**NEW ABN REQUIRED BY 6/30/23**

Medicare’s ABN form (*used for Medicare A & B and Railroad beneficiaries*), is being updated. The ABN is used when a **covered service** ‘may not’ be covered due to specific circumstances. For chiropractor’s, that means for the manual manipulation only.

An ABN form *can* be used to notify patients of ‘never covered’ --statutory non-covered items; but those items cannot be listed on a mandatory ABN with manipulation. A separate ‘voluntary’ ABN form would need to be delivered.

The new ABN form has an expiration date of 01/31/2026 and **will be mandatory on 6/30/23**. You may continue to use the current ABN form with the expiration date of 6/30/23 until the renewed form (expiration date 01/31/2026) becomes mandatory. All existing ABNs on file must be updated by that time.

The new form “looks” just like the current form with only a minor change having been made to update the nondiscriminatory language.

The ABN must be reviewed with the beneficiary or his/her representative and any questions raised during that review must be answered before it is signed. The ABN must be delivered far enough in advance that the beneficiary or representative has time to consider the options and make an informed choice. Employees or subcontractors of the doctor/clinic may deliver the ABN. ABNs are never required in emergency or urgent care situations. Once all blanks are completed and the form is signed, **a copy is given to the beneficiary or representative**. In all cases, the doctor/clinic must retain a copy of the ABN delivered to the beneficiary on file for a minimum of 5 years, ***OR*** the required time set for record keeping within the doctor’s state. (Texas is six years; some other states have seven or ten years.)

There are 10 blanks for completion in this notice, labeled from (A) through (J). It is recommended that doctors/clinics **remove the lettering labels from the blanks before issuing the ABN to beneficiaries**. Blanks (A)-(F) and blank (H) may be completed prior to delivering the notice, as appropriate. Entries in the blanks may be typed or hand-written, but should be large enough (i.e., approximately 12-point font) to allow ease in reading. (Note that 10-point font can be used in blanks when detailed information must be given and is otherwise difficult to fit in the allowed space.) The doctor/clinic must also insert the blank (D) header information into all of the blanks labeled (D) within the Option Box section, Blank (G). One of the check boxes in the Option Box section, Blank (G), must be selected by the beneficiary or his/her representative. Blank (I) should be a ***cursive signature***, with printed annotation if needed in order to be understood.

Doctors/clinics must complete the column under Blank (F) to ensure the beneficiary has all available information to make an informed decision about whether or not to obtain potentially non-covered services. Doctors/clinics must make a good faith effort to insert a reasonable estimate for all of the items or services listed under Blank (D). In general, it is expected that **the estimate should be within $100 or 25% of the actual costs, whichever is greater**; however, an estimate that exceeds the actual cost substantially would generally still be acceptable, since the beneficiary would not be harmed if the actual costs were less than predicted.

If an ABN is filled out with the **estimated cost of ONLY ONE visit**, then that ABN is **good for ONLY ONE visit**. An ABN can cover up to one year from the date signed, as long as the estimated cost covers the amount the patient will be responsible for within $100 or 25% of the actual cost, whichever is greater.

ABNs expire, based on either: (1) the expiration date of the form; (2) one year from the date of the patient’s signature, (*if estimated cost covers that period of time*); or (3) if the patient has an active, covered and billable Medicare condition. Once a claim is billed and paid by Medicare, then existing ABNs automatically expire; and a new ABN will be required if the patient goes back on maintenance care.