



Eyes of Texas Vision Care

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Insurance Policy and Acknowledgement

Most Individuals have medical insurance and/or a vision plan. They are very different in terms of the services they cover and for you to understand these differences.

Vision Benefit Plan

A vision benefit plan (VSP, EyeMed, Superior, etc.) is a plan to determine a prescription for glasses or contact lenses and will help towards payment of these materials depending on your plan. It is not designated for payment towards a diagnosis or treatment of medical eye conditions. Vision benefit plans do allow for screenings of eye diseases, if there are no signs or symptoms or complaints or previous history of problems. If, however, there are complaints, signs, symptoms of a previous eye disorder diagnosis then your vision benefit plans do not cover the exam and medical insurance is then utilized. Insurance carriers define the rules and all eye care providers are legally required to follow them. If no medical insurance is available these medical eye exams will be subject to the medical fees set by Eyes of Texas Vision Care.

Medical Insurance

Any medical condition, signs or symptoms (diabetes, conjunctivitis, dry eye, allergic eyes, floaters, hypertension, retinal disorder, glaucoma, blepharitis, cataracts, etc.) that are presented, we as your eye care provider are required by law to bill the exam office visit fees with your major medical carrier, such as Aetna, BlueCross BlueShield, Cigna, United Healthcare, etc. Medical conditions are not billed to your vision plan. A co-pay, co-insurance, deductible and fee for non-covered services from your medical health insurance will be collected as required by law. Our fee is determined by your insurance carrier and the allowable charge and appropriate discounts will be given when the insurance carrier adjudicates your claim.

In most situations, there is no way of knowing prior to the exam which type of insurance our office is to file. We will make every effort to determine this information for you and are happy to file the claim on your behalf. We will make every effort to collect from your insurance carrier, however you are responsible for payment of your fees in full.

We are required by law to collect any deductible, co-insurance and co-pay amounts and will do that at the time of your visit.

I understand that I am responsible for the co-pay, deductible, co-insurance and non-covered services and Eyes of Texas Vision Care accepts the charge as the full charge as determined by the insurance carrier.

I understand the information above and authorize Eyes of Texas Vision Care to file my insurance and/or vision benefit plan in accordance to the above guidelines.

Signature

Date
