

Advance Beneficiary Notice of Non-Coverage (ABN) - Medicaid

Patient Name: _____

Note: You need to make a choice about receiving these health care items or services.

We expect that your insurance company will not pay for the item(s) or service(s) that are described below. Your Insurance Company does not pay for all of your health care costs. Your Insurance Company only pays for covered items and services when your insurance company's rules are met. The fact that your insurance company may not pay for a particular item or service does not mean that you should not receive it. There may be a good reason your doctor recommended it. Right now, in your case, your Insurance Company will not pay for:

Item or Service: New Patient Comprehensive Exam (99204) Brief Existing Patient Exam (99211), Existing Patient Expanded Exam (99213), Exam Level 1

Because: This is not a covered service by Medicaid.

The purpose of this form is to help you make an informed choice about whether or not you want to receive these items or services, knowing that you will have to pay for them yourself. Before you make a decision about your options, you should read this entire notice carefully.

- Ask us to explain, if you do not understand why your Insurance Company will not pay.
- Ask us how much these items or services will cost you (Estimated Cost: \$ 45 - \$110)

Your signature below indicates that you are fully aware these service(s) are not covered by your insurance and wish to proceed with the service(s). Service(s) will be deemed full patient responsibility, with payment due at time of service. This decision may not be appealed.

SIGNATURE of patient or person acting on patient's behalf

DATE

NOTE: Your health information will be kept confidential. Any information that we collect about you on this form will be kept confidential in our offices. If a claim is submitted to your insurance company, your health information on this form may be shared with your insurance company. Your insurance company will keep your health information confidential.