

# PREPARING FOR YOUR CATARACT EVALUATION



PLEASE READ THIS IMPORTANT INFORMATION

**Evaluation Appointment with \_\_\_\_\_, MD**

Date: \_\_\_\_\_ Time: \_\_\_\_\_ AM PM  
*(Please call 800.282.9905 if you need to reschedule or cancel.)*

- Tarpon Springs | 43309 US Hwy 19N | Tarpon Springs, FL 34689 | 800-282-9905
- Clearwater | 501 S Fort Harrison Ave | Clearwater, FL 34609 | 727-210-8811
- Spring Hill | 187 Mariner Blvd | Spring Hill, FL 34609 | 352-684-6722
- Tampa | 13303 North Dale Mabry Hwy | Tampa, FL 33618 | 813-384-3838
- St. Petersburg | 9400 9th St N (MLK) | St Petersburg, FL 33702 | 727-328-7700
- Wesley Chapel | 25232 State Road 54 | Lutz, FL 33559 | 813-953-1170

**Your journey to better vision at St. Luke’s begins with a detailed, comprehensive, dilated eye examination. Please read this information carefully for details about your cataract evaluation. We suggest you keep this booklet in a convenient location for future reference.**

## YOUR CATARACT EVALUATION

St. Luke’s Cataract & Laser Institute is synonymous with striving for the highest possible level of precision in cataract surgery. We believe that a better quality of vision means a better quality of life. Did you know that St. Luke’s routinely achieves superior clinical and surgical outcomes largely due to the preoperative tests, checks and double-checks we provide for our patients?

Our preoperative tests provide the best opportunity to achieve a new standard of care in cataract surgery for each and every patient. These tests are comprehensive and above-and-beyond what might be expected at many other eye care practices. Accomplishing so much for our patients requires an investment of your time, be prepared to be here 2-3 hours on the day of your evaluation. Our “pre-op” procedures are integral to St. Luke’s ability to provide you with the superior clinical and surgical outcomes that have become our hallmark. During your exam, your eyes will be dilated. Light sensitivity and blurred vision are normal for several hours afterward. We will be happy to provide slip-in sun shields for your glasses.

*Prior to your appointment you will be sent a link to begin your registration process. Completing this Online process will help to expedite your check-in when you arrive.*

## PLEASE NOTE

- Notify St. Luke’s at your appointment if you are **SENSITIVE TO LATEX**.
- In order for us to obtain accurate measurements for surgery, soft spherical contact lenses must be removed one week prior to your evaluation. Soft toric (astigmatism) lenses must be removed for two weeks prior to your evaluation. Hard (rigid gas permeable) contact lenses must be removed four weeks prior to your evaluation.

## PLEASE BRING WITH YOU ON THE DAY OF YOUR EVALUATION

- Your completed Medical History Form
- A list detailed list of any current medications.
- Medicare and/or any other medical insurance cards.
- Your primary care physician and any referring physician’s name and phone number.
- Prior records of any surgical eye care (if available).
- A method of payment, if applicable, for the portion of charges that will be your responsibility.
- Prescription glasses, even if not worn currently.
- The individual who helps you make medical and financial decisions.
- Legal Guardianship, Power of Attorney, and/or Health Care Surrogate information, if applicable, must be provided at the time of your preoperative examination.

## WILL YOUR INSURANCE PAY FOR IT?

### Refraction

A refraction is a necessary test done to obtain your best corrected vision. It is a critical part of the eye examination because it helps us determine the current status of your vision, and whether decreased vision is caused by eye disease (cataract, macular degeneration, etc.) or some other problem. After surgery, the refraction helps the surgeon to determine how the eye is progressing and to assess your visual improvement.

Unfortunately, Medicare, Medicaid and most commercial insurance plans do not differentiate between a “medical” refraction and a refraction performed solely for the purpose of providing glasses. A “medical” refraction will be performed and is an essential part of your cataract evaluation.

Preoperative Refraction.....\$50  
Postoperative Refractions.....\$50

### Post Refractive Testing

For patients who have undergone refractive procedures such as LASIK, PRK or RK, the standard methods for determining the intraocular lens power are less reliable. In these cases, we perform additional testing and specialized calculations using several formulas to increase the accuracy of the intraocular lens power.

Our fee for this service is \$150.00. This fee includes testing for both eyes when indicated. This fee is not covered by Medicare or insurance, and is therefore your responsibility. Your surgeon will evaluate and analyze the test results as part of your surgical plan.

Post Refractive Testing.....\$150

## INSURANCE INFORMATION

### **Medicare**

St. Luke's accepts Medicare assignment, which pays 80 percent of the allowed amount of your surgery cost. You and/or your supplemental insurance are responsible to pay the remaining 20 percent balance. As a courtesy to you, St. Luke's will file your medical insurance claims including your supplemental insurance. Please understand that you also are responsible for payment of any unpaid yearly deductible. Please bring your Medicare and/or all insurance cards with you.

### **Non-Medicare (commercial insurance)**

St. Luke's will file your primary insurance. If payment is made to you, please endorse the check and send it to us with the Explanation of Benefits so proper adjustments can be made to your account.

### **Medicaid**

St. Luke's will file Florida Medicaid claims. Please bring your Medicaid card with you. Medicaid patients from out-of-state are personally responsible for the full cost of surgery. Some Medicaid programs require prior authorization; if this applies to you, you may be required to notify your primary care physician.

Prior to your procedure, St. Luke's will in good faith outline an estimate of your responsibility according to your available benefits supplied by your insurance company. Your estimated patient responsibility will then be communicated to you verbally in advance of your procedure with the expectation of payment made either in advance to your procedure or paid in full the day of your procedure.

Please note that the quote provided is not a guarantee of incurred patient responsibility amounts and may not include any additional services or procedures performed. Your final responsibility will be determined by your available plan benefits when your claim is processed.