NEXT HEALTHCARE INC.
Next Generation Healthcare Solutions
STEM CELL BANKING

CelBank™ ADVANCED BENEFICIARY NOTICE (ABN)

Medical insurance does not always pay for healthcare costs. The fact that your insurance may not pay for a particular service does not mean you should not receive it. It only means it is not a covered benefit.

Currently, there is no insurance coverage for the elective acquisition of adult stem cells from blood and skin. Your healthcare provider has a special skillset and opportunity to obtain your adult stem cells during an office visit for the purpose of preserving them for your future regenerative medical use.

The purpose of this form is to help you make an informed decision about whether or not you want to proceed with this service, knowing you will have to pay for it all yourself. Please make sure you understand this notice before making your decision.

Please choose the option by checking it and then sign the form.

☐ **Option 1:** Yes, I want to receive a CelBank™ service. I understand I will be financially responsible for paying my healthcare provider for obtaining my blood and skin cells and for the testing, processing and cryo-preservation of my samples by Next Healthcare, Inc.

☐ **Option 2:** No, I have decided against receiving this service.

Date	Print Name	Signature