

GUARANTEED LIENS

PROOF OF REPRESENTATION (MEDICARE)

Type of Medicare Beneficiary Representative (Check one below):

<input type="radio"/> Individual other than an Attorney	Name:	<input type="text"/>
<input type="radio"/> Attorney	Relationship to Beneficiary:	<input type="text"/>
<input type="radio"/> Guardian	Firm/Company Name:	<input type="text"/>
<input type="radio"/> Conservator	Address:	<input type="text"/>
<input type="radio"/> Power of Attorney	Telephone:	<input type="text"/>

MEDICARE BENEFICIARY INFORMATION AND SIGNATURE / DATE

Beneficiary's Name (exactly as shown on Medicare card):

Beneficiary's Medicare/Health Insurance Claim Number:

Date of Injury:

Beneficiary / Representative Signature:

Date Signed:

ATTORNEY SIGNATURE / DATE

Attorney Signature:

Date Signed:

Please be advised that the above individual has agreed to have **Guaranteed Liens** receive any and all correspondence pertaining to their open case currently at Medicare for the date of injury listed. By signing this agreement the beneficiary does give **Guaranteed Liens** the right to receive any current Conditional Payment Letter (CPL) and any Final Demand that has been issued on the case listed for this date of injury only and also the right to send any documentation to the Benefits Coordination & Recovery Center (BCRC) in the form of a dispute to any CPL or appeal on a Final Demand on behalf of the beneficiary or their attorney.

By signing this agreement, the beneficiary further authorizes **Guaranteed Liens** to communicate directly with the Centers for Medicare & Medicaid Services (CMS), the Benefits Coordination & Recovery Center (BCRC), the Commercial Repayment Center (CRC), or any Medicare recovery contractor regarding conditional payments made by Medicare related to the injury referenced above.

This authorization includes the right for **Guaranteed Liens** to:

- Request and obtain Medicare conditional payment and recovery claim information
- Receive correspondence including Conditional Payment Letters (CPL) and Final Demands
- Submit documentation necessary for lien resolution or claim review
- Submit disputes to CPLs and appeals of Final Demands when appropriate
- Communicate with Medicare recovery contractors regarding claim status and resolution

This authorization is limited solely to matters concerning the Medicare recovery claim related to the injury referenced above.