



OFFICE POLICIES & FINANCIAL RESPONSIBILITIES NOTICE

Appointment Cancellation & Late Arrivals

If you are unable to make it to your appointment, please call the office to let us know 48 hours prior to your scheduled appointment so that we may offer that time to another patient. **Failure to notify us 24 hours in advance may result in a \$35.00 missed appointment fee. Missed appointments are subject to a prepayment charge prior to rescheduling.**

If you are more than 15 minutes late to your scheduled appointment, we will make every effort to work you back into the doctor's schedule. However, we may have no choice but to reschedule your appointment.

Insurance & Patient Responsibility for the Bill

Our office contracts with or accepts most medical insurance plans and several vision discount plans (e.g. VSP, EyeMed, Community Eye Care). With the ever-changing healthcare industry, we want to make sure every patient is aware of our insurance and billing policies.

All patients receiving services from IdealEyes are financially responsible for the timely payment of all charges incurred. For those patients wanting to use their insurance benefits, IdealEyes will submit the bill to the patient's insurance company first for payment and only collect amounts for verified copays, deductibles and non-covered services from the patient at the time of service.

It is your responsibility to know the terms and limitations of your policies. Failure to provide accurate and up-to-date insurance information may result in a denial of benefits and payment in-full being owed by you.

Medical insurance and vision plans are very different in their terms of service and their coverage. We are unable to determine which, if any, can be billed until after the examination is completed. When a medical condition is present (diabetes, high blood pressure, dry eyes, red eyes, allergies, etc.), it is necessary to file the claim with your major medical carrier. Vision plans do not typically cover medical problems, just as medical insurance does not cover routine glasses and contact lens exams. **We are often unable to bill your vision plan for the glasses/contact lens portion of your exam on the same day we bill your medical insurance for management of your medical eye problem.** Our office does not make these policies; they are defined by the insurance carriers themselves. For further explanation, please refer to Appendix A of this policy.

Please note; it is your responsibility to pay any copayment, coinsurance, deductible amount, or any other balance not paid by your insurance. Payment is due at the time of your exam unless other payment arrangements, such as a payment plan, have been arranged in advanced with our Business Office.

Point-of-Service Collections & Non-Covered Services

Payment for non-covered services, such as refractions or contact lens fittings, is due at the time services are rendered. **It is the patient's responsibility to advise the technician or doctor if they do not want a non-covered service before it is provided.**

All outstanding balances must be paid at the time of check-in or you will need to reschedule your appointment, unless you have pre-arranged for a payment plan with our Business Office. If you have questions about your outstanding balance, or if you are unable to provide payment prior to your exam, our Business Office will be more than happy to assist you, including setting up payment plans for eligible patients.

Refraction, Contact Lens Evaluations, Additional Fees

The refraction is a diagnostic test used to determine the amount of corrective lens power required to obtain your best vision. Results of this test are utilized for eye glass and contact lens prescriptions, or to provide measurements for the lens power inserted during cataract surgery. The information provided by the refraction helps the doctor make accurate medical decisions for your vision care. During the refraction, the doctor or technician offers you a series of lens choices to reach your best corrected vision (“better 1 or better 2”). Refractions are usually a non-covered service for most medical insurance companies. Our refraction fee is \$50. **Without the refraction, we are unable to provide you with a prescription for glasses or contact lenses.**

A contact lens evaluation is an additional exam which requires a separate fee in addition to your comprehensive eye exam fee. This fee includes taking the proper measurements of your eye to determine what lens fits you best, and follow up visits for contact lens checks during the fitting process for 60 days. **This service is required every year in order to have a valid contact lens prescription.** Contact lenses cannot be trialed, ordered or dispensed without a contact lens evaluation. Insurance rarely covers the entirety of this service. It is your responsibility to pay for these services in the event they are considered non-covered services by your insurance company.

Patients Without Insurance or Not Electing to Use Their Insurance Benefits

If you do not have medical or vision insurance, we offer a prompt-pay discount for services paid out-of-pocket if payment is made the day the services are provided. For a detailed estimate, please contact our office.

Returned Checks

There will be a \$30.00 service charge on all returned checks. Payment for returned checks and services are due upon notice of returned check and payable by cash, money order, or credit card. All subsequent payments for services and/or materials may only be taken by cash, money order, or credit card.

Collections

All balances are due at the time of service or within 30 days of the initial notification to the patient that a balance is due. Balances not paid within 90 days of the date the statement is first mailed will be referred to our collections agency and subsequently documented on your credit report. Any collection fees incurred are the patient’s responsibility.

NOTE: Accounts sent to our collection agency become public record and will show that you received treatment at our office.

Refunds for Services, Small Account Balances & Office Credits

No refund can be made on clinical procedures or services, including comprehensive eye exams, refractions, contact lens fittings, and medical office visits.

In an effort to limit trivial transactions between the practice and our patients, in general, if your balance is less than \$5.00, we will write off that balance and not bill you for it. Likewise, if we owe you less than \$5.00, unless you specifically request otherwise, we will write off these small balances. We will not write off these balances when there are outstanding insurance claims.

Refunds are made after all insurance claims have been settled. Refunds for amounts on \$50 or less will be applied as an office credit to your account. Any credit amounts that remain on your account and go unused for

12 months will be paid via check to you or your guarantor. Credits can be applied to current or future account balances owed by you or your immediate family members. Refunds for amounts exceeding \$50 will be paid via check to you or your guarantor. You can anticipate receiving your refund within two weeks of our learning that a refund is due.

Orders & Deposits - Frames, Eyeglass Lenses & Contact Lenses

Eye glass orders on which insurance is applied must be paid prior to the order being processed. A minimum deposit of 50% is required on all eye glass orders on which no insurance is being applied. The balance is due prior to the glasses being dispensed. All contact lens orders must be paid in full before they are dispensed. IdealEyes reserves the right to require payment in full for all materials prior to ordering.

All orders for glasses or contact lenses **must be picked up within 90 days of ordering. After this time, they become the property of IdealEyes** and all deposits are forfeited. Contact lenses will be returned and a restocking fee applied to the account.

Return Policy – Frames, Eyeglass Lenses & Contact Lenses

In the unlikely event you encounter problems with your glasses or contact lenses, it is imperative that we be notified within 30 days of the original dispensing date of the eye wear. Our office will work with you to correct problems you may have. An advantage of coming into our office to select frames and lenses is the knowledge of our staff. Our doctors and staff strive to make the most appropriate recommendations for your visual and lifestyle needs. Prescription eyewear is custom made for each individual. Therefore, glasses cannot be returned for a refund. Any exceptions are made on an individual basis.

Glasses Remake Policy & Frame and Lens Warranty

Frames have a warranty for **ONE YEAR** from the date of purchase. This warranty covers breakage due to manufacturer's defects, **NOT** from damage due to accidents, improper handling, abuse, or normal wear and tear. This warranty does not apply to frames that have been discontinued or purchased on clearance.

All lenses have a warranty for **60 days** from date of purchase. This warranty covers non-adapt to progressive lenses, non-adapt to lens materials, measurement errors and/or adjustment to prescription. This office will remake prescription glasses once within 60 days of pickup at no charge to the patient in cases of prescription change. Any remakes required beyond the initial remake can and will result in fees for the lenses and any treatments charged at 50% of our usual and customary fees. Before lenses will be remade, we ask all our patients to wear the glasses for at least 2 weeks without switching back and forth between their new and old glasses. It can take up to 2 weeks to adapt to any change in prescription or lens type.

Lenses with anti-glare coatings have a 1-year scratch warranty from the date of purchase. **All scratch warranties must be remade with the prescription they were originally made with.**

Appendix A

Vision Insurance vs Medical Insurance

The difference between vision insurance and medical insurance is one of the most confusing issues patients face when visiting their eye doctor. When scheduling an appointment with IdealEyes, you are usually coming in for one of two reasons; 1) your annual, routine visit or, 2) having a medical eye problem or suffer from a medical condition that requires ongoing medical care and monitoring. Knowing which insurance to use at the time of your visit can be difficult, so here is an outline to help you understand the difference between the two.

Vision Discount Plans

Please inform us if you have a vision plan, including the plan company name, before your eye exam. We participate with VSP, EyeMed and Community Eye Care vision plans.

Vision plans are for routine visits where you do not have any medical issues, problems, or diagnoses.

Comprehensive eye exams include all professional services related to the evaluation and treatment of your eye and visual health. In particular, **routine eye exams** (i.e. presenting only with symptoms of blurred vision, without any acute or chronic eye health conditions or diseases) and **refractions** (i.e. the determination of your eyeglass prescription) are usually covered by **vision insurances**, but NOT **primary health insurances**.

Most vision plans include the following benefits:

- Annual eye wellness exam
- Discounts on eyeglass frames
- Discounts on eyeglass lenses
- Discounts on contact lenses

If you are having a vision exam using your vision plan, the doctor will determine if a dilation is needed at the time of the appointment. For some, dilation may cause light sensitivity and blurry vision.

Additionally, many vision plans do not cover the contact lens fitting evaluations necessary to provide you with a contact lens prescription. Check with your plan to see if your benefits cover you once every year or once every two years. Eyeglass frames and lenses and contact lenses can usually be purchased at a discount, but not every plan has this benefit.

Medical Insurance Plans

Your medical insurance is typically used if you have an eye problem or eye disease, or if any medical condition is present that causes eye problems. Some common conditions for which we may bill your medical insurance include:

- Redness
- Eye floaters
- Allergies
- Dryness
- Infections
- Monitoring cataract development
- Examination of patients having diabetes
- Examination of patients using medications with potential eye side effects, such as steroid medications, arthritis medications, etc.

- Patients that are at high risk for glaucoma development
- Patients with macular degeneration

Unfortunately, due to policies of the insurance companies, you cannot use your vision and medical insurance for a joint exam on the same day. The only exceptions to this are those patients who have VSP Vision Insurance. Below are two possible alternatives.

1. First, we can always schedule your medical and vision visits on separate days, or we may have to bring you back for a separate visit from your annual wellness exam to treat any medical concerns. You may have to go through some repetitive parts of the exam on those days because, by law, there are certain things the eye doctor must document at every visit.
2. If you need to schedule your medical and vision visit on the same day, another option is billing your medical insurance for the medical exam (don't forget, this may include a copayment at the time of your visit), and paying the additional flat rate (\$50.00) for a refraction.

Please let us know what your primary concern is for your visit so we can help you maximize your benefits and obtain the correct insurance information.

