



Starting January 01, 2025

All refraction tests will be charged at time of visit. Regardless of insurance coverage.

Refraction is the process of determining the eye's refractive error, or need for corrective Spectacles (**GLASSES**). It is an essential part of an eye examination and is necessary for certain diagnoses.

Our office's Refraction fee is **\$45.00**. This fee is collected in addition to any co-payment at time of service. This fee **WILL** be submitted to your insurance company. If your insurance company covers this fee in any part; ECPS will then reimburse patients based off of how much of the fee your insurance covers. Most often insurance companies will not cover this fee in full, therefore it is the patient's responsibility.

All patients will receive a prescription every time a refraction is completed.

It will be the **PATIENTS'** responsibility for total payment which is collected at the time of visit. **If you are a Medicare patient, you MUST complete an Advanced Beneficiary Notice of NON-coverage (ABN) prior to service.** *If you wish to get a prescription for eyeglasses done today, YOU MUST HAVE A REFRACTION COMPLETED.*

ACKNOWLEDGEMENT

I have read the above information and understand that the refraction fee will be collected at the time of service and then submitted to my insurance company. If my insurance company reimburses ECPS then I will be issued a refund for the same amount that was covered by insurance. I accept full financial responsibility for the cost of this service if not covered by my insurance company. The co-payment is separate from and not included in the refraction fee. A refraction will only be done if the patient requests for it to be done or if it is medically necessary for my appointment. If I choose to decline a refraction and it is required for a diagnosis, I understand that my visit may be canceled at that point and time.

Patient Name

Date:

Patients Signature (Parent for minor)
