

Special Insurance Information
Please Read Carefully

Drs. Fine, Hoffman & Packer accept Medicare assignment and are providers for many different types of insurance. You are, however, responsible for knowing your insurance benefits and limitations. Please be prepared to self-pay for services rendered unless you have your insurance cards with you at the time of appointment.

Co-Pays: Payment must be made at the time of service. To meet our contractual obligations of being a provider with your insurance company, we are required to collect your co-pay at the time of service.

HMO (Health Management Organization): If you are covered under any of the following HMO insurances and you are being seen for a **medical** reason, it is your responsibility to contact your *Primary Care Physician* at least one-two weeks Prior to your appointment date to obtain a referral. If you do not have a referral, you will be asked to reschedule your appointment until your referral has been obtained. Otherwise you have the option to sign a disclaimer stating that you will be responsible for payment if a referral is not obtained.

- PACIFIC SOURCE HMO
- CIGNA HMO
- TRICARE PRIME
- OUT OF AREA HEALTH PLANS
- PROVIDENCE MEDICARE EXTRA

Oregon Health Plan (OHP/Lipa): OHP requires that you notify your Primary Care Physician (PCP) for any medical appointments. It is your responsibility to contact your PCP prior to every scheduled appointment. If you did not notify you PCP prior to your medical appointment, you will be asked to reschedule. Vision exams are only approved for persons 20 years and under every 12 months as of January of 2010.

Vision Coverage: If you have “vision benefits” available and are coming in only for a routine eye examination (glasses/contacts) you do not need to notify your PCP. If you choose to use your vision benefits you must make us aware of this distinction at the time of scheduling your appointment. Vision coverage is typically an additional benefit and is not to be confused with medical benefits. Please contact your insurance company to verify that you are eligible for your ROUTINE VISION BENEFITS.

Vision Service Plan (VSP): VSP requires that we obtain authorization prior to your visit. Please let us know if you are planning to use your vision benefits through VSP at the time of scheduling your appointment so that we may acquire proper authorization. We are providers with the Signature plan only. We **are not** providers of the VSP Choice Network (Sight for Students).

Not Providers with Insurance Companies: The following insurance companies will not pay for you to see Drs. Fine, Hoffman & Packer. If you do choose to see our doctors, you will be responsible for payment at the time of service.

CAREOREGON HEALTH PLAN
EYE CARE INTERNATIONAL
EYE CARE PLAN OF AMERICA
VETERANS ADMINISTRATION (VA)
OREGON HEALTH SYSTEMS, IN
COLE VISION

FOUNDATION HEALTH REDERAL
SRVS
GALAXXY HEALTH NETWORK
INTEGRATED HEALTH PLAN
TRUVISION
PYRAMID Today's Option
KAISER PERMANENTE (some)

USING VISION BENEFITS vs. MEDICAL BENEFITS

In the insurance world, understanding your benefits can be very confusing. What provider can you see? Is there an annual deductible to meet before you insurance will pay? Will there be a co-pay or a percentage due at the time of service? Do you need a referral from your primary care physician?

In the world of ophthalmology we, add to the confusion by asking two more questions: "Are you using vision benefits or medical benefits?" "Is your vision insurance with a different company than your medical insurance."

Drs. Fine, Hoffman & Packer are physicians and surgeons. If you have a medical complaint, your claim will be considered medical *unless* you tell us to use your vision benefits.

Why is it to your advantage to know your vision benefits vs. your medical benefits? For several reasons:

1. It ensures that your claim will be filed with the right diagnosis and the correct insurance company from the start.
2. Your vision benefits might have less out of pocket expense, perhaps no deductible, or just a co-pay at the time of service. Or vice versa with your medical benefits. Knowing your benefit package will help you make an informed decision.
3. Depending on your vision benefit package, you may be able to use it once every 12 or 24 months WITHOUT a referral from your primary care physician.

There are many options to consider and these options change with individual benefit packages. We want to help make this process as easy as possible, but we may not know your particular benefit package. Help us to help you! Know your benefits package and please let us know if you are using vision or medical benefits at the time of service.