

SIGNATURE ON FILE

This Notice Describes Your Financial Obligations. PLEASE REVIEW IT CAREFULLY.

There are two types of health insurance that will help pay for your eye care services and products. You may have both and our practice accepts both:

- 1. Vision care plans (such as VSP and Superior)
- 2. Medical insurance (such as Blue Cross/Blue Shield and Medicare).
 - Vision care plans only cover routine vision exams along with eyeglasses and contact lenses. Vision plans only cover a basic screening for eye disease. They do not cover diagnosis, management or treatment of eye diseases.
 - Medical insurance must be used if you have any eye health problem or systemic health problem that has ocular complications. Your doctor will determine if these conditions apply to you, but some are determined by your case history.
 - If you have both types of insurance plans, it may be necessary for us to bill some services to one plan and other services to the other. We will use coordination of benefits to do this properly and to minimize your out-of-pocket expense.

As a courtesy, we obtain your benefits and eligibility with your insurance company. ANY BENEFITS THE COMPANY QUOTES TO US ARE NOT GUARANTEED and coverage will be decided by your insurance company after the claim has been filed. Therefore, all bills must be paid on the day of service and we will file only insurances presented on the day of your appointment. NO CLAIMS WILL BE RETROFILED.

By signing below, I give consent to Triad Eye Center to file my insurance. I agree to pay all costs incurred that my

insurance does not cover.	
Signature	Date
If you are signing as a personal representative o your authority to sign this form (ie legal guardian	f the patient, describe your relationship to the patient and the source o , power of attorney, etc):
Relationship to Patient	Print Name
Source of Authority	