



McAlester Family Eyecare

211 North 5th St • McAlester, OK 74501

(918) 426-0106 • Fax: (918) 426-0443

Dr. Andrea Mazzare, O.D. & Dr. Jeffrey Duff, O.D.

ACKNOWLEDGEMENT OF OFFICE POLICIES

- The prescription of any lens is guaranteed for 30 days from pick-up. Beyond this time period, you will be financially responsible for any changes in prescription.
- Your frame is covered by the manufacturer for one year from purchase date and only includes normal wear and tear and manufacturer defects.
- You are welcome to a copy of your prescription, which will be valid one year from the service date (and/or enough contact lenses for this allotted time), provided that you have paid for this service.
- Out of date prescriptions will not be written on a valid Rx pad. This information is included in your records.
- You may request your records at any time with written consent to obtain your medical information. Copies may incur a fee.

ACKNOWLEDGEMENT OF FINANCIAL POLICIES

This is an agreement between McAlester Family Eyecare and the Patient/Debtor named on the form. In this agreement the any version of the word “you,” means the patient/debtor. The word “account” means the account that has been established in your name to which charges are made and payments credited. The words “we,” “us,” and “our” refer to McAlester Family Eyecare. By executing this agreement, you are agreeing to pay for all services or ordered products that are received.

Monthly Statement: If you have a balance on your account, we will send you a monthly statement. It will show separately the previous balance and any new charges to the account during the month.

Payment Options if you have no insurance:

1. You may choose to pay cash, check, or credit card on the day that services are rendered
2. Payment for glasses and/or contact lenses must be paid for in full before they can be ordered.

Payment Options if you have insurance:

1. Deductibles, overages, and any out of pocket portions must be paid at the time of service by cash, check, or credit card.
2. Payment for glasses and/or contact lenses must be paid in full before they can be ordered

If this proposes a hardship for the patient, other arrangements may be made at the discretion of the office manager.

Credits: If a credit of greater than \$25 is identified on your account, you will be refunded in conjunction with your form of payment. Anything less will remain on the account to be applied to the next service.

Contact Lenses: Once contact lenses have been picked up and boxes opened, they are non-refundable. You have 15 days from the purchase date to return unopened boxes of contact lenses for a refund. Ordered contacts that have not been picked up within 15 days will be returned to the manufacturer.

Frames: Once frames have been purchased, they are **non-refundable**.

Past due accounts: If your account becomes past due, we will take necessary steps to collect this debt. If we have to refer your account to a collection agency, you agree to pay all of the collections costs which are incurred.

Patients under the age of 18: Parents or legal guardians are responsible for their child’s balances and all paperwork required.

By signing below, you authorize McAlester Family Eyecare to release any information necessary to process insurance claims, and you acknowledge that you have read and agree to the office/financial policies of McAlester Family Eyecare. McAlester Family Eyecare and/or their authorized agents have permission to contact me via my cell/home phone number fax, or email regarding my financial responsibilities:

X _____
 Patient (if under 18: Parent/Guardian Signature) _____ Date

ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES

I have received/been offered a copy of this office’s Notice of Privacy Practices.

X _____
 Patient (if under 18: Parent/Guardian Signature) _____ Date _____ Printed Name _____

FOR OFFICE USE ONLY

We attempted to obtain written acknowledgement of receipt of Notice of Privacy Practices, but acknowledgement could not be obtained because:

- Individual refused to sign Communication barriers An emergency prevented obtaining the acknowledgement
- Other (Details): _____