Professional Courtesy Fee Discount Rates and Waiver Form



Category	Diagnostic Services	Dispensing Materials	Contact Lenses	In Office OMD Surgical Servises	Therapeutic Laser Service Only
 Faculty (full & part-time, Adjunct & Emeriti) MBKU employees, residents, & their immediate family * Golden retirees**& their immediate family *† Members of the MBKU Board of Trustees, Trustee Emeriti & their immediate family *† 	100%	Cost	Less 10%	50%	50%
• MBKU Students & their immediate family * • Externship Preceptors (only)	100%	Less 40%	Less 10%	Less 40%	50%
 Friends & Family of MBKU Faculty, Employees, residents, and students Licensed health care professionals and students enrolled in a professional health care degree program † MBKU alumni & their immediate family *† Senior Citizen (65+) & Military Personnel (ID) 	Less 25%	Less 25%	None	Less 25%	Less 25%

- * Immediate family includes spouse, registered domestic partner, parents, (in-laws), and children (age limit 25).
- ** Golden Retirees (see Human Resources to ensure qualification for discount)
- † Not applicable to Family Medicine exams
- ++ Limit two pairs of eyeglasses per patient per year. Additional pairs will be at cost plus 20%.
- If you are an employee or student at MBKU, simply show your ID badge and you will receive the fee reduction.

 Monday Friday appointments are available for fee waivers.
- If you would like a fee reduction for a family member or a friend, you need to fill out the attached form and submit it for approval with the person's first and last name, their relationship to you, your first and last name (include year of graduation, program or dept). Approval must be obtained two (2) weeks prior to the rendering of services and/or ordering of materials. Fee reductions will not be honored after the service is rendered or materials are ordered.
- Fee reductions may not be used in conjunction or alternated with any type of insurance, Grant, or Value Line items.
- Only one fee reduction waiver is needed per calendar year (January-December).
- Injectables, durable medical equipment, lab studies and other consumable items will be charged at U & C less 50%. All costs will be discussed prior to treatment and billing.
- Discounts will not be applied to low vision devices.

PLEASE SUBMIT FEE WAIVER FORMS TO:

Rachel Merlos

Manager of Patient Relations

rmerlos@ketchum.edu | 714.463.7507

MARSHALL B. KETCHUM UNIVERSITY

Fee Waiver Request Form



Date:	
EMPLOYEE	
First:	Initial: Last:
Program: ☐ SCCO ☐ SPAS ☐ COP	Alumni: ☐ Yes ☐ No Year Graduated:
FAMILY / FRIEND	
First:	Initial: Last:
Relationship:	
If you are an employee or student at MBKU, si	simply show your I.D. badge and you will receive the fee reduction.

PLEASE SUBMIT FEE WAIVER FORMS TO:

Appointments are available for fee waivers are Monday - Friday.

Rachel Merlos

Manager of Patient Relations

rmerlos@ketchum.edu | 714.463.7507