

**Phone: 661.215.1006**  
**Fax#1: 661.324.1172**  
**Fax#2: 661.324.1176**

Today's Date \_\_\_\_\_

## School Eye Doctor Referral

### Student Information

Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Insurance: \_\_\_\_\_  
 Referral Reason: \_\_\_\_\_

### Referring School Information

School: \_\_\_\_\_  
 Referring Individual: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
 Authorizing Signature: \_\_\_\_\_

**PLEASE CALL 661.215.1006 TO SCHEDULE AN APPOINTMENT**

Appointment Date: \_\_\_\_\_ Appointment Time: \_\_\_\_\_

ACE is located at:

**1721 Westwind Drive, Suite B, Bakersfield, CA 93301**

*ACE proudly accepts the following insurances:*

- Kern Family Health Care
- Straight Medi-Cal
- Medicare
- Medicare/Medi-Cal (Medi-Medi)
- IMG / DHMN
- Covered California (Blue Shield)
- Anthem Blue Cross PPO (excl. Pathway & Covered CA)
- United Healthcare PPO
- Blue Shield PPO
- Cigna PPO
- Aetna PPO
- VSP Vision Care
- Envolve
- MES
- MetLife
- EyeMed
- Superior Vision

For patients with **NO INSURANCE**, ACE offers income-based sliding scale pricing.

