

OASP Additional Benefit

Members of the Optical Assistance for Seniors Program (OASP) may receive the maximum optical benefit once every three years. The three-year period begins from the date of the first optical service that is reimbursed.

If an OASP member undergoes cataract surgery which results in a change of prescription, then they may be eligible for an additional benefit within that three-year period.

In order to receive this additional benefit, a Physician Written Order (PWO) must be submitted for the member. This document may be completed by an ophthalmologist or optometrist and must confirm that the member has undergone cataract surgery. The PWO must be current, meaning that it has not been previously used and it is within the current benefit period. Correspondence other than PWOs, such as the patient lens implant identification card, can be accepted as confirmation of surgery provided that it contains the following:

- Patient's name
- Date of the surgery
- Surgeon's or Ophthalmologist's name

When submitting the claim through the online portal, after entering the member's ID number and date of birth, you will see the following prompt.

The screenshot shows a web form with two sections, each with a question and radio buttons for 'Yes' and 'No'. A red asterisk and the word '*Required' are centered below the questions. At the bottom are 'Cancel' and 'Next' buttons.

COB details ?

* Is the patient entitled to receive comparable benefits from any other insurance company, health benefits company or Alberta Blue Cross Plan? Yes No

Prescription details ?

* Has the patient experienced a prescription change due to cataract surgery and wishes to access their additional benefit? Yes No

*Required

Cancel Next

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Please complete the following steps:

- Select *Yes* if the member has provided correspondence that meets the criteria listed above.
- Enter the patient's COB details (if applicable).
- **Ensure the surgery date entered matches the surgery date listed in the correspondence.**
- Click *Choose File* and select the appropriate correspondence.
- Click *Upload* and the correspondence will appear under *File*.
- Click *Next* and proceed with claim submission.

If you have any questions, please contact us directly at 780-498-8083 or toll free at 1-800-588-1195. Our queue line is open from Monday to Friday, 8:30 a.m. to 5 p.m. Mountain Time. Alternatively, you can email your inquiry to healthinq@ab.bluecross.ca.

The screenshot shows a web form titled "Prescription details" with a help icon in the top right. The form contains the following elements:

- A question: "* Has the patient experienced a prescription change due to cataract surgery and wishes to access their additional benefit?" with radio buttons for "Yes" (selected) and "No".
- A required field: "* Surgery date" with a text input containing "2020-09-16" and a calendar icon. Below the input is the format "(YYYY-MM-DD)". This field is circled in red.
- A "Choose File" button next to the text "Cataract Surgery Dr. Note.jpg".
- An "Upload" button.
- A "File" section with a dark blue header, containing the text "Cataract Surgery Dr. Note.jpg" and a "Remove" button.
- A red asterisk "*Required" centered below the file section.
- Two buttons at the bottom: "Cancel" and "Next".

