

I understand that I am responsible for any non-covered services, deductible and co-pay (20% co-insurance in Medicare cases) if my insurance carrier(s) do not pay. I have not received any same or similar item from any other supplier during this calendar year or within the past 5 years. I am satisfied with the fit, this device is not substandard and I authorize my insurance (Private and/or Medicare and/or my supplemental insurance carrier) to pay my supplier Foot and Ankle Specialists of the Mid-Atlantic, LLC directly. The products and services provided to you by Foot and Ankle Specialists of the Mid-Atlantic LLC are subject to the supplier standards contained in the Federal Regulations shown at 42 Code of Federal Regulations section 424.57(c). As the supplier, we attest the item(s) meet Medicare requirements. The standards concern business professional and operational matters (e.g. honoring warranties and hours of operation). The full text of these standards can be obtained here:

[https://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1&SID=2fb2eddceba43dd852266d4360ac6211&ty=HTML&h=L&r=SECTION&n=se42.3.424\\_157](https://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1&SID=2fb2eddceba43dd852266d4360ac6211&ty=HTML&h=L&r=SECTION&n=se42.3.424_157)

#### RETURN POLICY

I have received written instructions on the use and care of my device as well as written warranty information. Please wear your device at home first, until you are sure of a comfortable fit. Devices that are dirty or have visible wear or damage cannot be returned or exchanged. Custom fabricated items/devices are not returnable. Only the doctor can certify if you have a defective item/device, then it can be returned or exchanged within 14 days from the day received. Devices must be returned in the original form with original packing materials.