Massachusetts Senior Medicare Patrol Program



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CALL TO ACTION

I,		pledge to be an engaged healthcare		
consumer and to take an active role in preventing healthcare errors, fraud an				
abuse by	doing one or moi	re of the follow	ving:	
	Become a trained Massachusetts Senior Medicare Patrol Program Volunteer.			
	Organize and/or host a Senior Medicare Patrol Program Educational Presentation. Assist in disseminating Senior Medicare Patrol Program materials. Host a Senior Medicare Patrol Program Volunteers Foundations Training. Assist with Volunteer Recruitment for the Massachusetts Senior Medicare Patrol Program. Serve as a host site for the Massachusetts Senior Medicare Patrol Program's Medicare Beneficiary Council. Become an ambassador of the Massachusetts Senior Medicare Patrol. All of the above!!!			
	_ Other			
Thanks for your interest!			vour interest!	
		- 0	Lucilia Prates, Director MA SMP	
Please complete the following:			Date:	
Name:				
Address:				
Home Phone	::	Cell:	Work:	
Emaile				

Be engaged! Join the growing movement of educated healthcare consumers.

If you are interested in joining the Massachusetts Senior Medicare Patrol Program's outreach and education efforts or want more information, please contact:

MA SMP Program Director Lucilia Prates at 978-946-1326 or LPrates@ESMV.org.

Massachusetts Senior Medicare Patrol Program

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