



**ALLERGY TESTING INSURANCE INFORMATION**

Patients Name \_\_\_\_\_ Date \_\_\_\_\_

Please contact your insurance company before having Allergy Testing. Failure to do so may affect your benefits. Many insurance companies have requirements that must be met prior to any testing.

Your insurance is a contract between you and your insurance company. We will try to help you receive the maximum benefits from your carrier but we are not a party to the contract.

We participate with many insurances and will accept what they deem to be reasonable and customary for payments. However, you will be responsible for your deductibles, co-pays and any non-covered services. Effective 1/1/14, our office will be collecting a portion of your deductible, if applicable and unmet, prior to testing.

I have read and understand the above information.

Signature \_\_\_\_\_ Date \_\_\_\_\_

The codes for the testing are as follows:

**Diagnosis Code: J30.9**

**Procedure Codes:**

- 95004 Skin Testing
- 95024 Intradermal Testing
- 95115 Immunotherapy (Shots)
- 95117 Immunotherapy (Shots)
- 95165 Professional Service for Immunotherapy

Please note you will only need 95115 and 95117 if you test positive and will be receiving shots from our office.