

Refraction Notice:

Attention Proffitt Eye Center Patients

Unfortunately, Medicare and your insurance company will not cover all services that may be provided during your eye examination. The two most common of these are a routine eye exam and a charge for refraction. These will be discussed below.

What is a routine eye exam?

A routine examination is when there are no particular medical problems for your visit and you present for a checkup. If you have blurry vision, cataracts, pain in and around the eyes, dry eyes, or some other problem, you should say so as your visit may then be covered by Medicare or your insurance company. If you just need to get your glasses changed, this is not sufficient to merit a Medicare payment as well as with most insurance companies. In order for your coverage to pay for your visit, a medical problem like those mentioned above might be necessary. These are the rules of Medicare and your insurance company, not ours!

What is a refraction charge?

A refraction is a testing procedure that is done to determine whether you are nearsighted, farsighted, or have astigmatism and presbyopia, and whether glasses are necessary or need to be updated. This is an essential part of your eye examination, especially in children of all ages, from infancy to teenagers, to identify amblyopia (lazy eye), strabismus (crossed eyes), and those that have failed vision screenings at school or at the pediatrician or family practitioners offices. The refraction most importantly will determine how well you can see. If your vision cannot be corrected with glasses, you may have some form of eye abnormality. Most medical insurance companies and Medicare will not pay for refractions although as you can see above it is imperative part of a comprehensive eye examination. Be familiar with your insurance coverage as some may provide reimbursement for this service. If a refraction is performed, you will be required to pay for this service on the day of your exam.