

Filling out the online form to schedule your Medicare part D review

Visit [this link](#) to access the online form:

- 1. Are you scheduling a review for yourself? Yourself and your spouse? A family member?**
Click the corresponding option and then click "Next".

I would like to schedule a review for: *

☐ Myself

☐ Myself and my spouse*

☐ A family member

*Both you and your spouse must be an Everence member to schedule a review.

Please do not use the back button on your browser, only use the navigation buttons at the bottom of this form.

Next >>

- 2. Fill out the page with your personal information. Be sure to have the following information available:**

- Your Medicare Number
- Your Everence Member ID
- Your Medicare Part D plan name and number (if you already have one)

- 3. Enter each of your current prescription medications, including:**

- Drug name
- Type of medication (e.g. tablet, capsule, cream, inhaler, etc.)
- Dosage
- Frequency
- Supply (30-day, 90-day, other)

To enter additional medications, select "Yes" and then click "Next".

After you have entered all your prescription medications, select "No" and then click "Next".

Add another prescription? *

☐ Yes

☐ No

<< Previous Next >>

4. If you are scheduling a review for both you and your spouse, repeat steps 2 and 3 for your spouse. If not, continue to Step 5.
5. Fill in the information and then click "Next".
If you are filling out this form on behalf of a family member, you will need to enter your name and relationship to the Medicare Supplement member

To proceed with Everence's review of your available Medicare Part D plans, you must check the following box before submitting this form. Read the statement next to the box before checking it. *

☐ By checking this box, I certify that the information I provided is complete and accurate; I understand and agree to the acknowledgments above; and I authorize Everence to complete the application on the Medicare.gov website to enroll me in the Medicare Part D prescription drug plan I select.

Today's date *

mm/dd/yyyy 

This form was completed on behalf of a family member. Please share your name and relation to the family member.

Your full name *

Relation to family member (e.g., daughter, son, niece) *

Did an Everence representative help you complete this form? *

☐ Yes

☐ No

<< Previous Next >>

6. You will see a summary of your purchase. Click "Proceed to payment". You will be taken to PayPal. **YOU DO NOT NEED to have a PayPal account to make your payment.**
7. If you have a PayPal account and would like to use it, log in as you normally would. If you do not have a PayPal account, click "Pay with Debit or Credit Card".

PayPal US \$0.00 USD

Log in to your PayPal account

Enter your email address to get started.

Email or mobile number

Forgot email?

Next

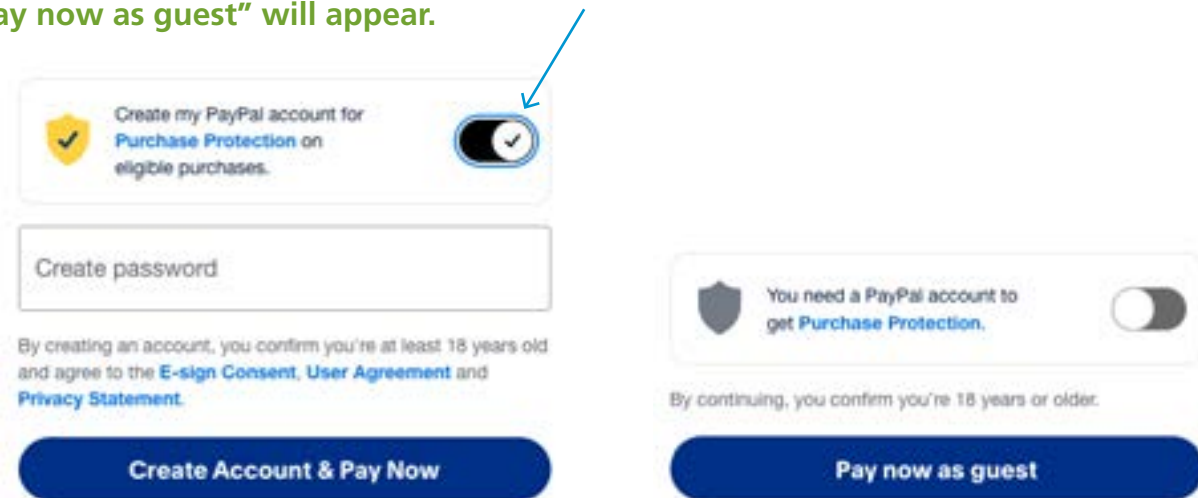
Pay with Debit or Credit Card

[Cancel and return to Everence Association Inc](#)

 English / Français / Español / 中文

8. Enter your email address and then click “Continue to Payment”.

9. Fill out the form including your personal and credit card information. If you do not want to create a PayPal account, click the toggle. The checkmark will disappear, and “Pay now as guest” will appear.



Create my PayPal account for Purchase Protection on eligible purchases.

Create password

By creating an account, you confirm you're at least 18 years old and agree to the [E-sign Consent](#), [User Agreement](#) and [Privacy Statement](#).

Create Account & Pay Now

You need a PayPal account to get Purchase Protection.

By continuing, you confirm you're 18 years or older.

Pay now as guest

10. After you submit your payment, you will see the following message:

Thank you for submitting your payment to review your available Medicare Part D plans. [Click here to schedule your review](#) with a member of the Part D Service Center.

You will also receive a confirmation email with a link to schedule your review. Click the link to schedule your review.

11. Book your appointment

- Select whether you are scheduling an appointment for only one person or two.
- Select a date and time that will work for your schedule.
- Enter your contact information
- Click “Book” at the bottom of the page.

You will receive a confirmation email when you book your appointment. You will also receive reminder emails one week prior and one day prior to your appointment.

At the time of your scheduled review, a member of the Everence Part D team will call you from the Part D Service Center phone number (888-772-9478) at the phone number you provided. They will walk you through your options and help you determine the plan that is best for you.

If you need to change your appointment time, please contact the Part D Service Center at 888-772-9478.

