

Please Note:

If the Medicaid benefit is a PCCM (top right hand corner of the Medicaid card) a referral from the patient's Primary Care Physician will be needed.

It is the patient responsibility to contact their Physician and request one. It can be faxed to Eyes of Texas at 432-550-3427 or brought with you the day of the appointment.

Thank you for your assistance in this manner so we might get reimbursed for the services we provide.

If there are any problems or questions we can help with please call 432-367-7241.

Thank you



MEDICAID PATIENTS

Your doctor visit today may consist of a two part visit.

Once the technician has taken your information as to why you are being seen today, the Optometrist/Doctor may conduct a medical exam and then a vision exam which is called "Refraction".

Part I-The Medical Examination

The Medical exam - The Optometrist/Doctor will conduct a medical exam of your eyes. He/She wants to make sure there is no medical problem with your eyes which may affect your vision. This part of the exam is covered by Medicaid only when the patient has obtained a "Referral" from your Primary Care Physician. The Eyes of Texas must have this referral the day of the exam; if no referral has been obtained then the patient will be responsible for this portion of the exam. If further examination is needed the Optometrist/Doctor will order testing procedures which should be paid by Medicaid if a referral has been obtained. The patient should always ask questions as to what is to take place during the visit.

Part II-The Refraction

The Vision exam - The Refraction, this procedure is when the Optometrist exams the eyes to determine if the patient does or does not need glasses. Medicaid patients who are under the age of twenty-one are allowed one vision exam every twelve months. Medicaid patients over twenty-one are allowed one vision exam every twenty four months. If a Medicaid patient comes in before they are eligible for vision exam the patient will be responsible for the vision exam. Contact fitting is not a covered benefit for Medicaid patients, the patient will be responsible for the \$100.00 charge on the date of service. Medicaid patients do not need a referral for a vision examination.

Any surgical procedures must be pre-authorized before being done.

If you have any questions about your visit today concerning your examination, testing, procedures, and billing, please make sure you talk to someone before your leave.

Please sign this form to confirm you have read the information provided.

Patient Signature or Responsible Party

Date