



Refraction

The Refraction is a test that determines your need for glasses or contact lenses. This test *must* be performed in order to write an eyeglass (or contact lens) prescription for you.

The Centers for Medicare and Medicaid Services (CMS) does not pay for the refraction. Additionally, since most private insurance carriers adopt the policies of the federal government, they do not pay for the refraction either. This has been a “non-covered” service since Medicare was created.

You may not need a refraction at today’s visit. However, we are informing you about this “non-covered” charge now so that you will know about it for either today’s visit or future visits.

It is always your choice whether or not to have a refraction. If you choose not to have a refraction, please let the technician know when you are in the exam room. We will document your record and honor your request.

The current charge for a refraction is \$40.00.

I have read and understand that Medicare and most insurance companies do not cover the refraction portion of the exam and it is my responsibility to pay this fee when the refraction is performed.

Patient Signature: _____

Date: _____