

Refraction Policy

A complete eye examination in our office includes a procedure called a *refraction*. This measurement lets the doctor and patient know what is the best vision that each eye is capable of and what glasses prescription, if any, would be needed to achieve that level of vision.

The fee for a refraction is always covered by routine **vision-care insurances**, such as VSP (Vision Service Plan) or MES (Medical Eye Services).

However, most **medical insurance companies including Medicare will not cover refractions** even if the patient is being seen for a medical reason. Unless you are using an insurance that we know will pay for your refraction, you will be asked to pay for this service at the time of your visit. As a courtesy we will submit a bill for the refraction to your insurance company, and any payment that we might receive will be forwarded to you.

If you wish **not to have the refraction performed**, please check the box below so you will not be responsible for the charge.

According to the general exclusions from coverage, MEDICARE stipulates:

“It is not necessary to advise a Medicare beneficiary or have an Advance Beneficiary Notice signed for services or items that are not covered (not a benefit of the program)... including procedures to determine the refractive state of the eyes.”

We strongly advise that you check with your insurance carrier in advance regarding your particular coverage. By signing our financial policy, you are acknowledging that you are responsible for all charges not covered by your insurance.

I decline to have the refraction performed during today's visit.

Date

Signature of patient or person acting on patient's behalf