



## CONTACT LENS FITTING & EVALUATION

\*This is only for the individual who would like to be fitted for contact lenses

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**Contact lenses are medical devices, regulated by the FDA.** This means that the doctor will evaluate the health of your corneas and the fit of your contacts every year in order to determine the optimum prescription for your eyes. The contact lens prescription is often different than a spectacle prescription. The doctor assumes much greater liability when prescribing contact lenses. Contact lens examinations are required on a yearly basis.

**All contact lens patients will be charged a contact lens fitting and evaluation fee in addition to regular exam fees.** The fee varies based upon the type of contact lenses prescribed (see below).

**Insurance companies require that we bill contact lens fitting/evaluation charges separately from your comprehensive eye examination.** In most cases, insurance companies consider contact lenses “not necessary” and they will not cover these charges.

**The services received for this fee include the fitting/refitting and evaluation for contact lenses.** The following may also be included in the fee if needed: follow-up visits with the doctor for contact lens related issues for up to 6 weeks, proper use of contact lenses, instruction for insertion and removal of contact lenses, lens care instructions, diagnostic lenses, contact lens starter solution kit, rebates (if available), and free ship-to-home service for the purchase of a one year supply of contact lenses (based on manufacturers recommendations).

**Contact Lens Evaluation:** The contact lens evaluation is *not* part of the standard eye exam. There is an additional fee for a contact lens fitting/evaluation and contact lens prescription updates. The fees below are determined based on the type of lenses you are fit with and need to be paid at the time of service. These fees are in *addition* to your regular eye exam fees.

Soft contact lenses                      \$50

RGP contact lenses                      \$60

(These fitting/evaluation fees are our usual and customary charges and may differ depending upon insurance coverage)

I understand these procedures and agree to them and to pay the contact lens fitting/evaluation fees at the time of service.

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Signature of patient

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Date