

C H I C A G O
N A S A L & S I N U S
C E N T E R

Co-Pay & Deductible Statement

Thank you for choosing Chicago Nasal & Sinus Center! We are committed to the success of your treatment and care, and that often requires testing or procedures that are not offered by primary care physicians. These additional measures, in conjunction with Dr. Pritikin's training and experience, allow us to identify and address the cause of your problems.

Please understand that we will submit claims to your insurance for these procedures, but even if they are authorized or "covered" by your plan, you may have an out-of-pocket expense if your deductible is not met or if a co-insurance payment is required by your policy.

Nasal Endoscopy

To see deep inside the nose and to examine the structures of the nasal passages, a small rigid telescope is used. This helps identify abnormalities of the nasal septum, locate polyps, and determine whether infection is present. We bill insurance \$500 for this procedure.

Flexible Fiberoptic Laryngoscopy

A flexible telescope is used to visualize the upper airway and throat, starting in the nose and continuing down to the voice box and vocal cords. This procedure is used to assess vocal cord abnormalities and hoarseness, swallowing difficulties, throat pain and chronic cough. We bill insurance \$430 for this procedure.

CT Imaging

A CT scan may be obtained to assess the success of various treatments, to determine the extent of sinus disease or nasal obstruction, to map the sinuses in preparation for surgery or to assess nasal and facial fractures. We bill insurance \$1100 for this procedure.

Allergy Testing

Allergy testing involves placing drops of solutions containing possible allergens on the skin. A series of scratches allows these solutions to enter the skin and show positive allergic reactions. We bill insurance \$600 – \$700 for this test.

The Center for Medicaid and Medicare Services (CMMS) and the insurance companies have developed standardized procedure (CPT) codes for these services. Insurance companies do not differentiate between these services when they are provided in the office and when they are provided in the hospital or operating room, so **surgery or procedure codes may appear on your insurance billing statement.**

I have read and fully understand the statements above and my questions have been adequately addressed.

SIGNATURE OF PATIENT OR LEGAL GUARDIAN

DATE