

Glaucoma

Medicare Benefit

The Benefits Improvements and Protection Act (BIPA) of 2000, Section 102 provides annual coverage for glaucoma screenings for eligible Medicare beneficiaries, effective January 1, 2002.

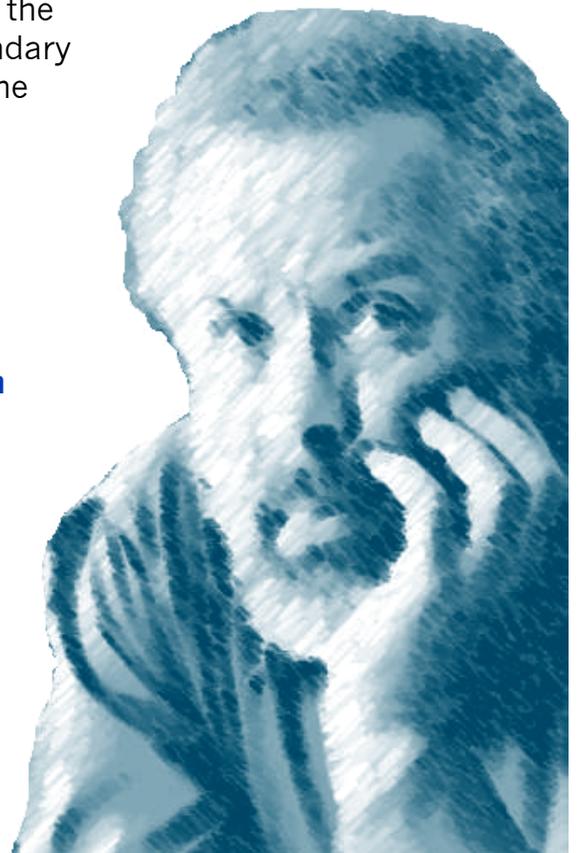
A leading cause of blindness, glaucoma affects close to 2.5 million Americans age 40 and older. Blacks are four to five times more likely to be blinded by glaucoma than Caucasians, and can develop it earlier with risk increasing by age 35.

The benefit stipulates that Medicare will cover 80% of the doctor's examination fee. The patient or his/her secondary insurance must pick up the patient's deductible and the remaining 20% balance. A minimum of 366 days is required between screening visits.

To qualify for this coverage you must be at high-risk, as described by the Department of Health and Human Services:

- **Individuals with a family history of glaucoma, with family defined as a blood parent or sibling;**
- **Individuals with diabetes, whether it be diet-controlled, oral-agent-controlled, or insulin-dependent diabetes;**
- **African Americans age 50 and older who meet eligibility requirements for Medicare.**

The screening for glaucoma includes: 1) visual acuity; 2) dilated eye examination; 3) intraocular pressure measurement, 4) direct ophthalmoscopy



1-800-331-2020

Founded in 1908, Prevent Blindness America is the nation's leading volunteer eye health and safety organization dedicated to fighting blindness and saving sight. For more information or to order this fact sheet, call 1-800-331-2020 or visit us on the web at www.preventblindness.org.