#### North Ridgeville Eye Care: A Member of Vision Source 7079 Avon Belden Rd N. Ridgeville, OH 44039

# HIPAA (Health Insurance Portability and Accountability Act of 1996) Privacy Rules Acknowledgement of Receipt

I acknowledge that I have been presented with the Notice of Privacy Policy of North Ridgeville Eye Care and have been offered a copy of such policy to keep for my records.

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Signature of patient (or parent/guardian if under 18) Date

# **Policies**

# **Contact Lens Wearers Agreement:**

Contact lenses are medical devices approved and regulated by the FDA. They can only be dispensed by prescription. They must be regarded with the same caution you would use for prescription drugs. This includes prescription expiration dates and follow-up visits with your optometrist. Progress visits or follow-ups may be required before finalizing the contact lens prescription. If you are experiencing any fitting problems with the contact lenses, schedule a follow-up immediately. All fitting evaluations and follow-ups are included in the exam fee for up to 60 days. After 60 days, there will be an office fee for the visit. Any red eye condition is considered a medical office visit and does not fall under the contact lens fitting or follow-ups. By state law contact lens prescriptions are valid for 12 months and therefore require annual examinations.

Your eyes go through gradual changes in size, shape, and physiological requirements (such as oxygen), and this can change the fit of the contact lenses and affect corneal health. By accepting this agreement, you understand the importance of providing the proper management and replacement of the contact lenses as recommended by the FDA.

#### **Professional Services (Eye exams and evaluations) Agreement:**

As with all professional services, there are no refunds on professional fees. The doctor and staff time cannot be refunded. Patients are financially responsible for all services provided. If vision or medical insurance is involved, patients are financially responsible for all deductibles, copays, and non-covered services. If an insurance authorization is not obtainable, or a claim is denied/not paid within 30 days of submission, patients are financially responsible for the services provided and will be billed appropriately. Non-payment of billed services will be submitted for further action.