

**For Patients with Medicare or any other Government**  
**Health Benefit Programs**

Kindly note:

This is to acknowledge that Martin Plotkin, M.D., and the staff of Wellness Concepts, LLC, are not participants in Medicare, in any of its forms, nor in any other government health benefit program, federal or state.

This is to further acknowledge that none of the charges arising from the services, dispensed product or other materials at Wellness Concepts can be reimbursed by Medicare or any other governmental program.

I agree that I am responsible for all charges and will not send Medicare, in any of its forms or any other government program, any of the Wellness Concepts, LLC charges for reimbursement.

Patient Signature \_\_\_\_\_

Please Print Name \_\_\_\_\_

Date \_\_\_\_\_