DOCTORS & PRESCRIPTIONS

Let us verify that your doctors and prescriptions are covered.



Please provide information on your doctors and prescriptions.

This will allow us to verify that they are covered by any plan that we recommend.

Name:	
Zip Code:	Name of Pharmacy:

DOCTORS

Name and City	Specialty	In Network (Yes/No) (Completed by Sales Rep.)
(e.g., Dr. Jones, Greenville)	(e.g., Primary Care Doctor)	Yes/No

PRESCRIPTIONS

Name	Dosage	How Often	Tier/Cost (Completed by Sales Rep.)
(e.g., Lisinopril)	XXmg	X tablet(s) per day	Tier 1/\$XX

Notice of Information Practices and Privacy Statement

How We Collect Information About You:

USA Medicare Consultants and its employees and sub-agents collect data through a variety of means, including but not necessarily limited to, letters, phone calls, emails, and voicemails, and from the submission of applications that are either required by law or necessary to process applications or other requests for assistance through our organization.

What We Do Not Do With Your Information:

Information about your financial situation and medical conditions and care that you provide to us in writing, via email, on the phone (including information left on voicemails), contained in or attached to applications, or directly or indirectly given to us is held in strictest confidence.

We do not give out, exchange, barter, rent, sell, lend, or disseminate any information about applicants or clients who apply for or actually receive our services that any information — about applicants or clients who apply for or actually receive our services — that is considered patient confidential, restricted by law, or specifically restricted by a patient/client in a signed HIPAA consent form.

How We Do Use Your Information:

Information is only used as is reasonably necessary to process your application or to provide you with health or counseling services, which may require communication between USA Medicare Consultants and health care providers, medical product or service providers, pharmacies, insurance companies, and other providers necessary to verify your medical information is accurate and determine the type of medical supplies or health care services you need. This includes, but is not limited to, information required to obtain or purchase any type of medical supplies, devices, medications, or insurance.

USA Medicare Consultants, a division of EP Nevins Insurance Agency, Inc.

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