

**Medicare Appeal  
Number:**

Telephone Discussion Supporting Documentation Cover Letter

Please submit this form with the supporting documentation discussed during your Telephone Discussion, **within 14 calendar days from the date of your Telephone Discussion.**

***C2C Innovative Solutions, Inc.***

Part A East Telephone Discussion Demonstration

P.O. Box 45310

Jacksonville, FL 32232-5310

*Fax: (904)224-2732*

Please include the following documentation: