

# IEHP Lab Order Form



**INLAND EMPIRE HEALTH PLAN**

A Public Entity

**Claims Remittance To:**

IEHP

Claims Department – Vision

P.O. Box 10129

San Bernardino, CA 92423

Member Name:		Member ID#:		Auth#:		Order Date:		
Date of Birth:			Tray#:			Date Received:		
	SPHERE	CYLINDER	AXIS	PD		PRISM	BASE	
				FAR	NEAR			
R								
L								

**CHECK APPROPRIATE LENS STYLE**

SINGLE VISION	BIFOCAL		TRIFOCAL	MATERIAL
<input type="checkbox"/> SINGLE VISION V2100	<input type="checkbox"/> ROUND 22 V2200-28	<input type="checkbox"/> FLAT 28 V2200-28 <input type="checkbox"/> FLAT 35 V2200-35	<input type="checkbox"/> FLAT 7X28 50% Intermid V2300	<input type="checkbox"/> CR-39  <input type="checkbox"/> GLASS

	ADD	SEG HEIGHT	<b>TINT:</b> *Must include medical justification in special instructions				
R			<input type="checkbox"/> UV V2755	<input type="checkbox"/> PNK V2740	<input type="checkbox"/> BRN V2740	<input type="checkbox"/> GRY V2740	<input type="checkbox"/> PGX V2799-SV V2799-BI
L			<input type="checkbox"/> Frame Enclosed <input type="checkbox"/> New Frame <input type="checkbox"/> Used Frame				

Frame Manufacturer	Frame Style	Eye Size	Bridge Size	Temple	Color

<p><b>Add Ons (VER REQUIRED)</b></p> <input type="checkbox"/> VIP X/L Progressives V2781 <input type="checkbox"/> Scratch Resist V2760 <input type="checkbox"/> Spectralite S0590-SV/S0590-BI <input type="checkbox"/> Multi-Layer Anti-Glare V2750 <input type="checkbox"/> Plastic Photochromic V2744 <input type="checkbox"/> 1.60 S0581-SV/S0581-BI <input type="checkbox"/> Polycarbonate S0580-SV/S0580-BI <input type="checkbox"/> Other _____ <small>* Do not send case, straps, or specialty attachments with frame(s)</small>	<p><b>Special Instructions:</b> (Include medical justification for tint and/or special instructions for lab)</p>
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PROFESSIONAL SIGNATURE:	DATE OF SERVICE:	TELEPHONE: (      )
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<p><b>White</b> – Lab Copy</p> <p><b>Yellow</b> – Lab Billing Copy</p> <p><b>Pink</b> – Packing Slip/Mailing Label</p> <p><b>Goldenrod</b> – Doctor's Copy</p>	<p><b>SHIP TO:</b></p>
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