



Multi-disciplinary Academy of Affiliated Medical Arts, LLC

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CMS-R-131

CMS, Office of Strategic Operations and Regulatory Affairs,  
Division of Regulations Development – C  
Attention: Bonnie L. Harkless  
Room C4-26-05,  
7500 Security Blvd.  
Baltimore, Maryland 21244-1850

May 27, 2007

Re: ABN (CMS-R-131)

Dear Ms. Harkless:

We are writing in comment to the proposed changes to the ABN (CMS-R-131).

Frequently, services covered under an advance notice are repetitive throughout a course of treatment and would logically be subject to denial in every instance. Examples include the repeated use of certain modalities and/or methods of treatment that are necessary for patient's recovery but are routinely excluded from Medicare coverage for various reasons.

Since the original notice details the procedures or services and the regulations for use of the form require discussion and explanation, we feel that one notice and patient election regarding those services should suffice for the entire course of treatment.

We respectively suggest that the ABN be formatted to include additional sections to reflect if the notice applies to a single incident or to a "series of incidents" that may occur during a stated treatment period.

An example would be adding an additional entry where language could cover the anticipated inclusive dates of the services subject to non-coverage. (ie: "Please note that the services listed would require your personal payment for each instance during your entire treatment regimen which is anticipated to require \_\_\_\_\_ visits during the next \_\_\_\_\_ weeks" )

Naturally, to protect the beneficiary and the system, provisions should be adopted to limit the inclusive periods covered by the notice to a single plan with a reasonable time frame and require an additional notice for revisions to the original plan of care.

We appreciate your consideration.

Best regards,

R.L. Ramsdell, PhD, FACFEI, DABFE, CFC, LFMAAMA.  
Executive Director