CONTACT LENS FITTINGS POLICY

Definitions:

CL NEW FIT: Patient is new to contact lens wear. Fee includes fitting, one set of trial lenses, insertion and removal training, and follow-up care for 90 days.

CL RE-FIT: Patient has previously been seen at KEC for contact lens services or has valid, documented contact lens information from a prior fitting exam. The same brand and material type must be prescribed (only power change allowed). If there is a change in brand or material type, this will be considered a NEW FIT, and the NEW FIT fee schedule will apply.

Note: Contact lens fitting fees **DO NOT include**:

- Refraction fee
- Cost of comprehensive eye exam
- Cost of contact lenses

Contact Lens Fitting Fees

Contact Lens Type	New Fit	Annual Contact Lens Exam
Basic Fitting: Soft Spherical Lenses, soft toric including high cyl, *Includes insertion and removal training, CL follow up with Dr Carver	$150.00	$80.00
Specialty Fit – Soft: Monovision, Multifocal, Multifocal Toric, Aphakia, RGP: Front Toric, Multifocal Hybrid, Scleral (EZ Fit/Dry Eye), Spherical RGP *Includes insertion and removal training, CL follow up with Dr Carver	$200.00	$90.00
Medical Fits: Keratoconus / Pellucid/ Corneal Ectasia/ s/p PKP/ Abnormal Cornea *Includes insertion and removal training and scleral follow up with technician	$600.00	$150.00

LEGAL NOTICE

By law, we cannot release a contact lens prescription unless the patient has been seen and fitted within the past year.

Payment Policy

- Fees for contact lens fitting are due at the time of the initial visit and are non-refundable.
- Insurance will not be billed unless we are informed in advance that the service is a covered benefit.
- Contact lens orders will be processed through our optical department. A down payment may be required, depending on the lens type.
- Please consult an optician for details once your fitting has been completed.

Refund Policy

- No refunds will be issued for:
  - Custom lenses - Opened boxes - Colored lenses
- If the doctor determines contact lens use should be discontinued, a full refund will be given for unopened boxes.
- No refunds will be given for:
  - Exam fees - Fitting fees - Annual contact lens checks

Acknowledgment

I have read and understand the Contact Lens Policy and my financial obligations prior to starting the contact lens fitting. All my questions have been answered, and I have received a copy of this form for my records.

Signature: _____ Date: _____ Account#:_____

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