



A Division of Atlanta Women's Health Group

Private Contract Between Medicare Beneficiary and Physician/Practitioner

I, Dr. _____ am excluded from Medicare under Sections 1128, 1156, or 1892 of the Social Security Act.

The beneficiary or his/her legal representative (named below) understands that Medicare limits do not apply to what I may charge for items or services furnished by me.

Beneficiary or Legal Representative

Signature

Date

The beneficiary or his/her legal representative agrees not to submit a claim to Medicare, or to ask me to submit a claim to Medicare.

The beneficiary or his/her legal representative understands that Medicare payment will not be made for any items or services furnished by me that would have otherwise been covered by Medicare, if there was no private contract and a proper Medicare claim had been submitted.

The beneficiary or his/her legal representative enters into the contract with knowledge that h/she has the right to obtain Medicare-covered items and services from physicians and practitioners who have not opted out of Medicare, and that the beneficiary is not compelled to enter into private contracts that apply to other Medicare-covered services furnished by other physicians or practitioners who have not opted out.

The effective date of the opt-out period to begin is: _____

The effective expiration date of the opt-out period is: _____

The beneficiary or his/her legal representative understands that Medicare plans do not, and other supplementary plans may elect not to, make payments for items and services not paid for by Medicare.

Physician/Practitioner Name

Signature

Date