

Planning for the Challenges of Aging Assessment

For Sam Smith and Mary Smith

Personal and Contact Information

Personal Information

Full name of the person filling out this survey	John Smith
Email of the person filling out this survey	john@email.com
Phone number of the person filling out this survey	(555) 555-1234
Relationship to the aging senior of the person filling out this survey	
Full name of the aging senior	Sam Smith
Age of aging senior	85
Street address of aging senior	
Residence city of aging senior	
Residence state of aging senior	
Full name of the spouse	Mary Smith
Age of spouse	83

Planning for The Challenges of Aging Assessment

Q#		Aging	Senior	Spouse
1	Currently owns a home		Yes	Yes
2	Intends for children or others to inherit remaining assets.		Yes	No
3	Has a plan to protect income and assets from Medicaid impoverishment rules		No	No
4	Owns life insurance policies with more than \$50,000 of combined death benefit		Yes	No
5	Understands Medicaid recovery rules for seizing the home equity		No	No
6	Has gifted assets to other than the spouse within the last five years		Yes	No
7	Has a prearranged funeral and burial using a trust as a planning tool		No	No
8	Has formally designated which of the special keepsakes the heirs will receive		No	Yes
9	Intends for children of previous marriages to receive an inheritance		No	No
10	Has a will and or a trust in place		No	No
11	Is concerned about the use of heroic measures to stay alive		Yes	Yes
12	Has an irrevocable trust		No	No
13	Has legally designated someone to make decisions due to mental incapacity		No	No
14	Has one or more long-term care insurance policies		No	No
15	Spending too much money on Medicare supplement or advantage plan		Yes	Yes
16	Needs assistance from a care provider due to disability or dementia		No	No
17	Anticipates receiving future care services at home or home of a family member or friend		Yes	Yes
18	Receiving or will shortly receive care services in the home from a family member		No	No
19	Receiving or will receive care services in the home from a professional care provider company		No	No
20	Anticipates moving into Independent Living, Assisted Living, or nursing home		No	No
21	Currently lives in Independent Living, Assisted Living or nursing home		No	No
22	A living aging senior, living spouse or deceased spouse is or was a veteran of military service		Yes	Yes