

Ophthalmic Services**General Ophthalmic Services Memorandum**

26 February 2018

**To all Optometrists and
Ophthalmic Medical Practitioners
providing the Enhanced Service NI PEARS**

Dear Practitioner

**NI PEARS – IMPORTANT INFORMATION ON CHANGES TO THE CLAIMING
PROCESS FOR THE NI PEARS LES (formerly SPEARS) INCLUDING ACCESS
TO ONLINE CLAIMING VIA THE OPHTHALMIC CLAIMS SYSTEM (OCS)**

This memorandum gives details regarding the process for submission of claims for the enhanced service NI PEARS both electronically using the Ophthalmic Claims System (OCS) and on paper for non OCS user practices

CLAIM PERIOD – all claims for NI PEARS, whether submitted manually or electronically, **must be submitted within 3 months** of service provision.

MANUAL (PAPER) SUBMISSION OF NI PEARS LES CLAIMS.

Any practice that does not currently have access to OCS may continue to submit NI PEARS LES claims on paper using the current “NI PEARS Assessment Outcome and Claim” form. A sample is attached and further copies may be downloaded from the BSO website at www.hscbusiness.hscni.net. All claim forms must be fully completed, including completion and signing of both the patient and practitioner declaration. The forms should be checked for completeness prior to submission as any errors will mean the form will be returned unpaid. A separate claim form must be completed for a first assessment claim and for a follow up claim.

These paper claim forms should now be sent **directly to Ophthalmic Services BSO** instead of to the HSCB office in Armagh.

Providing Support to Health and Social Care

*Ophthalmic Services, 2 Franklin St, Belfast, BT2 8DQ
☎ 0300 555 0113*



The paper forms may be submitted with a batch of GOS claim forms but should be in a separate envelope clearly marked NI PEARS and “Private and Confidential”. The forms should be submitted **within 3 months of service provision** marked:

FAO Angela Dowds
Ophthalmic Services
BSO
Franklin Street
Belfast BT2 8DQ

ELECTRONIC SUBMISSION OF NI PEARS CLAIMS

The clinical information required on the online NI PEARS Assessment and Claim form is identical to the clinical information required on the paper claim form. It includes information on diagnosis, management and outcome of the assessment. Contractors should consider how the member of staff completing the online claim form extracts the clinical information accurately from the patient clinical record. A suggestion that should be considered is that a paper copy of the NI PEARS Assessment and Claim form is completed by the optometrist at the time of the NI PEARS assessment that may then be transcribed by the staff member onto the electronic form to ensure accuracy. The paper claim form does not need to be retained once the claim is submitted on OCS.

To access the NI PEARS claim form on OCS

Open the OCS home page, click on “New Claim”, complete the required patient details and at bottom of page at “Create Claim form” select “LES - NI PEARS” from the drop down box. Below this click “New Claim” This will open to the **LES NI PEARS Assessment and Claim form**.

To complete the NI PEARS Assessment and Claim form

Form details: the Claim ID will auto populate when the claim or a prior approval request is submitted.

Part 1: Patient Details

This will be auto populated.



Part 2 – Claim details

OO/OMP code: the code of the practitioner that carried out the NI PEARS assessment/ follow up.

Date and type of last eye examination: refers to the last full sight test – insert date and click on drop down box to indicate if GOS, private or no previous test. Note: this date will pre-populate with the last GOS test date recorded on OCS This information enables a check on patient eligibility for NI PEARS.

At this step questions may appear in red, depending on the date and type of last test for example:

“Alert: Is the patient due and eligible for GOS?”

- If Eligible, and it is under 2 years since the last GOS eye examination, a further question will appear

“The patient is eligible for GOS. Is the patient on 2 year GOS interval?”

- If “YES” you will be enabled to proceed to complete the claim form.
- If “NO” the patient is due for a GOS test rather than a NI PEARS assessment. A GOS test should therefore be provided or, if exceptional circumstances, prior approval sought to access an NI PEARS assessment and claim. This will be indicated on the screen and to request prior approval click on “Submit for Prior Approval” box at the bottom of the page and complete the request.
- If “Eligible” and it is over 2 years since the last sight test a statement will appear in red “Claim is more than two years from last eye examination date. Submit for prior approval” and proceed with prior approval request process as above. The reason for requesting an NI PEARS assessment rather than a GOS sight test will be required, for BSO/HSCB consideration.





Date of referral: the date the patient contacted the practice with an acute/sudden onset eye problem requiring an NI PEARS assessment.

Date and type of NI PEARS Assessment: date assessment was carried out; click on drop down box to indicate whether First appointment (First assessment) or Follow-up appointment.

Referral source: click on drop down box to complete

Presenting symptom: tick as appropriate; if “Other” briefly describe symptoms in free text box.

Diagnosis: tick as appropriate; if “Other” briefly describe diagnosis in free text box.

Outcome of assessment: tick as appropriate.

Declaration: by completing the details required and ticking the box the practitioner is declaring that all the information provided is accurate.

Finally click “submit for payment”

Patient declaration form LESPR

For all Enhanced Service provision when claims are being submitted via OCS a patient declaration form ,**LESPR**, must be completed. This is similar to the OCSPR form but specific to LES provision and can be used for NI PEARS and for LES 1, LES 2 when they become available on OCS or future LES services. It must be completed in full and signed by the patient and practitioner for each NI PEARS service provision. Codes for indicating the LES type on the form are listed at the end of part 4 of the form. These forms must be retained in the practice for 7 years from the date of service and produced on request for review by a HSCB/BSO officer, as with the OCSPR forms already in use. Supplies of LESPR forms will be supplied to practices.

PRIOR APPROVAL: applies to both manual and electronic claims.

Prior approval is required for exceptional claims which do not meet the eligibility criteria as detailed in the NI PEARS LES service specification.

Providing Support to Health and Social Care

*Ophthalmic Services, 2 Franklin St, Belfast, BT2 8DQ
☎ 0300 555 0113*





For OCS users an alert notice will appear on the screen when prior approval is required and should be requested via the online email process as described in the Claim Submission process.

Approval, or otherwise, will be provided by email as with the process for GOS prior approval. A claim ID will be generated at the point when a request for prior approval is submitted.

For practices submitting paper claims requests for prior approval should be emailed to BSO Eye Services using the practice HSC email account and the new prior approval email address: priorapproval.bso@hscni.net.

Exceptional situations where prior approval is required are detailed in the NI PEARS service specification under patient eligibility and include:

- Request for an NI PEARS assessment for a patient who is due for a GOS sight test but due to their presenting condition would be unable to undertake a full GOS sight test. E.g. a patient presenting with a severe corneal abrasion and therefore too photophobic to undertake a refraction.
- Request for a second NI PEARS assessment within a year of a previous NI PEARS assessment.

All requests for prior approval for exceptional cases will be dealt with on a case by case basis and practitioners are advised not to assume that approval will automatically be given.

If you have any enquiries arising from this memorandum please contact the Business Services Organisation.

