



Private Payer Roundtable
October 26, 2017
7:30 a.m.

Location: Foundation for a Healthy Kentucky
1640 Lyndon Farm Court
Louisville, KY 40223

Submit general issues and/or questions for the upcoming roundtable agenda. Please note that any questions pertaining to individual claims/patients cannot be addressed during this meeting, however, most carriers want to know the specific context of the question they will answer. Provide claim numbers for the purpose of their investigation and preparation of response. There may be an opportunity to individually discuss claim specific issues after the meeting with carrier representatives if their schedules allow.

Your Name: _____ **Phone:** _____

Email: _____

Practice Name: _____

Physician Name: _____

PLEASE DETAIL BELOW ANY ISSUES TO BE ADDRESSED AT THE ROUNDTABLE MEETING

Claim number of related issue, if applicable: _____

Please forward this completed form by October 6 to: physician.education@glms.org
or Fax: 502-736-6351