## Contact me about Medicare plans

Name:			
Address:		aet	na°
City: State:	ZIP:		
Telephone:		Interested in pla	an information for:
Email:		<ul> <li>(plan availability may vary by location)</li> <li>Prescription drug plans</li> <li>Supplement plans</li> <li>Advantage plans with prescription drug coverage</li> <li>Dental plans</li> </ul>	
Currently Medicare eligible:  ☐ Yes ☐ No If no, when will you be eligible: ☐ If I'm not eligible to enroll before open enrollment begins on October 15, contact me between October 1 and December 7			
We may be able to save you money			
Fill in the following information		In network (Y/N)	Copay/coinsurance
Primary care physician			
Specialist			
Prescription			
By providing my email address or telephone n contact me regarding information related to N services and/or educational information related	/ledicare health pla		
Signature: Date:			

I understand that the person who will be discussing plan options with me may be compensated based on my enrollment in a plan. You can also call this number if you'd like to speak to a sales representative: **1-855-338-7027 (TTY: 711)**, 8 a.m. to 8 p.m., seven days a week, from October 1 - February 14 and 8 a.m. to 8 p.m., Monday - Friday, from February 15 - September 30.

Aetna Medicare is a PDP, HMO, PPO plan with a Medicare contract. Our SNPs also have contracts with State Medicaid programs. Enrollment in our plans depends on contract renewal. See Evidence of Coverage for a complete description of plan benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by service area. Aetna complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

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