

NOTICE OF: NON-COVERED SERVICES
SIGNATURE ON FILE
HIPAA COMPLIANCE

1. Determining your glasses prescription requires something called a “refraction” that is not covered by Medicare or secondary insurances.

Your out of pocket for this service will be: \$80.00

2. Looking at the health of your eyes is a separate service that will be billed to Medicare and your secondary insurance, if you have a secondary insurance.

Your out of pocket for this service is unpredictable, depending upon many factors, including whether or not you have met your deductible. For most patients, there is no cost for this service. For a few patients, they will receive a bill that they will be responsible for, paid to Lumina. The amount of this bill, should you receive one, is not determined by Lumina, but by what Medicare and your secondary insurance have determined you owe (i.e. your share of cost).

The maximum out of pocket should your insurance calculate that you have a share of cost for this service would be: \$130.00

Again, most of the time it is ZERO cost for this service.

By signing below:

- You are accepting that you are responsible for the above fees.
- You are allowing Lumina to bill any insurance that you may have.
- You are acknowledging that Lumina abides by HIPAA privacy policy standards, set forth by the The Health Insurance Portability and Accountability Act of 1996.

Signature

Date