

# Questionnaire: Section 21

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## Section 21

1. *Does this member need medical add on?*

(Please select one.)

- Yes
- No

**If you answered "Yes" on question 1**

1.1.1. *List the specific illness or condition to be addressed that requires increased support:*

1.1.2. *How will units be used for increased medical needed support:*

1.1.3. *What is the expected duration of the increased support?*

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