

Financial Policy

Thank you for choosing Washington Pacific Eye Associates (WPEA) for your eye care needs. Please read and sign the policy below and ask our staff any questions you may have.

Consent for Treatment: I authorize Washington Pacific Eye Associates (WPEA) to provide medical care to myself and/or my dependent.

Financial Responsibility: I understand that I am financially responsible for services rendered and products ordered at WPEA. If my insurance can't be verified at the time of service, I will pay in full for all services and products.

Insurance Policy: Your insurance policy is a contract between you and your insurance carrier. You are responsible for providing WPEA with accurate insurance information at the time of service. WPEA may quote insurance benefits as a courtesy; however, a quote does not constitute guarantee of coverage or payment from your insurance carrier.

Missed Appointments Fees: I understand that if I miss an appointment or give less than 24 hours notice to cancel or reschedule an appointment a \$75 fee will apply.

Returned Checks: Any check returned to our office from the bank will result in a \$30 fee.

Collection Fees: Patient accounts which have not been paid by the patient for more than 90 days after the first billing cycle may be referred to an outside collection agency. If my account is referred to a collection agency, I agree to pay all costs (attorney fees, collection agency fees, etc.) in addition the outstanding balance owed to WPEA.

Refractions: A refraction is the measurement of the focusing characteristic of an eye; it determines the set of lenses that will best focus the light entering the eye. The results of a refraction are used to: determine the health and visual potential of an eye (cataract surgery), aid in performing tests (visual fields) and to prescribe glasses and contact lenses.

Refractions are considered a non-medical service by most medical insurance carriers (Medicare) and therefore deemed a non-covered service. If your insurance carrier does not cover refractions, the fee is \$80 and due at the time of service if performed as part of your care.

In the event a glasses prescription needs to be modified, WPEA will provide one recheck within 90 days of the original refraction.

Contact Lens Evaluation: To prescribe contact lenses, additional testing must be completed to evaluate the effect contact lenses have on your overall eye health. Contact lens evaluations are not part of a routine eye exam. If your insurance carrier does not cover the cost, you are responsible for paying the evaluation fee at the time of service. Please see WPEA's Contact Lens Evaluation Policy for more detailed information and pricing.

I have read, understand and agree with the Financial Policy above as outlined above by Washington Pacific Eye Associates.

Date:_____

Patient Signature (or patient representative if under 18)

Patient Name (please print)



Missed Appointment Policy

Washington Pacific Eye Associates tries hard to maintain our schedule so that all our patients can be evaluated promptly. Cancelling with short notice, showing up late or simply not showing up is very disruptive for our schedule and unfair to our patients who value prompt appointments.

If an appointment is missed or less than 24 hours notice is given to cancel or reschedule an appointment a \$75 fee will be charged.

I have read, understand and agree with the Missed Appointment Policy above as outlined above by Washington Pacific Eye Associates.

_____ Date:_____

Patient Signature (or patient representative if under 18)

Patient Name (please print)