

Office Policies

Refraction Policy

It is my policy to do a refraction as a part of an initial, annual, and some post operative eye examinations. Refraction is the process of measuring a patient's refractive error (nonpathologic deficiency in the eye's optical system) and the clinical judgment to determine the optical correction needed. I am unable to accept another physician or optometrist's refraction as the basis of my clinical judgment. If it is your choice not to have a refraction done, we can refer you to another Ophthalmologist for your eye care.

1. **What is a refraction?** A refraction determines your need for corrective lenses (glasses). However, it can also detect vision loss. Sometimes this loss can be slow, progressive, and go unnoticed by the patient. The test can reveal other conditions that the patient may not detect.
2. **Why doesn't my insurance cover the refraction?** Health insurance companies including Medicare, consider the refraction to be "vision care" and unrelated to the medical reason for your visit. The separate fee for the service might be covered by your Vision/Dental Insurance Plan. You will be provided with a receipt for the refraction which you may choose to file with your Vision Plan. We do not bill for vision services.
3. **Do I have to pay for the Refraction?** Yes. The Office of the Inspector General has deemed that not charging for a provided service is an "inducement" to the patient and therefore illegal. All services performed must be billed in order to insure that some doctors are not offering incentives to patients for their patronage; which would be unfair to other doctors offering the same service.

ACKNOWLEDGEMENT

I have read the above information on Refractions, and understand that I am fully responsible for the cost of the refraction and agree to pay for the refraction at the time of service.