



Refraction Information Sheet

Effective for all refractions done from
January 1, 2018 – December 31, 2018

Refraction is the measuring of the current “refractive-error” (checking your nearsightedness, farsightedness and astigmatism). The doctor will do the refraction only when indicated. Refraction is a necessary part of a work up for many reasons including blurred vision, eye strain, cataract, and YAG evaluation. Also, refraction is necessary every couple of years so that we have an updated prescription on file for you when, and if, you should need it.

Most medical insurance companies, including **Medicare**, do not cover the refraction charge. They require that we charge it as a separate charge item, apart from the medical exam. If you have vision insurance, your insurance may cover this refraction. Insurance companies require we obtain your signature as verification that you are aware of the billing policies. The fee for refractions is **\$35.00**, and will be due at time of service.

This is an acknowledgement of a service that may or may not be performed during your evaluation. You are able to decline the refraction if you wish. A technician will inform you of the refraction before it is performed.

Printed Name: _____

I have read and understand the policy as written above. I acknowledge that if, in the case of a medical diagnosis, my insurance may not cover the refraction and agree to pay the fee of \$35.00.

Signature: _____ Date: _____

Patients Account Number: _____ (for office use)