MEDICARE RIGHTS CENTER
Getting Medicare right

Plan Finder worksheet

Before session

Review and record client's counseling session in Salesforce:

- Contact information (section 1)
- Medicare coverage (section 2)
- Low-income enrollment (section 3)

Section 1: Client's Contact information

Name: _____ Contact ID: _____ Date of Birth: _____

Phone Number: _____ Email:_____

Address: _____

City, State: _____ Zip Code:_____

Section 2: Current prescription drug coverage
Current Medicare coverage (circle all that apply)

Original Medicare	Medicare Advantage Plan (MA Plan)	Other kinds of coverage:
• Stand-alone Part D plan • Medigap • No Part D	• MA Plan with prescription drug coverage * • MA Plan with separate PDP (only PFFS, MSA and Cost Plans) • MA Plan without drug coverage	• Employer/union/retiree plan** • Veterans Affairs benefits** • EPIC • Other:_____

* If client enrolls in a new stand-alone Part D plan, they will be disenrolled from their current MA Plan.
** Client should check to see how enrollment in a stand-alone Part D plan will affect their benefits.

Section 3: Low-income programs

Ensure the caller has been screened for Extra Help and is either already enrolled or not eligible.

1. Does the client have Extra Help that will carry into next year?
Are they currently enrolled in or do they receive any of the following low-income benefits? If so, they should automatically receive Extra Help:

- Medicaid
- Medicare Savings Program
- Supplemental Security Income (SSI)

If caller is unsure, ask how much they typically pay for each prescription at a pharmacy.

- Extra Help and Medicaid/MSP: $1.60 generic/$4.80 brand-name or $4.90 generic/$12.15 brand-name, depending on income
- Extra Help with Medicare only: $4.90 generic/$12.15 brand-name

□ Yes, the client has Extra Help
□ No, the client does not have Extra Help

2. If the client is NOT enrolled in Extra Help, confirm they are not eligible.

During session

□ Confirm all information in Salesforce is correct

□ Collect the information below

What plan does the client currently have? _____

Why is the client changing their plan? _____
(i.e. premium increase, formulary changes, personal health reasons, decrease in current plan service, plan termination or consolidation)

What change is the client seeking to make? _____
(i.e. MA Plan to stand-alone Part D plan, stand-alone Part D plan to stand-alone Part D plan; etc.)

Does the receive their medication from a retail pharmacy or mail order pharmacy?

Pharmacy name:_____

Pharmacy address: _____

Ways to refine a Plan Finder search:

- What is the maximum amount you can spend on a Part D monthly premium?
- What is the maximum amount you can afford to spend out of pocket before you begin to pay copays?
- Do you travel a lot, and need a plan that offers nationwide coverage?
- Do you need a plan that provides mail order?
- Do you have any long-term or chronic health conditions?
- Do you want a plan from any specific company?

After session

- Verify and update contact information, birth date, and Medicare coverage of client in Salesforce.

- Enter session in Salesforce as Plan Finder case. Include the names of the plans we sent to client and any feedback they had about Plan Finder/the counseling session.

- Print out 1 copy of the top three plans for client. Send the client the customized plan reports with these pieces of information included:
  - Plan ratings
  - Fixed costs
  - Drug coverage information
  - Estimated annual drug costs for their pharmacy
  - Estimated drug cost details for their pharmacy
  - Estimated monthly drug costs for their pharmacy
  - Estimated drug costs-mail order (only if they use it)
  - Definitions

- Send plan reports and closing letter. Please highlight the following information in each plan report:
  - Drug list ID and password date
  - Plan name and phone number for non-members
  - Overall plan rating
  - All fixed costs
  - Any drug restrictions

- Record any of your own feedback about the Plan Finder tool in Salesforce.

