Plan for the Possibility of Extended Care in the Future

Name _				Da	te	
childre	n, frien	ds, and othe	ons, you will have a docum r family members who nee or additional comments if c	d to know you		•
			Long-term Care is defined mental disability dur to an a	_		
Do I bel	lieve I v	will be living	many years into my 80s, 90	s or even to a	age 100?	
Yes	No	because				
			or my retirement income to cash value life insurance		real estate	stock/bond dividends
I realize Yes			re from my family or other	•	-	
What ir	mpact c	do I believe n	ny family will experience sh	nould they pro	ovide my care	e at home?
		-	opens to me in the next yea e will be for about 18 hours		family or frie	ends, will be able to take



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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 – plan to remain at home is			
media	.	nationally, \$60,000/year or \$5000/month* (national o supplement the care given by family or friends. Will me?		
Yes	For how long? N	0		
		th* (national median average 2021). Will I be able to as the monthly apartment rent from my income?		
Yes	For how long? N	0		
	Nursing homes costing, \$96,000/year \$8000, to pay for my care at a nursing home, should	/month * (national median average 2021). Will I be it be necessary, from my income?		
Yes	For how long? N	0		
* Cos	ts taken from <u>Genworth's Cost of Care Surve</u>	y, updated Feb 2022.		
Do I h	have a plan to fund my extended care?			
Yes, t	he funds will come from			
No. H	ow then will you pay for care?			
	e complete and sign this document and distri	bute it to your family or friends. Keep a copy for		
Print	your name	 Signature		

Simmons FINANCIAL PARTNERS

Let us assist you. Set up an appointment to make plans for funding your choices.