

Advance Beneficiary Notice (ABN)

Fall River Vision · 520 Newton St. · Fall River, MA 02721 · 508.673.2370

Date:

Patient:

Commercial Insurance:

You are receiving this notice because your insurance company may not pay for all of the services that you receive during your visit to our office.

What You Need To Do Now:

Read this notice, so that you can make an informed decision about your care.

Service	Reason Insurance May Not Pay	Estimated Cost
Fundus Photography (Retinal Photos, CPT Code: 92250)	Fundus Photography is performed to evaluate abnormalities in the fundus, follow the progress of a disease, and plan the treatment for a disease. They are also performed when the information garnered from the eye exam is insufficient to adequately assess the patient disease. The images are taken as a baseline documentation of a healthy eye or as preventative medicine screen for potential disease. Your insurance may not cover this charge when performed as a preventative screening, or when you have a deductible that has not been fulfilled.	The estimated cost is between: \$12.00 (Photo Only) – \$88.00 (Doctor Interpretation and Insurance Report [Required for Medically Necessary Exams])

_____ **YES** I want to receive these services, but do not bill my insurance carrier. I will be asked to pay for these services now as I am responsible for payment. **I cannot appeal if my insurance carrier is not billed.**

_____ **YES** I want to receive these services. If my commercial insurance carrier denies payment, I am completely responsible for payment in full. I understand that I can appeal this decision for nonpayment by my insurance carrier.

_____ **NO** I have decided not to receive these services. **I understand that in lieu of this service Dr. Posner may need to dilate my eyes.** To dilated the eyes special eye-drops are used to cause eye dilation. The drops cause the black portion at the center of your eye (iris) to widen, allowing your doctor a good view of the back of your eye. Eye dilation can help your doctor diagnose many diseases and conditions, such as: diabetes, eye tumors, high blood pressure, infectious diseases, macular degeneration, retinal detachment, vasculitis. Many diseases and conditions can be detected at their earliest stages during an eye exam. For this reason, if retinal photos are not taken as part of the eye exam Dr. Posner recommends eye dilation as part of a routine eye exam.

By signing this notice you agree to take financial responsibility for the cost of the supplies and services listed above should your insurance company deny coverage for the listed items.

Patient Signature: _____ **Date:** _____

If under 18 years of age, parent or legal guardian or responsible party's signature.