

Q. What is an Advanced Beneficiary Notice (ABN)?

A. An ABN is a form that explains you may have to pay for a service your doctor has provided if Medicare doesn't pay for it. The ABN helps you to make an informed decision about whether to obtain the service and pay for it, or choose not to receive it.

Q. Why doesn't Medicare cover certain services?

A. Medicare only pays for services that it considers medically necessary. If the diagnosis given by your provider is not considered medically necessary, Medicare will not pay for the service.

Q. I have not had to pay for this service before. Is this something new?

A. The ABN is not new – it has been around for 10 years. When the Affordable Care Act was passed it changed the guidelines for preventative care. All patients eligible for Medicare are now entitled to an Adult Wellness Visit with their Primary Care Physician.

Q. Why do I have to sign the ABN?

A. If you are given an ABN, it means we believe Medicare may not pay for certain services. We ask patients to sign an ABN whenever Medicare may deny payment for a specific service. The ABN helps document that we have notified you of any possible financial responsibility.

Q. Do I need to sign the ABN?

A. No, you do not have to sign it. If you choose to sign it you have three choices listed below:

OPTION 1: I want the services listed above. You may ask to be paid now, but I also want Medicare billed for an official decision on payment, which is sent to me on a Medicare Summary Notice (MSN). I understand that if Medicare doesn't pay, I am responsible for payment, but I can appeal to Medicare by following the directions on the MSN. If Medicare does pay, you will refund any payments I made to you, less co-pays or deductibles.

OPTION 2: I want the services listed above, but do not bill Medicare. You may ask to be paid now as I am responsible for payment. I cannot appeal if Medicare is not billed.

OPTION 3: I don't want the services listed above. I understand with this choice I am not responsible for payment, and I cannot appeal to see if Medicare would pay.

Q. Will I be billed automatically?

A. You will receive a bill only if Medicare denies the claim. You may appeal the denial with Medicare if you think it is wrong.

Q. How much will I have to pay for the service(s)?

A. The estimated cost for the service(s) offered will be listed on the ABN.

Q. Will supplemental insurance pay for the service(s) if Medicare does not?

A. If you have a supplemental insurance plan you should contact the insurance company and ask whether the policy covers services that are not covered by Medicare.

Q. How do I contact Medicare if I have questions?

A. You can call them toll free at 1-866-804-0686