

EYE CENTER OF NORTHERN COLORADO, P.C.
UNDERSTANDING YOUR BILLING AS A RESEARCH PATIENT

You have chosen to enroll in a clinical trial as a research patient. With your participation in this trial, there will be some changes made to how you are billed for services performed at the Eye Center of Northern Colorado. **Your status as a research patient does not mean that you receive all eye related care at no charge.**

All costs covered by the clinical trial will be outlined in the Informed Consent Document (ICD) you signed prior to participation in the trial. This may include study related visits, study related surgeries or procedures, medications and testing related to the study eye(s). Anything not listed in the ICD is **not covered by the clinical trial** and will be billed to you or your insurance. You will be responsible for any deductible, co-insurance or co-payments as determined by your insurance plan.

If you are enrolled in a clinical trial that involves one eye, **only those costs related to the study eye will be covered.** All surgeries, procedures, medications, and visits related to the non-study eye will be billed to you or your insurance, and you will be responsible for any deductible, co-insurance or co-payments as determined by your insurance plan.

By signing below, I acknowledge that I have read and understand this form and agree to the terms outlined within.

Patient Name (Print)

Patient Signature

Date