



Peninsula Eye Physicians

Patient name: _____

D.O.B. _____

Contact Lenses Service Fee Agreement

A contact lens is a medical device that rests on the surface of the eye. It presents more risk to your eye health than just glasses, and can result in permanent damage or blindness without proper follow-up by your eye doctor. A contact lens prescription can only be determined with careful observation by your eye doctor over a series of visits. A final contact lens prescription will be released to the patient only after all prescribed follow-up visits have been completed and the doctor determines all criteria for a successful fit have been met.

Because the shape and the prescription of the eyes can change, we require an annual evaluation of the lenses on your eyes to check the fit and vision prior to renewing your prescription. See below for our fee schedule. Contact lenses evaluation/fitting fees are **non-refundable** and are due at the time of service.

I am a new patient to this office and I will return to the front desk to pay the contact lenses fit or evaluation fees at the end of the exam after the doctor determines the type of lenses I will be wearing. _____ (Initial)

Established Contact Lenses Wearer - Fees for Evaluation & Prescription Renewal

- Single Vision Spherical: **\$60**
- Single Vision Toric: **\$75**
- Multifocal/Monovision: **\$95**
- Specialty Lenses (e.g. Keratoconic/Irregular corneas/Silsoft/ Scleral/Hybrid): **\$200**

Fees cover up to 4 follow-up visits within a 3-month period.

If the type of lens recommended changes at the time of the exam, additional fees may apply.

* For select patients who have Vision Service Plan (VSP), there may be a 15% discount or a contact lenses service copayment that covers these fees.

First Time Contact Lenses Wearer – Fitting and Training Fees

- Standard Fee: **\$175**
- Specialty Lenses Fee (e.g. Keratoconic/Irregular corneas/Silsoft/Scleral/Hybrid): **\$350**

Fees cover up to 4 follow-up visits within a 3-month period.

* For select patients who have Vision Service Plan (VSP), there may be a 15% discount or a contact lenses service copayment that covers these fees.

Full payment for materials is due at the time your contact lenses are ordered and is non-refundable. We can credit your account for boxes that are in resalable condition minus **a restocking fee of \$10/box**. Opened boxes **cannot** be returned under any circumstances. Lenses that are custom ordered for you are non-refundable.

I understand that contact lens services may not be covered by my insurance. This fee is my responsibility and will be paid at the time of service.

Signature of patient, or parent/legal guardian if patient is under 18 yrs

Date