



REFRACTION PROCEDURE POLICY

Refraction is a test to determine your best corrected visual acuity which can generate a new glass or contact lens prescription. This test may also be necessary for diagnostic purposes.

THE REASON(S) YOU WOULD WANT THIS TEST:

1. You do not see 20/20 or your vision is worse than it was on your last visit.
2. Your vision is 20/20 but you want to purchase new glasses or might want to get new glasses before your next visit.

Medicare does not cover this procedure.

(Note: Most commercial insurances follow Medicare guidelines, but the only exception is Vision insurance.)

There is a fee of \$50.00 for the test and you will receive an updated glasses prescription. If you want to update your contact lens prescription, there will be an additional fee for the Contact Lens fit.

You are under no obligation to have this refraction procedure performed. The choice is entirely yours.

I HAVE READ AND UNDERSTAND MY EYE CONSULTANTS POLICY ON A REFRACTION PROCEDURE.

Yes, I understand that *if* a refraction procedure is performed, I am responsible to pay a \$50.00 fee.

Yes, I understand that *if* a refraction procedure is performed, I am responsible to pay an additional fee for Contact Lens fit. (See Contact Lens fit pricing if necessary)

No, I do not wish to have a refraction procedure performed today.

SIGNATURE: _____

PRINT NAME: _____ **DATE:** _____