

Fairfax Medical Facilities, Inc.
Medicare Beneficiary Compliant Log Sheet

Newkirk Pharmacy
716 South Highway 77, Suite A
Newkirk, OK 74647

MEDICARE BENEFICIARY COMPLIANT LOG

Date of receipt of complaint: _____

Patient's Name: _____

Patient's Address: _____

Patient's Telephone Number: _____

Patient's Medicare or Health Insurance Claim Number: _____

Description of complaint: _____

Action Taken to Resolve the Complaint: _____

Signature of Representative

Date