



## Contact Lens Fitting Fee Policy

When caring for our contact lens patients at Pullman Vision Source, we begin with a complete vision and eye health examination, followed by a comprehensive contact lens fitting evaluation.

Contact lenses fall under the category of medical devices—even if worn for cosmetic reasons only—and are regulated by the Food and Drug Administration, the Federal Trade Commission, and other agencies. Washington law requires that patients go through a contact lens fitting performed by a licensed eye doctor. During our fitting process, the doctor will evaluate case history, examine the overall health of the ocular surface, determine the correct type of lenses for the specific patient, take corneal measurements, examine the physical relationship of the lens to the ocular surface and ascertain a proper fit. This evaluation ensures that our doctors can safely enhance the patient’s contact lens experience by improving health, comfort, vision, and convenience of wear. Due to these factors and the additional chair time necessary to complete them, a fitting fee is issued for our contact lens patients that is separate from the fee for the comprehensive exam.

The fitting fee is based on the expected amount of time and service required as determined by the above factors and ranges from \$150 to \$300. This fee can only be determined after completing the exam and after the patient’s needs have been discussed. The doctors can further discuss the full range of fees prior to beginning the examination should patients have any additional questions.

The determined fee covers the primary contact lens fitting and related follow-up visits to finalize the prescription within 60 days of the initial examination. Should follow-up contact lens care be needed beyond the initial 60-day period, patients will be billed another fitting fee and refraction. The cost of contact lenses is not included in the fee, nor are non-contact lens-related medical visits within the 60-day period. The patient is responsible for keeping all follow-up appointments to finalize his or her prescription.

Contact lenses will only be dispensed to patients with a valid prescription that has not surpassed its expiration date. To refill an expired prescription, a new comprehensive exam with a contact lens evaluation is required. Due to the patient-specific nature of contact lenses, returns are not accepted. Our contact lens prescriptions are valid for one year ensuring that wearers consult with their eye care professional to monitor changes in vision and eye health on an annual basis.

Contact lens fitting fees are non-refundable and due at time of service. Many insurance companies do not cover the fitting fee as they view contact lenses as elective vision correction. If a patient wishes to bill a contact lens fitting to a hardware allowance supplied under a medical insurance plan, it is up to the patient to inform Pullman Vision Source of this choice.

A written copy of the contact lens prescription will be released to the patient in accordance with federal requirements once prescription is finalized and fitting fees paid in full. It is the patient’s responsibility to ensure that all lenses purchased from another supplier meet the exact specifications (brand of lens, lens powers, base curve, diameter, etc.) prescribed by our office. We are not liable for issues or defects with contact lenses purchased from other sources or suppliers.

By signing below:

- you acknowledge that you have read, understand, and agree with our contact lens policy as stated above,
- you acknowledge that your contact lens prescription will be made available to you via the patient portal upon finalization of your contact lens fitting and payment of all contact lens fitting fees.

Patient Name (print): \_\_\_\_\_ Date: \_\_\_\_\_

Signature of patient or legal representative: \_\_\_\_\_

If signed by patient representative, state name and relationship to patient: \_\_\_\_\_