**Davis Eye Associates OD, PA**
**Family Vision Clinic**

Thank you for choosing Davis Eye Associates and Family Vision Clinic as your eye care provider.
It is our mission to thoroughly evaluate your eyes and help you achieve and maintain your best vision possible.

## Financial Policy

**FULL PAYMENT OF PATIENT OBLIGATIONS IS DUE AT THE TIME OF SERVICE**
**WE ACCEPT: Cash, Checks, Visa, Mastercard and Debit Cards.**

We know that many people want to talk about all their health concerns at their yearly exam to save time. If the visit with the physician includes talking about current or new health medical problems, the visit will be billed to your medical insurance carrier.

Insurance

Your insurance policy is a contract between you and your insurance company. Davis Eye Associates and Family Vision Clinic are not involved in that contract. In the event that we do accept assignment of benefits please be aware that some, or perhaps all of the services provided may be non-covered services under your plan and you will be 100% responsible for these charges. It is your responsibility to:

- Ensure your providers actively participate with your insurance carrier.
- Know your benefit coverage, as well as your dependents prior to receiving services.

All co-pays are the responsibility of the patient and co-pays are due at the time services are rendered. Deductibles are the sole responsibility of the patient. In the event that your insurance coverage relates to a plan where we are not a participating provider, you will be 100% responsible for all charges incurred.
To summarize, your financial responsibility pertains to:

- Denied and Non-covered services
- Services deemed not medically necessary by your insurance company
- Co-payments, deductibles, co-insurance
- Pending claims due to lack of patient and/or guarantor information
- Non-insurance and/or out-of-network benefits
- If you fail to receive an Explanation of Benefits (EOB or EOP) from your plan within 45 days of treatment, we suggest you contact your insurance plan to determine benefits, as they may not have made payment. Payment not received in 60 days may be transitioned to patient responsibility and you will be required to make other payment arrangements.

Most Medicare plans do not cover routine eye exams for the purpose of prescribing glasses or contacts or refractions.

Collections

Any past due patient balance not paid will be turned over to a collection agency after 60 days.

Thank you for understanding our Financial Policy. Please let us know if you have any questions.
I have read and agree to this Financial Policy:

_____ x _____
Print Patient Name  Signature of patient or responsible party

Date _____