



ELDER CARE TRANSITION CHECKLIST

RECORDS:

① Photocopy and store in a secure place:

- | | | |
|--|---|--|
| <input type="checkbox"/> Social Security Card | <input type="checkbox"/> Medicare, Medicaid, or other Insurance Cards | <input type="checkbox"/> Mortgage Records |
| <input type="checkbox"/> Passport/Citizenship | <input type="checkbox"/> Life Insurance Policies | <input type="checkbox"/> General Power of Attorney |
| <input type="checkbox"/> Papers Birth Certificate | <input type="checkbox"/> Disability Insurance Policies | <input type="checkbox"/> Military Records |
| <input type="checkbox"/> Driver's License/
Organ Donor Card | <input type="checkbox"/> Long Term Care Insurance | |

② List locations of original documents:

- | | |
|---|--|
| <input type="checkbox"/> All documents listed above | <input type="checkbox"/> Last Will and Testament |
| <input type="checkbox"/> Marriage Certificate
(if applicable) | <input type="checkbox"/> Trust Documentation |
| <input type="checkbox"/> Death Certificate of spouse
(if applicable) | <input type="checkbox"/> Health Care Directive |
| <input type="checkbox"/> Divorce Papers
(if applicable) | <input type="checkbox"/> Do Not Resuscitate
(DNR) Order |

③ Create a list of important contacts:

- | | | |
|---|--|--|
| <input type="checkbox"/> Immediate Family Members | <input type="checkbox"/> Financial Planner | <input type="checkbox"/> Broker |
| <input type="checkbox"/> Doctors | <input type="checkbox"/> Accountant | <input type="checkbox"/> Beneficiaries |
| <input type="checkbox"/> Clergy Members | <input type="checkbox"/> Banks | |
| <input type="checkbox"/> Attorney | <input type="checkbox"/> Insurance Agents | |

④ Create a list of all passwords, access codes, and PINS.





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FINANCES:

① Gather information on the following:

- All bank account information. *Credit cards, debit cards, savings, and checking accounts.*
- Social Security Information.
- Sources of Income. *Deferred compensation, pension plans, 401(k), 403(b), IRA, etc.*
- Investment Accounts.
- Any outstanding loans. *Student loans, credit card, mortgages, auto, personal, etc..*
- Federal and state tax returns. *Include the past 3-5 years.*
- All Residences. *Addresses and mortgages.*
- All automobiles. *Include make, model, tag, title, loans, insurance companies, etc.*
- Recreational vehicles.
- Valuables and personal assets. *Art, jewelry, furs, etc.*
- Appraisals of personal property.
- Any rental agreements or business contracts.
- Any insurance policies. *Include provider, type, coverage, etc.*
- Charitable gifts and donations.

② Designate a Financial Custodian: *Family, friend, financial advisor.*

③ Simplify finances:

- Limit Number of Accounts. *Target: One checking, saving, IRA, ROTH, and taxable account.*
- Automate bill payments.
- Hire Financial Planner.

④ Other general tasks:

- Verify asset allocation. *With financial planner and financial custodian.*
- Construct a budget. *Include home maintenance costs, health care costs, and loans.*
- Determine financial review frequency. *Financial custodian - monitoring finances.*
- Determine financial turnover period. *When the financial custodian will take control of finances.*
- Collect combinations and key locations for safes and safety deposit boxes.





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HEALTH CARE:

- 1 List the following:
 - Current health issues. *Allergies, diseases, pre-existing conditions, tests, procedures.*
 - Hereditary health issues in past family members.
 - Current prescriptions and drugs. *Costs, dosages, and pharmacy information.*
 - Current hospitals, practices, and doctors. *Primary, specialists, dentists, therapists, psychiatrists. finances.*

ESTATE PLANNING:

- 1 Tasks to complete:
 - Review current documents. *Will, trusts, health care directive, power of attorney.*
 - Establish needed documents.
 - Discuss roles with executors, trustees, and beneficiaries.
 - Share passwords, access codes, and PINS with designated parties.
 - Determine asset distribution.
 - Establish funeral and burial/cremation instructions.

HOME MAINTENANCE:

- 1 Tasks to complete:
 - Make copies of house keys for designated parties.
 - List information on home repairs, housekeeping, lawn care, etc.
 - Gather information on garbage pickup.
 - Designate pet care takers.
 - Discuss installing disability accessible features. *Address bathrooms, stairs, etc.*





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LIFESTYLE TRANSITION:

- ① Discuss possible future living arrangements. *In-home care, moving in with a family member, assisted living facility, adult day care, nursing home.*

- ② If staying in current residence, consider the following:
 - How close are grocery stores and restaurants?
 - Social Interaction availability.
 - How close is basic medical care?
 - Technology usage to monitor wellbeing.
 - Safety precautions.

- ③ Determine appropriate transportation methods:
 - Errand runner
 - Caregiver
 - Bus/shuttle system
 - Uber and taxis

- ④ Determine conditions for lifestyle transition:
 - Safety issues
 - Transportation
 - Problems with upkeep
 - Impeded social interactions

