TWO WATERS WEALTH

SMART RETIREMENT BLUEPRINT®

MEDICAL & HEALTHCARE

PILLAR M

Healthcare Cost & Coverage Workbook

A practical place to gather records, frame questions, and prepare for coverage conversations.

WHAT THIS WORKBOOK HELPS YOU ORGANIZE

Bring the moving parts of healthcare and coverage planning into one clear working file.

PLANNING OUTCOME

See the records, questions, and people connected to your coverage decisions.

PLANNING OUTCOME

Create a calm starting point for conversations with the appropriate sources and professionals.

RESOURCE TYPE
PRINT WORKBOOK

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MEDICAL & HEALTHCARE · START HERE

Your Health-Planning Snapshot

Use this page to name what is clear today, what needs attention, and what belongs in a future conversation.

START WITH WHAT YOU KNOW

Healthcare planning often feels easier when the records, questions, and people involved are visible in one place. Brief notes are enough to begin.

What feels settled about my current coverage?

What feels unclear or unfinished?

A simple organizing lens

As you work through this workbook, separate each item into one of three places: a record you have, a question you need answered, or a person or source to contact.

WHAT I WANT THIS WORKBOOK TO HELP ME ORGANIZE

My main health or coverage planning priority

A person who should be part of this conversation

The next record or notice I want to locate

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MEDICAL & HEALTHCARE · MAP THE TIMING

Your Coverage Timeline

Capture the transitions, review points, and documents that may shape your next coverage conversation.

USE THE SOURCE DOCUMENT

Write dates, names, and terms exactly as they appear in your records. If a detail is uncertain, note the source that can confirm it.

Life or work change	Record or question to capture	Current information source
Leaving or changing work	Coverage end, continuation, or replacement questions	Employer benefits contact or written materials
A household change	Who is affected and what notice applies	Program, plan, or benefits contact
Approaching Medicare eligibility	Mail, notices, enrollment questions, and key contacts	Official Medicare materials or an authorized source
A coverage review point	What has changed since the last review	Current plan documents and provider records

My expected coverage timing, in my own words Include only the timing shown in your records or the timing you need to confirm.

Dates or notices I need to verify, and who can verify them

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MEDICAL & HEALTHCARE · BEFORE MEDICARE

Pre-Medicare Comparison Worksheet

Use this worksheet to keep coverage materials and follow-up questions in one neutral, side-by-side view.

COMPARE THE MATERIALS, NOT ASSUMPTIONS

Keep a copy of each source document beside this page. Use the same language the material uses, then flag anything you want a plan contact or qualified professional to explain.

Current coverage name and administrator

Who is covered under the current arrangement

Coverage end or review date shown on records

Questions for the benefits or coverage contact

Item to compare	What the material says	Question to clarify
Provider, facility, and pharmacy access	_____	_____
Prescription coverage terms	_____	_____
Recurring premium and cost-sharing terms	_____	_____
Travel or temporary-location coverage	_____	_____

Income and Subsidy Coordination Questions

Keep household, coverage, and program questions connected without trying to resolve them from memory.

KEEP THE QUESTION WITH THE RIGHT SOURCE

When a coverage program or assistance question involves household information, write down the records involved and the authorized program representative or qualified professional who can address it.

Household changes or circumstances to describe

Income-related records a qualified professional asked me to gather

Question	Who can address it	Record or follow-up to keep
How does this notice apply to my household?	_____	_____
Which information or period does this request use?	_____	_____
What process or deadline should I understand?	_____	_____

My most important coordination question

MEDICAL & HEALTHCARE · GET READY

Medicare Readiness

A simple record-and-question checklist for a future Medicare conversation.

PREPARE, THEN ASK

This page is for gathering materials and organizing questions. Bring the original notices or current records to the official source, a licensed coverage specialist, or another appropriate professional you contact.

- [ ] I have a secure place for Medicare-related mail, notices, and contact information.
- [ ] I have written down the names and phone numbers connected to my current coverage.
- [ ] I have noted dates or actions that appear in official materials and need confirmation.
- [ ] I have a list of current providers, facilities, pharmacies, and prescriptions to reference.
- [ ] I have identified the questions I want answered before making a meaningful coverage decision.

Medicare terms or notices I want explained

Provider or prescription questions to ask

The official source or professional I plan to contact

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MEDICAL & HEALTHCARE · COMPARE WITH CARE

Neutral Coverage Comparison

Use the same questions for each option so the differences in the written materials are easier to see.

A NEUTRAL WAY TO COMPARE

Record what each document states, the source of that statement, and the question that remains. This page is designed to support a conversation, not to select an option on its own.

Topic	Option or source	What the material says	Question to clarify
Provider, facility, and pharmacy access	_____	_____	_____
Prescription coverage	_____	_____	_____
Service area, travel, or temporary location	_____	_____	_____
Premium, deductible, and cost-sharing terms	_____	_____	_____
Care coordination or support contacts	_____	_____	_____

The question that matters most in my day-to-day care

The person or source I need to contact

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MEDICAL & HEALTHCARE · PLAN THE YEAR

Annual-Cost Planner

Create one working list of healthcare and coverage costs shown in your own materials.

RECORD, THEN VERIFY

Use the units, dates, and terms exactly as they appear in the source document. Flag any item that needs clarification from a plan contact, an authorized program representative, or a qualified professional.

Category	Recurring or occasional	Record location	Amount or note
Coverage premium shown in materials	_____	_____	_____
Provider, facility, or service bills	_____	_____	_____
Prescription expenses	_____	_____	_____
Dental, vision, hearing, or other care	_____	_____	_____
Travel or out-of-area care	_____	_____	_____
Other item to track	_____	_____	_____

Items I need to verify before my next planning conversation

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MEDICAL & HEALTHCARE · PREPARE YOUR PEOPLE

Care and Family Preparedness

Make it easier for the people you trust to know where important healthcare and coverage information is kept.

KEEP PRIVATE INFORMATION PRIVATE

Use this workbook as a map, not a place to copy sensitive account numbers or detailed medical information. Note where a record is kept and who is authorized to help locate it.

- [ ] I know where emergency contacts, care preferences, and key healthcare records are kept.
- [ ] I have named the people who may help keep information organized if I need support.
- [ ] I have a current list of provider, pharmacy, and coverage contacts in one place.
- [ ] I have identified records that should be easy to find during an unexpected care event.

People who should know where my healthcare and coverage records are kept	Questions I want to discuss with a healthcare professional or family member

Important document or contact I want available in one place

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MEDICAL & HEALTHCARE · MAKE IT MOVING

Your 90-Day Action Plan

Turn the questions you identified into a short list of practical follow-up steps.

KEEP THE NEXT STEP SMALL

A useful action can be as simple as locating a notice, confirming a contact, or writing down a question. Give each item an owner and a target date that fits your situation.

Action or question	Who owns it	Target date or status
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- [ ] I have chosen one secure place for the records I need to keep together.
- [ ] I have flagged questions that belong with an official source or qualified professional.
- [ ] I have set a time to revisit this page and update what changed.

The one action that would reduce the most uncertainty for me

Bring Your Healthcare Questions Together

Bring this workbook to a planning conversation, along with the documents and questions you identified.

THIS IS YOUR SESSION

Your answers are a starting point for a conversation about the retirement experience you have worked hard for. They are not an instruction to make account, tax, insurance, legal, healthcare, or claiming decisions on your own.

Bring or confirm

- The records and contact details you marked as missing
- Any recent statements, benefit estimates, or legal documents relevant to this workbook
- The questions you want answered before you make a meaningful decision

What we can organize together

A planning conversation can help organize the questions, records, and coordination points that sit alongside your retirement plan. For plan-specific, program-specific, healthcare, tax, or legal questions, keep the appropriate official source or qualified professional in the conversation.

YOUR NEXT CONVERSATION

The one question I most want to discuss

Who should be part of this conversation?

A realistic time frame to revisit this workbook

A clearer path starts with better questions.

If you would like help organizing those questions around your retirement experience, explore a Retirement Brainstorm Session at calendly.com/first-twwm/retirement-brainstorm-session-clone. We will begin with your priorities, then decide together whether a deeper personal blueprinting visit makes sense.

IMPORTANT INFORMATION · DISCLOSURES

Important Disclosure Information

Please read this information before relying on this educational workbook.

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