

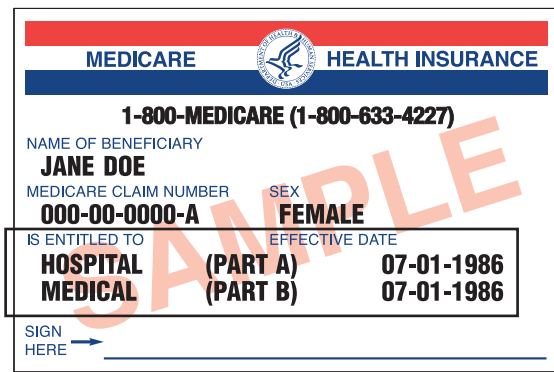
4. What is your effective date (when you first enrolled) for Medicare Part A?

		—			—				
Month			Day			Year			

AND

What is your effective date (when you first enrolled) for Medicare Part B?

		—			—				
Month			Day			Year			



5. What is your ZIP Code?

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6. What county do you live in? _____

7. What type(s) of prescription drug coverage do you have? (Check all that apply)

- Medicare Prescription Drug Plan
- Medicare Health Plan (e.g., HMO, PPO, Private Fee-for-Service Plan, Medicare Medical Savings Account Plan)
- Medicaid
- Employer or Union Retire Plan
Medigap (Medicare Supplement Insurance) Policy
- None of the Above
- I don't know

You can get Medicare prescription drug coverage in two different ways:

- Medicare Advantage Plans and Other Medicare Plans.
Medicare Advantage Plans include HMOs, PPOs, Private-Fee-for-Service Plans, Medicare Medical Savings Account (MSA) Plans, and Special Needs Plans.* You generally get all of your Medicare covered health care through that plan. These plans may offer extra benefits and lower copayments than the Original Medicare Plan. However, you may have to use the plan's doctors and hospitals to get services.
- Medicare Prescription Drug Plans.
These plans add coverage to the Original Medicare Plan (and some Medicare Cost Plans, Medicare Private Fee-for-Service Plans, and Medicare Medical Savings Account Plans). The Original Medicare Plan is a fee-for-service plan. You can go to any doctor or hospital that accepts Medicare.

* Other Medicare Plans include Medicare Cost Plans, Demonstrations/Pilot Programs, all Programs of All-inclusive Care for the Elderly (PACE).

8. Are you interested in learning about prescription drug coverage available through:

- Medicare Advantage or Other Medicare Plans
- Medicare Prescription Drug Plans
- Both
- Don't know

9. Did you receive a letter from Medicare or the Social Security Administration (SSA) that said you are either eligible for or qualified for extra help paying for your Medicare Prescription Drug Plan costs (premium, deductible, and drug costs)?

- YES, I received a letter from Medicare
- YES, I received a letter from the Social Security Administration (SSA)

If you received either of these letters, please find it and keep it with this worksheet. You will need to refer to this letter for information when you are choosing a prescription drug plan.

- NO, I did not receive a letter
- Don't know

10. What is your marital status?

- Married – Living Together
- Married – Not Living Together
- Single
- Divorced
- Widowed
- Separated

Are your combined savings, investments and real estate (other than your home) worth more than:

- \$11,500 if you are single, a widow(er) or your spouse does not live with you; or
- \$23,000 if you are married and living together?

Include the things you own by yourself, with your spouse or with someone else. **Do NOT include your home**, vehicles, burial plots, or personal possessions.

- YES
- NO*
- Not sure

** If you answered "No," you may be eligible for extra help in paying for your prescription drug costs. For more information, see the Social Security Administration's website at www.socialsecurity.gov or call them at 1-800-772-1213.*

11. Which drugs do you currently take? (Please also list the dosage, how many times you take it per month, and your currently monthly cost.)

Drug Name	Dosage	30-Day Qty	Monthly Cost

12. Is there a pharmacy you prefer to use?

YES

NO

If YES, please provide the name and address of your preferred pharmacy

Name of Pharmacy

Street Address

_____ City	_____ State	_____ ZIP Code
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What should I do with My Completed Worksheet?

Once you complete this worksheet, you can use it to find a Medicare drug plan that meets your needs. Keep this worksheet with you when you:

- Meet with an outreach counselor, such as a State Health Insurance Assistance Program (SHIP) counselor or someone at your local senior center;
- Visit the www.medicare.gov website; or
- Call Medicare at 1-800-MEDICARE (1-800-633-4227) to speak with a Customer Service Representative. (TTY users should call 1-877-486-2048).