

Routine Eye Exams, Medical Eye Exams, and Refractions Please Read Before Your Eye Examination

Regular eye examinations are important to maintain your vision for your lifetime. It is important that you be aware of your insurance benefits and how they apply to your visit, so you will know how billing will be handled. Ultimately, it is your responsibility to know what your own medical or vision plan covers. We hope this information will help you to understand how your visit is submitted to your insurance for today's visit and future visits with Gulfcoast Eye Care. Please be aware that not every medical insurance has a vision plan.

Benefits may vary based upon the reason for your visit. Your description of your eye condition will help us to determine whether your visit to the clinic is defined as "Routine" or "Medical". Your symptoms and eye examination will determine how your visit is coded and billed to your insurance.

Routine Eye Examinations: A "routine eye exam" takes place when you come for an eye examination without any medical eye problem, and there are *no symptoms* except for visual changes that can be corrected by eyeglasses or contact lenses. The doctor will screen your eyes for disease and other medical problems, and if no medical diagnosis is found, your glasses and contact lens prescriptions may be updated.

Medical Eye Examinations: Your visit will be coded as a "medical eye examination" whenever you are being evaluated or treated for a medical condition or symptom that you inform our staff about, or a condition that the doctor finds during the examination. Examples that will necessitate your visit being submitted to your medical insurance include headache, diabetes mellitus, eye irritation, dry eyes, allergies, floaters, contact lens intolerance, glaucoma, cataract, eye muscle imbalance, "lazy eye", macular degeneration, and others. Please note that if you have diabetes mellitus, and would like us to send a letter to your primary care physician regarding your eye examination, the visit will be coded as a "medical eye examination".

Vision Plans: If you have a vision plan, i.e. Vision Service Signature Plan (VSP), EyeMed, Spectera, etc., we need to be aware of this coverage prior to your exam to obtain an authorization from them. Vision plans cover *only* routine eye examinations. If you report symptoms during your visit related to an eye problem, disease, or injury, or your doctor determines that your problem falls under the category of a "medical eye examination"; your visit will be billed to your medical insurance instead of your vision care insurance, which will be subject to co-pays, deductibles and/or co-insurance according to your plan. If you determine that you have coverage with a vision plan after your exam has been completed, we will not bill the vision plan for you, but we will be happy to provide you with a financial printout so you may file a claim with your vision plan. Please be aware that GCEC may not participate with your vision plan.

In summary, how your eye exam will be submitted to your insurance carrier will not only depend on what you tell the doctor, but also what the doctor finds upon examination. Insurance companies frown upon our changing the way we code your examination after the fact. Remember, there are vision plans that do not cover medical exams and medical plans that do not cover routine eye care. If you have any questions, please ask a member of our staff.



What is a Refraction?

A refraction is a vision test that determines your best-corrected visual acuity with eyeglasses. This is a measurement that the doctor or technician takes with an instrument called a phoropter that holds corrective lenses in front of your eyes. While you look at the eye chart through the phoropter, the lenses are adjusted until the clearest vision is achieved. You may hear the doctor or the technician say something like, "which is better, lens one or lens two," for example.

This test is performed on your first visit with us, your annual visit, and anytime your vision decreases significantly. A refraction is a vital test to the care of your eyes because it allows for assessment of your current eye health and the detection of eye diseases. We may provide you with a prescription to update your glasses or it may be medically necessary by your insurance to determine if you qualify for certain eye procedures such as, cataract or laser eye surgery.

Will your insurance pay for a refraction?

Even though this is a vital test to the care of your eyes, a refraction is a non-covered service through Medicare, and most insurance plans. Unfortunately, they do not differentiate between "medical refractions" and refractions performed solely for the purpose of providing glasses. We are required to charge for this service regardless of whether insurance will pay.

There is a fee of \$40.00 for this test that you will be asked to pay at the time of your visit. This is a routine charge at all Medical and Surgical Ophthalmologists' offices. If you wish to forego the refraction, please inform us *BEFORE* we perform this test.

After reading both pages and by signing below, I understand the difference between routine and medical eye examinations and the potential implications of these differences on which type of insurance gets billed, and the potential for fees that may include co-pays, deductibles, and/or co-insurance. I understand that I am responsible for any of these fees that my insurance does not cover. I further understand that a refraction is an important test that I may need or chose to have performed, and if so, I will be responsible to pay for this test.

Please check one:	☐I do NOT have a vision plan	☐I do have a vision plan
Patient Signature:		Date: