

CHRONIC SPECIAL NEEDS PLAN (C-SNP) PRE-QUALIFICATION ASSESSMENT FORM

For beneficiaries with Chronic Heart Failure (CHF), Diabetes Mellitus and/or Cardiovascular Disorders
DrExtraCare (HMO C-SNP) and DrTotalCare (HMO C-SNP) are Medicare Advantage Chronic Special Needs Plans for individuals who meet specific enrollment criteria. To be eligible for either plan, you must have Medicare Part A, be eligible for Medicare Part B, and have been diagnosed with Chronic Heart Failure (CHF), Diabetes Mellitus and/or Cardiovascular Disorders. Please submit this completed pre-qualification form along with your enrollment application. Doctors HealthCare Plans, Inc. will attempt to validate the information with the physician(s) listed in this assessment form. If you answer "NO" to all of the questions in Sections A, B, and C, you will not be eligible for enrollment in these Medicare Advantage Chronic Special Needs Plans.

Name

MBI#

Date of Birth

CLINICAL PRE-QUALIFICATION QUESTIONS

Section A – Diabetes Mellitus

If the applicant answers "Yes" or "Not Sure" to any of the following questions, then the beneficiary pre-qualifies for the C-SNP.

1. Have you ever or do you currently measure/or do you monitor your blood sugar?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure
2. Have you ever been told by a doctor that you have high blood sugar or diabetes?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure
3. Have you been prescribed or do you take insulin or an oral medication that's supposed to lower your blood sugar?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure
4. MEDICATION QUESTION: What medicines do you take for diabetes?			

Section B – Chronic Heart Failure

If the applicant answers "Yes" or "Not Sure" to any of the following questions, then the beneficiary pre-qualifies for the C-SNP.

1. Have you had problems with fluid in your lungs and swelling in your legs in the past, accompanied by shortness of breath, due to a heart problem?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure
2. Have you ever been told by a doctor or clinic that you have heart failure or Congestive Heart Failure (weak heart or weak heart pump)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure

3. During the past 12 months, have you been counseled or educated about weighing yourself daily due to a heart problem?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure
4. MEDICATION QUESTION: What medicines do you take for CHF?	

Section C – Cardiovascular Disorders

If the applicant answers "Yes" or "Not Sure" to any of the following questions, then the beneficiary pre-qualifies for the C-SNP.

1. Has a doctor ever told you that you have a heart problem?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure
2. Have you been in the hospital or emergency room in the last year because of heart problems (like chest pain or trouble breathing)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure
3. Do you see a heart doctor regularly?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure
4. MEDICATION QUESTION: Do you take any medicine for your heart?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure

PRIMARY CARE PHYSICIAN / SPECIALIST PHYSICIAN

Primary Care/Specialist Physician Name

Physician Address

Physician Telephone Number

Applicant Signature Today's Date

Witness Signature (if applicable) Today's Date

Physician Name (Print)

Physician Signature Today's Date

This plan is available to individuals with certain Chronic conditions. To qualify for a Chronic Special Needs Plan, Physician diagnosis of the condition must be verified. Enrollees who do not have the condition will be disenrolled.

Doctors Healthcare Plans, Inc., is an HMO with a Medicare contract. Enrollment in Doctors HealthCare Plans, Inc., depends on contract renewal.