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Explanation of refraction

One of the most important parts of your eye exam is the refraction; the part of the exam by which we determine whether you can be helped in any way by a glasses and/or contact prescription. It is also how we determine the best possible vision and function of your eye, which is essential medical information for us to have as we assess your eyes and look for any problems. It is NOT a covered service by Medicare and many other insurance plans. These plans consider a refraction a "vision" service not a "medical" service. Our office fee for refraction is $46.00 and unless your plan automatically covers the refraction charge, this fee is collected at the time of service in addition to any co-payment your plan may require. Should your plan pay us for the refraction, we will reimburse you accordingly.

As of the end of 2020 the Federal Trade Commission (FTC) enacted a rule requiring proof of receipt by the patient that a prescription was given to them unless the refraction during the exam was declined.

I have read the above information and acknowledge that the refraction is a non-covered service. I accept full financial responsibility for the cost of this service and understand it is due at the time of service. I understand that any co-payment, coinsurance or deductible I may have are separate from and not included in the refraction fee.

Please sign below to acknowledge receipt of your prescription.

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Signature of patient/guardian/caregiver   Date

You may opt out of the refraction by signing below.

I decline the refraction service today. I understand that a technician may perform a partial refraction to assist the doctor in evaluating the health of your eyes. A full refraction will not be performed or entered into the medical record, and no prescription will be available today or in the future based on the examination today.

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Signature of patient/guardian/caregiver   Date