Medicare plan comparison

Open Enrollment runs October 15 to December 7. First, list what any plan must cover for you.

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NAME	DATE	PLAN I HAVE NOW

My medicines

MEDICINE	DOSE	HOW OFTEN

My doctors and specialists

NAME	WHAT FOR

MY PHARMACY	EXTRAS THAT MATTER TO ME (DENTAL, VISION, HEARING)

Read your plan's Annual Notice of Change before you compare.

Free from KinLine · kinlineapp.com
Or keep it on your phone in the KinLine app.

Medicare plan comparison

Page 2: your plan now next to two others. Medicare.gov/plan-compare has the numbers.

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Compare up to three plans

	MY PLAN NOW	PLAN 2	PLAN 3
Plan name			
Monthly premium			
Yearly deductible			
Estimated yearly cost			
All my medicines covered?			
My doctors in network?			
My pharmacy in network?			
Star rating			
Extra benefits			
Plan phone			

I CHOSE

ENROLLED ON (DATE) AND CONFIRMATION NUMBER

Free help: 1-800-MEDICARE (1-800-633-4227) or your local SHIP (shiphelp.org).

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