

Making Accurate COTS Claims

Please see table below for guidance. If you are still unclear, please contact POS for clarification.

	Own Px or Not own Px	Type of COTS	Details/Examples/Scenarios	Dilation Needed?	What can I claim
Cataract	Own	Pre-cataract assessment	Your patient attends with reduced vision, likely due to cataracts. Dilation needed to confirm cause—can be done same day or at a later visit. Whether referred for surgery or not, a claim can be made.	Yes	Sight test and Cataract referral refinement fee
	Own	Post cataract	Yes do ST and claim post cataract fee	Clinical judgement	Sight test and post cataract
	Not Own (via GP/triage)	Cataract assessment 1	If they have had a recent eye test and bring along copy and/or it's on the referral do quick check, then do the cataract assessment and claim MECS	Yes	Claim MECS Cataract (no ST claim and no issuing of spec rx)
	Not Own (via GP/triage)	Cataract assessment 2	If no recent eye test or unable to get the detail then carry out eye test and claim Cataract referral refinement fee	Yes	Sight test and Cataract referral refinement
	Not Own	Post cataract	Yes – claim eye test and give px copy of their spectacle prescription	Yes	Sight test and post cataract fee
MECS	Either	MECS	Px attending for flashes/floaters, red eye etc. No spectacle refraction to be prescribed – can do a quick check but not a proper in-depth refraction as MECS is not designed for this.	Clinical judgement	MECS
	Either	MECS OCT/topography	Add on to the above MECS where OCT required to rule out wet AMD/disc swelling or for GSTT mac pathway etc. This is not for glaucomatous discs or suspect retinal detachments. Topography for suspect keratoconus and or corneal issues.	Clinical judgement	MECS + OCT/topography
Glaucoma	Own	GRM	During eye test find either high IOP or a visual field defect – can bring back and claim for the repeated IOP/fields	No	Repeat measures: <ul style="list-style-type: none"> • IOP only • Fields only • IOP & Fields
	Not Own	GECE	Do a full Glaucoma assessment (should include dilated disc assessment) VF, GAT, angles, FH, include most recent spec rx.)	Clinical judgement	GRR Fee – please use the correct claim on Pharm outcomes
	Either	GRR OCT angles	This is for practitioners who have been accredited to carry out OCT angles on patients who have suspicious angles noted.	Clinical judgement	MECS plus OCT angle fee
PAEDS	Not Own	Children's Vision Scheme	Px is referred via the school screening team 1 st appt - claim GOS ST fee as well as the additional CVS scheme If at the 6 or 12week follow up there are problems and need to re-refract can claim GOS ST fee again but will need to code (good record keeping if must re-refract etc)	Yes - cyclo	Claim Sight Test, CVS fee 6 week telephone compliance check 12-16week check
LD	Either	Learning Disabilities	Referral from other HCP/LD support 1 st appt – GOS/private E/E (as applicable) + LD claim Follow-up – as deemed necessary	Clinical Judgement	GOS (only if applicable) LD fee