

Medicare Advantage Portfolio Worksheet Resource



Zip Code:

**Check box if stand-alone PDP is part of contract.*

Overall

Plan Name – Enrollment Numbers

- 1) –
- 2) –
- 3) –

HMO

Plan Name – Enrollment Numbers

- 1) –
- 2) –
- 3) –

PPO

Plan Name – Enrollment Numbers

- 1) –
- 2) –
- 3) –

D-SNP (if applicable)

Plan Name – Enrollment Numbers

- 1) –
- 2) –
- 3) –

MSA (if applicable)

Plan Name – Enrollment Numbers

- 1) –
- 2) –
- 3) –