

Medicare Opt Out Private Contract

In accordance with § 4507 of the Balanced Budget Act of 1997, a “private contract” is a contract between a Medicare Beneficiary (the patient) and a physician or other practitioner (Dr. Kopp and Associates) who has opted out of Medicare for 2 years for all covered items and services furnished to Medicare beneficiaries.

Dr. Kopp D.D.S Ltd. and all associates within this office have opted out of the Medicare program, having an affidavit on file with an effective date of October 1, 2004 through September 30, 2010.

I _____ hereby understand that Dr. Kopp and Associates have in fact opted out of Medicare for all and any covered items and services furnished by the provider and to pay the provider without regard to any limits that would otherwise apply to what the provider would charge. I am also aware of and agree to the following:

- The physicians of this practice are excluded from Medicare under the Social Security Act
- The beneficiary or legal representative accepts full responsibility for payment of the physician’s charge for all services furnished by the physician
- The beneficiary or legal representative understands that Medicare limits do not apply to what the physician may charge
- The beneficiary or legal representative agrees not to submit a claim to Medicare or ask the physician to submit a claim to Medicare
- The beneficiary or legal representative understands that Medicare payment will not be made for any items or services furnished by the physician 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 legal representative enters into the contract with the knowledge of the right to obtain Medicare-covered items and services from physicians who have not opted out of Medicare, and that the beneficiary is not compelled to enter into private contracts with other physicians who have not opted out
- The effective date of the Medicare Opt Out Option for this office is September 30, 2010 through September 30, 2012
- The beneficiary or legal representative understands that the Medigap plans do not, and other supplemental plans may elect not to, make payments for items and services not paid for by Medicare

Signed _____ Date _____
Patient signature

Signed _____ Date _____
Legal representative

Signed _____ Date _____
Physician

Where the patient is our primary concern.