attorney (POA) is an individualized document that is tailored to your needs and preferences and, in all likelihood, ought not to be completed as an on-line form. Also sometimes known as a financial POA, this document authorizes someone (your “agent”) to act on your behalf in legal, financial, and business matters. Depending on how you choose to customize it, it may give the agent authority to cover such things as medical or tuition expenses of family members, to pay taxes, to make charitable donations, and to make gifts to family or friends. In Pennsylvania, this document must be signed in the presence of two witnesses and notarized. It becomes effective immediately after you sign it, so it should be kept in a safe place until it is needed. It remains in effect, even if you are mentally or physically incapacitated, unless you revoke it, until you die. It is especially important to have this document in your estate plan if unforeseen circumstances arise, such as a serious accident or sudden illness. If you do not have this document and your spouse needs to gain access to financial accounts that are in your name only or he/she needs to sell or mortgage the family home, it will be necessary for the spouse to petition the court to be appointed as your guardian.

It is important to note that you may revoke a power of attorney at any time, as long as you are mentally competent.

3.5 ADVANCE DIRECTIVE/ LIVING WILL/HEALTHCARE POWER OF ATTORNEY

In Pennsylvania, the terms “living will” and “advance directive” are used interchangeably. This document describes your healthcare choices and treatment instructions if you can no longer express them yourself. This provides guidance for healthcare personnel about proceeding with certain medical treatments if you are, for example, in a coma, terminally ill or injured, have late-stage dementia, or are near the end of life. Items for consideration include whether you wish to receive artificial nutrition and hydration, comfort care and treatment for pain, supplemental oxygen, use of a ventilator to assist breathing, blood transfusion, whether you would want CPR performed, whether you have a do-not-resuscitate (DNR) order, at-home or hospice care preferences, organ donation, and when you would like life support measures to be withdrawn. In contrast with other estate planning documents, this need not be notarized, but it frequently is. It is very helpful to discuss these choices with family members and close friends now, to avoid confusion later. You may change your decisions at any time. Because many people may need access to this information, consider providing a copy to your physician, your healthcare proxy, and family members.

This may be combined with a healthcare power of attorney (POA), which names an individual as your healthcare proxy to make medical decisions on your behalf. This is what is known as a “springing” POA, because it only springs up if and when you are incapacitated. The proxy may not contradict the terms of your living will. Instead, this individual can assist in situations that are not covered by your living will or if your living will has been invalidated. The proxy should be someone who is quite familiar with you and your preferences and should know the terms of your living will. The proxy can speak on your behalf if you cannot; has access to your medical records if you are incapacitated; and can assure that your healthcare choices are respected if you cannot communicate. This POA may be revoked by you as long as you are mentally competent.

Two other documents are not necessary elements of the advance directive or your estate plan, but are ones you should be aware of. They are the Pennsylvania Orders for Life-Sustaining Treatment (POLST) and the Out of Hospital Do-Not-Resuscitate Order (OOH-DNR). Both deal with end-of-life choices and are medico-legal documents.

Here at Ann’s Choice, any resident who is admitted to Continuing Care is presented with the POLST. The POLST is a medical order that specifies the types of medical treatment an individual wishes to receive toward the

end of life. As a medical order it must be signed by the individual's physician, a physician's assistant (PA), or a certified registered nurse practitioner (CRNP), as well as by the resident or the resident's surrogate. It's signed last by the physician and becomes effective immediately thereafter. It is a bright pink form (to make it readily apparent) and travels with the individual across settings of care, including the hospital. Pennsylvania also provides a bright pink card of a size to put in a wallet.

The OOH-DNR addresses events that occur, as the name states, in situations other than a hospital. Specifically, it permits Emergency Medical Services personnel to respond appropriately to an individual who is in cardiac or respiratory distress in an outpatient setting. If the individual has an OOH-DNR, EMS personnel are legally bound to withhold cardiopulmonary resuscitation (CPR); otherwise they are legally bound to perform CPR. This must be signed by a physician who certifies that the individual meets certain criteria and has requested it or it has been requested by a surrogate. Eligibility criteria include: (1) the individual has an end-stage medical condition; (2) the individual has a terminal condition; (3) the individual is permanently unconscious and has a living will directing that no CPR be provided in the event of cardiac or pulmonary arrest; OR (4) the individual is permanently unconscious and has a living will authorizing the surrogate or another person named in the OOH-DNR to request an OOH-DNR. The physician signs and dates last, whereupon the document immediately becomes valid. The individual may be issued an OOH-DNR bracelet or necklace after the document is signed. This is the only order that allows EMS personnel to withhold CPR, and they will not accept a copy of the form.

The OOH-DNR exclusively addresses resuscitation, whereas the POLST covers more treatment choices at end of life. Either document may be revoked at any time by the individual or surrogate. This should be kept with your File of Life on your refrigerator, because emergency personnel will look there for directives.

3.6 WHERE SHOULD YOU KEEP THE DOCUMENTS?

WILL

Probate court will not accept a copy of the will – the original must be presented. Therefore, the will should be kept in a safe place and one that is readily accessible to your executor, the person you have named to administer your estate and who will be responsible for filing your will with the probate court.

The best place to leave the executed will is with your attorney. The attorney will keep your will safe and secure and will be able to be in contact with your executor when you die. The attorney can assist the executor with procedures for filing the will in probate court. If the attorney dies or retires, protocols are in place to transfer responsibility for your will to a successor attorney.

An alternative is to leave your will with your executor, although if the executor should predecease you, there may not be an assured back-up plan.

The original will should NOT be kept in a safe deposit box. Access to the box is strictly limited after a death. When you die, unless your executor is named as a co-signer for the safe deposit box, it can be difficult for someone else, even a spouse, to gain access to the box. The contents of a safe deposit box must be inventoried, as part of the estate, so the only access to the box prior to the inventory is to remove a will and/or burial instructions. This must be done in the presence of a bank employee, who then must file Pennsylvania Form REV-487 (Entry into a Safe Deposit Box to Remove a Will or Cemetery Deed) with the Pennsylvania Department of Revenue. No other contents may be removed prior to the inventory. Of course, the financial institution where the box is located must be open. (This was a major issue during the recent COVID pandemic, when many banks were closed for a period of time.)

In order to conduct an inventory of the contents of a safe deposit box, an estate representative, usually the executor, must provide written notice to the Pennsylvania Department of Revenue at least seven days in advance of the planned inventory. This is accomplished by completing Form REV-1845 (Notice of Intent to Enter Safe Deposit Box) and mailing it, with return receipt service, to the Department at:

PA DEPARTMENT OF REVENUE
SAFE DEPOSIT BOX UNIT
PO BOX 280600
HARRISBURG PA 17128-0600

In addition, a copy of the notice must be provided to the financial institution where the box is located.

The inventory is conducted by an estate representative. If a spouse is a co-owner of the safe deposit box, that individual should be present. An attorney who represents the estate may also be present. After the inventory has been completed, the estate representative must file, within 20 days of entry, a completed Safe Deposit Box Inventory form, REV-485, to the Department's Safe Deposit Box Unit.

POWER OF ATTORNEY

Because the POA becomes effective immediately after being signed, it is important to keep it in a safe location. This is NOT a safe deposit box. Unfortunately, because it would be possible for the agent you have named to mishandle your assets, for extra protection the attorney often keeps the original document. If you keep a copy it should be stored in a fireproof, waterproof strongbox in your home. The POA is valid only during your lifetime and concludes with your death, so your executor will not need a copy.

LIVING WILL/HEALTHCARE POWER OF ATTORNEY

The originals of these documents may be kept with your attorney, as well; again NOT in a safe deposit box. It is appropriate to keep several copies: with your physician, with your healthcare proxy, in a location in your home that is accessible to trusted family members and friends, and a card in your purse or wallet that describes where to find them. In addition, if you go to a hospital or other medical facility for a procedure, you should bring copies of both documents to be placed in your medical file.

NOTES

4.0 FUNERAL PLANNING

When you die do you wish to be buried in a family plot? Do you want a viewing? Do you want a religious service? Would you prefer cremation and having your ashes scattered in a special place? Or to be more environmentally conscious, would you choose a green burial? Would you choose to be an organ donor or to donate your whole body to science?

“According to a report by National Funeral Directors Association, 62.5% of Americans felt it was very important to communicate their funeral plans and wishes to family members before their own death, yet only 21.4% had done so.”

These decisions are another important part of the conversations to have with your family about your final wishes. Having your choices explicit and clearly understood by your family members will assure that they are carried out and will also minimize decision-making in the immediate aftermath of your death. The extent of planning is your personal preference; some people designate only a preference for burial or cremation, while other individuals specify considerably greater detail.

In some cases, a person may choose to pre-pay funeral expenses. Several factors should be considered before deciding to do this. Advantages of pre-paying include the peace of mind that comes with knowing that your family will not have that financial burden; having the specifics of the service and associated events under your control; choosing your cemetery plot if needed; the ability to lock-in the services at current prices and avoid inflationary increases in cost. However, there are some drawbacks to pre-paying, including your loss of access to the money you are pre-paying; payment by your estate for the services may be tax-deductible; the funeral home with which you have contracted may go out of business or may misappropriate your funds; if you change your mind about your plans, you may be unable to get a full or partial refund. It would be advisable to work with an attorney if you decide to do this.

Other alternatives to set aside money for final expenses are available:

- Life insurance – You pay premiums to a company that pays a lump-sum death benefit to your beneficiaries. Two types are whole life insurance, which can provide lifetime coverage as long as premiums are paid, and term life insurance, which provides coverage for only a specified period of time.

- Funeral insurance – Also called burial or final expense insurance, this is a type of life insurance that specifically covers the cost of final arrangements, but could also be used to pay any debts you may have outstanding at the time of death. Because few, if any, health questions are asked, this may be easier to qualify for than a regular life insurance policy. Several premium options are available.
- Savings account – One can be established solely for the purpose of covering funeral costs. It is possible, however, that this account would be subject to probate, which would delay payment of the funds. The account could be joint, with a trusted family member who will handle your finances after you die.
- Payable on Death Account – Also known as a Totten Trust, this account lets you deposit and withdraw funds at any time, with money going to the beneficiary after you die.
- Veterans’ benefits – These benefits include a no-cost burial plot and grave marker in a national cemetery. Some funds (\$300) may also be available for burial at another location, but these are generally insufficient to cover all costs. In addition, application must be made to the VA after the veteran’s death, so some time will elapse before any money is received.
- Social Security burial benefit – By law, this is \$255 (amount unchanged since 1954). Again, application must be made to Social Security after the death and required documents include a death certificate, so considerable time may elapse before payment is received.

4.1 Protecting your rights

In 2015, the Federal Trade Commission published a document titled “Complying with the Funeral Rule” which clearly stated what funeral providers, including those providing only cremation, must do. This FTC policy provides consumer financial protection by clearly listing and explaining your rights. As stated on the FTC website:

“Under the FTC’s Funeral Rule, consumers have the right to get a general price list from a funeral provider when they ask about funeral arrangements. They also have the right to choose the funeral goods and services they want (with some exceptions), and funeral providers must state this right on the general price list. If state or local law requires

purchase of any particular item, the funeral provider must disclose it on the price list, with a reference to the specific law. The funeral provider may not refuse, or charge a fee, to handle a casket bought elsewhere, and a provider offering cremations must make alternative containers available. The FTC conducts undercover inspections every year to make sure that funeral homes are complying with the agency's Funeral Rule. The Funeral Rule applies anytime a consumer seeks information from a funeral provider, whether the consumer is asking about pre-need or at-need arrangements."

You are entitled to shop around and compare prices among funeral homes and to receive accurate, itemized price information for goods and services that you choose. You may do this by telephone, without providing your name, address, or telephone number first. Many funeral homes will mail you their price list, the General Price List (GPL). Price lists for caskets and outer burial containers may be separate from the GPL and may include items that are less expensive than those on display. In addition, the funeral provider must make 6 disclosures on its general price list regarding

- Your right to select only desired goods and services
- Embalming - no state law requires embalming after every death, even if there is a viewing
- Alternative containers for direct cremation - no state or local law requires a casket for cremation; you may buy an urn elsewhere
- Basic service fees of funeral director, staff, and overhead
- Casket price list - you may buy a casket elsewhere, and the funeral home may not refuse to use it or charge a fee for doing so
- Outer burial container price list

Additional items include prices for transfer of remains to the funeral home; forwarding of remains to another funeral home; receiving remains from another funeral home; immediate burial; other preparation of the body; use of facilities and staff for viewing, funeral ceremony, memorial service, and graveside service; hearse; and limousine.

You pay only for what you explicitly select; after you choose and before you pay you should receive a written statement that shows exactly what you are buying and the cost of each item.

This rule applies whether you are pre-planning a funeral or whether your family is doing this after you die. If a funeral provider is found to have violated the Funeral Rule, that provider may be subject to penalties of up to \$50,120 per violation.

4.2 Cremation

The most common choices after a death are traditional burial and cremation; in fact, more people now choose cremation rather than burial. About 57% of all dispositions are now cremations. The National Funeral Directors Association projected that, by 2035, about 78% of people would choose cremation. The Choice Mutual Insurance Company, which has been conducting surveys of burial preferences of Americans for a number of years, reported in its 2022 survey of people 18 years of age and older that 37% of participants would select cremation, while 34% would choose traditional burial; the remaining 29% chose other options.

Most people are familiar with traditional funerals, but may be less so with cremation. Several factors are likely responsible for the increased choice of cremation, including decreases in religious affiliation, increased environmental awareness, lower cost, more choices, and more flexible timing.

Because the Bible does not explicitly forbid cremation, most Christians do not believe that it is a sin; however, for those groups that believe in the physical resurrection of the body, some faith leaders advise against it. Although burial is still preferred, since 1973 the Catholic Church no longer forbids cremation. Orthodox and Conservative rabbinic authorities prohibit cremation; Reform rabbinic opinion states that cremation is not sinful, but ought to be discouraged. Remains of cremated Jews may be buried in a Jewish cemetery. For Muslims, cremation is seen as a disrespectful way of disposing of a body and is not to be done.

Because cremation reduces land usage, decreases the use of resources like hardwood, and avoids the use of chemicals used with embalming, cremation is considered by many to be more protective of the environment than traditional burial.

In 2021, the median cost of a funeral with viewing and burial was \$7848 (using a vault adds about \$1500); for a funeral with viewing and cremation the median cost was \$6970. In Pennsylvania, the average cost of funeral service was \$8093, the average cost of cremation service was

\$7463, and the average cost of direct cremation was \$2456. Direct cremation, which does not include a service, is considerably less expensive than a traditional burial.

There are several choices for what can be done with the ashes, with varying associated costs:

- **Keep the cremains at home**— the most common option. The only cost is that of the urn.
- **Keepsake urns**— tiny urns meant only to hold a portion of the cremains, so that multiple family members will have a keepsake.
- **Burial** - Some people opt to bury the cremains. There may be additional fees if the cemetery requires an urn vault.
- **Store in a columbarium or mausoleum**— A columbarium is a building that has little niches meant to hold urns. A mausoleum is a small house-like structure meant to store caskets or urns. Some mausoleums are very large and extravagant, making them extremely expensive.
- **Scatter the ashes** — This is a popular option, and there are many possibilities, but these are limited by federal, state, and local laws and regulations. In general, ashes may be scattered in these locations:
 - *Most national parks* - first request permission from the chief park ranger; a permit is usually required; scattering should occur away from trails or other developed area; environmentally or archaeologically sensitive areas are probably prohibited sites
 - *Private property* - your own is fine; get permission, preferably in writing, to use someone else's property
 - *Sports stadiums and amusement parks* - these are private property, so you must have permission to spread ashes
 - *At sea* - this is allowed, but only at least 3 nautical miles from land; ashes may be scattered from a boat or plane; only biodegradable urns may be used; flowers or wreaths may be used, but they must decompose easily; a permit is not required, but you must report the burial to the EPA within 30 days; pet cremains may not be spread without a special permit
 - *Uninhabited public land* - this depends on the state, but forests and other wilderness areas away from commonly used trails are possible, with permission, of course

- *In a graveyard or cemetery* – if these are on private property, permission must be obtained from the owner; if on public property ask about laws or regulations that pertain; some cemeteries have begun to offer “scattering gardens”

In Pennsylvania:

- *On private property* – no state laws prohibit this; obtain permission if using someone else’s property
 - *Scattering gardens* – a number of churches, cemeteries, and memorial parks have established these areas
 - *Public land* – there are no state restrictions, but cities or counties may have local regulations
 - *Federal land* – National Parks permit scattering of ashes if permission is obtained – check with the park ranger
 - *From the sky* – no laws restrict this; however, federal aviation law prohibits dropping anything that could harm people or property (so no urns or containers)
 - *Inland waterways* – not subject to federal regulation, but state or local laws may limit spreading; Eco Water Urns are biodegradable and float upright for a few minutes before the bottom dissolves, freeing the ashes into the water
- **Space** — you can pay to have your ashes ejected into space
 - **Coral reef** — companies like Eternal Reefs use some of the ashes when they construct an artificial reef formation
 - **Fireworks display** — some ashes will be incorporated into the fireworks.
 - **Memorial tree** — companies like Better Place Foresters will integrate some of the ashes into the soil near a dedicated tree that you select; they will also place a permanent marker on or near the tree, signifying who lies there

4.3 Green burial

Although this may be an unfamiliar option, green (or natural) burial was typical until the early 1900s. Home funerals (home vigils) were common. The body remained in the home, was bathed and dressed; some cooling method was used to slow decomposition for the one to three days before burial. Additionally, many Jewish and Muslim burials are essentially green burials.

In a green burial, the body is not embalmed, nor is it cremated. Shrouds and caskets are made of biodegradable materials. (In a sort of hybrid version, cremated remains are buried in biodegradable urns.) No concrete vault is used. Green burial is a more environmentally friendly option than traditional burial, and it is also less costly. Toxic chemicals, such as those used in embalming, are not used. Instead, materials used are biodegradable or renewable. Some materials used are cork, jute, bamboo, wicker, unfinished wood, cardboard, and hemp.

Green burials have several advantages, most notably the use of fewer resources. It is estimated that cemeteries in the United States bury more than 30 million board feet of wood; 1.6 million tons of reinforced concrete; 17,000 tons of copper and bronze; 5.3 million gallons of embalming fluid (which contains formaldehyde); and 90,000 tons of steel. None of these resources is part of a green burial. Further, formaldehyde is a known carcinogen, so this may present a risk to funeral home workers.

Green burials reduce pollution. Although cremation might be considered to be more environmentally friendly, it does present some environmental issues. The furnace is heated to between 1600 and 1800 degrees Fahrenheit for as long as 2 hours. The fuel consumed in one cremation could power a 2000-square-foot house for up to 7 days. In addition, the process releases pollutants including sulfur dioxide, nitrogen oxides, and heavy metals into the air.

Green burials may be less expensive. Although the price will vary depending on the region and type of burial site, a green burial will cost between \$1000 and \$4000. Because green cemetery plots are larger than those for a traditional cemetery, they may cost more.

Green burials protect the natural environment. Conventional cemeteries, especially in heavily populated areas like New York and California, are running out of space. Instead of increasing the size of these, green cemeteries remain natural, leaving plants and animals unimpeded. An additional benefit is that treatments used to maintain the grounds of conventional cemeteries, including fertilizers, herbicides, and pesticides, are not needed.

Green burials do have some downsides. No grave markers are used, so unless you know precisely where the burial is, it will not be possible to visit the site.

Because the body is not embalmed, burial must be sooner than for a conventional burial. This may necessitate bringing the funeral together so quickly that not everyone who would wish to do so can attend.

Some states have laws that limit or make green burials difficult. These may include a requirement for paved roads at burial plots, required fencing around a cemetery, requiring a licensed funeral director to handle transportation, and requiring refrigeration or embalming for a person who has been dead for more than 24 hours.

Pennsylvania does permit green burials. The average cost for a burial plot is \$950 to \$3000, depending on the cemetery. Some permit natural interment of cremated remains. The average price for that burial is \$450.

No law in Pennsylvania requires that you employ a funeral director; in fact, you may keep the body at home, refrigerating it with dry ice, obtaining transit and burial permits, registering for a death certificate, purchasing a biodegradable burial container, and transferring the body for interment at a green cemetery. Many funeral homes will assist with a green burial service. Because of the complexity of a do-it-yourself burial, use of a funeral home remains the preferred option for many families. The cost of this is around \$1750.

A list of nearby green burial certified funeral homes is given below. It is important to appreciate that this is evolving as more people become aware of and choose green burial. This is the most current information in 2023. The list was compiled in part by a non-profit group, the Friends of Green Burial PA.

BUCKS COUNTY

Naugle Funeral & Cremation Service, Ltd.

135 West Pumping Station Road

Quakertown, PA 18951

215-536-3343

nauglefcs.com

MONTGOMERY COUNTY

Laurel Hill Cemetery and Funeral Home

225 Belmont Avenue
Bala Cynwyd, PA 19004
610-668-9900
laurehillphl.com

PHILADELPHIA

Francis Funeral Home Inc

5201 Whitby Ave
Philadelphia PA 19143
(215) 747-5200
francisfh@aol.com

Khadijah Alderman Funeral Home

1924 W Hunting Park Ave
Philadelphia, PA 19140
(215) 225-6600
khadijahsfuneralsvc.com

May Funeral Home Philadelphia

4075 Haverford Ave
Philadelphia, PA 19104
(856) 335-1461
mayfuneralhomes.com

Slabinski Funeral Home Inc

2614 Orthodox St
Philadelphia, PA 19137
(215) 744-2700
slabinskifuneralhome.com

Vincent Gangemi Funeral Home, Inc.

2238 S Broad St
Philadelphia, PA 19145
(215) 467-3838
gangemifuneralhome.com

Green Burial Grounds

This list was compiled from the Green Burial Directory. In addition, rural township cemeteries may accommodate green burials. Pennsylvania law does permit a person to use private land as a family cemetery, but this must be registered with the local county clerk. However, land that drains into a stream that supplies water to a city may not be used unless it is at least one mile from the city. A natural burial ground is a cemetery that is committed to maintaining the natural landscape and does only green burials. A hybrid cemetery is one that has both a traditional and a separate green burial section. Because of increasing demand, availability of green burial sites is likely to increase.

Greater Philadelphia

Natural

[Steelmantown Cemetery, Steelmantown, NJ](#)

Hybrid

[Southwest Burial Ground](#), (green sections in cemetery), Upper Darby, PA

[Green Meadow Burial Ground](#), (green section in Fountain Hill Cemetery) Fountain Hill, PA

[West Laurel Hill Cemetery \(Nature's Sanctuary](#) is a green section of the cemetery), Bala Cynwyd, PA

[Eco-Eternity Forest](#), (ashes only) Cresco, PA

Central Pennsylvania

Natural

[Lampeter Green Burial Grounds](#), Lancaster, PA (717) 898-6211

[Cambridge Green Burial Preserve](#), Cambridge, PA (717) 898-6211

Mellinger Mennonite Cemetery, Lancaster, PA (717) 393-2661

Hybrid

[Paxtang Cemetery \(Wood's Edge](#) is their green section), Harrisburg, PA

Western Pennsylvania

Natural

[Penn Forest National Burial Park](#), Verona, PA

Pennsylvania's first exclusively green burial ground is committed to creating a beautiful burial park where nature is at the forefront. The burial ground is bordered by Plum Creek and is just a mile upstream from the Allegheny River.

Hybrid

[Oakwood Cemetery](#) (Highland Meadows is a green section of the cemetery), Sharon, PA

4.4 Donation

Another option is for donation of organs or the whole body. Any resident of Pennsylvania over the age of 18 may become a tissue or organ donor by registering on-line or in person at any Department of Transportation office. There are no fees associated with registering or with donation. You may choose to donate only specific organs; if so, you should make your family aware of your choices. In all likelihood, because of our advanced age, the only desirable tissues may be the skin and the corneas.

Whole body donation

[Anatomy Gifts Registry](http://www.anatomygifts.org) (*www.anatomygifts.org*)

7522 Connelley Dr Ste M, Hanover, MD 21076
(800) 300-5433

The Anatomy Gifts Registry is a program of the Anatomic Gift Foundation, Inc. The Foundation is a non-profit donation organization that was founded in 1994, with the objective of supporting and advancing scientific research and medical education. From the AGR website:

Some examples of the many studies that benefit from human tissue donation through the AGR program include:

- Anatomy and Physiology Student Education and Labs
- Alzheimer's, Dementia, and Parkinson's Research
- Cranio-Maxillofacial Surgical Technology
- Drug Therapy
- Emergency First Responder Training
- Medical Resident Training
- Minimally-Invasive Surgical Technology
- Musculo-Skeletal Enhancements

- Neurosurgery
- Orthopedic Device Technology
- Otolaryngology
- Pain Management
- Robotic Cardiac and Thoracic Surgical Training
- Sports Medicine Surgeon and Physician Technique Development

“Anatomy Gifts Registry provides an alternative option to traditional final arrangement options. By choosing the option of whole body donation, individuals have a real and lasting way to support medical advances that impact the lives of future generations for decades to come. Through the benefits of whole body donation, medical communities are able to continue to discover cures and therapies for many diseases and conditions currently afflicting patients across the world.

All researchers, clinicians, and educators participating in the Anatomy Gifts Registry program must enter into a binding agreement ensuring strict adherence to AGR Tissue Use Policy and ensuring our oversight as to how the donated tissues are utilized. All applicants wishing to work with Anatomy Gift Registry must be approved and meet several mandatory factors including scientific and educational merit of their work.

Our whole body donation program aims to contribute to advancing medical science while also fulfilling the wishes of you or a loved one via a simple and helpful process. Anatomy Gifts Registry will cover all expenses related to the donation process once a candidate for donation is accepted. These covered costs include transportation and cremation services. The only cost associated with our program is a small shipping and handling fee for the return of ashes to the designated recipients, should they choose to have the remains shipped. Since costs associated with final arrangements can often be high, donating your body to science can be a blessing for family members as well as medical researchers. Whole body donation is one of the most compassionate funeral alternatives available.

Anatomy Gifts Registry operates under a strict code of ethics that provides dignified and compassionate care for donors and donor families. We offer donor families the option of receiving a follow-up letter that provides insight into the many ways their loved one’s donation has benefited medical research and education. Anatomy

Gifts Registry also performs the final disposition cremation directly on site and returns ashes to donor families within 4-6 weeks.

By choosing to donate a body to science, you or your loved ones are playing a vital role in the process of advancing medical insight and discovery. Anatomy Gifts Registry allows donors to continue to leave a lasting legacy and make an impact on the lives of generations to come.”

Additional options in Pennsylvania for whole body donation include:

- [Drexel University College of Medicine](#)

Department of Neurobiology and Anatomy 2900 Queen Lane
Philadelphia, PA 19129

- [Humanity Gifts Registry](#)

Health Sciences Center P.O. Box 835
Philadelphia, PA 19105

- [Philadelphia College of Osteopathic Medicine](#)

Department of Anatomy 4170 City Avenue
Philadelphia, PA 19131

- [Temple University](#)

School of Medicine Department of Anatomy and Cell Biology
3400 North Broad Street Room 6180 MS
Philadelphia, PA 19140

- [Thomas Jefferson University](#)

Jefferson Medical College Department of Anatomy
1020 Locust Street
Philadelphia, PA 19107

- [Science Care](#)

2001 West Pinnacle Peak Road #175
Phoenix, AZ 85027

- [BioGift](#)

17819 NE Riverside Parkway Suite C
Portland, OR 97230

- [MedCure](#)

17900 NE Riverside Pkwy 205
Portland, OR 97230

- [Experience Anatomy Foundation](#)

4340 Taggart Creek Rd Suite D1
Charlotte, NC 28208

Finally, here is a listing of funeral homes, cremation services, and a whole body donation organization in the vicinity of Ann's Choice. This list is available in the Pastoral Ministries office.

|With no preference or endorsement, Pastoral Ministries at Ann's Choice offers the following list to help residents plan ahead. If you have questions, please contact Pastoral Ministries.

Kang Na 215-443-4925 Amy Martin 215-443-3831
kang.na@erickson.com amy.martin@erickson.com

James R. Baskwill Funeral Home
20 W. Montgomery Avenue, Hatboro, PA 19040
215-675-1631 (cremation services)
<https://www.baskwill.com/>

John J. Bryers Funeral Home
406 Easton Road, Willow Grove, PA 19090
215-659-1630 (cremation services)
<https://www.bryersfh.com/>

Campbell and Thomas Funeral Home
905 Second Street Pike, Richboro, PA 18954
215-322-5545 (cremation services)
<https://www.campbellfh.com/>

Decker-Givnish Funeral Home
216 York Road, Warminster, PA18974
215-675-2070
<https://www.deckergivnish.com/>

Lamb Funeral Home
101 Byberry Road, Huntingdon Valley, PA 19006
215-357-1260

Joseph Levine & Son Funeral Home
4737 Street Road, Trevoise, PA 19053
215-942-4700 <https://www.levinefuneral.com/>

James J. McGhee-Givnish Funeral Home
690 Belmont Avenue, Southampton, PA 18966
215-355-0902 (cremation services)
<https://www.mcgheegivnish.com/>

Louis Plunkett Funeral Home
529 York Road, Hatboro, PA 19040
215-672-6262 (cremation services)
<https://plunkettfuneralhome.com>

Schneider Funeral Home
431 N. York Road, Hatboro, PA 19040
215-672-0660 (cremation services)
<https://www.schneiderfuneralhome.net/>

Shelly Funeral Home Incorporated
1460 Easton Rd, Warrington, PA 18976
215-343-3040 (cremation services)
<https://www.shellyfuneralhomes.com/>

Donahue Funeral Home
1218-20 Bethlehem Pike, Flourtown, PA. 19031
215-429-4964 (cremation services)
<https://donahuefuneral.com/>

Joseph A. Fluehr III Funeral Home Inc.
800 Newtown-Richboro Road, Richboro, PA 18954
215-968-8585 (cremation services)
<https://www.fluehr.com/>

Goldsteins' Rosenberg's Raphael-Sacks
310 Second Street Pike, Southampton, PA 18966
215-927-5800 <https://www.goldsteinsfuneral.com/>

Wm. Rowen Grant Funeral Home
659 Street Road, Southampton, PA 18966
215-355-6050 [LINK](#) (cremation services)

Kirk & Nice Suburban Chapel
333 W. County Line Road, Huntingdon Valley, PA 19006
215-354-0085 <https://www.kirkandnicesuburban.com/>
(cremation services)

Cremation Only

American Cremation Services, Inc.
www.AmericanCremation.net
1859 Stout Drive, Warwick, PA 18974
215-443-7788 or 215-443-7171

Cremation Society of Pennsylvania
714 Dekalb Pike, Blue Bell, PA 19422
610-354-9800

Delaware Valley Cremation Center
7350 State Road, Philadelphia, PA 19136
215-543-9339

Philadelphia Cremation Society
1500 Market Street, 12th Floor
Philadelphia, PA 19102
610-595-5327

Body Donation

Humanity Gifts Registry
P.O. Box 835, Philadelphia, PA 19105-0835
215-922-4440

NOTES:

5.0 IMPORTANT PAPERS

5.1 Basic Information

We all have them and odds are they aren't all in one place. We may not even be absolutely sure where some of them are. Your family members probably have even less of an idea of where these items may be, yet they are essential for dealing with your affairs and estate if you become incapacitated or die. For everyone's peace of mind (yours as well as your family's), having these papers collected in one place long before any event happens is worth the effort of gathering them up.

The list of important documents is fairly long and the task may seem daunting, so dealing with it at your own pace and in an orderly fashion, section by section, will make the task less overwhelming.

Start with basic information about yourself (a suggested form is included).

Then begin to collect the documents that are listed on the next page. That list will also serve as a table of contents for your document collection. Use a 3-ring binder or large envelope to assemble these. You want to make certain that items don't slip out, so file folders are not the best option. Plastic sheet protectors are very useful to hold individual documents.

After you have done this, heave a sigh of relief and congratulate yourself on a major accomplishment.

Basic Information Worksheet

Name:

Maiden Name (if applicable):

Date of birth:

Place of birth:

Social Security number:

Father's name and birthplace:

Mother's name and birthplace:

Marital status:

Spouse's name:

Names of children and stepchildren:

Names of grandchildren:

Names of great-grandchildren:

Names of siblings:

Emergency Contacts:

1. Name: _____

Phone number: _____

Email address: _____

2. Name: _____

Phone number: _____

Email address: _____

Name and phone number of person authorized to make healthcare decisions:

Location of safe deposit box and key:

Location of checkbook(s):

List of doctors:

Name: _____

Specialty: _____

Phone number: _____

Name: _____

Specialty: _____

Phone number: _____

Name: _____

Specialty: _____

Phone number: _____

Name and phone number of attorney:

Name and phone number of accountant:

Additional Information:

5.2 Important Papers to Include

1. End-of-Life instructions – things family /executors need to know immediately about your last wishes, dealing with the apartment (emptying, turning in keys, refurbishing costs, and return of entry fee), where other items might be (car, etc.)
2. Last Will and Testament (be sure that it is up to date)
3. Financial Power of Attorney and Agent
4. Living Will/Advance Directive and Health Care Proxy
5. POLST, if applicable
6. OOH DNR, if applicable
7. Primary care and other physician names and contact information
8. Bank account(s): location(s) and number(s)
9. Checkbook(s): where located, account numbers and balances, automatic bill payment due dates
10. Copies of all credit cards, front and back; when payment is due
11. Driver's license
12. Social security card
13. Insurance information: apartment, car, valuables, umbrella, life
14. Retirement accounts, with numbers and whom to contact
15. Pensions, with numbers and whom to contact
16. Other investments, with numbers and whom to contact
17. Other contracts/certificates; e.g., annuities
18. Internet accounts and passwords, online banking (be sure these are current)
19. Names and contact information for attorney, accountant, financial planner
20. Funeral/cemetery information – names, where located, deeds to plots, any arrangements made and where
21. Erickson Living Residence and Care Agreement – VERY IMPORTANT
22. Information about value of personal possessions/heirlooms and to whom they should go
23. Where to dispose of unwanted items
24. IRS and state tax information – previous returns for at least 3 years, where current data are kept

25. Certificates – birth, marriage, property, car, citizenship, death of family members
26. Storage unit - location, keys (or combination), how paid?
27. Car registration and title
28. Reserved parking place number and location, how paid?
29. Any real estate, business holdings, royalties, etc.
30. Passports
31. List of friends you wish to have notified

5.3 Passwords

Passwords are designed to provide security for us as we do our on-line activities, but as the number of activities grows it becomes challenging to remember the associated passwords. As we do more and more activities on-line the numbers of passwords grow and grow. In general, we write them down and keep the list handy, updating as we add new sites or change existing passwords. Access to these passwords is essential for anyone who is managing your estate, in order to take any actions with the accounts – cancelling credit cards, dealing with banks and other financial institutions, cancelling social media accounts and subscriptions, and so on. Your list of passwords needs to be part of your important documents collection, readily accessible as needed.

Because we're human, we tend to use passwords that we can remember easily (even if we keep a list) and we tend not to change them unless required by the site we're trying to access. Even when we're obliged to change a password, we might choose to return to one that we have used in the past. Computer hackers love these behaviors, because they can make us easy targets for fraud (identity theft) or scams. "Hackers can crack the average password in seconds if it includes common phrases and words, is reused between websites, or has been previously stolen." Once you have been hacked, it's too late to take some precautions.

Hackers use 4 major strategies to attempt to steal your passwords:

- Brute force – otherwise known as trial and error, guessing
- Dictionary attack – systematic guessing, typically using commonly employed passwords

- Phishing – sending you a communication pretending to be from a company you trust in order to get you to send your personal information
- Credential stuffing – happens when a company’s security is breached and your information is purchased from the dark web

Just an FYI, here is a list of the 10 most common passwords of 2023 from SplashData (I wonder how they know...):

- 123456
- 123456789
- Qwerty
- Password
- 1234567
- 12345678
- 12345
- Iloveyou
- 111111
- 123123

A few other common ones are: nothing, secret, password1, admin, 987654321, and qwertyuiop. Dictionary words or words that can easily be guessed, like the name of a place, sport, team, or the like should not be used. You should also avoid birthdays, anniversaries, street names, or any other details that are closely associated with you.

So to start, it is probably best not to use any of those. Passwords are considered to be weak or strong, depending on how easily they could be “cracked” by a hacker. It has been thought that a mixture of upper and lower case letters, numbers, and symbols is the best approach, and many sites will require this type of password, although recent research suggests that this isn’t as hack-resistant as once thought. The longer the password, the harder it will be to hack, and most experts recommend at least 8 but preferably 12 or more characters. Although it is very tempting to do so, you should not re-use passwords or use the same password on multiple sites – “one and done” is the motto.

Most of us wind up with an ever-growing list of passwords that are, if we follow the rules, very difficult to remember. Usually they are written on one or more pieces of paper. Although this is perfectly okay if the list is kept securely, it is not necessarily the safest way to keep the information. Passwords should NEVER be stored on your computer or other devices. Even if you type the list on your computer, print it, and immediately delete the file. Some sites suggest that you can keep your password on file with them so that you won't need to remember it the next time that you visit. It isn't a great idea to accept that offer.

These days, in the face of ever more capable hackers with ever more capable computing at their disposal, experts recommend using a password manager. A password manager is a program or app that you can use to securely store usernames and passwords. A major benefit is that you can create complex passwords that are difficult for hackers to guess. Your passwords are stored in an encrypted format that only you can decrypt by using your master password. (Some password managers use two-factor authentication, an additional form of identification such as a fingerprint, a code sent to your phone, or voice recognition.) Various programs are available, some of which are free and others of which require a subscription.

They all work in a similar fashion. Once you sign up and provide the necessary information, you will be asked to create a password, a "master password". Then as you visit your on-line sites, request a password change at the site, and most password managers can automatically create strong passwords using a cryptographically secure random password generator. The good news is that only the password manager needs to "remember" these passwords.

Another advantage to using a password manager and keeping the password with your important documents is that it will make it much easier for anyone who is dealing with your estate to access and work with your accounts. It is crucial to keep the master password very safe and secure, because no one else - not even the password manager - has it, so if it is lost or misplaced all of the passwords are lost. If the master password is revealed, all passwords are compromised.

NOTES

6.0 TRANSITIONS

We made a major transition when we moved to Ann's Choice: downsizing our possessions, choosing which to keep and which to pass on to family members, charities, or junk; leaving our homes; leaving our neighborhoods and familiar surroundings; possibly leaving friends. After we move in and get settled, we may realize that we really don't want or need some of what we've brought, so we may wind up doing a "mini" downsizing at some point. Available services to help with this process are listed at the end of this section.

Your personal vehicle or vehicles may also factor into downsizing here. As a couple you may have brought 2 vehicles but have realized, after living here for a while, that you don't really need the second one, or you may have decided to stop driving entirely. One option for disposing of these vehicles is to consider donation. A number of organizations will happily accept donated cars. One such organization is Ann's Choice. Working through a program established by our Philanthropy Department, your vehicle will be picked up by a dealer, who will then sell the vehicle, with proceeds coming to our Benevolent Care Fund. (Pennsylvania does require that you mail back your license plate. You should receive confirmation that it has been received before you cancel your insurance on the vehicle.)

Here at Ann's Choice we are encouraged to live independently as long as possible, and a comprehensive support system is in place. Several support groups serve residents, including Caregiver Support (for caregivers of independent living residents, and on a separate day for caregivers of Rose Garden residents), the Low Vision Group, the Hearing Loss Forum, and Where Did I Leave My Keys?, all facilitated by Resident Life. In addition we have a Parkinson's Patient and Care Partners Club and a Memory Health Program. The Memory Health Program coordinates services for independent living residents who have a diagnosis of dementia, and consists of a structured approach to diagnostic testing, medical treatment and monitoring, supportive care, and family and caregiver education. Ann's Club, a component of the Memory Health Program, is a social day program that uses social experiences and fun programs to provide memory support for individuals with some memory loss or confusion.

6.1 Home Health Services

As our care needs increase, Home Health Services can provide assistance in our activities of daily living, including bathing, dressing, meal preparation, medication reminders, respite care, and accompaniment to off-campus shopping, appointments, and airports. Members of the staff can provide companionship and general household help, including laundry/ironing, light housekeeping and closet organizing, menu planning and shopping, playing cards and other games, crafting, help with correspondence, packing and unpacking, walking around campus, wheelchair escorts, escorts to classes, plays, concerts, and other activities. These services are available, starting at 4 hours, with 2-hour increments up to 24-hour in-home care.

In addition, Home Health's Visiting Nurse service can provide medical, therapeutic, and social services in your apartment, including management of chronic medical conditions, wound care, catheter care, tube feeding, case management in coordination with your doctors, monitoring and teaching for unstable diabetics, medication management, and individual health assessments and care plans. Residents may also hire personnel from outside agencies to provide these services.

Under Part A and/or Part B, Medicare will cover home health services from a certified agency for residents who meet certain requirements. A physician must certify the resident's need for the services according to a plan of care that details the type of health care needed and by what type of health care professional, as well as the frequency of services, any needed medical equipment, and anticipated results of the care. The physician must see the resident in person (waived during the pandemic) fewer than 90 days before or 30 days after commencement of the home health services and review the care plan with the health care team at least once every 60 days. If the health care provider recommends that a resident get services more often than Medicare pays, the resident may have to pay some or all of those costs. Erickson Advantage, a Medicare Advantage plan, will also pay for these services, without copay. (For questions about EA, call 215.443.3180 during regular weekday working hours.) Medicaid will pay for in-home care, and eligible former service members may qualify for one of several VA programs that help pay for care at home. In addition, most long-term care insurance policies include provisions for in-home care.

Home health aides may perform such tasks as assessing pain; checking blood pressure, breathing, heart rate, and temperature (vital signs); checking the safety of the home; ensuring that medications are being taken correctly; monitoring food and drink intake; and teaching residents and caregivers about the plan of care and how to carry it out. A nurse provides skilled care, including changing wound dressings; giving injections, intravenous drugs, or tube feedings; and teaches about prescription drugs and diabetes care.

6.2 Rehabilitation Services

Rehabilitation services are readily available, as well, with *physical therapy* to restore and enhance muscle and limb function; *speech therapy* to aid cognitive, speech, and swallowing abilities; and *occupational therapy* to improve the ability to perform daily activities. Under Part A and/or Part B, Medicare will cover these services for residents. Erickson Advantage will also pay for these services, with copay amounts depending on the individual plan.

After a hospital stay, you may not be quite ready to return to your apartment without some rehabilitation. Some space in Continuing Care is reserved for this purpose, so that your recovery can continue near to friends and family. Pleasant private rooms, each with a half-bath, a bed with memory foam mattress, flat screen TV with cable, and a private phone provide many of the comforts of home as you recover.

At some point, however, staying in an independent living apartment may become too challenging, and then the “continuing care” part of CCRC becomes more pertinent. Here on campus we have a complement of continuing care facilities and services: Assisted Living, Personal Care, Long-term Care and Rehabilitation, Skilled Nursing, and Memory Care. Tours of these facilities for you and your family are available by appointment. Call 215.443.4955 to schedule an appointment.

The Finance Office at Ann’s Choice can provide you with a document, “Transition to Continuing Care Handbook” that contains an explanation of the changes that take place with this move. The handbook, which includes a step-by-step checklist of tasks for the transition, is a valuable resource. Importantly, the first item on that checklist is providing to the Admissions Department in Continuing Care legal documents, including your Advance Directive, your Financial Power of Attorney and agent

named, your Medical Power of Attorney and proxy named, any Trust Agreements, and, if you have one, your Long-term Care Policy.

Transitioning to continuing care will require much more downsizing. Apartments and rooms there are smaller, and we won't have room for – or even need – many of our current furnishings and possessions. A partial list of possible destinations for some possessions follows at the end of this section. Most, but not all, of this information is in the transition handbook and is provided here for your convenience.

6.3 Assisted Living/Personal Care

These services are designed for residents who wish to maintain the maximum level of independence but who need help with some daily activities, including preparing meals, bathing, dressing, housekeeping, and managing medications. Residents have easy access to the remainder of the campus and its services. Assisted Living apartments (efficiency, 1 and 2 bedroom) include small kitchenettes; Personal Care units are smaller and do not. Monthly service package prices vary according to size of the unit and the level of care needed. Bartholomew's Table, the on-site dining room for residents, serves breakfast, lunch, and dinner. (Visitors are welcome to dine with residents here, but they would need to pre-order their meals.)

Medicare does NOT pay separately for assisted living, nor does Erickson Advantage; however, home health and rehabilitation services are still covered as in independent living. Long-term care insurance, depending on the specific policy, will pay for health-related needs, including assistance with activities of daily living, of residents.

6.4 Long Term Care

This may be appropriate for residents who struggle to adequately and safely meet their own care needs; who live alone or rely on costly paid care by aides or others; who have advanced chronic conditions such as diabetes, Parkinson's, COPD, chronic heart failure, or are at high risk for stroke. Residents here receive specialized and individualized 24-hour care. Each resident has a private living space and private half-bath, with individual climate controls and electric adjustable beds. A wide range of care needs, including IV therapy, wound care, catheter and colostomy care, gastronomy tube management, assistance with dining, pain management, oxygen needs, and CPAP are met by trained staff.

Medicare Part A (hospital) will cover skilled nursing facility care for up to 100 days in each benefit period after a qualifying inpatient hospital stay of at least 3 days. For the first 20 days there is no coinsurance; for days 21 to 100 coinsurance charge is up to \$200 per day. Medicare pays nothing for days 101 and beyond in each benefit period. Of note, Erickson Advantage pays according to the same guidelines, but does NOT require a prior hospital stay to begin coverage. Long-term care insurance typically does not begin paying until after the Medicare coverage period expires. For residents who have exhausted their financial reserves, Medicaid (for which the resident must apply) will pay for long-term care.

6.5 Memory Care























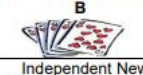



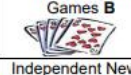


Residents with dementia, including Alzheimer's disease or other memory loss, are provided specialized care in this section of Rose Garden. Each resident has a private room in a comfortable, home-like setting. The neighborhood provides a safe and serene environment that allows maximum independence. All residents have access to the adjacent, beautiful outdoor garden. Care programs focus on each individual's strengths, interests, and abilities, all provided by a care team whose members are specially trained to meet the unique needs of the individual. Self-directed, guided, and structured daily programs are provided, and extensive family involvement and support are encouraged.

It is useful to remember that there are several types of dementia, each of which has a different average life expectancy after diagnosis. For Alzheimer's, this is 8 -12 years; for frontotemporal dementia, this is about 8 years; for Huntington's, life expectancy averages 10-20 years; for Lewy body dementia this is 6-12 years; for vascular dementia, this is about 5 years.

Neither original Medicare nor Erickson Advantage pays for memory care, with the exception of some expenses, including prescription medications, hospital stays, diagnostic tests, and cognitive assessments and safety evaluation. Medicare will not cover custodial care or nonmedical care, which includes both assistance with activities of daily living and the cost of residence in the unit. Long-term care insurance will pay for residents in memory care. For veterans who qualify for VA pensions and who: require help from another person to perform everyday personal functions such as bathing, dressings, and eating; are confined to bed because of disability; are in a facility because of mental incapacity; or have very limited eyesight (less than 5/200 in both eyes, even with corrective lenses) or a

significantly contracted visual field, the *Aid and Attendance* program will help to cover the cost of a caregiver. Surviving spouses of qualifying veterans may also be eligible for this benefit. The application form is available on-line and the completed forms can be mailed to the pension management center that serves Pennsylvania or filed in person at the regional VA benefits office (US Department of Veterans Affairs, 5000 Wissahickon Avenue, Philadelphia 19144; 800.827.1000).

For all areas of continuing care, a wide range of daily programs and activities is available, as well as numerous events, which are listed in *The Garden Gazette*, a monthly CC publication. Weekly calendars of activities are neighborhood-specific. A sample for Chestnut Pointe and Chestnut Ridge is shown below:

 Chestnut Pointe and Chestnut Ridge Weekly Schedule							
Time	Monday 4/17	Tuesday 4/18	Wednesday 4/19	Thursday 4/20	Friday 4/21	Saturday 4/22	Sunday 4/23
10am	Fitness with Friends 9:30am B	Morning Greeting/Deliveries	Morning Greeting/Deliveries	Morning Greeting/Deliveries	Morning Greetings/Deliveries	Morning Greeting/Deliveries	Morning greeting/Deliveries
11am	Scattergories MT 	Wii Bowling MT 	Jeopardy MT 	Wheel of Fortune MT 	Jeopardy MT 	Wii Bowling MT 	Wheel of Fortune MT 
2pm	Balloon Toss B 	Therapy Dog Visit with Cedar B 	Food and Dining Meeting B 	Travel the World MT 	Rock painting for our Garden FK 	Stuart Rudnick The Magician B 	Movie Matinee with Popcorn MT 
3pm	Coffee and Connections B Come down and meet your neighbors CP/CR	Bingo B 	Dominos B 	Learning Mah-Jong B 	Resident Card Games B 	Manicures B/Room Visits 	Board Games B 
4pm	Resident Card Games B 	Resident Card Games B 	Resident Card Games B 	Resident Card Games B 	Happy Hour B 	Resident Card Games B 	Resident Card Games B 
6pm-7pm	Independent News, Jeopardy & Wheel of Fortune	Independent News, Jeopardy & Wheel of Fortune	Independent News, Jeopardy & Wheel of Fortune	BINGO!!! B 	Independent News, Jeopardy & Wheel of Fortune	Independent News, Jeopardy & Wheel of Fortune	Independent News, Jeopardy & Wheel of Fortune
Programs are subject to cancellations and change with or without notice*							
Location key B= Bistro P=Parlor GR= 2nd Floor Game Room CY=Courtyard MT=Movie Theater FK=Family Kitchen LR= 1st floor Living Room Recorded sermons, hymn singing, and prayers loop on ACTV 976 / 980. Please remember to wash your hands, & wear a mask to all activities & meals. If you need a mask just ask. Alicia or Katie. (215) 443-3938. Call for word searches, themed packets, puzzles, arts and craft projects, or assistance in your apartment.							

6.6 Palliative Care

As we age, we are likely to be at risk for and to develop health issues, conditions, and illnesses that require any number of medications for prevention and/or treatment. The objective of palliative care is to alleviate symptoms produced by these, including pain, shortness of breath, fatigue, constipation, nausea, loss of appetite, problems with sleep, and many others. The focus is on improving your quality of life and to provide support to your family as well. It is appropriate for all stages of disease and can help to navigate decision-making in complex medical situations. It is available at any stage of an illness and does not depend on whether your condition can be cured. You may wish to consider palliative care if you or your loved one has pain or other symptoms due to any serious illness, has physical or emotional pain that is not under control, and/or needs help understanding the illness and discussing treatment options.

Not surprisingly, this involves a multi-disciplinary team of professionals, who work in collaboration with your primary physician. Members of this team may include doctors, nurses, social workers, religious or spiritual advisors, pharmacists, nutritionists, counselors, and others. Palliative care can be provided in the hospital, at outpatient clinics, or at home.

Palliative care is a medical specialty and our Medical Center team at Ann's Choice includes one physician who is board-certified in palliative care. Outside agencies also provide this service. Medicare Part B and Medicaid provide coverage for this service, although some treatments and medications may not be covered. Medicare Part C (Medicare Advantage) must offer the same benefits and services as original Medicare. Palliative care is also covered by many private insurers, with coverage differing by member benefits. Other costs may include premiums, deductibles, coinsurance, and copayments.

According to the National Institute of Nursing Research, a component institute of NIH:

“Recent studies show that patients who receive palliative care report improvement in:

- pain, nausea, and shortness of breath
- communication with their health care providers and family members
- emotional support

Other studies also show that starting palliative care early in the course of an illness

- ensures that care is more in line with patients' wishes
- decreases stress and increases confidence in making decisions surrounding a loved one's care
- meets the emotional and spiritual needs of patients and their families."

6.7 Hospice Care

Hospice care also focuses on the pain, symptoms, and stress of serious illness and is available to, as defined by Medicare, an individual whose life expectancy, certified by 2 physicians (the hospice doctor and one's regular doctor), is 6 months or less. At this point, the decision has been made to stop curative treatment and to focus on symptom management and comfort care, so that an individual's final months are as good and fulfilling as possible for the individual and his or her loved ones. Care is provided by a multi-disciplinary team and is personalized for each individual's needs. Care may include:

- doctors' services
- nursing and medical services
- home medical equipment and supplies, including oxygen, walkers, and wheelchairs
- 24/7 access to care to answer questions or provide support
- management of complex pain and other symptoms
- aide for personal care and light housekeeping
- medical social services
- spiritual care and support
- physical, occupational, dietary, and speech therapies
- short-term inpatient respite care, up to 5 days, for family caregivers
- ongoing grief counseling for the individual, family, and friends

Hospice care may be provided in your own home, if desired, and may prevent frequent trips to the emergency room for aggressive care, so that the individual and his or her family retain more control of the care given. Under Medicare, hospice care coverage will continue as long as an

individual needs it, even longer than 6 months, if the hospice doctor recertifies that terminal illness still exists.

Medicare Part A covers, through the Medicare Hospice Benefit, all costs of care related to the terminal prognosis of an individual, although some medications, services, and equipment may not be covered. Medicaid provides similar coverage, and most private insurers have a hospice benefit that pays all related costs of care for the terminal diagnosis. An important feature of Medicare's hospice benefit is that grief support is available to family members for 13 months after the individual in hospice care dies. Medicare Part C plans (Medicare Advantage) must offer the same benefits and services as original Medicare plans.

6.8 Some Useful Resources

Downsizers, Donations

Treasure Chest

Household items - Keystone, Bayberry
Grove Terrace Level

Open Tuesday, Thursday, & Saturday 11
AM to 2 PM

Any donations must be in good condition,
able to be resold

They will NOT accept clothing, used linens (towels,
sheets), electronics

They will accept kitchen things, small lamps,
jewelry, small luggage,

knickknacks, new (in packaging)
sheets, blankets

Call Ginny Stea at 215.675.1065 for
information

Furniture - Liberty Commons, Lewis Pointe,
Terrace Level

Open Wednesday 12 Noon to 2 PM;
Saturday 11 AM to 3 PM

Call Clayton Neiderman (215) 868-
7592 and Marilyn Sambrano (215)
266-4757 for more information

National Giving Alliance (NGA)

822 Veterans Way (on the road into the
Warminster Park); 215.682.9183

"NGA works to improve the quality of life
for homeless,

low-income and moderate-income children,
women and men. "

Accept only NEW clothing
and toiletries

Will accept handcrafted hats, scarves,
mittens, sweaters,

afghans (through

Keystone Krafters)

Small afghans go to children entering foster care
(they usually
have been removed from
abusive situations)

Large afghans may go to state-run elder care facilities for
low-income persons

Will accept raw materials (yarn, needles, hooks) to make
handcrafted items

**Holy Redeemer
Thrift Store**

473 E. County Line Road,
Warminster; 215.675.5833
Open M-F 10 AM to 6 PM, Saturday
9 AM to 5 PM

**Goodwill Store and
Donation Center**

1487 W. Street Road, Warminster;
215.441.9185
Open M-S 9 AM to 9 PM, Sunday 12
N to 5 PM

**Salvation
Army**

FREE pickup; items must be in
good condition
To schedule, call
1.800.95.TRUCK

**Habitat for
Humanity ReStore**

539 Jacksonville Road, Warminster 18974;
215.822.2708
FREE pickup; items must be in
good condition
Accepts new and gently used appliances,
furniture, building materials,
household goods

**Alderfer Auction
Company**

501 Fairgrounds Road, Hatfield 19044;
215.393.3000 or 215.393.3023

**Brown
Brothers**

2455 Durham Road (Route 413), Buckingham
18912; 215.794.7630

**Brownie's Buy Outs and
Clean Outs**

Shamong, NJ;
1.800.475.5465
Full/partial estate liquidation; antiques &
collectibles

**Joseph F.
Felice**

104 Locksley Road, Glen Mills
19342; 610.358.0833
E-mail:
jfeliceauctions@aol.com
Free
consultation

**Home Downsizing
Consultants**

215.345.6094 or
215.264.4304
Appraiser service
only

**Stephenson's Auctioneers and
Appraisers**

1005 Industrial Boulevard, Southampton
18966; 215.322.6182

"All-in-one" Services

Personal Property Managers

4387 Swamp Road, Suite 291, Doylestown
18902; 215.485.9272
Web:
personalpropertymanagers.com
Estate sale, household liquidation, cleanout
services
Free
consultation
Disabled veteran owned
company
Portion of proceeds donated to
veterans groups
(Wounded Warriors, Bob Woodruff
Foundation*)
*For traumatic brain injury
survivors

Senior Transition Services

3408 Hillside Drive, Huntingdon Valley, 19006;
215.947.5490
"We have worked with 1,300 clients by helping to organize their
homes and/or transition
to a new residence in more than 50 retirement communities in greater
Philadelphia."
Services include: creating floor plan of new home; evaluating contents
& recommending
what to keep, bequeath, sell, donate, shred and discard;
photographing items for
placement in new home & to record what was sold or donated;
contacting antique dealers,
auctioneers, & consignment shops to gauge interest in selling
selected items;
scheduling charitable organizations to pick up donated items;
coordinating with mobile
shredding service to pick up documents to be shredded; arranging

disposal of unwanted items & trash; contacting professional movers to provide estimate for packing & moving contents; overseeing professional packers & movers on moving day; unpacking boxes to create your new home
Will also help with content removal and/or estate liquidation

Shredding

Get It Shredded

15 Vincent Circle, Ivyland 18974;
215.442.1239

Titan Mobile Shredding

510 Applebutter Road, Pipersville 18947;
215.766.3480

Shred Nations

868 W. Street Road, Warminster 18974;
267.766.0434

Clean Out

John Cook House Cleanout

468 Sycamore Road, Douglassville 19518; 610.326.9617 or 610.223.0714 (cell)

Junkluggers of Bucks, Montgomery, and Philadelphia Counties

1438 Easton Avenue,
Abington 19001
M-F 7:30 AM to 11 PM
Sat 7:30 Am
to 8 PM
Sun 9 AM to 8
PM

"We provide appliance removal, furniture removal, e-waste recycling, and much more.

Our eco-friendly luggers are committed to you, your community, and the environment, which is why we work hard to donate, recycle, or otherwise ethically dispose of clients' unwanted goods."

Zero-touch curbside junk pickup, junk removal, appliance removal, furniture removal
Estate cleanouts, storage unit cleanouts, senior downsizing, Dumpster rentals, free onsite junk removal estimates available

Storage

Storageworks

1634 Mearns Road, Warminster
18974; 215.441.4400

Extra Space Storage

600 Jacksonville Road, Warminster 18974;
215.672.2168

Move Managers

A. Mastrocco Moving and Storage

1060 Louis Drive, Warminster
18974; 2125.444.9330

Isaac's Moving and Storage

4309 G Street, Philadelphia 191244;
215.563.3700
Open 24
hours

Mayflower Movers

Louderback Moving
Services
1180 Church Road, Suite 502, Lansdale;

267.328.5936
M-F 8 AM to 5 PM; closed
weekends

Sinclair Moving and
Storage
361 Cooper Road, West Berlin, NJ 08091;
856.753.7400
M-F 8 AM to 5 PM; closed
weekends

**Atlas Van
Lines**

Reads Moving
Systems, Inc.
1840 County Line Road, Suite 201, Huntingdon Valley 19006;
215.443.2770; 800.523.6638

NOTES

7.0 FINAL WISHES

We have all probably been told, or at least heard, the Golden Rule. The wording may vary, but the essence is the same among philosophies, cultures, and religions:

“That character is best that doesn’t do to another what isn’t good for itself.” — *Zoroaster, Persia (circa 500 BC)*

“What you do not want done to yourself, do not do to others.” — *Confucius, China (circa 500 BC)*

“We should conduct ourselves toward others as we would have them act toward us.” — *Aristotle, Greece (circa 350 BC)*

“What you shun enduring yourself, attempt not to impose on others.” — *Epicetus, Greece (circa 150 AD)*

“To do as one would be done by, and to love one’s neighbour as oneself, constitute the ideal perfection of utilitarian morality.” — *John Stuart Mill, England (1861)*

“Do unto others as you would have them do unto you.” (*Christianity*)

“That which is hateful to you, do not do to your fellow. That is the entire Law; all the rest is commentary.” (*Judaism*)

“No one of you is a believer until he desires for his brother that which he desires for himself.” (*Islam*)

“Hurt not others in ways that you yourself would find hurtful.” (*Buddhism*)

“This is the sum of duty: do naught unto others which would cause you pain if done to you.” (*Hinduism*)

In your final wishes, that maxim can be turned around to be “Have others do unto you what you wish, not what they may wish.” You can best assure that this is the case by making your final wishes explicit and known to family members. You have probably already done this as part of your planning, and may too, have completed the POLST (Pennsylvania Orders for Life-Sustaining Treatment) and the OOHDNR (Out Of Hospital Do Not Resuscitate) forms. You may also have utilized the Five Wishes, the advance directive planning program. *If you complete and sign the Five Wishes, this supersedes and replaces any advance directive you had previously completed.* The 5 wishes are:

- Who will be my health care agent
- Medical treatment I do or do not want

- Expectations for comfort care
- How I want people to treat me
- What I want my loved ones to know

It is worth noting that all 3 of these documents are legally binding. It is also worth remembering that you may change your mind about any of the stipulations at any time, as long as you are mentally competent. You should revisit these documents periodically to make sure that they still reflect your wishes and that they are consistent with one another.

Because medical treatments and technologies continuously change and advance, new options may affect choices that you made some time ago. If you do make changes (the POLST and OOHDNR are done in collaboration with your physician) be sure to destroy earlier versions.

NOTES

8.0 BE PREPARED CHECKLIST

- Have funeral wishes written up and easily accessible, with the name of the funeral director or cremation society with whom pre-planning may have been done
- Have important documents folder or binder complete and accessible; if not, do this now and collect in one safe place, along with documents for each:
 - List of all bank accounts
 - List of all investments and check Required Minimum Distributions
 - List of life, car, home, medical, long-term care, and other insurance policies
 - List of user identification and passwords for online sites
 - List of memberships with phone numbers and/or e-mail addresses
 - Locate past income tax records
 - List outstanding debts
 - Include copies of POLST, other final wishes documents
 - Will, power of attorney, and advance directives
 - Birth and marriage certificates
- Know what your assets are
- Know what your debts are
- Be aware of taxes

9.0 WHEN A RESIDENT DIES AT ANN'S CHOICE

Of course, Ann's Choice has detailed, step-by-step procedures that are followed when a resident dies, but most of us probably are unfamiliar with those procedures.

The resident him- or herself may be able to pull the cord to call for help. If a spouse or partner is present, that person pulls the cord to alert Security. If the resident lived alone, Security personnel will find, on their regular daily rounds, that the apartment door has not been opened and the security latch has not dropped. In all situations, Security personnel are the first responders. (If the resident is not a patient of the Medical Center and/or does not have a File of Life, Security may need to find a wallet to confirm the individual's identity.)

The individual who responds will look for the File of Life (which should be on the refrigerator) to check for POLST/DNR instructions, so a copy of these legally binding forms should be kept there. (Remember that the POLST, in addition to being legally binding, is signed by a physician, so it carries the weight of a medical order.) If these are not found, the EMR is legally obligated to begin resuscitative maneuvers. If these are unsuccessful, the first responder will call 911, after speaking with the spouse if one is present, and an ambulance team (2 medics) will respond, so there is a dual emergency response. The medics pronounce death after speaking with their protocol physician. Police will also respond to the 911, and that officer will notify the coroner and the individual's physician.

The individual's physician will confirm that he/she will complete the certification and sign the Death Certificate. If the individual was not a patient of a Medical Center physician, the outside attending physician will be contacted and required to complete the Death Certificate.

The body is then released and the funeral home is called by Security. Security personnel escort the funeral personnel to the apartment. If the individual was a whole body donor, that information should also be with the File of Life and the designated organization is notified, so the body does not go to a funeral home unless that organization is unable to accept the donation.

Security personnel also notify Pastoral Care, the appropriate Social Worker, and the remainder of the Security team and managers. Pastoral Care personnel do the other notifications.

If the resident had been on Hospice care, the hospice nurse will pronounce death and the physician will complete the certification and sign the Death Certificate.

If the decedent lived in any of the Continuing Care neighborhoods, nursing staff will pronounce the death and notify the physician, family, coroner, funeral home, and pastoral care.

NOTES

10.0 A CHECKLIST FOR AFTERWARDS

IN THE FIRST 24 HOURS

- Call Security; hospice nurse if appropriate
- Call funeral home or crematory to remove the body
- Make arrangements to receive the personal effects of the person
- If not already done by responders, notify Pastoral Ministries and Finance
- Check your money situation
- Try to rest

DURING THE FIRST WEEK

- Order death certificates, at least 20
- Know passwords or where to find them
- Notify Social Security - they will notify Medicare
- Notify doctors
- Notify medical insurance, including long-term care
- Stop medications of deceased
- Notify oxygen provider to remove equipment and to receive possible rebate
- Notify friends and other family members
- Find obituary or write one
- Send obituary to Pastoral Ministries, with picture, to be placed on lobby tables
- Send obituary to other publications
- Notify any pensions

- Notify car insurance for possible rebate
- Notify attorney
- Notify executor of estate
- Notify accountant
- Notify insurance agent and annuities
- Notify investment companies
- Notify banks or other financial institutions – be sure to leave deceased’s name on at least one account
- Be aware of automatic withdrawals at bank or on-line and make any necessary changes
- Know what quarterly taxes must be paid, both federal and state
- Do not cancel deceased’s credit cards just yet
- Notify Department of Veterans Affairs, if applicable
- If the deceased had a separate e-mail address, do not stop it, because unexpected notifications may arrive on it. If necessary,
- change these sites to a new e-mail address.
- Order thank-you notes
- Try to rest; be sure to eat
- Use support from family and friends, Pastoral Ministries, and other resources

11.0 WRITING THE OBITUARY

The purpose of an obituary is to announce, in writing, the news that someone has died. It is also a means of summarizing the life and legacy of a loved one. In addition, it may inform people of details about the funeral, burial, and memorial service.

Writing an obituary when someone dies is an emotionally difficult task. Beyond the expected details, you can use the obituary as an opportunity to honor your loved one's life and to show how important this person was to you. Many people do some pre-planning and complete parts of it in advance. We're probably all familiar with the obituaries pre-written by newspapers for famous people, and there is no reason why we can't do the same. In addition to getting things "right", this reduces the burden on whomever completes it after the death.

The obituary may include:

- The death announcement, when and where
- Biographical information or a summary of the person's life
- A list of close family and, perhaps, close friends
- The person's noteworthy accomplishments
- Funeral and burial details, when and where
- Date and time of a memorial service
- Acknowledgements and donations
- Pictures

Information should include the person's full name, any nicknames, age, place of birth, date of birth, date and place of death. The cause of death need not be specified - "died peacefully" or similar text is fine. "Suddenly" or "after a long illness" are also possible phrases to use. The names of his or her parents may also be included.


Biographical information may include education, military service (if applicable), employment, and accomplishments. Information about marriage and children, organizations and affiliations, and hobbies may be included. Frequently the obituary specifies surviving members of the family, as well as those who predeceased him or her.

A short poem or prayer as a special message may be included, as may a photograph of the person, usually a head shot.

Date, time, and location of funeral services, burial, and/or memorial service are included at the end of the obituary for those who wish to attend. In many cases, the family may request donations to an organization that is especially meaningful to the person who died in lieu of flowers.

Many templates of different content, format, and style are available on-line. Some very basic samples are shown below.

In Loving Memory

Full Name	 Click here to change this picture
Date from - Date to	

(Full name) (Age) of (City at death) passed away in (location) on (date of death). (First name) was born in (city, state of birth) on (date of birth) to (mother's first name) and (father's first name) (Last name). (He/She) attended (name of high school and/or college).

(First name) worked as (job) and enjoyed participating in (hobbies). (First name) was also a proud member of (organizations and affiliations). (First name) is survived by (names and roles of surviving family) and was predeceased by (names and roles of family who have died.)

Memorial services will be held at (location) on (date and time).

Memorial donations may be made in (first name)'s name to (organization).

In Loving Memory



Full Name
Date from - Date to

(Name of Person) (Age) passed away on (date) in (location). (First name) was born in (City, State) on (date of birth). (He/She) is survived by (names and roles of living family members), and was predeceased by (names and roles of family members who have died).

(Memorial/Funeral) services will be performed at (location) on (date) at (time).



In Loving Memory

Full Name
Date from - Date to

(Full name) (Age) of (City at death) passed away in (location) on (date of death). (First name) was born in (city, state of birth) on (date of birth) to (mother's first name) and (father's first name) (Last name). (He/She) attended (name of high school and/or college).

(First name) married (spouse's name), and together they had (number of kids) children, (children's names). (He/she) worked as (job) and enjoyed participating in (hobbies). (First name) was also a proud member of (organizations and affiliations). (First name) is survived by (names of surviving family) and was predeceased by (names of family who have died.)

Memorial services will be held at (location) on (date and time).

Memorial donations may be made in (first name)'s name to (organization).

NOTES

12.0 THE DEATH CERTIFICATE

The death certificate is the official legal record of an individual's death. The certificate includes information such as the full name and Social Security number of the person who died; sex; his or her date of birth (and possibly place of birth); time and place of death; cause of death; names of his or her parents, including mother's maiden name; marital status; spouse's name if married; veteran status; last known address of the person who died; his or her occupation; the signature of the person who certified death; name and address of funeral director; place and date of burial if buried; date and place of cremation if cremated.

In general, the death certificate is completed by the funeral director using personal information supplied by someone close to the decedent and medical information supplied by the attending physician, coroner, or other medical professional. Here in Pennsylvania the funeral director submits the death certificate to the Department of Health, Division of Vital Records.

The funeral director can also submit, on your behalf, an "Application for a Death Certificate". This is the usual way for you to get certified copies of the death certificate. The certificate is printed on special security paper and carries a raised seal. The cost of each certificate is \$20.00, payable by check or money order to "Vital Records". This fee is waived if the person who died was in active military service or had been honorably discharged. It may take two to four weeks to receive these.

A certified death certificate is necessary for many estate-related actions. It is recommended to order 15 to 20 copies. If more are needed subsequently, they must be obtained from the Division of Vital Records. The funeral director does not keep them. They can be ordered in one of three ways:

- On-line, by going to mycertificates.health.pa.gov, the only vendor authorized by Pennsylvania to do this. The site is available 24 hours a day, 7 days a week. A \$10.00 processing fee is added to the \$20.00 per certificate charge, and payment is by credit card. The certificates may be picked up at a local Vital Records office or they can be mailed, first class, through the US Postal Service. Delivery time is approximately 2 weeks.

- In person, by visiting one of the six public Vital Records offices in the state. The one closest to Warminster is in Philadelphia, at 110 N. 8th Street. This office is open Monday through Friday, from 9 AM to 12 Noon only. Customers may drop off completed applications and pick up completed orders. The Application for Death Certificate is available on-line as a pdf file, by going to www.health.pa.gov and clicking on Death Certificates in the “POPULAR ON HEALTH.PA.GOV” box on that page. Download and complete the form.
- By mail. Again, download and complete the Application for Death Certificate and mail the completed form to:

Division of Vital Records
Death Certificate Processing Unit
PO Box 1528
New Castle, PA 16103

Processing time is approximately 3 weeks.

Help is available by phone, at 724.656.3100, Monday through Friday from 7:15 AM to 10:00 PM. or by e-mail through completion of the Online contact form, the link to which is located at the bottom of the “Ordering a Death Certificate” page. Response to an online contact may take two to three business days.

Only certain people may apply for a death certificate. According to information from the health.pa.gov website, the person completing the application:

- must be 18 years of age or older
- must show valid identification (a valid driver’s license or other government-issued photo ID that includes the person’s mailing address or, if no valid government-issued photo ID is available, two current documents that verify name and address, such as a utility bill, pay stub, bank statement, car registration, or lease/rental agreement)
- must be an eligible applicant
 - Spouse

- Ex-spouse (must provide documentation to establish direct interest)
- Parent or step-parent (step-parent must submit marriage certificate to support relationship to deceased person)
- Brother, sister, half-brother, half-sister
- Son or daughter
- Step-son or step-daughter (must submit parents' marriage certificate)
- Grandparent or great-grandparent
- Grandchild or great-grandchild
- Power of Attorney
- Attorney or legal representative of decedent's estate (must provide supporting documentation to establish direct interest)
- Individual showing direct financial interest in decedent (must provide supporting documentation)
- Government office that has assumed administration of the estate (must provide letter signed by an official of the government office indicating purpose for which the applicant is being retained and identifying estate involved)
- Extended family members who indicate direct relationship to the decedent (documentation may be required)

Death certificates are not publicly available for genealogic or other research until at least 50 years after the death of the individual.

NOTES

13.0 BEREAVEMENT SUPPORT

More than half a century ago, psychiatrist Dr. Elisabeth Kübler-Ross published her internationally famous book, “On Death and Dying”, in which she described five stages of grief: denial, anger, bargaining, depression, and acceptance. Although initially applied to individuals dealing with terminal illness, these stages apply equally well to those who have suffered the loss of a loved one and can even be applied, to some extent, to other transitions we go through in life. We may experience grief after any loss, including divorce or relationship breakup; loss of health; job loss; retirement; loss of financial stability; loss of a pet; serious illness of a loved one; selling the family home; and other losses.

As originally proposed by Kübler-Ross, denial described an initial reaction of terminally ill patients: “No, that can’t be right, it can’t be true”. For someone grieving the death of a loved one the sense could be “I can’t believe that he (or she) won’t come through the door” (even though we know intellectually that the person has died) or a friend “But I just saw him (or her) yesterday”. Reality as we know it has changed, and we feel shock and disbelief or just numbness. Denial is a sort of cushion, providing moments of respite from the pain of loss, giving us time to survive the loss as the new reality gradually takes hold and is accepted.

Anger can be experienced in many ways and aimed in various directions. It can be anticipatory, occurring prior to death. A well-known poem by Welsh poet Dylan Thomas, as his father was nearing death, expresses this:

Do not go gentle into that good night,
Old age should burn and rave at close of day;
Rage, rage against the dying of the light.

It tends to be the first of the emotions experienced in the grieving process, as sadness, loneliness, and hurt also return. The anger may be directed at the person who died and left you behind, mixed with guilt at yourself for not being able to prevent it, at healthcare workers who did not save him or her, at friends and family who try to offer advice, at God for letting this happen. The source of the anger is pain, your pain at the loss of a loved one. Life is unfair, and so is death. Anger is a natural

reaction to unfairness. It is not logical, but it is real and a necessary element of healing.

Bargaining can also be anticipatory: “Please, if he (or she) lives, I promise that I will....” The emphasis shifts some after the death of a loved one to a temporary truce: “If I promise (or do) this, perhaps I will wake up and find that this is all a dream.” We want to go back to before the loss. “What if” or “if only” thoughts come. If only the tumor had been found sooner; what if we never smoked or stopped sooner; if only I had made him (or her) see the doctor sooner; what if we didn’t take that trip when he (or she) fell down the steps. In the bargaining phase, a part of us is still holding onto a fantasy future in which the loved one is still alive. Unfortunately, the ultimate conclusion is that the loved one has died.

As the fact of the death is emotionally as well as intellectually accepted, thoughts and emotions turn to the present. As the depth of the loss is fully experienced, we may wonder if there is any point to going on. Why bother to get up in the morning? What is the point of going through your daily activities? They seem meaningless. You may not care one way or the other about anything. This depression is a normal and appropriate part of grieving and does not indicate a mental illness. How could one lose a loved one and *not* experience some depression? Dealing with this depression means accepting it, examining it, and allowing it so that you may explore your loss in its entirety. As that process evolves, depression clears. Some individuals may need support from medical professionals through counseling and/or medication, but it is vital to remember that depression is a part of healing from the loss. Although it may return on occasion, catching you by surprise in some instances, it will not be as deep or as prolonged as time passes.

Finally, we reach acceptance. Most emphatically, this does *not* mean that we are “over” the loss. Rather, it means that have accepted the new reality that the loved one is permanently gone. It isn’t a great reality, but “it is what it is”. We continue to heal, to live, to make the many necessary adjustments to daily life without the loved one. Even as we move on, we may again experience one or another of the stages of grief.

Grieving is a process. It will differ for each person. Not everyone will go through all five of the stages; the stages need not happen in any specific

order; there is no timeline or schedule for how long the process will take. Some people may go through one or more stages more than once. Grief is not linear – it doesn't necessarily go from point A to point E by passing sequentially through points B, C, and D. Ultimately we emerge on the other side. Kübler-Ross' stages have been challenged by others, in part because of misinterpretations of their meaning and intent. A later book, co-authored by her (as she herself was dying) and David Kessler, titled "On Grief and Grieving", brings theory and experience together in application of the five stages.

Although grieving is an individual and personal journey, how men and women make this journey may show important differences. In part because of societal expectations, men have been taught to "keep a stiff upper lip" and not to express their emotions, which may prolong the grieving process. A man may be less able to discuss grief openly with others, may avoid talking about the death of a loved one, and may try to manage grief alone rather than relying on sources of support. In contrast, a woman is more likely to express her emotions, may try to talk about the experience with others, and may try to find support from family members and others. These are generalizations that may not apply to every individual, so some responses in an individual may not be typical of gender. A woman may grieve in some "masculine" ways; similarly, a man may grieve in some typically "feminine" ways. Most important to remember is that there is no right or wrong way to grieve.

A number of strategies may help you cope with grieving:

- Permit yourself to grieve – cry, be angry, allow yourself time to process your feelings
- Surround yourself with supportive people – family or friends who can accept your loss and provide emotional support
- Keep a journal – this is a safe, private, and personal way for you to express whatever thoughts and feelings you are having. At some point or points you may wish to revisit some of these entries.
- Care for yourself – eat and drink enough, sleep, exercise, maintain social connections, address any issues you are dealing with in visits with your physician

- Don't judge yourself – don't feel that you aren't recovering from your grief quickly enough. Remember that there is no fixed timeline for this process.
- Take it easy – you are going through an exhausting process, so don't over-commit your time and allow opportunities for rest
- Make lists – you may be forgetful while you are grieving, so having a list of activities or goals may be a useful way to keep track of things and to measure your progress
- Avoid making big decisions – this is not the best time for those
- Try to have some fun – with a hobby you enjoy, with a good friend, with other activities, with new activities
- Help others learn how best to support you – well-meaning friends and family members may not have a clue about how to help a grieving person. They may not know the right (or wrong) things to say or do.
- Consider counseling – talking with an expert can help you work through your loss and learn to move on
- Participate in a support group – other members can relate to what you are going through.

A community like Ann's Choice provides many possibilities for support. First and foremost, we do live in a community, and some of your friends, neighbors, and acquaintances may have also lost loved ones and can understand what you are experiencing. In addition, the Pastoral Ministries office is notified very quickly after a resident dies and their staff can provide various kinds of support to a bereaved person. Counseling is also available through the Medical Center. The Bereavement Support Group at Ann's Choice meets once monthly, on the fourth Friday of the month, from 2 PM until 3PM, in the Liberty Commons Music/Classroom. Please remember that, for family members of any resident who was receiving hospice care, bereavement support is available at no cost for a year after that person's death. (This is required by Medicare.)

Beyond this is a wealth of support groups and counselors that we can access. Some offer in-person settings, others provide web-based services, and some offer both. Some of these are listed below, in no particular order. The list is not comprehensive and is very likely to change over time, but does show options that we may take advantage of.

- **Nativity of Our Lord Catholic Parish**

605 West Street Road

The Grief Support Group meets in the school's Multi-Media Center on Tuesdays from 6:30 to 8:00 PM. Any adult who has suffered a loss is welcome. Two 6-week sessions, one in the spring and one in the fall, are offered. For information call the parish office at 215.675.1925.

- **Bereavement by Doylestown Health**

595 West State Street, Doylestown, 18901

A variety of support groups and programs is offered. These are available to anyone in the community who is dealing with the loss of a loved one. For information call 215.345.2202.

- **6-week Grief and Loss Experiential Group**

4451 West Swamp Road

Doylestown 18901

This group meets for 6 sessions on Saturdays from 10 AM to 11:30 AM. Group size is limited to 10 members who will be "guided through experiential exercises to process expected reactions to grief such as anxiety, avoidance, anger, yearning, confusion, sadness, and guilt." For information call 215.822.1975 or e-mail the office manager at altielemans@gmail.com. Proof of COVID vaccination may be required.

- **G.E.N.T.L.E. Group**

Dr. Eileen Cleary, Licensed Psychologist

1703 Langhorne Newtown Road

Suite 6

Langhorne 19047

This group is "designed for individuals looking for supportive grief treatment following sudden, traumatic loss." Dr. Cleary specializes in grief, trauma, and PTSD. For information call 267.619.7053.

- **Grief**

Hosted by Michael "Moshe" Raskind, Clinical Social Work/Therapist, LCSW

301 Oxford Valley Road
Suite 603A
Yardley 19067

For information call 484.282.3047

- **Life Celebration**

Hosted by Bonnie Jean Kane, Licensed Professional Counselor, LPC, NCC, TF-CBT, LMT
Mind Body Soul Wellness Center
4802 Neshaminy Blvd.
Suites 3 and 4
Bensalem 19020

Group sessions last for 10 weeks, with meetings on Mondays from 7 PM to 8 PM. The focus is on sharing stories and pictures of loved ones with the group. All ages are welcome, with group size limited to 15 people.

The sources listed below offer on-line grief support. This type of support may offer several advantages. For individuals who would experience difficulty getting to an in-person meeting, these groups can be attended from the comfort of your apartment. Scheduling times for sessions can be more flexible. Travel and transportation time and costs are eliminated. On-line services, although generally not free, are less costly than in-person group visits. Additionally, for those who prefer more privacy and anonymity, this may be more desirable. All, of course, require the use of a computer or phone.

On-line grief support groups come in many forms. In general, one or more mental health professionals facilitate the grieving process for group members. Some meet as discussion groups through video chats and live calls. Others may be on-line forums or message boards. Some may offer live chat rooms for real-time support in a safe space that does not require either audio or video (the chat will consist of typing messages back and forth through your computer or smart phone).

Several studies have been reported that confirm the usefulness of on-line support. A recently published meta-analysis of studies of on-line therapy showed that on-line grief counseling was effective for grief, depression, and post-traumatic stress.

- **The Center for Loss and Bereavement**

3847 Skippack Pike
P.O. Box 1299
Skippack 19474
www.bereavementcenter.org

Specialized support groups for adults are offered throughout the year according to interest. Days and times vary. Sessions typically last for 6 weeks. For information call 610.222.4110 or visit their website.

- **The National Widowers' Organization, Inc.**

25 Osprey Lane
Chilmark
MA 02535

“Feel free to contact us. We are here to answer any questions you may have.

You can reach us by email at info@nationalwidowers.org or by telephone at 1-800-309-3658.”

- **GriefNet.org**

GriefNet.org - [A Community of Persons Dealing With Grief, Death, and Major Loss \(rivendell.org\)](http://ACommunityofPersonsDealingWithGrief,Death,andMajorLoss(rivendell.org))

“Our grief support groups operate 24-hours/day, 365 days/year. Members participate when they wish and are able to, not at a set time. When one member of a group sends an email message to the group, everyone in the group receives a copy. This allows many people to respond with love and caring to the thoughts and feelings of an individual, day and night, year-round. Since 1994 these groups have helped thousands of people around the world deal safely with their grief.”

GriefNet has 47 e-mail support groups and two web sites. It is directed by Cendra Lynn, Ph.D., a clinical grief psychologist, death

educator, and traumatologist and is operated as a non-profit corporation under the name Rivendell Resources.

- **Quintessential Health**

[In-Person & Telehealth Services | Quintessential Health \(qhealthonline.com\)](http://qhealthonline.com)

In-Person services located in the Shops at Valley Square
1501 N. Main Street Suite 210
Warrington, PA 18976

On-line group meets Thursdays from 11 AM to 12 Noon. For information call 215.585.2109

- **My Grief Angels**

<https://www.mygriefangels.org>
9450 Pinecroft Drive
Suite 7412
The Woodlands, Texas 77387

This site offers a wide variety of resources, including on-line grief support groups, on-line forums, directories, surveys, and educational content. For information, visit the website or call 936.217.3205.

- **Grief in Common**

[Home » Online Grief Support Groups: Loss of A Loved One \(griefincommon.com\)](http://griefincommon.com)

Zoom support groups, individual counseling, and a live chat room are offered. Daytime and evening general grief groups are available every week. The site also has a blog and a suggested reading list.

“In addition, Grief in Common now offers online grief courses created for anyone who has experienced the loss of a loved one. No matter who you lost, how it happened, or how long it is has been, these self-study courses are appropriate for anyone who is grieving, and will address the unique challenges of loss with a wide variety of topics.

Designed with a practical approach to grief, the goal of each session is to provide validation, education, and motivation, along

with new insights, perspectives, and tools to promote true and tangible healing.

Sessions include videos, articles, assignments and activities, and because there are no meetings to attend, it means you can complete the courses on your time, and at your pace. If further guidance or professional support is needed along the way, it's here and always available. "

Seven "courses" are offered: Newly Bereaved, Second Year and Beyond, Grief Meditations, Complicated Grief, Grief and the Holidays, and Loss of a Spouse/Partner.

- **Grief Anonymous**
<https://griefanon.com>

This group is similar to other anonymous groups in that it has a 12-step structure.

- **Grieving.com**
<https://forums.grieving.com>

Founded in 1997, this is one of the longest-standing online grief support groups, with a presence in over 100 countries. It offers free membership and is maintained by voluntary donations.

Various on-line counseling services are available as well, for individual support through the grieving process.

- **Betterhelp**
<https://www.betterhelp.com>

Operating entirely on-line, this is touted as the world's largest counseling service. Its mission is "to provide comfort and healing wherever possible at an affordable price." Counseling may be in the form of messages, live chat, phone calls, or video conferencing. The service begins with a free evaluation to assess your needs and may be canceled at any time.

- **Talkspace**
<https://try.talkspace.com/online-therapy>

After joining, each person is matched with a grief counselor. An individual may change counselors at any time. All counselors are

credentialed, licensed, and certified, usually working as Licensed Mental Health Counselors, Licensed Clinical Social Workers, or Doctors of Psychology. Private room chats and other media communications are available. Clients are billed monthly.

- **MyCounselor Online**

<https://mycounselor.online>

Grief counseling is provided from a Christian perspective by licensed professionals. Clients may access the site at any time to chat via on-line sessions.

- **Faithful Counseling**

<https://www.faithfulcounseling.com>

The goal of therapy is to increase both psychological and spiritual wholeness. A network of professional therapists who are practicing Christians provides on-line services via video, phone, live chat, and messaging.

- **Calmerry**

<https://us.calmerry.com/>

Online therapy is readily available, with a wide variety of therapy styles including video, phone, live chats, and messaging. A person is matched to a therapist within 24 hours. In addition to grief and trauma therapy, therapy for a number of other issues is offered.

- **Cerebral**

<https://get.cerebral.com/>

Therapy, therapy plus medication, and medication alone are offered. Video and phone appointments are available. Credentialed therapists provide weekly 45-minute sessions that can meet your schedule: days, evenings, and weekends. Working with the therapist, you develop an ongoing care plan.

- **7 Cups Grief Therapy**

<https://www.7cups.com>

“... being heard is an important part of being human. Psychologist, Glen Moriarty saw that there was great power in listening, but he knew not everyone had someone to talk to. He started to wonder.

"How can I make being heard a reality for everyone?" Thanks to thousands of volunteer listeners stepping up to lend a friendly ear, 7 Cups is happy to say, "We're here for you!"

A person can instantly request the "first available listener" at any time. Not all listeners are trained therapists, although all listeners are trained by Glen Moriarty . You may also select a specific listener for individual counseling with a licensed therapist. The site also offers self-help guides and growth paths.

NOTES

14.0 HOW TO HELP SOMEONE WHO IS GRIEVING

Inevitably, our friends and acquaintances will lose loved ones. It can be challenging to know what to say or do, and – equally importantly – what NOT to say or do. To add another layer of difficulty, what seems right for one person may be quite wrong for another. Even though you may feel awkward or uncomfortable, you should not let that stop you from reaching out to the bereaved person. The most important thing is simply to be there. Grieving can be a very lonely time. The bereaved person suffers yet another loss if friends back away.

It is helpful to have some understanding of the grieving process. Even though it has been divided into stages (5, 7, or other) grieving will probably not proceed in an orderly fashion through these stages. Yes, the bereaved person is, in all likelihood, going to experience denial, anger, bargaining, sadness and depression, but not necessarily in that order before finally coming to acceptance. Nor does grieving follow the calendar – for some individuals it may last well over a year. In fact, one is never “over” the grief. The bereaved individual may have extremes of emotion and behavior and needs some reassurance that these are normal. There is no right or wrong way to grieve, so try to avoid saying what the person “should” be feeling or doing. It is their grief, after all. You need to understand that you cannot fix the situation and take their pain away.

What, then, should one say or do to support someone who is grieving?

- Saying something seemingly as innocuous as “How are you?” may make the bereaved person think “I’ve just lost the most important person in my world – how do you think I’m doing?”
 - Somewhat better is asking “How are you doing today?” That at least focuses on right now, rather than a nebulous timeframe and lets the person know that you are concerned. Much better, though, is saying something like “I don’t know how you feel, but I am here to help in any way I can.”
- Even if you have experienced loss, don’t say “I understand what you’re going through”. This may put the bereaved person in a position of trying to console you, rather than the other way around. Grief is individual and personal, so we cannot truly know what another is going through.

- Instead, say something like “I’m here to listen”. In this way, the bereaved person can have space to talk about what their thoughts and feelings are. Be compassionate and non-judgmental. Active listening as the grieving individual speaks has been shown to be of major importance in bereavement support groups.
- Don’t say “Everything happens for a reason”. Platitudes like this may make you feel as if you’re saying something soothing in an uncomfortable situation, but they tend to minimize what the grieving person is going through, even if the individual’s belief system accepts God’s will as a reason for events that happen. They have absolutely no effect on the pain and loss that the individual is suffering.
 - Instead, “I wish I could find the right words to let you know that I’ll be here for you” lets the grieving person know that he or she is not alone and that you can provide a safe, comforting space for him or her to express and work through thoughts and feelings.
- Don’t say “He or she is in a better place”. The person may or may not have a belief in an afterlife. Even if he or she does have faith in a life after death, the grieving person would much prefer having their loved one with them.
 - If you do know that the bereaved person does have this faith, saying something like “I wonder if your faith has been of comfort to you in this very difficult time” gives the person the opportunity to speak about their faith and thoughts. It is not at all uncommon for a grieving person to be angry at God for taking their loved one away.
- Don’t say “What can I do?” This forces the individual to think about what he or she needs and to try to figure out an assignment for you. Most people struggle with asking for help, not wanting to be a burden on others.
 - Instead, show up with a pot of soup or do the laundry or whatever. Look around to see if any chores or errands need to be done, and then do them.
- Don’t say “At least...” anything. “At least he or she didn’t suffer” or “At least it happened quickly” doesn’t help the grieving person.

Even though you're trying to make the grieving person feel better, this doesn't take away the pain of the loss.

- Instead, stay with simple and sincere statements like "You and your loved one will always be in my thoughts and prayers" or "We all need help at times like this; please know that I'm here for you."
- Don't ask "How did he or she die?" It really isn't any of your business, and details of the death may be very painful for the grieving person to describe.
 - Instead, don't say anything. Stay out of it. If the bereaved person chooses to share some details, listen supportively.
- Don't say "It will get better". This is true, but each person grieves over his or her own timeline, and this can come across as another platitude.
 - Instead, emphasize that you will be there for the person weeks and months - even years, perhaps - down the road. People may forget that bereaved individuals frequently need support later in the grieving process.
- Never say "It's time to move on". There's no arbitrary time limit on grief. Saying something like this may make him or her feel that you don't care that they are still suffering or that you don't believe that they are genuinely grieving.
 - Instead, acknowledge to yourself that you don't have all the answers to make the pain of loss go away. It can be powerful support to just show up and sit quietly with someone, making them feel less alone. Saying something like "It's okay to feel these things" reinforces your nonjudgmental support for the individual.

Don't be afraid to talk about the person who died. Sharing good memories of the individual can bring comfort to the bereaved person. Saying something like "My favorite memory of him or her is" can help unlock some more positive emotions.

Some other things to say include:

- "I am always just a phone call away."
- "You can talk about him or her whenever you want - now, next month, next year, or later."

- “I am here for you.”
- “I’m usually up early or late; if you need anything, don’t hesitate to call.”
- “Take as much time as you need.”
- “It’s okay to have bad days, because they remind you of how much you love him or her.”
- “Be kind to yourself.”
- “You’re allowed to feel and be exactly as you are because this is your experience, not anyone else’s.”
- “It’s okay not to be okay. It’s okay to hurt.”

Offer practical assistance to the grieving person. Some possible actions include:

- Run errands
- Help with funeral arrangements
- Stay with the individual to take phone calls and deal with guests
- Help with bills or insurance forms
- Help with the mail – pick it up from the mailroom and help sort out the “junk”
- Help with some of the myriad changes that need to be made after someone dies
- Help with laundry
- Help with cleaning – if appropriate, arrange for (and pay for) housekeeping service, but be aware that some individuals may not want strangers in their space
- Drive the person to wherever he or she needs to go
- Take him or her to lunch or a movie
- Prepare some tasty snacks or light meals to tempt the appetite
- Accompany him or her to a support group meeting
- Share an enjoyable activity
- Wait for three months or so to send flowers – they will be much appreciated at a time when it seems that everyone has forgotten

After the funeral is over and the mourners leave, suddenly there is nothing to keep the bereaved person busy. Grief is a process that takes time, so support needs to be ongoing. Certain days and times of the year will be especially difficult – birthdays, anniversaries, holidays – so it is

important to be aware that grief may be reawakened at these times. Again, let the bereaved person know that you are there for him or her.

Sadness and depression are normal parts of the grieving process and they should subside over time. If this does not happen, or if they become progressively worse, this may mean that the person is developing clinical depression. At this point, the person should be encouraged to seek professional help. Don't tell the person what to do, but instead speak to your own feelings by saying something like "I'm troubled because you aren't sleeping - you might want to look into getting some help". Here at Ann's Choice we have professionals who can provide needed support.

Some symptoms of clinical depression may be:

- Increasing difficulty in functioning in daily life
- Extreme focus on the death
- Excessive anger or guilt
- Neglecting personal hygiene
- Alcohol or drug abuse
- Withdrawing from others
- Constant feelings of hopelessness
- Talking about dying or suicide

NEVER ignore talk about suicide. Consider this to be an emergency and seek help immediately. Call the Medical Center (215.443.3850). Even after hours, someone is always available. Other resources are also available. You can call 911 for the emergency or 988 for the Suicide & Crisis Lifeline (formerly known as the National Suicide Prevention Lifeline). This provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week.

NOTES

15.0 PROBATE

In Pennsylvania, your will is signed in the presence of two witnesses (some states have other requirements) who attest to your signature. Witnesses must be at least 18 years of age and, by signing, attest that they were in the room when you, the testator, signed the will, that the testator appeared to be “of sound mind” when he or she signed the will, that the testator knew he or she was signing a will and knew what property was being distributed in the will, and that he or she was not under any duress when signing the will. Although a witness should not be a beneficiary of the will, he or she could be an executor of the estate.

The will need not be notarized to be valid; however, it often is. This may not be sufficient to prove authenticity in probate. These days, most wills include a notarized “self-proving affidavit”, which can expedite the probate process. This is a simple one-page form that you and your witnesses must sign and swear under oath in the presence of a notary public. The form affirms that you are the creator of the will, that your witnesses saw you sign the will, that the witnesses also signed the will, and that you all agree that the will is legal and valid.

After your death the probate process begins by validating the will in probate court. In the absence of a self-proving affidavit, witnesses to the will must go to the court and sign affidavits stating that they were physically present and saw you sign your will and that they themselves, as witnesses, also signed at that time. If your will was created a number of years prior to your death, the witnesses may have moved away, changed their names (by marriage or divorce), or died. Having to find the witnesses and getting them to the probate court may present many difficulties. The self-proving affidavit eliminates this necessity.

Proving that the will is legal and valid is only the first step in probate. The second and lengthier portion of the process is overseeing the settling of the estate and distribution of the assets as described in the will. The executor named in the will is responsible for completing the probate process. If there is no will, the court appoints an administrator to perform these tasks.

Probate is conducted at the county level, in the county in which the decedent lived. In Bucks County probate is handled by the Register of Wills and the Orphans' Court. These offices are located at 55 E Court Street, 6th Floor; Doylestown, PA 18901. The Register of Wills/Clerk of the Orphans' Court is open to the public from 8:00 AM until 4:15 PM, Monday through Friday. Both virtual and in-person appointments are conducted. Please call 215-348-6254 or 215-348-6264 to schedule an appointment.

16.0 SETTLING THE ESTATE

When you wrote your will, you named at least one executor. It is the responsibility of the executor (also known, in Bucks County, as the “personal representative”) to settle your estate after your death, according to your wishes and within the limits of state law. The executor has several responsibilities. The value of having your important documents gathered in one place that is clearly identified and readily available becomes abundantly clear as the executor works to accomplish his or her responsibilities.

The first of these is gathering the legal documents that are relevant to the probate of the estate, including the original will (not a copy), death certificates (several may be necessary), and, if needed, Renunciations, Witness Affidavits, and Proof of Bond. These forms and others (15 in all), with the exception of the death certificate, which comes from the Department of Health, are available through the Register of Wills Office as hard copies or electronic, downloadable forms. Additional documents may be needed. After all of this material is gathered, the executor files a Petition for Grant of Letters Testamentary (if there is a will) or Letters of Administration (if there is no will, in which case an administrator is appointed by the court). Part of this form requires an estimate of the value of your property at the time of your death. The petitioner must present valid government-issued photo identification to the Court.

Regardless of your estate plan, certain assets must go through probate, including any inheritance in which the beneficiary has predeceased you, non-titled property (typically, items such as furniture, clothing, and any other general items, unless these items are named in your will and your wishes for them are clearly stated), partner-owned investment property (again, unless your wishes are clearly stated in your will), and sole-ownership property that is titled only in your name (unless POD - payable on death - or TOD - transfer on death - is added to the title or deed).

Other assets do not go through probate, including anything that has a beneficiary named, items placed in a Living Trust (because the Trust owns the items inside it, items can go directly to the beneficiaries specified), any items that are titled POD or TOD, any jointly owned property that has survivor’s rights, funds in pension or retirement plans, funds in 401(k)

accounts with a named beneficiary, life insurance, and unclaimed salary or wages.

After the Petition is accepted, Letters Testamentary are granted and the executor is formally appointed as the legal representative of the estate (Letters of Administration are issued in cases of intestacy). In addition the executor receives a Short Certificate. This serves to verify that the individual is the legal representative of the estate and is, therefore, able to gain access to assets that are solely in the decedent's name. (Usually, several will be needed, one for each financial institution.)

In general terms, the duties of the executor are to gather asset information; to open the estate; to pay the funeral bill and debts of the decedent; to advertise the estate; to notify beneficiaries; to file beneficiary notice; to file and pay inheritance tax and file inventory; to distribute assets of the estate after appraisal is received from the Pennsylvania Department of Revenue; and to file required status reports with the Orphans' Court.

The list of information and documents that may be needed by the executor is rather long. Required information about the person who died includes the Social Security number, date of birth, place of birth, last address, mother's maiden name, date of death, and place of death. Documents include driver's license; Social Security card; passport; birth certificate; marriage license; DD214/military service records; last will and testament; trusts; all bills (utilities, loans, rent, credit cards, etc.); financial information (bank statements, brokerage account information, retirement/pension plan statements, annuity statements, life insurance policies, tax returns, etc.); real estate deeds and leases; and auto/boat titles. In addition, the Ann's Choice Residence and Care Agreement will be needed.

To advertise the estate, notice of the granting of Letters Testamentary must be published for 3 consecutive weeks in the Bucks County Law Reporter (\$105. per publication). The notice must also be published in a local newspaper, such as the Bucks County Courier Times, The Intelligencer, or any other local paper that publishes legal notices.

Pennsylvania publishes a helpful 3-page listing of probate deadlines and timelines. The American Bar Association estimates that, for an average estate, settlement is accomplished in 6 to 9 months. However, based on a 2018 survey by Estate Exec, probate takes an average of 16 months (see figure below). The duration of probate is determined by the complexity of the estate and issues that arise during probate.

www.homelight.com/blog/how-long-does-probate-take/



Given the complexity of the process, most executors work with an estate attorney for guidance through probate.

17.0 FINANCIAL MATTERS

Several important financial decisions must be made after the death of a spouse. It is likely that several types of accounts will be involved. Having necessary documents organized in one place ahead of time will make these processes go more smoothly. It will be necessary to deal with each financial institution according to its requirements. Many accounts are managed only electronically, so it is essential to know the spouse's passwords. (A list of accounts and passwords should be part of the important documents that have been collected in advance.)

Electronic assets may include:

- On-line banking or brokerage accounts
- Credit card accounts
- Utility accounts (Comcast, for example)
- Shopping accounts (Amazon, for example)
- Photo and video sharing and storage accounts
- E-mail accounts
- Social media accounts
- Subscription services
- Smartphone, computer, tablet, or cloud data
- Cryptocurrency keys

Recording all of your financial conversations and actions over the next several months in a dated log will be an invaluable resource for keeping track of the status of this work. You will also need to keep all financial statements that arrive, especially the final statements from accounts that are closed.

Bank accounts (checking and saving)

If the person who died had one or more separate (non-joint) accounts, it is possible that these may have provisions such as transferable on death (TOD) or payable on death (POD) to you or another person, or that the accounts have a designated beneficiary. If this is the case, the bank will typically release the funds to the person named once it is notified of the death (certified death certificate and proof of identity of designee). After disbursement of the funds, the account will be closed. If the account is part of the probated estate, after the will is presented to the Register of

Wills, Orphans' Court, the executor will receive a "Short Certificate", a Court document demonstrating that he or she has the right to administer the estate of someone who has died. (Short certificates are "short" because they are a one page notice of a longer Court Order that officially designates who can open the estate and has authority to gather and dispose of the deceased person's assets.)

In the case of joint accounts, most include automatic rights of survivorship. The bank must be notified of the death, but the surviving spouse can continue to access funds even before the spouse's name is removed from the account. Visiting the bank is probably the easiest way to remove a spouse's name from the account. It is recommended to keep the spouse's name on at least one account for about a year, in case checks in the spouse's name are received during that time.

In most cases, the bank will require closing the account to remove the spouse's name. At the same time (if you are at the bank) you can open a new account in your name only and all funds from the joint account will transfer to this new account. You may withdraw funds immediately. Then it will be necessary to update any services that used the former bank account for automatic bill pay. Notify each service of the new, correct account information or cancel those that you no longer wish to continue, and keep a record.

You should be aware of Federal Deposit Insurance Corporation (FDIC) regulations. In the case of joint accounts, FDIC insures up to \$500,000; when one account holder dies, that amount reverts to \$250,000, but only after six months have elapsed following the death.

Retirement: 401(k) Typically, when a 401(k) account is opened by someone, he or she names at least one beneficiary. A secondary beneficiary may also be specified. If the person is married, the spouse is usually designated as the primary beneficiary. The company through which the 401(k) is managed must be notified, and the beneficiary then inherits the funds. The beneficiary has several choices for withdrawing these funds:

- Roll the money over into his or her own 401(k) or IRA (only possible for spouses) – note that these funds will be subject to Required Minimum Distributions (RMDs)
- Take a lump-sum distribution
- If the account owner died in 2020 or later, withdraw all funds by the end of 10 years after the owner’s death
- Spread the withdrawals out over the beneficiary’s lifetime by taking annual RMDs (only certain beneficiaries are eligible for this option)

If you choose to roll the funds into your own account, the government treats this as if it had been yours all along. By doing this, you will increase the amount of your annual RMD, of course. If you take a lump-sum distribution, this is treated as income and is subject to income tax in that year. Distributing the withdrawals over 10 years allows you to withdraw money from the inherited 401(k) whenever you need it, as long as the withdrawal is complete by 10 years. Taking RMDs over your lifetime minimizes the effect of the inheritance on your taxes in any given year. However, if the original owner had been taking RMDs when he or she dies, the first subsequent RMD will be based on that person’s age at the time of death. After that the RMDs will be based on the beneficiary’s age.

Retirement: IRAs Although the SECURE (Setting Every Community Up for Retirement Enhancement) law has, beginning in 2020, changed many provisions about IRA inheritance, if a spouse is the beneficiary of an IRA, the spouse is considered to be an “eligible designated beneficiary” and is exempt from these changes. That being the case, the spouse has the option to roll the funds into his or her own retirement account. The funds would then be treated as if they were that individual’s own to begin with, so distribution of the funds can be stretched out over his or her lifetime. If other beneficiaries are named, they do not have this option and must establish an “inherited IRA”, the funds of which must be distributed within 10 years, as a lump sum or as periodic withdrawals. No 10% early withdrawal fee will be charged, regardless of how the withdrawals are made.

Retirement: Roth IRA As with standard IRAs, if the beneficiary of the Roth IRA is the spouse, the IRS will let the beneficiary treat the funds as if they were always his or hers. If the spouse is the sole beneficiary, he or she can be designated as the owner of the account or the funds can be

transferred to the beneficiary's Roth IRA. Tax would be paid at the beneficiary's ordinary income tax rate. Alternatively, the funds can be taken as a lump-sum distribution, provided that the Roth IRA has been open for at least 5 years. These funds are not taxed, nor is there a withdrawal penalty. As a third option, the spouse can open an "inherited, or beneficiary, Roth IRA". RMDs must be taken, but as an eligible designated beneficiary, the distributions can be taken over the whole of the individual's lifetime. This option may be necessary if the Roth IRA has multiple beneficiaries. Remember that gains held in a Roth IRA are not taxed, a major advantage of this type of IRA.

Different rules apply for non-spousal beneficiaries. The SECURE act changed options for these beneficiaries. A Roth IRA inherited from a parent or any other non-spouse offers limited options. The beneficiary can open an inherited Roth IRA and withdraw all the funds within 10 years. No RMDs are required. The alternative is to open an inherited IRA and stretch RMDs over the beneficiary's lifetime. Of course, a lump-sum distribution is an option.

Retirement: Pensions Pension plans usually have a designated beneficiary, to whom the pension funds would be paid. The payment options may include a lump-sum distribution, an annuity, or a drawdown, depending on the terms of the plan and the choices made by the pension owner and the beneficiary. Again, depending on the terms of the plan, the beneficiary may be required to withdraw all of the funds within a specified period of time. In drawdown, a portion of the pension monies is moved to a separate account, possibly by moving to a separate drawdown provider. Drawdown can be used to provide a regular income during retirement, while still leaving another portion of the pension funds invested. Since April 2015, up to 25% of the total drawdown amount may be taken tax-free.

Retirement: Annuities The type of annuity and its payout plan determine what happens to the funds after the death of the owner. These terms are set when the annuity is purchased.

A fixed-period annuity guarantees payments for a set length of time, commonly 10, 15, or 20 years. In a fixed-amount annuity, the purchaser chooses an amount to be paid each month for life or until the benefits

are exhausted. If the purchaser outlives the time period or the fixed amount, no further payments are made unless the plan, as initially purchased, provides for the continuation of benefits. In that case payments will continue to be paid to the beneficiary until this predetermined period is over or the account's balance reaches zero.

A life annuity guarantees payments for as long as the purchaser lives. The longer the purchaser is expected to live, the smaller will be the payments. Payments cease when the purchaser dies, unless it is a joint-life annuity, in which case payments will continue until the second person dies.

NOTES

18.0 SOCIAL SECURITY AND MEDICARE

The Social Security Administration (SSA) must be notified when a recipient dies. The SSA will also handle death reports for Medicare. The funeral director has the Social Security number of the deceased person and will frequently notify the SSA. (It is probably worth confirming that this is the case.) SSA advises that the best way to get help is to go to their website, www.ssa.gov. Otherwise, call the 1.800 number. Helpfully, they note that Mondays, the first day after a Federal holiday, and the first week of the month are the busiest times in the offices. If you plan to visit the office, you should first learn which documents you should bring, by either visiting the website or calling the 1.800 number. **It is very important to note that you cannot report a death or apply for survivors benefits online.**

Our local Social Security office is located at:

444 LINCOLN HWY
FAIRLESS HILLS, PA 19030
Phone: 1.800.772.1213 (M-F, 8 AM to 7 PM)
TTY: 1.800.325.0778

An alternate location is:

2373 WELSH ROAD
PHILADELPHIA, PA 19114
Phone: 1-800-772-1213 (M, T, Th, F 9 AM to 3 PM; W 9 AM to 12 Noon)
TTY: 1-800-325-0778
Website: www.ssa.gov

Social Security benefits cease in the month prior to death; that is, if the person died in May, the check or direct deposit in May and thereafter must be returned. If the payment was by check, it must be returned to SSA. Return the check to the Regional Financial Center (RFC), U.S. Treasury Department, using the address on the check envelope. Alternatively, you may return the check to the local Social Security office. That office will give you a receipt for the check and will return the check to the U.S. Treasury Department. When returning a check, give the reason why it is being returned. If it was paid by direct deposit, notify the bank in which the funds were deposited and ask them to return any funds from

the month of death and later. (The bank may require a certified death certificate in order to process this request.)

Survivors benefits are another important reason to notify the SSA promptly after the death, because they will begin only after you apply. Widows, widowers, and dependents are eligible to receive these benefits. An eligible spouse needs to be at least 60 years of age (50 if disabled), be single after the death of the individual (that is, not an ex-spouse who has remarried), to have been married for at least 9 months, or, in the case of an ex-spouse, married to the deceased for 10 years or more. If you qualify, you are entitled to receive benefits based on what your spouse was receiving. You must apply in order to receive these benefits. Call the 1.800 number to get the process underway.

For completeness, although this doesn't apply to Ann's Choice residents, if your spouse has not filed for benefits and died before full retirement age (66 years plus a few months), you are entitled to receive his or her full retirement age benefit.

If your spouse has not filed for benefits and died after full retirement age, you are entitled to receive his or her benefits as if he or she filed on the date of death.

If your spouse filed for benefits before full retirement age, you are entitled to receive what he or she was receiving, or 82.5% of his or her full retirement benefit.

If he or she filed on or after full retirement age, you are entitled to receive what he or she was receiving at the date of death. If the survivor benefits are taken at the survivor's full retirement age, the benefit will be equal to 100% of the deceased spouse's benefit amount. You may choose to receive **either** your own benefit or the survivors benefits of your spouse. Apparently, you can change your mind at a later date and switch to the other.

Separate from the survivors benefits is the one-time death benefit of \$255.00. You are eligible to receive this regardless of whether or not you choose to receive the survivors benefit, but you must apply for this. Only the surviving spouse or a child who is eligible for benefits (that is, the child is unmarried and either a minor; an 18- or 19-year-old who is still in high school; or an adult offspring who is disabled) may receive the death benefit. This may be paid automatically.

(Lost your Social Security card? For most purposes, if you know your number, you do not need a physical card, so replacement is unnecessary. If you do need a replacement, application can be made online or by visiting the local office. If going to the local office, complete the [Application for a Social Security Card \(Form SS-5\) \(PDF\)](#) and bring it, along with unexpired identification. Acceptable forms of identification are listed on the application.)

NOTES

19.0 CREDIT CARDS

When an individual dies, his or her credit cards IMMEDIATELY become void. Any use of them is fraud. Because enterprising criminals have been known to open new credit cards or other accounts using the name and Social Security number of the deceased, it is important to freeze the credit report of the person who died as soon as possible. This action prevents this form of identity theft, because when someone attempts to open a new account, the company issuing the card reviews the credit report as part of their pre-approval procedures. In addition, this prevents the would-be identity thief from having access to the person's private credit history.

To initiate a credit report freeze, call each of the three main credit bureaus: Equifax, Experian, and TransUnion.

- Equifax
P.O.Box 105788
Atlanta, GA 30348-5788
800.685.1111
- Experian
P.O.Box 4500
Allen, TX 75013
888.397.3742
- TransUnion
P.O. Box 2000
Chester, PA 19016
888.909.8872

This should be followed by a request in writing that the credit report be flagged "Deceased. Do not issue credit". The letter should include:

- The full legal name of the deceased person
- His or her date of birth
- His or her date of death
- His or her most recent address
- His or her Social Security number
- Your name
- Your mailing address

The credit bureaus may request a death certificate, although with the Social Security number they can confirm the death. They may also want information on all active credit accounts that are to be closed out.

Do request a return receipt for your mailed letter and keep a copy of the letter for your records. You should also request a copy of the most recent credit report from each of the bureaus to be certain that you have complete information. (Not all creditors report to all three bureaus.) To request a credit report you will need a copy of a government-issued ID, such as a driver's license.

The credit report freeze does not cancel credit cards. That is a separate task, for which you or the executor/executrix will need the names of the accounts and the associated passwords.

- If the account is joint, the co-owner becomes solely responsible for all payments. This account need not be closed. It is only necessary to remove the deceased's name from the account. However, the card should not be used until the company has been notified of the death. (This is also the case if you co-signed for the card.)
- If the account has authorized users and the decedent is the primary account holder, no one else is responsible for payments and the account can be cancelled. It would be polite to notify authorized users of this, so that they stop using the card. Otherwise they are technically committing fraud.
- If the deceased is the sole account holder, this card must be cancelled.

Typically, the executor/executrix handles the task of cancelling credit cards because the funds to pay any balances come from the estate; however, a surviving spouse may cancel cards even before the executor is named. Recall that the executor is not appointed until the Register of Wills, Orphan's Court names him or her, based on the person identified in the will. Closing the accounts quickly helps to avoid possible fees or accrued interest on the accounts. Call the credit card issuer and ask for the department of Deceased Account Services. The general customer service agent will probably be unable to assist you. Explain that you are calling in order to cancel an account and ask what documentation you need to provide and how to provide it.

You will also need to follow up by writing to the credit card company with information about the deceased person, including name, Social Security number, address, and the account number on the card. Your name and

address should be included. The company may or may not request a copy of the death certificate (Discover does not. After they are notified they will verify the information.). Be sure to get confirmation of the cancellation in writing. Your letter should be sent through certified mail with receipt requested. Keep everything for your records.

Some accounts may have automatic payments (for example, cell phone service, internet service, or cable); these payments may need to be cancelled separately. Contact information for these merchants is usually found on the itemized credit card statement.

Credit card providers will probably continue to send mail and communications in the name of the deceased person, so it is important to monitor all incoming mail for up to 6 months after the death in order to be aware of any additional notices or payment requests. Remember that family members are not responsible for the credit card debt of the person who died, with the exception of balances on jointly owned cards. Monies for payment of outstanding balances on other credit cards come from the estate of the decedent - not from personal funds of the spouse or anyone else.

Finally, collect all the credit cards in the loved one's name and destroy them or store them in a safe place.

NOTES

20.0 MOTOR VEHICLES – PennDOT

The driver's license is an identification card and is a possible avenue of identity theft for enterprising criminals, who have been known to scan obituary notices to identify possible targets. To cancel a driver's license in Pennsylvania in person it is necessary to present the certified death certificate at a DoT office. (You do not need to wait for the will to be probated to do this.) If you cannot go in person, you can cancel by mail, by sending a letter saying that you want to cancel the driver's license and including a certified copy of the death certificate and the original driver's license. The letter, with confirmation of receipt requested, should be mailed to:

Pennsylvania Department of Transportation
PO Box 68682
Harrisburg, PA 17106-8682

Dealing with the title and registration of a vehicle can be somewhat more complicated. Regardless of whether you are a surviving spouse, a joint owner, or a beneficiary, you have the legal authority and obligation to transfer the title to someone else (including yourself). The simplest way to accomplish this is to take the driver's license and a certified copy of the death certificate, along with the title, registration, and insurance information to the most convenient DMV office. (You do not need to wait for the will to be probated to do this.) The location closest to Ann's Choice is:

Huntingdon Valley DMV
2040 County Line Road
Huntingdon Valley, PA, 19006.
Phone: (800) 932-4600.
Hours: Tuesday – Saturday, 8:30 AM – 4:15 PM

You may make an appointment at the Huntingdon Valley DMV by calling [\(717\) 412-5300](tel:7174125300). You can speak to a real person and get phone assistance to book, cancel, or change an appointment. When you call, identify yourself and ask to schedule an appointment. Explain the reason for the appointment and request preferred dates and times. Once the appointment is set, the DMV agent will confirm the details with you. Bring

any necessary documentation or materials that may be required to the appointment.

Equally easy, if you are a member of AAA, is to visit the local office:

AAA Warminster Car Care Insurance Travel Center

602 York Road

Warminster, PA 18974

Phone: [\(215\) 315-4060](tel:2153154060)

Hours: Monday – Friday, 7:30 AM – 6 PM; Saturday 8 AM – 5 PM

If this is not possible, Pennsylvania provides a useful 4-page fact sheet that addresses transfer situations “Vehicle Transfer after Death of Owner” [fs-vehtrans.pdf \(state.pa.us\)](https://www.state.pa.us/fs-vehtrans.pdf). The fact sheet gives detailed instructions for each of several possibilities. In addition, Pennsylvania provides Form MV-39, a 2-page document titled “Notification of Assignment/Correction of Vehicle Title upon Death of Owner”. This is the form that must be submitted to the state. It includes a page of instructions.

Even if you are a joint owner, title and registration must be transferred. If the person who died owned a vehicle jointly with you (or another person) with the right of survivorship, the survivor does not need to assign the certificate of title, so do not fill in anything on the back side of the title. Form MV-39 must be completed, including insurance information, and this must be accompanied by proof of death (either an original death certificate or completion of the proper portion of MV-39 by the attending physician or funeral director) and the applicable registration fee. The most current fees are listed in Form MV-70S, “Bureau of Motor Vehicles Schedule of Fees”. If the vehicle is titled jointly in the names of husband and wife, there is no fee. This material in each of these scenarios should be sent to:

Department of Transportation

Bureau of Motor Vehicles

1101 S. Front St.

Harrisburg, PA 17104

If the vehicle is owned solely by the person who died and an executor or administrator has been appointed (that is, the will is in probate and this individual has been appointed by the Register of Wills), the required documents are the title assigned by the executor or administrator to the new owner, the Short Form Certificate (this is given to the executor or administrator by the Register of Wills, giving that person the authority to settle the estate), Form MV-4ST, "Vehicle Sales and Use Tax Return/Application for Registration", and the appropriate fees (title fee, transfer fee, applicable sales tax, and local use fee).

If the vehicle is owned solely by the person who died and the will is not probated (i.e., no executor is appointed) and if the will passes ownership to the surviving spouse, child/children, or parent(s), Pennsylvania requires that you submit the certificate of title assigned by the designee in the will, a copy of the will, Form MV-39, Form MV-4ST, an original death certificate (or, on Form MV-39, the appropriate section completed by the attending physician or funeral director), and the required fees (title fee if it is not being titled to the surviving spouse, transfer fee, applicable sales tax, and local use fee).

If there is no will, no administrator has been appointed by the Register of Wills, and there is a surviving spouse or a spouse and children, the certificate of title assigned by the surviving spouse and any children who are at least 18 years old, Form MV-39, proof of death as described above, Form MV-4ST, and relevant fees (title fee if it is not being titled to the surviving spouse, transfer fee, applicable sales tax, and local use fee) must be submitted.

If a surviving spouse or child or parent of the same household as the person who died claims a vehicle as the whole or part of the family exemption according to Pennsylvania probate code (Section 3121 of 20 Pa.C.S.), that individual may assign the title to the new owner by submitting the certificate of title assigned by the executor, administrator, or the person entitled to the family exemption; an affidavit of entitlement under 20 Pa.C.S. 3121; Form MV-4ST; and the associated fees.

Please note that in all of these cases Form MV-4ST is completed only by a PennDoT agent.

Other situations include there being (1) no will, no surviving spouse, and no minor heirs or (2) no will, no surviving spouse, but there are minor heirs. These would need to be addressed by the administrator of the estate.

The Pennsylvania Vehicle Code (Section 1315) provides that when the owner of a vehicle has died, the vehicle may be operated by or for any heir of the decedent or by the executor or administrator for the remainder of the registration period and throughout the following registration period, provided that the registration is renewed in the name of the deceased owner's estate. This may be continued (given appropriate registration renewals) until the court approves the final account of the estate. A new title in the name of the estate is not required in order to renew the registration of the vehicle.

For other questions, consider contacting the central office:

PA Department of Transportation
Keystone Building
400 North Street, Fifth Floor
Harrisburg, PA 17120
General information: 717.787.2838

To reiterate, by far the simplest course of action is to visit the local DMV or AAA office and to let them deal with the complexities of the process.

NOTES

21.0 VETERANS' BENEFITS FOR SPOUSES

If the person who died was a veteran, the Department of Veterans Affairs must be notified, especially if the veteran had been receiving benefits, such as health insurance or a pension. Calling the Department at 800.827.1000 (TTY: 711) is the fastest way to report the death. That number is staffed Monday through Friday, from 8 AM to 9 PM, Eastern time. You could also go to the local VA office:

Philadelphia VA Regional Benefit Office
5000 Wissahickon Avenue
Philadelphia PA 19144
Phone: 800.827.1000 (TTY: 711)

You may also notify the VA by mail, although this will delay stopping the veteran's benefits. The information should be sent to:

Department of Veterans Affairs
Claims Intake Center
PO Box 4444
Janesville WI 53547-4444

In order to verify the veteran's identity, provide the VA with the person's full name, Social Security number or VA claim number, date of birth, date of death, and branch of service. You will need also to supply the VA with documentation, including the death certificate or other public record of the Veteran's death, a discharge document such as the DD214, and proof of your relationship.

21.1 Survivors Pension

If the veteran served for at least 90 days of active duty service including at least one day of which was during wartime and did not receive a dishonorable discharge, survivors may apply to receive a tax-free VA Survivors Pension. If the veteran entered active duty after 7 September 1980, the service requirement is a minimum of 24 months of active-duty or, if the length of service is less than 24 months, the veteran must have completed his or her entire tour of active duty. This monthly payment is available to survivors who have not remarried and who have limited incomes. This benefit is also available to unmarried dependent children of wartime veterans.

Eligibility is based on the survivor's "countable income" and net worth, including assets such as bank and investment accounts and real estate other than the primary residence. Countable income includes disability and retirement payments, interest and dividend payments from annuities, earnings or pay from most sources (including money from any eligible dependents), and possibly net income from farming or business earnings. Countable income has some exclusions that are subtracted from the survivor's annual income, including payments for unreimbursed medical expenses if these expenses exceed 5% of the maximum annual rate allowed by Congress. Deducting these expenses lowers countable income, thereby increasing the possible monthly payment.

Net worth is calculated as the sum of the claimant's assets and annual income. The cap on net worth varies according to circumstances, legislation, changes to the program, or other (unspecified) variables. The current cap for net worth for a survivor to be eligible for the Survivors Pension, until 30 November 2023, is \$150,538. The survivor's net worth must also meet the limits set for the Community Spouse Resource Allowance. This is established by Congress for Medicaid.

The VA uses a standardized formula to determine the amount of pension for each case. The maximum annual pension rate (MAPR) is defined for a specific set of circumstances. To determine any individual's rate, countable income is subtracted from the MAPR, giving the annual entitlement. This amount is then divided by 12; this amount is viewed as an "approximate" amount of the monthly Survivors Pension.

Congress sets the maximum amount of the benefit each year. In 2022 the maximum for surviving spouses ranged from just under \$9,900 per year to approximately \$19,000 per year, depending on income, whether the spouse has children, and whether they qualify for other benefits.

To apply for the VA Survivors Pension, the survivor must complete VA Form 21P-534EZ, Application for DIC, Death Pension, and/or Accrued Benefits. This can be downloaded. The completed form should be mailed or faxed to the VA Pension Management Center for Pennsylvania. This is:

Philadelphia VA Regional Office Department of Veterans Affairs
Claims Intake Center
Attention: Philadelphia Pension Center
PO Box 5206
Janesville, WI 53547-5206
Fax: 1.844.655.1604

21.2 Burial benefits

Burial benefits are not limited to combat veterans, so individuals who served in peacetime are also eligible. This eligibility extends to the spouse or a minor child of the veteran as well. On rare occasions an unmarried adult dependent child may also be eligible. Benefits are provided for all legal types of burial, including cremation and burial at sea, as well as if the veteran's body is donated to a medical school.

Burial at sea is an option for all honorably discharged uniformed service veterans, as well as US civilian marine personnel of the Military Sealift Command and dependent family members of active duty personnel, retirees, and veterans of the uniformed services. The committal ceremony is performed on US Navy vessels that are on deployment, so no family members are permitted to be present. To initiate the process, the person who is authorized to direct disposition of the remains (either casket or urn) should call the Navy and Marine Corps Mortuary Affairs office at 1.866.787.0081 to request a packet of information. When completed, the Burial at Sea Request Form is returned to the office, along with a photocopy of the death certificate, the burial transit permit or the cremation certificate, and a copy of the DD Form 214, discharge certificate, or retirement order. After the remains or cremains are received at the port of embarkation (Norfolk, VA; Jacksonville, FL; San Diego, CA; Bremerton, WA; Honolulu, HI), the average time for burial at sea to take place is 12 to 18 months. After the committal is completed, the captain of the ship that performed the ceremony will notify the family of the date, time, and longitude and latitude of the location. The flag that accompanied the remains and was used in the committal ceremony will be returned to the person who was authorized to direct the disposition of the remains, unless this person chooses otherwise.

Beginning in 2016, the VA allows application for determination of eligibility for burial at a VA national cemetery to be made in advance. Discharge records such as the DD214, Certificate of Release, or Discharge from Active Duty will be needed. If this documentation cannot be located, you should contact the National Personnel Records Center or Veterans Benefits Administration.

National Personnel Records Center
1 Archives Drive
St. Louis, MO 63138

Phone 314.801.0800
Fax: 314.801.9195

Veterans Benefits Administration
1-800-827-1000

If the veteran dies unexpectedly without determination of pre-need eligibility, the best option is to call the National Cemetery Association at 800.535.1117. These personnel can guide families through the next steps to take, and can reach out to the National Personnel Records Center or the Veterans Benefits Administration. Even if the veteran chose to be buried at a private cemetery, eligibility to receive a grave marker can be determined. Having the discharge documents already in hand will expedite the process, because locating the needed documents may take several days.

It should be remembered that the Washington Crossing National Cemetery, located at Highland Road in Newtown, PA 18940 (Phone 215.504.5610) is a possible choice for a veteran's burial. Burial benefits in a national cemetery include opening and closing the grave, perpetual care, a government headstone or marker, a burial flag, and a Presidential Memorial Certificate, all at no cost to the family.

Spouses and dependents may be buried with the veteran in a national cemetery, and will receive perpetual care of the gravesite and their names and dates of birth and death inscribed on the veteran's headstone, at no cost to the family. Surprisingly, eligible spouses and dependents may be buried in a VA national cemetery even if the veteran is not buried there.

Burials at a national, state, territorial, or tribal cemetery also include a memorial web page. Family members may visit this and post photos, documents, or memories in honor of the veteran. This is known as the Veterans Legacy Memorial.

In the case of burial at a private cemetery, the VA provides a headstone or marker, a burial flag, and a Presidential Memorial Certificate (a family member must request this). If the grave is marked with a privately purchased headstone or marker, eligible veterans may receive a bronze or silver medallion. To be eligible:

- (1) enlisted personnel who served before 7 September 1980 must have served at least one day of active duty on or after 6 April 1979;
- (2) enlisted personnel who served after 7 September 1980 must have served a minimum of 24 months of continuous active duty;
- (3) officers who served before 16 October 1981 must have served at least one day of active duty on or after 6 April 1979;
- (4) officers who served after 16 October 1981 must have served a minimum of 24 months of continuous active duty.

Spouses and dependent children who are buried with the veteran may be eligible for an inscription on the veteran's headstone or marker. The VA may also pay some of the funeral and burial expenses. This benefit, which may be up to \$2,000, depends on the veteran's service history.

You may apply for a memorial item (headstone, grave marker, niche marker, and/or medallion) if you are representing the deceased veteran. Such representatives are:

- a family member
- an official personal representative of the veteran
- a representative of an accredited veterans service organization
- an employee of a state or local government whose official responsibilities include serving veterans
- a person legally responsible for details having to do with the veteran's interment or memorialization

Paperwork is, unsurprisingly, necessary for all of this. For a headstone, grave marker, or niche marker you will need to fill out the claim for Standard Government Headstone or Marker (VA Form 40-1330), which can be downloaded. For a medallion to be placed on a privately purchased headstone or marker, you need to fill out the Claim for Government Medallion for Placement in a Private Cemetery (VA Form 40-1330M), which can also be downloaded.

VA Form 40-1330 is a 5-page document that, in addition to the one page application form, explains in detail eligibility requirements and shows samples of available headstones and markers, as well as emblems of belief that could be added to the headstone or marker.

VA Form 40-1330M is a 3-page document that provides detailed eligibility requirements and images of the medallion (3 versions, small, medium, or large) along with the one-page application form.

Both should be submitted with supporting documents (copies of the DD214 or equivalent discharge documents). Because no documents can be returned, originals should not be submitted. If you do not have this information, submit the application anyway and the VA will request them from the National Personnel Records Center for you.

Your claim and supporting documents may be submitted by using Quick Submit at access.va.gov. You will be instructed to register during your first sign-on attempt. Multiple claims can be submitted electronically via Quick Submit (log out and back in between packages of paperwork).

Alternatively, claims may be mailed to:
NCA FP EVIDENCE INTAKE CENTER
PO BOX 5237
JANESVILLE, WI 53547

As a third option, the claim and documents may be faxed to: VA 1-800-455-7143. This fax line is dedicated to the transmission of applications for the headstone, marker, or medallion. Applications for other government benefits will not be accepted.

A burial flag may be requested by completing VA Form 27-2008, which can be downloaded. This 3-page form includes detailed instructions, as well as a page of proper flag etiquette and instructions on how to fold the flag. This benefit does not include a flag display case. You may bring this form, along with discharge documentation, to the funeral director, a VA regional office, or, in some cases, to a US post office. Several post offices near Ann's Choice do have flags:

1135 Mearns Rd, Warminster, PA
M-F 9 AM – 5:30 PM; Sat. 9:30 AM – 2:00 PM
(800) 275-8777

445 York Rd, Warminster, PA
M-F 9 AM – 5 PM; Sat. Closed

(800) 275-8777

12 N. York Rd., Hatboro, PA
M-F 8:15 AM - 4:30 PM; Sat. 9:00 - Noon
(800) 275-8777

1050 Street Rd., Southampton, PA
M-F 8:30 AM - 5:00 PM; Sat. 9:00 AM - 2:00 PM
(800) 275-8777

851 Bustleton Pike, Richboro. PA
M-F 10:00 AM - 4:00 PM; Sat. 9:00 AM - 1:00 PM
(800) 275-8777

Applications may be submitted to the post office by family members or a funeral director. There is no time limit for requesting a burial flag.

The Presidential Memorial Certificate can be requested by completing VA Form 40-0247, which is downloadable. This is a one-page form. The completed form and supporting documents (copies only of these) may be submitted by using Quick Submit at access.va.gov. You will be instructed to register during your first sign-on attempt. Multiple claims can be submitted electronically via Quick Submit (log out and back in between packages of paperwork). Alternatively, claims may be mailed to:

NCA FP EVIDENCE INTAKE CENTER
PO BOX 5237
JANESVILLE, WI 53547

As a third option, the claim and documents may be faxed to: VA 1.800.455.7143. This fax line is dedicated to the transmission of applications for the headstone, marker, or medallion. Applications for other Government benefits will not be accepted.

Please note, you may receive both the SS death payment and veterans' burial benefits.

If you need help, you may call the VA at 1.800.697.6947.

According to AARP, burial benefits are underutilized:

“ In fiscal year 2020, over 80,000 veterans were interred in the VA’s national cemeteries, representing only about 14% of veterans who died during the same time period....(Another 4% were interred in state, territory, or tribal cemeteries.) In private cemeteries, more than 140,000 standard issue headstones or markers were distributed from the VA for veterans’ grave sites. This means that about 58 percent of veterans did not receive any burial benefit.”

NOTES

22.0 TAXES, TAXES, TAXES

Inevitably, taxes must be dealt with. After someone dies, estate, inheritance, and income taxes must be addressed at the state and federal levels. In some cases the federal gift tax may apply, although this is relatively rare. Managing these taxes is generally the responsibility of the executor of the estate.

The federal government combines estate and gift taxes into a single form. Pennsylvania does not impose an estate tax; this was eliminated in 2005.

The federal government does not impose an inheritance tax; the estate tax replaces it.

Pennsylvania, however, does have an inheritance tax. The tax is applied to the value of the estate that is transferred to beneficiaries, according to stipulations of the will. The rates vary depending on who the beneficiaries are:

- 0 % on transfers to a surviving spouse or to a parent of a child aged 21 or younger
- 4.5% on transfers to direct descendants and lineal heirs
- 12% on transfers to siblings
- 15% on transfers to other heirs, except charitable organizations, exempt institutions, and government entities that are exempt from tax

To explain, direct descendants are all natural children of the person who died and their descendants, adopted descendants, and their descendants and step-descendants. Lineal heirs of the person who died include that person's grandparents, parents, and their children (even if they have been adopted by other people), as well as their adopted children and stepchildren.

Property owned jointly by husband and wife is exempt from inheritance tax. All "real and tangible property" of the person who died – items such as cash, motor vehicles, furniture, antiques, and jewelry that are located in Pennsylvania at the time of the person's death – is subject to inheritance tax. All intangible property, such as stocks, bonds, bank accounts, loans receivable, and the like is also taxable, regardless of where these are located at the time of death. Jointly owned tangible and intangible property with the right of survivorship (except for, as

previously noted, that between husband and wife) is also taxable, based on the extent of the decedent's interest in the joint property. Even if the decedent's name had been added only as a matter of convenience it remains taxable. If the person who died created the joint property within a year of his or her death, the full value of the property, minus \$3000, is considered part of the estate and is taxable.

If there is no spouse, any child of the person who died who is a member of that person's household may claim the family exemption. If there is no spouse or child, a parent or parents who are part of the household may claim this. The family exemption is currently \$3000.

Contents of the safe deposit box must be inventoried to determine what materials are part of the estate of the person who died. Contents owned by the person who died or owned jointly by this person and another individual who is not a spouse are taxable. Notice of the inventory must be provided in writing to the Pennsylvania Department of Revenue, Safe Deposit Box Unit, at least 7 days in advance. The notice is provided by completing form REV-1845 (Notice of Intent to Enter Safe Deposit Box) and mailing it to the department at PO Box 280600, Harrisburg, PA 17128-0600 with return receipt service. A copy must be provided to the financial institution where the box is located. The inventory is conducted by a representative of the estate (typically the executor) and a bank representative. If the box is jointly owned with a surviving spouse, that person should also be present. An attorney who represents the estate may be present. On the day of the inventory, the estate representative must provide a statement to the bank or other financial institution verifying that notice of the inventory had been provided. Within 20 days of the inventory the estate representative must return form REV-485 (Safe Deposit Box Inventory) to the Safe Deposit Box Unit.

The tax is paid out of the estate of the decedent using form REV-1500. Funeral expenses and any unpaid bills of the person who died may be deducted from the estate. This tax becomes due at death and must be reported and remitted to the state within nine months after the death. A 5% discount is given if payment is made within three months of the date of death. The inheritance tax return is filed by the executor named in the will and appointed by the Register of Wills. The inheritance tax return must be filed in duplicate with the Register of Wills in the county of residence - for us here, Bucks County.

The estate tax is a federal wealth tax that is levied on estates that have a total value that exceeds the exemption limit, which is currently, in 2023, set at \$12.92 million dollars per individual. For a married couple, this increases to \$25.84 million. For larger estates, tax rates currently cap at 40%, depending on the size. The exemption limit is adjusted each year, based on inflation (In 2022, the individual limit was \$12.06 million; \$24.12 million for a married couple.) The total tax owed is calculated by adding the fair market value of all of the assets of the person who died, both real and personal property, as of the date of his or her death. At present, relatively few estates wind up paying estate tax. This will change in a couple of years. It is expected that, when this law expires in 2026, the exemption will decrease to the previous limit of \$5.49 million, adjusted for inflation.

Gift tax information is reported on the same form, IRS Form 706. The explicit intent of the gift tax is to prevent individuals from avoiding the federal estate tax by giving away all of their assets prior to their death. The amount of this exemption changes on an annual basis. Taxes are paid by the individual who is making the gift, not by the recipient. These taxes apply whether the donor intends the transfer to be a gift to that individual or not. At present, in 2023, the annual gift limit for an individual is \$17,000 or \$34,000 for a married couple. It is not necessary to report this to the IRS on an annual basis, because you can defer all gift tax liability incurred over your lifetime onto your estate tax exemption limit, bearing in mind that this reduces the overall asset exemption; that is, if you have donated \$100,000 of cash and assets to other individuals, the estate tax exemption is decreased by \$100,000. Note that donations to charity are not considered to be gifts.

There is an important wrinkle to be aware of. According to federal tax law, if an individual makes a gift of property (cash or assets) within 3 years of the date of his or her death, the value of that gift is included in the dollar value of the estate at the time of death. Again, the purpose of this is to prevent non-payment of the federal estate tax. One way around this is to establish a revocable trust. A revocable trust is a trust whereby provisions can be altered or canceled depending on the wishes of the originator of the trust. During the life of the trust, income earned is distributed to the person who established the trust, and only after death

does property transfer to the beneficiaries of the trust. Revocable trusts let the living grantor change instructions, remove assets, or terminate the trust. A revocable trust is helpful since it provides flexibility and income to the living grantor (also called the trustor). Provisions of the trust can be changed, and the estate will be transferred to the beneficiaries upon the grantor's death. This strategy does have disadvantages, so it is best to discuss this with your financial advisor or estate planner.

The executor of the estate is responsible for filing Form 706 within 9 months of the death of the individual. If you are managing your estate primarily via trusts, it may be the responsibility of your successor trustee to complete this filing. The bottom line is that, because of the high amount of the estate tax exemption at present, it is unlikely that any estate tax will be due.

Last but far from least is income tax. This will be payable to both the state and the IRS.

Federal income tax should be filed as usual using the Form 1040, U.S. Individual Tax Return, or Form 1040-SR, U.S. Tax Return for Seniors. (Form 1040-SR is a 1040 version that uses larger print and includes a standard deduction table directly on the form, so that the standard deduction amounts can easily be seen. Form 1040-SR uses the same line items and instructions as the standard Form 1040 and was designed for individuals aged 65 and older who fill out the forms by hand, rather than on-line.) Note that the income tax is a return separate from the federal estate tax, which uses Form 1041.

The return must report all income up to the date of death of the person and claim all eligible credits and deductions. The IRS, in contrast with most other agencies, does NOT require submission of a death certificate. For paper returns, the filer should write "deceased" along with the person's name and date of death across the top of the form. If filing electronically, it will be necessary to follow the instructions provided by the software for proper signature and notation requirements.

Because the IRS considers the surviving spouse to be married for the full year during which his or her spouse died, the surviving spouse is eligible to file as "married filing jointly" or "married filing separately". Filing deadlines are the same as for other returns, namely in April of the following year.

The tax return should be signed by the appointed representative of the estate, the executor or administrator, and by the surviving spouse if it is a joint return. If there is no executor or administrator, the surviving spouse filing a joint return should sign and write in the signature area “filing as surviving spouse”. If there is neither an executor nor a surviving spouse, the person completing the return must file and sign the return as “personal representative”.

The court-appointed representative should attach a copy of the court document that confirms their appointment, the Short Certificate. If tax is due, payment should be submitted with the return. If a refund is due to the person who died, it may be necessary to file Form 1310, Statement of Person Claiming Refund Due a Deceased Taxpayer with the return. This is not necessary if the surviving spouse filing a joint return or a court-appointed representative is filing the return.

The rules for filing Pennsylvania income tax require that in order for a joint return to be filed, both the surviving spouse and the court-appointed representative must agree to do so. The return will be signed by both individuals. PA-40, the Pennsylvania Income Tax Return, includes a place to indicate “deceased”, including date of death. Do not list the deceased person’s name and Social Security number as the primary taxpayer. The return must report all income, payments, and credits of the decedent for that year. The person signing the return must indicate his or her relationship to the person who died. If the person who died was making Pennsylvania estimated tax payments, the surviving spouse may request Form REV-4598 to reconcile the estimated payments.

NOTES

23.0 ADDITIONAL REFERENCE MATERIALS

A MINDFULNESS FOR BEGINNERS JOURNAL: PROMPTS & PRACTICES FOR LIVING IN THE MOMENT

By Matthew Sockolov

From the jacket: “This journal is the perfect starting place for anyone interested in learning the many practices of mindfulness, from breathwork to awareness to self-acceptance. Explore your thoughts and feelings with insightful prompts and gentle reflections. Discover the peace and serenity that focusing on the here and now can bring.”

A YEAR OF MINDFULNESS FOR BEGINNERS: DAILY MANTRAS, MEDITATIONS, AND PROMPTS

By Lee Papa

From the author: “Mindfulness equals awareness: awareness of your thoughts and actions and the world around you – without judgment.”

Very brief readings for each day of the year.

BEING MORTAL: MEDICINE AND WHAT MATTERS IN THE END

By Atul Gawande

From the jacket: “Modern medicine has transformed the dangers of birth, injury, and infectious disease from harrowing to manageable. But when it comes to the inescapable realities of aging and death, what medicine can do often runs counter to what it should do. Through eye-opening research and gripping stories of his own patients and family, Gawande reveals the suffering produced by medicine’s neglect of the wishes people might have beyond mere survival. To find out what those wishes are, we need to ask. We haven’t been asking, but we can learn.

Riveting, honest, and humane, this remarkable book, which has already changed the national conversation on aging and death, shows how the ultimate goal is not a good death but a good life – all the way to the very end.”

THE BEST JOURNAL EVER

The journal contains 4 sections: Self-assessment; 30 Day Reflection; Habit Tracker; and Daily Journal. Each page in the daily journal starts with “I am grateful for...” 3 things and “Today’s affirmation. I am...”

From the authors:

“We...found out that 95 percent of everything we feel, think, do and achieve is a result of a learned habit!”

“So it’s really the little decisions we make (or don’t make) every day that make all the difference... and that’s what *The Best Journal Ever* is all about!”

“Creating SMALL life changing habits, slowly over time, that bring extraordinary results to every aspect of your life.”

THE GOOD LIFE: LESSONS FROM THE WORLD’S LONGEST SCIENTIFIC STUDY OF HAPPINESS

By Robert Waldinger, MD and Marc Schulz, PhD

From the jacket: “The longest scientific study of happiness ever conducted – supported by many other studies – shows that strong relationships make for a good life. Good relationships keep us healthier and happier.”

THE GRACEFUL EXIT: 10 THINGS YOU NEED TO KNOW

By Mona Hanford and Adrienne Hand

From the covers: “Face Reality, Make Wise Choices and Find Hope at the End of Life” “Mona Hanford shares *10 Things You Need To Know* as a caregiver or a patient to live fully and comfortably at the end of life. This book prepares you and your family to ask the right questions, make wise choices, avoid the trap of false hope and find spiritual support as you plan a graceful exit.”

HARD CHOICES FOR LOVING PEOPLE: CPR, FEEDING TUBES, PALLIATIVE CARE, COMFORT MEASURES, AND THE PATIENT WITH A SERIOUS ILLNESS

By Hank Dunn, ordained healthcare chaplain

From the jacket, comment by Ira Byock, MD, founder and chief medical officer of the Providence Institute for Human Caring: “This slender book is packed with practical wisdom for people facing life’s most difficult decisions. It is clear and concise, yet sensitive to the emotional turmoil of the people who hold it in their hands. Over the years, (this) is the book I have recommended most often to families confronting the complexities of medical treatments for loved ones with life-threatening conditions.”

HEALING AFTER LOSS: DAILY MEDITATIONS FOR WORKING THROUGH GRIEF

By Martha W. Hickman

From the jacket: “The classic guide for dealing with grief and loss. For those who have suffered the loss of a loved one, here are thoughtful words to strengthen, inspire, and comfort.

I WASN'T READY TO SAY GOODBYE: SURVIVING, COPING, AND HEALING AFTER THE SUDDEN DEATH OF A LOVED ONE

By Brooke Noel and Pamela D. Blair, PhD

From the jacket: “Tapping into the personal histories of both authors and numerous interviews, *I Wasn't Ready to Say Goodbye* shows grieving readers how to endure, survive and grow from the pain and turmoil surrounding human loss. For survivors, this valuable book provides a rock-steady anchor from which to weather the storm of pain and beginning to rebuild their lives.”

LET'S TALK ABOUT DEATH (OVER DINNER): AN INVITATION AND GUIDE TO LIFE'S MOST IMPORTANT CONVERSATION

By Michael Hebb

From the jacket: “Death is one of the most important topics we need to discuss- but we don't. We know why: it's loaded, uncomfortable, and often depressing. But what if death wasn't a repressed topic, and instead one filled with possibility, a conversation capable of bringing us closer to those we love?

....There's no one right way to talk about death, but with a little humor and grace, you'll transform your difficult conversations into an opportunity for celebration and meaning, changing not only the way we die, but also the way we live.”

LIFE LESSONS: TWO EXPERTS ON DEATH & DYING TEACH US ABOUT THE MYSTERIES OF LIFE & LIVING

By Elisabeth Kübler-Ross, M.D. and David Kessler

From the jacket: “Is this really how I want to live my life? Each one of us at some point asks this question. The tragedy is not that life is short, but that we often see only in hindsight what really matters.

In her first book on life and living, Dr. Elisabeth Kübler-Ross joins with David Kessler to guide us through the practical and spiritual lessons we need to learn so that we can live life to its fullest in every moment. Many years of working with the dying have shown the authors that certain lessons come up over and over again. Some of these lessons are enormously difficult to master, but even attempting to understand them can be deeply rewarding.”

LIFE WORTH LIVING: A GUIDE TO WHAT MATTERS MOST

By Miroslav Volf, Matthew Croasmun, and Ryan McAnnally-Linz
From the jacket: “A guide to defining and then creating a flourishing life, based on the popular class at Yale University.

What makes a life good? The question is inherent to the human condition; asked by people across generations, professions, and social classes; and addressed by all schools of philosophy and religions. This search...is at the crux of a crisis that is facing Western culture, a crisis that, they propose, can be ameliorated by searching in one’s own life, for the underlying truth.”

LIVING LIFE BACKWARD: HOW ECCLESIASTES TEACHES US TO LIVE IN THE LIGHT OF THE END

By David Gibson, minister of Trinity Church in Aberdeen, Scotland
From the cover: “Keeping the end in mind shapes how we live our lives in the here and now. Living life backward means taking the one thing that is certain – death – and letting that inform our journey before we get there.”

MINDFULNESS WORKBOOK FOR BEGINNERS: EXERCISES AND MEDITATIONS TO RELIEVE STRESS, FIND JOY, AND CULTIVATE GRATITUDE

By Peter J. Economou, PhD, ABPP; associate professor at Rutgers in the Graduate School of Applied and Professional Psychology; founder of a clinical practice specializing in cognitive and behavioral therapy and sports psychology

From the jacket: “Explore topics like focusing on the present moment, setting intentions, and spending time with your thoughts and feelings. Then, dive deeper by learning how to practice gratitude, create space for joy, embrace your emotions, and feel compassion and empathy toward yourself and others.”

ON GRIEF AND GRIEVING: FINDING THE MEANING OF GRIEF THROUGH THE FIVE STAGES OF LOSS

By Elisabeth Kübler-Ross and David Kessler
From the jacket: “Just as *On Death and Dying* taught us the five stages of death...Dr. Elisabeth Kübler-Ross and David Kessler’s landmark *On Grief and Grieving* applies these stages to the grieving process and weaves together theory, inspiration and practical advice, including sections on sadness, haunting, dreams, isolation and healing.”

WE NEED TO TALK: CONVERSATIONS TO EASE FEAR AND SUFFERING SURROUNDING END OF LIFE

By David S. White

From the cover: “Dying can be hard work, but the evolution of healthcare over the past fifty years has made it harder than it needs to be. Author David White shares from his life’s work spent at more than 10,000 bedsides as a hospital, nursing home, and hospice chaplain, confirming the options that are ours to choose, and giving compelling reasons to have ‘The Conversation’ about the care we’d prefer at the end of life. This is an essential roadmap for a time of life that awaits us all, as well as for those accompanying us on the journey.”

24.0 A FINAL WORD

All of us on the Embrace Well-being team hope that you and your family find this of value. We undertook this project in response to resident requests and have worked hard to make it as useful as possible. We greatly appreciate your support for this and our other projects.

With best regards from the team:

Susan Bishop

Ronnie Gerster

Timothy Hughes

Trisha Malabuyo

Barbara Masonis

Beth Muller

Lois Pisacane, MD

Sandra Rear

Naureen Schnee

Ellen Schwartz

Lindsay Schwartz, MSW, LSW

Patricia Sole

Sandra Tansky

Bruce Uhrich

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