

Neuropsychological Services of Virginia, Inc.

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Provider/Supplier Notice to Beneficiary Regarding Service(s) That Are Likely to Be Denied Payment by Medicare Part B as "Not Reasonable and Necessary"

Physician/Supplier Notice to Beneficiary:

Medicare will pay only for services that it determines to be "reasonable and necessary" under section 1862(a)(1) of the Medicare law. If Medicare determines that a particular service, although it would otherwise be covered, is "not reasonable and necessary" under Medicare program standards, Medicare will deny payment for that service. I believe that, in your case, Medicare is likely to deny payment for the following services(s) for the reason(s) noted below:

Description of Service(s): _____

Reason(s) for Medicare's Denial: _____

Provider's Signature

Date

Beneficiary's Acknowledgment and Agreement to Pay:

I have been notified by my physician/psychologist/supplier that he or she believes that, in my case, Medicare is likely to deny payment for the services identified above, for the reasons stated. If Medicare denies payment, I agree to be personally and fully responsible for payment.

Beneficiary's Signature

Date

Witness

Date