

FREE PRINTABLE WORKBOOK

The Parent **Crisis** Binder

What you'll be asked for in an ER, at a hospital discharge, or on a benefits form, all in one place. Fill it in with your parent before you need it.



This binder belongs to _____

Prepared by _____

Last updated _____

General information only. This binder is not legal, medical, or financial advice. Rules change and differ by state. Check with the official source, your parent's doctor, a licensed attorney, or a financial professional about your situation.

 Watch the full videos: youtube.com/@agingparentsnext

★ How to use this binder

A crisis is the worst time to hunt for a pharmacy number or a power of attorney. This binder gets the answers on paper now, while your parent can help you fill it in.

Do this

- ☐ Fill it in **with** your parent, a little at a time. One page a week is fine.
- ☐ Start with the Parent Info Sheet and Medications. Those get asked for first.
- ☐ Write in pencil. Meds and doctors change.
- ☐ Keep one copy at home where a family member can find it. Tell the people who need to know where it is.
- ☐ Review it at least once a year, and after any hospital stay, move, or big health change.

Don't do this

- ☐ Don't write passwords or PINs in this binder.
- ☐ Don't write full Social Security, bank, or card numbers. Write where the card or statement is kept, or the last 4 digits only.
- ☐ Don't email, upload, or post photos of filled-in pages.
- ☐ Don't leave it in the car or anywhere a stranger could pick it up.

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Why we write down where things are kept: the National Institute on Aging suggests telling someone you trust where to find your important papers. It also suggests gathering personal, financial, and health records in one place.

The first 72 hours of a crisis

A fall, a stroke, a sudden hospital stay. Use this list to stay on top of the basics. Skip anything that doesn't apply. In an emergency, call 911 first.

Hour 0 to 24

- ☐ Grab this binder. Bring the Parent Info Sheet and Medications pages to the hospital.
- ☐ Bring copies of the advance directive and health care power of attorney, if your parent has them. NIA suggests giving copies to the health care proxy and doctors.
- ☐ Tell the staff who you are and ask who the main contact is (nurse, case manager, or social worker). Write names below.
- ☐ Ask: **"Is my parent admitted as an inpatient, or here under observation?"** Medicare says observation time doesn't count toward the 3-day inpatient stay needed for skilled nursing facility coverage in Original Medicare.
- ☐ Use the Contacts page to tell family. Pick one person to send updates.

Hour 24 to 48

- ☐ Give the staff the full medication list, including over-the-counter drugs, vitamins, and supplements.
- ☐ Find the insurance cards: Medicare, any Medicaid card, Medigap, Medicare Advantage or Part D plan, VA, long-term care policy.
- ☐ Check the home: pets, mail, stove, doors, medications left out.
- ☐ Note any bills or autopays due this week (see Accounts and income, and Monthly bills and autopays, p.8-9).

Hour 48 to 72

- ☐ Ask when discharge might happen and where your parent will go next. Start the discharge questions on page 14 now, not on the last day.
- ☐ Ask if your parent will need equipment (like a walker), whether it's covered, and who arranges delivery.
- ☐ If you think the discharge is too soon, ask about a fast appeal and the notice called the "Important Message from Medicare."
- ☐ Call the Eldercare Locator (1-800-677-1116) to find local help like meals and rides.
- ☐ Rest. Eat. Take a shift off if someone else can cover.

Hospital contacts

Hospital / unit / room _____

Nurse / case manager _____

Social worker _____

Phone _____

Admitted on (date) as: inpatient / observation _____

Questions for the doctor



Parent info sheet

The page you hand to an ER nurse. Keep it current. For ID numbers, write the last 4 digits only.

The basics

Full legal name _____

Goes by _____

Date of birth _____ Blood type (if known) _____

Home address _____

Primary language / hearing or vision needs _____

Health

Allergies (drugs, foods, latex) _____

Main conditions / diagnoses _____

Implants or devices (pacemaker, hearing aids, dentures) _____

Code status / medical orders (DNR, POLST), discuss with their doctor _____

Insurance

Medicare number (last 4) / card kept where _____

Medicare Advantage or Medigap plan + member ID (last 4) _____

Part D drug plan + member ID (last 4) _____

Medicaid ID (last 4) / state _____

VA health care? Y / N Facility _____

Long-term care insurance: company + policy (last 4) _____

Other insurance _____

Pharmacy and hospital

Pharmacy name + phone _____

Mail-order pharmacy _____

Preferred hospital _____

Where the advance directive is kept _____

Where the health care power of attorney is kept _____

Quick notes for the ER

Usual mobility (walks alone / walker / wheelchair) _____ Usual memory / alertness _____

Anything that calms or upsets them _____

 Medications

List everything: prescriptions, over-the-counter drugs, vitamins, and supplements. CMS’s discharge checklist asks for this full list. It also asks you to review it with staff before you leave the hospital.

List updated on _____

Medication + strength	What it's for	Dose + how taken	When (AM / PM)	Prescriber	Started

Bring this page to every appointment and every hospital visit. Ask the doctor or pharmacist before stopping or changing anything.

Doctors and care team

Everyone who treats your parent, plus who to call after hours.

Name	Specialty / role	Phone	Address / portal	Last visit

Home care and equipment

Home health agency + phone _____

Equipment supplier + phone _____

Equipment used (walker, oxygen, bed) _____

Recent hospital stays

Dates / hospital _____

Inpatient or observation? _____

Dates / hospital _____

Inpatient or observation? _____

Why track inpatient vs. observation: Original Medicare covers skilled nursing facility care only after a qualifying inpatient stay of at least 3 days in a row. Observation time doesn't count. Always ask the hospital or doctor if Medicare will cover a SNF stay.



Contacts

Family, friends, and the people who keep the house running.

Name	Relationship	Phone	Email	Role (decides / updates / backup)

Around the house

Neighbor with a key _____

Who has a spare key _____

Pets: name, vet, who feeds them _____

Handyman / landlord / HOA _____

Car: where keys and title are kept _____

Faith, friends, routines

Place of worship / contact _____

Close friends to call _____

Clubs, day program, volunteer work _____

Weekly routines that matter to them _____



Accounts and income

Who to call, not how to log in. No passwords, PINs, or full account numbers.

Income

Source	Paid by / contact	About how much	Deposited where

Examples: Social Security, pension, VA benefits, annuity, IRA or 401(k) withdrawals, rent income.

Bank, investment, and insurance accounts

Institution	Type	Last 4	Phone / branch	Joint owner or named beneficiary?

Where things are kept

Most recent tax return _____

Safe deposit box (bank + where the key is) _____

Deed, car title, insurance policies _____

Accountant / financial advisor _____



Monthly bills and autopays

So nothing gets shut off or lapses while you're at the hospital.

Bill	Company + phone	Due date	About how much	Autopay? From which account

Housing

Mortgage / rent / reverse mortgage _____

Property tax: due when, paid how _____

Homeowners or renters insurance _____

Who can help pay bills?

Person named in financial power of attorney _____

Joint account holder _____

Social Security representative payee (if any) _____

If your parent can't manage their Social Security or SSI payments, Social Security can appoint a representative payee, usually a family member or friend. Call 1-800-772-1213 (TTY 1-800-325-0778) to ask about it.



Legal documents checklist (1 of 2)

What each document is, in plain words, and where it's kept. Forms and rules differ by state. An elder-law or estate-planning attorney can tell you what applies to your parent.

☐ Durable power of attorney for finances

Names someone to make financial decisions for your parent when they can't.

Have it? Y / N / Not sure _____ Signed on _____ Original kept where _____

Person named _____ Copies given to _____

Source: [NIA](#) · Guides for agents: [CFPB](#), [Managing someone else's money](#)

☐ Advance directive: health care power of attorney

A legal document that names a health care proxy (also called an agent or representative): the person who makes health care decisions if your parent can't communicate them.

Have it? Y / N / Not sure _____ Signed on _____ Original kept where _____

Person named _____ Copies given to _____

Source: [NIA](#), [Advance directives](#)

☐ Advance directive: living will

A legal document that tells doctors how your parent wants to be treated if they can't make their own decisions about emergency treatment. NIA notes many states provide advance directive forms for free. You don't have to use a lawyer for them.

Have it? Y / N / Not sure _____ Signed on _____ Original kept where _____

Person named _____ Copies given to _____

Source: [NIA](#), [Advance directives](#) · [NIA](#), [Affairs checklist](#)



Legal documents checklist (2 of 2)

☐ Permission to share health information (HIPAA authorization)

Lets doctors talk with the people your parent names. HHS says the HIPAA Privacy Rule doesn't require providers to share with family unless they're the patient's personal representative. Providers may still share in some cases, for example if the patient doesn't object. NIA notes that giving this permission is different from naming a health care proxy. You may need to sign the doctor's or plan's form.

Have it? Y / N / Not sure _____ Signed on _____ Original kept where _____

Person named _____ Copies given to _____

Source: [HHS, Family members and friends](#) · [NIA](#)

☐ Will

Says how your parent's property, money, and other assets are distributed and managed when they die. Without one, the estate is distributed according to state law.

Have it? Y / N / Not sure _____ Signed on _____ Original kept where _____

Person named _____ Copies given to _____

Source: [NIA](#)

☐ Living trust

Names a person, called the trustee, to hold and distribute property and funds for your parent when they can no longer manage their affairs.

Have it? Y / N / Not sure _____ Signed on _____ Original kept where _____

Person named _____ Copies given to _____

Source: [NIA](#) · Trustee guide: [CFPB](#)

Also note, if they exist

- ☐ Medical orders such as a DNR or POLST form (signed by a doctor). NIA says to check with your state health department about POLST.
- ☐ Funeral or burial wishes
- ☐ Military discharge papers, birth and marriage certificates
- ☐ Name and phone of the attorney who drafted the documents: _____

Source: [NIA, Advance directives](#)



Medicare vs. Medicaid basics

Two programs with similar names that pay for very different things.

Medicare

- ☐ Federal health insurance for people 65 or older who meet citizenship or residency rules, and some younger people with a disability, End-Stage Renal Disease, or ALS.
- ☐ Part A covers inpatient hospital care when your parent is formally admitted as an inpatient with a doctor's order.
- ☐ Part A covers skilled nursing facility care for a limited time, generally after a qualifying inpatient stay of at least 3 days in a row.

Medicaid

- ☐ A joint federal and state program that helps cover medical costs for certain people with limited income, including older adults and people with disabilities.
- ☐ Eligibility rules are different in each state.
- ☐ Offers benefits not normally covered by Medicare, like nursing home care and personal care services.
- ☐ People with both are "dually eligible." Medicare pays first, and Medicaid pays last.



Medicare doesn't pay for long-term custodial care

Long-term care (also called custodial care) means help with everyday tasks like dressing, bathing, and using the bathroom. It also includes things like home-delivered meals and adult day care. Medicare.gov says Medicare doesn't pay for it, and neither does Medigap. You pay all costs for non-covered services, including most long-term care. Your parent may be able to get it through **Medicaid** (if they meet their state's rules) or private long-term care insurance.

Free, unbiased help

State Health Insurance Assistance Programs (SHIPs) give free one-on-one Medicare counseling: shiphelp.org. To apply for Medicaid, contact your state Medicaid agency: [medicaid.gov \(state list\)](https://www.medicicaid.gov/state-list). Medicare: 1-800-633-4227 (TTY 1-877-486-2048).

♥ Can you get paid to care for a parent?

Sometimes, through specific programs. Every program has its own rules. Here’s where to start asking.

1. VA: Program of Comprehensive Assistance for Family Caregivers (PCAFC)

For family caregivers of eligible veterans. VA says the veteran must have a VA disability rating of 70% or higher, be discharged (or have a medical discharge date), need at least 6 months of continuous in-person personal care, and be enrolled in VA health care. The caregiver must be 18+ and a family member or live (or be willing to live) full time with the veteran. Eligible Primary Family Caregivers may get a monthly stipend, plus other benefits. You and the veteran apply together.

[va.gov](#), [PCAFC](#) · VA Caregiver Support Line 1-855-260-3274 (Mon–Fri, 8 a.m.–8 p.m. ET), [caregiver.va.gov](#)

2. State Medicaid self-directed (consumer-directed) programs

If your parent already gets Medicaid, their state may let a family member or friend become a paid caregiver. USAGov says many states call this a consumer-directed personal assistance program. Rules and pay vary by state. CMS says that in self-directed Medicaid services, participants can have the authority to recruit, hire, train, and supervise the people who provide their services.

[usa.gov](#), [Get paid as a caregiver](#) · [medicaid.gov](#), [Self-directed services](#) · Find your state agency: [medicaid.gov state list](#)

3. Other routes USAGov lists

Some long-term care insurance policies (ask the agent for written confirmation of benefits), state paid family leave in some states (contact your state labor office), VA’s Veteran-Directed Home and Community-Based Services, and VA Aid and Attendance. AARP Foundation’s Paid4Care hub lets you search programs by state.

[usa.gov](#) · [AARP Foundation Paid4Care](#)

Program	Applied on	Case worker + phone	Status / next step

Hospital discharge questions (1 of 2)

Start asking early in the stay. Write the answer under each question. Based on CMS's discharge planning checklist.

☐ Who do we call with questions after we leave? (name + phone)

☐ What complications should we watch for, and what do we do if they happen?

☐ Which medications continue, which stop, which are new, and at what dose?

☐ Where will my parent get care after discharge? What are the options (like home health care)?

☐ Will they need medical equipment? Is it covered by Medicare? Who arranges delivery?

☐ Is my parent ready to bathe, dress, use the bathroom, and climb stairs? Who helps with what they can't?

☐ Who handles cooking, shopping, cleaning, paying bills, and rides to appointments?

☐ Can you show me how to do any special care tasks (like changing a bandage), and let me practice?

Hospital discharge questions (2 of 2)

- ☐ What will insurance cover, and what will we pay? Is there help with costs? (Ask a social worker or the health plan.)

- ☐ Can we get written discharge instructions we can read and understand, plus a summary of current health status?

- ☐ Was my parent an inpatient or under observation, and for how many days?

- ☐ Can I talk to a social worker about support groups and how our family is coping?

- ☐ For me, the caregiver: what training do I need, and who do I call if I'm stuck?



If you think it's too soon to leave

CMS says you can ask for a fast appeal. In a hospital, staff should give you a notice called the **"Important Message from Medicare"** explaining fast appeal rights. In a skilled nursing facility, or for home health or hospice, the notice is the **"Notice of Medicare Non-Coverage."** If you don't get a notice, ask for it. Call 1-800-MEDICARE to get the phone number for your state's reviewer (BFCC-QIO).

Before you go home

- ☐ Pick up new prescriptions and any special-diet food before discharge day, so you aren't making extra trips.
- ☐ Book follow-up appointments and write them on page 17.
- ☐ Compare home health agencies and nursing homes at [Medicare.gov/care-compare](https://www.medicare.gov/care-compare).



Month / year _____

Main caregiver this month _____

Bring this page to appointments. Patterns over a month are easier for a doctor to act on than "she seems off lately."



Notes

Hotlines and resources

Free, official places to call. In an emergency, call **911**.

1-800-677-1116

Eldercare Locator

Call or text. Finds local services for older adults and families (meals, rides, Area Agencies on Aging).
eldercare.acl.gov

1-800-633-4227

Medicare

1-800-MEDICARE, 24/7 except some federal holidays. TTY 1-877-486-2048.
medicare.gov

shiphelp.org

SHIP Medicare counseling

Free one-on-one Medicare counseling. Or call 1-800-MEDICARE for your SHIP's number.
shiphelp.org

1-855-260-3274

VA Caregiver Support Line

Mon-Fri, 8 a.m.-8 p.m. ET.
caregiver.va.gov

1-800-772-1213

Social Security

TTY 1-800-325-0778. Includes representative payee questions.
ssa.gov

1-833-372-8311

National Elder Fraud Hotline

833-FRAUD-11. Mon-Fri, 10 a.m.-6 p.m. ET. For fraud against anyone 60+. (The hotline warns about scammers posing as the hotline.)
ovc.ojp.gov

1-877-808-2468

Senior Medicare Patrol

Help with Medicare and Medicaid fraud, errors, and abuse. Listed in CMS discharge checklist No. 11376.
smpresource.org

988

988 Suicide & Crisis Lifeline

Call, text, or chat for emotional support, including for caregivers.
988lifeline.org

1-844-872-4681

USAGov

Ask any government-related question. Has a "get paid as a caregiver" guide.
usa.gov



Watch the full videos

Plain-English videos on the topics in this binder: youtube.com/@agingparentsnext

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