

# MACK EYE CENTER

## FINANCIAL AGREEMENT

- Payment is expected at the time that services are rendered, unless special arrangements are made in advance. If our doctor is a participating physician for your primary insurance plan, payment for any deductibles, co-pay amounts and non-covered services will be due at the time of service.

\_\_\_\_\_ Initial

*Aetna Better Health Patients*: Please note that although we do participate in ABH we do NOT participate in March, the vision plan that covers routine exams. If your exam is ruled as routine by ABH the responsibility will fall to the patient.

- Eye examinations, or certain other ophthalmic services, are not always covered by every insurance company. Even within the same insurance plan there may be many individual variations. It is your responsibility to know whether or not your insurance plan will cover the services that you receive in our office. It is simply not possible for the staff of this office to know how each and every individual insurance plan works. If your plan requires you to have a referral to see a specialist please be sure to bring a current referral with you to your visit. It is your responsibility to be sure a current valid referral is on file for your visit.

- A refraction (a test used to measure the refractive error of your eyes by either the doctor, or one of the ophthalmology technicians) is typically not a covered benefit of your insurance plan. In the course of your examination, when it is necessary to perform refraction, it is with the understanding that you will be held financially responsible for this charge. If you do not want this test performed please inform the technician at the beginning of your exam. \_\_\_\_\_ Initial

- This office accepts assignment for Medicare patients. However, each patient is responsible for payment of all non-covered costs. Examples of non-covered Medicare services would be: the refraction for glasses that is part of almost every comprehensive eye examination, the annual Medicare deductible, and any remaining balance of Medicare allowable fees not covered by a supplemental insurance plan. It is important to understand that when a participating physician accepts assignment from Medicare, it does not mean that whatever Medicare pays is to be considered payment in full. Medicare has never paid 100% of any charge. Many other insurance companies follow this same basic philosophy.

- We make every attempt to confirm appointments; however, it is your responsibility to remember your appointment. In order to service the needs of all of our patients we require 24 hours notice for cancellations. There will be a \$50 charge for appointments not cancelled 24 hours prior to the appointment and for no-show appointments. \_\_\_\_\_ Initial

- By signing below, I agree to the above terms and I agree to pay any collection costs and/or reasonable attorney's fees, if a delinquent balance is placed with a collection agency and/or attorney for collection, or suit. A minimum charge of \$10 will be added to any account sent to the collection agency for collections and a charge of up to 50% of charges will be added to any account that is sent for more aggressive collections by the agency.

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## ASSIGNMENT OF BENEFITS

I hereby assign all medical and/or surgical benefits, to include major medical benefits to which I am entitled, including Medicare, private insurance, and any other health plan to Mack Eye Center. This assignment will remain in effect until revoked by me in writing. A photocopy of this assignment is to be considered as valid as the original. I understand that I am financially responsible for all charges, whether or not these charges are paid by my medical insurance. I hereby authorize Mack Eye Center to release any and all information necessary to secure payment.

Name Printed : \_\_\_\_\_ Relationship to patient: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_