



RETURN FORMS TO:

SeniorsPlus  
Attn: SHIP  
8 Falcon Road  
Lewiston, ME 04240  
1-800-427-1241 or 795-4010

## MEDICARE PRESCRIPTION DRUG PLAN SEARCH

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

EMAIL: \_\_\_\_\_

MEDICARE #: \_\_\_\_\_

MEDICARE HOSPITAL PART A - EFFECTIVE DATE: \_\_\_\_\_

MEDICARE MEDICAL PART B - EFFECTIVE DATE: \_\_\_\_\_

PHARMACY #1 \_\_\_\_\_

PHARMACY #2 \_\_\_\_\_

CURRENT INSURANCE: \_\_\_\_\_

ARE YOU RECEIVING MAINECARE? YES \_\_\_\_\_ NO \_\_\_\_\_

DO YOU HAVE LESS THAN \$58,000 IN \*CASH ASSETS FOR A SINGLE PERSON? YES \_\_\_\_\_ NO \_\_\_\_\_

DO YOU HAVE LESS THAN \$87,000 IN \*CASH ASSETS FOR A COUPLE? YES \_\_\_\_\_ NO \_\_\_\_\_

IS YOUR GROSS MONTHLY INCOME LESS THAN \$2,042 FOR A SINGLE PERSON? YES \_\_\_\_\_ NO \_\_\_\_\_

IS YOUR GROSS MONTHLY INCOME LESS THAN \$2,758 FOR A COUPLE? YES \_\_\_\_\_ NO \_\_\_\_\_

\* CASH ASSET EXAMPLES: SAVINGS, CHECKING, STOCKS, BONDS, CD'S, RETIREMENT FUNDS, AND CASH AT HOME. YOUR HOME AND ONE CAR ARE EXCLUDED.

OFFICE USE ONLY

DATE RECEIVED: \_\_\_\_\_

MAILED RESULTS: \_\_\_\_\_

USERNAME & PASSWORD

\_\_\_\_\_

ZIP CODE \_\_\_\_\_

DATE: \_\_\_\_\_

