Llano County Indigent Decedent Assistance Policy

- I. Llano County Judge's Office shall be authorized to assist in the disposition of a deceased pauper after verification that the decedent was a resident of Llano County at the time of death and decedent has no accessible assets, other financial means, or resources available to cover the cost of disposition.
- II. Definition of a pauper: a person destitute of means except such as are derived from charity. Specifically, one who receives aid from funds designated for the poor (As defined by Merriam-Webster).
- III. Llano County Commissioners' Court has adopted cremation as the primary method of choice for the disposition of pauper's remains. (See Exhibit A)
 - a. Cremation is provided as the preferred option to next of kin/responsible party with the only exception being the religious affiliation of the deceased pauper who died in Llano County (reference Texas Health and Safety Code 694.002).
 - b. Individuals requesting County assistance for the cremation of the decedent's remains must complete and sign a cremation authorization form provided by Llano County. A copy of this form will be provided to the Funeral Home by Llano County.
 - c. Llano County will assist with cremations in accordance with prevailing law.
- IV. Llano County Social Services Department shall be authorized to provide a pauper's burial only in the following circumstances;
 - a. The unidentified, unclaimed, and/or abandoned remains of a decedent who died in Llano County (reference Texas Health & Safety Code § 694.002(a) and (716.101).
 - b. Taking into account the religious affiliation of the deceased pauper who died in Llano County (reference Texas Health and Safety Code 694.002).
 - c. Any request for an exception to the approved burial package should be made as soon as identified by the funeral home, and provided to Llano County in writing with the understanding that only in rare situations will the requested exception be approved by Llano County.
 - d. Llano County will pay no additional amount for other services provided by the funeral home, unless agreed upon by Llano County. Additional services may be offered free of charge by the funeral home at the discretion of the funeral home.
- V. Llano County resident who dies out of the county. Cremation or burial of a Llano County resident who dies out of the county shall be paid only if the other County requests payment through the County Judge's Office, Llano residency for decedent can be determined, and the remains of the decedent are buried (when applicable) in the same county where death occurred.
- VI. Funeral Home Responsibilities:
 - a. General
 - i. Pick up & hold

- ii. Provide information and application packet from Llano County to those stating no means to cover cost of disposition.
- iii. Let Llano County know when more applicant packets are needed.
- iv. Call in referral to Llano County office for those identified as having no means to cover cost of disposition.
- v. Process all paperwork to include that necessary according to law.
 - 1. File death certificate and notify Social Security Administration.
 - 2. File all other required documents.
 - 3. Provide Llano County with a copy of appropriately signed cremation authorization form when cremation is determined as disposition.
- vi. Retain records and make them available to Llano County as appropriate for audit and accountability purposes.
- vii. Invoice Llano County for authorized package with approved services. Itemized invoice required to Llano County.
- viii. Maintain license to operate as a funeral home in good standing with all applicable regulatory agencies. Indicate in writing to the Llano County Judge a desire to participate in the Indigent Descendent Assistance program pursuant to the terms of this policy.
- Accept Llano County Program funds as payment in full.
 - i. Do NOT deviate from indigent policies approved by Llano County.
 - ii. Do NOT accept funds from next of kin, etc. to provide additional services or to supplement county approved package.
 - iii. Reimburse Llano County in event unforeseen funds received from any other source (next of kin, insurance policy, etc).

VII. Llano County Responsibilities

- a. Provide Llano County Disposition Assistance Request Application packets for Funeral Home to provide to applicant.
- b. Review Referral information, verify information as necessary.
- c. Provide Responsible Party/Applicant Affidavit to applicant as appropriate and escort applicant to notary as necessary. Maintain notarized Affidavit for file.
- d. Give decision on approval to go forward with county assistance or denial of county assistance to funeral home.
- e. Maintain copies and documents received from Funeral Home to track cremations and burials.
- f. Receive itemized invoice and pay pre-approved expenses only.
- g. Communicate changes in criteria or application process to funeral homes.
- VIII. Llano County agrees to pay the following fees for Removals, Transportation, Cremation, and Burials.
 - a. Removal and Transport to Funeral Home: \$695.00
 - b. Removal and Transport to place of Autopsy (Travis County Medical Examiner): \$695.00
 - c. Removal and Transport to another place of Autopsy: \$695.00 + \$2.00 per loaded mile.
 - d. Llano County shall be authorized to pay \$_1200.00__ per approved cremation.
 - * Llano County approved cremation package consists of:

Removal, Refrigeration, Cremation, Securing Permits, and Filing of Death Certificate.

- e. Llano County shall be authorized to pay \$__1700.00__ per approved Pauper burial.
 - Llano County approved burial package consists of:
 Removal, Refrigeration, Minimum Casket, Staff, Transportation of Graveside, and
 Filing of Death Certificate.
 Llano County will pay for Opening and Closing at the Cemetery.

Llano County Indigent Decedent Assistance Eligibility Criteria

Eligibility for the Llano County Indigent Decedent Program is based on county of death and countable assets. In order to determine eligibility, applicants will be asked to complete an application, a checklist of accessible assets, and a budget sheet of allowable expenses for the deceased and/or legally responsible surviving household persons. All completed documents will be faxed to the designated county office, where they will be verified as necessary and processed for eligibility determination. The application form will be appropriately noted with eligible or ineligible and faxed back to the funeral home. In the event that no next of kin or other legally responsible person is identified, the funeral home will also assure the appropriate legal documentation is signed by the County Judge.

COUNTY OF DEATH

Llano County

ASSETS

Countable assessable assets are at or below the maximum amount the county has agreed to pay to the funeral home for Indigent Cremation or Burial.

DEFINITIONS

Accessible Assets: liquid and non-liquid assets readily and legally available to the deceased or to the survivors who are legally responsible for the deceased upon decedent's death. These include but may not be limited to checking, savings and other accounts, earned and unearned income, other cash receivables from all sources, cash value on insurance policies, and insurance policy benefits or other death benefits available due to the death of the decedent'.

Countable Accessible Assets: the difference between the accessible assets of the legally responsible household and the allowable expenses of the household for the month of death.

Minor child: A person under age 18 who has not been married or who has not had the disability of minority removed for general purposes.

Legally Responsible relationship: An Indigent Cremation legally responsible relationship exists between the deceased and those who have legal obligation to support the persons financial needs. Legal responsibility exists between:

- Persons who are legally married (to include those who hold themselves out to the public to be married in a common-law relationship)
- A legal parent and a minor child, or
- · A managing conservator and a minor child

Allowable household expenses:

- Rent/Mortgage & associated insurance & property tax
- Energy & Water utilities
- Loan payments or other payments for school, vehicle, bankruptcy resolution,

- probation and court fees.
- Childcare/Dependent Care
- Out of pocket medical expenses for deceased or surviving legally responsible persons
- Average monthly cost of transportation to and from work, medical appointments, school, grocery store, and other activities of daily living
- Average cost to purchase and care for clothing to include average cost for cleaner fees, purchase of uniforms, school and other basic clothing needs
- Out of pocket repairs to home and primary vehicle
- Other expenses such as vehicle registration, out of pocket professional certification fees, death certificates, etc.
- Cost of groceries and household products

SIGNED THIS 28 DAY OF Novem	<u>,</u> 2022
RON CUNNINGHAM,	LLANO COUNTY JUDGE
Maus	Finda Kasehlle
PETER JONES, COMM., PCT. 1	LIŃDA RASCHKE, COMM., PCT. 2
MIKE SANDOVAL, COMM., PCT. 3	JEBRY DON MOSS, COMM., PCT. 4

Indigent Decedent Assistance Referral & Application LLANO COUNTY, TEXAS

The Llano County Policy for the Cremation of Paupers provides as follows:

"A person whose death occurs in this County may be certified as a pauper eligible for cremation by the County under this policy if the County Judge determines, after reasonable investigation that the estate of the decedent does not have any resources that may be used to pay for interment; and the decedent's next of kin cannot pay for interment because they do not have resources that may be used to pay for interment; or their identities or whereabouts are unknown."

Pursuant to the Texas Health and Safety Code, §711.002(a), the following persons, in the priority listed, have the duty of disposition for the decedent's remains and are liable for the cost of interment.

- 1. The person designated in a written instrument signed by the decedent,
- 2. The decedent's surviving spouse,
- 3. Any one of the decedent's surviving adult children.
- 4. Either one of the decedent's surviving parents,
- 5. Any one of the decedent's surviving adult siblings,
- 6. Any adult person in the next degree of kinship in the order named by law to inherit the estate of the decedent

The information requested in the following form is necessary to determine eligibility under the County policy. It is not intended to cause embarrassment or to pry needlessly into your private affairs. Please be as detailed as possible in answering the questions. Giving false, misleading, or incomplete information on this form may result in delay or rejection of the application.

DA	TE:		
FU	NERAL HOM	E	
r	Name		^
7	Address		
	Person eferring		
	3	Name	Title
F	Phone	Fax	Email

IDENTIFICATION OF DECEASED

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Full Legal Name			Social Secu	Social Security Number				
1 A dalaman					_	1_		
Street Address while living				1	Sex	Race		
City State Zip								
	1.	T=			- 4h			
	Age	Date of Death		Residence for last 6 th months				
Place of Death City within County	ty Location (i.e. home, etc.)			Was deceased a veteran? O Yes O No				
Describe decore	- Laura any	"f ' naliaioo?	IC iAlb va		-l-valu			
policies?		life insurance policies?	-					
How much?	Does the deceased have any cash money from all sources, including bank accounts? How much?							
Does the deceased have any other assets (real estate, automobile, home furnishing, stocks, bonds, or anything else? If so, describe:								
Does the estate or any family member have a claim against a party which may result in litigation and possible award of money? If so, describe the claim:								
Please identify the following relatives of the deceased, if living, with their addresses and any other contact information:								
Spouse:					3			
Adult Children:								
Parents:								
Brothers or Sister	s:							
To the knowledge resources which r	of applicant	, do any of the above re for the cremation of the	latives of the deceased?	e dec	eased ha	ve any		
What inquiries have of the deceased?	ve you made	to determine what reso	ources are av			relatives		
Did the deceased disposition of his/h	designate a ner remains?	person in a written instr If so, please give the p	ument the di person's nam	uty to ne an	o handle nd wherea	abouts:		
Any other informa	tion which m	ay be of assistance in d	etermining e	ligibi	ility:			

APPLICANT INFORMATION (Person with authority to make arrangements for the deceased or acting on behalf of person with authority) Name Address Street & PO Address City & State Zip PHONE: FAX: EMAIL: Relation to Surviving Spouse Surviving Adult Child □Surviving Parent(s) deceased □Adult Sibling □Other (friend, pastor, etc.) Applicant's home owned or rented? If acting on behalf of person of authority, who has legal authority? Relationship Street & PO Address City, State Zip Total amount/value of countable income/resources available to deceased anytime Is during month of death. Why are you seeking help now? How Much Money do you have from all sources? What property do you own? (Examples: Land, Home, Automobiles, Boats, list year and model) What is your household income and source? How do you meet your expenses until now? hereby solemnly swear that the foregoing information is true and correct. I solemnly swear that I am wholly destitute, that I do not have funds or means to pay for the funeral home services of the deceased family member. I further swear that the relatives listed above are also wholly destitute and none of them have funds or means to pay for the funeral home services of the deceased family member named herein. Signature of Applicant Date **Applicant Printed Name** NOTARY: County, State of Texas, personally appeared _____, a Notary Public in and for _____ and he/she being first duly sworn (or affirmed) by me upon his/her oath, says the facts alleged in the foregoing instrument are true.

(SEAL) Signature of Notary Public Printed Notary Public