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*Sports Medicine and Shoulder Fellowship,
The Hospital for Special Surgery,
FORUM, Society of Fellowship-Trained,
Women in Orthopaedic Surgery*

Grady L. Jeter, M.D., Inc.

*Member Arthroscopy Association of North America,
International Society of Arthroscopy,
Knee Surgery and Orthopaedic Sports Medicine,
Founding Member Ikeuchi International Society for Arthroscopy and
Musculoskeletal Endoscopy*

Martin Trieb, M.D., Inc.

Member Arthroscopy Association of North America

*Diplomates American Board of Orthopaedic Surgery • Members American Orthopaedic Society for Sports Medicine
Fellows American Academy of Orthopaedic Surgeons*

SURGERY WORKSHEET FOR PATIENTS

We have prepared this worksheet for you to estimate your out-of-product expenses for surgery. These are questions which you should ask your insurance carrier regarding benefits. It is your responsibility to verify coverage for the procedure and durable medical equipment (cooling systems, braces, slings, etc.), as each carrier has different regulations and benefits, which are ever changing.

Is Bascom Surgery Center (BSC) a contracted facility? YES/NO
If not BSC will still give contracted rates for our patients
(please call Dennis at (408) 626-1850)

Is the Anesthesiologist contracted? Tax ID # 770212996 YES/NO
Call (408) 354-2114

What is my deductible and how much have I met? \$ _____ / \$ _____

Procedure: _____

(Your procedure is considered outpatient if done at BSC)

What will be my coinsurance for the procedure? _____

Are physician assistants covered for surgical assists? YES/NO

Surgical Assistant fee \$ _____

(If not covered by insurance patient is responsible for the \$450.00 fee.)

Estimated Total: \$ _____

Person you spoke with: _____ Date: _____

Authorization number if required: _____

Any additional notes:

This is YOUR worksheet, so you know what to expect. We do not need the answers to these questions, but please feel free to call Catherine (408)559-3888 if you have any additional questions.