

Medical Insurance & Vision Plans

Medical Insurance covers medical visits to the eye doctor.

Optometric Physicians are “eye specialists” whose services are covered under **Medical Insurance**.

Medical Insurance covers...

- unlimited eye exams with symptoms like burning, itching, redness, allergies, headaches, blurred vision, watering, light sensitivity, pink eye, etc.
- unlimited visits for the more serious eye conditions like cataracts, glaucoma, diabetes, macular degeneration, and eye surgery.
- high tech instrument testing outside the scope of a routine vision wellness check.

The doctor's office must file **Medical Insurance** based upon details of the eye exam, the symptoms which were presented during the eye exam, and the diagnosis made during the eye exam.

Furthermore, it is considered medical when you need the doctor to write you a prescription for a medication.

Vision Plans cover glasses & vision wellness checks.

Vision Plans are not insurance; they only cover a diagnosis of nearsightedness, farsightedness, astigmatism and/or other refractive conditions, and include the screenings pertaining to the overall health of the eye (pressure checks, disease detection, etc.). *Any other exam* outside of your vision professional's wellness check is considered medical eye care and is filed under your medical insurance. For example, the wellness check could include an air pressure test for glaucoma, but any required follow-up to that test would be filed under medical insurance.

Vision Plans...

- only covers one routine wellness eye check-up per year, that includes a *check for refraction* - to see if you need glasses or a change in prescription - and the *screenings* pertaining to the overall health of the eye.
- provide coverage of a basic eyeglass frame and basic eyeglass lenses.
- only pay for the basics, like a check for refraction and routine screenings. It does not pay for high tech eye testing or specialized eye disease testing.
- will not cover a medical prescription for an eye condition or disease.

When a Vision Plan audit is performed and it is discovered a patient's visit was not a wellness vision check-up, but rather the visit was because of something medical like redness, burning, itching, or dryness, or something more severe like cataracts, glaucoma, or diabetes, the vision plan will deny the claim and the patient will have to pay the full amount of the eye visit.

You are responsible for any co-pays, coinsurance, deductibles, and/or non-covered services.