

Elder Law & Medicaid Planning Intake Sheet

Ament Law Group, P.C. — Free Initial Consultation

You do not need exact numbers — estimates are fine. The goal is to understand the situation so we can identify what options are available.

Who Are We Planning For?

Client's Full Name

Date of Birth / Age

Your name (if different)

Your relationship to client

Best phone number

Email

Current Care Situation

Living at home (independent) Living at home (with help) Assisted living Memory care

Skilled nursing facility (nursing home) Rehabilitation / short-term care Hospital

Facility name (if applicable)

Monthly cost (approx.)

How long at this level of care?

Marital Status

Single / Widowed / Divorced

Married — spouse lives at home

Married — spouse also in care

Spouse's name

Spouse's approximate monthly income

Income (Monthly — Approximate)

Social Security \$

Pension \$

Other income \$

IRA / retirement — taking distributions? (yes / no / not started)

Assets (Approximate)

Home address: _____

Approx. value: \$ _____

Checking / savings: \$ _____

CDs / investments: \$ _____

IRA / 401(k): \$ _____

Life insurance CSV: \$ _____

Other real estate: \$ _____

Other assets: \$ _____

Transfers & Gifting

No significant gifts in last 5 years

Some gifts made — unsure of amounts

Significant transfers made

If transfers made — approximate amounts and when?

Medicaid looks back 5 years at gifts and transfers

Existing Legal Documents

Will

Trust

Financial Power of Attorney

Healthcare POA / Directive

Any veterans in the household? (VA benefits may be available)

Urgency & Goals

Planning ahead — no immediate crisis

Care needed within next few months

Already in care — need Medicaid now

Main question or concern
