

EXPLANATION OF INSURANCE BILLING

Dear Patient:

We want to inform you of our responsibility in billing you and your health insurance company for today's visit.

If you are here for a preventative exam (sometimes called an annual wellness exam, well visit or routine exam) we must clearly indicate that when we bill your insurance company. The exam code we use indicates that today's visit is for preventative health care, **not for a new or recurring or pre-existing** medical problem such as **cataracts, glaucoma, diabetes, macular degeneration, etc.** These are medical conditions and your visit will be billed as such.

If you receive care for a **new or recurring** medical problem during a preventative exam, the diagnosis codes we report to your insurance company must reflect that medical problem. We must also document care for this problem in your medical chart along with any letters written to your primary care physician or specialists to whom we may refer you if further treatment beyond our scope is determined to maintain the health of your eyes. Please note that receiving care for a medical problem during today's visit may result in different out-of-pocket expenses for you than you may expect for your preventative exam.

MEDICARE AND MEDICAID PATIENTS ARE RESPONSIBLE FOR THE \$25.00 REFRACTION FEE THAT IS NOT COVERED BY SAID INSURANCES. THIS IS THE PRESCRIPTION PART OF YOUR EXAM FOR YOUR LENSES.

Our billing department bills exactly what your doctor has reported for this visit. The billing department cannot change the codes before reporting them to your insurance company. They must reflect the services you received during your visit today.

If you have any questions, please discuss this letter in the exam room with your doctor.

Sincerely,