



Patient Supporting Documentation Acknowledgement Form

We will request documentation from your physician after your visit. As soon as we receive the documentation, we will be able to proceed with insurance authorization. **If your doctor delay's on sending documentation in a timely manner this will delay your care.** You are welcome to call your doctor to expedite the process. Payers require prior authorization or supporting documentation in order to process and cover a claim for the requested DME. Prior authorization allows the payer to review the reason for the requested DME item and to determine medical appropriateness. A patient-specific letter of medical necessity will help to explain the physician's rationale and clinical decision-making in choosing the DME item.

I _____ (*initials*) hereby confirm that I have read the patient supporting acknowledgment form and understand that it is required by law in order for the insurance company to process the claim and determine medical appropriateness.

Patient or Guardian (*signature*)

Date