## LEOFF 1

Name (Last, first)

Address

City, State Zip

Email





Date subr	
Check ddres	
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Date claim
submitted 3-23-18
Check if new
address, phone
or email)

\*HR internal use

PLEASE COMPLETE AND SUBMIT THIS FORM WITH ALL CLAIM REIMBURSEMENTS

Date of Service (in date order oldest to newest)	Enter either (prescription, Medical) Dental or Vision)	Description	Qty	Total
12-28-1€17	Medical	Prescribed heel Lift orthodic	ı	5,00
01-09-11	Medical	Prescribed Arch insole support	_i	80-00
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	1	Total	2	85.00

# Submit claims for reimbursement via:

- Mail: Attn: HR, City of Olympia, 601 4th Ave. E., Olympia, WA 98501
- Email: humanresources@ci.olympia.wa.us

Fax: 360-709-2735



The Official U.S. Government Site for Medicare

Home / Your Medicare coverage

# Your Medicare Coverage

# Is my test, item, or service covered?

# Therapeutic shoes or inserts

#### How often is it covered?

Medicare Part B (Medical Insurance) covers the furnishing and fitting of either one pair of custom-molded shoes and inserts or one pair of extra-depth shoes each calendar year. Medicare also covers 2 additional pairs of inserts each calendar year for custom-molded shoes and 3 pairs of inserts each calendar year for extra-depth shoes. Medicare will cover shoe modifications instead of inserts.

## Who's eligible?

All people with Part B who have diabetes and severe diabetic foot disease are covered. Your doctor must certify that you need therapeutic shoes or inserts. A <u>podiatrist</u> or other qualified doctor must prescribe these items and they must be provided by one these:

A podiatrist

An orthotist

A prosthetist

A pedorthist

Other qualified individual

## Your costs in Original Medicare

If your supplier accepts <u>assignment</u>, you pay 20% of the <u>Medicare-approved amount</u>, and the Part B deductible applies.

Medicare will only cover your therapeutic shoes if your doctors and suppliers are enrolled in Medicare. Doctors and suppliers have to meet strict standards to enroll and stay enrolled in Medicare. If your doctors or suppliers aren't enrolled, Medicare won't pay the claims submitted by them.

It's also important to ask your suppliers if they participate in Medicare before you get therapeutic shoes. If suppliers are participating suppliers, they must accept assignment. If suppliers are enrolled in Medicare but aren't "participating," they may choose not to accept assignment. If suppliers don't accept assignment, there's no limit on the amount they can charge you.

### **Carl Watts**

From:

Becky Wallen <becky@dimarinc.com>

Sent:

Thursday, February 15, 2018 11:46 AM

To:

Carl Watts

Subject:

RE: City of Olympia NWFFT

Attachments:

ICE. City of Olympia IV

Hi Carl,

Will this letter suffice?

Thanks!

Becky Wallen
DiMartino Associates
1501 Fourth Avenue, Suite 2400
Seattle, WA 98101
206.623.2430 (phone)
206.812.7548 (fax)

### Please visit our new website at www.dimarinc.com

Please remember that insurance coverage cannot bound, amended or cancelled by leaving an electronic message or voicemail message without confirmation from a licensed representative..

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From: Carl Watts [mailto:cwatts@ci.olympia wa us]

Sent: Monday, February 12, 2018 4:5 2 709

To: Becky Wallen

Subject: RE: City of Olympia NWFFT

Thank you. We will be able to reimburse with that letter. Carl.

From: Becky Wallen [mailto:becky@dimarinc.com]

Sent: Monday, February 12, 2018 4:51 PM

To: Carl Watts <cwatts@ci.olympia.

Subject: RE: City of Olympia NWFFT

Hi Carl.

Labor First contacted the provider and they will send a letter stating that the shoe lifts are not covered. Caitlin at Labor First said she'd forward it to me as soon as she received it, at which time I'll send your way.

Thanks!

Becky Wallen DiMartino Associates 1501 Fourth Avenue, Suite 2400 Seattle, WA 98101 206.623.2430 (phone) 206.812.7548 (fax)