

Vision Plan vs Medical Insurance

Most people have a vision plan and medical insurance. They are very different in terms of the services they cover and it's important for our patients to understand those differences. Vision coverage (VSP, Spectera, EyeMed, Davis etc.) is mainly designed to determine a prescription for glasses and is not equipped to deal with complex medical conditions and/or diagnoses. It does allow for screenings of conditions, but once they are determined, then medical insurance is filed on those services. When a medical condition is present (such as diabetes, cataracts, dry eye, floaters, etc.) it is necessary to file the visit with your major medical carrier (BCBS, Aetna, UHC, Cigna, etc.) and the co-pays for that insurance will apply. Insurance carriers set these rules and our office is required to follow them. In most cases, there is no way to know prior to the examinations which type of insurance our office will be able to file for you.

1. If you have ANY problems or complaints that MAY be attributable to a medical condition which requires a more in-depth investigation and additional medical decision-making to rule out any underlying eye disease, we will accordingly bill your MEDICAL insurance, **NOT** your vision plan. These include, but are not limited to:

New or sudden blurry vision, Eye pain or redness, Flashes or floaters, Headaches
Dry or itchy eyes, Loss of vision, Eyestrain or double vision

2. There are a variety of systemic conditions that can profoundly and permanently affect a patient's vision that require a more in-depth investigation, which may include additional testing, follow up visits, and reports to your primary care physician. This type of examination is **NOT** covered under "vision" plans, and we will bill your MEDICAL insurance, **NOT** your vision plan. These include, but are not limited to:

Diabetes, Lupus or autoimmune disease, Hypertension, Thyroid disease
Health conditions resulting in use of high risk medications for example Plaquenil

3. If you have previously been diagnosed by another eye doctor for any eye issues that require medical decision-making, treatment, or management; we will bill your MEDICAL insurance, **NOT** your vision plan. These include, but are not limited to:

Cataracts, Macular or retinal disease, Amblyopic/lazy eye
History of eye surgery, Glaucoma/previous diagnosis of high eye pressure

We make every effort to be on every major carrier for your convenience and we will file those claims for you. In the event that we do not take your insurance we will provide you with an itemized receipt so that you may file with your carrier for reimbursement. If you have any questions, please let us know.

Contact Evaluation Fee

Contact lenses are a medical device that can cause great harm to your eye if not worn according to the prescribed schedule, solutions etc. The fee for the Dr. to prescribe the proper lens is a separate fee from your regular compressive exam. This fit includes checking the proper power, lens movement, right material and a wearing schedule to keep your eyes as healthy as possible. The fit also covers any follow up visits for up to 60 days that are related to comfort or vision from the original visit. It does not cover any infections or medical visits. This fee is non-refundable and is due at time of service.