

VISION SOURCE™ @ Jordan Landing

Welcome to our office. We appreciate having you as a patient, and look forward to providing health care and customer service that you can be happy with. Please read the following document as it contains important information regarding your privacy, insurance coverage, examination fees, and refund/remake policies. By initialing after each paragraph, you acknowledge that you have read the paragraph and that you agree with and understand the information contained therein.

INSURANCE COVERAGE

The optometrists of Vision Source @ Jordan Landing participate as providers on a number of vision plans, including VSP, EyeMed, Superior Vision, and others; which cover the cost of one comprehensive healthy eye exam per year, and normally includes an allowance for glasses or contact lens materials. We also participate on a variety of medical insurance panels such as Blue Cross, PEHP, DMBA, United Healthcare, and others. Medical insurance often provides coverage for one healthy eye exam per year, and also includes coverage for medical eye care, including infections, injuries, allergies; and management for conditions such as cataracts, glaucoma, macular degeneration, and diabetic eye problems. If the purpose of an exam is to obtain a prescription for glasses and/or contact lenses, the exam will be billed as a healthy eye exam. Otherwise, the exam must be billed to medical insurance as an office visit. If further treatment, testing, or follow-up is required, such visits will also be billed to medical insurance. For that reason, all patients are asked to please provide a copy of their medical insurance cards. There are some insurance companies that selectively exclude optometrists from reimbursement, such as IHC's SelectHealth, as well as some others. If a patient's insurance company refuses to reimburse for services performed in this office, the patient is ultimately responsible for the charges.

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SPECTACLE POLICY

As a service to our patients, we use only the highest quality frames, spectacle lenses, and coatings. **Each frame purchased from Vision Source is protected with a 2-year warranty**, under which a broken or defective frame can be replaced at no cost to the patient. We cannot take any responsibility in any form for frames not purchased from our office. **Lenses protected with premium protective coatings (anti-scratch or anti-reflective) are also warranted for two years against normal wear & tear (scuffing/scratching), as determined by the lab** (which excludes negligent damage – caused by pets, for example). **Warranties do not cover loss**, nor do they cover scratched lenses on sun clips (unless a separate anti-scratch treatment is paid for and applied to the sun clip lenses). All spectacle lenses are first custom-crafted with each patient's prescription, and then cut specifically to fit the frame the patient has selected. For these reasons, it is not possible to cancel an order or switch a frame after the job has been sent to the lab; and cash refunds are not offered. At the doctor's discretion, patients who are not satisfied with the vision in their new glasses may have their prescription checked and lenses remade **one time** into the original frame at no cost within 90 days of the date on which the order was placed. A second visit to check the prescription within 90 days, or any visit subsequent to the 90 day window will be subject to a \$35 office visit fee. Any remake beyond the one-time doctor-redo will be done at a 50% discount to the patient. Patients unable to adjust to new progressive lenses (no-line bifocals) may have their lenses remade into a traditional bifocal or trifocal design, although the progressive upgrade fee is non-refundable. Payment is due for all spectacle orders at the time the order is placed, including lens options not covered by insurance (such as transitions, anti-reflective coatings, tints, etc). For patients who wish to purchase a second pair of glasses for themselves, a 50% discount is applied to the second pair on same-day orders paid in full. All patients will receive a copy of their prescription per the FTC's "Eyeglass Rule" (1992) unless he or she requests *not* to receive a copy.

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CONTACT LENS POLICY

The contact lens process in eye care consists of three steps. The first step is the comprehensive exam, which includes an examination of the overall health of vision and the ocular structures, as well as a refraction (determination of spectacle prescription). If you have vision/health insurance, this initial step is what the insurance company covers under its once-a-year healthy eye exam. Following this step, you will receive a copy of your spectacle prescription.

The second step is the contact lens evaluation, the purpose of which is to determine the correct material, brand, power, and fitting parameters for each patient's contact lenses, **for which there is a separate fee**. The time required for this step varies depending on the complexity of the case and the patient's experience with contact wear, and fees are tiered based on that time factor. Because *first-time* wearers require an initial fitting, in-office insertion & removal training, and additional follow-up visits to determine which lens is most compatible with the patient's lifestyle, the fee is higher. The fee is lower when little or no change is made to the



parameters of a patient's current contact lens. A detailed explanation of the fee structure is available at the front desk, and in some cases the fee is determined by the patient's own vision plan. It is always required in order to obtain a new contact lens prescription, renew an expired contact lens prescription (even when the process determines that no change is necessary in power or material to a patient's habitual contact lens), or modify an existing contact lens prescription. The evaluation fee covers follow-up visits for sixty days, after which subsequent office visits related to contact lens wear will be \$30 per visit.

Based on the findings from the comprehensive exam, the doctor will either finalize the contact lens prescription today (if a patient's current contact lens brand and power are known), dispense a trial pair of contact lenses today, or place an order (depending on whether or not the lenses are available in the office inventory) for trial lenses that will be dispensed at a later visit. Once the trial lenses are dispensed, the doctor will take measurements to finalize the power, and will also assess the fit of the contact lenses. While some contact lenses are available as disposable trials, others must be ordered from the manufacturer; which include rigid gas permeable lenses, specialty soft lenses, and hybrid lenses. Such lenses are warranted for 90 days during the fitting process. As long as the lenses are returned to the manufacturer within the allotted time period, adjustments can be made to power and material to optimize a patient's contact lens fit. If such lenses are not returned, however, the patient's account will be billed for the cost of the lenses. After the patient and the doctor are satisfied with the fit, vision, and comfort of the contact lenses, the patient will receive a copy of his/her contact lens prescription per the guidelines of the FTC's "Contact Lens Rule" (2004) unless he or she requests *not* to receive a copy.

The third step is the actual purchase of contact lenses. Each patient is welcome to purchase contact lenses from this office, or from an outside vendor. Comparisons will show that Vision Source sets contact lens prices competitively with big-box and on-line retailers. Vision Source is also able to provide valuable rebate coupons not available through other distributors.

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PUPIL DILATION

The purpose of pupil dilation is to examine the health of the internal structures of the eye, including the crystalline lens, the optic nerve, the macula, and the retina. In conjunction with other findings from the comprehensive exam, pupil dilation can aid in the diagnosis of cataracts, glaucoma, macular degeneration, and other retinal disease. The doctors of Vision Source @ Jordan Landing recommend pupil dilation for all new patients and periodically thereafter. For patients that have been diagnosed with diabetes or other conditions that may affect the health of the eye, a pupil dilation is recommended at least yearly, or more frequently if indicated.

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APPROVAL OF INFORMATION RELEASE

I authorize the following people to have access to my medical and financial information, unless I specify particulars otherwise. Meaning that the doctors and staff at Vision Source @ Jordan Landing can discuss medical conditions, treatments, insurance coverage, and fees/payments with the following:

(Name) _____ (Relation) _____
(Name) _____ (Relation) _____

- *I understand that the fees for professional services are due when services are rendered. If I am unable to make payment at this time a 15% service charge will be added to my account. Any exceptions will be made only by specific arrangements before services are rendered.*
- *I understand that I am responsible for payment of this account regardless of insurance company action, and agree to pay a monthly finance charge applied to any amount not paid after 30 days.*
- *I understand that there will be a \$20.00 returned check charge, and agree to pay all cost of collections, including 1/3 of any outstanding balance collection fee (up to 40%), plus attorney fee, if necessary, to collect any debt.*
- *I understand that my signature below verifies that I understand the information provided on this document, as well as serves as a "Signature on File", in accordance with HIPAA regulations.*

Patient Name (Please Print) _____

Signed: _____ **Date** _____