



## **Private Pay Policy**

Our fee for consultation with a retina physician is \$250. This includes the examination, OCT, and retinal photos.

After consultation, the physician may determine that additional tests are necessary. These may include fluorescein angiography, ultrasound, etc. Upon review of these tests, a treatment plan may be proposed which may include laser, injections, freezing, medications, ordering surgery, etc. <u>These tests, procedures, medications, and surgery are billed separately and are not included in the consultation fee.</u> Please ask about the cost of these tests and procedures BEFORE you agree to have them.

If the patient agrees to have tests and procedures and/or surgery, they are financially responsible for these services. If you obtain MediCal coverage with retro-active coverage, you are responsible to notify us to bill any now covered services within one year from the date of service. We will refund any amounts that you previously paid when we receive payment from MediCal.

Our private pay rates are only available to those patients that do not have active insurance coverage. If you have insurance, and do not want to use your insurance coverage, please let us know. We can discuss this option with you.

I have read and understand the above policies:

Signature of Responsible Party

Date

Printed Name of Responsible Party

Patient Name if Other than Responsible Party