

McLaren Print System Order

Order No: 20446 Reprint Previous Order No: 5353  
Order Date: 2016-07-13  
User: Danielle Cahoon  
Phone: 810-688-3093

Ship Location: McLaren Family Care Center/Danielle Cahoon  
4482 Huron Street  
North Branch, MI 48461

Forms

Quantity: 100  
Paragon Dept No: 65250  
Dept Name: McLaren Family Care Center-North Branch  
Company Number: 810

Order Total Price: 18.95

Item Number: MM-103A (8730) English  
Item Description: ABN (McLaren Lapeer Region North Branch Family Medicine)  
Revision Date: 1/2012  
Print: 1 sided black and white  
Paper: 3 Part (White, Yellow, Pink)  
Size: 8.5 x 11  
Fold:  
Finish:  
Drill: None  
Misc Info:

MCLAREN LAPEER REGION  
NORTH BRANCH FAMILY MEDICINE  
4482 Huron Street • North Branch, MI 48461  
(810) 688-3093

Beneficiary: \_\_\_\_\_ Patient Name: \_\_\_\_\_

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**ADVANCED BENEFCIARY NOTICE OF NONCOVERAGE (ABN)**

**NOTE:** If Medicare doesn't pay for D, \_\_\_\_\_ before, you may have to pay. Medicare does not pay for everything, even some care that you or your health care provider, have good reason to think you need. We expect Medicare may not pay for the D \_\_\_\_\_ before.

Checked Item (Only)	Item or Service	Reason Medicare May Not Pay	Estimated Cost
<input checked="" type="checkbox"/>	In-Office Injection & Administration	Medicare does not pay for this service for your condition.	\$17.00
<input checked="" type="checkbox"/>	Chem. Scan	Medicare does not pay for this service for your condition.	\$67.00
<input checked="" type="checkbox"/>	ECG, complete	Medicare does not pay for this service for your condition.	\$41.00
<input checked="" type="checkbox"/>	Hemostasis	Medicare does not pay for this service for your condition.	\$1.00
<input checked="" type="checkbox"/>	Ultrasono	Medicare does not pay for this service for your condition.	\$13.00
<input checked="" type="checkbox"/>	PAF Exam	Medicare does not pay for this service as often as this.	\$79.00
<input checked="" type="checkbox"/>	OTN Exam	Medicare does not pay for this service as often as this.	\$179.00
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			

**What you must do now:**  
 • Read this notice, so you can make an informed decision about your care.  
 • Ask us only questions that you may have after you finish reading.  
 • Choose an option below about whether to receive the D. *Cost above.*

**Note:** If you choose option 1 or 2, we may help you receive any extra medical that you might have, but Medicare cannot require us to do this.

**Options:** **Check only one box. We cannot choose a box for you.**

**OPTION 1:** I want the \_\_\_\_\_ listed above. You may ask to be paid now, but I also want Medicare to help for an official decision on payment, which is sent to the area Medicare Secondary Review (MSR). I understand that if Medicare does not pay, I am responsible for payment, but I can appeal to Medicare by following the directions on the MSR. If Medicare does pay, you will refund any payments I made to you, less charges or deductibles.

**OPTION 2:** I want the \_\_\_\_\_ 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 \_\_\_\_\_ listed above. I understand with this choice I am not responsible for payment, and I cannot appeal to see if Medicare would pay.

**Additional Information:**

**This notice gives our opinion, not an official Medicare decision. If you have other questions on this notice or Medicare billing, call 1-800-MEDICARE (1-800-633-4277 TTY: 1-877-486-2948).**

Signing below means that you have received and understood this notice. You also receive a copy.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

McLaren Family Care Center is not an agent for Medicare. Medicare is a federal program that provides health insurance for people 65 and older. The cost of Medicare is based on the amount of income you earned. The cost of Medicare is based on the amount of income you earned. For more information, please visit www.medicare.gov. © 2012 McLaren Family Care Center. All rights reserved. Printed on recycled paper. Form MM-103A (8730) 1/2012

WHITE RECORD YELLOW PATIENT PINK ROUTER Form MM-103A (8730)