

Medicare Insurance Agent Pre-meeting Checklist

This checklist is meant to be used to help you organize your thoughts, coverage needs and how you currently or intend to use your Medicare insurance coverage.

It's also a place for you to list doctors you need to be able to use in-network and prescription drugs you need covered. It's a great chance to reflect on the number of times you see doctors over the course of a year or identify any chronic conditions you have.

Use this checklist/guide prior to meeting with or calling a Medicare insurance agent. It's also a handy reference tool if you're a DIY-er and shopping for Medicare insurance online or over the phone by yourself.

Remember, this is a reference tool for you, the Medicare "consumer" to you use – if filled out completely, it will contain personal health information you wouldn't necessarily want or need to share with a Medicare insurance company or agent. Medicare Advantage and Medicare Part D Prescription Drug Plan insurance companies cannot reject your application due to your health status or how many prescriptions you take. Medicare Supplement plans may be able to reject you, depending upon when you are trying to sign up and where you live.

Medicare insurance agents generally aren't allowed to ask you health-related questions that aren't on the policy applications. **However, some of this information is very helpful for any Medicare insurance agent to know in order to help you find the best product for your Medicare insurance needs. It's going to be very difficult for an agent to help you find an insurance plan that covers your prescriptions if they don't know what prescriptions you need covered! In the end, it's up to you how much you share.**

This checklist is helpful to use in conjunction with the Medicare Insurance Agent Interview Checklist



Medicare Insurance Agent Pre-meeting Checklist

MEDICARE INSURANCE AGENT CONTACT INFORMATION

Name: _____

Email: _____

Phone: _____

Website: _____

Office Address: _____

Circle your current or upcoming enrollment period (AEP, OEP, IEP, SEP). (Don't worry if you don't know this, but if you need a refresher, it's in Chapter Two of the book. A list can also be found in the links section of the website).



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Medicare Insurance Agent Pre-meeting

Checklist

Write down your prescription drug names, how often you take them, and dosages. Or bring your prescription bottles with you if you're consulting with an agent.

MY PRESCRIPTIONS

Prescription drug name: _____
Tier: _____
Dosage: _____
How often do you take a pill? _____
How often is this prescription refilled? _____
Quantity: _____
Filled at the pharmacy? yes no
Filled by mail-order? yes no

MY PRESCRIPTIONS

Prescription drug name: _____
Tier: _____
Dosage: _____
How often do you take a pill? _____
How often is this prescription refilled? _____
Quantity: _____
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Medicare Insurance Agent Pre-meeting Checklist

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Medicare Insurance Agent Pre-meeting Checklist

MY PREFERRED PHARMACY

Name: _____
Address: _____
Phone: _____

Write down your Primary Care Physician, or the doctor you see most often.

PRIMARY CARE PHYSICIAN

Write down any doctors you've seen in the past or plan to see over the next twelve months. Hospitals and facilities, too.

PAST / FUTURE DOCTORS



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If you're a snowbird or if you travel often, write down where you plan to or routinely visit.

TRAVEL

MY CURRENT PLAN DETAILS

What you like about your plan? _____

What you'd change about your plan if you could? _____

Any additional benefits you would like, such as dental, vision, hearing, etc.?
Are you eligible for Medicare? yes no



Medicare Insurance Agent Pre-meeting Checklist

If yes, write down your Medicare number (found on your red, white, and blue Medicare card) _____

Are you still working?

yes no

Do you make more than approximately \$20,000 per year as an individual or \$26,000 as a couple?

yes no

Are you currently on Medicare?

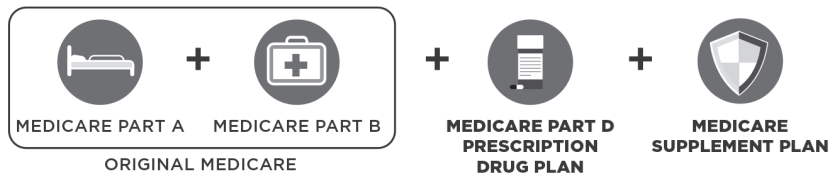
yes no

If you haven't yet elected your Medicare insurance options or are new to Medicare, which Medicare path are you considering? (Circle One)

Option 1: Bare-with-Medicare



Option 2: Medicare Part D + Supplement



Option 3: Medicare Part C



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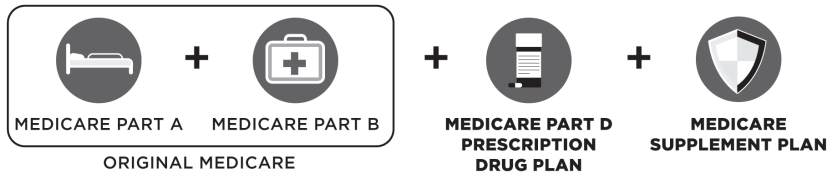
Medicare Insurance Agent Pre-meeting Checklist

What kind of insurance coverage do you currently have? (Circle One)

Option 1: Bare-with-Medicare



Option 2: Medicare Part D + Supplement



Option 3: Medicare Part C



Group Medicare/Employer Retirement Plan

Still working and on my employer's health insurance plan

I have an Affordable Care Act plan

Other



Medicare Insurance Agent Pre-meeting Checklist

Information about your other health coverage (if you have any), including policy and group numbers (found on your health insurance card).

What do you like about your current coverage? What don't you like? List 2-3 for each.

Of the doctors you listed previously, are there any that are more important you must continue to be able to see?



Medicare Insurance Agent Pre-meeting Checklist

What hospitals would you prefer to use if you need to?

Are there any upcoming appointments or health care services you think you'll need in the next year or so?

Do you wear glasses or use contacts? yes no

 Do you have a hearing aid? yes no

 Do you currently use any Durable Medical Equipment? yes no

 Do you have dental insurance coverage? yes no

 If so, list your dentist and coverage details.

Do you go to a gym? yes no

 If so, which one?



Medicare Insurance Agent Pre-meeting Checklist

What chronic conditions are you currently being treated for?

What can you afford in terms of a monthly premium?



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