



Getting Medicare right

Your Health Insurance Information

Original Medicare

Original Medicare is the traditional fee-for-service Medicare program provided by the federal government.

- One way to know if you have Original Medicare is that you show your red, white and blue Medicare card when you go to the doctor or other health care provider.

You can use this form to keep all your Medicare information in one place.

- Fill out as much as you can.
- This form is for you. You do not need to give it to anyone else.

Your name: _____

I have Medicare:

Part A: Yes No effective date __/__/____

Part B: Yes No effective date __/__/____

You can find your effective date on your Medicare card.

My state Medicaid program pays my Part B premium: Yes No

Medicare number: _____

I have a Part D drug plan: Yes No effective date __/__/____

If **yes**, fill out as much information as you can about your Part D plan below.

Name of Part D plan: _____

Part D plan phone number: (____) _____-____

Part D plan ID number: _____

I have Extra Help (Low-Income Subsidy): Yes No

I pay \$_____ for brand-name prescriptions.

I pay \$_____ for generic prescriptions.

I need to get approval before I can get some of my drugs: Yes No

I have a Medigap plan: Yes No effective date __/__/____

If **yes**, circle which letter plan and fill out as much information as you can about your Medigap below.

A	B	C	D	E	F	G	H	I	J	K	L	M	N
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Name of Medigap insurance company: _____

Phone number of company: (____) _____-____

Plan ID number: _____

I have other supplemental insurance: current employer retiree VA

other _____

Note: Protect your Medicare information. Keep it private and safe.