

McLaren Print System Order

Order No: 22797 Reprint Previous Order No: 5342
Order Date: 2016-10-24
User: Linda Rivard
Phone: 810-658-6503

Ship Location: Davison Community Medical Center
10090 E. Lippincott Blvd
Davison, MI 48423

Forms
Quantity: 500
Paragon Dept No: 64103
Dept Name: McLaren Medical Group
Company Number: 810

Order Total Price: 94.75

Item Number: MM-103A (8330) English
Item Description: ABN (McLaren Flint Davison Community Medical Center)
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-FLINT DAVISON COMMUNITY MEDICAL CENTER
ADVANCED BENEVOLENT NOTICE OF NON-COVERAGE (ABN)
NOTE: If Medicare doesn't pay for D... before, you may have to pay. Medicare does not pay for everything, even some cases that you or your health care provider have good reasons to think you need. We expect Medicare may not pay for the D... before.
Checklist table with columns: Checklist Item, Dates or Services, Reason Medicare May Not Pay, Estimated Cost.
Options: Check only one box. We cannot choose a box for you.
OPTION 1: I want the... 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 MDS. If Medicare does pay, you will refund any payments I made to you, less charges or deductibles.
OPTION 2: I want the... I understand that if Medicare does not pay, I am responsible for payment. I cannot appeal if Medicare is not billed.
OPTION 3: I don't want the... I understand that Medicare will not pay for this service, 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.
Signature: _____ Date: _____
WHITE RECORD YELLOW PATIENT PINK ROUTER Form approved 08/16/2014