**Office Policies**

1. **Financial Policy**
   1. Payment for all professional services is due at the time the services are provided.
   2. We submit insurance claims as a courtesy to you. All copayments and non-covered services are due at the time of the appointment. All benefits quoted are not a guarantee of payment by your insurance company and final determination can only be made when the claim is processed.
      1. *Vision Insurance* plans cover routine vision exams along with a portion of eyeglasses and/or contact lenses. Vision plans only cover a routine eye exam. They do not cover diagnosis, management or treatment of eye diseases.
      2. *Medical Insurance* must be used if you have any eye health problem or systemic health problem that has ocular complications.
   3. It is your responsibility to provide Blink Vision Center with your current insurance card at the time services are rendered. If you provide incorrect or expired insurance information, you will assume full financial responsibility for all charges incurred.
   4. Some HMO insurance companies require a referral from your primary care doctor before services are rendered. It is your responsibility to obtain a valid referral. If you do not have a referral, and your insurance company denies the claim, you will be financially responsible for all charges incurred.
   5. **Assignment of Benefits**: I hereby authorize my insurance benefits be paid directly to Lindsey Alexander O.D., P.A., realizing I am responsible to pay all non-covered services and I hereby authorize the release of pertinent medical information to insurance carriers and/or specialists referred by the physician.

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Signature of Responsible Party

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Printed name of Responsible Party

1. **Refraction Services and Fees**  
   Refraction is a test to determine how well your vision can be corrected and your overall visual function. It is an essential part of an eye exam and necessary to write a prescription for glasses and contact lenses. Most medical insurance plans, including Medicare, do NOT cover routine refractions. The refraction fee at Blink Vision Center is $45.00.
2. **Contact Lens Exam Policy**  
   Contact lens evaluations require additional procedures and fees that are not part of a routine eye exam. A contact lens evaluation includes initial fit, all disposable trial lenses and follow-up care for one month. Any visit after that will incur an additional charge. Professional services or contact lenses purchased elsewhere are non-refundable regardless of successful fit. Unopened, not expired and unmarked contact lenses may be returned for credit or exchanged if purchased at Blink Vision Center.
3. **Eyewear Policy**
   1. We require a 50% deposit on all orders. The balance must be paid before eyewear is dispensed. Prescription glasses and contact lenses are special order items and once ordered, cannot be cancelled. Our office staff will do everything we can to ensure you are pleased with your eyewear; however; due to the time involved and custom nature of your new eyewear, **all sales are final**. If you have any concerns with your new eyewear, please contact our office within 45 days.
   2. Frames – If your frame breaks under normal wearing conditions, we will repair or replace them free of charge *one time only* for *one year from the date of purchase*. All parts must be accounted for and please do not use glue to attempt to repair them yourself. **\*\*The use of glue will void the warranty.\*\*** We do not cover loss, theft or abuse.
   3. Lenses – Our lens treatments provide the most reliable and durable surface protection available. However, any lens can scratch or break. With our warranty, your lenses can be replaced due to scratches or coating defects once within one year of purchase. Lens replacement must be the original prescription and you must surrender the defective pair.
   4. Providing your own frames – We will be happy to make prescription lenses if you choose to bring your own frames. Due to unknown history of the frame, Blink Vision Center is not responsible for any damages that may occur during shipping or lens insertion. Blink Vision Center is not liable if the frame gets lost in the mail or by the lab.
4. **Missed Appointments**We understand there are times when you must miss an appointment due to emergencies or obligation for work or family. However, when you do not call to cancel an appointment, you may be preventing another patient from getting much needed treatment. Please be courteous and call Blink Vision Center promptly if you are unable to show up for an appointment. All confirmed appointments that are missed will be charged a $25.00 missed appointment fee.

**EYEGLASS WARNING**: Standard plastic and glass lenses can shatter in high impact situations and can cause damage to your face or eyes. We always recommend impact resistant lenses such as polycarbonate or trivex.

**I have read and understand Blink Vision Center’s entire policy as stated above and I agree to its terms. I also agree that such terms may be amended by Blink Vision Center at any time.**

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