

***Understanding your insurance benefits can be tricky, but is ultimately the patient's responsibility.
We hope this information is helpful to you.***

We ask patients to understand and agree that they are personally responsible for payment of all services rendered regardless of insurance benefits or plan coverage. It is your responsibility to know if your insurance has any benefit limitations including the following: copayment, co-insurance, deductible requirements, prior authorization and/or referral requirements, or any out-of-network restrictions. **Please note**, even if your insurance has covered your visits in the past, that is not a guarantee that we are still an IN network provider or that you will be covered again this year, the same as you were previously. We might be shown as IN network provider for some medical plans, but that does not mean we are also an IN network provider for your routine vision plan or for vision hardware benefits.

Please review your coverage carefully and ask your vision insurance the following specific clarifying questions:

1. Do I have routine vision coverage?
 - a. If yes, what is the name of my vision plan? (For example, some Regence vision plans are billed through Regence directly, while other Regence vision plans are "farmed out" to a third party vision billing service - Vision Service Plan (VSP) who we cannot bill).
 - b. If no, see below for more information on our day of service discount.
2. Is Island Family Eyecare an IN network provider or OUT of network provider with my vision plan?
 - a. If OUT of network, what will my OUT of network coverage be?
 - i. If I can submit my own claim reimbursement, what is my out of network plan reimbursement rate?
3. What is my deductible and has it been met? How will this affect my vision plan coverage?

The most commonly asked about Out-of-Network plans that we are unable to bill on your behalf, as we do not have billing access, are listed below. If you do plan to be seen in our office, and have an out-of-network plan (or no insurance), we can offer a 10% day of service discount for appointments if you pay for your visit in full the day you are seen. After we receive payment we can often supply a form for you to submit to your insurance for your plan reimbursement, all depending on your specific plan.

- Any WA state Medicaid plan/Apple Health/Provider One as primary insurance plan
- Davis Vision
- Federal Employee Blue Vision
- EyeMed
- Vision Service Plan (VSP)
- MetLife Vision
- Cigna Vision

There are other plans we are out of network with and cannot bill, please inquire further and call your insurance to verify. If you have questions after contacting your insurance, please contact our Billing Team at billing4life@gmail.com for further assistance in navigating our insurance limitations.