

OFFICE PAYMENT POLICY
 THE EYECARE BOUTIQUE

Payment for any and all professional services provided by our office is required at the time of your appointment. If insurance is used to pay for our services you will be responsible for any amount not covered by your primary insurance. It is your responsibility to understand your insurance coverage. Every insurance plan differs in coverage, deductible and benefit periods. Our doctors are categorized as specialists under medical insurances, co-payments will apply accordingly. If your insurance denies any claims, applies them to a deductible or only offers partial coverage you are financially responsible for the remaining balance.

Please Note:

- Our office does not submit to secondary or co-insurances. It is the patient's responsibility to request detailed receipts for services and submit them accordingly.
- Our office pre-authorizes vision insurance benefits, if the correct insurance information is not provided prior to your visit you will be responsible for the services in full at the time of the appointment.
- If you are interested in contact lenses an evaluation and fitting fee will apply to your visit. This fee is separate from your basic routine vision exam and may not be covered by your insurance.
- Complete annual eye exams consist of two parts, a medical evaluation to assess the health of the eye and a refraction to determine the proper correction for eyeglasses or contact lenses. Your insurance may pay for one or both parts of the exam. If you are being monitored or treated for a medical condition your routine vision insurance MAY NOT cover your eye exam, in which case your visit will be billed under medical insurance. Many medical insurances will pay for the medical evaluation but may not pay for the refraction portion of the exam.

I have read and understood the above.

 Signature Patient/Guardian _____
 Date

 Initials Date

 Initials Date

 Initials Date