

Financial Policy

South Campus: Telephone (603) 228-1104 Hospital Campus: Telephone: (603) 224-2020

The physicians and staff at Concord Eye Center are dedicated to meeting the needs of our patients. Please review our financial policy and your specific insurance plan to determine what your financial and referral responsibilities are as a patient of a specialty eye practice. Our staff is available to answer your questions. However, we cannot know specific coverage information for all insurance plans.

INSURANCE COVERAGE

Our specialty eye practice participates with Medicare, Medicaid, some Medicaid HMO's and most insurance plans. Please have your specific insurance plan information ready for us when you arrive for your first appointment.

- Does your plan cover annual Routine Vision exams? We do not participate with all visions plans. Therefore, please check with your vision coverage to see if we are in the network.
- Does your insurance require a referral to be seen here?
- We will submit claims to both your primary and secondary insurance carriers.
- All insurance information will be reviewed at each appointment. Therefore, please bring your insurance cards
 with you. It is your responsibility to update our records anytime your insurance coverage changes.

CO-PAYMENTS AND NON-COVERED CHARGES

- <u>CO-PAYS AND DEDUCTIBLES</u>: If your insurance plan has assigned you a CO-PAY amount, that amount and payment of all non-covered services are due at the time of service. If your insurance plan requires you to meet an annual deductible, you will be responsible for payment in full on the date of service until you have met your deductible.
- MEDICARE B: Each calendar year, you will be responsible for payment-in-full on the date of your service until you have met the annual Medicare Part B deductible. After that time, you will be responsible for 20% of covered services at each visit unless you have secondary insurance to Medicare B. Please let us know this at your first visit.
- NON-COVERED: Some services may not be covered by your insurance. Examples of non-covered services include but are not limited to refractions, contact lens evaluations and contact lens products. A refraction is a procedure to determine your vision correction needs and to prescribe your lenses. This is a non-covered service by Medicare and most other insurances. Therefore, you will be responsible for payment when this service is provided.

INSURANCE REFERRALS - A PATIENT RESPONSIBILITY

Concord Eye Center is a specialty practice. All HMO and other Managed Care Insurance Plans require their members to secure a referral from the Primary Care Physician (PCP) listed on the member's insurance card in order to pay for services. Without a referral, you will be responsible for payment of all services denied by your Insurance Plan.

- All referrals should be received at our office in advance of your appointment.
- If you have not secured the appropriate referral at the time of your appointment we will ask that you:
 - o Call your PCP, before you are seen, to obtain the necessary information
 - Complete and sign our Waiver Form
- You may also reschedule your appointment until your Insurance Plans' referral requirements are met.

SELF-PAY OR COMMERCIAL INSURANCE PLANS

Patients who do not have insurance and/or have plans which we do not participate with are required to make full payment at the time of service. A courtesy claim can be sent to your out of network insurance upon request. We accept cash, checks, and most major credit and debit cards.

Our physicians are committed to providing for your eye care needs and our billing office can assist any patient who is experiencing financial hardship. At the time of your visit, ask to speak with a member of our billing staff, who will work with you to set up a payment plan to meet your needs.