

# Refraction / Routine Vision Fee Policy

Routine vision services, which includes refractions, are not covered by Medicare and many other insurances. Therefore, you may be responsible for these services when rendered. Payment for the services described below is required at the time of the office visit. Vision plans will be billed for these charges when requested and in the event the insurance considers this a non-covered service and denies payment, the patient will be responsible for the full payment and will be billed accordingly. Hung Le Eye Center participates in some vision plans for refractions. Hung Le Eye Center **does not** participate with any Routine Vision plans. Routine services include routine eye check-ups as well as the following:

**Refraction - \$50** (92015): It is the process of determining the eye's refractive error and testing for best corrected vision or need for corrective lenses (glasses and contacts). It is essential part of an eye exam to evaluate if any further visual improvement can be achieved. At times, it is medically necessary to perform a refraction to help determine the cause of visual changes. This is particularly helpful when there are multiple issues affecting the eyes and vision such as cataracts, glaucoma, and macular degeneration.

**Contact Lens Fitting - \$120 - \$250** (92310): Prescription and fitting of contact lenses. The contact lens prescription is not the same as a glasses prescription. The charge is a variable depending on the type of lenses fitted and/or prescribed (\$120 for spherical, \$150 for tonic, and \$250 for multifocal lenses). Contact lenses are not included.

By signing below, I acknowledge that I have read and understand this notice and agree to its terms and conditions. I accept full financial responsibility for the cost of these services if rendered, in case of denial of payment by my insurance plan. I further understand that payment for these services may be due at the time of my visit, in addition to any copayments, deductibles and coinsurance due for the medical portion of the exam.

Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## **Routine Vision Examination - versus - Medical Eye Examinations.**

The difference between routine vision examinations and medical eye examinations can be confusing and difficult to understand. There are, however, important differences between these two types of examinations and the differences determine how the office visit will be billed. Some plans only cover routine eye exams. Other plans will not pay for your exam unless you have a medical eye condition or disease. Some plans require a referral from your primary care physician. Be sure to check your policy(s) to determine your coverage prior to your appointment.

## **What is a Routine Eye Examination?**

Insurance companies define a routine, "Well Vision", or annual vision examination as an office visit for purpose of checking, vision, screening for disease, and/ or updating eyeglass or contact lens prescriptions - which we refer to as refractions - for people who have no eye disease or symptom of disease. If your doctor finds anything abnormal during your vision exam, further testing of a medical nature may be needed at another medical visit. Routine vision eye exams do not qualify for prescribing medications. Diabetic eye exams will fall under a medical eye exam.

## **What is Medical Eye Examination?**

This is a medically necessary comprehensive examination for the diagnosis and treatment of disease and conditions of the eye performed by a physician/ surgeon. This exam evaluates the reasons for the symptoms and assesses any treatment needed. Some conditions evaluated with medical eye exams include cataracts, glaucoma, diabetic retinopathy, macular degeneration and many other potentially sight-threatening diseases.

### **What is a Refraction (92015)?**

It is the process of determining the eye's refractive error and testing for best-corrected vision or need for corrective lenses (glasses or contacts). It is an essential part of an eye exam to evaluate if any further visual improvement can be achieved. At times, it is medically necessary to perform a refraction to help determine the cause of visual changes. This is particularly helpful when there are multiple issues affecting the eyes and vision such as cataract, glaucoma and macular degeneration.

### **Are Routine examination covered by Medicare?**

By law, Medicare does not pay routine vision exams. The exclusion policy in the Medicare Benefits Manual Chapter 16 §90 includes the statement: "The routine physical checkup applies to examinations performed without relationship to diagnosis and treatment...and examinations for the purpose of prescribing, fitting, or changing eyeglasses or contact lenses for refractive errors."

### **Are Refraction (92015) covered by Medicare?**

Refraction (CPT code 92015) is a non-covered service by Medicare. As a result, your healthcare provider is required by CMS (the department to the federal government that controls Medicare) to charge for this service. Medicare deems this service as medically **NOT** necessary.

### **Are Routine Examinations and Refractions covered by other Medical insurances?**

Most other insurance plans follow Medicare's rules. All these plans consider refraction a "Vision" service, not a "Medical" service.

### **What about my Secondary or Supplementary Insurance?**

Some commercial insurance holders and Medicare beneficiaries may have "vision benefits" that cover routine eye examinations/ refraction through their secondary or supplementary insurance. Hung Le Eye Center and doctor Hung Le, MD do not participate in routine vision plans for routine, "Well Vision" eye exams. Hung Le Eye Center and doctor Hung Le, MD do participate in some secondary or vision insurance plans for refractions.

### **What should I know about my Vision Insurance policies?**

Insurance coverage often changes from year to year, however, and it is the patient's responsibility to know what their insurance plans cover and what they do not. The patient's insurance coverage is an agreement between the policy holder and their insurance company: not between the insurance company and the clinic/ doctor.

Insurance coverage does not necessarily mean insurance "payment". Many health plans have required copayments and deductibles that must be met before they pay anything towards the patient's bill.

Vision insurance plans do not always allow the refraction to be billed on the same date as a medical eye examination. If the vision insurance will not pay for the refraction on the same day, then this service needs to be performed on a different day or the patient is responsible for payment for the vision examination component of the office visit.

### **Suggestions when filling your prescription.**

Since refraction is an inexact art in which errors may arise at any step, including from the patient, the doctor, and the optician making the eyeglasses, we suggest the following:

1. Fill your prescription at an establishment that agrees to make at least one adjustment (including changes that we make in the prescription if you are having trouble with new glasses) at no charge to you.
2. Change as few parameters - lens size, shape and material, lens company/ brand (especially with progressive add spectacles) - as possible with your new glasses to minimize risk of being uncomfortable with newly prescribed glasses.

### **What if my glasses or contact lenses don't fit well?**

Our physician will re-evaluate you at no charge within 30 days of your initial refraction to change your prescription if necessary. However, our office does not pay for revision of glasses in which good faith efforts were made in measuring and writing the prescription.