Summary of Projected Direct-Payer (i.e. without insurance) Costs for Common Services at **Sowash Optometry Group P.C.**

Please note: The price for any given service is only an estimate and the actual charges are dependent on circumstances at the time a service is rendered.

- Comprehensive Exam New Patient (Wellness); 92004 Price: \$70
 Comprehensive Exam Established Patient (Wellness); 92014 Price: \$70
 Contact Long Fitting Spherical: Sku's 12346, 12348, 12350, 123
- 3- Contact Lens Fitting Spherical; Sku's 12346, 12348, 12350, 12352, 12359 Price: \$49
- 4- Contact Lens Fitting Toric; Sku 12394 Price: \$59
- 6- Contact Lens Fitting Multifocal; Sku 12395, 12358 Price: \$69
- 7- Contact Lens Fitting Gas Perm; Sku 12354 Price: \$59
- 8- Contact Lens Fitting Monovision (soft lenses); Sku 12362 Price: \$69
- 9- Routine Optos Wellness Retinal Scanning; Sku 60027 Price: \$35
- 10- Corneal Foreign Body removal; 65222 Price: \$70
- 11- Level 3 Treatment visit (New Patient); 99203 Price: \$69.98
- 12- Level 3 Treatment visit (Established Patient); 99213 Price: \$69.98
- 13- Level 2 Treatment visit (New Patient); 99202 Price: \$69.98
- 14- Level 2 Treatment visit (Established Patient); 99212 Price: \$69.98
- 15- Level 1 Treatment visit (New Patient); 99201 Price: \$69.98
- 16- Level 1 Treatment visit (Established Patient); 99211 Price: \$69.98

Patients covered by health insurance, are strongly encouraged to consult with their health insurer to determine accurate information about their financial responsibility for any health care service provided by this office. If you are not covered by health insurance, you are strongly encouraged to contact our office manager at the office location to discuss payment options prior to receiving service from a provider in this office since posted healthcare prices may not reflect the actual amount of your responsibility.