

**MEDICAID/SSI PLANNING/ SNT QUESTIONNAIRE**

Who is funding it? Grantor? \_\_\_\_\_

Amount \$ \_\_\_\_\_

Preferred Trustee? \_\_\_\_\_

What are current assets?

Life insurance policies? Cash value \_\_\_\_\_

\_\_\_\_\_

Annuity income? \_\_\_\_\_

\_\_\_\_\_

Trust beneficiary? \_\_\_\_\_

Cars? Model, year \_\_\_\_\_

\_\_\_\_\_

Jewelry? \_\_\_\_\_

\_\_\_\_\_

Funeral arrangements, prepaid? Revocable? \_\_\_\_\_

\_\_\_\_\_

Bank Accounts? \_\_\_\_\_

\_\_\_\_\_

Income? \_\_\_\_\_

Homestead? Value? \_\_\_\_\_

Debts? \_\_\_\_\_

\_\_\_\_\_

Claims/mortgages? \_\_\_\_\_

\_\_\_\_\_

Life Estates? \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Disabled? \_\_\_\_\_

Who currently cares for Ward? \_\_\_\_\_

How are they paid? \_\_\_\_\_

Have any assets been transferred in the last 5 years? \_\_\_\_\_

Can Ward:

feed self \_\_\_\_\_

toileting independently \_\_\_\_\_

mobilizing independently \_\_\_\_\_

bathe independently \_\_\_\_\_

transferring independently \_\_\_\_\_

Does Ward currently receive:

SSI (Supplemental Security Income) \_\_\_\_\_  
SSDI \_\_\_\_\_  
Medicare \_\_\_\_\_  
Medicaid \_\_\_\_\_  
VA Benefits \_\_\_\_\_  
Other government benefits \_\_\_\_\_

What is Ward's income? \_\_\_\_\_

Please furnish bank statements.