

I'm Blissfully Single. Do I Still Need a Will?

So, you're single and ready to mingle. You have no kids. Your assets are modest. You don't need a will, right?

Wrong!

More than 70 percent of adults don't have a will, and shockingly, only 10% of firefighters have a will. For some of us, we just haven't reached a point in our lives where a will seems especially pressing. But making a will isn't just for people with a spouse and kids, or Kardashian money. A will ensures that your property goes where you want it to go, and it absolutely makes things easier for those left behind. Dying without a will - "intestate" - just makes things harder for everyone.



A will enables you to appoint an executor to oversee the distribution of your assets. By naming an executor, you can ensure that someone you trust takes on this role. When there is no will, your loved ones are left to guess at whom you would have trusted to administer the estate, and the chance for fighting heightens. The last thing a grieving family needs during a difficult time is infighting over what you would have wanted.

If you care at all about where your assets will go, you need a will. Without a will, your property will be distributed according to New York's formulaic intestacy statute. This one size fits all provision directs that property be distributed according to lineage, not according to your wishes. This can make a difference in big and small ways. For example, if you are a single person without kids, survived by one or both parents, your assets will go to your parents. But perhaps a parent is in a nursing home, paid for by Medicaid. In that case, the inheritance might make them ineligible for Medicaid. Perhaps your parents are well off, and you would prefer for your money to go to a niece or nephew, an uncle or aunt, a long-term partner or friend, or a particular sibling.

If your parents do not survive you, your assets will go to your siblings, in equal shares. The law doesn't take into account that one sibling is more well off than another, or that a sibling might have substance abuse problems, or that one sibling hasn't spoken to you in five years. In other words, it doesn't necessarily do what you would have done.

Perhaps you have specific items that you wish to leave to particular people, like your autographed baseball collection, or your guitar or motorcycle. The only way to ensure that happens, is with a will.

Along with a will, you should have a health care proxy, which provides direction to your loved ones in the event that you are unable to make medical decisions. This should be someone capable of carrying out your wishes.

Our law firm prepares wills and health care proxies for FDNY firefighters, EMTs, officers, and retirees, no matter if your status is married, single, domestic partnered, divorced, in a relationship, or it's complicated. And we do it for free. Over 4000 members have taken advantage of our offer. What are you waiting for?! Call us today, it's easy, and it's free!

This is the SEVENTY-SEVENTH edition of the BARASCH McGARRY SALZMAN & PENSON NEWSLETTER...attorney advertising which presents topics of interest to firefighters. For questions, additional copies, or more information about topics raised in this newsletter, call or write:

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FIREFIGHTERS' NEWSLETTER

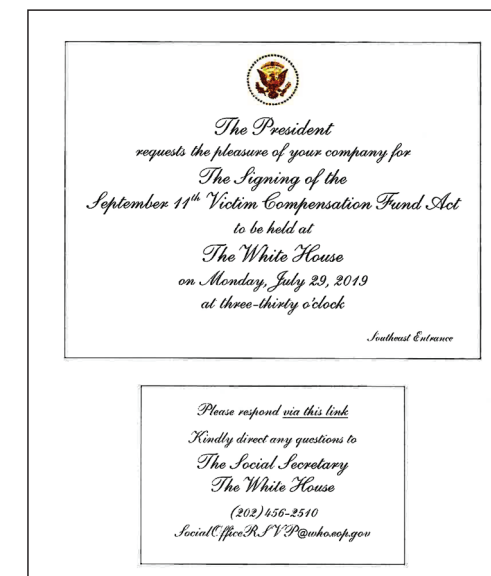
MISSION ACCOMPLISHED!

9/11 Victim Compensation Fund Permanently Extended & Fully Funded

It took nearly 18 years of concerted lobbying efforts, but sick 9/11 first responders and survivors will no longer have to worry about whether funds will be available for them and their families. The entire 9/11 community can now rest assured that free health care and compensation are available for any WTC-linked illness that they develop over their lifetime.

On Monday July 29, 2019 President Trump signed the "Never Forget the Heroes: James Zadroga, Ray Pfeifer and Luis Alvarez Permanent Authorization of the September 11th Victim Compensation Fund Act" (VCF) in the White House Rose Garden. Six members of the Barasch McGarry law firm who had made countless lobbying trips to D.C. were invited to attend, along with trustees of the Fire, Police, EMS, and Building Trades unions. And, of course, select first responders and survivors from the Feal Good Foundation were present.

Our group of 9/11 advocates and union leaders began the final lobbying chapter for the permanent extension of the VCF on February 25, 2019, when the bill was introduced in both



Our invitation to attend the bill signing at the White House



After making 10 trips to D.C. lobbying for its passage, Mike Barasch, Lee London and Rich Alles were honored to be present for the signing of the bill

houses of Congress. This followed the shocking announcement by the VCF Special Master that an explosion of cancer and death claims had necessitated immediate drastic cuts in all pending and future claims.

That same day Mike Barasch & Ret. FDNY Deputy Chief Rich Alles presented Congresswoman Maloney with

a specially made FDNY Fire Bunker Coat that she promised to wear every day until the law was passed. She was true to her vow and the coat became a remarkable symbol of her leadership for the 9/11 Community! She wore it on the floor of the House of Representatives every day, and to all public

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appearances, a constant reminder that first responders are suffering, and in need of help.

Obviously, Jon Stewart's role in the passage of the bill cannot be overstated. His passionate testimony before Congress was critical to shaming politicians who refused to support the bill.

And John Feal was a constant and relentless presence in the halls of Congress. It really "took a village" to get this bill passed, but the hard fight made the success all the more satisfying.

VCF Made Permanent and Fully Funded

The new law extends and fully funds the 9/11 Victim Compensation Fund which had been running out of money, and would have expired on December 18, 2020. This extension guarantees that the VCF, like the WTC Health Program, will be federally funded until the year 2090, effectively making both programs permanent for the 9/11 community.

This means that the 9/11 community, including active and retired first responders, residents, workers, and students who are sick or who become sick in the future, are entitled to compensa-

tion and health care. The family of any member who dies of a 9/11 illness will also receive compensation.

For those members who weren't able to buy life insurance after a diagnosis of pulmonary illness or cancer, this law is now in place for your family's well-being long after you pass.

What does "full funding" mean?

Since February's announcement by the Special Master, firefighters have had their awards reduced 50%-100%. Over 1,700 claimants, including some 450 of our firm's clients, have had their awards slashed. Under the new law, all of them will receive the balance of their award (i.e., the amount that was cut). And, all new awards will be paid in full.

VCF awards now range from \$20,000 - \$90,000 for minor respiratory illnesses and non-melanoma basal cell and squamous cell skin cancers. The VCF awards up to \$250,000 for pain and suffering for more serious cancers, including melanoma, prostate cancer, and breast cancer (the three most common of the 68 cancers that have been linked thus far). Additional monetary awards are available for lost income for members who receive an FDNY



WTC disability pension and for those members who were active on 9/11/01, retire, and subsequently reclassify their pension to a WTC disability within a 25 year period after retiring.

Our newsletter has covered pension reclassification in the past and we will be doing another updated article soon for our retired FDNY clients and newsletter recipients.

As always, we are here to answer any questions that you may have regarding the WTC Health Program and the Victim Compensation Fund.

The Opioid Epidemic

Did you know that the #1 cause of death in America for men between the ages of 35 and 54 is by drug overdose, and that the #1 type of overdose is from opioid medications? New York City firefighters and EMTs who sustain orthopedic injuries in line-of-duty or car accidents are not immune from this epidemic. Sadly, many of our friends and clients have been affected. To understand the extent and severity of the opioid crisis in our country, you need only know a few key facts:

The United States accounts for approximately 4.6% of the world's population but consumes 80% of the global opioid supply.

Americans are six times as likely to die from a prescription drug overdose as from a heroin overdose, and twice as likely as from a cocaine overdose.

Drug overdose deaths involving prescription opioids rose from 3,442 in 1999 to 17,029 in 2017.

In large part, this trend has to do with a change in the perception of pain within the medical community. Whereas, in the past, pain was viewed as a symptom, it is now classified as a condition. And because, 'chronic pain' has become a commonly accepted diagnosis, the treatment of pain has become far more extended. Prescribers are issuing more prescriptions for opioids, over longer periods of time and in higher doses.

Compounding the danger, there are large unused quantities of opioids being stored in unsecured medicine cabinets in many people's homes.



Opioid use also causes physical dependence, which differs from addiction. Addiction, i.e. compulsive use despite harmful consequences, is characterized by an inability to stop using a drug. Physical dependence means the body's adaptation to the drug, requiring more of it to achieve a certain effect and eliciting drug-specific physical or mental symptoms if drug use is abruptly ceased or tapered, i.e., withdrawal. A standard opioid prescription allowing for dosage at 3-4 times a day for two weeks can make a patient physically dependent, and withdrawal can cause panic attacks, depression, anxiety, diarrhea, sweating and insomnia. Also, functioning declines with long-term use and typically dosage requirements increase simply to stabilize the user.

Of course, opioids work well at controlling pain. That's why they have become so widely prescribed. The point of this article is not to suggest that opioids should be banned. But, as the expression goes, forewarned is forearmed. The more you know about the risks associated with opioid use, the better you can guard against them. Use opioids with extreme care and only as directed by your doctor. Discard any unused opioids in your home. And use opioids only as a last line of treatment.



WHAT ARE YOU WAITING FOR?

Download the Barasch & McGarry FREE app on your smart-phone and have access to your FDNY group charts, OT/sick/vacation/comp/mutual information, scanners, handi-talkie transmissions, FDNY news and so much more.

