**Patient Payment Responsibility (Vision vs Medical)**

|  |
| --- |
| Logo  Description automatically generated |
| 6656 Germantown Avenue  Philadelphia, Pa 19119  Phone: 215-842-5939 | Fax: 215-842-5937  Nec@nostalgiceyecare.com www.nostalgiceyecae.com |

Most people have vision insurance and medical insurance. While they seem similar, they are very different regarding the services they cover, and patients must understand those differences.

* Vision coverage (VSP, NVA, Eye Med, Versant, etc.) is mainly designed to determine a prescription for glasses and does not cover complex medical conditions.
* Medical coverage (Independence BlueCross, Cigna, UHC, Aetna, etc.) is filed when a medical condition is present such as diabetes, cataracts, dry eyes, floaters, etc. In this case, co-pays and deductibles for your medical insurance will apply.

Insurance carriers set these rules, and our office is required to follow them. We do our best to make sure you are aware of any out-of-pocket expenses associated with your visit. Unfortunately, in many incidences, there is no way to know before the examination which type of insurance our office will file for you.

We make every effort to be on every major carrier for your convenience, and we will file those claims for you. If we do not take your insurance, we will provide you with an itemized receipt so that you may file your carrier for reimbursement.

If you have any questions, please let us know.

I understand the paragraph above, and I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ authorize Nostalgic Eye Care to file my insurance by the above guidelines. I am aware that I am responsible for any co-payments or deductibles set in accordance with my insurance provider. I am also responsible for any treatment or testing that my insurance provider does not cover.

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