**Create an Account for a Personalized Medicare Plan Finder Experience and:**

THe Medicare Plan Finder

* Build a better drug list. The Plan Finder can make suggestions based on prescriptions you filled within the last 12 months.
* Modify your drug list and save changes.
* Compare benefits and costs in your current plan to other plans available in your area.
* See prices based on any help you get with drug costs.

**Create your new account**

If you want access to personalized information and features, you’ll need to create an account. Visit **Medicare.gov/plan-compare** and click “Log in or create account.”

Have the following information ready:

1. Medicare Number – You can find this on your red, white, and blue Medicare card. If you’re new to Medicare and don’t have your Medicare card yet, you can get your Medicare number on the letter you get from Social Security after you enroll.
2. Last name
3. Date of birth
4. Current address with ZIP code or city
5. Part A or Part B coverage start date (find on your Medicare card)

Once you add this information and select “Next,” you can create a username and password and use your new Medicare account. You can write your username and a password hint below. Just remember to keep this sheet in a safe place to protect your privacy.

My Password Hint:

My Username:

**Forgot your username or password?**

Insert Your Agency Name and Phone Number Here

If you have an existing account, but forgot the username or password, click “Trouble signing in?” under the Username box on the log in page. You’ll need this information:

1. Medicare number
2. Last name
3. Date of birth

**USERNAME Creation Guidelines:**

|  |  |
| --- | --- |
| **DO:** | **DON’T:** |
| * 8-30 characters long with no spaces
* Can include letters, numbers, and the following special characters: @, ! , - \_ $
* Include at least 4 letters
* Use email address
 | * Use your Medicare ID or SSN
* Cannot be the same as your password
* Don’t use a special charter as the first or last character of your username
 |

**PASSWORD Creation Guidelines:**

* Must be 8 – 16 characters long
* Must contain at least one letter
* Must contain at least one number
* Must contain one or more special characters: @ ! $ % ^ \* ( )
* Must be different from the previous six passwords
* Cannot contain your username
* Cannot contain your Medicare ID or SSN

**Other TIPS:**

* “Estimated yearly drug cost” provided includes the monthly premium amount.
* If you have more than 40 prescriptions, you will need to contact 1-800-Medicare for assistance.
* List **current** prescription medications and pharmacy below. Attach additional page if necessary.

**Pharmacy Preference (1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |
| --- | --- | --- |
| ***Drug Name*** | ***Dose Amount*** | ***How often Taken*** |
| 1. |   |   |
| 2. |   |   |
| 3. |   |   |
| 4. |   |   |
| 5. |   |   |
| 6. |   |   |
| 7. |  |  |
| 8. |  |  |
| 9. |   |   |
| 10. |   |   |
| 11. |  |  |
| 12. |  |  |
| 13. |  |  |