

## **TURNING 65 SCHEDULE AND PROCEDURES MEDICARE/SOCIAL SECURITY**

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

### **After Turning 65 what do you plan to do?**

Retire

Keep Working

Other \_\_\_\_\_

Veteran

### **When Can I join?**

<b>INITIAL ENROLEMENT PERIOD</b>						
<b>MONTH</b>	<b>MONTH</b>	<b>MONTH</b>	<b>65th</b>	<b>MONTH</b>	<b>MONTH</b>	<b>MONTH</b>
<b>1</b>	<b>2</b>	<b>3</b>	<b>Birthday</b>	<b>5</b>	<b>6</b>	<b>7</b>

### **Actions**

**1- How to sign up for Medicare**

- a. Call 800-772-1213 Monday – Friday 7AM to 7PM
- b. Go Online [WWW.ssa.gov](http://WWW.ssa.gov)
- c. Apply at your local Social Security Office MTTF 9AM-4PM Wed 9AM to Noon

Your Medicare Card will be mailed to you in about three weeks

**2- Determine if you need Medicare Supplements and/or Medicare Part "D" OR Medicare Part "C" (Medicare Advantage)**

**3- If you delay in signing for Medicare Enrollment you will be subject to financial penalties and possibly lose all benefits**

If you have any problems or have any questions please call Maggie Stedt at Stedt Insurances Services 877-492-8234 for a free consultation. If you would like to talk about a possible quote you must first fill out and send her the INFORMATION REQUEST below:

---



**Life Health**

## **INFORMATION REQUEST**

**YES** - I would like an AGA Life and Health Licensed Sales Agent to contact me regarding Medicare Advantage, Medicare Supplement, Prescription Drug and/or Special Needs plan options.

**NAME**

**PHONE**

**EMAIL**

Do you have Medicare A & B?       Yes       No

Do you have Medicaid?       Yes       No

**SIGNATURE**

**DATE**

By completing this form you acknowledge a licensed insurance agent may contact you by phone or email to discuss Medicare Advantage plans, Medicare Supplement plans or prescription plans.