



LEE VISION
ASSOCIATES

Financial Agreement & Policies

INSURANCE

We participate with many different insurance plans. If we accept your insurance, we will submit your claim to your insurance company for payment. Any balance due that is not covered by your insurance plan is your responsibility.

Since coverage and benefits are specific to each patient's plan, it is ultimately your responsibility to know what your insurance does and does not cover, if you need prior authorization, or if you need a referral. Although we will do our very best to assist, questions about your insurance plan may have to be directed to your insurance company.

DIFFERENCE BETWEEN VISION & MEDICAL INSURANCE

An ophthalmology practice is unique in that it accepts both vision and medical insurance. The insurance used for your appointment will depend on the primary reason for your appointment. Vision insurance is used for routine eye exams, which is a "well visit" for your eyes, while medical insurance is used when you have a medical eye complaint such as redness or an eye disease such as glaucoma.

CHANGES IN INSURANCE

If your insurance plan changes, please notify us immediately so we can correctly submit your claim. Incorrect insurance information can result in denial of claims.

CO-PAYMENTS & DEDUCTIBLES

All co-payments are collected at the time of service. Any deductible or coinsurance amounts will be billed to you after your insurance company processes the claim for your visit.

NON-COVERED SERVICES

Not all tests and procedures are covered by your insurance plan. Payment for all non-covered services is the patient's responsibility.

REFERRALS

Depending on your insurance plan, you may need to obtain a referral from your primary care physician for your appointment. Quite often, your primary care provider can send the referral directly to our office at your request. If we do not have the referral by the time of your appointment, we will be unable to bill your insurance and may have to reschedule your visit.

SELF PAY

Patients who choose to self-pay for their services must do so in full at the time of their appointment. Payments for surgical procedures are due prior to the surgery date.

PAST DUE PAYMENTS

Patients with past due balances from a prior appointment or procedure will be asked to pay in full at the time of their new appointment. If you are unable to make payment on past due balance, your appointment may have to be rescheduled.



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Patients whose accounts are past due for 90 days or more may have their accounts referred to our collection process and/or agency.

ACCEPTED FORMS OF PAYMENT

We accept cash, check, and all major credit cards.

MISSED APPOINTMENTS

If you need to cancel or reschedule your appointment, please notify us at least 24 hours in advance. Repeated failure to provide 24 hours' notice may result in a non-refundable deposit prior to scheduling your next appointment.

I have read and understand the Financial Agreement & Policies as outlined above. I agree that in return for the services provided to me, I hereby irrevocably assign to Lee Vision Associates, LLC and Stephen Y. Lee, MD any benefits of any type under any policy of insurance that may be applicable. If copayments, deductibles, and/or coinsurance payments are designated by my insurance company or health plan, I agree to pay them to Lee Vision Associates, LLC. However, I understand that I, as the patient, am primarily responsible for payment of my bill for all services rendered by Lee Vision Associates, LLC.

First-time patients will be asked to sign this form electronically upon check-in for their appointment.