

## Things That May Be Affecting Your Health

- Exercise/Lack of Physical Activity
  - Weight
  - Diet/Nutrition
  - Falls
  - Difficulty with Daily Activities
  - Alcohol/Drug use
  - Tobacco use
  - Hearing Loss
  - Home Safety
  - Depression
  - Loneliness
  - Medications
  - High Blood Pressure - Your BP goal is \_\_\_\_/\_\_\_\_
  - Diabetes - Your A1c goal is \_\_\_\_\_
  - Other
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## What I Will Do

Choose **One** Goal:

I will \_\_\_\_\_

(Examples: Increase my physical activity; take my medications; reduce my tobacco use)

Choose **One** Action:

I will \_\_\_\_\_

(Examples: Walk more; eat more fruits and vegetables)

## How Much/How Often

How much: \_\_\_\_\_

(Example: 20 minutes)

How often: \_\_\_\_\_

(Example: Three times a week on Monday, Wednesday and Friday)

## Confidence

Circle a number to show how sure you are about doing the activity. Try to choose an activity that you are a 7 or above.

0 1 2 3 4 5 6 7 8 9 10

## Your Doctor Has Referred You for:

An Appointment with Dr.

On \_\_\_\_\_, \_\_\_/\_\_\_/\_\_\_\_ @ \_\_\_\_:\_\_\_\_\_

Location: \_\_\_\_\_

An Appointment with Dr.

On \_\_\_\_\_, \_\_\_/\_\_\_/\_\_\_\_ @ \_\_\_\_:\_\_\_\_\_

Location: \_\_\_\_\_

An Appointment with Dr.

On \_\_\_\_\_, \_\_\_/\_\_\_/\_\_\_\_ @ \_\_\_\_:\_\_\_\_\_

Location: \_\_\_\_\_

An Appointment with Dr.

On \_\_\_\_\_, \_\_\_/\_\_\_/\_\_\_\_ @ \_\_\_\_:\_\_\_\_\_

Location: \_\_\_\_\_

## What is a Medicare Annual Wellness Visit?



Medicare recipients are entitled to a Medicare Wellness visit every 12 months at NO COST to the patient

A Medicare Wellness Visit is NOT a physical.

The Wellness Visit is designed to assess your past medical history and current lifestyle to formulate a preventative health plan

Participating in the Medicare Wellness Visit can help you, and your provider, identify your health goals and put you on the right track to achieving your optimum well-being!

Remember to take advantage of this Medicare benefit annually.

Log on to <https://www.mymedicare.gov/> to track your preventative services and get a two-year calendar of the tests and screenings you are eligible for.

## GENERAL

Your local Agency on Aging can help you find information about transportation services, Meals on Wheels, classes on healthy living and more.

Local Area Agency on Aging 1-877-222-3737 or  
<http://www.state.nj.us/humanservices/doas/home/>

CDC Home Safety Checklist  
[http://www.cdc.gov/steady/pdf/check\\_for\\_safety\\_brochure-a.pdf](http://www.cdc.gov/steady/pdf/check_for_safety_brochure-a.pdf)

Take Control of Your Life (chronic disease self-management)  
609-588-2517  
<http://www.njmentalhealthcares.org/>

Move Today  
<http://www.state.nj.us/humanservices/doas/documents/movetodaysites.pdf>

## MENTAL HEALTH

NJ Mental Health Cares 1-866-202-HELP(4357) or  
<http://www.njmentalhealthcares.org/>

## ALCOHOL

<http://www.aasj.org/>

## PHYSICAL ACTIVITY

Go4Life <https://go4life.nia.nih.gov/get-started>

## TOBACCO

New Jersey Tobacco Helpline: 1-866-657-8677

## COGNITION

Alzheimer's Association: 1-800-272-3900  
<http://www.alz.org/>

# MEDICARE ANNUAL WELLNESS VISIT



## Personalized Preventive Plan

Name:

Date of Visit: