## **CALIFORNIA VISION AND VISAGE**

## **INSURANCE COVERAGE**

Before your first visit, please check with your insurance company to be sure that you are covered for services provided by the California Vision and Visage Medical Group. Please be prepared to pay any deductible or co-insurance fees not covered by your insurance plan.

It is difficult for the California Vision and Visage Medical Group to know what is covered by the individual managed care plans. We suggest that you contact you plan's patient care services department to check the details of your coverage since you are responsible for payment of uncovered services. If you are a member of an HMO, you must receive prior authorization from your insurer before making an appointment in order to receive insurance coverage.

Private insurance: The California Vision and Visage Medical Group accepts many kinds of health insurance; however, not all services are covered by all insurance policies. Your policy may require you to obtain a prior authorization or a second opinion before you undergo specific treatments or surgeries. We recommend that you check your medical coverage for any such requirements before your appointment, since you will be billed for any uncovered services you receive.

Medicare: We will gladly bill Medicare for your treatment. If you are a Medicare patient, you will need to pay your deductible or co-insurance charges or any other services we provide that Medicare does not cover. Federal law prohibits us from writing off such charges. You will be responsible for these charges, as well as for any other non-covered services, such as refraction (checking your new glasses prescription).

HMO & POS plans: If you belong to a health maintenance organization (HMO), you will need to obtain prior authorization from your insurance company before you make an appointment. If you do not get prior authorization for treatment before you are seen, your insurance company will likely deny coverage for any services you received at the California Vision and Visage medical office. If you belong to a point of service (POS) plan, your coverage may include an out-of-network option that allows you to be seen at our office without prior authorization; however, you will be charged a higher out-of-pocket cost for these services. If you are a POS patient and you are taking advantage of this benefit, please let us know when you register so that we can submit the proper forms to your insurance company.

If you would like additional information about the California Vision and Visage Medical Group, please call (626)810-0689. Our office is always available to help you if you have any questions about specific ophthalmic diseases and disorders, or questions about your visit.

Thank you for choosing the California Vision and Visage Medical Group.