

Understanding Your Medical Insurance and Vision Benefits Plan

There are two ways of categorizing an eye examination. Your eye examination may be defined as either “Routine” or “Medical”. The type of examination is determined by the *reason for your visit* as well as your *diagnosis* as determined by the doctor. Routine eye examinations are typically filed with **vision benefits plans** and medical eye examinations are filed with **medical insurance plans**.

Vision Benefits Plans are designed to cover routine eye examinations. A routine eye examination takes place when you come for an eye examination without any medical eye problems and there are *no symptoms* except for visual changes that can be corrected by eyeglasses or contact lenses. In addition, the doctor screens the eyes for disease and finds *no medical problems*. Also performed during the routine eye examination is a separate test called a refraction. This is a measurement the doctor uses to determine the best correction to provide your eyes with the clearest vision possible and results in the determination of your eyeglass prescription. This test can also provide the doctor with information regarding your eye health and can help the doctor detect eye diseases. Typically, vision benefits plans will cover the routine eye examination and the refraction. Examples of vision benefits plans include: Vision Service Plan (VSP), EyeMed and Superior Vision.

Medical Insurance is designed to cover medical eye examinations. Your visit will be coded as a medical eye examination whenever you are being evaluated or treated for a medical condition or symptoms that you bring up or you are being evaluated or treated for a condition that the doctor finds during the examination or has been previously diagnosed. Examples that will necessitate your visit being submitted to your medical insurance include: eye irritation, red eyes, dry eyes, floaters, double vision, vision loss, diabetes, cataracts, glaucoma, glaucoma suspect, macular degeneration, and others. This type of eye examination will be submitted to your medical insurance plan. Many of these plans do not cover a refraction (the test to determine your eyeglasses prescription) or eyeglasses.

Example: Let’s say you have both medical insurance and a separate vision benefit plan, such as Vision Service Plan (VSP). You decide to see your eye doctor for your annual exam because you would like new eyeglasses. At the end of the examination your doctor informs you that in addition to a minor prescription change you have signs of glaucoma and you are instructed to return for further tests.

Your original reason for the visit was to get an eye examination and purchase new glasses. Although your doctor discovered a diagnosis of glaucoma suspect at the end of your exam, because you did not report any symptoms or complaints as the reason for your visit this visit would be submitted to your vision insurance plan. But at the end of that examination, you will be considered a glaucoma suspect. This is now a medical diagnosis, and *any further testing you have, including your next eye examination, must be billed as a medical examination to your medical insurance plan*.

In summary, how your eye examination will be submitted to your insurance carrier will depend not only upon what you tell your doctor, but also what he doctor finds upon examination. Regular eye examinations are important to maintain your vision and eye health for your lifetime. It is important that you are aware of your insurance benefits and how they apply to your visit, so you will know how the billing for your visit will be handled. Ultimately, it is your responsibility to know the details of your individual plans. If you have any questions, please ask a member of our staff and we would be happy to help you.

I have read and understand the above information and authorize Pinnacle Eye Group to file my claim with the appropriate plan based on the reason for my visit and the results of my examination.

Patient’s Signature: _____ **Date:** _____