Personal Injury Settlement Consulting

In settling the case, have I taken all of the necessary steps to protect my client and my practice?

1.	Does my client have adequate medical insurance; i.e., if my client Medicare supplement?	nt has Medicare, ☐ Yes	does he have a ☐ No
2.	Is my client entitled to any public benefits he is not currently rec Medicaid Waiver Program, New Jersey Family Care, Section 8 l Stamps, or Psychiatric Institutionalization?		
3.	Has my client obtained advice concerning Federal and State esta	te taxes and inco	ome taxes? ☐ No
4.	Does my client have a Will, Living Trust, Living Will, and Power minor or incapacitated person, do my client's parents have a Thi		
5.	Have I obtained a competent investment advisor or professional	trustee for my cl	lient? □ No
6.	Does my client need a Special Needs trust? Note: See separate questionnaire, does my client need a special	☐ Yes needs trust?	□ No
7.	Would my client benefit from a Settlement Preservation Trust? Yes No Note: These trusts are particularly useful if the client is a minor or incapacitated person who is not receiving or likely to receive means-tested public benefits such as SSI and Medicaid or if my client needs assistance with money management)		
8.	Is a Medicare Set-Aside Arrangement required? Note: See separate questionnaire, is a Medicare Set-Aside Arran	☐ Yes ngement (MSA)	□ No required?
9.	Would my client benefit from a structured settlement?	□ Yes	□ No
10.	Have all liens been satisfied or reduced; including: Medicaid Medicare Advantage Plan Medicare Part D ARISA State Worker's Compensation Federal Worker's Compensation Hospital Lien Veteran's Administration Claims Federal Employee Health Benefits Act Welfare Liens	 ☐ Yes 	 □ No
	□ Mental Health Liens	□ Yes	\square No