

Senior Post

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**Irrevocable trusts
as life changes**

NOVEMBER 2022
A MONTHLY MAGAZINE BY

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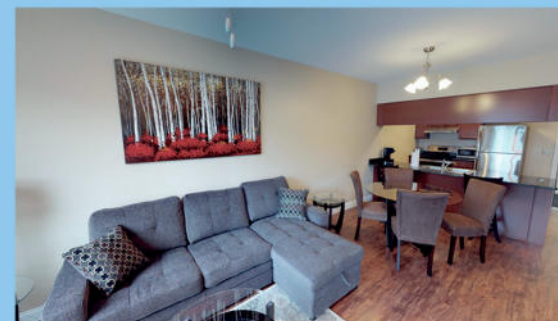
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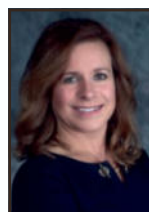
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Irrevocable trusts as life changes



BY DOREEN SEAMON

for The Dominion Post

This year our article is following a hypothetical family through their lives to see what role estate planning had on their family. To review prior articles, go to SeamonLawOffices.com/Blog.

We have worked with the Smith family for years regarding estate planning for several family members, service-connected veterans' benefits, Veteran's Aid and Attendance pension for Joe when he was paying for a caregiver, and then long-term care Medicaid.

Last month, we discussed that eventually Joe moved into a nursing home due to issues regarding his dementia that resulted in him no longer being safe at home. It was a rough transition for the family. Joe's confusion con-

tinued to escalate, and he could no longer remember when his family visited him. Although Barb visited almost daily it was difficult because he did not remember her visits.

Eventually, Barb decided it was just too much to take care of their large family home without Joe to help her and with her trying to get to the nursing home most days. She came in for a check-up and mentioned that she wanted to downsize and move to a street closer to her daughter across town. I'm glad she mentioned that because Barb mistakenly thought she could not sell her home since it was in her irrevocable asset protection trust. I was able to explain that the trust could sell the home and purchase a new residence for Barb that was more suitable to her current situation, she was ecstatic.

This type of irrevocable trust can be confusing because while it is irrevocable to the person creating the trust, the assets can be sold, exchanged, removed from the trust by the trustee and appropriate beneficiaries.

Barb's daughter is the trustee, and she is ready, willing and able to do whatever it takes to help her mother live in a safe place near her loved ones.

Barb also mentioned that with Joe in the nursing home her income is now somewhat reduced, and she worries about making ends meet some months. I was able to explain that there is a way that we can use trust funds if she needs them. We decided that they would sell the home and see how the new home affected her monthly budget and she would let me know so that our team could advise her of her options.

Barb asked if she would be able to qualify for the Aid and Attendance or whether it was only for the veteran. I explained that under the proper conditions a surviving spouse can also get this pension albeit less than the amount a veteran would receive, she could potentially get about \$1,300 per month. Barb is actually much too healthy at this time to qualify for the

pension, but it was good to keep in mind for the future. Joe was fortunate to have a spouse living with him to help him stay home longer, but Barb will not have that luxury.

Barb and I took a few moments to reminisce about all the twists and turns their estate plan has taken over the past couple of decades. She chuckled when she recalled our first meeting because they wanted simple documents, and how it was difficult for me to convince them that they needed elder law and disability provisions in their documents when they were healthy. Barb said they got exactly what they needed even though it was not what they originally wanted because the plan made it simple to accomplish their goals. Remember, it is never too early to plan!

Doreen L. Seamon, J.D. is an attorney with Seamon Law Offices, PLLC. Her experience includes elder care and estate planning. She writes a regular column for Senior Post. Contact her at columns@dominionpost.com.

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Metro Creative Connection

Illnesses and aging can force families to make challenging decisions regarding the health and well-being of people they love. Care facilities, home health aides and other services can help improve quality of life for those people who are no longer well enough, physically or cognitively, to care for themselves. Palliative and hospice care are part of these care offerings.

What is palliative care?

Palliative care is specialized medical services for individuals living with serious illnesses. It is not designed to cure or treat the condition itself, but it is a way to manage symptoms. It is typically used in conjunction with other forms of medicine that are attempting to treat or cure the disease.

What is hospice care?

Hospice is similar to palliative care in that it

is geared to enhancing quality of life. Hospice care is for people in the last phases of incurable diseases and is intended to ensure they live as fully and comfortably as possible, according to the American Cancer Society. Unlike palliative care, which accompanies traditional medical care, those who accept hospice care typically cease any other care attempting to cure the illness.

Who can benefit from palliative or hospice care?

The National Institute on Aging says anyone living with a serious illness, such as cancer, dementia, Parkinson's disease, and heart failure, can appreciate the support palliative care provides. It is helpful at any stage of the illness, and is best started soon after diagnosis.

Hospice care is for those who are in the final stages of their illnesses. Generally, hospice

services are reserved for people who are expected to live another six months or less if their illness continues to run its course.

Are these services permanent?

The good news about palliative care and hospice care is that wishes are completely driven by the patient and his or her family. If the patient is incapable of making medical directives, his or her medical proxy can make changes to care wishes.

Research indicates that many times hospice care is started too late because people think it's a form of "giving up." However, anyone in hospice care can resume active care if they or their caregivers choose to do so.

What can palliative and hospice care resolve?

The Mayo Clinic says that palliative and hospice care can improve symptoms such as

pain, nausea or vomiting, anxiety, depression, constipation, difficulty breathing, fatigue, and trouble sleeping, among others.

Hospice care also can include spiritual and bereavement care. Hospice teams typically follow up with members of the immediate family to offer them counseling or other services.

Who is in charge?

Patients and their families decide what they want out of these care measures. Palliative care teams are separate from the patient's medical care team that's managing their treatment. Hospice care teams coordinate the majority of care for the patient and communicate with the patient's medical care team.

Hospice and palliative care are considerations for people with serious conditions.



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Older adults recognize the threat posed by cognitive decline, which can make it hard for individuals to live independently. According to data from the Max Planck Institute for Demographic Research published in 2020 in the journal Epidemiology, since the mid-1990s, rates of dementia cases in the United States have risen steadily. Since that time, the annual increase for men is 2% and for women it is 1.7%. Researchers concluded that, “undercovering determinants of increasing cognitive impairment risk should become a research priority.”

As doctors grapple with figuring out why dementia rates are growing, individuals can

do all they can to help reduce their risk for serious cognitive decline. Some reduction in cognition is to be expected with age, but dementias, such as Alzheimer’s disease, should not be accepted as an inevitable side effect of aging. In fact, reading more can help people keep their brains sharp.

Studies looking at the effects of daily reading activity on the risk of cognitive decline point out that reading does, in fact, make a big difference. According to research by Yu-Hung Chang, I-Chien Wu and Chao A. Hsiung, from the Department of Public Health, China Medical University and Institute of Population Health Sciences, a 14-year study of people aged 64 and above determined those with

higher reading frequencies were less likely to have cognitive decline at 6-, 10- and 14-year interval measurements. This remained the same at all educational levels. The authors concluded that reading was protective of cognitive function later in life.

Dr. Wade Fish, director at Northcentral University’s Graduate School, advises that reading can improve memory and concentration, and also relieves stress. Brain-stimulating activities like reading have been shown to slow down cognitive decline in older age.

While reduction in cognitive decline is one benefit of reading, Psychology Today also

reports that bibliotherapy, or the therapeutic use of select reading materials, can alleviate many different mental health challenges. It can improve one’s social cognition and ability to empathize with others. Reading also can be associated with a longer life. A cohort study drawn from the Health and Retirement Study (HRS) collected by the University of Michigan’s Institute of Social Research and supported by the National Institute on Aging found book reading was associated with a 20 percent reduction in mortality.

Individuals who want to live longer and reduce their risk of cognitive decline can turn to books. Reading every day can support positive health outcomes.

Senior center activities

Westside Senior Center

Westside Senior Center opened June 10, 2001, and is totally operated by volunteers. It is open from 9 a.m. to noon and 6-9 p.m. Monday through Friday at 500 Dupont Road, Westover.

Members are knitting scarves for veterans and active-duty military as part of Operation Gratitude’s “Scarves for the Troops.” Anyone is welcome to bring knitting needles and join in the project.

Food is collected every month for the Rock Forge Food Pantry.

Evenings are full of things to do. Monday and Friday, bring a musical instrument and play with the group. Tuesdays and Thursdays, there is card playing, and Wednesday evening is for bingo. There is also a well-equipped exercise room that includes a pool table.

Assisted Living at Evergreen

Assisted Living at Evergreen is an alternative to nursing home care. A variety of specially developed leisure activities include outings to Oglebay, holiday dinners and parties and weekly shopping trips. Housekeeping and personal laundry services are available. There are community areas, dining and family rooms, an activity center and a gazebo with fish pond for outdoor relaxing.



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How older drivers can increase their comfort levels behind the wheel

Metro Creative Connection

It's not uncommon for aging individuals to feel less comfortable driving as they approach their golden years. Whether it's glare from LED lights, aches and pains that often accompany aging or age-related vision issues, older drivers' comfort behind the wheel can be compromised by a host of variables.

Though older drivers cannot reverse the aging process, they can try various strategies to make themselves more comfortable behind the wheel.

■ **Share driving duties on long trips.** The National Institute on Aging notes that stiffening joints and weakened muscles are a common byproduct of aging. In addition, the

Arthritis Foundation® notes that more than one in two men and two in three women over age 65 have arthritis, which also can make driving less comfortable. Age-related aches and pains and arthritis can make it very uncomfortable to drive for lengthy periods of time when drivers are sitting in roughly the same position for the duration of their trip. In such instances, drivers can share driving duties to make long trips more manageable.

■ **Upgrade to a vehicle with modern amenities.** Various amenities in modern vehicles make driving more comfortable for everyone, especially individuals with age-related aches and pains. Heated seats and in-car climate control can help reduce the discomfort caused by aches and pains and ensure

drivers and passengers can tailor the temperature in the vehicle to their own preferences.

■ **Protect your eyesight.** Much of the discomfort older drivers experience behind the wheel has to do with eyesight. The NIA urges individuals 65 and older to see their eye doctor every year. Such visits can ensure prescriptions are current and that can make drivers more confident in their ability to see everything on the road. Drivers also can speak to their eye doctors about night driving glasses, which are designed to help nighttime drivers overcome glare from headlights and street lamps.

■ **Drive more defensively.** A greater

emphasis on defensive driving also can help aging drivers feel more comfortable behind the wheel. The NIA notes that reflexes naturally slow down as a person ages, which adversely affects older drivers' reaction times. Drivers can counter this by leaving more space between their vehicles and the one in front of them. Braking earlier and avoiding driving during times marked by heavy traffic, such as rush hour, also can help drivers feel more comfortable.

It's natural for aging drivers to feel less comfortable behind the wheel than they did when they were young. But drivers can take various steps to increase their comfort levels so they can stay on the road.



How to plan for post-retirement medical expenses

Metro Creative Connection

When individuals retire, they not only walk away from work, but also relinquish their steady paychecks. For many, retirement can be a potentially risky financial endeavor. Saving for retirement is a great way to mitigate such risk, but unforeseen expenses, such as medical bills, can quickly derail a retirement plan.

Many people have a greater need for medical care as they get older. The Fidelity Investments Retiree Health Care Cost Estimate indicates health care can be one of the biggest expenses a person will take on in retirement. The average 65-year-old couple who retired in 2021 in the United States can expect to spend \$300,000 on health care and medical expenses during retirement. The

financial resource The Street says other studies suggest it's wise for retirees to plan to spend between \$3,000 and \$7,700 per year on health care.

Financial advisors warn that relying exclusively on Medicare to cover health care costs isn't going to cut it. Benefits under the Medicare program often aren't enough to pay for all of a retiree's needs. There may be gaps for chronic treatment of illnesses and specialty treatment for certain conditions. Long-term care services also typically are not covered. It's important to note that Medicare will cover general doctor's visits, but it does not cover the cost of deductibles or copays.

Individuals need to be proactive and plan for medical expenses in retirement. After hous-

ing, healthcare is the most significant expense for retirees. Health spending accounts and long-term health insurance are two options for people looking for ways to cover their health care costs in retirement.

As of 2022, people can contribute up to \$3,650 for an individual or \$7,300 for a family per year into a health savings account. After age 55, an additional \$1,000 per year is allowed. Money in an HSA grows tax-free and it can be spent tax-free on qualified medical expenses. Once a person has Medicare, he or she no longer is eligible to contribute to the HSA, but can use money already in the account to pay for qualified medical expenses that are not covered by Medicare.

Long-term care insurance is another

option, and many people invest in such an account during their 50s or 60s. The earlier an individual enrolls in a program, the lower the premium. According to Personal Capital, most policies will not start until a patient has needed assistance for 90 days and other qualifying guidelines are met. Generally speaking, long-term care insurance also is use-or-lose. If there's never a need to use the insurance, it will not be refunded. This is a risk that certain people are willing to take.

In addition to these options, people may consider gap insurance programs. When putting together a retirement plan, it can be wise to speak with financial advisors who can customize products based on their expected needs.

A Q&A about retirement planning



Metro Creative Connection

Individuals need not look very far to be reminded of the importance of planning for retirement. Television ad campaigns touting the need to plan for retirement have been front and center for many years. Banks also heavily promote their retirement planning services to account holders. The emphasis financial firms and banks place on retirement planning underscores just how important it is for individuals from all walks of life to prioritize securing their financial futures.

Ad campaigns can make saving for retirement seem simple, but plenty of people may have questions about how to save for the days when they are no longer working.

Why and when should I begin investing to build my retirement savings?

It's never too early to start saving for retirement. Young professionals may not be anywhere close to retirement, but that doesn't mean they can afford to put off saving for the day when they call it a career. Much of that has to do with inflation. The rate of inflation varies, but it's fair to assume that your cost of living will rise dramatically between your twenty-third birthday and your seventieth birthday. If you choose to simply save as opposed to investing that money, your money will not grow at a rate necessary to overcome inflation. Though there's no guarantees with investing, traditional retirement investment vehicles have a proven track record of outpacing inflation. For example, Standard & Poor's 500™ (S&P 500) reports that individual retirement accounts (IRAs) grew by an average of 10.8% between 1971 and 2020. Over that same period, the U.S. Bureau of Labor Statistics indicates that the dollar had an average rate of inflation of 3.99%.

How can I save for retirement?

Various investment vehicles can help people save for retirement. Many people use employer-sponsored 401(k)

retirement plans. These allow individuals to deposit money via pre-tax contributions deducted from their paycheck. For young people, enrolling in these plans as soon as they're eligible can be a great way to begin building their retirement savings, and since many people contribute between 6 and 10% of their pre-tax earnings, their take-home pay will not be significantly different once they enroll. IRAs, pension plans, certain life insurance policies, and regular contributions to personal savings accounts are some additional ways to save for retirement.

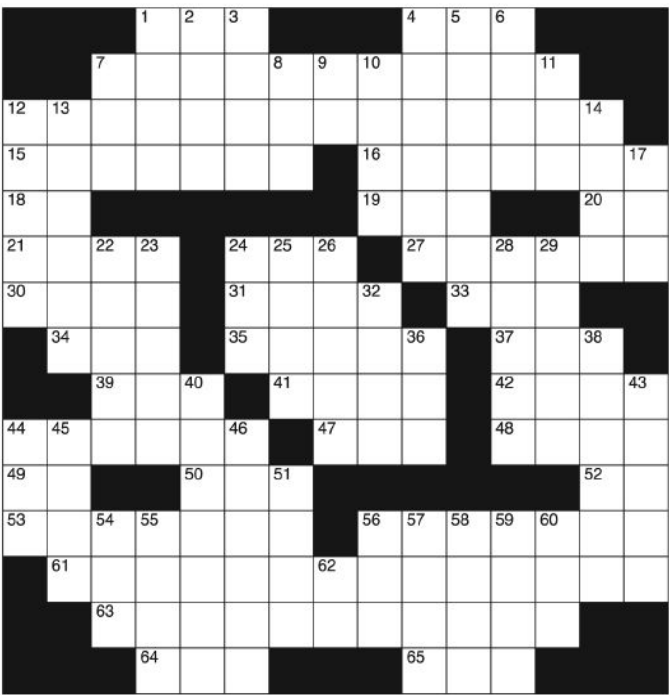
How much will I need to save for retirement?

No two people are the same, so there's no simple answer to this question. Estimates about how much people will need in retirement range from 60% to 80% of their yearly income the year they stopped working full-time. A financial advisor can be a useful ally as people try to calculate how much they will need to save for retirement. However, the simplest answer to this common question is that there's no such thing as saving too much money for retirement so long as saving does not adversely affect other areas of your life.

What if I need money before retirement?

No law prohibits people from withdrawing funds from designated retirement accounts before they retire. However, there may be significant financial penalties and tax consequences if you do so. For example, the Internal Revenue Service allows penalty-free withdrawals from a 401(k) after an account holder turns 59 1/2. Withdrawals made before then could be subject to federal and state income tax and a 10% penalty of withdrawn funds. Individuals are urged to speak with a financial advisor about withdrawal guidelines and penalties prior to opening a retirement account.

Saving for retirement is vital and it's never too early to begin investing in your financial future.



CLUES ACROSS

- | | |
|-----------------------------------------------|-------------------------------------------|
| 1. Unhappy | 37. White clerical vestment |
| 4. Clairvoyance | 39. Cool! |
| 7. One who works under you | 41. Matchstick games |
| 12. What happens there stays there | 42. Thick piece of something |
| 15. Not ingested | 44. A state that precedes vomiting |
| 16. Got the picture | 47. Burned item residue |
| 18. One thousandth of a gram | 48. Jaguarundi |
| 19. Breakfast item | 49. Anno Domini (in the year of Our Lord) |
| 20. About | 50. The home of "60 Minutes" |
| 21. Tall deciduous trees | 52. Dorm official |
| 24. Safe keeping receipt | 53. Give cards incorrectly |
| 27. Cowardly | 56. One who is learning the job |
| 30. Pueblo people of New Mexico | 61. Popular R.L. Stevenson novel |
| 31. Herring-like fish | 63. Attentively |
| 33. A very large body of water | 64. CNN's founder |
| 34. Angle (abbr.) | 65. Criticize |
| 35. Spiritual leader of a Jewish congregation | |

CLUES DOWN

- | | |
|-------------------------------------------------|------------------------------------------|
| 1. Fijian capital | 26. Hand gesture popular on social media |
| 2. Assist | 28. Renters have one |
| 3. Elected lord in Venice | 29. Tubular steel column |
| 4. The capacity of a physical system to do work | 32. Database management system |
| 5. People of the wild | 36. Similar |
| 6. Parent-teacher groups | 38. Providing no shelter/sustenance |
| 7. Midway between south and southeast | 40. Death |
| 8. Moved quickly on foot | 43. What a sheep did |
| 9. Handheld Nintendo console | 44. Midcentury Asian battleground |
| 10. "Top of the Stairs" playwright | 45. Horizontal passage into a mine |
| 11. Electronic data processing | 46. Mortified |
| 12. "Dog Day Afternoon" director | 51. Improper word |
| 13. Leaned | 54. No seats available |
| 14. About aviation | 55. Financial obligation |
| 17. Mountain is a popular type | 56. It can be hot or iced |
| 22. Lake along Zambia and Congo border | 57. Tough outer skin of a fruit |
| 23. Heroic tales | 58. __ Spumante (Italian wine) |
| 24. Soviet Socialist Republic | 59. Misfortunes |
| 25. "Star Trek" villain | 60. Negative |
| | 62. Camper |

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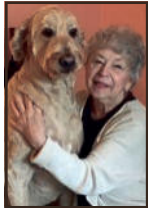
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A look at the two faces of perfectionism



BY IRENE MARINELLI
for The Dominion Post

"Have no fear of perfection you'll never reach it!"
~ Salvador Dali

I have been labeled a perfectionist by my husband, more than once and probably not in a complimentary way. I must admit living with a perfectionist might not be fun. It could turn out to be a two-edged sword, and the sharp edge of the sword would certainly cut deeply if the perfectionist also insisted on perfection in others. In the interest of better understanding myself and the people with whom I live, I decided to delve a little deeper into what actually defines a perfectionist.

Perfectionism is defined by psychology as a personality style, not a psychological disorder. The first, and probably most interesting, little gold nugget of knowledge I dug up was the idea that perfectionism contains both healthy and unhealthy components. Certainly it can be self-motivating, rewarding. It can lead to completing tasks and reaching goals. That's the good guy, the one psychologists have named Adaptive

perfectionism or Positive perfectionism. The bad guy, the one they've named Maladaptive perfectionism, can take us down into a cave of dark passages that lead nowhere. This perfectionism leads us to expect perfect performance, to focus on failure instead of success, to be over-concerned about what others think of us.

It would seem probable that maladaptive perfectionists stick with a problem almost forever, no matter how unsolvable it seems. Results of an interesting study (Hill and Curran 2016) showed quite the opposite. According to this research, "They (maladaptive perfectionists) give up more easily when things can't be perfect."

So how does this apply to those of us who are growing older? Are we becoming more relaxed in our attitudes toward ourselves, our goals, our daily living? Or are we slowly sliding into that maelstrom of perfectionism? Raising young children who needed attention and care probably didn't leave many of us much time or energy to think about setting higher goals, perfecting our surroundings and our lives. I remember when all five of mine were still growing up, getting a good night's sleep seemed a lofty goal. Add a daily

outside job to that mix and perfection seemed as far removed as the moon.

Eventually, all five of the children grew up, leaving Rob and myself alone in the house. Then retirement came along, with that most precious of all gifts: time. That's when I looked around and decided to set some long-term and short-term goals. Being married to someone who does not embrace change, it took some time and lots of conversations (that often turned into confrontations) to finally make changes that mostly met those early goals. Was I being a perfectionist? Possibly. But I hope the healthy components of perfectionism took top place.

After all, perfection is an illusion that can never be reached. Striving for excellence is an entirely different road to travel. Excellence is attainable, while perfection is not. One can, for instance be

an excellent musician, but still make mistakes at times. An excellent cook can ruin a dish now and then. We all want to avoid failure but the way we handle our small and large mistakes and failures can lead us either to Positive perfectionism or Maladaptive perfectionism.

Setting realistic expectations is part of accomplishment in any area. Setting realistic expectations of excellence for ourselves can work well. Setting them for others can be frustrating at best and, for our relationships, it can be downright dangerous with sad results. Striving for balance between perfection and progress, I try to remember the wise and simple words of Alfred Adler: "Have the courage to be imperfect"

Irene Marinelli writes a regular column for Senior Post. Contact her at columns@dominionpost.com.

Senior emergency assistance

If you are a senior and find yourself in need of emergency assistance, the following is a list of locations where heating, food, pet food, and other emergency help can be obtained.

Catholic Charities
827 Fairmont Road, Suite 203
Westover | 304-292-6597

Christian Help, Inc.
219 Walnut St., Morgantown
304-291-0221

DHHR
Monongalia County
114 S. High St., Morgantown
304-285-3175
Preston County
18351 Veterans Memorial Hwy.
Kingwood | 304-329-4340

North Central West Virginia Community Action
Marion County
215 Scott Place, Fairmont
304-363-4367
Preston County
428 Morgantown St., Kingwood
304-363-2170

Salvation Army
Monongalia County
1264 University Ave., Morgantown
304-296-3525
Preston County
124 Morgan St., Kingwood
304-329-1245

Catholic Community Charities
Preston County
304-329-3644

The Raymond Wolfe Center is the only food pantry in Preston County that has specialized diet foods (diabetic, salt free, etc.). It also has some pet food available. Call to check availability.

The Connecting Link
235 High St., Morgantown
304-296-3300

The following locations are for Preston County residents only.

Wesley United Methodist Church
304-329-0707

St. Vincent DePaul Helpline
304-329-6229

Heat for Preston
(January - March only)
304-329-2316

Terra Alta Council of Churches
(Terra Alta residents only)
304-789-2509

PUZZLE SOLUTION



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Appointments: Call 855-WVU-CARE

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