Advanced Beneficiary Notices (ABN’s) help the billing process by notifying the Provider of ineligible diagnoses at the time of placing the order.

Try It Out - ABN Notice for an Order

When you sign an order for a patient with Medicare, you might get a warning that the order is not covered for the associated diagnosis. You can review diagnoses that are covered and select a new one, or you can generate an Advanced Beneficiary Notice (ABN) form for the patient to sign. By signing this form, the patient agrees to cover the cost of the order.

Review covered diagnoses

1. Provider places an order, enters the Diagnosis, and attempts to sign. If the Diagnosis covers the order or procedure, the signature is accepted and the order goes through.

2. If the Diagnosis does not cover the order or procedure, an ABN warning is triggered and the Alternate Diagnosis Search Windows Appears.

3. When the ABN warning appears, click Review Diagnoses.

4. Look for an alternative diagnosis by:
   a. Browsing the tree at the bottom of the window.
   b. Entering a search term in the Search for covered diagnoses field.

5. If you select an alternative diagnosis, click one of the Accept buttons at the bottom of the window. If there is not an appropriate diagnosis that is covered, click Cancel to keep the order associated with your original diagnosis.

Generate an ABN

6. When the ABN warning appears, click Waiver Form. An Advance Notice form appears which includes the estimated cost of the order at the bottom of the form.

![Waiver Form Screenshot](image)

7. After discussing the advanced notice with the patient, update the Notice status field to indicate whether the form was signed, refused, printed, or voided.

8. Click Print if you want to print the form now. Otherwise, your support staff or clinic manager can get the patient's signature.

![Advance Beneficiary Notice of Noncoverage (ABN) Form](image)

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**Try It Out With Therapy Plans/Treatment Plans**

For Treatment and Therapy Plan Orders, a gold banner will indicate the diagnosis does not meet the required needs for the order and is not covered.

![Gold Banner Screenshot](image)
It is very important that the ABN warning be addressed before the patient is treated in the infusion center. If the medication or order has an ABN, it is not authorized and the nurse should not administer the medication. This delays treatment for all patients in the infusion center.

1. Click the view details hyperlink.

2. A Review Diagnosis window opens, either pick a correct diagnosis or say Reviewed: ABN Required. Then the order shows up on an ABN report.

3. The Review Diagnosis window tells you the associated problems with this order that are not covered. Please search in the search box, as instructed above and pick the covered diagnosis, if applicable. You may have more than one order in a Therapy or Treatment Plan. Click on each order if there are more than one and attach the correct diagnosis if the diagnosis you chose does not meet the requirements for all orders.

4. If there is not an appropriate diagnosis that is covered, click Cancel to keep the order associated with your original diagnosis.

5. Then discuss with the patient the estimated charges for the procedure or order. If the patient agrees to the cost then update the ABN Status to choose the appropriate option (Medicare Pay, Patient Pay, etc...)

a. Update the ABN Waiver Box to reflect the Patient Acceptance. (this also assists the Front desk person to know how to proceed during checkout)
6. When the patient checks out, the ABN is printed and signed by the patient. The ABN will be sent for scanning to HIM.

7. If the patient refuses, then the Provider updates ABN Waiver Box to Patient Refused and cancels the Order.