



Patient Name: _____ Date of Proc: _____ Time: _____
 Facility: _____ Physician: _____
 Scheduler: _____

Colonoscopy CPT __ 45378 __ 45380 w/biopsy

Upper Endoscopy CPT __ 43235 __ 43239
 (Not covered under screening benefits)

Diagnostic/Therapeutic Colonoscopy; Diagnosis: _____

This procedure is usually paid **after your deductible has been met**.
 Colonoscopies following a positive cologuard test are diagnostic. They are not screenings or preventive.

Surveillance Colonoscopy; Diagnosis: _____

____ Z86.010	Personal Hx Colon Polyps	____ Z85.038	Personal Hx Colon Cancer
____ Z83.71	Family Hx Colon Polyps	____ Z80.0	Family Hx Colon Cancer
____ Z87.19	Personal Hx of other digestive diseases		

Many carriers will pay **after your deductible has been met**. Please check with your carrier, giving them the specific codes checked above. This is NOT a screening. CTGI's billing office can give you more information.

Preventive Colonoscopy Screening; Diagnosis: ____ Z12.11

No Signs or Symptoms and No History – This code is not used with any of the above personal or family history codes. The ACS guidelines for screening at age 45 are NOT included for many carriers-please check your plan coverage.

Upper Endoscopy Diagnosis/Indication: _____

This Procedure is done because of signs or symptoms or personal history. It is not a screening procedure. Most carriers process and pay after a deductible has been met.

***Please be aware that if you are scheduled for a combined Colonoscopy/Endoscopy many insurance carriers are now processing the anesthesia as diagnostic regardless of the screening colon code. You may have a balance for anesthesia.**

Who will bill me? You may receive bills from separate entities associated with your procedure, such as the physician, facility, anesthesia, pathologist, and/or laboratory. Connecticut GI, PC can only provide you with information associated with our fees.

How will I know what I will owe? Call your insurance carrier to check your benefits. Coverage for screening, surveillance and diagnostic colonoscopies vary and are specific to your carrier and your plan. Information about your procedure is listed above.

If you have a deductible, limited or no coverage for your procedure, please call our Billing Office to set up payment arrangements prior to your procedure.

Representative's Name: _____ Date: _____

Call Reference #: _____

Notes from your call:

Can the physician change, add, or delete my diagnosis so that I can be considered a colon screening? No. The patient encounter is documented as a medical record from information you have provided as well as an evaluation and assessment from the physician. It is a legal document that cannot be changed to facilitate better insurance coverage.

Call the CTGI Billing Department at 860-257-4131 with any questions or concerns. They are a great source of information and are happy to help if you are having difficulty understanding your financial obligations. However, it is necessary for you to first call your insurance company and ask the above questions.
 Updated 1/28/2020