

Routine Vision Plan vs. Medical Plan

Routine Vision Plans (VSP and Eyemed)

Vision coverage (VSP and EyeMed) is designed to determine a prescription for glasses or contacts and are not meant to be filed for complex medical conditions and/or diagnoses. It does allow for screenings of conditions, but once they are determined, then medical insurance is filed on those services.

Medical Plans (BCBS, UHC, Aetna, Cigna, etc.)

When a medical condition is present (such as diabetes, cataracts, glaucoma, dry eye, floaters, macular degeneration, etc.) it is necessary to file the visit with your major medical carrier (BCBS, Aetna, UHC, Cigna, etc) and the co-pays for that insurance will apply. Insurance carriers set these rules and our office is required to comply. In most cases, there is no way to know prior to the examination which type of insurance our office will be able to file for you. We will bill your MEDICAL insurance, NOT your vision plan, if your eye problems/complaints may be attributable to a medical condition that requires a more in depth medical investigation. Additional testing may be required to rule out any underlying eye diseases.

Examples are but not limited to:

1. New or sudden blurry vision
2. Eye pain or redness
3. Flashes or floaters
4. Headaches
5. Dry or itchy eyes
6. Loss of vision
7. Eyestrain or double vision
8. Systemic conditions such as, but not limited to, diabetes, hypertension, autoimmune disease, thyroid disease and high risk medications.

I understand the difference between a vision plan and medical insurance and I authorize Dupage Optical to file the appropriate insurance plan.

Signature _____

Date _____