

42 C.F.R. § 411.408

Refunds of amounts collected for physician services not reasonable and necessary, payment not accepted on an assignment-related basis.

- (a) Basic rule. Except as provided in paragraph (d) of this section, a physician who furnishes a beneficiary services for which the physician does not undertake to claim payment on an assignment-related basis must refund any amounts collected from the beneficiary for services otherwise covered if Medicare payment is denied because the services are found to be not reasonable and necessary under § 411.15(k).
- (b) *Time limits for making refunds*. A timely refund of any incorrectly collected amounts of money must be made to the beneficiary to whom the services were furnished. A refund is timely if—
- (1) A physician who does not request a review within 30 days after receipt of the denial notice makes the refund within that time period; or
- (2) A physician who files a request for review within 30 days after receipt of the denial notice makes the refund within 15 days after receiving notice of an initial adverse review determination, whether or not the physician further appeals the initial adverse review determination.

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