



# **Special Needs Planning Guide for Families**

**Second Edition**

*Written By*

Patricia Freedman, Esq.

Ilana Gordon-Brown

Cynthia R. Haddad, CFP®

Harry S. Margolis, Esq.

John W. Nadworny, CFP®

Theresa M. Varnet, LCSW, Esq.

Gary Zalkin, Esq., LICSW

# **T**able of Contents



## **Introduction**

### **Chapter 1**

#### **Timeline Summary**

*By Cynthia R. Haddad, CFP® and John W. Nadworny, CFP®  
Bay Financial Associates LLC*

### **Chapter 2**

#### **Introduction to Government Benefits**

*By Theresa M. Varnet, LCSW, Esq.  
Fletcher, Tilton & Whipple, PC*

### **Chapter 3**

#### **How Work Affects SSI, SSDI, and CDB ELIGIBILITY**

*By Theresa M. Varnet, LCSW, Esq.  
Fletcher, Tilton & Whipple, PC*

### **Chapter 4**

#### **Guardianship**

*By Gary Zalkin, Esq., LICSW*

### **Chapter 5**

#### **Financial Planning**

*By Cynthia R. Haddad, CFP® and John W. Nadworny, CFP®  
Bay Financial Associates LLC*

### **Chapter 6**

#### **Estate Planning and Supplemental Needs Trusts**

*By Harry S. Margolis, Esq.  
Margolis & Bloom*

### **Chapter 7**

#### **Life Care Plans**

*By Pat Freedman, Esq.  
PLAN of Massachusetts, Inc.*

## **Resource List**

## **Glossary**

## **About the Contributors**

## **Sponsors**

# Introduction

Special Needs Planning is a complicated process that many families find overwhelming. It necessitates thinking about serious and difficult questions such as, “What will happen to my son or daughter with a disability after I am gone?” Furthermore, many families don’t know where or how to begin or where to go for assistance. And though it isn’t easy to think about future planning and all the questions that this process raises, the longer these types of plans are put off, the fewer choices families’ have and the more difficult planning becomes. So while there never seems to be a good time to begin, the sooner families begin, the better.

This booklet is meant to help families take the important first steps towards planning for the future. It is an overview to help families start to think about the process - the timelines to keep in mind, the people to consult, and the questions to ask. The hope is that this booklet will provide an outline of the process and perhaps even make special needs planning more manageable. By no means is this intended to be a comprehensive guide. And because each family’s situation is different, families should seek professional help along the way to ensure that the plans made are the best fit for each family’s unique situation and needs.

Much of the information in this booklet applies to families regardless of where they live. Some of the information however, is specific to Massachusetts so please check with agencies in your area about different laws, regulations, or resources in your area.

# C hapter 1: Timeline Summary

*By Cynthia R. Haddad, CFP®*

*John W. Nadworny, CFP®*

*Bay Financial Associates LLC*

---

What makes planning particularly challenging for a family that has a member with a disability is the need to provide for two generations; the parents' own financial security (including all children and sometimes extended family members) and the child's lifetime needs, beyond the death of the parents. It is also important to plan for your child's changing needs both physically and financially as he ages.

Depending upon the age of your child, there are certain stages where changes need to be considered and action steps taken. We call these planning pressure points and encourage families to be mindful of these particular milestones in their child's life. Although there are other times that changes may need to occur unexpectedly due to death, disability, divorce, or even bankruptcy of a parent or other family member, the following pressure points are critical to develop your planning strategies.

This summary is intended to provide a general guideline for families of the common issues to consider rather than a complete textbook. Since every family situation is different, we encourage you to seek professional advice from knowledgeable and qualified financial, legal, and tax advisors who are well versed in the issues of special needs planning and disability law.

## Birth to Age 3

The primary focus at this stage is simply gaining a better understanding of your child's diagnosis and beginning the journey towards a whole new world. Early Intervention programs and Individual Education Plans (IEPs) are paramount as you advocate for your child. Additional planning considerations should be:

- Carefully review your financial and estate plans. If you have not yet made any plans, you should try to make it a priority and make an appointment with a qualified financial planner and disability law attorney. Consider comprehensive planning to include educational needs for other children and your own retirement goals and objectives. At this stage, having a base plan is a good place to start.
- Attend a workshop(s) on financial and estate planning offered by a local agency.
- It is also a good idea to become acquainted with the services of these agencies that may provide care and support to your family either now or in the future.
- Review beneficiary designations on life insurance policies, retirement plans, and annuities (including those provided by your employer). Change those that indicate a designation to "children equally." You do not want to inadvertently leave a direct inheritance to your child with a disability.
- Do not establish savings or investment accounts in your child's name. These include custodial accounts of UGMAs or UTMA's, and 529 college savings plans.
- Purchase permanent life insurance on one or both parents in addition to term insurance, or group term insurance.
- Establish a Supplemental Needs Trust (or Special Needs Trust). For more information, see the chapter on Estate Planning.

- Name a Guardian for your child(ren) in the event of your premature death or disability. Even if you are not completely certain if this person will be the best guardian for your child's lifetime, it is often best to name someone rather than not have a plan in place. Otherwise it will be up to the court to decide on the guardian upon your death.
- If other family members wish to provide financial assistance to your child, insist that they consult with you and/or your advisors first.
- Begin a Letter of Intent or Future Care Plan for your child's future caregivers. See the Life Care Plans chapter for more information.

## Age 15

If you have not already done so, this is the transitional stage where comprehensive future planning should absolutely begin. Your child's abilities are identified, and perhaps her needs for future care both residentially and vocationally are expressed. In addition to the above, key planning considerations at this stage are:

- Review any savings and investments in your child's name and/or social security number. If they are in excess of \$2,000, you may need to explore other options to hold or spend these assets prior to applying for Supplemental Security Income (SSI). If so, you should contact a qualified financial planner and disability law attorney to explore options.
- Include in your child's IEP provisions for developing life skills and vocational skills. You should discuss a Transition Plan under Massachusetts PL Chapter 688. The Federation for Children with Special Needs is a good resource for information on Transition Planning.
- Establish contact with the state Department of Mental Retardation (DMR) and/or the Department of Mental Health (DMH) if you have not already done so.
- Begin the exploration of residential and vocational programs available.

- Learn about Government Benefits available to your child. See the chapter on Government Benefits for more information.

## Age 18

Although there are many opportunities for higher education at this stage to still consider, unlike the “typically developing child,” high school graduation and college placement is not the primary focus at this age. This is a key age to be aware of various legal and financial issues—and to take action as needed. In addition to the above, key planning considerations at this stage are:

- Your child has reached the legal age of majority and is no longer a minor in your care. You need to consider Guardianship, which is granted by a court. However, not every child with a disability requires a Guardianship. Therefore you need to consider less restrictive alternatives to Guardianship prior to making this decision. See the chapter on Guardianship.
- Your child may be eligible for special Government Benefits such as Supplemental Security Income (SSI) and/or entitled to Social Security Disability Income (SSDI). See the chapter on Government Benefits for more information.
- Begin discussions with agencies that provide residential and vocational programs. Determine if funding is available from public programs and/or if you will be able to contribute your own private resources, or a combination of both to provide a desired residential setting.
- If at all possible, engage your child in these decisions and include his vision in your plans. If other children will be involved, it is a good idea to include them in these decisions when appropriate.

## Age 22

In the State of Massachusetts, turning age 22 is a significant milestone—certainly one to be celebrated. However, this age also ends the services provided through the Massachusetts Department of Education (DOE) and begins adult services where there are no mandated entitlements. This can often cause a number of concerns for families. In addition to the above, key planning considerations at this stage are:

- Continue your working relationship with the state agency that will help to provide residential and/or vocational services to your child. You will typically be assigned a “service coordinator” to assist you in developing an Individual Service Plan (ISP) for your child if she qualifies for services.
- Residential options need to be determined. If not immediately, alternatives should at least be considered for the future.
- Employment and day programs need to be arranged.
- Transportation to and from work or day programs must be arranged.
- Social and recreation networks may need to be re-established.
- Your estate plan should be updated for guardianships and other changes within your personal and marital status.
- Your financial plan should be updated to include future cash flow needs both during your lifetime and upon your death.

## Retirement

This planning point is yet another milestone to be celebrated. Unlike the previous milestones, which belonged to your child, this is yours to celebrate. In addition to your own retirement planning needs, and in addition to the previously mentioned considerations, you should also incorporate the following:

- When you begin receiving Social Security Benefits, you should contact your local Social Security office to determine if your child is entitled to benefits under your contribution history. Again, see the chapter on Government Benefits for more information.
- If your former employer provides a health insurance plan for retirees, make certain to inquire of your dependent child's eligibility. This is in addition to Medicare and/or your child's MassHealth/CommonHealth benefits.
- Consider your child's supplemental cash flow needs when determining your retirement income needs. If a pension option can include a survivor benefit to your child, you need to consider his eligibility for Government Benefits and its impact on them.
- Update the beneficiary designations of your retirement plans, life insurance policies, and annuities.
- If your estate is at risk in the event that you and/or your spouse require long-term care assistance, explore the option of purchasing long-term care insurance. You need to be healthy to qualify, and you need to have money available to pay the annual premiums.

## Death of Parent

Much has been discussed on this topic—Who will care for them after I am gone? Many organizations and agencies have developed programs to assist and to carry on the vision of the parents. Organizations such as the Plan of Massachusetts Trust, Inc. and Jewish Family & Children's Service have developed Trustee services and Pooled Trusts

for individuals who need to have a not-for-profit agency involved to protect eligibility for Government benefits in the event of a distribution, inheritance, legal settlement, or windfall to the individual with a disability. These are also good alternatives to corporate trustees who can work together with a family member to serve as a personal trustee.

Some key points to consider in this estate planning stage, in addition to the above are:

- Make certain that your wills and trusts are properly executed.
- Review your documents and assets with a qualified financial planner and disability law attorney.
- Coordinate the ownership of assets and beneficiary designations of your retirement plans, life insurance policies, and annuities with your estate plan.
- Communicate to your other children, or future caretakers, of your plans and their role that you wish them to carry on. This is not a time to leave surprises.
- Make certain that you do not leave a “financial burden” to siblings or future caretakers—an equally distributed estate may not be a fair distribution to all.
- If life insurance is needed to provide for the supplemental needs of your child, make sure that it is properly in place (i.e., ownership and beneficiary designations are coordinated) and premiums are adequately funded.
- Review your Letter of Intent with current information for those you wish to carry on as guardian, caretaker, trustee or advocate.

Have peace of mind knowing that you have done all that you can for your child and her future caretakers.

# C hapter 2: Introduction to Government Benefits

*By Theresa M. Varnet, LCSW, Esq.  
Fletcher, Tilton & Whipple, P.C.*

---

Today's cost of residential support, rehabilitation and vocational programs are increasing at such a rate that it is seldom possible for the average family to leave sufficient funds to care for a family member with a disability's lifetime care. For most families with a family member with a disability, one of the primary goals of estate planning is to assure that the family member with a disability remains qualified for the available federal and state benefit programs. Social Security Disability Income (SSDI), Medicare, Supplemental Security Income (SSI), Medicaid, and other needs based and sliding scale fee benefits are critical and often more valuable to the individual than an inheritance he receives from an improperly drafted estate plan. A properly drafted estate plan for a family with a member who is disabled will preserve eligibility for these critically needed benefits while preserving her inheritance in a manner which will enhance the quality of her life and provide funds to pay for those goods and services that are not available through governmental programs. Attorneys advising families with a member who is disabled must be knowledgeable about local, state, and federal government benefits and their respective eligibility criteria.

Government benefits generally fall within one of four categories:

- Pension and insurance type benefits
- Welfare and needs based programs
- Sliding scale fee programs
- Entitlement benefits

What follows is a brief explanation of each of the four major categories of benefits along with some common examples of each.

## **Pension or Insurance Type Benefits**

There are two ways to qualify for pension type benefits. Either a person can receive pension type benefits from his own work record, or, if he qualifies as a Disabled Adult Child (DAC), he can receive pension benefits from the retired or deceased parent's work record. These benefits are referred to as Childhood Disability Benefits (CDB).

If an individual is disabled and incapable of substantial gainful activity, she may be eligible for Social Security Disability Income (SSDI). The ability to earn \$940 per month or more (for 2008) from independent employment or activity is generally considered to be substantial gainful activity by the Social Security Administration. The term "disability" is defined in the Social Security regulations as the "inability to do any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than twelve months." In addition to being disabled, an individual applying for SSDI must have worked and paid into Social Security for a minimum number of work quarters. The minimum number of quarters will vary according to a person's age and the number of hours per week he worked prior to becoming disabled.

If a person has paid into Social Security and has a child who is disabled, the child may also be eligible for SSDI benefits if the child was disabled prior to the age of 22, the child is incapable of gainful activity, the child is single, and if the parent subsequently dies, retires, or becomes disabled. The child with a disability is eligible as a Disabled Adult Child (DAC). If the disabled adult child is determined to be eligible as a DAC, she will be eligible for Medicare two years following the date SSA determines he is eligible for SSDI.

## **Welfare or Needs Based Programs**

There are a number of programs available for persons who are poor and/or disabled. The two that are most critical to persons with disabilities are Medicaid (also known as MassHealth or CommonHealth) and SSI. The income test for applying for these programs is based on the

federal poverty level, which is updated on a yearly basis. These two programs provide persons with disabilities with a broad range of support services, which makes it possible for persons with severe disabilities to live in the community and to avoid nursing home or institutional care. For example, Medicaid pays for prescription drug services, acute health care, a personal care attendant, respite services, rehabilitation therapies, and assistive technology devices.

Medicaid and the SSI programs deem earned income differently than unearned income. Estate planners must be careful when drafting trusts so that the income of the trust is not distributed directly to the beneficiary of the trust if the beneficiary relies on SSI or on Medicaid to provide him with needed services. Even discretionary trusts that allow the trustee to distribute “spending money” directly to the beneficiary could jeopardize one’s eligibility for SSI and Medicaid. Unearned income in excess of \$20 per month will result in a dollar for dollar loss in SSI.

In addition to the income requirements, the disabled family member must also meet SSI and Medicaid’s asset limit requirements. SSI sets that amount at \$2,000 for an individual and \$3,000 for a couple. However, some assets an individual owns are not deemed or counted in establishing this number. For instance, neither a home that the disabled individual lives in, nor a car used to transport the disabled individual to work or medical treatment count toward the asset limit, regardless of their value.

## Sliding Scale Fee Based Programs

The third type of programs that attorneys need to be familiar with are the “fee for service” programs or so called “sliding scale fee” programs. These include outpatient psychiatric centers, vocational rehabilitation services, community outpatient services, food stamps, and housing subsidies. Fees are based upon an individual’s ability to pay and are charged to the parent of a minor child or to the adult who is receiving the services.

Maintaining eligibility for sliding scale fee services has been of relatively less importance since Massachusetts,

like many other states, increased its use of the Title XIX waiver program. The waiver program allows a state to allocate a portion of its federal Medicaid dollars to community based services. Congress passed the Home and Community Based Services Waiver (PL97-35) in 1981, and since that time, Massachusetts has increasingly utilized the waiver program. This has meant that many of the services that were previously only available on a sliding scale fee basis are now provided without assessing a person's ability to pay if she is eligible for Medicaid. If for some reason, an individual is not eligible for Medicaid he may be able to obtain some, but not all, of the services provided by Medicaid for a fee determined by his ability to pay. The Title XIX waiver program has made it more critical than ever that a person with disabilities retain their eligibility for Medicaid.

## Entitlement Benefits

All children between the ages of 3 - 22 are eligible for free special education services. Schools are required to screen all students for potential special needs. In addition, parents, teachers, and concerned others may refer a child for screening if one suspects that a child has a special need. If a child is identified as having a special need, the school is required to evaluate her on an annual basis. At this annual review, the school is also required to develop an Individual Education Plan, which maps out the type and amount of special education services the child will receive during the school year.

There are no special estate planning issues involved if the only benefit the family member requires is special education services. If no other government benefits are required beyond high school then families may not need to be concerned with special estate planning techniques other than those utilized for non-disabled children. However, the mere mention that a child is in special education should trigger the discussion of a special needs trust and whether or not the family should utilize a discretionary, supplemental needs, spendthrift trust as an interim plan. If the child graduates from high school and moves on to being independent and self-supporting, the parent

can always change his estate plan to provide a direct inheritance at a later time if a direct inheritance is appropriate. A family with a child in special education should discuss the possible use of a discretionary supplemental needs spendthrift trust if there is a possibility that a child may need any of the above-referenced governmental benefits. A trust should also be considered if there is a question regarding the ability of the special needs child to handle a large sum of money even if the child does not qualify for governmental benefits.

# C

## hapter 3: How Work Affects SSI, SSDI, and CDB Eligibility

*By Theresa M. Varnet, LCSW, Esq.  
Fletcher, Tilton & Whipple, P.C.*

---

Chapter 2 of this guide provides a general overview of the four basic types of government benefits. Income and resources are critical in determining continuing eligibility for most benefits. This chapter will focus specifically on three types of cash benefit programs: Supplemental Security Income (SSI), Social Security Disability Income (SSDI) and Childhood Disability Benefits (CDB) also known as Disabled Adult Child (DAC) benefits.

SSI, SSDI and CDB provide cash income to persons who are disabled and incapable of Substantial Gainful Activity (SGA). As of 2008, SGA is defined as the ability to earn \$940 or more per month in earned income. For persons who are blind, SGA is \$1,570 per month. The reason for the difference between the two levels of SGA is because SGA for persons who are blind was indexed to inflation in 1974. The SGA level for persons who have other disabilities was not indexed for inflation until 2000. Effective Jan. 1, 2000, SGA was increased from \$500 per month to \$700 per month and indexed for inflation moving forward. From 1/1/2000 to 1/1/2008 it has increased from \$700 per month to \$940 per month.

It is important to note that a person with a disability (other than blindness) has to be more disabled today to collect SSI, SSDI or CDB than in 1974 because the SGA level has not kept up with inflation. The SGA was \$300 in 1974 when SSI was first introduced. For persons who are blind, SGA was indexed from day one of SSI and is now \$1570 per month. Because the SGA for all other disabilities was not indexed for inflation until 2000, the SGA for other disabilities does not have the same "buying power" than the SGA for the blind. In other words, a person with a cognitive or physical disability is not able to earn as much as he could in 1974 when you calculate inflation

costs into the SGA of \$940 per month. Earned income is treated differently by SSA when determining eligibility or continued eligibility for SSI, SSDI and CDB.

## SSI Treatment of Income

SSI requires that in order to be eligible for SSI a person must have a medically determinable disability which has lasted a year, is expected to last a year or end in death before the end of a year. The person with a disability must have limited resources and must also be incapable of SGA. That means she cannot be earning or be determined to have the capacity to earn more than \$940 per month when she initially applies for SSI.

*The following is a list of resources that a person is allowed to own and still be eligible for SSI:*

- Cash resources up to a maximum of \$2,000
- Life insurance with a face value of up to \$1,500
- Burial plots for self and immediate family
- Burial funds up to \$1,500 for SSI recipient and spouse
- One car
- Furniture and household goods of 'reasonable value'
- A home, regardless of its value, if the person lives in the home

*SSI also does not count the following income in determining SSI eligibility:*

- The first \$20 per month of most income earned from any source
- The first \$65 of most earned income and half of any earned income in excess of \$65.
- Food stamps
- Home energy assistance
- Food or shelter from certain non profit organizations approved by SSA

Once an individual has been found eligible for SSI, eligibility may be reviewed every one to three years. Even if SSI later determines that an individual's disabling condition may not improve over time, his case will be reviewed every 5 years to be certain he still meets the eligibility criteria.

Once a person is receiving SSI, SSA wants to encourage her to work her way off the program so they deem earned income differently than they do unearned income. Unearned income in excess of the first \$20 is deducted dollar for dollar from one's SSI monthly check (federal SSI level for 2008 is \$637 per month).

The following is an example of the effect of working on SSI. In this example the individual is earning \$1,000 per month in earned income

**1<sup>st</sup> STEP:**

Work earnings:	\$1000
Earned and unearned income exemption	\$ - 85
Remaining	\$915
divide by 2	
Total Countable earnings:	\$ 407.50

**2<sup>nd</sup> STEP:**

SSI Benefit:	\$637
Total Countable earnings	- \$407.50
Adjusted SSI payment	\$ 229.50

**3<sup>rd</sup> STEP:**

Adjusted SSI Payment	\$229.50
Earned Income	\$1000
<i>Total Monthly Income</i>	<i>\$1229.50</i>

You can maximize the amount of money you receive under SSI if you are familiar with deductions allowed for "Impairment Related Work Expenses" (IRWE's). IRWE's will be discussed below.

## Social Security Disability Income Treatment of Income

As previously stated, in addition to being disabled, an individual applying for SSDI must have worked and paid into social security the requisite number of quarters, sometimes referred to as Quarters of Coverage (QC's). The requisite number of quarters is determined by the number of years a person has worked and his age when he was first determined to be disabled. As with SSI, the disability must be a medically determinable mental or physical disability that has lasted a year or is anticipated to last a year which prevents her from earning SGA. If he meets these requirements, he will be eligible for SSDI based on his own work record. The amount of SSDI she receives will vary depending on the rate of pay and number of QC's paid into SSA.

SSDI has different rules regarding the treatment of earned and unearned income. For example, unearned income does not affect SSDI as it does SSI. There is also no reduction in SSDI for every dollar earned in excess of the \$65 earned income set aside as there is with SSI. If a person earns \$900 per month, he will be able to keep the entire \$900 of earned income and his entire SSDI check. As long as the individual is incapable of earning more than the \$940, she will keep her full SSDI payment as well as her earnings. An individual could also earn over the \$940 but only for a time period referred to as a Trial work Period (TWP). If after what is referred to as a Trial Work Period (TWP), he continues to earn more than the \$940, he may lose his SSDI.

For instance in the example above, the \$1000 per month of work earnings resulted in a decrease of the individual's SSI to \$229.50. With SSDI, the individual will lose her entire SSDI if she is capable of SGA beyond the TWP. The SSI deeming rules are somewhat kinder if a person is earning in excess of the \$940. Generally speaking the SSDI rules are more black and white when it comes to earned income. This creates a potential trap for the unwary if one's adult child would otherwise qualify as a DAC under the Childhood Disability Benefit program. This potential 'trap' will be discussed below.

The distinction between the SSI earned income deeming rules and SSDI and CDB (which will be discussed below) is very important as income in excess of \$940 may result in the complete loss of SSDI and/or CDB. As demonstrated in the above example, income in excess of \$940 may not result in a complete loss of SSI. It is important to remember that while the SSDI deeming rules of earned income are in the recipient's favor if he is earning less than SGA (\$940), any income in excess of the \$940 may result in a total loss of SSDI.

## New SSDI Work Incentive Rules

There are new rules that affect a person's ability to work if she is receiving SSDI. Persons receiving SSDI can attempt to return to work while still retaining their full monthly SSDI payment and Medicare by using what is called a Trial Work Period (TWP). The TWP allows a person to earn in excess of SGA for a period of 9 months in a 5 year period. The months do not have to be consecutive months.

During the TWP, a person can test their ability to maintain employment without fear of losing his SSDI. A person receiving SSDI under his own work record may still qualify for SSDI cash benefits for a 3 year period of time beyond the TWP referred to as Extended Period of Eligibility (EPE). EPE basically gives a worker who is disabled a grace period of three years beyond her trial work experience to determine if she is capable of gainful activity. If during the EPE, the individual earns less than SGA, he will receive a SSDI check for the month(s) he earned less than SGA. If a person's earnings stay above the SGA during the three year grace period, when the grace period ends, her benefits will terminate.

An individual receiving SSDI benefits under his own work record can qualify for SSDI benefits even after EPE has expired under what is referred to as Expedited Reinstatement (EXR). If the worker is incapable of continuing to work, she can reapply for SSDI and receive an expedited decision as to whether or not she re-qualifies for SSDI. The individual may even be eligible for six months of provisional benefits while he is waiting for a decision. The new rules take away many of the

disincentives of trying to become gainfully active for persons receiving SSDI under their own work records. Prior to these rules, if a person tried to work and was successful for 9 months but then failed one month later, she lost her SSDI and Medicare and would have to start the application period completely over resulting in a year or more without any cash benefits or Medicare.

The following is an example of how a person receiving SSDI and earning in excess of SGA is affected by her earned income:

SSDI benefit	\$ 700 per month
Earned Income	\$1,000 per month
Total Income	\$1,700 per month

Monthly income after TWP and grace period for EPD

SSDI benefit	\$0
Earned Income	\$1,000
Total Income	\$1,000

If the individual falls below the SGA level within 5 years of losing his benefits, he will be able to file for expedited reinstatement of benefits and will not have to wait months for his benefits to start again.

However, there is a way that the person earning \$1,000 per month may still be able to reduce her countable income and remain eligible for her full SSDI check and her earnings.

If the worker is paying for any good or service that enables him to work, this cost may qualify as an Impairment Related Work Expense (IRWE). In order to qualify as an IRWE, the item or service must be something that the person needs in order to work. In addition, the worker needs to pay for those expenses himself. Examples of IRWE's are as follows:

- Attendant care services
- Transportation costs that are impairment related
- Medical devices
- Prosthesis
- Work related equipment or services such as:

typing aids, page turning devices, telecommunications devices for the deaf, seeing eye dog, medical supplies such as elastic stockings, catheters, incontinence pads.

In the above example if the person were earning \$1,000 per month but had an impairment related expense of \$200 per month, she would still be considered earning less than SGA. Remember that the worker must pay the IRWE himself. If it is paid by her parent or special needs trust, it will not qualify for the IRWE deduction from earned income.

**Example:**

Earned income	\$1,000
IRWE	\$200

Countable income    \$ 800 (\$140 less than SGA)

In this example, the worker would continue to receive his full SSDI payment and his earnings minus the cost of IRWEs.

**CDB/DAC Benefits**

While there are a number of similarities among SSDI and CDB/DAC benefits, there is one major difference which places the DAC at risk of losing her eligibility for CDB under her disabled, retired or deceased parent's work records. As stated above, in order to receive CDB, a DAC must be disabled prior to 22, single, and be 'continuously disabled' since turning 22. SSA defines "continuously disabled" as incapable of earning in excess of SGA (\$940 for 2008) per month. If a DAC tries to work and earns in excess of the SGA amount for more than 9 months in a 5 year period, she is presumed capable of SGA and therefore loses her DAC status. In most cases, this loss is irrevocable.

Family members, who believe with the proper supports, their family member is employable, must become familiar with the risks taken when the DAC earns in excess of SGA.

The family or representative payee needs to be vigilant about reporting to SSA all supports the individual is receiving that enables her to work. The individual must pay for his own impairment related work expenses out of his SSA or earned income.

Documenting an IRWE may enable an individual to work and still retain her eligibility for DAC benefits. The cost of IRWE's result in a dollar for dollar deduction from the individual's SGA countable earnings. In order to qualify for the deduction, the individual with a disability must pay the cost of the IRWE himself from his earnings or SSA benefits. If the parent or trustee of a special needs trust pays for the IRWE, the expense will not qualify as a deduction from the SGA level of earnings. A person with \$200 per month of IRWEs can earn \$200 over the SGA amount and still qualify for both SSDI and CDB.

Another issue parents and representative payees need to be aware of is the need to notify SSA when the individual is employed by a benevolent employer who may accept a lower level of work performance than would otherwise be accepted. Examples of benevolent employers would be a family friend or relative who hires the individual as a kind deed or favor to the parent. Reporting a benevolent employer to SSA may assist in winning an appeal should the individual exceed the SGA amounts and lose her SSDI or CDB as a result.

Under CDB, the disabled adult child need not have worked. If the parent has worked and paid into SSA for the requisite number of quarters and if the parent then retires, dies or becomes disabled, the worker's disabled adult child may be eligible for cash benefits based on the parent's SSA work record. While the parent who worked and paid into SSA is disabled or retired, the DAC will receive 50% of what the parent receives. When the parent worker dies, the DAC will receive 75% of the parent's Social Security retirement funds. It is important to note, the parent receives his full check and the DAC receives an additional check equivalent to approximately 50 or 75% of the parent's check.

In order to qualify as a DAC and be eligible for CDB, a child must have been disabled prior to age 22, continuously incapable of gainful employment, single (or married to another DAC) and the parent must have become disabled,

retired or died.

While there are a number of similarities between the SSDI and CDB, there is a major difference between the two that advocates and family members need to know.

SSA offers several new programs to encourage individuals with disabilities to attempt to work. They created a Trial work Period (TWP) where a person can work and earn in excess of SGA for 9 months in a 5 year period without suffering a loss or reduction in their SSDI. The TWP is a period of any 9 months in which the individual earns over SGA. It is not necessarily 9 consecutive months. If an individual earns in excess of SGA in any 9 months in a 5 year period, she will be presumed capable of gainful activity. Under the old SSA rules, if an individual tried employment and was successful by SSA's standards (i.e. any 9 months in a 5 year period), but later fails to be able to maintain this employment, he risked losing his SSDI and was forced to reapply. Reapplication meant, in some cases, an extended period of time with no income. There was an appeal process but it was very difficult to overcome the presumption of SGA once one has earned in excess of SGA for 9 months in a 5 year period.

The significant difference between continued eligibility for SSDI and for CDB is that under the former, if the person is unable to maintain her employment, she has a grace period of several years in which she can requalify for SSDI. With Childhood Disability Benefits, the individual may irrevocably lose his benefits as a DAC if he is successful in employment beyond the trial work period but later fails. For this reason parents and advocates need to be sure that the individual who is receiving DAC benefits is truly capable of gainful activity on a long term basis. If she later fails, she will be able to collect SSDI benefits under her own work record but may not be able to receive the higher level of benefits she was previously eligible for as a DAC under her parent's work record. Such a difference in monthly cash benefits may make a significant difference in the quality of the DAC's life over the course of his lifetime. This distinction between the CDB and SSDI benefits is significant and may cause a DAC to unintentionally lose her status as a DAC. It is an unintended trap for many persons who but for working for a brief time would

# C

## hapter 4: Guardianship

*By Gary Zalkin, Esq., LICSW*

---

otherwise qualify as DACs under the parent's work record. Parents of children with special needs have legal authority to make important decisions on their children's behalf as their natural guardians. However, parents lose their legal authority when their children become adults at age 18. Should the adult children have difficulty making medical, personal or financial decisions, parents and other loved ones may wish to ask the probate court to appoint them as their children's guardian.

Guardianship can provide a family member with the legal authority to make decisions on a loved one's behalf. The court may appoint a guardian when it finds that an individual does not have the capacity to make competent decisions, and that one, or more, people should be appointed to protect that individual's interests. Keep in mind that there are other, less restrictive options you may wish to consider before pursuing guardianship.

Guardianship provides the authority to make decisions in two major areas: financial and personal. Depending upon its scope, guardianship can take away the individual's own legal rights to contract, vote or make health care and legal decisions. It can involve the probate court in ways that may seem cumbersome and bureaucratic, not to mention expensive. Therefore, parents should always consider other alternatives before pursuing guardianship.

### Financial Alternatives to Guardianship

As discussed elsewhere in this booklet, individuals may protect their own assets through careful trust and estate planning. However, it can be more challenging to protect the financial interests of an adult child. Potential options for parents to consider include requesting their appointment as representative payee of the recipient of social security funds, establish joint accounts or being appointed as durable power of attorney.

**Change Recipient of Social Security Funds** - If an adult child receives funds from the Social Security Administration a loved one can request to be appointed as the representative payee (rep payee). A rep payee is a person who receives the Social Security funds of another and who may only use the funds on behalf of the beneficiary. Family members or concerned friends can fill out a simple form (found at <http://www.ssa.gov/online/ssa-11.pdf>) to request appointment. It is important to keep in mind that the beneficiary cannot reverse the appointment of a rep payee; only the Social Security Administration can make such a change. The rep payee must report annually to the Social Security Administration on the use of the funds, but the process is relatively simple.

**Create Joint Accounts** - Re-titling bank accounts so they are held jointly by a parent and adult child can be an efficient option for a child who has difficulty paying bills on time but is not at risk of misusing his funds. A joint owner can keep track of funds in the account and pay bills as they become due. However, this option may not be appropriate for individuals who are at risk of making unwise, impulsive purchases or are at risk of being taken advantage of by others because either joint owner can remove all the funds and close the account at any time.

**Appoint Durable Power of Attorney** - A durable power of attorney (DPA) can allow parents or other loved ones to make financial decisions on behalf of an adult child. It can be a powerful tool for adult children who have difficulty managing their personal funds, understand the impact of appointing another person to make their financial decisions, and would like some extra help. Some DPA's, known as "springing", take effect only when the individual loses the capacity to make financial decisions. Other DPA's take effect immediately, and allow both the individual and the agent to make decisions. A DPA may not be appropriate for everyone for the same reasons that a joint account may not be helpful; a DPA is very easy to revoke and the use of a DPA does not prevent the individual from making unwise decisions.

## Medical Alternatives to Guardianship

It can be challenging to assure that a disabled adult child receives appropriate medical care. The one helpful alternative to guardianship with medical authority is the use of a health care proxy.

**Health Care Proxy** - A health care proxy is a legal document that allows a competent adult to appoint someone else to make medical decisions in the future if she is no longer able to make, or communicate, medical decisions. Massachusetts law allows a probate court to enforce health care proxies so that families concerned for their loved ones can seek appropriate mental health treatment if the individual is unable to make reasoned medical decisions, even if the individual has changed his mind and no longer wants treatment. Health care proxies can be very helpful for making medical decisions, but they only apply to medical issues. Health care proxies do not allow parents to advocate for their children with regard to housing issues and they may not be helpful with state agencies, such as the Department of Mental Health or Department of Mental Retardation.

## Guardianship

Guardianship may be necessary if the less restrictive alternatives described above are not feasible or helpful enough. As noted earlier, guardianship provides parents or other loved ones with the legal authority to make decisions on behalf of their adult children, called a “ward.” Guardians may be appointed by the court if an individual cannot make competent decisions due to mental illness, mental retardation or physical incapacity.

With the exception of the seldom-used spendthrift guardianship, the court requires a document from a medical provider indicating that guardianship is required. Families sometimes face difficulty if the individual has not visited a doctor in some time or if the doctor does not support the guardianship. However, in extreme cases the court can direct an individual to meet with a physician, and parents may wish to pursue a second opinion as necessary.

**Permanent Guardianship** - A guardian appointed to act on behalf of a ward retains her authority indefinitely unless the court discharges the guardianship. Although the guardianship itself is permanent, if the guardian has an added authority called Rogers authority, discussed below, the court will need to review the matter every year or so. The court will usually not schedule a hearing to decide whether a guardian ought to be appointed until about six to eight weeks after the petition is filed. Therefore, families may wish to keep pursuing a temporary guardianship if an emergency exists that requires the immediate appointment of a guardian.

**Temporary Guardianship** - The court will hear a request for temporary guardianship much sooner than it would hear a request for permanent guardianship. However, a temporary guardianship only lasts for 90 days. The temporary guardianship may be renewed for an additional 90 days, but often families will pursue permanent guardianship before the temporary guardianship ends.

Guardians can have authority over two areas: the ward's estate and person. These two types of guardianship are not mutually exclusive; a guardian can have authority over both areas if the court finds that such authority is needed.

**Guardianship of the Estate** - This type of guardianship allows families to safeguard their loved one's finances and make expenditures on their behalf. Although the role of a guardian of the estate can include responsibility to pay the ward's bills there is absolutely no expectation that these bills will be paid from the guardian's own assets. In fact, it is very important that the assets of the guardian and the assets of the ward be kept separate.

The court requires a guardian of the estate to file an inventory of the ward's assets upon his appointment and then to file an annual accounting. The inventory is a list of all of the ward's assets at the beginning of the guardianship. The accounting lists all the expenditures made and funds collected on the ward's behalf. In addition, a guardian of the estate must file a bond that has either been purchased from a surety company at

a cost of a fraction of the ward's estate or by having two Massachusetts residents sign the bond agreeing that they will pay the ward's losses if the guardian acts inappropriately. Because the above requirements can be unwieldy, it is important to carefully weigh whether a guardianship of the estate is needed.

**Guardianship of the Person** - A guardian of the person is authorized to make ordinary medical decisions for the adult child and therefore has access to the individual's medical records and is allowed to speak with the individual's medical providers. Concerns that hospitals or doctors traditionally have about confidentiality do not apply to a guardian because he acts in the individual's shoes. As opposed to a health care proxy, a guardianship of the person can allow the guardian to make non-medical decisions, such as housing.

**Extraordinary medical authority** - A guardian of the person may sometimes make extraordinary medical decisions on their wards' behalf, but only if the court has granted specific authority to do so. Examples of extraordinary medical authority include the ability to admit or commit the ward to a mental health or mental retardation facility and the ability to monitor the administration of antipsychotic medication, also known as Rogers authority. When the court grants Rogers authority it is authorizing a doctor to prescribe antipsychotic medication. Although individuals usually abide by Rogers orders and adhere to the medical treatment plan, there is no mechanism for enforcement if the individual is outside of a psychiatric facility. If extraordinary medical authority is sought the court is obligated to appoint an attorney to represent the ward.

# C hapter 5: Financial Planning

*By Cynthia R. Haddad, CFP®*

*John W. Nadworny, CFP®*

*Bay Financial Associates LLC*

---

Financial Planning for our families is unlike planning for the “traditional” family where goals are simple - to buy a home in a nice neighborhood, raise your children, plan for four to six years of college education(s), plan for your retirement years, and upon your death to leave whatever is left to children, grandchildren, and to charities. What makes planning particularly challenging for our families is the need to provide for TWO generations; the parents’ and family’s financial security AND the child’s lifetime needs. Often times the planning is focused only on planning for the child with disabilities upon the death of the parent(s). This can create a number of unintended planning pitfalls during the parents’ lifetime, as well as for other siblings.

## Planning Considerations

A more comprehensive financial plan would plan for your short term, mid term, and long- term goals. The more common concerns that comprehensive planning would address are:

- 1) What if I die too soon?
- 2) What if I live too long and run out of money?
- 3) What if something happens to me along the way and I become disabled?
- 4) What happens to my family in these situations?

If you have adequately addressed these questions in your planning, you have done a good job and may want to simply review the plan periodically for changes in tax and Medicaid laws, making certain to consult advisors who are knowledgeable about disability planning.

# Comprehensive Planning

A comprehensive financial and estate plan should address the issues and concerns of the entire family. It should minimally address the following:

- Protect income and assets in the event of a long-term disability or premature death of a parent to provide for the surviving spouse and all children.
- Review your current and projected cash flow needs for your lifetime. Make sure to include the supplemental needs of your child pre- and post-retirement.
- Review the current and projected cash flow needs for your child to include Housing, Care Assistance, Food, Personal Needs, Medical and Dental, Special Equipment, Transportation, Social and Recreation, Hobbies, and other expenses.
- Complete a Letter of Intent to help clarify the needs and goals of your child, as well as to provide a useful resource of information for future caretakers.
- Accumulate adequate savings for emergencies and opportunities, education, retirement and residential supports.
- Coordinate your investment vehicles and asset allocations with your overall goals and objectives.
- Protect your child's eligibility for Government benefits—consider the income and resources available to help offset his expenses.
- Minimize estate taxes and maximize the transfer of wealth upon death.

## Inventory of Assets/Liabilities

To begin the comprehensive financial planning process, an inventory of your personal resources should first be completed. This will provide a summary of your net worth, which includes all assets owned, less any outstanding debts from mortgages, credit cards, and loans. Information to gather includes:

- Bank Savings and Checking Accounts
- Certificates of Deposit
- Money Market Accounts
- Treasury Bills/Notes/Bonds or Savings Bonds
- Stocks, Bonds, Mutual Funds - either in a brokerage account, certificate form, or direct reinvestment plan
- Retirement Plans - IRA, 401(k), 403(b), TSA, Keogh, Pensions, etc.
- Custodial Accounts - UGMA, UTMA, 529 Plans
- Annuities - Variable and Fixed
- Insurance Policies - Life, Health, Disability, Long-Term Care, Auto, Home
- Employer Provided Benefits - Stock Options, Life Insurance, Disability Insurance, Long-Term Care, etc.
- Real Estate - Residence, Second Home, Rental Property, Land
- Business Interests
- Personal Property - Furnishings, Automobiles, Boats, Antiques, Art
- Outstanding Debts - Mortgage, Equity Line, Credit Cards, Other Loans

## Public Resources to Consider

Many families feel that they will be unable to afford the cost of providing primary and/or supplemental care for their child with their own resources, but would like to ensure an independent and fulfilling life for their child. Others feel that the present level of care and public assistance is adequate for their child's needs.

There are a number of public resources available to provide assistance in the areas of housing, income, and health insurance benefits for people with qualifying disabilities. Some of the major federal and state programs available are (also see separate chapter on Government Benefits):

- Social Security, Old Age, Survivors and Disability Income (SSDI)
- Supplemental Security Income (SSI)
- Medicare
- Medicaid
- Residential Subsidies (Housing Finance Agencies, Section 8 Vouchers)
- Group Adult Foster Care (Medicaid)
- Federal and Military Benefits
- Veterans Benefits
- Railroad Retirement Benefits
- Civil Service Retirement Benefits

## Ownership and Beneficiary Designations

Review the ownership of your assets. Once an estate plan is drafted, ownership changes may need to be made to re-title your assets, including your residence, to one spouse or to a trust. You should request the action required from your attorney to properly coordinate your estate plan and make any necessary changes.

It is very important to review the ownership of assets held for your child. These would include any Uniform Transfer to Minors Accounts (UTMAs), Uniform Gift to Minors Accounts (UGMAs), or 529 College Savings Plan accounts in addition to jointly held savings bonds or savings accounts with your child. If your child has assets in excess of \$2,000 she would not be eligible for

Government benefits. These should be reviewed prior to applying for SSI at age 18. The use of an OBRA '93 Payback Trust may be appropriate to consider if there are significant assets accumulated in these types of accounts.

Review the beneficiary designations (both primary and contingent) of retirement plans, life insurance policies and annuities. These types of assets do not pass according to your will. They pass to your heirs according to your beneficiary designations. One common oversight is to name the "children equally" as a contingent beneficiary. This may create an unintended distribution to your child with a disability and hence disqualify him for Government benefits. Proper planning can allow you to direct her share to a Special Needs Trust (SNT). (See separate chapter on Estate Planning.)

## Funding the Special Needs Trust

After a comprehensive analysis of your financial and estate planning needs, you may find that you have sufficient assets to leave to your child's Special Needs Trust upon your death. Most commonly, the SNT is funded upon the death of one or both parents using all or a portion of the remaining assets and/or life insurance. Grandparents and siblings can also assist in funding the SNT either during their lifetime and/or upon their death. Annual gifts can be directed to the SNT. Assets can also be directed to the SNT upon death. This can be done via a will or Trust or specifically in beneficiary designations.

## Creating Assets Using Life Insurance

While parents are still alive, they continue to provide supports and supplemental income to their child. Naturally, it is upon their death that the money is needed the most to continue to provide this quality of life to their child. What is "equal" is not always "fair" amongst family members in the distribution of an estate.

Life insurance can provide a simple way to distribute your estate fairly or equally by providing extra financial support to the one who needs it the most - and without causing him to be a financial burden to the siblings. It is also critical that parents have sufficient life insurance

to provide for the lifetime needs of the surviving spouse and young children in the event of a premature death. Life insurance is also an estate-planning tool used to pay estate taxes.

There are basically two forms of life insurance: term (temporary) and permanent (whole life). Since our family members have “permanent” needs in most situations, a form of permanent life insurance should be incorporated in the plan. The use of both a term policy to provide for the “temporary” needs along with a permanent policy for the lifetime needs is often an effective planning strategy.

Below is a general guideline of the different types of life insurance policies available. Prior to purchasing a policy, the financial strength of the company should be considered as well as the underwriting requirements of the company, especially if there are health issues. In addition, illustrations should be reviewed carefully based on current and guaranteed values. It is a good idea to try to structure your life insurance premiums to be completed upon your retirement in order to avoid having to pay premiums on a policy during your retirement years when income may be reduced.

**Term Life Insurance** provides protection for a certain period of time. Premiums will increase according to the term of the policy, either annually or up to 30 years. At the end of the term, premiums increase rather significantly. These policies do not build cash value. If you do not pay your premiums, the policy will lapse and will not pay a death benefit. The policy pays death benefits only if the insured dies during the term of the policy. As income increases, needs increase, or a family situation changes, a term policy can often be converted to a permanent policy.

**Permanent Life Insurance - or Whole Life Insurance** provides protection for one’s whole lifetime. The key feature is that the cash value that accumulates over time can be used for future planning needs. The cash value of a whole life policy accumulates from dividends paid by the company. Premiums generally remain constant and can be paid in future years from the policy dividends and/or from the accumulated cash values.

**Universal Life Insurance** provides more flexibility than whole life where premium contribution amounts may vary within a minimum and maximum amount. Cash value accumulates, based upon interest rates credited by the company after expenses are deducted from premiums. These are interest-rate sensitive policies.

**Survivorship (or Second-to-Die) Life Insurance** may be either term or permanent, whole life, universal or variable based on the policy design. This type of policy insures two lives (often both parents) and pays upon the death of the second insured (after both parents have gone, which is often when the funds are needed most). This is often more cost effective than purchasing two individual policies. Especially for older individuals, there may also be underwriting advantages to using this type of policy when there are health considerations of one parent.

## Protecting Assets Using Long Term Care Insurance

One common objective for all families is to guarantee that financial resources are always available to provide for their son or daughter's supplemental needs - both during their lifetime and upon their death.

A long-term illness of a parent, or other family member, could deplete the family resources rather quickly. Not to mention the amount of care taking and financial hardship that would be required from the healthy parent or sibling(s) to continue to care for both the child, and now the spouse either in their home or in a long-term care facility.

It is often worth being mindful of the impact that a long-term illness can have for even younger parents who provide continuous care for their child (often the mother) - and its impact on the healthy spouse's ability to continue to earn income and provide care for both spouse and child. The cost of long-term care is continually rising. The annual cost of a nursing home could currently exceed \$80,000 per year in Massachusetts. The annual cost of an assisted living facility could currently exceed \$48,000. There are limited planning strategies available to protect assets and pay for the cost of care when needed. A qualified elder care attorney should be consulted when making arrangements

to pay for care either in your home or in a long-term care facility.

Preferably we plan before the crisis arises. The purchase of a Long-Term Care Insurance policy can help to pay for the cost of care either in your home or in a long-term care facility, if eligible. This type of insurance provides you with the dollars needed to pay for services and/or nursing home care that you would otherwise have to pay from your own resources. Ultimately, it allows you to preserve your assets for your spouse and your family's needs by providing income to help pay for the cost of long-term care expenses. However, you must be healthy to obtain coverage. The older you are, the more expensive coverage is when you purchase it. There are also certain tax incentives where premiums may be deducted from your Federal income taxes. Prior to purchasing a policy, you should review all of the policy features and requirements for paying claims.

You should work with a knowledgeable financial advisor who is able to show comparisons of various companies and carefully explain the details of each for you as well as assist you in the underwriting process. If you must significantly change your lifestyle to pay for the premiums, then you should consider other options, such as Medicaid eligibility, to pay for long-term care expenses.

## Protecting Income Using Long Term Disability Insurance

Protecting the income of the primary income earner in the family (under age 65) is another area of planning to be considered. In the event that either a working parent (i.e. the parent earning income) suffers a long-term illness or injury, it may also bring a financial hardship to your family. At ages younger than 50, the probability of a long term illness or injury is greater than the probability of death. Long-term disability insurance is most often available as an employee benefit. However, it typically provides a total disability income benefit of up to 60% of earnings. The term "total" means both disability insurance income and Social Security benefits income. The definition of earnings may be defined as salary only or salary plus bonuses and/or commissions.

Depending upon your income level and your occupation, you may need to consider purchasing a private policy in addition to the employer-sponsored plan benefit. Long-term disability insurance coverage is especially important for those who are self-employed, earning 1099-Income, or commissions.

Prior to purchasing a long-term disability income policy, you should work with a knowledgeable financial advisor who is able to show comparisons of various companies and carefully explain the details of each for you as well as assist you in the underwriting process. The specific contract language determines if and when payments will be made.

## **Protecting Assets Using Asset Allocation**

Any comprehensive financial plan would be incomplete without a careful review and analysis of the current asset allocation of your investments and its suitability in achieving your overall goals and objectives. Coordination of your qualified retirement plan assets as well as non-qualified assets should be considered. The need for cash flow expenditures for tuition expenses, housing costs (purchase of a residence and supplementing expenses), retirement income, and major purchases should be incorporated as part of your overall asset allocation. Once your investment planning needs and objectives, as well as risk tolerance, are reviewed, you should seek the advice of professional investment advisors to assist in managing your assets. The various stages of wealth accumulation, preservation or distribution as well as your philosophies of investing should be considered when developing an appropriate asset allocation model. This involves having appropriate investments, some of which will be designed for long-term growth, income, and capital preservation.

Non-corporate trustees of a Special Needs Trust should seek advice from knowledgeable investment advisors who can assist them in, not only the basic investment allocation, but in the appropriate distribution procedures and cash flow management strategies to protect Government benefits of the Trust beneficiary and perhaps hire knowledgeable Advocates on behalf of the beneficiary.

In addition, the consolidation of various stock or bond certificates, mutual fund accounts, investment statements, CD's, and bank accounts may be helpful to your executrix.

It can be quite complex and expensive to transfer the ownership of each individual investment or account upon the death or disability of the owner. The use of a brokerage account or one financial advisor to help track these assets can prove to be quite beneficial in simplifying estate settlement issues.

## **Periodically Review Your Plan**

It is critical to periodically review and monitor your financial and estate plans in the event of a change in your or your child's health, employment, marital or family status. You should contact your financial planner, attorney, accountant, or other advisor to discuss these changes and determine if these issues are properly addressed with your present plan. Even if there are no changes in your personal or financial situation, it is still a good idea to review your plan periodically to keep abreast of changes in taxes, inflation, market conditions and government benefits. Better yet, have your advisors communicate with one another on your behalf to keep your affairs properly coordinated.

The above is intended to be a general overview of financial planning strategies and considerations in planning for families that have a child with a disability. Prior to making any decisions and/or changes to your financial and estate plan, you should consult with your tax, financial and/or legal advisors regarding your own personal situation. Again, you should always be working with advisors who are knowledgeable about disability planning.

For a more comprehensive look at special needs financial planning see "The Special Needs Planning Guide: How to Prepare for Every Stage of Your Child's Life" (Nadworny/Haddad, Brookes Publishing Co., April 2007).

# C hapter 6: Estate Planning and Supplemental Needs Trusts

*By Harry S. Margolis, Esq.  
Margolis & Bloom LLC*

---

Among the many challenges facing parents of children with special needs is planning for the time when the parents will no longer be around to care for them. Whether this is due to their own disability or death, the responsibility will fall on the child's siblings, other family members, and the community. In many cases, expenses will increase dramatically when care, management, and guidance—previously provided by parents—must instead be provided by a professional for a fee.

Planning by parents can make all the difference in the life of the child with a disability, as well as that of his siblings who may be left with the responsibility for care taking (on top of their own careers and caring for their own families and, possibly, ailing parents).

Estate planning by parents who have children with disabilities must answer the following questions:

- How do you leave funds for the benefit of the child without causing the child to lose important public benefits?
- How do you make sure that the funds are well managed?
- How do you make sure that your other children are not over-burdened with caring for the sibling with a disability, and that any burdens fall relatively evenly among the siblings?
- What is fair in terms of distributing your estate between your child with a disability and your other children?
- How do you make sure there's enough money to meet your child with a disability's needs?

Often, parents of children with special needs try to resolve these issues by leaving their estates to their other children, leaving nothing to the disabled children. They have a number of reasons for this approach: The child with a disability shouldn't receive anything because he can't manage money and would lose her benefits. He doesn't need any inheritance because he will be taken care of by the public benefits he receives. The other children will take care of their sibling.

This approach is to be discouraged for a number of reasons. First, public benefits programs are often inadequate. They need to be supplemented with other resources. Second, both public benefits programs and individual circumstances change over time. What's working today, may not work tomorrow. Other resources need to be available, just in case. Third, relying on one's other children to take care of their sibling places an undue burden on them and can strain relations between them. It makes it unclear whether inherited money belongs to the typical child to spend as she pleases, or whether she must set it aside for her sibling with a disability. If one child sets money aside, and the other doesn't, resentments can build that may split the family forever.

## Supplemental Needs Trusts

The better answer to many of these questions is the Supplemental Needs Trust, also often called a "Special Needs Trust." Such trusts fulfill two primary functions: the first is to manage funds for someone who may not be able to do so himself due to disability. The second is to preserve the beneficiary's eligibility for public benefits, whether that is MassHealth, Supplemental Security Income, public housing, or any other program. They come into play in a multitude of situations, including parents planning for a child with a disability, an individual with a disability coming into an inheritance or winning or settling a personal injury claim, or one spouse planning for a spouse with a disability.

First, a short explanation of what trusts are and how they work. A trust is a form of ownership of property, whether real estate or investments, where one person—the trustee—

manages such property for the benefit of someone else—the beneficiary. The trustee must follow the instructions laid out in the trust agreement as to how to spend the trust funds on the beneficiary’s behalf—whether and when to distribute the trust income and principal. In general, trusts fall into two main categories: self-settled trusts that the beneficiary creates for herself with her own money and third-party trusts that one person creates and funds for the benefit of someone else.

Each situation and each benefit program has its own rules, which affect the drafting, funding, and administration of special needs trusts. The public benefit programs in many ways track the treatment of trusts in terms of creditor protection. Just as you cannot create a trust for your own benefit and protect the trust funds from creditors (the new Delaware and Alaska trusts being an exception to this long-accepted rule), you generally cannot create a trust for your own benefit and have the funds uncountable for purposes of MassHealth, SSI, and other public benefits programs. However, MassHealth and SSI have provided for “safe harbors” that permit the creation of self-settled supplemental needs trusts in certain circumstances.

## Preserving Public Benefits

In general, if one person creates a trust for the benefit of someone else, and the trust is drafted to give the trustee complete discretion whether and when to make distributions to the beneficiary, the trust funds will not be considered as available when considering the trust beneficiary’s eligibility for public benefits. Unfortunately, matters get more complicated when the trust is actually used for the beneficiary. For instance, trust funds distributed to the beneficiary will reduce his SSI dollar for dollar. In many circumstances, trust funds used on the beneficiary’s behalf will also cause a reduction in SSI benefits. In other words, while the existence of a properly drafted trust will not affect eligibility for benefits, the use of the trust funds could if care is not taken.

As a result, some supplemental needs trusts are written to restrict the trustee’s discretion to make payments so

that only those payments from the trust that will not affect eligibility for public benefits are permitted. Other trusts are written to give the trustee complete discretion, but the trustee receives instruction on how to make distributions to minimize their impact on eligibility for benefits. In most cases, the second approach is preferred because it allows for more flexibility. Since the future cannot be predicted with any certainty, flexibility permits the trustee to adjust to whatever takes place.

## Choice of Trustee

Choosing a trustee is one of the most difficult parts of planning for a child with special needs. The trustee of a supplemental needs trust must be able to fulfill all of the normal functions of a trustee—accounting, investments, tax returns, and distributions—and also be able to meet the needs of the special beneficiary. The latter can include an understanding of various public benefits programs, sensitivity to the needs of the beneficiary, and knowledge of services that may be available.

There are a number of possible solutions available. Often parents choose to appoint co-trustees—a bank or law firm as a professional trustee along with another child as a family trustee. Working together, they can provide the necessary resources and experience to meet the needs of the child with special needs. Unfortunately, in many cases such a combination is not available. Professional trustees generally require a minimum amount of funds in the trust, usually at least \$500,000. Otherwise their fees become unreasonable in relation to the size of the trust. In other situations, there is no appropriate family member to appoint as co-trustee.

Where the size of the trust is insufficient to justify hiring a professional trustee, two solutions are possible. The first is simply to have a family member trustee who would hire accountants, attorneys, and investment advisors to help with administering the trust. The second is to use a pooled trust. In Massachusetts, two non-profit agencies provide pooled trusts—the CJP Disabilities Trust and the PLAN of Massachusetts Trust—that manage funds left for individuals with disabilities. These “third-party” pooled

trusts should not to be confused with “(d)(4)(C)” trusts which, are described below. Contact information for both pooled trusts is provided in the chapter on Resources.

Where no appropriate family member is available to serve as co-trustee, the parent may direct the professional trustee to consult with named individuals who know and care for the child with special needs. These could be family members who are not appropriate trustees, but who can serve in an advisory role. Or they may be social workers or others who have both personal and professional knowledge of the beneficiary and the resources available for her care. This role may be formalized in the trust document as a “Care Committee.” Again, where no such individuals exist, the pooled trusts described above provide a solution. Both pooled trusts have professionals on staff that can provide the care component of a special needs trust.

## Funding the Trust

A number of issues arise with respect to the question of how much to put into the trust. First, how much will your child with special needs require over his life? Second, should you leave the same portion of your estate to all of your children, no matter their need? Third, how will you assure that there’s enough money?

The first question is a difficult one. It depends on what assumptions you make about your child’s needs and the availability of other resources to fulfill those needs. A financial planner with experience in this area can help make projections to assist with this determination. But in all cases it’s better to err on the side of more money rather than less. You can’t be certain current programs will continue, and you have to factor in paying for services, such as case management, that you provide free-of-charge today.

If these assumptions mean that your child with special needs will require a large percentage of your estate, how will your other children feel if they receive less than their pro rata share? After all, your estate may already be smaller than it would be otherwise due to the time and money spent providing for the child with special needs. And your other children may have received less of your attention growing up than they would have otherwise had

they not had a sibling with special needs.

One solution to the question of fairness and to the challenge of assuring that there are enough funds is life insurance. You could divide your estate equally among your children, but use life insurance to supplement the amount going to the supplemental needs trust for your child with special needs. The younger you are when you start, the more affordable the premiums will be. And if you are married, the premiums can often be lower if you purchase a policy that pays out only when the second of you dies.

## Safe Harbor Trusts

The above discussion primarily involves estate planning by parents for money they plan to leave for their children with special needs. A supplemental needs trust can also serve to hold any inheritance that may come from a grandparent or other family member. However, it cannot hold funds belonging to the individual with a disability himself. As a general rule, the funds held by such a self-settled trust would be considered available to the beneficiary with a disability and render her ineligible for MassHealth or SSI benefit.

Fortunately, both MassHealth and SSI share two “safe harbor” trusts that permit a beneficiary to shelter his own funds, qualify for public benefits, and remain a continuing beneficiary of the trusts. These trusts fall in two categories: single-beneficiary and pooled trusts. The single-beneficiary trusts are generally referred to as “(d)(4)(A)” trusts, referring to the enabling statute, or “pay-back” trusts, referring to their primary feature that any funds remaining in the trusts upon the beneficiary’s death be used to reimburse the Commonwealth for any MassHealth expenditures it has made on the beneficiary’s behalf. Only if funds remain after such reimbursement may they be passed on to the beneficiary’s family.

The pooled trusts are generally referred to as “(d)(4)(C)” trusts, again referring to the enabling statute, or “pooled disability” trusts. Like the third-party pooled trusts described above, these are operated by non-profit organizations. Three exist in Massachusetts: the PLAN of

Massachusetts Trust, the CJP Trust II, and the Berkshire ARC Trust. Contact information is provided in the chapter on Resources.

Each of these safe-harbor trusts has its own rules, which must be strictly followed to qualify for the MassHealth and SSI exceptions. “Payback” trusts must be created while the individual with a disability is under age 65 and they must be established by his parent, grandparent, legal guardian, or by a court. They also must provide that at the beneficiary’s death any remaining trust funds will first be used to reimburse the state for MassHealth paid on the beneficiary’s behalf.

A non-profit association must manage pooled disability trusts. Unlike individual disability trusts, which may be created only for those under age 65, pooled trusts may be for beneficiaries of any age and may be created by the beneficiary herself. In addition, at the beneficiary’s death the state does not have to be repaid for its MassHealth expenses on his behalf as long as the funds are retained in the trust for the benefit of other beneficiaries with disabilities. (At least that’s what the federal law says; Massachusetts requires reimbursement under all circumstances.) Although a pooled trust is an option for an individual with a disability over age 65 who is receiving Medicaid or SSI, those over age 65 who make transfers to the trust will incur a transfer penalty.

# C hapter 7: Life Care Plans

*By Patricia Freedman, Esq.  
PLAN of Massachusetts, Inc.*

---

A Life Care Plan is a written document that provides guidance to a Trustee or other person about the desired future for the family member with a disability. Although the Life Care Plan is not usually a legal document like a Will or Trust, it establishes the framework for addressing the current and future needs of the family member with a disability so that disruptions and transitions are minimized.

There are several parts to a good Life Care Plan. Although each Life Care Plan will be unique, there is some basic information that should be included in any good Plan. A good Life Care Plan will include:

Detailed information about the family member with a disability. At a minimum this information will include:

- Medical and family history
- Birth date and place
- Living situation
- Religious preferences
- The names and address of friends and other family members

A list of important people. Names, addresses, and phone numbers for important people in the family's life, including:

- The attorney
- The financial planner
- The executor for the will
- The insurance agent
- The medical providers
- Religious counselors
- Employers

- Friends and neighbors
- Family members and relatives
- Professionals, such as social workers and therapists

A list of important documents and their locations including:

- Legal and insurance documents
- Guardianship papers
- Financial documents and information (mortgages, investments, retirement benefits)
- Deeds and titles
- Birth certificates
- Social security cards
- Safe deposit boxes
- Burial instructions
- Marriage certificate/divorce papers
- Letter of intent

A list of all governmental and public benefits that the family member with a disability receives, including:

- Social Security (SSDI)
- Supplemental Security Income (SSI)
- Medicaid
- Medicare
- Food Stamps
- Housing subsidies

A good Life Care Plan will also specify key elements of your family member's current lifestyle that are important to maintain in the future. In other words, what you and your family member want in the future and the supports that will likely be needed to make this happen.

No one Life Care Plan fits everyone. A good Life Care Plan addresses the physical and emotional needs of the family member with a disability and takes into account the assets that are available to the family member with a disability, including public benefits. A good Life Care Plan reflects the unique characteristics of each family and individual.

Some factors that influence the contents of a Life Care Plan include:

- The age of the family member with a disability
- The current and future needs of any other children
- The role that other children, other family members, or friends will have in decisions about the family member with a disability
- The impact of the disability on your family member's independence

Once a Life Care Plan is developed, it should be reviewed on a regular basis. Many families use their child's birthday as the date that triggers a review of the Life Care Plan. Even if the Life Care Plan is not reviewed annually, it is important to periodically review the Life Care Plan to verify the accuracy of the information

Developing a Life Care Plan involves answering questions that cover an array of life issues. The questions help the family and the family member with a disability think about what she will want and need in the future. The answers provide the framework for planning how to maximize the likelihood that these wants and needs are met.

It is never too early to develop a Life Care Plan. Taking the time and care to develop a good Life Care Plan helps ensure that the family member with a disability will benefit from a family legacy without jeopardizing any government entitlements. Developing a Life Care Plan early allows the family the opportunity to make informed decisions together. The family can consider all options. Early planning means that decisions will not be made under pressure and that decisions about the family member with a disability will not be left to a court or state agency. While Life Care Plans can and should be developed for young children with a life-long disability, Life Care Plans that are developed for young children cannot address specific adult issues such as employment or housing. However, as the child approaches adulthood, the Life Care Plan can be modified to incorporate these "adult" issues.

The process of developing a Life Care Plan requires a significant amount of time. The process can include as many people as you wish. Prior to beginning the process it is helpful to identify who else in your family member's life should be involved in the planning process. This can include the family member with a disability.

The process of developing a Life Care Plan usually begins with the family identifying everything that they currently do for the family member with a disability. This is a comprehensive list that should include the everyday activities that the family may take for granted, such as transportation, fixing meals, paying bills, etc. A comprehensive list of what the family does now will provide assistance in identifying the needs of the family member with a disability when the family is no longer able to provide care.

The following questions are a starting point to help focus your thinking about the life that you want for your family member with a disability and what supports will be needed to support your wishes. Use these questions as a guide for discussions with the family member with a disability, other family members, and other important people in your lives. It is helpful to review these questions whenever the Life Care Plan is revised or updated. The appropriateness of each question depends on things like the age of the family member with a disability, the impact of the disability on his independence and decision-making, and other circumstances.

Putting your answers to the questions in writing will clarify the needs of your family member with a disability, will clarify your wishes for her, and will clarify what resources will be needed to meet those needs and wishes. Although the questions refer to the family member with a disability as a "child", these questions can be asked about a family member of any age with a life-long disability.

### **Questions to use as a Starting Point for Developing a Life Care Plan:**

1. What are my child's short- and long-term goals and dreams?
2. What are my wishes for my child in the near and distant future?
3. Can my child take care of himself at the present time? Will she be able to take care of herself in the future?
4. What type of assistance does my child need now? What assistance will be needed in the future?

5. Can my child handle his own finances?
6. Does my child need assistance with decision making?  
With what types of decisions?
7. What do we want and need in terms of a living situation for my child? What kind of living arrangement? Should there be roommates and if so, what qualities should a roommate(s) have?
8. Should my child have opportunities for work or other meaningful, productive daytime activities? What are my child's interests and skills that should guide this decision?
9. Will my child need further education or training?
10. What types of opportunities will help my child develop friendships and relationships?
11. What are my child's health care needs? Dental needs? Therapy Needs? Who provides these and how are they paid for?
12. What type of equipment or other assistive technology does my child need? E.g., communication devices, wheelchairs, lift equipment. Will any of this have to be replaced or upgraded in the future? How is this equipment or assistive technology paid for now? Will that payment source be available for my child in the future?
13. What are the other supports and services that my child uses now?
14. What types of recreational and leisure activities does my child enjoy? What types of vacations does she like?
15. What social and religious activities does my child participate in? What activities would my child like to pursue?
16. What are my child's transportation needs? Who provides transportation services now and how is that funded? How will my child pay for transportation needs in the future?

17. Will the impact of my child's disability change over time, necessitating additional or different services and supports? What supports and services will be needed to make these things possible?
18. Who are the important people in my child's life e.g., family members, friends, neighbors, church/synagogue affiliations? What roles do they play now and what roles will they play in my child's life in the future, e.g., advocacy, service monitoring, emotional support, assistance with activities like shopping or budgeting or social activities?
19. What supports and services will be needed from service provider agencies? What type of agency would best meet my child's needs?
20. What estimated costs related to the wishes and goals we have identified will likely not be covered by government benefits like SSI or Medicaid, other public programs or by insurance?
21. What other assets does my child have to plan with or might be expected in the future, for example, an inheritance, insurance proceeds, lawsuit settlements, or SSDI benefits based on a parent's record?
22. What financial assets are available now with which to plan for providing for my child?
23. If my ideal plan can't be implemented for some reason, what are the most important things that I would want implemented?
24. What other information is important for me to consider?

# Sample Life Care Plan Worksheets

*Adapted from the Planning Journal by Disabled and Alone*

## Worksheet A: A Brief Introduction To Us

### Parents

***Father's Name*** \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Business Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Date of Birth \_\_\_\_\_

Social Security Number \_\_\_\_\_

***Mother's Name (include maiden name)***

\_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Business Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Date of Birth \_\_\_\_\_

Social Security Number \_\_\_\_\_

***Family member with a Disability***

Name \_\_\_\_\_

Current Living Arrangement (Check one)

- With parents
- With other family member
- Independently
- Group home
- Institution/hospital
- Supervised residence
- Other - please describe \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Business Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Date of Birth \_\_\_\_\_

Social Security Number \_\_\_\_\_

Is he married?       Yes     No

Does she have children?     Yes     No

## Worksheet B: "Wish List" for Future Care

**The goal is quality of life. What do these words mean to you?**

Rank the following items in importance for your family member with a disability after you are gone. (1 is the most important preference, 2 is the next important, and so on).

- \_\_\_\_ A good place to live
- \_\_\_\_ A reliable and caring person or organization to oversee and advocate (as needed)
- \_\_\_\_ Adequate private financial resources
- \_\_\_\_ Adequate government resources
- \_\_\_\_ Good medical and dental care
- \_\_\_\_ Friends
- \_\_\_\_ A healthy diet
- \_\_\_\_ Meaningful daytime activities
- \_\_\_\_ Opportunity to attend regular religious services
- \_\_\_\_ Daily recreational activities
- \_\_\_\_ Educational opportunities
- \_\_\_\_ Fulfilling employment
- \_\_\_\_ Appropriate transportation
- \_\_\_\_ Visits and contacts with relatives
- \_\_\_\_ Reliable care by home attendants
- \_\_\_\_ Spending money
- \_\_\_\_ Holiday and birthday celebrations
- \_\_\_\_ Entertainment
- \_\_\_\_ Vacations
- \_\_\_\_ Other

# Worksheet C: Finances

## C-1: Government Programs

### *ID Numbers*

- SS/SSI/SSDI
- Medicaid
- Medicare
- Food Stamps
- Other

### *Support Services*

*(Names and contact information for providers)*

- Case management
- Family support services
- Individual support services
- Other

## C-2: Income and Expenses

### **Monthly Income**

Use the following table to list all income received each month by/for the person with a disability.

<i>Source</i>	<i>Amount</i>
Employment (net amount after taxes)	_____
Supplemental Security Income	_____
Social Security Disability Insurance	_____
Other government benefits	_____
Government or private pensions	_____
Annuities	_____
Interest from savings, etc.	_____
Dividends from stocks, bonds, etc.	_____
Other income (list)	_____
<i>Total Monthly Income</i>	_____

## Monthly Expenses

Use the following table to record all the expenses incurred each month by/for the person with a disability.

<i>Family Provides</i>	<i>Amount</i>
Housing (rent, maintenance, etc.)	_____
Utilities	_____
Transportation (bus, car payment, etc.)	_____
Food	_____
Medical/Dental Care	_____
Clothing	_____
Personal items	_____
Vacations	_____
Social/Recreational Activities	_____
Taxes (Do not include payroll taxes)	_____
Insurance (health, life, auto, etc.)	_____
Care assistance	_____
Employment	_____
Education	_____
Special Equipment	_____
Other Expenses (list)	_____
<i>Total Monthly Expenses</i>	_____

INCOME MINUS EXPENSES DETERMINES NEED.

# Worksheet D-1: Everything You Need to Know

## Family Members

Full Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Business Phone \_\_\_\_\_

Email \_\_\_\_\_

Date of Birth \_\_\_\_\_

Place of Birth \_\_\_\_\_

Relationship to person  
with a disability \_\_\_\_\_

Comments \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*Include the above information for all relevant family members*

## Professional Advisors

### Attorney

Full Name \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Phone number \_\_\_\_\_

Last contact date \_\_\_\_\_

Special Instructions \_\_\_\_\_

\_\_\_\_\_

**Financial Advisor**

Full Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_

Phone number \_\_\_\_\_

Last contact date \_\_\_\_\_

Special instructions \_\_\_\_\_

**Physician/Psychiatrist/etc**

Full Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_

Phone number \_\_\_\_\_

Last contact date \_\_\_\_\_

Special instructions \_\_\_\_\_

**Insurance Agent**

Full Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_

Phone number \_\_\_\_\_

Last contact date \_\_\_\_\_

Special instructions \_\_\_\_\_  
\_\_\_\_\_

**Broker**

Full Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Email \_\_\_\_\_

Phone number \_\_\_\_\_

Last contact date \_\_\_\_\_

Special instructions \_\_\_\_\_  
\_\_\_\_\_

**Religious Leader**

Full Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Email \_\_\_\_\_

Phone number \_\_\_\_\_

Last contact date \_\_\_\_\_

Special instructions \_\_\_\_\_  
\_\_\_\_\_

# Resource List

## Advocacy

### **Arc of the United States**

1010 Wayne Avenue, Suite 650  
Silver Spring, MD 20910  
(301) 565-3842  
[www.thearc.org](http://www.thearc.org)

### **ArcLink**

[www.thearclink.org](http://www.thearclink.org)

### **ArcMass**

217 South Street  
Waltham, MA 02453  
(781) 891-6270  
[www.arcmass.org](http://www.arcmass.org)

### **Family Ties of Massachusetts**

[www.massfamilyties.org](http://www.massfamilyties.org)

### **Family Village Community Center Massachusetts Resources**

[www.familyvillage.wisc.edu/comm/massachusetts.html](http://www.familyvillage.wisc.edu/comm/massachusetts.html)

### **Federation for Children with Special Needs**

1135 Tremont Street  
Suite 420  
Boston, MA 02120  
(617) 236-7210  
(800) 331-0688 (in MA)  
[www.fcsn.org/](http://www.fcsn.org/)  
Information Center for Individuals with Disabilities (ICID)  
[www.disability.net/](http://www.disability.net/)

### **Mass Advocacy Standing Strong (M.A.S.S.)**

P.O. Box 6025  
North Plymouth, MA 02362  
(866) 426-2253  
[www.massadvocatesstandingstrong.org](http://www.massadvocatesstandingstrong.org)

**Massachusetts Down Syndrome Congress (MDSC)**

MDSC

P.O. Box 866

Melrose, MA 02176

(800) 664-MDSC

[www.mdsc.org](http://www.mdsc.org)

**Massachusetts Families Organizing for Change**

P.O. Box 61

Raynham, MA 02768

(800)406-3632

[www.mfofc.org](http://www.mfofc.org)

**National Alliance for the Mentally Ill (NAMI)**

Colonial Place Three

2107 Wilson Blvd., Suite 300

Arlington, VA 22201-3042

(703) 524-7600

Member Services: (888) 999-NAMI

Fax: (703) 524-9094

[www.nami.org](http://www.nami.org)

**NAMI - Massachusetts**

400 West Cummings Park, Suite 6650

Woburn, MA 01801-6528

(781) 938-4048

[www.namimass.org](http://www.namimass.org)

**Support Brokers**

217 South Street

Waltham, MA 02453

(781) 891-6270

Fax: (781) 891-6271

[www.supportbrokers.org](http://www.supportbrokers.org)

**Yesodot**

**Jewish Vocational Service**

29 Winter St., 5th floor

Boston, MA 02108

(617) 399-3299

[www.yesodot.org](http://www.yesodot.org)

## Estate Planning

### **National Alliance for the Mentally Ill**

Estate Planning Resource page

[www.nami.org/template.cfm?section=Special\\_Needs\\_Estate\\_Planning](http://www.nami.org/template.cfm?section=Special_Needs_Estate_Planning)

## Guardianship

### **National Guardianship Association**

174 Crestview Drive

Bellefonte, PA 16823

(877) 326-5992

[www.guardianship.org](http://www.guardianship.org)

## Health Care

### **Commonwealth Connector**

(877) 623-6765

[www.MAhealthconnector.org](http://www.MAhealthconnector.org)

### **Health Care for All**

30 Winter Street, 10th Floor

Boston, MA 02108

(617) 350-7279

Fax: (617) 451-5838

[www.hcfama.org](http://www.hcfama.org)

## Housing

### **Citizens' Housing and Planning Association (CHAPA)**

18 Tremont Street, Suite 401

Boston, MA 02108

(617) 742-0820

[www.chapa.org](http://www.chapa.org)

## **Metropolitan Boston Housing Partnership**

125 Lincoln Street  
Boston, MA 02111  
(617) 859-0400  
(800) 272-0990  
Fax: (617) 426-4256  
[www.mbhp.org](http://www.mbhp.org)

## **Legal Services**

### **Academy of Special Needs Planners**

260 West Exchange Street  
Suite 004  
Providence, RI 02903  
(866) 267-0974  
[www.specialneedsanswers.com](http://www.specialneedsanswers.com)

### **Center for Public Representation**

22 Green Street  
Northampton, MA 01060  
(413) 586-6024  
Newton Office  
246 Walnut Street  
Newton, MA 02460  
(617) 965-0776  
[www.centerforpublicrep.org](http://www.centerforpublicrep.org)

### **Disability Law Center**

Suite 925  
11 Beacon Street  
Boston, MA 02108  
(800) 872-9992  
TTY: (617) 227-9464  
[www.dlc-ma.org/](http://www.dlc-ma.org/)

### **Mental Health Legal Advisors**

399 Washington Street, 4<sup>th</sup> Floor  
Boston, MA 02108  
(617) 338-2345  
[www.mass.gov/mhlac/](http://www.mass.gov/mhlac/)

**Massachusetts Legal Services**

[www.masslegalservices.org](http://www.masslegalservices.org)

**TASH**

1025 Vermont Ave, NW, 7<sup>th</sup> Floor

Washington, DC 20005

(202) 263-5600

Fax: (202) 637-0138

[www.tash.org/](http://www.tash.org/)

**Volunteer Lawyers Project**

99 Chauncy St., 4th Floor

Boston, MA 02111

(617) 423-0648

TTY: (617) 338-6790

Fax: (617) 423-0061

[www.vlpnet.org/](http://www.vlpnet.org/)

**Pooled Disabilities Trusts**

**Berkshire County Arc**

395 South Street

Pittsfield, MA 01201

(413) 499-4241

[www.bcarc.org](http://www.bcarc.org)

**CJP Disabilities Trust and CJP Disabilities Trust II  
Jewish Family & Children's Service**

1430 Main Street

Waltham, MA 02451

(781) 647-JFCS (5327)

[www.jfcsboston.org](http://www.jfcsboston.org)

**PLAN of Massachusetts Trust  
(Formerly MARC Trust)**

1301 Centre Street

Newton, MA 02459

(617) 244-5552

[www.planofma.org](http://www.planofma.org)

**TLC Trust**

PO Box 893

Ashburnham, MA 01430

(978) 827-5602

Fax: (978) 252-5021

**Providers**

**The Association of Developmental Disabilities Providers**

217 South Street

Waltham, MA 02453

(781) 891-7327

[www.addp.org](http://www.addp.org)

**Massachusetts Council of Human Service Providers, Inc.**

250 Summer Street, Suite 237

Boston, MA 02210

(617) 428-3637

[www.providers.org](http://www.providers.org)

**Resource and Referral**

**Asperger's Association of New England**

182 Main Street, Suite 101

Watertown, MA 02472

(617) 393-3824

Fax: (617) 393-3827

[www.aane.org](http://www.aane.org)

**Autism Society of America, Massachusetts Chapter**

47 Walnut Street

Wellesley, MA 02481

(781) 237-0272

[asamasschapter@hotmail.com](mailto:asamasschapter@hotmail.com)

[www.geocities.com/asamasschapter/index.html](http://www.geocities.com/asamasschapter/index.html)

**Best Buddies Massachusetts**

45 Bromfield Street, Third Floor  
Boston, MA 02108  
(866) 33-BUDDY  
Fax: (617) 778-0526  
[www.bestbuddiesmassachusetts.org](http://www.bestbuddiesmassachusetts.org)

**Brain Injury Association of Massachusetts**

30 Lyman Street, Suite 10  
Westborough, MA 01581  
(508) 475-0032  
Brain Injury Help Line: (800) 242-0030  
Fax: (508) 475-0040  
[www.biama.org/](http://www.biama.org/)

**The Desk.info**

Information about Medicaid for people with cognitive disabilities  
[www.thedesk.info/](http://www.thedesk.info/)

**Disability Resource Network  
Jewish Family & Children's Service**

1430 Main Street  
Waltham, MA 02451  
(781) 647-JFCS (5327)  
[www.jfcsboston.org](http://www.jfcsboston.org)

**Disabled Persons Protection Commission**

50 Ross Way  
Quincy, MA 02169  
(617) 727-6465  
After-hours hotline: (800) 426-9009  
[www.mass.gov/dppc](http://www.mass.gov/dppc)

**Federal Disability Information**

[www.disabilityinfo.gov/](http://www.disabilityinfo.gov/)

## **Institute for Community Inclusion**

### **UMass Boston**

100 Morrissey Boulevard

Boston, MA 02125

(617) 287-4300

[www.communityinclusion.org](http://www.communityinclusion.org)

## **National Dissemination Center for Children with Disabilities**

P.O. Box 1492

Washington, DC 20013

Voice/TTY: (800) 695-0285

Fax: (202) 884-8441

[www.nichcy.org/index.html](http://www.nichcy.org/index.html)

## **New England Index**

### **UMass/Shriver Center**

200 Trapelo Road

Waltham, MA 02452-6319

(800) 642-0249

TTY: (800) 764-0200

[www.disabilityinfo.org/](http://www.disabilityinfo.org/)

[www.members.mnip-net.org](http://www.members.mnip-net.org)

## **State Agencies**

### **Governor's Commission on Mental Retardation**

Two Boylston Street, 4<sup>th</sup> Floor

Boston, MA 02116

(617) 988-3200

[www.state.ma.us/gcmr/](http://www.state.ma.us/gcmr/)

### **Massachusetts Bureau of Family and Community Health- Early Intervention Program**

250 Washington Street

Boston, MA 02108

(617) 624-5901

TTY: (617) 624-5992

Fax: (617) 624-5990

**Massachusetts Commission for the Blind (MCB)**

48 Boylston Street

Boston, MA 02116

(617) 727-5550

[www.state.ma.us/mcb/](http://www.state.ma.us/mcb/)

**Massachusetts Commission for the Deaf and Hard of Hearing (MCDHH)**

150 Mount Vernon Street, 5<sup>th</sup> floor

Boston, MA 02125

(617) 740-1600

TTY: (617) 740-1700

[www.state.ma.us/mcdhh/](http://www.state.ma.us/mcdhh/)

**Massachusetts Department of Education (DOE)**

350 Main Street

Malden, MA 02148-5023

(781) 338-3000

TTY: (800) 439 2370

[www.doe.mass.edu/](http://www.doe.mass.edu/)

**Massachusetts Department of Housing and Community Development (DHCD)**

100 Cambridge Street, Suite 300

Boston, MA 02114

(617) 573-1100

TTY: (617) 573-1140

[www.mass.gov/dhcd/](http://www.mass.gov/dhcd/)

**Massachusetts Department of Mental Health (DMH)**

25 Staniford Street

Boston, MA 02114

(617) 626-8000

TTY: (617) 727-9842

[www.mass.gov/dmh](http://www.mass.gov/dmh/)

**Massachusetts Department of Mental Retardation (DMR)**

500 Harrison Avenue

Boston, MA 02118

(617) 727-5608

TTY: (617) 624-7783

After hours emergency number: (781) 894-3600

[www.mass.gov/dmr](http://www.mass.gov/dmr)

**Massachusetts Department of Public Health (DPH)**

250 Washington Street

Boston, MA 02108

(617) 624-6000

TTY: (617) 624-6001

[www.mass.gov/dph](http://www.mass.gov/dph)

**Massachusetts Department of Social Services (DSS)**

24 Farnsworth Street

Boston, MA 02210

(617) 748-2000

Child-At-Risk Hotline: (800) 792-5200

[www.mass.gov/dss](http://www.mass.gov/dss)

**Massachusetts Developmental Disabilities Council (MDDC)**

1150 Hancock Street, 3<sup>rd</sup> Floor, Suite 300

Quincy, MA 02169

(617) 770-7676

TTY: (617) 770-9499

[www.state.ma.us/mddc/](http://www.state.ma.us/mddc/)

**MassHousing - Massachusetts Affordable Housing Bank**

One Beacon Street

Boston MA 02108

(617) 854-1000

[www.masshousing.com/portal/server.pt](http://www.masshousing.com/portal/server.pt)

**Massachusetts Office on Disability (MOD)**

One Ashburton Place, Room 1305

Boston, MA 02108

(617) 727-7440

[www.mass.gov/mod/](http://www.mass.gov/mod/)

**Massachusetts Rehabilitation Commission (MRC)**

27 Wormwood Street  
Boston, MA 02210-1616  
Voice/TTY: (800) 245-6543  
[www.state.ma.us/mrc/](http://www.state.ma.us/mrc/)

**Massachusetts Department of Transitional Assistance (DTA)**

600 Washington Street  
Boston, MA 02111  
(617) 348-8500  
[www.state.ma.us/dta/](http://www.state.ma.us/dta/)

**Social Security Administration (SSA)**

10 Causeway Street  
Boston, MA 02222-1098  
(800) 772-1213  
TTY: (800) 325-0778  
[www.ssa.gov/SSA\\_Home.html](http://www.ssa.gov/SSA_Home.html)

Benefits for People with Disabilities:

[www.ssa.gov/disability/](http://www.ssa.gov/disability/)

SSA Publication No.05-10029 Disabilities Benefits:

[www.ssa.gov/pubs/10029.html](http://www.ssa.gov/pubs/10029.html)

# Glossary

**Beneficiary** - The person who receives the “benefits” of a will, trust, life insurance policy, certain employee benefits and the like.

**Codicil** - An amendment to a will, which changes a portion of the will. A codicil must be signed and witnessed according to the same rules as the will.

**Guardian** - A person appointed by the court to assist a person with a disability (or minor) with his or her finances and/or personal decisions.

**Estate** - All of a person’s assets minus all of one’s debts at the time of death.

**Estate Tax** - Under federal law, taxes are due on estates over \$675,000. With proper estate planning, a married couple can avoid paying taxes on a combined estate of up to \$1.35 million dollars.

**Executor** - The person who is responsible for carrying out the directions contained in a will. The executor usually works with an attorney to “probate” (see definition below) the estate with the court.

**Heir** - A person who inherits property under state law.

**Intervivos Trust** - A “living trust” - one, which exists; comes into being during the lifetime of the Grantor or Settlor (i.e. the maker of the trust).

**Intestacy Laws** - Laws of a state which dictate how your estate will be distributed if you die without a will. In Massachusetts, if there are children, 50% will pass to your spouse and 50% will be divided among your living children. If your child is a minor or disabled, the court will monitor distribution of the minor or disabled heir’s portion of the estate.

**Irrevocable Trust** - A Trust that cannot be changed by the maker of the trust once it has been executed. This type of trust is often used to avoid estate taxes because funds placed in the trust are generally not included in the maker's estate.

**Letter of Intent** - Although not legally binding, this form communicates your desires and concerns to future caregivers. It covers vital statistics, your child's financial picture, details about what works well or not so well for your child, suggestions about what changes might be needed for the future, a list of the locations of all pertinent documents and records, and individuals that are important in your child's life.

## **LIFE INSURANCE -**

- 1) Permanent Life Insurance** - Designed to provide lifelong financial protection; as long as the necessary premiums are paid, the death benefit will be paid. Most permanent policies have a feature known as cash value that increases (tax deferred) over the life of the policy and can be used to help fund financial goals (e.g., retirement, education expenses).
- 2) Term Life Insurance** - This type of life insurance covers the insured for a certain period of time, or term. The policy pays death benefits only if the insured dies during the term, which can be 1, 5, 10, or even 20 years.
- 3) Universal Life Insurance** - A type of permanent life insurance that allows you, after your initial payment, to pay premiums at any time, in virtually any amount, subject to certain minimums and maximums. This policy also permits you to reduce or increase the death benefit more easily than a traditional whole life policy. To increase your death benefit, the insurance company usually requires you to furnish satisfactory evidence of your continued good health.

**4) Whole Life Insurance** - The most common type of permanent life insurance. With this type of policy, premiums generally remain constant over the life of the policy and must be paid periodically in the amount specified in the policy.

**5) Survivorship Life Insurance** - This type of life insurance covers two individuals and pays the death benefit at the death of the second insured. The premiums are significantly less than two traditional insurance policies because the policy insures two lives for one benefit. For older individuals with some health considerations, this may be a viable option for coverage. The policy can be designed using either whole-life insurance, term insurance, universal life insurance, or a combination of these. This product is frequently used in the disability market because the major concerns usually develop at the death of the second parent (or caregiver), a time when money is often needed the most.

**Section 8 Housing Assistance** - The Section 8 Housing Choice Voucher Program is the federal government's major program for assisting very low income families, the elderly, and individuals with disabilities to rent decent, safe, and sanitary housing in the private market. Since the housing assistance is provided on behalf of the family or individual, participants are able to find and rent privately owned housing, including single-family homes, townhouses, and apartments. The participant is free to choose any housing that meets the requirements of the program and is not limited to units located in subsidized housing projects.

**Social Security Disability Insurance (SSDI)** - A program financed with Social Security taxes paid by workers, employers, and self-employed persons. In order to be eligible for a SSDI benefit, the worker must earn sufficient credits based on taxable work. Disability benefits are payable to workers with disabilities, disabled widows or widowers, or adults disabled since childhood who are otherwise eligible. Auxiliary benefits may be payable to

a worker's dependents as well. The monthly disability benefit payment is based on the SSDI earnings record of the insured worker on whose Social Security number the disability claim is filed.

**Supplemental Security Income (SSI)** - The SSI program provides monthly income to people who are age 65 or older, or are blind or disabled and have limited income and financial resources. Effective January 2008, the SSI payment for an eligible individual was \$637 per month and, for an eligible couple, \$956 per moth. If only one person of a married couple is eligible, a portion of the spouse's income may be counted. In addition, the individual's financial resources (savings and assets owned) cannot exceed \$2,000 (\$3,000 if married). Individuals can be eligible for SSI even if they have never worked in employment covered under Social Security.

**Medicaid** - Medicaid is a joint federal and state program that helps with medical costs for people with low incomes and limited resources. Medicaid programs vary from state to state, but most health care costs are covered if an individual qualifies for both Medicare and Medicaid. People with Medicaid may get coverage for things like nursing care and outpatient prescription drugs that are not covered by Medicare.

**Medicare** - The federal health insurance program for people 65 years of age or older and also for certain younger people with disabilities.

**Probate** - A legal court procedure in which the assets of a deceased person are passed to beneficiaries under the provisions of a will or, if there is no will, under the state laws of intestacy.

**Remainderman** - The person(s) who will receive the remainder of a trust after the current beneficiary has died.

**Revocable Trust** - A trust, which can be revoked or amended during the life of the Grantor or according to the provisions included in the Trust Document. A revocable trust is included in the estate of the Grantor at the time of his or her death for purposes of determining estate taxes due, if any.

**Supplemental Needs Trust** - A trust used to provide supplemental care; care that is over and above what the beneficiary is able to obtain through his or her own earnings and/or through government benefits. A properly worded Supplemental Needs Trust will not jeopardize government benefits, which may, in fact, be more valuable than an inheritance.

**Successor Executor** - The person who assumes the duties of executor if the named executor is unwilling or unable to perform his/her duties.

**Successor Guardian** - The person who assumes the duty to handle finances and/or make decisions for a minor or person with a disability if the present guardian dies or is unable or unwilling perform his or her duties.

**Testamentary Trust** - A trust, which goes into effect only upon the death of the Testator (the person making a will containing a trust). The trust will go into effect after the estate is probated, which on average takes between six months and two years.

## About the Contributors

### PATRICIA FREEDMAN, ESQ.

Patricia Freedman, is the Executive Director of PLAN of Massachusetts, Inc., formerly known as MARC Trust, Inc. She has over 30 years of experience advocating for the legal rights of people with disabilities. She has written materials on a range of disability law issues for attorneys and families.. She has conducted workshops for parents and consumers and has taught courses on disability law issues at colleges and continuing legal education courses. She received a Distinguished Service Award from the North Shore ARC and a Certificate of Recognition from the Department of Mental Retardation.

### ILANA GORDON-BROWN

Ilana Gordon-Brown manages the CJP Disabilities Trust, a 3<sup>rd</sup> party pooled trust, and the CJP Disabilities Trust II, a self settled pooled trust, at Jewish Family & Children's Services. Both trusts offer families a way to provide financial security for their loved ones, without affecting government or other entitlements.

### CYNTHIA R. HADDAD, CFP® JOHN W. NADWORNY, CFP®

Co-authors of *The Special Needs Planning Guide: How To Prepare for Every Stage of Your Child's Life* (Paul H. Brookes Publishing Co., April 2007). John and Cynthia have worked together as a parent and sibling team in special needs financial planning since the early 1990s. They are nationally recognized and sought after speakers, authors and advisors on special needs planning for families. They have been on radio and quoted in publications throughout the country including *The Wall Street Journal*, *The New York Times*, *The Boston Globe*, *Business Week*, *Kiplinger's Retirement Report*, *Bloomberg Wealth Management*, *Investment News*, *The Journal of Financial Planning*, *USA Today*, and other well-known periodicals.

John has been re-appointed to the Massachusetts Governor's Commission on Mental Retardation and has been involved as either a board member or resource to several organizations dealing with individuals with special needs. John received his MBA from Babson College, his MS from Bentley College, and his BS from Bridgewater State College. He holds the professional designations of Certified Financial Planner™ Practitioner, Chartered Financial Consultant, and Chartered Life Underwriter. He lives in Melrose, MA with his wife and three children.

Cynthia is a member of the Board of Directors for The Arc of Massachusetts. She has served on the Central Middlesex Area Advisory Board for the Massachusetts Department of Mental Retardation and was a member of the committee for residential quality control. Cynthia received her BA degree in Finance and Economics from Simmons College in Boston. She holds the professional designation of Certified Financial Planner™ Practitioner and is a member of the FPA (Financial Planning Association). Cynthia lives in Belmont, MA with her husband and two children.

John and Cynthia are senior planners with Bay Financial Associates LLC and offer financial planning through Special Needs Financial Planning, LLC, a registered investment advisor, in Waltham, Massachusetts ([www.specialneedsplanning.com](http://www.specialneedsplanning.com)). They are registered representatives with and offer securities and insurance through LPL Financial, Member FINRA/SIPC.

### HARRY S. MARGOLIS, ESQ.

Harry S. Margolis founded Margolis & Bloom LLC, a four-lawyer Boston law firm, in 1987. He is a graduate of Swarthmore College and New York University School of Law. His practice concentrates on elder law, planning for individuals with disabilities, estate administration and guardianship. Mr. Margolis edits *The ElderLaw Report*, a monthly newsletter for elder law attorneys published by Aspen Law & Business. He also wrote the *ElderLaw Forms Manual* and served as founding editor of *The ElderLaw Portfolio Series*, both also published by Aspen.

Mr. Margolis is a Fellow of the National Academy of Elder Law Attorneys and of the American College of Trust and Estate Counsel. He has served on the adjunct faculty of Boston College Law School, is the founder and President of ElderLawAnswers, and a founder of the Academy of Special Needs Planners.

### TERESA M. VARNET, LCSW, ESQ.

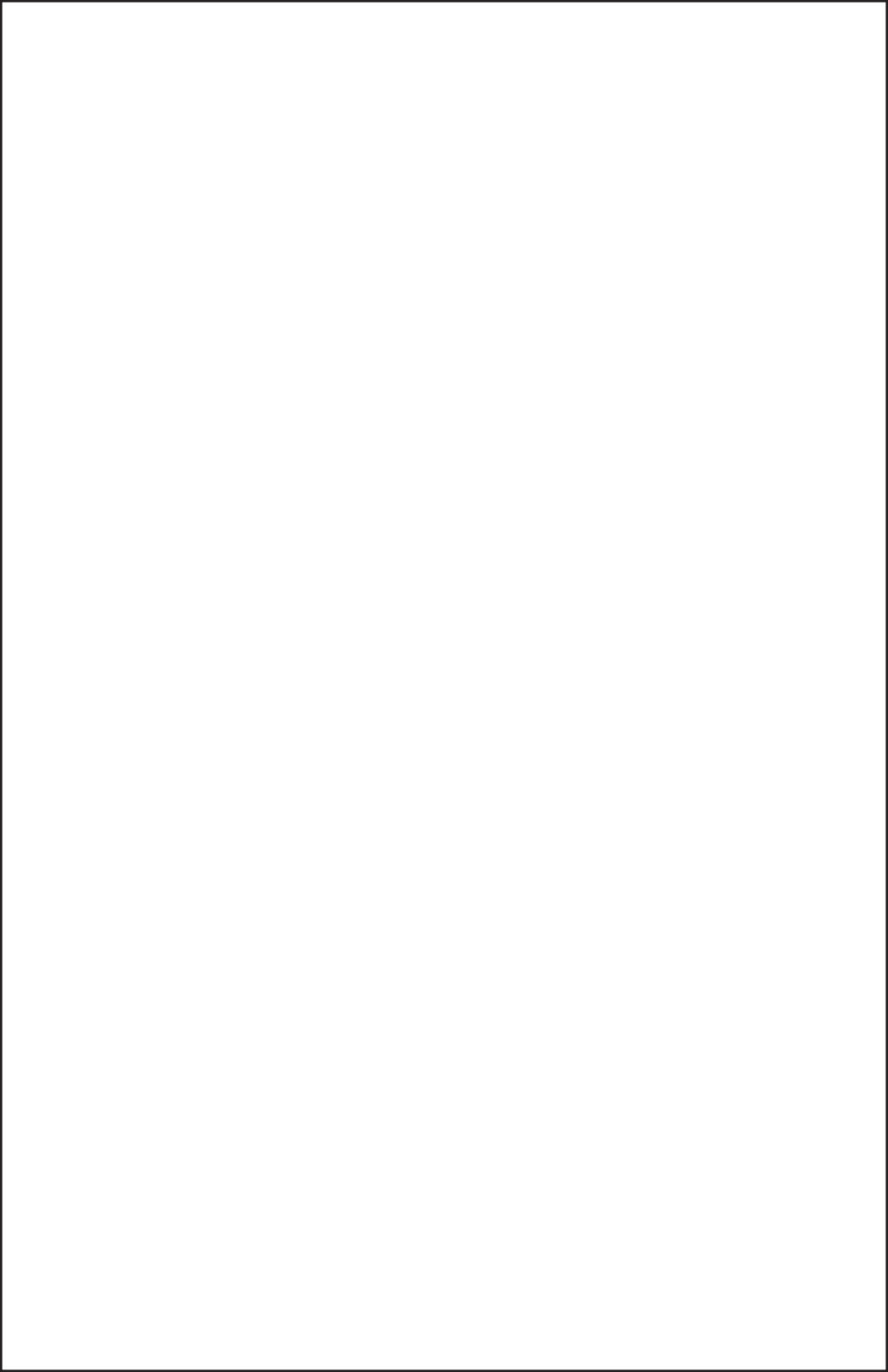
Theresa Varnet has been an advocate for persons with disabilities for over 40 years. In addition to being a certified teacher, licensed social worker and a graduate of the DePaul University College of Law, she is the parent of a disabled adult daughter. She has served as Social Services Director in a residential school for profoundly retarded children, Coordinator for a Special Education Cooperative and as a Citizen Advocacy/Disability Rights Coordinator. While living in the Sultanate of Oman, she assisted the Omani Ministry of Social Affairs in developing the first preschool program for children with handicapping conditions. Ms. Varnet is an active volunteer in the National, State and local chapters of The Arc (formerly known as the Association for Retarded Citizens), Alliance for the Mentally Ill, The Autism Society, serves on the Board of Directors for LifeStream, Inc. in New Bedford, MA, past member of the Developmental Disabilities Council in MA and KY, and past member of the Governor's Advisory Panel on Special Education in KY. She received her Masters degree in Social Work from the University of Connecticut. Her experience includes extensive work in the area of in-service training with families, special educators, social workers and other professionals. She is a frequent speaker for volunteer and professional groups and has presented nationally at the National Conferences of TASH, AAIDD, The Arc, NAELA, NADS among others. She is also the co-author, with Richard Spain, of "Home Control Through Estate and Financial Planning". Ms. Varnet has been quoted on numerous occasions in national journals and publications, including *Newsweek*, *Kiplinger Retirement Report*, *The New York Times*, *The Chicago Tribune*, *the AARP Bulletin*, and *Exceptional Parent Magazine*.

She is a member of the American Bar Association, and

the National Academy of Elder Law Attorneys. Ms. Varnet is licensed in both Massachusetts and Illinois and divides her time between Chicago and the Massachusetts office of Fletcher, Tilton & Whipple, P.C.

### GARY ZALKIN, LICSW, ESQ.

Gary Zalkin practices health and mental health law in Boston where he provides legal representation to treatment providers and families for medical and mental health treatment issues. He has also been practicing psychotherapy for thirteen years. Gary was named as one of fifteen Rising Stars by Massachusetts Lawyers Weekly in 2005. He has served as chair of the Riverside Community Care Human Rights Committee and president of the board of the MetroWest affiliate of National Alliance of the Mentally Ill of Massachusetts. He currently sits on the advisory board of the Clubhouse Family Support Project, an organization that assists mentally ill parents with child custody matters, and is a member of the Program in Psychiatry and the Law at Harvard Medical School.



## Sponsors

### **Bay Financial Associates LLC**

Cynthia R. Haddad, CFP®

John W. Nadworny, CFP®

130 Turner Street, #3, Suite 230

P.O. Box 9086

Waltham, MA 02454-9086

(781) 893-0909

[www.specialneedsplanning.com](http://www.specialneedsplanning.com)

Securities offered through LPL Financial, Member FINRA/SIPC.

Financial planning services offered through Special Needs Financial Planning LLC, a Registered Investment Advisor.

### **Fletcher Tilton & Whipple, P.C.**

161 Worcester Road, Suite 501

Framingham, MA 01710

(508) 820-9866

*Contact:* Frederick M. Misilo, Jr., Esq.

### **Jewish Family & Children's Service**

1430 Main Street

Waltham, MA 02451

(781) 647-JFCS (5327)

[jfcsboston.org](http://jfcsboston.org)

### **Margolis & Bloom, LLC**

#### **Boston Office**

535 Boylston Street

Boston, MA 02116

(617) 267-9700

Fax: (617) 267-3166

#### **Metrowest Office**

(508) 370-3900

#### **South Shore Office**

(781) 355-4144

#### **North Shore Office**

(781) 376-0509

### **Planned Lifetime Assistance Network of Massachusetts, Inc. (PLAN of Mass, Inc)**

1301 Centre Street

Newton, MA 02459

(617) 244-5552

FAX: 617-795-0589

[www.planofma.org](http://www.planofma.org)

Sponsored by:  
Bay Financial Associates LLC, Fletcher Tilton &  
Whipple, P.C., Jewish Family & Children's Service,  
Margolis & Bloom, LLC, and PLAN of Massachusetts, Inc.

Summer 2009