



OCULAR PROSTHETICS, LLC

A Simple Step-by-Step Guide to Working with Your Insurance for Your Custom Artificial Eye

Traditional (Original) Medicare

If you have the red, white and blue Medicare card, we file your claim with Medicare for you (non-assigned). Medicare sends it on to your Medigap (supplement) policy, and payment goes directly to you. The steps below are for other plans.

Medicare Advantage Plans

We are not in network with Medicare Advantage plans, and we do not file claims with or request authorizations from them. If you have one, please call your plan before your appointment to check its requirements, such as prior authorization, a one-time approval, or a network gap exception. You will then file the claim yourself for reimbursement. The steps below walk you through it.

Step 1: Call Your Insurance Company BEFORE Your Appointment

Call the customer service number on the back of your insurance card.

Important first sentence to say:

"Our provider is an out-of-network ocularist who makes custom artificial eyes. There are no other providers in the area that offer this service. Can you approve a one-time authorization, single-case agreement, or network gap exception so I can be reimbursed at the in-network level?"

Write down the answers as you talk (include the representative's name and the date/time of your call):

Insurance Company Name: _____

Call Date & Time: _____

Representative Name/call reference number: _____

Does my plan cover custom ocular prosthetics / artificial eyes under the DME benefit?

Answer: _____

Do I need prior authorization (PA) before the visit? If yes, what do you need from the provider or me?

Answer: _____

What is my deductible, copay, or coinsurance amount for DME? How much have I already met?

Answer: _____

What are my out-of-network benefits? Will you pay anything if the provider is out-of-network? (*refer to top of the page in regard to a network gap exception since no one else is in the network)

Answer: _____

Is there a timely filing deadline (how many days after service to submit the claim)?

Answer: _____

Will you send the reimbursement check directly to me?

Answer: _____

*Do I need a Certificate of Medical Necessity (CMN) from my eye doctor? (we've attached our Certificate of Medical Necessity to this document to give to your doctor)

Answer: _____

Additional notes from the call (e.g., reference number, special instructions):

*Helpful tip: Ask them to note in your file: "No in-network provider available within a reasonable distance." This often helps get better approval for rare services like ours.



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Step 2: After Your Appointment – What We Give You

- We will provide you with a Superbill (detailed receipt) that includes everything your insurance needs.
- You will receive it at your visit.

Step 3: How to File the Claim Yourself

- Make copies of your Superbill and any receipts.
- Submit the claim through your insurance portal or by mail using your plan's claim form (Original Medicare uses CMS-1490S). Your individual insurance provider may have their own form that you should be able to find on their website.
- Include the Superbill and, if requested, a short note explaining we are out-of-network with no local alternatives.
- Track your claim online and keep copies of everything you send.
- If you receive an Explanation of Benefits (EOB) that looks incorrect, call them right away — many initial denials are overturned when they understand there is truly no local provider.

Extra Tips That Help Most Patients

- Ask your regular eye doctor for a Letter of Medical Necessity if needed.
- Save all EOBs and payment records in case you need to appeal.
- You can usually use your HSA or FSA to pay us upfront.
- Financing is available through CareCredit: carecredit.com/go/699YDP
- Normal wear, loss, or patient-caused damage is not covered by our 60-day warranty.

Billing Information from Our Office

Practice Name / Provider: GB Ocular Prosthetics LLC

Our NPI Number: 1700602760

Our Tax ID (EIN): 33-1914515

Taxonomy Number: 332BC3200X

Date of Service: _____

HCPCS Procedure Codes (the code(s) for your service will be marked on your Superbill):

- V2623 – Prosthetic eye, plastic, custom
- V2624 – Polishing/resurfacing of ocular prosthesis
- V2625 – Enlargement of ocular prosthesis
- V2626 – Reduction of ocular prosthesis
- V2627 – Scleral cover shell
- V2628 – Fabrication and fitting of ocular conformer
- V2629 – Prosthetic eye, other type

Diagnosis Code(s) (ICD-10): _____

(Common examples: Z97.0 – Presence of artificial eye; Q11.1 – Anophthalmos; Z44.21 Encounter for fitting and adjustment of artificial right eye; Z44.22 Encounter for fitting and adjustment of artificial left eye)

Total Charge: \$ _____

Description of Service: _____

Additional notes or modifiers: _____

If you have any questions after speaking with your insurance, just call our office. We're happy to provide extra copies of the superbill or answer general questions. Thank you for trusting us with your care!

Questions? Call or text (864) 278-1881 • admin@gbprosthetics.com