

Financial Agreement

IF YOU HAVE MEDICAL INSURANCE:

We will file claims to your medical insurance company for the services that are provided by our office. In order for the claims to process correctly, please ensure that the information provided to our office is accurate and current. If there is a change in insurance information please let us know immediately. We will submit to secondary insurance as long as we are given the correct information and authorized to do so.

Medical insurance coverage is a contract between you and your insurance company.

WE ARE NOT a party to this contract. We will not be involved in disputes between you and your insurance company regarding deductibles, co-payments, covered charges, secondary insurance, "usual and customary" charges, etc., other than to supply factual information as necessary. You are ultimately responsible for the timely payment of your account.

DEDUCTIBLES, CO-PAYMENTS, AND COINSURANCE:

Co-Payments are due at the time the service is rendered. Coinsurance and deductibles vary for each insurance policy and we can only approximate the percentage covered by each plan. Payment of the estimated portion is due at the time of service.

PROVIDER COVERAGE:

Signature

We are able to provide you with the names of insurance companies that we are "in-network" with. However, we are not responsible for ensuring that our provider is covered under your particular plan provision. Each insurance company has multiple plans. The provider may participate with the insurance company, but not your particular plan. Please contact your insurance company to verify that the provider you are seeing is appropriately covered. It is ultimately your responsibility to verify coverage for your particular plan. If the insurance company denies the claim for a plan provision, you will be responsible for the balance.

PAYMENT METHODS AND OTHER INFORMATION:

- We accept cash, check, Visa, MasterCard, American Express and Discover
- Accounts can be set up on payment plans if necessary at no additional cost.
- Accounts that are past due may be considered for and turned over to an outside collection agency and reported to the Credit Bureau.
- Accounts that have statements returned with no forwarding address will be turned over to a collection agency.

A SPECIAL NOTE: In situations of divorce, separation, court orders, etc., the party initiating treatment will be financially responsible for the account.

We are committed to providing you with the best possible care. Your clear understanding of our Financial Policy is important to our relationship. Please ask if you have any questions about our fees, Financial Policy, or your financial responsibility.

acknowledge that I have read and agree to the above Financial Policy. I authorize Ophthalmic Associates to release medical formation necessary to process my insurance claims. I also authorize payment to Ophthalmic Associates for medical/vision ervices.	

Date