



DAVIS VISION VERIFICATION PROCESS

Please note that the Davis Vision Authorization process also guarantees payment for services and materials authorized for the effective period of the authorization. However, if you would still like to submit a Verification the following information should be reviewed:

In accordance with Title 28 of the Texas Administrative Code Section 19.1724, Davis Vision is required to offer Davis Vision contracted providers in Texas the option to submit a “verification” as defined as follows: A guarantee that an HMO (or HMO’s delegate) or preferred provider carrier will pay for proposed medical care or health care services rendered within the required timeframe to the patient for whom the services are proposed.

Please note that the Texas Department of Insurance (TDI) requires the following data elements be submitted for all verifications:

- Patient name
- Member ID number
- Patient date of birth
- Name of member
- Patient’s relationship to the Member
- Diagnosis code
- Proposed procedures or materials
- Place of service
- Proposed date of service
- Group code (Davis Vision group code or prefix code)
- Other carrier information – if available
- Provider name and Davis Vision Provider Number

Please call the Davis Vision Provider Services Department toll free at 1-800-888-4321 and follow the prompts to reach the Verification prompt. The following prompt selections should be used to get to the Verification prompt in Davis Vision’s IVR:

- Enter your Davis Vision provider number
- Choose “1” – Patient Services
- Enter the Member ID
- Confirm the Member Name
- Choose the Patient
- Confirm the Patient’s Name
- Choose “5” – Verification

Provide necessary information.