- **Remote Reviews must include this Completed Form with Application**
- **Office Reviews you can bring this Completed Form to your Appointment**



2027 PLAN YEAR - SRSRA RRC APPLICATION – REMOTE Rx REVIEW – YOUR PRESCRIPTIONS

Your Exact Name on your Medicare Card: _____

Pharmacy Name and Address - First Choice: _____

Pharmacy Name and Address - Second Choice: _____

Pharmacy Name and Address - Third Choice: _____

The Medicare Planfinder is designed to compare up to 5 pharmacies. Medicare recognizes pharmacies costs vary widely for certain meds.

Please list the complete information from your prescription drug bottles or send a list of your current medications from your pharmacies. They will print one out for you for free. It is particularly important to spell the medications correctly and include the correct dosage and frequency because you could be given the wrong insurance Plans if you submit inaccurate information. Use the back side of this form or an additional sheet if you need to add more medications. **For office appointments, the most accurate process is for you to bring the actual bottles, tubes, etc. with you** because the information required to use the Medicare Plan Finder is required to be on those medications. **Medicare's 2027 catastrophic out-of-pocket limit is $2,400 - ONLY INCLUDES DRUGS COVERED BY FORMULARY OF THE PLAN CHOSEN.**

Prescription Name – Please Print Include any HCL, ER, APAP suffix	Dosage mg/ml/g	Package Type	Quantity	Frequency
SAMPLE ENTRY #1 **Metformin HCL**	**500 mg**	**Bottle tablets**	**60 (If twice a day)**	**Monthly**
SAMPLE ENTRY #2 **Avonex**	**30 mcg/.05ml**	**Box with 1 auto injector kit**	**1**	**Monthly**
SAMPLE ENTRY #3 **Omeprazole**	**40 mg**	**Bottle capsules**	**90**	**Quarterly**
1.				
2.				

Prescription Name – Please Print Include any HCL, ER, APAP suffix	Dosage mg/ml/g	Package Type	Quantity	Frequency
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
SRSRA Membership Information: Please consider sending your 2027 dues of $25 ($5 for surviving spouse) now if you have not already.		**You can mail your check, drop it off in our locked Dropbox in front of our Office, or pay online. Pay up to three years in advance. Thank you.** Membership R0 – SRS Retiree		