



OHIO OPHTHALMOLOGICAL SOCIETY THIRD PARTY PAYOR HELP FORM

OOS member practices may receive free consulting assistance for problems or questions they encounter relating to third party payor matters. Newby Consulting, Inc. will provide personalized consultations on Medicare coding, claims, and related issues as well as questions involving other third part payors. Please use this form when requesting assistance. Attach any pertinent **de-identified** documents such as a denial letter, EOB form, etc. It is best to be brief and specific with your question. Average response time is three business days. Please fax your request to the OOS. **Call-in telephone support is NOT available from the OOS or Newby Consulting, Inc.**

Please note: This service is for OOS practice members only. You must be a practice member to be eligible for the program. Membership status will be verified. If you are not currently an OOS practice member and would like to take advantage of this service, please contact the OOS office for membership information.

You may reproduce this form as needed. Please print or type the information requested below

Today's Date: _____ # of pages (including this page): _____

Ophthalmologist's Name: _____

Practice Name: _____

Contact Name: _____

Phone (include area code): _____ Fax: _____

This is a problem with: Medicare _____ Private carrier _____ Other _____

If other than Medicare which carrier? _____

Please provide a brief description of the problem. Include CPT or ICD-9 codes as appropriate. Be as specific as possible.

Submit via fax to: Ohio Ophthalmological Society (614) 527-6763