

MY PLAN FOR THE POSSIBILITY OF EXTENDED CARE IN THE FUTURE

Name _____ Date _____

By answering these questions you will have a **document to share with your spouse or partner, adult children, friends and other family members** who need to know your opinions about your own care. Please add another page for additional comments.

Extended Care, also called Long-term Care, is defined as needing care from other adults to conduct daily activities for a physical or mental disability due to an accident or illness which could happen at any age.

Do I believe I will be living many years into my 80s, 90s or even to age 100?

Yes, because _____

No, because _____

I have currently planned for my retirement income to come from: (401k, 403b, annuities, cash value life insurance, pension, real estate, stock/bond dividends, etc.)

I realize that I may need care from my family or others at some point in my life.

Yes _____

No _____, if not, why? _____

What impact do I believe my family will experience should they provide my care at home?

If an accident or illness happens to me in the next year, who of my family or friends, will be able to take care of me? (estimate their care will be for about 18 hours per day)

If I cannot be taken care of at home, am I willing to move to an assisted living community, nursing home, or dementia community for a safer environment?

Yes _____ No _____ then how will I remain at home? _____

With extended care at home costing, on average nationally, \$36,000 per year/\$3,000 per month (national median average 2014) for about 5 hours per day to supplement the care given by family or friends;

Will I be able to pay for my care at home from my income?

Yes _____, for how long? _____

No _____

With assisted living costing, \$42,000 per year/\$3,500 per month (national median average in 2014) for a one-bedroom apartment with some care in a facility;

Will I be able to pay for my care in assisted living as well as the monthly apartment rent from my income?

Yes _____, for how long? _____

No _____

With nursing homes costing, \$87,600 per year/\$7,200 per month (national median average 2014) for a private room and round-the clock services;

Will I be able to pay for my care in a nursing home, should it be necessary, from my income?

Yes _____, for how long? _____

No _____

(Care costs may be found at www.Genworth.com Genworth Cost of Care Survey 2014)

Do I have a plan to fund my extended care?

Yes _____,

(describe) _____

No _____, (how will I pay for my care?) _____

Let me assist you. (DAVID A. LaRUE, JD, CLTC: 740-264-4285), Email: davidlarue14@gmail.com

Please complete, sign this document, and distribute it to your family or friends. Keep a copy for yourself where you keep your important papers.

Please print your name

LTCPC 07-2014

Signature