



Medical Planner 2019-2020

#### A Message from CMS

Thank you for participating in the Medicare Current Beneficiary Survey (MCBS). With your help, we are working to make Medicare a more cost-effective and more high-quality form of health insurance that meets the needs of all beneficiaries. As a reminder, whether you take part in the survey is entirely your choice. Your Medicare benefits will not be affected by the answers that you give, or by whether or not you participate. Also, your answers must be kept private and confidential. The Federal Privacy Act of 1974 requires this.

William Long—Project Officer

#### A Message from AARP

Your participation in the MCBS provides valuable information to both researchers and policymakers about the needs of Americans who have Medicare health insurance

CMS collects large amounts of information about hospitals, doctors, and other medical professionals. They can tell how Medicare works for those groups, but the only way to learn about how the Medicare program works for people like you is to ask. AARP supports this survey because we think it is important. Please take part and help improve your Medicare program.

#### **How to Use Your Planner**

We are providing this planner to help you organize your doctor visits, possible hospital stays, and other health care-related events. This will help you by providing you one place to keep track of all of these items, both for planning purposes and when trying to recall events with your interviewer. It will also help us ensure that the information we collect is as accurate as possible. If the information we collect does not accurately represent what is going on in your life, it will not be as helpful at improving Medicare.

When using this planner, it is important to record the following types of information in the appropriate date square:

- Doctor and dentist appointments
- When prescribed medicines are filled or re-filled
- The total cost of an event and what you paid
- Hospital visits, including to the emergency room or as an outpatient
- Labs, x-rays, and other tests
- Nursing home stays
- Home health visits by a medical professional, family member, or friend
- Eyeglasses, diabetic equipment, ambulance services, or other medical items purchased

#### **Important Contact Information**

For questions or concerns about the survey you can contact MCBS staff at NORC at the University of Chicago at any time.

Call toll-free at: 1-877-389-3429

Email at: mcbs@norc.org
Visit us at: mcbs.norc.org

If you have any questions or concerns about Medicare or your government benefits in general, please refer to the information below:

Call the Medicare Hotline toll-free at: 1-800-633-4227

Call the Medicare Fraud Hotline toll-free at: 1-800-447-8477

Call the Social Security Administration toll-free at: 1-800-772-1213

Visit the Centers for Medicare & Medicaid Services at:

www.cms.gov

Visit AARP at: www.aarp.org

# MY MEDICAL ADDRESS BOOK

Doctor Name:	Doctor Name:
Practice Name:	Practice Name:
Type of Dr: Phone: ( )	Type of Dr: Phone: ( )
Address:	Address:
City: State: Zip:	City: State: Zip:
Notes:	Notes:
Doctor Name:	Doctor Name:
Practice Name:	Practice Name:
Type of Dr: Phone: ( )	Type of Dr: Phone: ( )
Address:	Address:
City: State: Zip:	City: State: Zip:
Notes:	Notes:
Doctor Name:	Doctor Name:
Practice Name:	Practice Name:
Type of Dr: Phone: ( )	Type of Dr: Phone: ( )
Address:	Address:
City: State: Zip:	City: State: Zip:
Notes:	Notes:
Doctor Name:	Doctor Name:
Practice Name:	Practice Name:
Type of Dr: Phone: ( )	Type of Dr: Phone: ( )
Address:	Address:
City: State: Zip:	City: State: Zip:
Notes:	Notes:

# **AUGUST** 2 0 1 9

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1	2	3
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	4	5	6	7	8	9	10
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	11	12	13	14	15	16	17
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
,	18	19	20	21	22	23	24
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
9 г. г. р г	25	26	27	28	29	30	31
Appointment time:	•	_,				- •	
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							

### **SEPTEMBER** 2 0 1 9

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4	5	6	7
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:		Labor Day					
	8	9	10	11	12	13	14
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:	Grandparent's Day						
7 tillount onargod a para.	15	16	17	18	19	20	21
Appointment time:	10	10	.,	10	10	20	21
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
Airiodhi charged a paid.	22	23	24	25	26	27	28
Appointment time:	22	20	<b>2</b> T	20	20	21	20
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:		First Day of Autumn					
Amount charged & paid.	29	30					
Appointment time:	23	00					
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:	Rosh Hashana (Begins at sundown)						

## **OCTOBER** 2 0 1 9

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1	2	3	4	5
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
-	6	7	8	9	10	11	12
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:		Columbus Day	Yom Kippur (Begins at sundown)				
	13	14	15	16	17	18	19
Appointment time:			-	-		-	-
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
g	20	21	22	23	24	25	26
Appointment time:		_ :					
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
7 III O GII O II O II GO GI O I PGII GI	27	28	29	30	31		
Appointment time:		20					
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:					Halloween		
Amount charged & paid.							

## **NOVEMBER** 2 0 1 9

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
						1	2
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	3	4	5	6	7	8	9
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:	Daylight Saving Time ends						
7 intourit orlanged & paid.	10	11	12	13	14	15	16
Appointment time:	10		12	10		10	10
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:		Veterans Day					
Amount charged & paid.	17	18	19	20	21	22	23
Appointment time:	17	10	19	20	21	22	20
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed: Other items purchased:							
Amount charged & paid:							
Amount charged & paid:	0.4	٥٢	00	07	00	20	
A m m a ! t a t -t !	24	25	26	27	28	30	
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:					Thanksgiving Day		

## **DECEMBER** 2 0 1 9

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4	5	6	7
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	8	9	10	11	12	13	14
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
7 imount onarged a paid.	15	16	17	18	19	20	21
Appointment time:	10	10	11	10	10	20	21
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							First day of Winter
Amount charged & paid.	22	23	24	25	26	27	28
Appointment time:	22	20	24	20	20	<u> </u>	20
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:	Hanukkah (Begins at sundown)			Christmas Day			
Amount charged & paid:	29	30	31	Christmas Day			
A so a interest times.	29	30	31				
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							

## **JANUARY** 2 0 2 0

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1	2	3	4
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:				New Year's Day			
	5	6	7	8	9	10	11
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	12	13	14	15	16	17	18
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	19	20	21	22	23	24	25
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:		Mantin Lastina					
Amount charged & paid:		Martin Luther King, Jr. Day					
-	26	27	28	29	30		
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							

### **FEBRUARY** 2 0 2 0

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
							1
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	2	3	4	5	6	7	8
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	9	10	11	12	13	14	15
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:						Valentine's Day	
	16	17	18	19	20	21	22
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:		D 11 (1D					
Amount charged & paid:	00	Presidents' Day	05	00	07	00	00
Amma inter-cut times	23	24	25	26	27	28	29
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							

# **MARCH** 2 0 2 0

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4	5	6	7
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	8	9	10	11	12	13	14
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:	Daylight Saving Time starts						
	15	16	17	18	19	20	21
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:			St. Patrick's Day		First day of Spring		
	22	23	24	25	26	27	28
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	29	30	31				
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							

# **APRIL** 2 0 2 0

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1	2	3	4
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:				April Fool's Day			
	5	6	7	8	9	10	11
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:				Passover (Begins at sundown)		Good Friday	
	12	13	14	15	16	17	18
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:	Easter Sunday						
	19	20	21	22	23	24	25
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	26	27	28	29	30		
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							

# **MAY** 2 0 2 0

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
						1	2
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	3	4	5	6	7	8	9
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	10	11	12	13	14	15	16
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:	Mothers' Day						
· ·	17	18	19	20	21	22	23
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	24/31	25	26	27	28	29	30
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:		Memorial Day					
i iii i iii i ii ii ii ii ja iii ja ii ja		-					

# **JUNE** 2 0 2 0

Appointment time:		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Doctor(s) seem   Reason for visit   Reason for vi			1	2	3	4	5	6
Reason for visit Medicine(s) prescribed Other items purchased:  Amount charged & paid:  Appointment time:	Appointment time:							
Medicine(s) prescribed:         0	Doctor(s) seen:							
Other items purchased:	Reason for visit:							
Other items purchased:	Medicine(s) prescribed:							
Amount charged & paid:  Appointment time:								
Appointment time:								
Appointment time:		7	8	9	10	11	12	13
Doctor(s) seen: Reason for visit: Redicine(s) prescribed:	Appointment time:							
Reason for visit: Medicine(s) prescribed:								
Medicine(s) prescribed:         Other items purchased:         4         5         4         5         4         5         4         5         4         5         14         15         16         17         18         19         20           Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased: Amount charged & paid: Plag Day         4         5         6         17         18         19         20								
Other items purchased: Amount charged & paid:								
Amount charged & paid:  Appointment time:								
Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased: Amount charged & paid:  Appointment time: Doctor(s) seen: Reason for visit:  Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased: Amount charged & paid:  Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased: Amount charged & paid:  Pathers' Day  Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased: Reason for visit: Medicine(s) prescribed: Other items purchased: Control of the prescribed: Other items purchased: Other items purchased: Other items purchased: Other items purchased:								
Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased: Amount charged & paid: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased: Amount charged & paid:  Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased: Amount charged & paid:  Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased: Other items purchased:  Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased:	7 tillount ollargou a parar	14	15	16	17	18	19	20
Doctor(s) seen: Reason for visit:	Appointment time:		.0	10		10		20
Reason for visit: Medicine(s) prescribed: Other items purchased: Amount charged & paid:  Flag Day  Piret day of Summer  Poctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased: Amount charged & paid:  Medicine(s) prescribed: Other items purchased: Amount charged & paid:  Pathers' Day  Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased: Amount charged & paid:  Pathers' Day  Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased: Other items purchased:								
Medicine(s) prescribed:         Other items purchased:           Amount charged & paid:         Flag Day           Appointment time:         21         22         23         24         25         26         27           Appointment time:         0 0ctor(s) seen:         0 0ctor(s)								
Other items purchased: Amount charged & paid:  Fiag Day  First day of Summer  First day of Su								
Amount charged & paid:								
Appointment time:   Doctor(s) seen:   Reason for visit:   Medicine(s) prescribed:   Other items purchased:   Amount charged & paid:   Fathers' Day		Flag Day						First day of Summer
Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased: Amount charged & paid:  Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased:  Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased:	7 timodine oriding od as parar		22	23	24	25	26	
Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased: Amount charged & paid:  Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased:  Medicine(s) prescribed: Other items purchased:	Appointment time			20		20	20	
Reason for visit:  Medicine(s) prescribed: Other items purchased: Amount charged & paid:  Fathers' Day   28 29 30   Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased:								
Medicine(s) prescribed: Other items purchased: Amount charged & paid:  Fathers' Day   28 29 30   Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased:								
Other items purchased: Amount charged & paid:    Fathers' Day								
Amount charged & paid:    Fathers' Day								
Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased:		Fathers' Day						
Appointment time: Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased:	7 tillount ollargou a parar		29	30				
Doctor(s) seen: Reason for visit: Medicine(s) prescribed: Other items purchased:	Appointment time	20	20					
Reason for visit:  Medicine(s) prescribed:  Other items purchased:	• • • • • • • • • • • • • • • • • • • •							
Medicine(s) prescribed: Other items purchased:								
Other items purchased:								
AMOUNI COSTORO & DSIO.	Amount charged & paid:							

# **JULY** 2 0 2 0

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				1	2	3	4
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							Independence Day
	5	6	7	8	9	10	11
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	12	13	14	15	16	17	18
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
,	19	20	21	22	23	24	25
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	26	27	28	29	30	31	
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
7 anount ondiged a paid.							

## **AUGUST** 2 0 2 0

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	2	3	4	5	6	7	1/8
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	9	10	11	12	13	14	15
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	16	17	18	19	20	21	22
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	23	24	25	26	27	28	29
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	30	31					
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							

### **SEPTEMBER** 2 0 2 0

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1	2	3	4	5
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	6	7	8	9	10	11	12
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:		Labor Day					
	13	14	15	16	17	18	19
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:	Grandparents Day					Rosh Hashana (Begins at sundown)	
	20	21	22	23	24	25	26
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:			First day of Autumn				
	27	28	29	30			
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:	Yom Kippur (Begins at sundown)						

# **OCTOBER** 2 0 2 0

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1	2	3
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
•	4	5	6	7	8	9	10
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	11	12	13	14	15	16	17
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:		Columbus Day					
	18	19	20	21	22	23	24
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	25	26	27	28	29	30	31
Appointment time:		-		-	,		
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							Halloween
, tour to ranged a paid.							

### **NOVEMBER** 2 0 2 0

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4	5	6	7
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:	David also Carrier a						
Amount charged & paid:	Daylight Saving Time ends						
	8	9	10	11	12	13	14
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:				Veterans Day			
	15	16	17	18	19	20	21
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	22	23	24	25	26	27	28
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:					Thanksgiving Day		
·	29	30					
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							

## **DECEMBER** 2 0 2 0

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1	2	3	4	5
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
	6	7	8	9	10	11	12
Appointment time:							
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:					Hanukkah (Begins at sundown)		
7 god er penan	13	14	15	16	17	18	19
Appointment time:	10		.0	10	.,	10	.0
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
7 into ant on angoard para.	20	21	22	23	24	25	26
Appointment time:		21		20		20	
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:		First Day of Winter				Christmas Day	
7 god er penan	27	28	29	30	31		
Appointment time:		-	20	00			
Doctor(s) seen:							
Reason for visit:							
Medicine(s) prescribed:							
Other items purchased:							
Amount charged & paid:							
, and and ondiged & paid.							







#### Any other questions?

Please feel free to contact MCBS staff at NORC at the University of Chicago at any time.

Call toll-free at: 1-877-389-3429

Email at: mcbs@norc.org

Visit us at: mcbs.norc.org









This survey is authorized by section 1875 (42 USC 139511) of the Social Security Act and is conducted by NORC at the University of Chicago for the U.S. Department of Health and Human Services. OMB control number for this information collection is 0938-0568, and expires 09/30/2021.