

A complete eye examination in our office includes a procedure to determine the refractive state of the eyes which is referred to as a refraction. Many insurance companies do not cover refractions (procedure code 92015) even if the patient is being seen for a medical reason. We strongly suggest that you check with your insurance company regarding your particular coverage. **This is not a procedure which can be waived as it is an integral part of our diagnostic process.** As our financial policy states, all patients are responsible for any charges not covered by their insurance.

From the MEDICARE website:

“It is not necessary to advise a Medicare beneficiary or have an ABN signed for services or items that are “not covered” (not a benefit of the program). We recommend that you advise your patient about any of your items or services that are always excluded from Medicare coverage, such as routine preventive care. However, patients do not have to be advised of this in order to be held liable for full charges, even without an ABN. Some examples of items or services excluded from coverage (non-inclusive list) are:

- ***Eyeglasses or eye examinations for the purpose of prescribing, fitting, or changing eyeglasses (1 pair of glasses is covered after cataract surgery).***
- ***Procedures to determine the refractive state of the eyes.”***

Some secondary insurance carriers do cover the refractive charge; however, most follow Medicare guidelines and will not cover procedures not covered by Medicare. Again, we strongly advise that you check with your insurance carrier in advance, as patients are responsible for all charges not covered by insurance.

Date

Signature of patient or person acting on patient's behalf