**Reed & Associates, CPAs - CMS Retroactive Processing Contractor (RPC)**

**Enrollment Data Validation Review**

**Disenrollment Transaction (TTC 51) Documentation Worksheet**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Transaction ID:** | |  | | **Beneficiary ID:** | |  |
| **Beneficiary Name:** |  | | | | | |
| **POA or Legal Representative (if applicable):** | | |  | | | |
| **Contract Number:** |  | | **Effective Date:** | |  | |
|  | | | | | | |
| **Reason for Disenrollment Transaction** *(Please be as detailed as possible)***:** | | | | | | |
|  | | | | | | |
| |  | | --- | | **General Documentation Guidelines for Disenrollment Transactions** | | Below you will find a general list of required documentation to support a Disenrollment transaction for the beneficiary listed above. See the “Documentation Requirements Matrix” Excel file under the Enrollment Data Review Toolkit section of the RPC’s website for additional documentation requirements for Disenrollment transactions. Please provide a copy of one or more of the following documents to support a Disenrollment transaction: | | A signed, written request for disenrollment | | A signed disenrollment form | | Verification of enrollment in another plan for the requested effective date | | Notice of disenrollment letter | | | | | | | |

Revised 03/2022