

## EXAM PRICE LIST

Exam Name	Type	Pricing
Comprehensive Eye Exam	92004 / 92014	\$185 / \$155
Limited Eye Exam	92002 / 92012	\$125 / \$105
Comprehensive Medical Exam	99204 / 99214	\$200 / \$150
Limited Medical Exam	99203 / 99213	\$135 / \$115
Brief Medical Exam	99202 / 99212	\$95 / \$65
Wellness Screen		\$20
Contact Len Exam (new wearer)	Sphere / Toric / Multifocal	\$150 / \$175 / \$250
Annual Contact Evaluation		\$45
Annual Refit or Upgrade	Sphere,Toric / Multifocal	\$75 / \$125
Ortho K (includes 1 set)	New / Annual	\$1500 / \$800
Lipiflow		\$750
Meibomian Gland Expression	Debridement / Demodex	\$40 / \$85
OCT / Photo / Visual Field		\$55 / \$75 / \$60