Fax

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| --- | --- | --- | --- |
| **TO:** | {{TableStart:Case}}{{Contact Name: Salutation 1}} {{Contact Name: First Name 1}} {{Contact Name: Last Name 1}}{{TableEnd:Case}} | **FROM:** | Genomic Health - Customer Service |
| **FAX:** | {{TableStart:Case}}{{Contact Name: Fax 1}}{{TableEnd:Case}} | **FAX:** | 650-362-6487 |
| **PHONE:** | {{TableStart:Case}}{{Contact Name: Main Phone 1}}{{TableEnd:Case}} | **PHONE:** | 877-662-6897 |
| **SUBJECT:** | Notification of Cancelled Order | **DATE:** | {{Today}} |

Dear Pathology,   
  
Specimen ID: Specimen ID  
  
We have received a specimen from your institution for the Onco*type* DX® assay that has been ordered less than 14 days from hospital discharge. Medicare requires Genomic Health to bill the hospital where the services were performed under these circumstances. At this time, your institution does not have a signed Letter of Agreement with Genomic Health accepting financial responsibility for tests performed on specimens that fall within Medicare’s Date of Service Rule. **Therefore, the order for the above patient has been cancelled.**

We will be contacting the ordering physician to notify him/her of the cancelled order. Should they decide to send us a new order, we will proceed with testing and return the specimen to your pathology department once testing is complete.

Following this coversheet you will find Genomic Health’s Medicare Billing Policy. We appreciate the opportunity to be of assistance to you and your patients. Should you have any additional questions or concerns, please contact our Customer Service group by phone at **877-662-6897** or via email at **customerservice@genomichealth.com**.

**If you wish to stop receiving this notification, please contact Customer Service**

Kind Regards,

Customer Service

Genomic Health, Inc. ®

Telephone: 877-662-6897

Facsimile: 650-362-6487  
customerservice@genomichealth.com

www.genomichealth.com