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As a courtesy, Riverdale Vision Care, P.A., will be happy to bill your insurance company for your visit with us. Please be advised that if you are using insurance coverage, this is a contract between you and your insurance company and not with Riverdale Vision Care, P.A. Please read our insurance policies and feel free to ask should you have any questions.

- **INSURANCE CARDS**: Please have your card with you so we can copy all the necessary information. This will make the billing process easier for all of us. If your insurance should change in the future, please inform the office prior to your next visit.
- **CO-PAYS**: This is a contractual obligation between you and your insurance company. It will be collected from you at the end of your visit.
- **DEDUCTIBLES/COINSURANCES**: Some insurance plans require that deductibles be met before they pay for your visit. Other insurances may pay only a portion of your visit, requiring you to pay your portion. If we are aware ahead of time that you have a deductible or coinsurance under your insurance plan, we will require you to leave a credit card on file. Your credit card would then be charged any balances that your insurance claims are your responsibility.
- **REFERRALS**: Optometrists are considered specialists. Some insurance plans requires referrals for visits that are not routine in nature, i.e. itchy red eyes, an injury to your eye(s), seeing light flashes or floaters, and so on. If possible, obtain multiple visits in your referral so you do not have to repeat this process if we need to see you more than once. If a referral has not been obtained and the claim is denied, you will be responsible for payment in full. You are responsible to know if your plan requires a referral.

There are many insurance companies and many plans within insurance companies. Therefore, it is in your best interest to verify your benefits. Know your deductible amounts and confirm that Riverdale Vision Care, P.A. or rendering provider is listed on your insurance company's provider list. Many vision programs do not issue their own insurance cards so it is crucial that you are aware of your vision program prior to your visit as your health insurance card will not inform us of separate vision programs.

FINANCIAL POLICY:

Please be advised, if your insurance company does not reimburse our office within 90 days, you are responsible for providing payment in full to Riverdale Vision Care, P.A. All sales are final. Accounts 30 days past due are charged a **3.75% monthly finance charge** which accumulates monthly if unpaid. The responsible party shall be liable for all collection costs.

NOTICE OF THIRD PARTY COLLECTIONS FOR PAST DUE ACCOUNTS:

I understand if I have an unpaid balance to Riverdale Vision Care, P.A. and do not make satisfactory payment arrangements, my account will be placed with an external collection agency (90 days past due). I understand that I am financially responsible for all bills incurred while under the care of Riverdale Vision Care, P.A. In the event that my account is not paid in full and I am forwarded to collection agency, I understand that I shall be held liable for **any and all** cost of collections, including a **collection fee** (defined by the balance of the bill due divided by 0.75).

In order for Riverdale Vision Care, P.A. or their designated external collection agency to service my account, and where not prohibited by applicable law, I agree that Riverdale Vision Care, P.A. and the designated external collection agency are authorized to contact me by telephone, email, or via mail.

Our staff will be happy to assist you through any of the processes listed above. We make every effort to obtain accurate insurance information prior to your visit. However, you are required to understand your insurance plan and benefits. We understand that insurance policies and programs can be quite confusing. Your patience and understanding will be greatly appreciated in helping to resolve any problems.