

CASEY MOLECULAR DIAGNOSTICS LABORATORY
NPI# 1760760599
Billing Information

As you may know, coverage of genetic testing is payer and plan specific. It is difficult for us to know all health plans, and a given patient's specific coverage. This document is meant to assist you with our billing processes for specimens sent for ocular genetic testing.

We accept three billing processes; institutional, self pay, or insurance billing:

Institutional billing: Please provide us with your entity's billing address and contact information, so we can set up an account with you. We can obtain this information via our Requisition form, downloaded from our website or emailed to you. We will bill your entity on a monthly basis. The fees listed on our requisition are already discounted for you. Our Tax ID# is 93-1283717.

Self Pay: Patients without insurance coverage for ocular genetic testing, will be asked to pay upon order via our Requisition. We accept all forms of credit card, money order, or personal checks. Personal checks will be deposited in advance of testing in order to clear the banking process. In order to make this testing cost effective, we have kept our rates low. Our Tax ID# is 93-1283717.

Insurance Billing: Since coverage varies widely, we ask your assistance in determining a patient's eligibility and obtain authorization for our testing. We do not bill Medicare or state Medicaid programs at this time. There is a document available on our website that lists the individual CPT codes and quantities billed, depending upon the test or panel ordered. We bill our full usual and customary fees to insurance plans. The patient will be responsible for non-authorized services, deductible or coinsurance, as determined by their insurance plan. Please be advised that due to state and federal laws, when we bill insurance OHSU will send patient documents relating to HIPAA, etc. Our Tax ID# for insurance billing is 26-2998718.

Thank you for your interest in the Casey Molecular Diagnostics Laboratory.

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