E L M H U 0 U Т E N T T C U R G E E E R

Effective February 2013

OPHTHALMOLOGY Pricing

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The following price list represents the patient's out-of-pocket cost for the facility fee and implant cost for each of the procedures listed. Fees are identified for self-pay, Medicare and commercial insurance patients. Anesthesia fees are charged separately based on the schedule identified below. For questions on pricing or for pricing on procedures not listed below, please contact Marie Cuzzone @ mcuzzone@eosc.org or 630.758.8808.

	Self-Pay	Medicare	Commercial Insurance
Laser assisted astigmatism correction	\$775	\$775	\$775
Traditional cataract surgery			
Standard intraocular lens	\$1,150	n/a	n/a
Toric lens	\$1,525	\$375	\$525
Multi-focal lens	\$1,950	\$800	\$950
Crystalens	\$2,075	\$925	\$1,075
Cataract surgery with laser assisted astigmatism correction			
Standard intraocular lens	\$1,625	\$775	\$775
Toric lens	\$2,000	\$1,150	\$1,300
Multi-focal lens	\$2,425	\$1,575	\$1,725
Crystalens	\$2,550	\$1,700	\$1,850

Cataract patients also scheduled for laser-assisted astigmatism correction will receive pre-treatment for their cataract using the Catalys Precision Laser System.

Anesthesia fees are billed separately by *Elmhurst Anesthesia*. Times include putting the patient to sleep and transferring the patient to recovery (usually an additional 30 min). Overruns will be billed directly to the patient. 30 min \$400 | 60 min \$550 | 90 min \$700 | 120 min \$850

Payment Terms

Payment is expected in full at time of service. Elmhurst accepts cash, money orders,

certified checks, HSA credit cards, Visa, MasterCard and Discover. Financing is available through Care Credit. For more information about

CareCredit, please visit www.carecredit.com or call 800.859.9975, option 1, then 6.

