



Medicare Part D Disclaimer and Information Sheet

BOTH SIDES of this form must be fully completed, signed by the customer and returned to the ADRC at the address above in order for us to assist you with your drug plan review. One sheet per person.

NOTICE TO CUSTOMERS OF ADRC OPEN ENROLLMENT REVIEWS

The ADRC will assist you in exploring your drug plan options by using the plan finder tool on Medicare’s website, www.medicare.gov. The ADRC’s role is to provide you with assistance, information and guidance so that you can choose the plan you feel is best for you. **The ADRC cannot and will not choose a plan for you.**

Accuracy of results depends upon information provided by the Part D plans on Medicare’s website and information provided by you on this form. The Medicare website is subject to revision and/or error. The drug prices are approximate and total year costs are estimates.

If, after reviewing your drug plan options, you wish to enroll into a new plan for next year, the ADRC will complete the enrollment process for you, provided your consent has been provided.

If you are unavailable to provide consent yourself, you may appoint a representative to do so on your behalf. Your representative must provide written proof that they are authorized to enroll you into a different plan for next year. Without such proof, the ADRC will not complete the enrollment process for you. Instead, the ADRC will provide your representative with your plan finder results and instructions for how you can complete the enrollment process on your own.

If you reside outside of Sauk County and require any follow up assistance outside of this review, you must seek such assistance from the ADRC in the county in which you reside.

A signature below indicates that you have read, understand and agree to the information in this disclaimer and you are requesting that the ADRC provide you with assistance to review your Medicare Part D Plan:

Signature _____ Date _____

PLEASE FLIP FORM OVER!

Please fill out the back of this form as completely as possible and return it to the ADRC office at **505 Broadway Street in Baraboo**. Once received, the ADRC will contact you to assist you with your drug plan review. You may return your form by mail or in person.

*For your safety and convenience, you may utilize the ‘drop box’ located outside the West Square Building Rear Entrance (West side of building by parking lot). Just put your form in a sealed envelope labeled ‘ADRC’ and drop it in the box. Staff will check the box daily and get your form to our ADRC office the following business day.

