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Routine vs Medical Eye Exams

For over 25 years Medicare has broken an Eye Exam into two components. There is the “Refraction” (92015) portion where an Optometrist determines what the visual prescription is for glasses, and there is the “Medical” portion where the Optometrist checks the eye health. If there is a medical diagnosis such as “Cataract” or “Glaucoma,” Medicare will pay for the “Medical” portion of the visit, but Medicare has never paid for the routine “Refraction” portion of an eye exam. The patient has always been responsible for that fee.

In the past most Major Medical Insurance companies have included the Refraction as part of the complete eye exam. However, in the past few years, Blue Cross, Connecticare, Aetna, Cigna, United Healthcare and others have started to break the Eye Exam into the two separate components. If you have Routine eye exam coverage, the Refraction and the Medical portions of the visit are both paid by your insurance. If you do not have Routine eye exam coverage, we may be able to submit to your insurance for the Medical portion if there is a Medical diagnosis, **HOWEVER**, the patient is then responsible for the routine Refraction portion of the visit. The Refraction charge **IS IN ADDITION TO** any co-pay the patient may have for the Medical portion of the visit.

Thank you for your understanding,

David E. Palozej OD
Laura A. Mafuz OD
Michelle L. Reichle OD

Patient

Date