



A Guide for People With Medicare

Choosing a Doctor



Developed jointly by the
Health Care Financing Administration
and the
Agency for Healthcare Research and Quality



HEALTH CARE FINANCING ADMINISTRATION
The Federal Medicare Agency

This booklet, *Choosing a Doctor*, is one of a new series of booklets for people who are with Medicare. Other titles include *Choosing Treatments* and *Choosing a Hospital*. Each booklet can help you to make health care choices.

To get copies of this booklet in print or audiotape, call 1-800-633-4227, TTY/TDD: 1-877-486-2048 for hearing and speech impaired people.

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This Guide has a lot of tips and questions to help you make the choices that are right for you. But it is not necessary, or even possible, for every person to do everything this Guide suggests. Do as much or as little as you feel comfortable with.

A note about the symbols used in this booklet:

 means a mailing address.

 means a telephone number.

 means a number for TTY or TDD, text telephones for people with hearing and speech impairments.

 means a computer Web site address.

If you do not have a computer, your local library or senior center may be able to help you find information on their computers.

How This Booklet Can Help You

Choosing a doctor is an important decision. Doctors differ in many ways, and not all doctors give the same quality of care. Patients who talk freely with their doctors and help to make decisions are often happier with their care.

Giving good quality health care means doing the right thing, at the right time, in the right way, for the right person—and getting the best possible results.

This booklet can help you choose a doctor who will meet your needs and give you good quality care. The basics you need to know are in the first section. The second section, which starts on page 21, has more details for those who want them.

A Few Words About Medicare

If you have Medicare, you can get your health care in more than one way. The way you get your Medicare health care may affect your choice of doctors. That is why it is important to know how you get your Medicare health care.

- Most people are in the **Original Medicare Plan**. If you are, you may go to any doctor or hospital that accepts Medicare. You pay your share, and Medicare pays its share. Some things are not covered, like prescription drugs.

You are in the Original Medicare Plan if you use your red, white, and blue Medicare card when you get your health care.

- Some people are in a **Medicare managed care plan**, like an HMO. It is a group of doctors, hospitals, and other health care providers who have agreed to give health care to people with Medicare who join the plan. In exchange, the plan gets a fixed amount of money from Medicare every month.

In most Medicare managed care plans, you must go to doctors and hospitals that belong to your plan. Plans must cover everything the Original Medicare Plan covers. Some plans cover extras, like prescription drugs.

- A **Private Fee-for-Service plan** is a new health care choice that is now available in some areas. This is a Medicare health plan offered by a private insurance company. It is not the same as the Original Medicare Plan, which is offered by the Federal Government.

In a Private Fee-for-Service plan, the insurance company agrees to give health care coverage to people with Medicare who join this plan on a pay-per-visit basis. In exchange, Medicare pays the insurance company a set amount of money every month. The insurance company, not the Medicare program, decides how much it pays, and how much you pay, for the services you get.

In a Private Fee-for-Service plan, you can go to any doctor or hospital that accepts the plan's payment. Plans must cover everything the Original Medicare Plan covers. Some plans cover extras, like coverage for additional days in the hospital.

To learn more about Medicare, please call the Medicare Choices Helpline and ask for a free copy of the handbook *Medicare & You*. If you have access to the Internet, you can get help with your questions about Medicare at the Medicare Internet site.

 1-800-633-4227 (1-800-MEDICARE)

 1-877-486-2048 (toll-free)

 <http://www.medicare.gov>

Section 1

The Basics



Words You Should Know

Assignment. This means a doctor agrees to accept Medicare's fee as full payment. If you are in the Original Medicare Plan, it can save you money if your doctor accepts assignment. You still pay your share of the cost of the doctor visit.

Copayment. A fixed amount that you pay for a doctor visit or other medical service.

Health care provider. A person who is trained and licensed to give health care. Also, a place that is licensed to give health care. Doctors, nurses, and hospitals are examples of health care providers.

Nurse practitioner. A nurse who has 2 or more years of advanced training and has passed a special exam. A nurse practitioner often works with a doctor and can do some of the same things a doctor does.

Physician assistant. A person who has 2 or more years of advanced training and has passed a special exam. A physician assistant works with a doctor and can do some of the things a doctor does.

Primary care doctor. A doctor who is trained to give you basic care. Your primary care doctor is the doctor you see first for most health problems. He or she makes sure that you get the care you need to keep you healthy. He or she also may talk with other doctors and health care providers about your care and refer you to them. In many Medicare managed care plans, you must see your primary care doctor before you see any other health care provider.

Referral. A written OK from your primary care doctor for you to see a specialist or get certain services. In many Medicare managed care plans, you must get a referral before you get care from anyone except your primary care doctor. If you do not get a referral first, the plan may not pay for your care.

Specialist. A doctor who treats only certain parts of the body, certain health problems, or certain age groups. For example, some doctors treat only heart problems.



Steps to Finding a Doctor •

Your primary care doctor is an important person in your life. He or she is your main doctor—the one you see first for most health problems. This doctor can help you stay healthy. He or she can also help you find specialists when you need them.

The five steps that follow can help you find a primary care doctor who will meet your needs and give you high-quality care. These steps may also help you choose a specialist when you need one.

STEP 1. Think about what is most important to you in a doctor.

STEP 2. Make a list of doctors.

STEP 3. Try to find out which doctors give high-quality care.

STEP 4. Call the doctors' offices and ask questions.

STEP 5. Go to see the doctor who is your first choice.

Read on for more about each of these steps.

Think about what is most important to you in a doctor.

The first step is to ask yourself what you want and need in a doctor. Below is a list of some things that may be important to you. You may have your own ideas too. If so, you can write them in at the bottom of the list.

If you are in the Original Medicare Plan:

- ___ My doctor takes Medicare patients.
- ___ My doctor accepts assignment.
- ___ My doctor is able to treat me at the hospital of my choice.

If you are in a Medicare managed care plan:

- ___ My doctor is part of my health plan.

If you are in a Private Fee-for-Service plan:

- ___ My doctor knows and accepts the terms of the plan's payment.

Other things that may be important when you are choosing a doctor:

- ___ My doctor has experience treating people my age.
- ___ My doctor has experience treating people with my health problems.
- ___ My doctor's office is easy for me to get to.
- ___ My doctor is highly rated by a person or group that I respect.

Other things that I think are important in choosing a doctor:

Make a list of doctors.

The next step is to make a list of the names of doctors who have some or all of the qualities that are important to you.

If you are in a Medicare managed care plan: First check the list of doctors who belong to your plan. You can get this list from your plan. Be sure to find out which doctors are accepting new patients.

Here are some other ways that people with Medicare can get the names of doctors who may meet their needs:

- Ask a doctor or someone else who works in health care (like a nurse).
- Ask family members, friends, and neighbors.
- Call the doctor referral service at the hospital of your choice. (Remember, often these services only give the names of doctors who work at that hospital.)
- Call the local medical society and ask for a list of its members.
- Go to the “Physician Select” Internet site of the American Medical Association. It can give you a list of doctors who practice in your area.



<http://www.ama-assn.org> (Select “Doctor Finder.”)

Try to find out which doctors give high-quality care.

Trying to find out as much as you can about a doctor can help you choose the doctor who is best for you. It may feel strange (or even rude) to “check up” on a doctor. But not all doctors have the same skills or give the same care. That is why it is important to try to find out as much as you can about a doctor’s quality of care.

Many community and government groups are now trying to find good ways of checking on doctors’ quality of care. Because these efforts are still new, you may not be able to see the results until some time in the future.

Remember, a doctor referral service or medical society can only give you doctors’ names. They may not be able to tell you anything about the doctors’ quality of care.

Here are some other steps you can take to find out about doctors’ quality of care:

- When you ask friends, family members, or neighbors for doctors’ names, also ask if they felt the doctor gave them good care.
- When you visit a doctor, trust your own feelings about him or her.

STEP 4. Call the doctors’ offices and ask questions.

When you have some doctors’ names, the next step is to call their offices. Below are some questions you may want to ask when you call. You may think of more questions to ask. If so, you can write them in the space at the bottom of the page.

You may also want to talk briefly with the doctor by phone or in person. Ask if you can do this and if there is a charge. If you cannot speak to the doctor, ask if you can speak with a nurse or with the office manager.



Questions To Ask When You Call Doctors' Offices

	Doctor 1	Doctor 2	Doctor 3
BASIC QUESTIONS			
If you are in the Original Medicare Plan:			
Is the doctor taking new patients?			
Does the doctor take Medicare patients?			
Does the doctor accept assignment?			
If you are in a Medicare managed care plan:			
Does the doctor belong to my plan?			
Is the doctor taking new patients?			
If you are in a Private Fee-for-Service plan:			
Does the doctor know and accept the terms of the plan's payment?			
Is the doctor taking new patients?			
OTHER QUESTIONS			
Which hospitals does the doctor use?			
What hours is the doctor's office open?			



	Doctor 1	Doctor 2	Doctor 3
Do other doctors “cover” for the doctor when he or she is off duty or away?			
How long does it take to get in to see the doctor... For a routine visit? For urgently needed care?			
How long might I have to wait in the office before seeing the doctor?			
Does the doctor have other patients with my health problem?			
Does the doctor’s office send reminders about tests I should have?			
Does the doctor (or someone in the doctor’s office) give advice over the phone for common medical problems?			

Other questions to ask when I call:

Go to see the doctor who is your first choice.

Here are some tips that may help you get ready for your first visit to a doctor.

- Write down your questions before your visit. List the most important questions first. This will help to make sure that you ask those questions and that the doctor answers them.
- Bring an up-to-date “health history” (or your medical records) with you. If you like, use the form on page 18 of this guide. Also bring a list of all the medicines that you take.

During this first visit, you will learn a lot about how easy it is to talk with the doctor. You will also find out how well the doctor might meet your needs. After the visit, ask yourself these questions:

Did the doctor...

1. Give me a chance to ask questions? YES NO
2. Really listen to my questions? YES NO
3. Give me answers that I understood? YES NO
4. Show respect for me? YES NO
5. Ask me questions? YES NO
6. Make me feel comfortable? YES NO
7. Talk about the health problem(s) I came with? YES NO
8. Ask me if I prefer one kind of treatment to another? YES NO
9. Spend enough time with me? YES NO

Talking With Your Doctor

By now, if you have followed the steps above, you may have found a doctor who meets your needs. Patients who work as partners and talk with their doctors are often happier with their care. Here are some tips that can help you and your doctor become partners in your health care:

1. Give information. Don't wait to be asked!

2. Get information.

3. Take information home.

4. After you leave the doctor's office, follow up.

Read on for more about the tips listed above.

Give information. Don't wait to be asked!

- Always try to tell your doctor about your main health problem first.
- You know how you are feeling and what health problems you have had in the past. Tell your doctor what you think he or she needs to know. It may be embarrassing to tell your doctor some things about yourself. But the more your doctor knows about you, the better advice he or she can give you.
- Keep your “health history” up to date. You may want to make copies of the form on pages 18-20 for other members of your family.
- Make a list of all the medicines that you take. Keep the list up-to-date. Write down when and how often you take your medicines. (You can write this on the Personal Health History form on page 19.)
- Tell your doctor about any problems you have had with medicines since your last visit.
- Tell your doctor about everything you take for your health. This includes things you buy over the counter at the drug store or anywhere else—for example, herbs or vitamins. Also tell your doctor if you see anybody else for help with a health problem.
- If you have x-ray films, test results, and medical records, give them to your doctor.



Get information.

- Ask questions. If you do not ask questions, your doctor may think you understand everything he or she said. It may help to write down your questions before you go to see the doctor.
- You may want to bring someone with you to help you ask questions. This person can also help you understand and remember the answers to your questions.
- Ask your doctor to draw pictures if that might help explain something.
- Take notes.
- Let your doctor know if you need more time. If the doctor has no more time that day, ask if you can speak to a nurse or other staff person.

3. Take information home.

- Ask for something in writing that tells you what you need to know or do for your health problem.
- Your doctor may have booklets and tapes that can help you. If not, ask how you can get more information.

4. After you leave the doctor's office, follow up.

- Did you think of more questions to ask? Call your doctor's office. If you cannot speak to your doctor, ask to speak to a nurse or to the office manager.
- Do you feel worse? Are you having problems with your medicine? Call your doctor's office.
- Did your doctor say you need to have a test done? Ask if you need to make an appointment to have the test.
- Did your doctor call you to tell you your test results? If not, call your doctor's office and ask for the results.
- Did your doctor say you should see a specialist? Ask if you need a referral. Also ask if you need to make an appointment to see the specialist.

Things To Remember

- **Patients who work as partners and talk with their doctors are often happier with their care.**
- **Doctors differ in many ways. Not all doctors give the same quality of care.**
- **In most Medicare managed care plans, you must go to doctors who belong to your plan.**
- **Finding out as much as you can about a doctor can help you to choose the doctor who is best for you.**

To Do if You Need Emergency Care

A medical emergency is when you believe that your health is in serious danger—when every second counts. You may have severe pain, a bad injury, sudden illness, or an illness quickly getting much worse.

You can get emergency care from any health care provider in the United States. All Medicare managed care plans must allow you to get emergency care at any time you need it. You do not need an OK from your primary care doctor first.

Your plan must pay for the emergency care. (You may have to make a copayment.) If you get a bill, give it to your plan to pay. If your plan does not pay for your emergency care, you have the right to appeal.

What if you must get urgently needed care for a sudden illness or injury that is not a medical emergency? If you are in a Medicare managed care plan, you get urgently needed care from your primary care doctor. If you need urgent care when you are out of the plan's service area, your plan must pay for the care. If it does not pay, you have the right to appeal.

Your Personal Health History

Use this form to keep track of your health history. Keep it up to date and take it with you when you see your doctor.

Your name:

1. I was in the hospital for these conditions: Date

2. I have had these surgeries: Date

3. I have had these injuries and illnesses: Date

4. I have these allergies:

Type of allergy (e.g., food, medicine) Problem

5. I have had these shots:

	Suggested age	Date of my last shot
Flu	Once a year starting at age 65.*	
Pneumonia	Once at age 65.*	
Tetanus	Every 10 years.	
Hepatitis B	If you are at high risk.	

* or at any age with chronic illness

6. I take these medicines and other remedies for my health:
(Include vitamins and anything else that you take.)

7. People in my family (parents, brothers, sisters, grandparents) have had these major health problems:

Relative	Type of health problem	How long ago

8. I see these other health care providers:

Name	Why I see them

9. I get these tests (all covered by Medicare) to help me stay healthy:

Test	Who is covered	Date of my last test
◆ Mammogram	Women 40 and older. Once every 12 months.	
◆ Pap smear and pelvic exam	All women. Once every 36 months. (Every year if you are at high risk.)	
<input type="checkbox"/> Screening for prostate cancer:	Men 50 and older.	
<input type="checkbox"/> PSA test (for prostate cancer)	Once every 12 months.	
<input type="checkbox"/> Digital rectal exam	Once every 12 months.	
◇ Screening for colon cancer:	Men and women 50 and older.	
◇ Stool blood test	Once every 12 months.	
◇ Sigmoidoscopy	Once every 48 months.	
◇ Colonoscopy	Once every 24 months if you are at high risk.	
◇ Diabetes monitoring	If you have diabetes.	
◇ Bone mass testing	If you are at risk for losing bone mass.	

- ◆ Women
- Men
- ◇ Everyone

Section 2

If You Want To Know More



This section has more detailed information on choosing a doctor.

More Words You Should Know

Accredited (accreditation). A “seal of approval.” Being accredited means that a facility has met certain quality standards. These standards are set by private, nationally recognized groups that check on the quality of care at health care facilities.

Board certified (board certification). This means a doctor has special training in a certain area of medicine and has passed an advanced exam in that area of medicine. Both primary care doctors and specialists may be board certified.

Grievance. A complaint about the way your Medicare health plan is giving care. For example, you may file a grievance if you have a problem calling the plan or if you are unhappy with the way a staff person at the plan has behaved toward you. A grievance is not the way to deal with a complaint about a treatment decision or a service that is not covered.

Internist. A doctor who finds and treats diseases or health problems in adults.

Most primary care doctors for adults are internists or family physicians. Other health care providers who are trained in primary care are physician assistants and nurse practitioners. Physician assistants must work with doctors. Nurse practitioners are nurses with extra training. They often work with doctors. In some States, they can work on their own.

More About Checking on Doctors' Quality of Care

Medicare Consumer Assessment of Health Plans Survey

When you choose a health plan, you also choose the doctors who are in the plan. Every year Medicare does a survey of people in Medicare managed care plans to find out how satisfied they are with their plans. This survey is called the Medicare Satisfaction Survey or the Medicare Consumer Assessment of Health Plans Survey (CAHPS[®]). Starting in 2002, this survey will also include people in Private Fee-for-Service plans.

The survey asks questions like:

- Do doctors in the plan explain things well?
- Is it easy to get a referral to a specialist?
- How do you rate the care you get overall?
- How do you rate the plan overall?

If you are in a Medicare managed care plan or a Private Fee-for-Service plan, the survey results can tell you how your plan compares with other plans in your area. The results provide general information about doctors in your plan.

They do not provide specific information about individual doctors. If you are thinking about joining a Medicare managed care plan or a Private Fee-for-Service plan, the CAHPS[®] results may help you decide which plan to choose. In the future, similar information will be available about doctors in the Original Medicare Plan.

Some CAHPS[®] results can be found in the *Medicare & You* handbook. A copy of this handbook is mailed to every Medicare household once a

year. You can also call the Medicare Choices Helpline to ask for a free copy of the handbook as well as for detailed CAHPS® results for plans in your area.

Detailed CAHPS® results can also be found by searching Medicare's interactive database, "Medicare Health Plan Compare," on the Medicare Internet site.

 1-800-633-4227 (1-800-MEDICARE)

 1-877-486-2048 (toll-free)

 <http://www.medicare.gov>
(Select "Medicare Health Plan Compare.")

CAHPS® was designed by national experts in health care quality, under a project funded by the Agency for Healthcare Research and Quality (formerly the Agency for Health Care Policy and Research).

American Board of Medical Specialties

The American Board of Medical Specialties can tell you if a doctor is board certified. Board certification is a good measure of a doctor's knowledge. But you can get high-quality care from doctors who are not board certified.

 47 Perimeter Center East, Suite 500
Atlanta, GA 30346

 1-800-776-2378

 <http://www.certifieddoctor.org>

State Medical Boards

In many States, you can call the State medical board to find out if a doctor is licensed and if any patients have complained about the doctor's

care. You may also be able to find out if a doctor has been sued for malpractice or disciplined for any reason.

To find out how to contact your State's medical board, check your phone book or call or visit your local library. If you have access to the Internet, go to the Internet site of Administrators in Medicine, a group of State medical board directors.

 <http://www.docboard.org>

Consumer Guides

Some nonprofit groups publish guides to choosing doctors. An example is the Center for the Study of Services' Guide to Top Doctors. This on-line database contains the names of nearly 15,000 specialists recommended by other doctors. A fee is charged to access the database on the Internet. The database is also available as a book.

 Consumers' Checkbook
733 15th Street NW, Suite 820
Washington, DC 20005

 1-800-475-7283

 <http://www2.checkbook.org/doctors/pageone.htm>

Your Rights in a Medicare Managed Care Plan

If you are in a Medicare managed care plan, you have certain rights when it comes to choosing a doctor.

- Women have the right to choose a women's health specialist from their plan's list of doctors.
- If you have a complex or serious medical condition, you have a right to as many specialist visits as you need to deal with your health problem.

- You have a right to know how your plan pays its doctors. If you want to know, your plan must tell you in writing. You also have the right to know if your doctor owns all or part of a health care facility—for example, a lab that he or she refers you to for a blood test.

Getting Care at an Urgent Care Center

What if you get sick at night, on a holiday, or over the weekend? You can't get to your doctor, but you are not sick enough to go to the emergency room. There may be an "urgent care center" near you. These centers are open long hours every day to handle problems that are not life threatening. But they do not take the place of a regular primary care doctor. Other names for these centers are "walk-in center," "immediate care center," and "convenient care center."

To make sure an urgent care center gives quality care, call or visit the center and ask these questions:

- Is a doctor there at all times?
- What other kinds of health care providers work at the center?
- Is the center part of a hospital? If not, how would it handle any emergency that might happen during your visit?
- Is the center accredited? If it is, a certificate should be posted in the center. Being accredited is like getting a "seal of approval." The following organizations can accredit urgent care centers:

Joint Commission on Accreditation of Healthcare Organizations

 1 Renaissance Blvd.
Oakbrook Terrace, IL 60181-4294

 1-630-792-5800

 <http://www.jcaho.org>

Accreditation Association for Ambulatory Health Care

 3201 Old Glenview Road, Suite 300
Wilmette, IL 60091-2992

 1-847-853-6060

 <http://www.aaahc.org>

Getting More Information

You need a computer to use some of these resources. If you do not have a computer, your local library or senior center may be able to help you find the information on their computers.

Health Care's Front Line: Primary Care Physicians

This Internet site discusses how to choose a primary care doctor and how to make the most of the first visit to your doctor. It is part of a series published by *Health Pages*, an on-line health magazine.

 <http://www.thehealthpages.com>

Healthfinder

This Internet site, run by the U.S. Department of Health and Human Services, offers reliable consumer information from the Federal Government and its many partners. It has links to Internet sites with consumer health information, on-line publication catalogs, on-line brochures, and databases and search engines that help you find information on the Internet.

 <http://www.healthfinder.gov>

Medicare Information

Many brochures can be ordered from the Medicare Choices Helpline. These brochures explain Medicare benefits, coverage, rights, health plan

choices, and more. They can also be found on the Medicare Internet site. Free.



1-800-633-4227



1-877-486-2048 (toll-free)



<http://www.medicare.gov> (Select “Publications.”)

The Medicare Internet site also provides access to several interactive databases, including “Medicare Health Plan Compare,” which offers detailed information on Medicare managed care plans and Private Fee-for-Service plans, and “Nursing Home Compare,” which offers detailed information on nursing homes.



<http://www.medicare.gov>

(Select “Medicare Health Plan Compare” for plans and “Nursing Home Compare” for nursing homes.)

Personal Health Guide

This patient booklet is part of the Put Prevention Into Practice (PPIP) program, which encourages Americans to get the preventive care they need. The booklet can help you keep track of your shots and other preventive services. Free.

Agency for Healthcare Research and Quality



Publications Clearinghouse

P.O. Box 8547

Silver Spring, MD 20907



1-800-358-9295



<http://www.ahrq.gov/consumer>

Talking With Your Doctor

This brochure discusses ways to have a healthy doctor-patient relationship. It suggests questions for patients to ask their doctors. Although written for cancer patients, this brochure may also be helpful for people with other health problems. 6 pages. Free.

American Cancer Society

 1-800-ACS-2345 (1-800-227-2345)

 <http://www.cancer.org>

Talking With Your Doctor: A Guide for Older People

This booklet suggests ways to discuss health concerns, medicines, and other issues important to older people. 29 pages. Free.

National Institute on Aging

 Information Center
Building 31, Room 5C27
31 Center Drive MSC 2292
Bethesda, MD 20892-2292

 1-800-222-2225

 1-800-222-4225

 <http://www.nih.gov/nia>

**U.S. Department of
Health and Human Services**

Health Care Financing Administration
7500 Security Boulevard
Baltimore, Maryland 21244-1850

Official Business
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