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Vision versus Medical Diagnosis

Many commercial medical insurance plans do not cover visits for what they consider routine eye care. Some of these plans offer “eye plans” or a “vision rider”, which we do not accept (VSP, Eyemed, etc.). Routine eye exams are visits that evaluate the health of the eye and determine if there is a need for glasses / contact lenses. Most insurance companies do not recognize a vision diagnosis (nearsightedness, farsightedness, astigmatism) as a medical condition.

Vision A routine eye examination takes place when you come in for an eye examination without any medical eye problems and there are no symptoms except for visual changes that can be corrected by eyeglasses or contact lenses. The doctor screens your eyes for disease and finds no medical problems. We will submit it to your insurance, but they may deny it or process it towards your deductible. If the insurance company denies a claim or it is processed towards your deductible, it is your responsibility to pay it. We will bill you directly.

Medical Your visit will be coded as a medical eye examination whenever you are being evaluated or treated for a medical condition or symptom you bring up, eye problems you tell our staff about, or a condition that the doctor finds during the examination. Examples include headache, diabetes, eye irritation, dry eyes, allergies, floaters, glaucoma, cataract, contact lens intolerance, eye muscle imbalance, “lazy eye”, macular degeneration, and others.

Unfortunately, we cannot tell you whether or not you will have a routine vision diagnosis or a medical diagnosis (cataracts, dry eye, glaucoma, etc.) until you are seen by Dr. Brasch. Once the exam is complete, we will submit the bill according to how the doctor coded it. We will do everything we can within coding guidelines to try to get the claim paid by your insurance company.

We recommend that you check with your insurance provider to see what their guidelines for eye exams are prior to your appointment. If you have already used your routine visit elsewhere, your insurance will not pay for another.

Patient Name

Patient Date of Birth

Patient or Parent/Guardian Signature

Date