



## DEPARTMENT OF REHABILITATION PROVIDER REFERENCE GUIDE FOR VISION SERVICES AND DEVICES

### **Introduction**

The Department of Rehabilitation (DOR) is the state department charged with the vocational rehabilitation of adults and transitioning high school students with significant disabilities (collectively known as consumers). The DOR's mission is to assist consumers to achieve their employment goals, maintain successful employment, and live independently. Assisting consumers to reach these goals may include purchasing vision services and devices. The DOR highly values and appreciates all of the health care providers on the panel.

### **The DOR's payment rates**

Most of the DOR payment rates are comparable to the Medi-Cal rate schedules. However, the DOR may also purchase additional services or devices that are not covered by Medi-Cal in order to meet a DOR consumer's vocational rehabilitation needs.

Low vision aids and some specialized glasses and lenses are allowed a markup based on wholesale cost documentation from the manufacturer.

Taxes and shipping are reimbursed for the actual costs paid according to the manufacturer's wholesale invoice. Taxes and shipping charges are subject to DOR adjustment if the wholesale manufacturer's invoice is not enclosed with the provider's invoice.

### **Prompt Payment Commitment**

The DOR follows the California Prompt Payment Act, which requires state agencies to make payments not more than 45 days after the receipt of a properly submitted and undisputed invoice.

## **Evaluation**

After the vision office examines the consumer, the DOR requires a written evaluation report with a specific recommendation for devices or services. The report should be submitted within 10 business days from the date the evaluation was completed.

Narrative report documenting findings and recommendations on vision disability or a completed – Report of Optometric/Ophthalmological Examination (form DR 233C) should include justification for the recommended vision device(s) based on the consumer's medical and vocational needs.

After the examination / evaluation, the provider will submit the results of the evaluation and the signed Authorization and Invoice for Medical Services (DR 297C) to DOR.

See step-by-step table for specific instructions on where and how to send documents.

## **Authorization**

No services may be provided or paid for without a DOR authorization document. Only those services authorized on the Authorization and Invoice for Medical Services (DR 297C) or Purchase Order (DR 297D), in advance, will be honored at the time of invoice.

Once the examination / evaluation and supporting documentation are received, the DOR reviews and determines the appropriateness of services in alignment with the consumer's employment goal and plan. The Rehabilitation Counselor may work with the provider on any modifications that may be needed.

Once the DOR is ready to purchase the device (s) for the consumer, the DOR will send the provider a single written Purchase Order (DR 297D) form itemizing all the devices.

## **Devices**

The vision provider will dispense the approved devices listed on the Purchase Order (DR 297D) form. Upon DOR receiving the invoice and catalog documentation for any By Report procedure code(s), the Statewide Optometric Consultant will review and adjust the rates to the allowable mark up.

## **Billing the DOR for Vision Services**

It is a state policy that if the consumer/patient has Medi-Cal or other private insurance, the vision provider will invoice these benefits first. Whatever is not covered by the comparable benefits can then be invoiced to DOR. Each provider must attach the evidence of benefit (EOB) or denial. Medicare or Medi-Cal non-covered services (such as adult eyeglasses and low vision aids) do not require EOB or denial documentation. See step-by-step table for specific invoicing instructions.

When billing the DOR for evaluations, include the documents listed above in the Evaluation section of this document.

DOR invoicing guidelines can be found online at this website: <https://www.dor.ca.gov/Home/InvoicingGuidelines>. Along with general information for all vendors, the website includes a link to more specific information for health care providers.

- The provider's invoice must include the make, model, date of purchase, and consumer's name.
- The DOR is required to verify with the consumer that goods and services were received prior to paying the invoice.
- Providers are paid at the rates listed in this document in the section entitled "The DOR's Payment Rates."
- Attach any comparable benefits documentation and manufacturer's wholesale invoice when billing the DOR.

## Step-by-Step In-Depth Guide

This section provides a description of each step in the vision services and devices process. See the sections above for more detailed information on policies, processes, and documentation.

Step	Purchase Phase	Action	Standard Actor
1	Evaluation	<p>Issue authorization for vision examination / evaluation.</p> <p>Attach the DR233C – Report of Optometric/Ophthalmological Examination.</p> <p>Commonly used vision procedure codes:</p> <ul style="list-style-type: none"> <li>• 99499 OM - Basic optometry exam: medical history, exam, diagnosis, assessment of capabilities/stability/impairment, report.</li> <li>• 99499 OP - Basic ophthalmology exam: medical history, exam, diagnosis, assessment of capabilities/stability/impairment, report.</li> <li>• 99456 OM - Comprehensive Optometry exam: medical history, exam, diagnosis, assessment of capabilities/stability/impairment, treatment plan, report.</li> <li>• 99456 OP - Comprehensive Ophthalmology exam: medical history, exam, diagnosis, assessment of capabilities/stability/impairment, treatment plan, report.</li> <li>• Z2700 - Low Vision Evaluation Notate on the authorization if the consumer has Medi-Cal or other private dental insurance.</li> </ul>	DOR Office
2a	Evaluation	<ul style="list-style-type: none"> <li>• Examine consumer: evaluate vision status and needs.</li> <li>• Completed the DR233C – Report of Optometric/Ophthalmological Examination or report documenting findings and recommendations.</li> </ul> <p>Submit the completed report and the signed Authorization and Invoice for Medical Services (DR 297C) to DOR field address.</p>	Provider

Step	Purchase Phase	Action	Standard Actor
2b	Evaluation	<ul style="list-style-type: none"> <li>• Invoice the consumer’s Medi-Cal or other private medical/vision insurance (if applicable).</li> <li>• Invoice the DOR for remaining balance. Attach EOB or denial.</li> </ul>	Provider
3	Devices	Issue Purchase Order (DR 297C) for devices, utilizing correct procedure codes and approved rates. Notate on the Purchase Order (DR 297C) “Subject to Statewide Optometric Consultant review and adjustment of the rates.”	DOR Office
4	Devices	<p>Dispense authorized device (s) approved on the Purchase Order (DR 297C).</p> <p>Submit the vision provider invoice and catalog list sheets for each authorized procedure code to DOR field address.</p>	Provider
5a	Billing	<p>Invoice the consumer’s insurance if coverage is available.</p> <p>If the consumer’s insurance does not cover items purchased, submit the itemized invoice to DOR, along with any denial letters received from insurance carrier (if applicable).</p> <p>If the consumer does not have insurance, bill DOR directly.</p> <p>Include all required paperwork listed in the section above entitled “Billing the DOR for Vision Services and Devices.”</p> <p>Additionally, you may preview the DOR’s invoicing guidelines at this website:  <a href="https://www.dor.ca.gov/Home/InvoicingGuidelines">https://www.dor.ca.gov/Home/InvoicingGuidelines</a></p>	Provider
5b	Verification of goods and services	Verify with consumer that goods and services were received prior to payment of invoice.	DOR Office