

Internal Use Only	
Date	_____
Agent	_____
Code	_____

Please complete the answers, and schedule your FREE Insurance Consultation

Profile

Name _____ Gender _____ Age ____

Address _____ City _____

Phone _____ Zip _____

Email _____

Coverage Assessment

Health Insurance

Do you already have a ConnectForHealthCo account Yes No

Is your personal account attached to your employer account Yes No

Do you already have a primary care physician Yes No

Are you currently taking prescription medications Yes No

Describe any health coverage you currently have (VA, Union, etc)
 If Yes, who is your carrier _____
 which plans do you have _____
 Are you trying to replace any Plans that you currently have in place?
 Do you have a dental plan Yes No
 Do you have a vision plan Yes No
 Do you have a hearing plan Yes No

In some cases, these three services have waiting periods for the more expensive type procedures and devices, and are Not generally covered by Medicare...

Additional Coverages

Do you currently qualify for Medicaid or a special needs program Yes No

Do you have a Medicare account Yes No

If Yes, do you have a Supplement policy Yes No

Hospitalization Plan

Do you currently have a hospitalization helps to pay your out-of-pocket expenses Yes No

Do you have resources to pay for hospital and other out-of-pocket services Yes No

Life Coverage

Do you have liquid resources to cover funeral costs, settle all debts Yes No

Do you currently have a Life insurance policy Yes No

Do you have enough Life insurance Yes No

Do you have the resources to leave a legacy Yes No



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Supplemental Coverage

- Do you have a Plan B for income, if you get sick or hurt and cannot work Yes No
 Do you have resources to cover the out-of-pocket cost of a cancer diagnosis Yes No
 Does Cancer, Heart attack, Stroke, Diabetes or Kidney Disease run in the family Yes No

Some plans require submission of claims per procedure, while others pay a lump sum benefit

Medicare

- Are you currently receiving Medicare Benefits Yes No
 Are you entitled to Medicare Part A Yes No
 Are you enrolled in Medicare Part B Yes No
 Have you enrolled in a Prescription Drug Plan Yes No

Medicare - does not cover funeral costs...

Long Term Care Insurance (LTC)

- Do you have the resources to pay for multiple nursing home stays Yes No
 Do you have Long-Term Care (LTC) Coverage Yes No

Retirement Income

- Do you have accumulated assets that you want to protect Yes No
 Do you currently have stocks, bonds, mutual funds account Yes No
 Do you currently have an Annuity policy Yes No
 Do you have a retirement savings account Yes No

Based on Your Answers:

We would like to share with you some premium information in the following categories..

You are under No Obligation !

Health	Ancillary	Life	Supplemental	LTC	Retirement	Group

If you are interested in more information in either of the above categories or the amounts provided, Please, feel free to contact us at your earliest convenience.

Thank You for Your Business.

