

SASOLMED

Optometry

Service Provider Guide 2021

1 SUMMARY OF OPTOMETRY BENEFITS

The following are applicable to Sasolmed:

- One optometric examination (11001) per beneficiary per 24 month cycle.
- A comprehensive examination (11001) includes visual, binocular stability and pathology evaluation (including tonometry where appropriate), diagnosis and dispensing.
- One pair of spectacles (frame plus generic / base lenses) per beneficiary every 24 month cycle, subject to the applicable appliance limit. Lenses are clear generic / base lenses.
- Frames (40501) are subject to the applicable sub-limit of R1 865 one per beneficiary every 24 month cycle. Fitting rimless or nylon is not covered. Subject to the applicable appliance limit.
- Contact lenses are subject to the applicable sub-limit of R2 560 per beneficiary every 24 month cycle. Subject to the applicable appliance limit. Coloured contact lenses are not covered.
- Tariff codes are restricted to Opticlear tariff codes.
- Accounts from non-network optometrists will be refunded up to the Opticlear Tariff.
- Pre-authorisation and approval is required for any extra's / lens enhancements (subject to clinical necessity).
 as per scheme rules (subject to optometry management protocols).
- Upgrades or services outside the list of benefits / not authorised as per optometry benefit protocol, will not be covered by the Scheme this will be for the patients' account.
- Spectacles with accommodative single vision lenses (pre-authorisation and approval required) or intermediate to near multifocal lenses will be covered up to the relevant clinical appropriate single vision benefit.

NOTE: Benefits listed are subject to the 2021 Scheme Rules.

Optical devices that are not regarded by Opticlear (Optometry Management Protocols) as clinically essential or clinically desirable will be excluded from benefits and will not be paid for by the Scheme.

2 OPTOMETRY TARIFFS FOR 2021

The Opticlear tariffs for 2021 are available on the Opticlear website (www.optics.co.za).

3 QUALIFYING CRITERIA

The optometry benefit is subject to qualifying norms.

The following are applicable to these options for 2021:

- Refractive error of 0.50 Dioptre sphere or 0.50 Dioptre cylinder or more, or reading Rx (Add) of at least +1.00 Dioptre sphere or more.
- For bifocals and multifocals, both distance and near norms must be satisfied.
- Spectacles or contact lenses for young children require a clinical motivation for consideration of benefits.

- Bifocals or multifocals for patients under the age of 38 require a clinical motivation for consideration of benefits.
- All claims for spectacles and lenses must meet the qualifying criteria to qualify for benefit.
 Any claims that have not met the qualifying norms will be rejected.

4 OUT-OF-BENEFIT UPGRADES

- Out-of-benefit upgrades can be paid by members directly to the participating optometrist at no more than the relevant Opticlear tariff.
- The Scheme accepts no responsibility for accounts for extras chosen by beneficiaries that are excluded as per the Scheme Rules or Optometry Management Protocols.
- All additional out-of-benefit items are to be reflected on the claim, but they will not be funded by the scheme. Please discuss this with the member. Split billing is not allowed.
- No Sunglasses or lenses with a tint over 35% will be covered (spectacles including frame, will be rejected).

5 OPTICLEAR PROVIDER SERVICE CENTRE

Monday - Friday: 08h00 - 17h00

Closed on Saturdays, Sundays and public holidays

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