



NURSES TOUCH HOME HEALTH PROVIDER, INC. 1451 East Chevy Chase Drive, Suite 207, Glendale, CA 91206 (818) 500-4877

Notice of Medicare Non-Coverage

Date:		Service Start/Admission Date:
Patient Name:		Patient ID Number:
Attending Physician:		Provider/Facility: Nurses Touch Home Health Provider, Inc.
The Effective Date Coverage of Your Current Home Health Services Will End:		
•	for your current Home Health services after the effective date indicated above.	
•	You may have to pay for any services you receive after the above date.	

Your Right to Appeal This Decision

- You have the right to an immediate, independent medical review (appeal) of the decision to end Medicare coverage of these services. Your services will continue during the appeal.
- If you choose to appeal, the independent reviewer will ask for your opinion. The reviewer also will look at your medical records and/or other relevant information. You do not have to prepare anything in writing, but you have the right to do so if you wish.
- If you choose to appeal, you and the independent reviewer will each receive a copy of the detailed explanation about why your coverage for services should not continue. You will receive this detailed notice only after you request an appeal.
- If you choose to appeal, and the independent reviewer agrees services should no longer be covered after the effective date indicated above:
 - o Neither Medicare nor your plan will pay for these services after that date.
- If you stop services no later than the effective date indicated above, you will avoid financial liability.

How to Ask For an Immediate Appeal

- You must make your request to your Quality Improvement Organization (also known as a QIO).
 A QIO is the independent reviewer authorized by Medicare to review the decision to end these services.
- Your request for an immediate appeal should be made as soon as possible, but no later than noon of the day before the effective date indicated above.

See next page of this notice for more information.