

Personal Health Care Journal

U.S. Administration on Aging

Take an active role in your own health care!

O Protect Your Personal Information

- Treat your Medicare, Medicaid and Social Security numbers like a credit card number.
- Remember, Medicare will not call you or visit you to sell you anything!
- Save Medicare Summary Notices (MSN) and Part D Explanations of Benefits (EOB), but shred them when they are no longer useful.

O Detect Errors, Fraud and Abuse

- Always review your Medicare Summary Notice and Part D Explanation of Benefits for mistakes.
- Compare them to prescription drug receipts and your record in this journal.
- Visit www.mymedicare.gov to access your Medicare account online.
 Make sure to look for: Charges for something you didn't get, billing for the same thing twice and services that were not ordered by your doctor.

O Report Mistakes or Questions

 If you suspect errors, fraud or abuse, report it immediately! Call your provider or plan first. If you are not satisfied with their response, call your local SMP.

O Take this journal to all your appointments.

- Ask yourself these questions before your health care appointment:
 O Is this appointment going to be covered by Medicare or my other insurance?
 O What are my symptoms? When did they start? What makes them better or worse?
 O What over-the-counter or prescription medications am I taking?
- Write down the answer to these questions, as well as what happens during your visit, in this journal.
 Make sure that you understand what your physician is telling you before leaving your appointment. If you don't, ask them to try to explain what they are telling you in a different way.
- O Take this journal with you when you travel, in case of emergency.
- O Use this journal when checking your Medicare and health care paperwork for accuracy.

Your Local SMP	
Quality of Care Concerns? Contact your state QIO	www.ahqa.org
Social Security Administration	1-800-772-1213 1-800-325-0778 TTY
Centers for Medicare & Medicaid Services (CMS)	1-800-MEDICARE
Fraud Tips Hotline HHS Office of Inspector General	1-800-HHS-TIPS
Federal Trade Commission ID Theft Hotline	1-877-438-4338
Eldercare Locator	www.eldercare.gov
State Health Insurance Programs (SHIP)	www.shiptalk.org
Long Term Care Ombudsman	www.ltcombudsman.org
SMP Locator	www.smpresource.org

Name:		
Doctor's Name:		
Clinic Name:	Phone Number: ()
Clinic Address:		
City, State, and Zip:		
Pharmacist Name:	Phone Number: ()
Emergency Contact:	Phone Number: ()

If lost, please return to doctor's office.

List of Appointments

Date Physician/Phone Number

Reason for Visit

List of Appointments

Date Physician/Phone Number

Reason for Visit

Do you:						Persor	nal Habits
Drink Alcohol:	[] drinks per day	E	xercise:	[] minutes	per week
Currently Smoke:	[] packs a day	F	lave smoked for	[] years	
							Allergies
Date		Allergic to what?		Symp	toms/	Reactions	

Condition	When Patient was Diagnosed	Parent or Sibling with Condition?
Asthma:		
Cancer, Type:		
Diabetes, Type: 1 2		
Heart Disease:		
High Blood Pressure:		
High Cholesterol:		
Stroke:		
Chronic Conditions:		
Depression:		
Dementia:		

Use this space to keep track of your medications and any changes that your provider makes.

Drug Name	Dosage	Directions	Purpose	Date Started

Use this space to keep track of your medications and any changes that your provider makes.

Drug Name	Dosage	Directions	Purpose	Date Started

Date	Equipment	Provider of Equipment	Advising Doctor

List of Operations/Surgeries

Date	Type of Operation	Hospital/Clinic



Question/Symptoms/Problems

Answers/Explanations

Weight:	
Blood Pressure:	





Question/Symptoms/Problems

Answers/Explanations

Weight:	
Blood Pressure:	





Question/Symptoms/Problems

Answers/Explanations

Weight:	
Blood Pressure:	





Question/Symptoms/Problems

Answers/Explanations

Weight:	
Blood Pressure:	





Question/Symptoms/Problems

Answers/Explanations

Weight:	
Blood Pressure:	





Question/Symptoms/Problems

Answers/Explanations

Weight:	
Blood Pressure:	





Question/Symptoms/Problems

Answers/Explanations

Weight:	
Blood Pressure:	





Question/Symptoms/Problems

Answers/Explanations

Weight:	
Blood Pressure:	





Question/Symptoms/Problems

Answers/Explanations

Weight:	
Blood Pressure:	





Question/Symptoms/Problems

Answers/Explanations

Weight:	
Blood Pressure:	





Question/Symptoms/Problems

Answers/Explanations

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Blood Pressure:	









Your local SMP Program offers the following:

- SCREENING health care bills or Medicare Summary Notices for possible errors, or overt fraud and abuse of Medicare and Medicaid programs.
- O INFORMATION about how to protect yourself, report and respond to health care scams.
- ASSISTANCE with contacting your doctor or other health care providers to discuss billing problems if you are not comfortable doing it yourself.

Funded in part by the U.S. Administration on Aging.

Protect Detect Report Visit the SMP locator at: www.smpresource.org



SCAM GRAM

www.smpresource.org

