

## FOR PATIENTS WITH MEDICARE

If you have Medicare, please read the following and sign, date and return this form.

Renée Flam, LCSW, ACSW, has 'opted out' of Medicare, as provided for in the Balanced Budget Act of 1997 Section 4507. What this means for you as a Medicare recipient is that Medicare will not pay for any of the services (both evaluation and treatment) provided by Renée Flam.

If you want to be seen and treated at her office, please sign below as a private contract agreement with her, in which you agree not to submit any charges from this office to Medicare. By law, this agreement lasts for 2 years, at which time it will need to be renewed.

By signing this contract, you do not give up any benefits you are entitled to under Medicare from other doctors who provide Medicare covered services.

This means that you cannot submit and are not eligible to receive reimbursement for office visits or any other services provided by Renée Flam. Please contact her office if you have any questions regarding this form.

I understand and agree that Renée Flam does not provide medicare services. I will not bill her services to Medicare. This document is effective for a two year period, starting with the date of signature.

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Printed Name

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Date Signed

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Signature