

Southlake Vision Associates

1251 E Southlake Blvd., Suite 331
Southlake, TX 76092
(817) 310-0289 · (817) 310-0684 Fax

INSURANCE VERIFICATION

If you will be using insurance, we bill them as a courtesy to you, our patient. We do want to remind you that all patients are fully responsible for payment accounts, and that we do not render services on the basis that insurance companies will pay any and all fees. As a courtesy to our patients, we try to give an ESTIMATE of what insurance will pay for services from information we receive from your insurance representative, but in no way are we responsible nor ever guarantee payment from any insurance company. Please remember that your insurance policy is your responsibility. It is a contract between you and your insurance company/ employer, not the Doctor.

VISION & MEDICAL INSURANCE

We often have patients that have both vision and medical insurance. They are very different in terms of the services they cover, and it's important for our patients to understand those differences. Vision insurance covers routine examinations for the determination of a prescription for glasses and contact lenses. When a medical diagnosis or condition is present such as diabetes, eye infections, ocular allergies, etc., it is necessary to file the visit with your major medical carrier, as vision insurance will not cover the diagnosis and treatment of any conditions other than near-sightedness, far-sightedness, astigmatism, or presbyopia. These criteria are established by insurance companies, not our office. We are medically obligated to provide a comprehensive examination to determine not only if there is a need for an eyeglass prescription, but also to determine if there are any underlying health issues. There is no way to know prior to the examination which type of insurance our office will need to file for you. In the event that we do not take your insurance, we will provide you with an itemized receipt so that you may submit it to your carrier for reimbursement. If after 90 days your insurance company has not paid the claim, the balance will become your responsibility. We can also provide an itemized receipt for you to file with the insurance company if needed.

I have read, understand, and agree to the above policies.

Print Name

Signature

Date