



The future of ENT care delivered today at . . .

Fauquier Ear Nose & Throat Consultants

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www.FauquierENT.net

Self-Pay Policy

If you have no health insurance, you will be billed for all services provided at full charge. However, because you are self-pay, we will provide a discount.

This notice is to inform you that there is a separate and distinct fee for:

- **Office Visit (Cost: \$60 - \$200+).** The office visit is when the physician looks in your ears, nose, and throat. Pretty much an Office Visit is no more or less than what a primary care doctor would do.
- **Procedures (Cost: \$60 - \$500+)** such as blood draws, earwax removal, fiberoptic endoscopy, nosebleed cauterization, skin lesion excisions, etc. Such procedures are what distinguishes an ENT doctor from a primary care doctor. Keep in mind that when a procedure is performed, it generally DOES increase the cost of an office visit as well.
- **Hearing tests (\$50 - \$300+).**
- **Surgery (\$300 - \$3000+).** Surgery is performed in a hospital operating room and includes tonsillectomy, ear tube placement, sinus surgery, etc. Additional costs upwards of \$10,000+ may be incurred from the hospital.

If cost is a concern for you, be sure to ask the cost implications before we do any procedures or testing. The cost (including discount) of an average self-pay ENT evaluation usually runs around \$200 (Office Visit plus an endoscopic exam).

Payment is due at the end of the visit of at least 50% of total charges (100% is preferred). Monthly payment arrangements can be set up for remainder of total charges.

Keep in mind that certain tests the physician may order are not billed by our office and as such, we have no control over how much it will cost. Such tests include CT scans, MRI scans, allergy blood testing (RAST), or any other tests performed outside our office. We have NO control over the costs of these tests and it is your responsibility to contact the relevant billing/finance department to see how much you will be charged for the test prior to getting it done. Depending on the test, most billing departments will provide a discount based on your income level.

I have read, understand, and agree to the terms of this notice.

I also understand that I have been given the opportunity to cancel this appointment and not be seen by the physician if I have found the terms of this notice unacceptable.

Signature

Date

Print Name