

CAPE COD PEDIATRICS  
55 ROUTE 130  
PO BOX 549  
FORESTDALE MA 02644

(508) 477-5306 (T)

(508) 477-0297 (F)

Dear Parent:

On your child's annual well visit, we recommend performing the following testing:

**VEP Vision Testing (Diopsys) \$270.00**

Age 6 months – 10 years

Insurance Procedure Code – CPT #95930 Visual evoked potential (VEP) testing

Insurance Diagnosis Code – ICD-9 #V20.2

**Evoked Auditory Testing (Eroscan) \$95.00**

Insurance Procedure Code – CPT #92587 – Evoked Auditory Testing

Insurance Diagnosis Code – ICD-9 #V20.2 – thru age 17

Insurance Diagnosis Code – ICD-9 #V70.0 – 17 y/o or greater

The majority of insurance companies consider these tests covered expenses on a well visit. If you have a deductible, the cost may apply to your deductible.

Please call your insurance company prior to your appointment – give them the information we have provided you (above) and ask what your patient responsibility would be, if any (this could include copay, deductible, co-insurance). We suggest that you obtain the representative's name and a reference number for your records.

If you do have a high deductible you could consider foregoing billing your insurance company for these tests and arrange a same day self-pay discount with our billing office.

Please call our billing department if you have any questions.

Sincerely,

Cape Cod Pediatrics