

# LONG-TERM CARE NEEDS ANALYSIS

Prepared for: \_\_\_\_\_

Date: \_\_\_\_\_

## CURRENT COSTS & STATED NEEDS

Desired state of residency		
Cost of Home Medical Services (Does not include laundry, meal preparation and home cleaning)	\$	Monthly
	\$	Annually
Cost of Private Room Facility	\$	Monthly
	\$	Annually
How long do you want to plan for Long-Term Care?		
Do you wish to age at home or eventually transition to an Adult Care community?	Age at home	Transition
Do you wish to self-insure for the planned cost?	Yes	No
If yes, which part of the household portfolio is committed?		

According to the U.S. Bureau of Labor Services, the long-term (1947-2022) Health Care inflation rate is roughly 5%.

What inflation rate do you want us to assume in calculating future costs?	%
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## RECOMMENDED NEXT STEPS

If long-term care benefit desired started today, the cost would be \$

If long-term care benefit was needed for final years of life according to plan, the cost would be \$