

Cataract Surgery Instructions for 2nd Eye

BEFORE SURGERY

Our surgery counselor has reviewed your paperwork and instructions with you. Your surgery will be performed at the Laser & Surgery Center, located to the far left of the main entrance of Clarus Eye Centre. The Laser & Surgery Center will call prior to your surgery to review preoperative information, assign an approximate arrival time and review your medical health information. **If you need to speak with the Surgery Center directly, you may call them at 360-456-7077**, Monday – Thursday before 4pm or by noon on Friday.

- Read your surgery instructions thoroughly.
- Most patients do not need prescription eyedrops for cataract surgery. This is called “dropless cataract surgery.”
- If you were prescribed eyedrops for surgery, begin using your drops one day before surgery.
- Please make arrangements for a ride home after your surgery.
- If you have any questions or need to speak with our cataract surgery counselor, call **360-292-7053**.

DAY OF SURGERY

You will spend approximately 2 hours at the surgery center.

- You must have a responsible adult present to provide transportation following your surgery.
- Take your normal daily medications unless told otherwise.
- Please wear warm, comfortable clothing to the surgery center.
- Do not wear any facial makeup, perfume, cologne or aftershave lotion.
- Do not wear contact lenses on the day of surgery.
- If they were prescribed, use your preoperative drops on the day of surgery prior to your arrival.

If you take drops for GLAUCOMA, please do not stop using or alter your glaucoma drops, unless instructed otherwise by your doctor.

AFTER SURGERY

You will be provided with an eye shield to wear while sleeping for the first 24 hours after surgery. Your vision will be blurry for the first few days but should gradually improve as your eye heals.

- Wear your eye shield while resting or sleeping during the day and the first night after surgery.
- During the day you may wear your glasses or sunglasses. You may want the lens removed from your glasses on the side that had surgery until a new lens is prescribed weeks after surgery. Or you may prefer to go without glasses and only use reading glasses. Please do whichever is most comfortable for you, as neither option will harm your eye.
- Normal activities may be resumed the day after surgery. This includes regular aerobic exercise and light weightlifting. Avoid strenuous or heavy lifting for 1 week after surgery. There are no restrictions for flying after cataract surgery
- You may bathe or shower as usual, try to keep water and soap out of the eye as much as possible.
- Avoid swimming or hot tubs for one week after surgery.
- Please do not use mascara or eye makeup for the first few days after surgery.
- If they were prescribed, use your prescription drops as instructed and taper them as indicated by your drop schedule. Your drops may leave a white residue in the corner of your eye. You may clean it with a clean cloth.
- Please reference THE COMMON SYMPTOMS (B-4) for more details.
- YOU WILL BE REQUIRED TO COME IN TO THE CLINIC THE DAY AFTER YOUR SURGERY.

Notify us immediately if your vision gets abruptly worse, there is a severe ache, or if the eye is more red, as these may be signs of infection.

Post-Operative Appointments

You are required to come into the clinic the day after your surgery. It is important for your surgeon to examine your eye to insure proper healing. You will also be scheduled for an appointment approximately one week and one month after surgery. At the one-week visit, the doctor will dilate your pupil.

Insurance / Billing

Your insurance plan dictates your financial obligation. They pay according to your individual plan, applying the appropriate out-patient co-payments, and/or annual deductibles. ANY PREMIUM FEES ARE IN ADDITION TO YOUR SURGICAL COPAY OR DEDUCTIBLE. Our surgery team will obtain prior authorization when needed. After your surgery, we will bill your insurance company for you. There will be three separate claims.

- Laser & Surgery Center for the facility fee
- Eye Physicians of Olympia for your physician's services
- Pacific Anesthesia or Rigelman Anesthesia for their services

Possible Symptoms After Surgery

We hope that your surgery is a positive experience. Although we cannot know how everyone will respond and heal following eye surgery, we have listed some common symptoms that you may experience:

For the first few days after surgery:

- Your vision will be blurry. Your vision may fluctuate.
- It is normal for the white part of the eye to appear red or bloodshot.
- Your eyedrops may sting.
- You may see a swollen, white or red patch on the white of the eye, which may take a few weeks to resolve.
- Your pupil may remain dilated for a few days.
- You may have some irritation, like an eyelash in the eye.
- Light sensitivity, which may last for a few weeks – you may be more comfortable wearing sunglasses.

You may see:

- After-images or colors in your vision (blue or pink hue), which may last for a few days after surgery.
- Crescent shaped images (half circle) – this should improve as your eye adjusts after surgery.
- Glare from lights or halos around lights – this should improve with time.
- An increase in floaters (specks or spots in your vision) for a few months – if you have any dramatic change or a curtain that remains in your vision, you should notify your doctor.
- A change in colors – usually brighter and less yellow.
- Mild flashing of light or sparkles in your vision.
- Double vision – usually clears after the first day.

There may be an adjustment period while your eyes adapt to each other – this can take a few weeks. Final clearing of your vision usually takes 2-4 weeks. **Most people need a change in their eyeglass prescription following cataract surgery**, but some may only need glasses for certain tasks. It may take longer for your vision to stabilize if you have diabetes, macular degeneration, advanced glaucoma, or other eye diseases.

Most patients receive injections of antibiotic and anti-inflammatory medications at the end of surgery and, therefore, do not need to use eyedrops for their surgery. This is commonly called “dropleess cataract surgery.” Patients who have dropleess cataract surgery may use artificial teardrops if the eye feels irritated. Some patients are not candidates for dropleess cataract surgery and will use an antibiotic drop to reduce the risk of infection and anti-inflammatory drops to help soothe the eye and decrease swelling. If you need to use surgery drops, detailed instructions are included in this folder.

Problems after surgery are rare, but they can occur. These can include infection, bleeding, inflammation (pain, redness, or swelling), loss of vision, or light flashes. With prompt medical attention, these problems can usually be treated successfully.

If you have questions or concerns after surgery, please call our main office at **360-456-3200**. If calling after hours, you will be instructed how to reach our answering service.

Information About Balance Billing Protection Act

Know your rights under the Balance Billing Protection Act

Beginning January 1, 2020, Washington state law protects you from 'surprise billing' or 'balance billing' if you receive emergency care or are treated at an in-network hospital or outpatient surgical facility

What is 'surprise billing' or 'balance billing' and when does it happen?

Under your health plan, you are responsible for certain cost-sharing amounts. This includes co-payments, coinsurance and

deductibles. You may have additional costs or be responsible for the entire bill if you see a provider or go to a facility that is not in your plan's provider network.

Some providers and facilities have not signed a contract with your insurer. They are called 'out-of-network' providers or facilities. They can bill you the difference between what your insurer pays and the amount the provider or facility bills. This is called 'surprise billing' or 'balance billing.'

Insurers are required to tell you, via their websites or on request, which providers, hospitals and facilities are in their networks. And hospitals, surgical facilities and providers must tell you which provider networks they participate in on their website or on request.

When you CANNOT be balance billed:

- **Emergency Services:** The most you can be billed for emergency services is your plan's in-network cost-sharing amount even if you receive services at an out-of-network hospital in Washington, Oregon or Idaho or from an out-of-network provider that works at the hospital. The provider and facility cannot balance bill you for emergency services.
- **Certain services at an In-Network Hospital or Outpatient Surgical Facility:** When you receive surgery, anesthesia, pathology, radiology, laboratory, or hospitalist services from an out-of-network provider while you are at an in-network hospital or outpatient surgical facility, the most you can be billed is your in-network cost-sharing amount. These providers cannot balance bill you.
- **In situations when balance billing is not allowed, the following protections also apply:**
 - Your insurer will pay out-of-network providers and facilities directly. You are only responsible for paying your in-network cost-sharing.
 - Your insurer must:
 - Base your cost-sharing responsibility on what it would pay an in-network provider or facility in your area and show that amount in your explanation of benefits.
 - Count any amount you pay for emergency services or certain out-of-network services (described above) toward your deductible and out-of-pocket limit.
 - Your provider, hospital, or facility must refund any amount you overpay within 30 business days.
 - A provider, hospital, or outpatient surgical facility cannot ask you to limit or give up these rights.

If you receive services from an out-of-network provider, hospital or facility in any OTHER situation, you may still be balance billed, or you may be responsible for the entire bill.

This law does not apply to all health plans. If you get your health insurance from your employer, the law might not protect you. Be sure to check your plan documents or contact your insurer for more information.

If you believe you've been wrongly billed, file a complaint with the Washington state Office of the Insurance Commissioner at www.insurance.wa.gov or call 1-800-562-6900.

ANESTHESIA SERVICES

General & Billing Information for Anesthesia Services

1) TYPE OF ANESTHESIA

For your eye surgery at Laser and Surgery Center, you will receive Monitored Anesthesia Care (MAC). MAC includes anesthesia care using:

- Topical anesthesia (surface of the eye)
- Local anesthesia (numbing the eye and/or surrounding area)
- Nerve block injections (numbing a larger part of the face)

2) SEDATION (sometimes called conscious sedation) may or may not be administered. It is used to help you feel more relaxed and comfortable, but not every patient requires it. Sedation may be given based on:

- The type and length of your procedure
- Your surgeon's request
- Your own preference
- Any changes in your condition during surgery

Whether sedation is given or not, your anesthesia fee does not change.

3) ROLE OF THE ANESTHESIA PROVIDER

A certified anesthesia professional will:

- Review your health and surgical history prior to your procedure
- Monitor your vital signs (blood pressure, circulation, oxygen levels, and heart rhythm) throughout surgery
- Be present in the operating room to keep you safe and comfortable, and to respond to any changes or surgeon requests

It is important to note that anesthesia care is dynamic, and adjustments may be made at any time before, during, or after your procedure.

4) ANESTHESIA BILLING AND FEES

Anesthesia services are provided by licensed professionals from Pacific Anesthesia or Rigelman Anesthesia Services.

These are independent groups and are not employed by Clarus Eye Centre or Laser and Surgery Center. As a result, you will receive a separate bill for anesthesia services.

Fees are based on the type of surgery performed and the total time the anesthesia provider spends monitoring and caring for you.

5) INSURANCE COVERAGE

- Medicare with a secondary/supplemental plan: You may have little or no out-of-pocket costs, aside from unpaid deductibles.
- Medicare only (no secondary plan): You are responsible for 20% of the anesthesia fee (Medicare pays 80%).
- High-deductible insurance plans: You may need to pay most or all of the anesthesia fee until your deductible is met.
- Commercial insurance plans: Coverage varies by plan; contact your insurer for details.
- No insurance: A cash fee schedule will be discussed at the time of scheduling.

Most health plans cover the majority of anesthesia costs once deductibles are met. If there is a remaining balance after insurance payment, you are responsible for it.

- **BILLING QUESTIONS:**

For Rigelman Anesthesia Services, call 425-228-5228

For Pacific Anesthesia, call 425-407-1500