



Memorandum of Ophthalmic Service

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| <p>Post-Operative Cataract Review and Assessment Service Process for Management of Claims</p> |
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To all Ophthalmic Contractors

Dear Contractor

The Department of Health's Strategic Planning and Performance Group (SPPG) has introduced a primary care optometry service for post-operative cataract review and assessment. The service should be provided in line with the service specification in force at the time and this MOS outlines the supporting process to enable contractors to submit claims for the service provided to eligible patients.

There are two elements of this service which are required to be completed in order to submit a valid claim and receive payment for the service:

1. Clinical assessment supplementary to a sight test/eye examination as detailed in the service specification.

AND

2. Reporting of clinical outcomes and patient experience via the Clinical Communications Gateway (CCG) as detailed in the service specification.

The service specification may be viewed [Enhanced Services \(ES\) - Business Services Organisation \(BSO\) Website \(hscni.net\)](#)



Process for submission of claims for post-operative cataract review and assessment service

1. The claim form for the service is a web based 'eForm' and is accessed via the FPS Optometry portal using the "Optometry eForms" link. The form is in 'Section B: Ophthalmic Claim eForms' and is titled "Optometry Post- Operative Cataract Review and Assessment Service"
2. Remuneration for the service is set at £35 at the time of issue of this MOS.
3. Only patients directed by the Hospital Eye Service with a valid instruction to attend a primary care optometry practice for their post-operative review and assessment are eligible. They will be provided with a letter by the hospital to this effect.
4. Only contractor practices that have registered their wish to provide the service with SPPG (via the annual enhanced/supplementary service declaration) will be eligible to submit claims for the service.
5. Only optometrists who are listed by SPPG to provide the service will be eligible to submit claims for the service.
6. As part of the post-operative review, the patient should be provided with a GOS sight test if eligible. All GOS sight tests should be claimed in the usual way on OCS. If the patient requires a change in glasses prescription a voucher may only be claimed if they are normally eligible for a GOS voucher.
7. Patients are required to attend for their post-operative review **A MINIMUM OF SIX WEEKS** after surgery **AND NO LATER THAN 12 WEEKS** after surgery. Any patient attending after 12 weeks who has not had a post-operative review may only be provided with a



sight test, either GOS or private depending on their eligibility, and no claim may be submitted for either a post-operative review.

8. Both an ESPR patient declaration form, declaring provision of the post-operative review service, and an OCSPR patient declaration form, declaring provision of a sight test, must be completed as usual if applicable.
9. Claims will only be paid where the post-operative review and assessment report for the patient has been submitted via CCG **fully completed** by the optometrist, and verified by the hospital eye service as a valid return. Information on the reports will be provided by the hospital to BSO to verify claims.
10. Reports should be completed and submitted as close to the examination time as possible and **no later than 5 days after the examination**.
11. Verification and assurance of claims for the service will be undertaken in line with usual post payment verification processes.
12. Claims must be submitted within 3 months of the date of service. Late claims will not be paid and no exceptions will be made.

Queries in relation to the claims process should be directed to the BSO in the first instance either by telephone to Ophthalmic Services at 028 9536 0333 or by email to:

Ophthalmic.BSO@hscni.net