

Initial Medicaid Questionnaire

1. What is your:
Name: _____
address? _____
phone number? _____
e-mail address? _____
Can Attorney contact you at this e-mail address?

How are you related to the Medicaid applicant? _____
If you are the son or daughter, do you have siblings or deceased siblings,
who are they and where do they live? _____

Do you have power of attorney, guardianship or are you a trustee for the
applicant? Is there someone else who has this power? _____

2. What is the Applicant's name? _____
Applicant's DOB? _____
Spouse's name? _____
address? _____
phone number? _____

3. How old is applicant? _____
spouse? _____

4. Does applicant have Long-term care insurance? _____

5. Where does applicant live?
Spouse? _____
Roommate? _____
ALF or NH? _____
Costs? _____

Is there a child/caregiver who has lived with the applicant for 2 years or more?

6. What is applicant current income? _____
Gross or net? _____
Do they receive SSI or SSDI? _____
Medicare? _____
Supplemental Medicare? _____

7. Medical issues? _____
Applicant? _____
Spouse? _____

8. Does applicant have:
Durable Power Of Attorney? _____
Health Care Surrogate? _____
Living Will? _____
Will? _____
Trust? _____

Who drafted? _____

Are all still competent to do new ones? _____

If there is a DPOA, please e-mail, fax, drop off or mail a COPY for the attorney to review PRIOR to the telephone or office consultation.

9. Has the Applicant made any gifts or transfers? (Particularly in the last 5 years)

10. Do they own their Homestead, how is it titled? _____

Any mortgages? _____
How much? _____
Life estates, jointly titled or other real property and how titled? _____
Rented? _____

11. VA benefits? _____
Active military in time of war/conflict and injured? _____

12. What are their other assets? (types and values, how titled, who are beneficiaries?):
Bank Accounts? _____
Life Insurance? _____
Annuities? _____
IRA's/Retirement Accounts? _____
Real Estate? _____
Anything else? Boats, Cars, RV's, etc. _____

13. Life insurance - cash value? _____
Beneficiaries? _____
Annuities: irrevocable or surrender value? _____

14. Family member who can be involved in process? _____
Be present for meeting with Attorney? _____
Any issues with money? _____