

## Eagle Valley Vision Payment Policy

1. \_\_\_\_\_ **Explanations** (and estimates) of insurance benefits are not a guarantee of payment. You are responsible for charges.
2. \_\_\_\_\_ **Proof of Insurance:** You must provide proof of valid vision and medical insurance along with a photo ID and method of payment to keep on file. If you fail to provide updated insurance information at the time of service, you will be responsible for charges. We will not file insurance after the date of service.
3. \_\_\_\_\_ **Insurance:** We are participating providers for insurance plans including Medicare, Medicaid (First Health), VSP (Vision Service Plan), EyeMed, and Blue View Vision.
4. \_\_\_\_\_ **Copays/Deductibles:** All co-pays, deductibles, overages and out of pocket expenses are due at the time of service.
5. \_\_\_\_\_ **Non-covered services:** We provide standard-of-care eye examinations. However, some insurances may consider certain services to be non-covered including but not limited to Optomap, refractions (checking prescription) etc. You are responsible for payment for these services.
6. \_\_\_\_\_ **Optical Services:** Routine eye examinations, contact lens services with no medical diagnosis or treatment and prescriptions eyeglasses or contact lenses are billed appropriately to your optical insurance.
7. \_\_\_\_\_ **Medical Services:** Medical eye examinations diagnosing, treating or discussing but not limited to dry eye, red eyes, allergies, glaucoma, cataracts sudden vision loss, retinal pathology, diabetes, etc. are billed appropriately to your medical insurance and may apply to your deductible.
8. \_\_\_\_\_ **Claims Submission:** We will submit claims electronically to your insurance company once on your behalf. If your insurance company does not pay your claim within 45 days from the date of service, you are responsible for payment.
9. \_\_\_\_\_ **Missed appointments:** Appointments not canceled or rescheduled within 24 business hours will be charged \$45.
10. \_\_\_\_\_ **Orders:** A minimum 50% deposit is due to place orders. Because prescriptions are customized, they cannot be refunded once the order has been started.

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Signature of patient or responsible party

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Date