



ASSOCIATION OF FORMER PAHO/WHO STAFF MEMBERS

PENSION, HEALTH INSURANCE AND OTHER BENEFITS:

A Guide for Planning and Protecting Our Assets

December 2018

TABLE OF CONTENTS

	Page Number
ACKNOWLEDGMENTS	3
INTRODUCTION	4
PART I PLANNING	6
➤ Preparation	
➤ The Checklist	
○ Personal Information, Contacts and Location of Documents	
○ Financial Information	
○ Medical Information, Doctors, and Prescriptions	
○ Advanced Directives for Health Care Decisions	
PART II ENTITLEMENTS, ASSOCIATED BENEFITS AND BANKING	11
A. The United Nations Joint Staff Pension Fund	
B. WHO/PAHO Staff Health Insurance	
C. UN Life Insurance	
D. Banking	
PART III DEATH OF A RETIREE OR BENEFICIARY: NOTIFICATION OF DEATH	17
A. United Nations Joint Staff Pension Fund	
B. WHO/PAHO Staff Health Insurance	
C. UN Life Insurance	
D. Banking	
PART IV KEY POINTS: A SUMMARY OF PARTS I, II, AND III	21
PART V KEY CONTACTS, SUGGESTED LETTERS AND FORMS	23
A. United Nations Joint Staff Pension Fund	
B. WHO/PAHO Staff Health Insurance	
C. UN Life Insurance	
D. Banking	
PART VI: ADVANCED DIRECTIVES FOR HEALTH CARE DECISIONS IN THE UNITED STATES	30
➤ Living will	
➤ Powers of Attorney for Health Care – in case one becomes unable to give instructions to medical personnel	

- Wills
- Revocable Living Trust
- Durable Power of Attorney for Finances – to manage assets if one becomes incapacitated or incompetent
- Bank Accounts -instructions to one's banking institution when establishing or modifying an account's ownership

ACKNOWLEDGMENTS

The Association of Former PAHO/WHO Staff Members (AFSM) thanks Dr. Jaime Ayalde for creating the Guidebook AFSM Staff Benefits – Health Insurance, Pension, and Other Benefits of a Surviving Spouse. The original document was published in 2011 and revised in 2013 with the full knowledge and support of the administration of the Pan American Health Organization (PAHO).

This 2018 revision of the Guidebook is titled *Pension, Health Insurance, and Other Benefits: A Guide for Planning and Protecting Our Assets*. The 2018 revision was written by Ms. Nancy Berinstein, AFSM Board Member Emerita. It was reviewed by a Committee which included Germán Perdomo, Carol Collado, Jose Ramiro Cruz, by Helena Restrepo, and by Health Committee members Jerry Hanson, Gloria Morales, Haydeé Olcese, and Alfredo Ballevena. Final edition was prepared by Carol Collado, Gloria Coe, Hernán Rosenberg, and Martha Peláez. Ms. Patricia Ilijic, Vice President for Business Development of the PAHO/Federal Credit Union reviewed sections relating to PAHO/Federal Credit Union. The CHECKLIST in Part I is taken, almost verbatim, from the IMF Retirees Association (IMFRA April 2018) Guide for Advance Planning.

This document was prepared to assist us to plan and organize our estate in advance of aging, illness and death. It provides the best information, steps to take, and how to contact PAHO, the UN Joint Staff Pension Fund, WHO/PAHO Staff Health Insurance, Life Insurance, and banking when a retiree or beneficiary dies.

The Guide includes information as of 30 November 2018. Users are encouraged to check AFSM's website <https://www.afsmpaho.com> for up-to-date information. Users may also want to contact AFSM or the PWR office in their country of residence for contact information of PAHO staff currently dealing with issues covered in this guide.

INTRODUCTION

This document, while originally intended for PAHO/WHO retirees and their beneficiary¹, in its expanded version, should be of interest to staff members desiring to protect their assets.

Planning how our assets will benefit our families and beneficiaries is emotional, intellectual, and challenging. Developing our plans, as presented in *Pension, Health Insurance, and Other Benefits: A Guide for Planning and Protecting Our Assets* will require long-term commitment and understanding of legal and administrative frameworks in the countries where we live. It is suggested the user preview the Guide before slowly focusing on the content, details, and suggestions presented in each part of this publication.

It is not easy to discuss serious illnesses or eventual death. Making plans for the future of our beneficiaries may be one of the greatest gifts we can give them. We want to be certain beneficiaries know what to do if the retiree is incapacitated or dies to ensure compliance with UN policies and receipt of UN benefits.

There are three overarching areas that must be considered when planning for our beneficiaries:

- a. Designating the persons who will receive funds from the UNJSPF, WHO/PAHO Staff Health Insurance, and UN Life Insurance, if applicable.
- b. Ensuring minimal interruption for the distribution of our assets to our beneficiaries with minimal loss while meeting the legal requirements of the respective government.
- c. Providing someone with the authority to make our health care decisions if or when we are unable to do so.

This *Guide for Planning and Protecting Our Assets* presents a general overview of decisions and strategies that are important to ensure long-term financial planning. However, depending on individual and family circumstances, it may be important to review your plans with a family member and/or lawyer in your country of residence.

¹ Beneficiary refers to one or more beneficiaries.

It is recommended that those who wish to assure their benefits are handled according to their preferences, inform and review with his/her spouse, beneficiary, a close family member, and/or a close friend about the purpose, importance, and use of this document.

WISHING YOU ALL THE BEST

The content of the AFSM publication **Pension, Health Insurance and Other Benefits: A Guide for Planning and Protecting Our Assets** is presented in seven parts:

Part I Planning: discusses planning and preparing while we are in good health and able to make decisions. It includes a list of financial information vital for the beneficiary and family, originally prepared by the IMFRA.

Part II Entitlements, Associated Benefits and Banking: presents an overview provided to PAHO retirees and beneficiaries from the UN Joint Staff Pension Fund, WHO/PAHO Staff Health Insurance, UN Life Insurance, and PAHO/Federal Credit Union.

Part III Death of a Retiree or Beneficiary, Notification of Death: deals with the loss of a loved one who was a PAHO retiree or beneficiary. It explains the immediate actions required when a retiree or beneficiary dies to inform the UN Joint Staff Pension Fund, WHO/PAHO Staff Health Insurance, UN Life Insurance, and PAHO/Federal Credit Union.

Part IV Key Points: A Summary of Parts I, II, and III: summarizes and highlights key points to remember from Parts I, II, and III.

Part V Key Contacts, Suggested Letters and Forms: presents information and forms needed to inform the UN Joint Staff Pension Fund, WHO/PAHO Staff Health Insurance, UN Life Insurance, and PAHO/Federal Credit Union of the death of a retiree or beneficiary.

Part VI Advanced Directives for Health Care Decisions in the United States: presents information on processes in the US that may be relevant in other countries. In time, we hope to expand our coverage by looking at systems elsewhere in the Americas.

Part VII Estate Planning in the United States: presents information on processes in the US that may be relevant in other countries. In time, we hope to expand our coverage by looking at systems elsewhere in the Americas.

PART I PLANNING

Preparation

Part I discusses the need to undertake financial and estate planning well before aging, illness or death. The following proposed actions should make things easier and reduce the stress and bewilderment of beneficiaries and families when they lose a loved one. The goal is to make difficult times as easy as possible for you and your loved ones.

Begin by creating a list of PAHO/WHO benefits, your financial assets, outstanding loans, investment and insurance accounts and policies. Make certain it is clear and understandable. Place this information and relevant documents in a secure place and leave written guidance including passwords to electronic accounts. When creating this list, you may choose not to include account numbers or other sensitive information. Instead, include a note stating where the sensitive information, including passwords, can be found. If your list and other legal documents are in a safe deposit box, be sure to include the name and address of the bank and who has a key or knows where it is. It is recommended the list be periodically reviewed with your family or friend, perhaps every six months, to ensure everything is updated.

THE CHECKLIST²

Date of Last Update: _____

Personal Information, Contacts and Location of Documents

Retiree's name and ID as listed on PAHO Staff ID

² Copied and pasted, almost verbatim from: IMF Retirees Association (April 2018), Guide for Advance Planning. https://docs.wixstatic.com/ugd/6814f4_7cb2e6b81a3f416db36250266a80c729.pdf

Name _____

PAHO Staff ID _____

1. Personal Information

The items below should be recorded and the physical location of the print and/or electronic material indicated. It is advisable to have a scanned copy of all-important documents and store them on a key or external drive for safekeeping.

- a. US Social Security Number
- b. US Medicare number and parts of coverage/national medical card
- c. WHO/PAHO Health Insurance ID and Group number(s) PAHO-provided and other coverage
- d. Birth certificate
- e. Passport(s) number(s) and date(s) of expiration
- f. US Driver License/national Identity card number
- g. Certificate of Naturalization (if relevant)
- h. US Green Card number (if relevant)
- i. Marriage certificate(s) (if relevant)
- j. Divorce decree(s) (if relevant)
- k. Property settlement agreement(s) (if relevant)
- l. Military service and discharge documentation (if relevant)

2. Immigration

Because of the international character of PAHO employment, residencies are often established in countries of which the participant/family members may or may not be citizens. In this case, identify the legal residency status of each person, and the current decisions as to whether to change the residency status to citizenship and take steps to complete the requirements. If you have applied already for change of residency status, record the following for each person:

- a. Date petition filed
- b. Nature of petition (residence or citizenship)
- c. Status of the petition (pending, additional information provided, etc.)
- d. Name address and telephone number of immigration attorney, if any
- e. Place where relevant papers are filed and can be found

- f. Name and address of nearest embassy or consulate responsible for citizens of your nationality

3. Email and Social Media Accounts

List all emails and social media accounts with user name, passwords, and security Q&A (question and answer). Some of these (e.g., Google) will permit you to designate secondary holders in the event of no activity for an extended period of time.

Financial Information

It is critical that all the details of your financial life be recorded and saved to avoid missed payments and possible credit damage.

4. Bank and Credit Union Accounts

For each of your Credit Union and outside bank accounts record the following details:

- a. Name of the institution
- b. Type of account (checking, savings, etc.)
- c. Title of the account
- d. Account number
- e. Name of the joint account holder, if any
- f. User name, password and security Q&A, if you have online access.
- g. Location of checkbook and other bank/credit union-related documents
- h. Power of attorney (if established)
- i. Beneficiaries (if designated)
- j. Automatic bill-paying arrangements

5. Safe Deposit Boxes, Other Storage Facilities, Mail Boxes

If you have safety deposit boxes in banks or lockers, record:

- a. Name of bank
- b. Address
- c. Box/locker number
- d. Place where locker keys are stored
- e. Access arrangements
- f. Payment arrangements

6. Home(s) Mortgage

If you have an outstanding home mortgage, primary as well as secondary, record the following details:

- a. Name of the mortgage financing institution
- b. Account number
- c. Original amount of the mortgage
- d. Maturity date of mortgage payments
- e. User name, password and security Q&A, if you have online access
- f. Name of the secondary mortgage/home equity loan financing institution
- g. Account number(s)
- h. Original amount of the secondary mortgage/home equity loan
- i. Maturity date of the secondary mortgage/home equity loan
- j. User name, password and security Q&A, if you have online access to secondary mortgage/home equity account
- k. Location of all home mortgage related documents can be found

7. Other Loans or Financial Obligations

Describe same details as in 6 above for all other consumer loans or borrowings such as auto loans, personal loans, capital item financing, etc. If your automobile is fully paid, indicate where the car title can be found.

8. Credit and Debit Cards

For each of your credit and debit cards, irrespective of whether you use them, record the following details:

- a. Credit/debit card
- b. Name as listed on the credit/debit card
- c. Card number
- d. Expiration date and security code
- e. Additional users of the card
- f. Address and phone number of card issuer.
- g. Credit limit
- h. User name, password and security Q&A, if you have online access
- i. Place where you keep your credit/debit cards
- j. Automatic bill-paying arrangements on card

9. Investments

For each investment account describe the following details:

- a. Name and address of broker
- b. Account number
- c. Type of account

- d. User name, password and security Q&A, if you have online access
- e. Place where relevant papers are filed and can be found
- f. Automatic transfers in and out of these accounts
- g. Designated beneficiaries of these accounts

10. Properties (Real Estate)

Record details of properties you own or lease, individually or jointly:

- a. Describe property (home, condo, land, etc.)
- b. Address of property and any designations
- c. Name(s) of co-owner, if any
- d. Purchase price/amount you invested and current obligations
- e. Name, address and telephone number of tenant(s), if relevant
- f. Copy of the property title or lease and title insurance, if relevant
- g. Place where relevant documents are filed and can be found
- h. Any special arrangements you may have made with co-owner(s)

11. Insurance Policies

For each of your insurance policies (home, life, automobiles, umbrella, etc.), record:

- a. Name of insurance company
- b. Address
- c. Telephone number
- d. Type of policy
- e. Policy number
- f. Designated beneficiaries of life insurance policy
- g. User name, password and security Q&A, if you have online access
- h. Payment arrangements

12. Taxes (country, state and local, property plus any other country taxes)

For any country of residence, state, and local taxes as well as any foreign taxes owed, record the following details:

- a. Latest year of the taxes filed
- b. Are you current on your tax filings/date of next installment(s)
- c. If not, describe the backlog
- d. If you use tax preparation software indicate where the software and files are located and access to the provider
- e. Place where your tax returns and supporting documents be found
- f. If someone else prepares your taxes, be sure to have those details and contact information recorded

Medical Information, Doctors, and Prescriptions

Provide information for each of your doctors and all medications you take. If you have created a medical power of attorney, privacy maintenance and sharing provisions or release documents, Living Will, and other medical instructions, be sure to make your family and physicians aware of these and provide copies of the relevant documents to your representatives.

13. Record:

- a. Name of doctor
- b. Address
- c. Telephone number
- d. Nature of medical treatment
- e. Prescription(s) name, dose, how obtained, precautions
- f. Privacy maintenance or sharing/release of information documents
- g. Living Will and/or Durable Power of Attorney for Health Care Decisions
- h. Method of payment (self-pay, insurance, other arrangements)
- i. Current status of payments or claims submitted to insurance

PART II

ENTITLEMENTS, ASSOCIATED BENEFITS AND BANKING

A. The United Nations Joint Staff Pension Fund (www.unjspf.org)

PAHO/WHO former staff members who are fully vested enjoy pension coverage from the time of their retirement until the day they die. The United Nations Joint Staff Pension Fund (UNJSPF) has an excellent web site that provides information on participation and eligibility of the retiree and beneficiaries. The reader is encouraged to go to www.unjspf.org and become familiar with the knowledge needed to manage one's pension benefits. Retirees are encouraged to also share this information with a close friend, spouse, family member, or legal representative.

It is important to ensure the staff member, retiree and beneficiary are eligible for benefits from the UNJSPF. Consult PAHO's Human Resources Management (HRM) if there are any questions. While employed by PAHO or at the time of separation, the following documents must be submitted to identify the beneficiary:

- Marriage certificate
- Divorce decree(s) if applicable
- Birth certificates for the staff member and the survivors /beneficiaries
- Official identification documents for survivors/beneficiaries (the first few pages of a valid passport should be acceptable)

Based on these documents and the preferences of the staff member or retiree, UNJSPF will identify who are the beneficiaries.

AFSM Geneva suggests staff members while employed with PAHO, register on the UNJSPF website and electronically submit their passport or ID card and a copy of the marriage license and birth certificate of the spouse. Alternatively, a retiree could prepare a paper file containing the required documents and information, including PENS E2, available on the UNJSPF website. It is highly recommended you register with the UNJSPF MSS to access real-time information on your personal account. Please see website: <https://www.unjspf.org/member-self-service/>

Beneficiaries:

In general, the pension benefit for a surviving spouse is equal to **one-half of the full** retirement or disability benefit paid to a retiree **regardless of whether a partial lump sum was withdrawn**. In the case of a deferred benefit that has not yet been paid, the benefit is equivalent to half the actuarial value of the benefit on the date of the retiree's death.

Provisions are made for disabled children, a secondary dependent, and divorced surviving spouse if the circumstances fit the regulations. Again, for details consult the United Nations Joint Staff Pension Fund website: <https://www.unjspf.org/member-self-service/>

Under Articles 34 and 35 of the Regulations, the surviving spouse benefit is payable to:

1. The surviving husband or wife of a retiree who was entitled to a pension, early retirement, deferred retirement, or disability benefit if the surviving spouse was married to the staffer at the date of separation from service and remained married to him/her until the staff member's death, or

2. The surviving spouse of a retiree who died in service, if the surviving spouse was married to the retiree at the date of his/her death in service.

Retirees who have been married more than once may wish to consult with UNJSPF for additional details. For a full explanation of benefits, please consult: <https://www.unjspf.org/documents/survivors-benefits/>

Terms and Acronyms Used by The United Nations Joint Staff Pension Fund

Participant: Refers to an active staff member contributing to the Fund in accordance with articles 21 and 25 of the Regulations of the Fund

Retiree: Refers to a former staff member who has officially separated from the service of his/her employing organization and is entitled to a periodic benefit from the United Nations Joint Staff Pension Fund

Beneficiary: Refers to a person entitled to a survivor's benefit (widow/widower, child, divorced surviving spouse, secondary dependent) or to a one-time payment from the United Nations Joint Staff Pension Fund (a residual settlement). There are circumstances when a retiree may have more than one beneficiary; please carefully review UNJSPF website

Unique Identification number (UID): This ten-digit number issued to all participants in 2016; it will eventually replace both the Pension number and the Retirement number in the UNJSPF

Member Self-Service (MSS): It is a portal for active staff, former staff and beneficiaries. It's highly recommended that you register with the UNJSPF MSS to be able to access real-time information on your personal account. Please see website: <https://www.unjspf.org/member-self-service/>

Pension number: The number previously given to one as an active staff member that is being replaced by UID

Retirement number: The number previously given to one upon retirement. This is the number that was used in correspondence with the United Nations Joint Staff Pension Fund that is being replaced by UID

Separation from service: Refers to the act by which a participant ceases to be employed by a member organization of the UNJSPF other than by death.

B. WHO/PAHO Staff Health Insurance

(<http://www.who.int/formerstaff/issues/insurance/en/>)

PAHO/WHO staff members participate in an excellent health insurance program that includes some dental and eye care coverage and can be used in almost every country in the world.

Benefits:

The continuation of this coverage remains available to the staff member, the spouse, and special needs family members after retirement upon completion of a WHO 90.3 form. Staff Health Insurance (SHI) deducts premium payments automatically from the pension - even after the death of the former staff member. In special cases where pension payments are not received, SHI will implement separate billing and payments.

A small percent of the UNJSPF pension is deducted to cover the cost of WHO/PAHO Staff Health Insurance. For example, although the cost varies by year, the deduction in 2018 amounted to 2.4 percent of the pension each for the retiree and the spouse. Other dependents have different rates as stated in the WHO/PAHO Staff Health Insurance Rules.

It is recommended that family members become familiar with filing health insurance claims as soon as possible.

In January 2018 SHI indicated that a staff member may give written authorization (email will suffice) to allow SHI to communicate with your partner. You may also consider designating a legal representative who can sign your claims, if you're not able to do so. There are two options:

1. If you choose a close relative (spouse, son or daughter), the procedure is straightforward. You simply send a letter to SHI authorizing the chosen person to submit claims on your behalf and attach a copy of his/her identity document.
2. If you choose a person other than a close relative, you must have the authorization endorsed by a solicitor (legalized proxy) before sending to SHI.

The most recent copy of WHO/PAHO Staff Health Insurance Rules is in the Document section of: AFSMPAHO.com. Staff members and retirees periodically receive information from WHO Geneva detailing changes in coverage. In the future this communication will most likely be digital.

C. UN Life Insurance (email: HRM@paho.org)

Many WHO/PAHO staff members had access to two group life insurance plans during their years of service. If applicable to the retiree, it is important to clarify whether the retiree chose to continue the policy(ies) in retirement. The retiree or beneficiary should contact PAHO's Human Resources Management Area (AM-HRM) to establish if there are life insurance benefits to which the beneficiary is entitled and how to contact the life insurance company.

D. Banking

Many former WHO/PAHO staff members receiving a United Nations pension have one or more bank accounts in the United States, be they checking, savings, money market accounts, and/or certificates of deposit (CDs, also called "term share accounts" or TSAs in some banks).

Most banks in the United States usually have similar legal procedures. It is important to learn the regulations for your bank in the country where you have an account.

Dormant Accounts

Financial institutions in the US are required to regularly monitor dormant accounts. **After 3 years of inactivity (or time prescribed by the State), they are required to deposit the balance of dormant accounts to the government of the State or of the District of Columbia.** This applies to all funds in all US financial institutions. **It is critically important to conduct at least one transaction every twelve months to avoid the possibility of a monthly dormancy charge of \$5.00, or the loss of monies after a three-year dormant period.**

Many estate and financial problems the beneficiary faces could be avoided by simple steps. Contact your bank or credit union and select the most convenient mechanism to protect your funds and your loved ones.

PAHO/Federal Credit Union (<https://www.pahofcu.org/>)

A banking institution that serves many current and former PAHO staff members is the PAHO/Federal Credit Union. Their office is in Columbia Plaza, across 23rd Street NW from the main PAHO building.

How to name a beneficiary:

A single or joint account holder may add the name of a beneficiary. The PAHO/Federal Credit Union accepts the designation of beneficiaries by mail of existing accounts. However, it is not enough to send a letter to the Credit Union. A PAHO/ Federal Credit Union account holder must complete the Member Account Agreement. The form is on the PAHO/ Federal Credit Union website at www.pahofcu.org under Quick links and Applications and Forms.

Types of Bank Accounts available at PAHO/Federal Credit Union:

- a. Joint bank account with other person(s) with the agreement that assets are Payable on Death (POD) to the surviving beneficiary. In such case, the bank pays the balance in the account to the beneficiary generally upon submission of a certificate of death and identification. The retiree can have several accounts with different beneficiaries in a single bank.
- b. Joint account with one or more persons not payable on death. For accounts not POD, the retiree must have a Will stipulating to whom assets, including his/her share of the joint account, are to be distributed. Members residing in the US are referred to an attorney for this purpose.
- c. Accounts solely in the name of the retiree. Your Will must indicate to whom the money in the account will go. The money can also be a part of a general distribution along with other assets in your estate. In the US, to avoid probate³, you should put your bank account in a Living Trust.

³ Probate is the legal process of transferring the property of a deceased person to the rightful heirs if you prepared only a Will and do not have a Revocable Living Trust.

PART III

DEATH OF A RETIREE OR BENEFICIARY NOTIFICATION OF DEATH

After completing 10 years as a contributing member of PAHO/WHO, former employees are entitled to benefits through the UN Joint Staff Pension Fund, WHO/PAHO Staff Health Insurance, and some may have benefits from Life Insurance policies.

When a United Nations retiree, beneficiary, or their recognized dependent dies, **it is very important that PAHO/WHO Headquarters in Washington, DC and the United Nations Joint Staff Pension Fund in New York be notified as soon as possible.** If the retiree had an Aetna Life insurance policy the company office in New York should also be notified, if necessary, with the help of PAHO/HRM.

DEATH CERTIFICATE

As one begins to make arrangement after a death, it is strongly recommended that you get enough certified copies of the death certificate to provide one each for the UN Joint Staff Pension Fund, WHO/PAHO Staff Health Insurance, life insurance agencies, and banks or credit unions where the deceased had accounts.

If the deceased is an American citizen and dies in another country, the American Embassy in that country may be contacted to obtain a certified copy in English of the death certificate.

A. United Nations Joint Staff Pension Fund (www.unjspf.org)

Upon the death of a retiree or beneficiary, a family member or other representative must notify the UNJSPF and provide a certified copy of the death certificate and a completed and signed form called the PENS.E/2. The form is included in Part V, A of this Guide and is entitled “Instructions for Payment of Disability or Death Benefits”. Also, an accompanying letter that you may use to contact the UNJPF is included on Part V, A.

UNJSPF in New York will take official action only when the above documents have been received through the postal service. UNJSPF will not accept the certified copy of the death certificate or form as an email attachment. The

UNJSPF beneficiary will only be eligible to receive the identified pension coverage if all the necessary documentation is submitted.

The quickest way to notify UNJSPF of death is by sending an Email to: **Deathrelated@unjspf.org**. For more detailed information go to:

1. **www.unjspf.org**
2. Put your cursor on the “Urgent Assistance” Tab as the United Nations Joint Staff Pension Fund gives priority to messages sent through the Urgent Assistance option.

A model cover letter is included in Part V, A for your convenience. Using a courier company, if outside the United States, may be appropriate. The beneficiary must be prepared to provide an official legal signature that is witnessed and certified as authentic. Although wives are sometimes registered by their maiden name, UNJSPF registers them with their married name. Be certain to use the same legal name as is registered with UNJSPF. Always have readily available an electronic copy of the most recent legal document with the beneficiary’s full legal name and signature (such as the main page of a national passport with both on the same page).

There are cases where the beneficiary may not be able to work with a computer. In this case, PAHO is prepared to assist the retirees’ family at the time of passing of the former staff member. They will work with you as a mediator to collect the information to send UNJSPF. However, PAHO suggests it will be more efficient if, after contacting SHI, you contact the UNJSPF. The time saved by taking personal action will hasten the UNJSPF’s ability to continue payments to the surviving beneficiary.

Annual UNJSPF correspondence is sent to almost 204,000 individuals in 190 countries. Due to UN security concerns, incoming correspondence goes through an external screening process which can result in delays. It can be difficult corresponding directly with UNJSPF. Hence it is recommended to carefully follow instructions regarding completion of forms; use only originals with your personal signature. Do not use emails or faxes to send important documents since this may seriously impede the process.

Pension Payments

UNJSPF will stop pension payments starting the first day of the month following the receipt of the information of the death of a retiree or beneficiary. If UNJSPF is not notified, it may continue depositing the monthly pension. However, it will recover overpayments upon receipt of information of the death of a retiree or beneficiary at the New York or Geneva office. **An adjustment will be made in the amount mistakenly disbursed prior to resuming benefit payment.**

If you do not live in the United States, the Country PWR can be of assistance.

B. WHO/PAHO Staff Health Insurance

(<http://www.who.int/formerstaff/issues/insurance/en/>)

When a retiree or beneficiary dies: PAHO SHI must receive (1) a certified copy of the death certificate and (2) completed WHO form 90.3 entitled “WHO Staff Health Insurance-Application for Continued Participation After Retirement”. SHI/PAHO will take official action only when the above documents have been received through the postal service. PAHO will not accept the certified copy of the death certificate or forms as an email attachment.

To be eligible to continue participation in the Staff Health Insurance, a beneficiary must:

- 1. Be insured on the day the retiree dies**
- 2. Apply for continued participation within 90 days of being informed by the SHI Officer that SHI participation may be continued. SHI will send the beneficiary Form WHO 90.3 which must be returned to SHI within 90 days. Failure to meet the 90-day deadline will exclude all future participation in Staff Health Insurance.**

To move the system even more quickly, complete and attach **Form 90.3**, included in Part V, A of this Guide. The form is entitled “WHO Staff Health Insurance Application for Continued Participation After Retirement”.

PAHO retirees and their beneficiaries located outside the United States may contact the PAHO Country Representative for assistance.

C. UN LIFE Insurance (email: HRM@paho.org)

If the retiree or beneficiary had life insurance and died, be sure to follow the insurance instructions to collect the insurance. In case of doubt, the retiree or beneficiary should contact PAHO's Human Resources Management Area (AM-HRM) to establish if there are life insurance benefits to which the beneficiary is entitled and how to reach the life insurance company.

D. Banking

If an account is owned only by the retiree, the financial institution is generally required to close or freeze accounts as soon as the owner's death is reported. Checks that have not yet cleared are returned and all automatic payments are rejected. In this case the existing funds will go through the normal US probate process which requires a lawyer and typically takes 24 months.

Be certain your bank accounts are PAYABLE ON DEATH (POD) or are joint accounts with a right of survivorship. When the retiree dies, the immediate family or designated beneficiary will need to pay ongoing bills and outstanding debts. Upon death, a POD will permit the survivor to have immediate access to monies in the bank account. This ensures immediate access of the beneficiaries to the liquid assets. To record the beneficiary under POD, it is advisable that the retiree visit the bank in person and sign the required POD documents. If a POD has not yet been prepared, it will be important to discuss it with the bank(s).

PAHO/Federal Credit Union (<https://www.pahofcu.org/>)

At the time of death, the beneficiary must send PAHO/Federal Credit Union (1) a certified copy of the death certificate and (2) proof of the identification of the beneficiary. These legal documents enable the beneficiary to pay bills and have access to the account.

After being informed of the death of a PAHO staff member or retiree, the PAHO/Federal Credit Union will not accept deposits such as deposits from the UN Joint Staff Pension Fund to the account of the deceased. If the account is jointly owned with the beneficiary, the surviving joint owner must open a new account under his/her signature. The PAHO/Federal Credit Union will place a hold on the last two UN Joint Staff Pension Fund deposits until the beneficiaries' pension deposit is made to the new

account. This generally applies to everyone. However, depending on the circumstances, exceptions can be made.

It can sometimes take UNJSPF four to eight weeks to change the name on the account to the beneficiary from the name of the retiree. The new membership application by the beneficiary will replace those existing in the PAHO/Federal Credit Union files. In addition, in each instance, every member listed in the account must provide copies of identification documents, such as passport, driver's license, or national identity document.

Form W-8 BEN is available on the PAHO/Federal Credit Union's Web Site with instructions on how to complete it. Form W-8 BEN certifies to the Internal Revenue Service (IRS) that an individual is not a US citizen or legal resident for withholding income taxes. W-8 BEN informs the IRS the income is tax-free which includes interest, dividends, rents, royalties and annuities. **W-8 BEN is used during an audit to support a 30% tax rate. It is important to keep Form W-8 BEN up to date to ensure the correct amount of tax is withheld from your income.** Recovering incorrectly withheld taxes from the IRS is costly and time consuming.

PART IV

KEY POINTS: A SUMMARY OF PARTS I, II, AND III

1. Share this document with a friend or family member. Help them become aware of action to be taken in planning and in case of death to ensure that beneficiaries continue to receive funds from UNJSPF, are covered by WHO/PAHO Staff Health Insurance through SHI, and life insurance (if applicable). This includes ensuring the beneficiary registers their banking information with both UNJSPF and PAHO SHI.
2. There are three overarching areas that must be considered when planning for our beneficiaries:
 - a. Designating the persons who will receive funds from the UNJSPF, WHO/PAHO Staff Health Insurance, and UN Life Insurance, if applicable.

- b. Ensuring minimal interruption for the distribution of our assets to the beneficiaries with minimal loss while meeting the legal requirements of the respective government.
 - c. Providing someone with the authority to make our health care decisions if or when we are unable to do so.
- 3. Acquaint yourself with the United Nations Joint Staff Pension Fund Website (unjspf.org) and especially the section on benefits for the beneficiary: <https://www.unjspf.org/documents/survivors-benefits/>.
- 4. **Upon the death of a PAHO retiree or beneficiary**, the survivor is expected to promptly submit to:
 - a. **UNJSPF in New York** a certified copy of the death certificate and completed form PENS E/2 (please see Part V, B).
 - b. **Staff Health Insurance Office (SHI) at PAHO** a certified copy of the death certificate and completed WHO form 90.3
 - c. **The beneficiary will receive from and must return to SHI, Form WHO 90.3 within 90 days. Failure to meet the 90-day deadline will exclude the beneficiary from all future participation in Staff Health Insurance.**
 - d. If the pension is deposited in the **PAHO/Federal Credit Union**, the survivor must send a certified copy of the death certificate and inform immediately of the death of the account holder. Registration of a new bank account by UNJSPF may take approximately four to eight weeks.
- 5. **UN Life Insurance:** If the retiree or beneficiary had life insurance and died, follow the instructions to collect the insurance.
- 6. **Banking:** Contact your bank(s) to protect your funds and your family by opening a joint account with the beneficiary and/or sign a POD. If you do not have a joint account or a POD, the pension funds will be returned to UNJSPF when the bank is informed of the death.

**PART V
KEY CONTACTS, SUGGESTED LETTERS AND FORMS**

A. United Nations Joint Staff Pension Fund (www.unjspf.org)

By telephone: 1(212) 963-6931 or 1(833) 668-6931 (US toll Free)
By fax: 1(212) 963-3146

In person:
37th floor
1 Dag Hammarskjold Plaza (DHP)
Corner of 48th Street and 2nd Avenue

In person visits, daily (except Thursdays) from 9 am to 5 pm, Monday through Friday. No appointment is needed. Walk-in register and a Client Service staff member will be with you.

IF DOCUMENTS ARE SENT BY REGULAR POSTAL MAIL:

United Nations Joint Staff Pension Fund
c/o United Nations
P.O. Box 5036
New York, NY 10163-5036
USA

IF DOCUMENTS ARE SENT BY EXPRESS COURIER (DHL, ETC.) OR REGISTERED MAIL

United Nations Joint Staff Pension Fund
37th floor, 1 DHP
885 Second Avenue
New York, NY 10017
USA

SUGGESTED LETTER TO THE UNITED NATIONS JOINT STAFF PENSION FUND

Date

United Nations Joint Staff Pension Fund
c/o United Nations
P.O. Box 5036
New York, NY 10163-5036
USA

Subject: Request for continuity of pension

This is to inform you of the death of my husband/wife, Mr./Mrs. _____, a United Nations retiree, retiree number _____ and UID number 0000_ _ _ _ _.

He/She died in _____ (city and country) on ____ (month) ____ (day) ____ (year).

Please make arrangements so that I, _____, his/her surviving (spouse, child, or dependent) will continue to receive pension benefits to which I am entitled under the rules of the United Nations Joint Staff Pension Fund.

For payment of my pension benefits, please find attached form PENS E/2, "Instructions of Payment of Benefits-Disability and Death Benefits," with my signature duly certified as authentic by _____ (an official from the UN Office, the PAHO Representative or the Chief of Administration of the PAHO/WHO Office in the country, or Notary _____ (Name, and No. of license) of the city of _____).

An official copy of his/her death certificate is attached. Please feel free to contact me if you need further information.

Thank you in advance for your prompt attention to this request.

Sincerely,

Signature, address, telephone number, email address if possible

Note: To obtain a clear Form PENS E/2, go online to www.unjspf.org, click on English or French; (there is no Spanish). On the Welcome page; click on FORMS, then ALL FORMS and scroll down to PENS.E/2. You may complete it on line, print it, sign it with dark pen, enclose it along with the cover letter and the death certificate and mail it to the UNJSPF. Forms PENS E/2 and WHO 90.3 area available on the AFMS website. It is important to acquaint yourself with these forms. Other UN forms may be found using the same instructions.

UNITED NATIONS JOINT STAFF PENSION FUND

INSTRUCTIONS FOR PAYMENT OF DISABILITY OR DEATH BENEFIT(S)

IMPORTANT
Please Enter Pension Number

PLEASE PRINT OR TYPE

--	--	--	--	--	--

Important Notes:

- I. Use this form to submit payment instructions **ONLY** for Disability or Death benefits payable under the UNJSPF Regulations. For other types of benefits, please obtain the appropriate form from the Secretary of your Staff Pension Committee or the Pension Fund's website: unjspf@un.org.
- II. Check the appropriate box below for the type of benefit to which you are entitled under the UNJSPF Regulations.
- III. All sections of the form overleaf should be completed and the form should be signed by you as a beneficiary of the UNJSPF. When completing the form, please bear in mind that your benefit must be paid to a bank account in your name or to a joint account which includes your name. Only in exceptional cases, where a beneficiary does not have a bank account and is unable to open one, can payment be sent in care of a UN office. Payment cannot be remitted to a mailing address, nor can it be made to third party. Your signature on the form must be duly authenticated or witnessed, either by an officer of the United Nations or a local governmental authority. The full name, official title and signature of the Official authenticating your signature and their stamp/seal of office must be affixed to this form. If your signature is not authenticated or witnessed, your payment instructions will be returned which will delay the processing of your benefit.
- IV. You are invited to provide Emergency contact details, for use by the UNJSPF **ONLY** when all efforts to reach you through normal channels fail.
- V. For assistance in filling out this form, please consult with the Secretary of your Staff Pension Committee.
- VI. Upon completion, submit both pages 1 & 2 to the Secretary of your Staff Pension Committee.

TYPE OF BENEFIT DUE UNDER THE UNJSPF REGULATIONS:

- | | |
|---|--------------------------|
| a) Disability benefit (Article 33) | <input type="checkbox"/> |
| b) Widow's benefit (Article 34) | <input type="checkbox"/> |
| c) Widower's benefit (Article 35) | <input type="checkbox"/> |
| d) Divorced surviving spouse's benefit (Article 35 bis) | <input type="checkbox"/> |
| e) Annuity for spouse married after separation (Article 35 ter) | <input type="checkbox"/> |
| f) Child's benefit (Article 36) | <input type="checkbox"/> |
| g) Secondary dependant's benefit (Article 37) | <input type="checkbox"/> |
| h) Residual settlement (Article 38) | <input type="checkbox"/> |

UNITED NATIONS JOINT STAFF PENSION FUND

INSTRUCTIONS FOR PAYMENT OF DISABILITY OR DEATH BENEFIT(S)

PLEASE PRINT OR TYPE

IMPORTANT
PLEASE ENTER PENSION NUMBER

I, _____
(SURNAME) (FIRST) (MIDDLE)

--	--	--	--	--	--

hereby submit payment instructions for the benefit(s) that becomes (become) payable under the UNJSPF Regulations.

CURRENCY OF PAYMENT: _____
(Please Specify)

ACCOUNT TYPE: _____
(Checking/Savings)

NAME OF FINANCIAL INSTITUTION	BANK ACCOUNT NUMBER / IBAN
(SWIFT CODE of Financial Institution)	Please provide any other bank identifiers like local routing codes (e.g., ABA, ABI/CAB, BLZ, Sort code, etc.)
(ADDRESS)	
(CITY, STATE, POSTAL CODE, COUNTRY)	

NOTE: To facilitate transfer of funds, please provide a document from your bank indicating bank codes and preferred routing for international payments.

My Contact details:

Mailing Address: _____
(Street)

(City) (Zip code)

(State) (Country)

E-Mail: _____
Telephone Number: (_____) _____ - _____

Emergency Contact Details:

Name / Relationship: _____
Mailing Address: _____

E-Mail: _____
Telephone Number: (_____) _____ - _____

Date: _____
(Day) (Month) (Year)

Beneficiary's Signature ¹

IMPORTANT: BENEFICIARY'S SIGNATURE WITNESSED, VERIFIED AND CERTIFIED AS AUTHENTIC BY:		
_____ (Print Full Name of UN Officer or Governmental Authority)		
_____ (Official Title)		
_____ (Signature) ¹	Date: _____ (Day) (Month) (Year)	
AFFIX OFFICIAL STAMP HERE		

¹ The completed form bearing ORIGINAL SIGNATURES must be submitted to the Fund; no faxes or e-mails will be accepted.

B. WHO/PAHO Staff Health Insurance (SHI)
(<http://www.who.int/formerstaff/issues/insurance/en/>)

Pan American Health Organization
Att: Staff Health Insurance
525 23rd Street NW
Washington, D.C. 20037
Email: SHI@paho.org
Fax: 202 974-3715
Tel: 202 974-3341

WHO form 90.3 is not yet on line, but a copy is included in this document, and it is also available on the AFSM website, under the tab “Documents” and “Forms”. It can also be obtained by contacting the SHI office at PAHO.

C. UN Life Insurance

Pan American Health Organization
Att: Human Resources Management (HRM)
525 23rd Street NW
Washington, DC 20037
Email: HRM@paho.org

AM-HRM UN
Health and Life Insurance Section
United Nations
Room FF-300, 3rd Floor
304 E 45th St
New York NY 10017
Website:

D. Banking
(<https://www.pahofcu.org/>)
PAHO/Federal Credit Union
2112 F Street, NW Suite 201
Washington, DC 20037-2761
Phone: 1 202-974-3453
Email: fcu@pahowhofcu.org.

**WHO STAFF HEALTH INSURANCE
APPLICATION FOR CONTINUED PARTICIPATION UPON RETIREMENT**

For details of eligibility please refer to the Staff Health Insurance Rules (e-Manual III.20 Annex 7.A)

Staff member (or surviving spouse/dependant)					
Full name		Date of birth		Marital status	
Date of separation from service		Staff No.	UNJSPF No.		
<input type="checkbox"/> I am retiring from WHO on or after my fifty-fifth birthday and have completed at least 10 years' participation in the Staff Health Insurance, of which 5 years have been continuous, in accordance with the SHI Rules <input type="checkbox"/> I am retiring from WHO at official retirement age and have completed at least 5 continuous years' participation in the Staff Health Insurance in accordance with the SHI Rules. I agree to pay the lump sum required for each year or portion of a year that my participation is short of 10 years. <input type="checkbox"/> I am separating from service upon the award of a disability benefit by the UN Joint Staff Pension Fund. <input type="checkbox"/> I am the surviving spouse/dependant of a deceased staff member/retired staff member.					
I wish to continue to participate in the WHO Staff Health Insurance together with my eligible family members listed below who are already insured.					
Spouse (already insured)					
Name		Date of birth		Date of marriage	
<input type="checkbox"/> My spouse has less than 10 years' participation in the Staff Health Insurance. I agree to pay the lump sum required for each year or portion of a year that participation is short of 10 years.					
Children (already insured)			Retiree provides main & continuing support for child	If the child is 18 or over	
			Yes	Child attends school or university full-time?	Child is gainfully employed?
			Yes	Yes	No
			No	Yes	No
Name			Date of birth		
			Yes	Yes	No
			No	Yes	No
			Yes	Yes	No
			No	Yes	No
			Yes	Yes	No
			No	Yes	No
Secondary dependant (already insured)			Mother	Father	Brother
			Yes	Yes	Yes
			No	Yes	No
Name			Date of birth		
<input type="checkbox"/> My recognized secondary dependant has less than 10 years' participation in the Staff Health Insurance. I agree to pay the lump sum required for each year or portion of a year that participation is short of 10 years.					

Continued overleaf

Mailing address	
..... Number & street	
..... Postal code City
..... State or province Country
..... e-mail address Telephone number
Bank account details for SHI reimbursements	
..... Name of bank BIC/SWIFT code
..... Number & street	
..... Postal code City
..... State or province Country
..... Bank account No./IBAN Currency of bank account
Staff Health Insurance Contributions	
<ul style="list-style-type: none"> ■ I authorize the UN Joint Staff Pension Fund to deduct from my monthly pension benefit, and to remit directly to WHO, my contributions to the WHO Staff Health Insurance. ■ I authorize the UN Joint Staff Pension Fund to provide information regarding the amount of my pension benefit to the WHO Staff Health Insurance. ■ I am aware that the contributions may be revised in future, either due to revision of the amount of my pension benefit or due to changes in the contribution rate. ■ I note that I must address all queries regarding SHI contributions to the WHO Staff Health Insurance. ■ I note that I must provide written notice to the WHO Staff Health Insurance at least 6 months in advance if I decide to cancel SHI cover for myself or any of my insured family members. 	
<ul style="list-style-type: none"> ■ I certify that all the facts presented by me above are correct. I shall notify the WHO Staff Health Insurance immediately of any changes. 	
Signature:	Date:

WHO 90.3 E (01.2012)

**THE COMPLETED AND SIGNED FORM MUST BE RECEIVED BY INS/HQ
WITHIN 90 DAYS OF THE DATE OF SEPARATION FROM SERVICE**

PART VI

ADVANCED DIRECTIVES FOR HEALTH CARE DECISIONS IN THE UNITED STATES

The following discussion on advanced directives is primarily applicable to the United States. Information relevant to other countries may be prepared and added in each country.

A Living Will

This is not the same as a conventional will that you use to leave property at death. Instead, it is a means by which you indicate what kind of health care you want to receive, or don't want, when you are no longer able to make your own decisions, or when you are incapacitated and cannot speak for yourself. It spells out your health care wishes or end of life decisions. If these crucial points are not in writing, then decisions could be made by a judge or even by distant family members who have no idea what you would prefer.

In the United States, each state has specific regulations regarding what they consider to be legally-binding advance directives. Most states require two witness signature and few states require these signatures to be notarized.

Powers of Attorney or Advanced Directive for Health Care

This document permits you to appoint someone you trust to be your health care agent (sometimes called an attorney-in-fact for health care or health care proxy) should you be unable to do so yourself. The person you appoint will be expected to make necessary health care decisions for you and to see that doctors and other health care providers give you the type of care you wish to receive. This person becomes your health care agent. Name one person as your first choice. Then choose at least one back-up agent, in case the first person is not available when needed.

The American Bar Association has prepared the following recommendations for giving someone a Power of Attorney for your health care⁴. To properly do this they recommend you do the following:

⁴https://www.americanbar.org/groups/law_aging/resources/health_care_decision_making/power_atty_guide_and_form_2011/

1. Think carefully about the person you may choose to be your health care agent.
2. Think about what guidance you want to give your health care agent in making treatment decisions for you. Then talk about your decisions.
3. Fill out the form, A Power of Attorney for My Health Care, and follow the instructions that are specific to the State you live in.

Choosing the Right Person

State requirements differ greatly. To meet the combined requirements of every state, your health care agent should be an adult who is of sound mind, and NOT anyone in the following list:

Do Not Choose

1. Your health care providers or the owner or operator of a health or residential care facility that is currently serving you
2. A spouse, employee, or spouse of an employee of your health care providers
3. Anyone who professionally evaluates your capacity to make decisions
4. Anyone who works for a government agency that is financially responsible for your care (unless that person is a blood relative).
5. Anyone that a court has already appointed to be your guardian or conservator.
6. Anyone who already serves as a health care agent for 10 or more people.

Choose

1. Someone who will talk with you now about your wishes, who will understand what you want and your priorities about health care, and who will do as you ask faithfully when the time comes.
2. Someone who lives near you or could travel to be with you, if needed.
3. Someone you trust with your life.
4. Someone who can handle conflicting opinions from family members, friends, and medical personnel.
5. Someone who can be a strong advocate for you if a doctor or institution is unresponsive.

Giving Guidance to My Health Care Agent

Here are three free resources you may consider:

- Consumer's Tool Kit for Health Care Advance Planning, by the ABA Commission In Law and Aging. Go to: Ambar.org/Aging Toolkit
- Caring Conversations Workbook published by the Center for Practical Bioethics.

Go to:

<https://www.practicalbioethics.org/resources/caring-conversations.html>

- Advanced Care Planning Conversation Guide, plus other resources from the Coalition for Compassionate Care of California.

Go to: <https://coalitionccc.org/what-we-do/advance-care-planning/>

Fill Out the Proper Form for Your State

For links to state-specific forms, go to:

https://www.americanbar.org/groups/law_aging/resources/health_care_decision_making/Stateforms/

Order for Life-Sustaining Treatment

In some governmental jurisdictions one can stipulate in a document the kind, and extent, of medical treatment that one would want in case of a medical emergency. This includes such medical procedures as cardiopulmonary resuscitation CPR, intubation, artificial ventilation, blood transfusion, antibiotics, dialysis, and artificially administered fluids and nutrition. In the State of Maryland, this document is called the MOLST (Maryland Medical Orders for Life-Sustaining Treatment).

Other jurisdictions may have a similar document and one may wish to inquire about its existence.

PART VII

ESTATE PLANNING IN THE UNITED STATES

The following discussion on estate planning is primarily applicable to the United States. Information relevant to other countries may be prepared to be added in each country.

The legal mechanisms listed below are often used in the United States to help survivors deal with an estate. Becoming acquainted now with the

legal terminology may help one deal with issues that may arise both before and after death. The information is **not to be considered legal advice** and it is **recommended that any action is done in consultation and assistance of a professional.**

During the discussion on estate planning we will review:

- Wills
- Revocable Living Trust
- Durable Power of Attorney for Finances – to manage assets if one becomes incapacitated or incompetent
- Bank Accounts -instructions to one's banking institution when establishing or modifying an account's ownership

Wills⁵

A will is a document that describes your property and how it will be distributed to your beneficiaries. The will can determine to whom your estate is distributed. It is best to draft it with the assistance of a professional. Being knowledgeable about the state laws may help you avoid important mistakes. When assets are left through a will, it has been estimated that about 5 to 15 percent of the total value of the estate goes to pay probate and legal fees in many states.

Probate is the legal process of transferring the property of a deceased person to the rightful heirs. In the United States the local probate court usually supervises your estate at the time of your death. If you have not created a trust there is a possibility that your bank accounts, real estate, jewelry, and many other valuable items will go into probate and your beneficiaries will not have access to them until probate has been resolved. Depending on the size of your estate and the state in which you live, probate may take anywhere from a few months to a few years and it can be expensive.

Revocable living trusts are a good way for you to avoid probate for many assets. Both a will and a living trust contain your inheritance instructions and indicate who gets what part of your estate, if you use a trust you can often avoid probate. You can also achieve some privacy since living trusts

⁵ Note that a will is generally considered valid by US banks even if it is written in Spanish and was registered in a US consulate in the signer's country.

do not ordinarily become part of the public record. You still need a will to cover any property that did not get into the Trust.

It is usually considered best if you and your spouse have separate wills. Good reasons for this are different immigration status or that it allows you to deal with issues such as ex-spouses and children from previous marriages.

Keep your will both safe and accessible. The professional that drafted your will may keep a copy and you may wish to put yours in your safe deposit box so long as someone else knows where you keep the key.

Revocable Living Trusts

The revocable living trust is a written agreement that designates how the property donated to the Trust will be distributed on your death. Most of your assets will ordinarily be placed in your Trust. During your lifetime, you manage the property essentially as you would if there were no revocable trust, appointing someone, including yourself, to be responsible for managing your property. If you are mentally competent, you can change or revoke the trust at any time for any reason.

Usually a living trust becomes irrevocable and cannot be changed when you die.

At the time of your death, the person named to take over as successor trustee has the power to distribute the property to beneficiaries without any probate court involvement. That saves everyone much frustration and work. It allows your property to get to the people you chose to inherit it much more quickly.

Durable Power of Attorney for Finances

A financial power of attorney is a simple and reliable way to arrange for someone to manage your finances if you become incapacitated or unable to make decisions for yourself. When you sign a durable power of attorney, you give another person the legal authority to act on your behalf. You want your power of attorney to be “durable”. That is important because a “non-durable power of attorney” will automatically end when you become incapacitated or incompetent. The person you appoint is called your “agent” or “attorney in fact”. Individuals usually choose a trusted family member to be their agent to handle the responsibility of making financial decisions for them. It is common for people to give their

agent the power to handle all their finances. However, you can give your agent as much or as little power as your wish. Forms must be completed and signed following US state law procedures. It is therefore important to consult a professional to be certain all is done properly.