Caring From a Distance

What Do I Need to Know?
Introduction

Information contained within this document has been prepared as educational material for your consideration, pursuant to the Older Americans Act. It is not intended to constitute or substitute for specific legal advice on a particular situation. If your situation is similar to anything described in this information, you are encouraged to seek advice from an attorney or other professional to fully examine and assess your particular set of facts and circumstances.

You have determined that an elderly loved one is in need of your assistance. Either this determination is based on observations of events that have occurred over a period of time or an illness or injury has occurred recently creating the need for immediate intervention and assistance.

These are common situations that many must face. What makes it more difficult is that your loved one lives miles away; you are separated by cities, or possibly, states.

Maybe you and that loved one, and other family members have discussed this possibility and plans are already in place; i.e., necessary preparations having already been made. It is, however, just as likely that this is one of those conversations that never took place. It may have been a fleeting thought pushed aside in hopes that it would never be necessary; or it may have been a subject always thought to be too difficult to approach.

Whatever the case, if you now seek this information, perhaps this resource will be of some assistance in helping to formulate important questions, providing needed answers or pointing you in the direction needed to locate the type of assistance sought.
Numerous resources exist for caregivers ranging from assistance in providing that care to ensuring that caregivers remember to take care of themselves. Some of these resources can be found in the sections at the end of this document.

Material here is presented in a question and answer format to address a number of long distance caregiving concerns.
It has been determined that my loved one cannot stay alone anymore. What are my options?

A. That depends upon several factors:
   • Your loved one’s preferences
   • Upon whose authority the decision of their residence is being made
   • What level of care your loved one needs
   • Your loved one’s financial situation

Loved Ones’ Preferences

It is the right of all capable adults to make their own decisions about choices affecting them, including health care, finances and where to live.

Authority to Decide

Adults retain the legal authority to make their own decisions until either a court takes that authority away or, in the instance of healthcare situations, until a physician determines they are not capable of understanding and making informed decisions about their care.

Level of Care

Depending upon an adult’s physical and/or mental needs, there are a range of options that can be considered for assisting with and meeting care needs, including housing. The focus will primarily need to be on the activities in which the adult engages on his/her own and the degree to which assistance is needed. The physician will be an important participant in this discussion with the adult.

Options for level of care include but are not limited to:

   • services in the adult’s own home (i.e., home health; home and community based services)
   • adult day care
   • hospitalization
   • rehabilitation
   • personal care home/assisted living facility
   • skilled nursing care facility
   • hospice (either in home or in a nursing facility)

Financial Situation

For each of the level of care options provided above, the adult’s personal financial situation is a critical factor. Almost any healthcare or long-term care option can be obtained with private funds and, oftentimes, some choices may have to initially be covered by an adult’s own personal funds before the adult qualifies for another payment option. In many cases, however, there are other financing options already
available that the adult can utilize or for which they can become eligible through an application process with the appropriate agency.

**Options for payment for care:**
- Private pay
- Medicare
- Private insurance
- Veteran’s benefits
- Medicaid

Each payment option is governed by its own rules and is subject to the restrictions and allowances of those rules. If an adult has either of these payment sources, it is important to first determine the level of care needed before determining whether or not that level of care is covered by their existing payment source. If not, then it is essential to inquire about the adult’s ability to qualify for any of the other payment sources.

The chart that follows provides some guidance as to whether a financing source meets the given care option. **Note: there may be exceptions for certain situations; this is only meant to be general guidance.**

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*HCBS = home and community based services
**Depends on what coverage is purchased
Q. If I’m out of town, what do I need to do to be assured that my loved one’s health care provider will communicate with me?
A. Since April 14, 2003, the effective compliance date for the Privacy Rule of the Federal Health Insurance Portability and Accountability Act of 1996 (HIPAA), there have been federal restrictions on the release of private health information; though whether they are more restrictive than your State’s law depends upon your state. Because this information is required to be safeguarded, it has become necessary to provide specifically recognized authorization that an individual consents to sharing their information with you. If this consent is already in your loved one’s medical file, this will eliminate barriers to you being able to communicate with their healthcare provider. Physician’s offices normally add this as part of their patient paperwork for new patients and annual reviews.

Additionally, there are legal documents and procedures that can authorize your communication with your loved one’s health care provider. These include:

- Durable Power of Attorney for Healthcare (executed on or before 6/30/2007)
- Georgia Advance Directive for Healthcare (replaced the health care power of attorney and living will 7/1/2007)
- Guardianship

Q. If my loved one never completed the Privacy Release information with his healthcare provider and does not have a formal advance directive, does that mean that I will not be able to talk to his doctor unless I become his legal guardian?
A. Not necessarily. If your loved one has the capacity and wishes to do so, he or she can complete the necessary paperwork to ensure that you have the required authority to communicate with his health care providers. If, however, there is a medical emergency and your loved one is unable to provide consent or complete the necessary authorization, there is a law in place that could provide you with the authority to make medical treatment decisions for your loved one. It is called the Consent for Surgical or Medical Treatment and is a part of the Official Code of Georgia Annotated (O.C.G.A.) § 31-9-1 et seq. That law provides a list of persons by authorized degree that may provide consent for surgical or medical treatment for the patient if the patient is unable to do so himself.
Q. I have the authority to make health care decisions for my mother and the authority to communicate with her health care providers. What I want to do now is to obtain the authority to handle all of her finances so that I'll have that in place whenever I need it. How do I go about that?

A. You don’t. That authority is not yours to take; it belongs to your mother. It is hers to voluntarily give to whomever she chooses, whenever she chooses to give it. She may use an instrument such as a Durable Power of Attorney (for financial affairs). What you may do is have a conversation with her and express any concerns that you have about her current or future ability to handle her affairs. Then you can make her aware of the options available to her or offer to contact someone that she can speak to about learning what options she has in the event she needs and/or wants to exercise any of her options.

Whenever a loved one no longer has the capacity to understand and make decisions concerning the grant of authority over their financial, or even their healthcare, affairs then the Durable (or Statutory) Financial Power of Attorney or the Georgia Advance Directive for Healthcare may no longer be available as options. It is at this point, depending upon the particular needs of the situation, when one might have to evaluate whether or not guardianship/conservatorship is appropriate as a last resort. The Georgia Department of Human Resources Division of Aging Services has other publications to specifically address the subject of guardianship and conservatorship or an attorney can provide additional information on this subject. Please check the resource section of this document for references to both.

Q. If I have Power of Attorney for my father and I cover expenses for him out of my own pocket, can I just reimburse myself at a later date from his finances?

A. An agent acting under a Power of Attorney has a duty to be a responsible fiduciary for his or her principal. Hopefully, the Power of Attorney document specifically details whether or not payment to the agent is authorized, and if so, under what circumstances. If not, depending upon the accounting requirements, an agent may be able to reimburse himself for actual out-of-pocket expenses incurred for the principal. Unless the agent experiences difficulty with getting someone to recognize the authority of his agency, the instances should be very limited when the agent is forced to come out-of-pocket to bear the financial expenses of the principal. It is always a good practice to maintain accurate receipts and notations for any money paid directly to the agent from the principal's finances.

Depending upon your father’s circumstances, a situation could occur in the future that may prevent you from recovering reimbursement from his finances. For instance, he could, because of illness or disability, need to qualify for Medicaid. In such case, there is no guarantee that you would then be allowed to recover out-of-pocket expenses from his income or assets.

Instead, you might want to allow your father to be as financially independent as possible and meet his own expenses. As the agent, you will have the authority to arrange your
father’s finances and make arrangements for bills and other expenses in the way that best meets his needs and serves his interests. Conscientious undertakings of these tasks should help alleviate the need for you as the agent to have to incur out-of-pocket expenses that require reimbursement.

If, however, you as the agent use your own funds to meet the financial obligations of your principal, it should be done with the knowledge that there is a risk that you will never be reimbursed or otherwise compensated for doing so. One cannot accurately predict the future in terms of 1) the principal’s willingness to follow through on a promise made in the past, 2) the future existence and status of finances, and/or 3) laws, policies and regulations governing what is and is not an acceptable practice as it relates to such reimbursement.

Q. If I have power of attorney for my mother, can I pay myself for my services?
A. That depends upon whether the power of attorney document authorizes compensation to the agent. If it does, then whatever the terms are for compensation are binding. If the document is silent about compensation, the presumption may be that there was no intent for the agent to be compensated.

Q. If I am the primary caregiver for my loved one, can other family members get guardianship /conservatorship?
A. There are two measures of last resort for obtaining the legal authority to assist another person who is unable to make vital decisions in the best interest of their property or of themselves. There is guardianship in which a court, after making a determination of incapacity, appoints another person or entity to make decisions for one who is no longer deemed able to make appropriate decisions about his or her person; and, conservatorship in which a court, after a determination of incapacity, appoints another to make decisions about a person’s property because he/she is unable to make these decisions for him or herself.

Even if you are actively providing care as the primary caregiver, if another relative or any other interested person believes that your loved one is not receiving the best care or is otherwise at risk and in need of a different caregiver, then they may choose to petition the court for either guardianship and/or conservatorship. Just because a petition is filed, however, does not automatically mean that it will be granted. The court will order an evaluation, appoint an attorney for your loved one and schedule a hearing to hear the evidence from all parties. Then a decision will be made as to whether a guardian/conservator is needed and who can best fulfill that role.
Q. What if I already have a durable power of attorney to handle financial matters and an advance directive to make health care decisions. Can the guardianship/conservatorship petition still go forward in court?
A. Yes, it can. The court process supersedes or cancels out the voluntary grant of authority (always in the case of a financial power of attorney but only for cause with an advance directive for health care) if the court determines that such action is necessary to protect the alleged incapacitated adult.

Q. I live in Georgia and my mother lives in another state. I plan to relocate her to Georgia in the next six months. Will the advance directive from her state be legal in Georgia because I don’t think she is able to complete a new one?
A. The out-of-state directive for your mother may be recognized in Georgia as long as it is substantially similar to Georgia’s requirements for this document. For specific legal advice on this issue, please do not hesitate to consult an attorney.

Q. My brother lives in another state. His wife died several years ago and he only has some step-grandchildren and a girlfriend in the state where he lives. I’ve been talking to him about moving to Georgia to be closer to me and cousins who find it difficult to travel back and forth out of state to visit him in the nursing home where he lives. He said he is ready to move to Georgia. When I spoke to the social worker at the nursing home about this, she told me how to search for nursing homes here in Georgia. She also mentioned that one of the step-grandchildren, as “guardian”, had not said anything about my brother leaving. Is this going to be a problem for me in getting him moved?
A. The question is whether your brother has the legal authority to choose where he lives and/or whether or not he can actually leave the state to relocate to Georgia. Since the social worker mentioned the word “guardian”, it is first necessary for you to determine whether or not there is a court ordered guardianship in place for your brother. Only a court can appoint a guardian, so unless the step-grandchild has been through this court process, it is not likely that he or she is actually the “guardian”. There are other grants of authority that could be in place, such as Durable Power of Attorney and Health Care Directives. Before taking any steps to relocate your brother, it is essential that you clarify whether your brother had the legal authority to make decisions concerning both his person and his property as both of these are integral pieces of a relocation plan.

Q. If I determine that there is no guardianship in place for my brother and he wants to relocate to Georgia, what are some of the steps I need to take to make this happen?
A. The first step begins with obtaining the legal authority to act on your brother’s behalf. Since he will be in another state and is likely not able to do much of the legwork that is going to be required to prepare for his move, these tasks will most likely be left to you.
Determine if your brother wishes to give you authority to handle these affairs for him. If so, find out from the local long-term care ombudsman how your brother can access local legal services to obtain the necessary documents.

Next, make an assessment of where your brother currently lives and what resources of his are being used to maintain his residence. If he is in a nursing home, then how is that bill being paid; his income; Medicare; Medicaid; Private Insurance? If it is his income, then the source of that income will need to be verified to know what it will take to transfer it to another state. Arrangements will have to be made with payers of income, current banking institutions, and/or state agencies in order to insure that your brother’s income and assets are properly transferred or redirected.

The next step is to make sure that your brother is physically and mentally able to be relocated. A conversation with his medical professionals is essential.

Whatever level of care your brother is currently receiving, it is likely that he will need at least that level of care in Georgia. Locating an appropriate placement for him in advance of physically relocating him is critical. If he is in a long-term care facility in his state, then work with the long-term care ombudsman to get leads on possible appropriate facilities in the geographic areas that interest you. Once you locate the facility that suits your needs and preferences, work with that facility to secure a placement for your brother.

Coordinate with your brother’s current facility and medical professionals to determine the best way to transport your brother from his state to Georgia, in light of his particular physical and/or mental needs.

Once you obtain this status, act as your brother’s agent and complete whatever is necessary to implement the relocation plan.

Q. My father and I live in different cities. Though I visit as often as I can, sometimes I feel like it is not enough. Can I be held liable for not doing anything or not doing enough to help my elderly father?
A. That will depend upon your relationship to your father. Georgia does not hold family members responsible for the care of their elderly relatives solely by reason of family relationship. However, there are obligations and responsibilities that people in certain positions of trust are required to meet under the law. These positions include “fiduciaries” (one officially appointed to act or assumes the role to act in the capacity of trust over designated financial/business affairs) and “caregivers” (aka, caretaker - a person who has the responsibility for the care of a disabled adult or elder person as a result of family relationship, contract, voluntary assumption of that responsibility, or by operation of law).

Failure to carry out obligations and/or responsibilities when in these type of positions that result in harm to the loved one could lead to liability, civil and/or criminal. Remember that although in the state of Georgia, the state law is the same regardless of
what city you and your loved might be in, if one of you is in another state, the law will likely be different. For issues concerning loved ones in a state other than Georgia please consult an attorney licensed to practice law in that state.

Q. Who would have the right to hold me liable?
A. That varies, too. For civil actions, the person harmed or someone legally empowered to pursue claims on that person’s behalf would have the right. For criminal actions, the state has the right to prosecute crimes against its citizens.

Q. I am trying to help my grandmother as much as I can but I’m the only grandchild doing so and my grandmother wants to leave the bulk of what she has to me. I don’t want to wait for a Will because I’m afraid my other relatives will try to keep things tied up in court. I have heard of people using care contracts. Are they legal and is that something that my grandmother and I could have prepared?
A. Care contracts, sometimes referred to as “Life-care Contracts” do exist. They may mean something slightly different depending upon who is using the term. Typically, when used by long-term care communities, they tend to refer to arrangements with a residential facility that one agrees to live in for the rest of their life at either a set price or for a base price with menu items available on an as needed basis at additional costs. There are facilities that may offer these contracts because they have various levels of care and the person is able to “age-in-place” regardless of their physical or mental condition.

There are companies that sell this type of contractual coverage much like insurance.

In other instances, individuals have been known to formally seek to establish this type of arrangement with other individuals. For instance, an agreement may be made to provide guaranteed specified care and services to another person for life. In exchange, the person receiving the care agrees to make either a lump sum payment, periodic payments or agrees to transfer certain property to the proposed caregiver(s) at a given point in time.

The validity of a contract will be judged according to State law. Factors that will be taken into consideration include 1) whether there is adequate consideration by both parties (is each getting reasonable value for the promises they are making); 2) whether both parties willingly entered into the agreement; and, 3) whether both parties understood what they were agreeing to, among other things.
Q. As a caregiver, what is my obligation to follow my loved one’s wishes to:

- Not go to the doctor?
- Not go to the emergency room?
- Not take prescribed medicines?
- Not eat?
- Not get out of bed?
- Not see other family members?

A. The starting point of this answer is the recognition that every adult has the right to make decisions about his or her own person, health care choices and with whom he/she will or will not associate. This right exists until an adult is deemed not able to make reasonable decisions about these choices due to some physical and/or mental impairment. If something begins to interfere with an adult's capacity to make sound decisions and this places the adult “at-risk” or in a position of danger, then it may become necessary for someone else to gain the legal authority to step in and provide assistance to that adult.

An otherwise competent adult can choose to make lawful decisions with which family, friends and others might disagree. If that adult’s lawful decisions are being made because there is a failure to recognize or comprehend and accept the consequences of those decisions, then there is a greater likelihood that intervention is or will become necessary.

So, an assessment is necessary in each of these situations to determine if your loved one is making an informed decision about these choices and has a clear understanding of the consequences. It is always better if your loved one has expressed his or her wishes on each of these subjects in writing. It is suggested that your loved one be encouraged to complete an Advance Directive to clearly establish these choices.

Q. Do I have to relocate my mother to be nearer to me or other family members if she’s beginning to decline or can she stay in her own home?
A. Taking the answer to the previous question into consideration, unless you have legal authority to decide where your mother will live or the legal obligation to provide a safe and appropriate place to live, that choice is hers to make.

Q. Can I let my father pay for alterations to my house to make it more accessible for him to move in with me?
A. That decision must be discussed thoroughly with your father so that both of you are clear on the circumstances involved and any proposed terms under which the modifications are being proposed at his expense. As long as your father understands the arrangement that the two of you are making and enters into it willingly, he has every right to spend his money as he chooses. As part of a long term planning process for him, it might be a good idea for him to have a discussion with an attorney and/or a
Q. I am the only one of my mother’s children who comes to visit on a regular basis. If I am the primary caregiver, how much information do I have to share with other family members about my mother’s condition and status?
A. Family relationships often break down during the caregiving of a loved one simply because there is a lack of available information and communication among family members. While it may seem reasonable that as primary caregiver you are the primary person who needs access to all information, keep in mind that part of caregiving is putting the needs and wishes of your care recipient in the highest priority. The question that must always be asked is if the care recipient would want other family members kept apprised of the status of everything. If the answer to that is yes, then personal feelings should be put aside and every effort made to be as inclusive as possible. It is not uncommon for people to become suspicious and less trusting when there is a belief that important information is being withheld from them.

Where there are other interested family members involved in the life of your mother, even to a lesser extent than you, then it is a better idea to periodically keep them involved and updated. This may decrease the level of strife and stress among you and may decrease the likelihood that at some point action may be taken to challenge you as the primary caregiver. Besides, a benefit is that it often relieves the feeling that you are totally alone in the experience as the caregiver when you have others with whom you can share.

Q. How do I make other family members contribute time and money to take care of our loved one?
A. Georgia has no law that imposes civil or criminal liability against family members for failure to personally contribute to the care of a loved one. (There is a law on the books from the 1800s that allows counties to seek assistance from children and parents of paupers that the county financially supports. This is the same part of the law that the pauper’s burial practice stems from.) This is an additional reason that it is beneficial to regularly involve other family members in the status of and discussion about your loved one. Family members are often more inclined to financially participate in the care of a loved one when they feel included in the discussions and decision about the care and welfare of that loved one. For family members who adamantly refuse to participate and contribute, however, that choice is legally theirs to make.

Q. What do I do if I’m not the primary caregiver but I believe that the person who is might be taking our parent’s money and using it for himself and keeping the rest of the family away?
A. If you ever believe that an elder person age 65 and older (or a disabled adult 18 years old or over) is being abused, neglected or exploited, then you may give a report to
Adult Protective Services (APS); every state has a similar program. In Georgia, they are the section of the Division of Aging Services given the responsibility to accept for the Division Director such reports of alleged abuse, neglect and exploitation; investigate them; and, provide for services, if person is found to be in need of protection. Contact APS at (404) 657-5250 or 1-888-774-0152 and see the Resource Section for additional information.

**Conclusion**

Caring for a loved one can be stressful and challenging. Caregiving when there are many miles between the caregiver and the loved one adds an entirely new dimension of stress. The time to encourage putting tools in place that may be needed in the near or distant future is now. Or at the latest, resources and plans will be needed as soon as it is initially detected that a loved one is in need of more assistance. Some of these tools are available from the Division of Aging Services at no cost. Types of tools to be considered include:

- Georgia Advance Directive for Healthcare (also available in Spanish)
- Statutory Financial Power of Attorney (also available in Spanish)
- Details of My Final Arrangements (an end-of-life planning document)

Information is available on other subjects such as:

- Georgia Law on Guardianship (includes Conservatorship)
- Medicaid Information for Long-term Care
- Benefits Guide for Older Georgians
- What you Need to Know About Funeral Homes, Crematories and Cemeteries
- Do I Need a Will
- Alternatives to Guardianship – Advance Directive Information

Feel free to contact the Georgia Department of Human Resources Division of Aging Services for a copy of any of this information. Call (404) 657-5319 or 1-866-55-AGING (1-866-552-4464)
RESOURCE INFORMATION

1. For Emergencies, call 911

2. Reports of Abuse, Neglect, Exploitation
   a. At home: Adult Protective Services – 1-888-774-0152
   b. Nursing Home/Personal Care Home (assisted living facilities) – 1-800-878-6442

3. Aging Resources in Local Areas: Area Agencies on Aging (AAAs)
   a. 1-866-55Aging

4. Medicare Issues – 1-800-669-8387 (GeorgiaCares) or 1-800-633-4227 (1-800-MEDICARE)

5. Legal Services
   a. Elderly Legal Assistance Program (age 60+): 1-866-55Aging
   b. Georgia Senior Legal Hotline: 1-888-257-9519
   c. State Bar of Georgia: 1-800-334-6865
HELPFUL WEBSITES

Elder/Caregiver Resources

www.eldercare.gov
www.ec-online.net
www.caregiver.org
www.caregiverslibrary.org
www.caregiver.com
www.caring.com
www.aarp.org/families/caregiving
www.wellspouse.org
www.caps4caregivers.org
www.aging.dhr.georgia.gov

Caregiver Guides

www.nia.nih.gov/HealthInformation/Publications/LongDistanceCaregiving
www.nia.nih.gov/Alzheimers/Publications/caregiverguide.htm

Living Situations

www.aahsa.org/consumer_info
www.SNAPforseniors.com

Ongoing Assistance

www.caremanager.org
www.helpstartshere.org/seniors_and_aging/default_page.html

Hospice

www.hospicefoundation.org
www.nationalhospicefoundation.org
www.caringinfo.org
www.nhpco.org

Alzheimer's

www.alzstore.com
www.nia.nih.gov/alzheimers
www.alz.org
www.alzfdn.org
Prescription Drug Assistance

www.medicare.gov
www.pparx.org
www.togetherrxaccess.com

Legal Help

www.legalaid-ga.org
www.LawHelp.org
www.georgiacourts.org/aoc/selfhelp
www.gabar.org/public_information
www.naela.org
www.abanet.org/public.html

Long-term Care

www.medicare.gov/NHcompare
www.Medicare.gov/HHcompare
www.medicare.gov/LTCplanning
www.georgiaombudsman.org
www.nursinghomeaction.org
Emergency Information

If you are primary or a participant in the care of a loved one, there are certain pieces of information that you need to have in the event that there is a medical emergency and your loved one is unable to provide information to the emergency medical technicians, paramedics, nurses, physicians or other first responders. While you may ordinarily know this information, in a crisis, it is not hard to make a mistake or inadvertently forget something that could be vitally important.

The next three pages provide the opportunity to collect some of this important information which may then be kept by you and other caregivers in case it is ever needed.
EMERGENCY INFORMATION

Name: ________________________________ D.O.B. _______
Address: ____________________________________________________
Phone: ___________________ SSN: __________________________

Emergency Contact
Name: _____________________________ Relationship: ______________
Phone: (Home) _____________ (Work) ____________ (Cell) ___________
Address: __________________________________________________________________

Alternate Emergency Contact
Name: _____________________________ Relationship: ______________
Phone: (Home) _____________ (Work) ____________ (Cell) ___________
Address: __________________________________________________________________

Primary Care Physician
Name: ______________________________________________________
Phone: ______________________________________________________
Address: __________________________________________________________________

Written Health Care Directives
Living Will: Yes____ No____
Health Care Power of Attorney: Yes_____ No_______
Georgia Advance Directive for Health Care: Yes_____ No______
Out-of-State Health Care Directive: Yes______ No _______

Healthcare Agent
Primary Agent: ________________________________________________
Contact #: __________________________________________
Alternate/Successor Agent: ____________________________________
Contact #: __________________________________________

Insurance
Private Insurance: __________________________ # ____________________
Medicare: Part A: _______ Part B: _______ # ____________________
Medicare Supplement: __________________________ #__________________
Medicaid: # ___________________________________________________

Pharmacy
Name: _______________________________________________________
Phone: _______________________________________________________

Drug Allergies: _____________________, ______________________,
______________________, _________________________

Other Allergies:________________________________________________
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Current Medications/Vitamins/Herbal Supplements (Attach additional sheets as necessary.)

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Prostheses: (include any metal or metal fragments in the body)


Blood Type: _________________________

Previous Surgeries: (and dates if available)


Medical Diagnoses:


Last Updated: ________________
**Long Distance Visit Checklist**

If your loved one is in one town, city, or state and you are in another, it is a good idea to prepare for each visit, even if you make regular visits. This helps you to focus, in advance of your trip, on those things that must be done during the visit as opposed to optional tasks or tasks that are not as high on the priority list. Obviously, if your visit is for a specific purpose, such as accompanying a loved one to a doctor visit, your priority is likely already clearly defined and there may not be time or opportunity to perform additional tasks on this visit.

In other instances, when your priority is established by what may be going on in your loved one’s life at the time, this is when some more routine reminders could be helpful.

The short list below might assist you in getting the thought process started. This does not mean that there are not more areas that can be added or that each of these needs attention on every visit.

- ☐ Appointments that need to be made
- ☐ Banking: reordering checks, deposit slips, statements, etc.
- ☐ Bill paying
- ☐ Car repairs or maintenance
- ☐ Car/House/Health/Life Insurance
- ☐ Clothes: Shopping or Alterations
- ☐ Cooking
- ☐ Dry Cleaning/Laundry
- ☐ Grocery shopping
- ☐ House repairs or maintenance
- ☐ Membership/Subscription Renewals
- ☐ Post Office Needs
- ☐ Prescription refills
- ☐ Recertification: homestead exemptions; leases; benefits programs, etc.
- ☐ Salon or Barber visits
- ☐ Taxes
- ☐ Visits with friends or relatives
- ☐ Worship Services
- ☐ Yard Maintenance

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Information contained within this document has been prepared as educational material for your consideration. It is not intended to constitute or substitute for specific legal advice on a particular situation. If your situation is similar to anything described in this information, you are encouraged to seek advice from an attorney or other professional to fully examine and assess your particular set of facts and circumstances.

You may make as many copies of this material as you like and you may share it with others.

If there are questions about this publication, they may be directed to the State Legal Services Developer at (404) 657-5328 or 1-866-55AGING or by sending an email to:

   Natalie K. Thomas, Esq.
   nkthomas@dhr.state.ga.us

For additional copies of this document, contact the Georgia Department of Human Resources Division of Aging Services at (404) 657-5319 or 1-866-55AGING, or by sending a request to:

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   Division of Aging Services
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