



IRE/Part C QIC: PACE ORGANIZATION REOPENING REQUEST FORM

Please return this form via mail:

Mail: C2C Innovative Solutions, Inc. - QIC Part C
Attn: QIC Part C - Reopening
P.O. Box 1949
Jacksonville, FL 32231-0053

Enrollee Name: _____

C2C Reconsideration Case Number: _____

Dates of Service: _____

PACE Organization Name: _____

PACE Organization Contact: _____

Contact Title: _____

Street Address: _____

Mail Stop: _____

City/State/Zip: _____

Telephone Number: _____ Ext: _____

Fax Number: _____ Date of Request: _____

Basis of Reopening Request:

Error on the face of the evidence

New and material evidence

Fraud

Explain briefly: