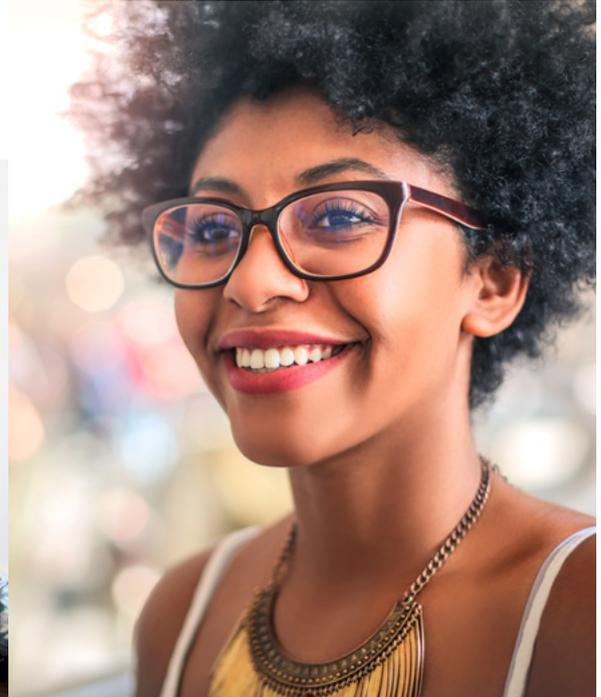


With **GEMS**
AFFORDABLE means **RICH** in benefits.



YOUR 2020 OPTOMETRY GUIDE



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Introduction

Welcome to the **GEMS Optometry Benefit Management Programme**. GEMS always strives to provide members with access to excellent and affordable healthcare. We understand that optometrists play an essential role in the provision of quality optometry care to our members, and our commitment to the promotion of optometry services further enhances members' access to the excellent healthcare to which they have become accustomed.

Summary of optometry benefits

The following apply to the **GEMS Tanzanite One and Beryl options for 2020**:

- One optometric examination per beneficiary per 12-month period (subject to clinical necessity). The period is calculated from the date services were last rendered to the beneficiary.
- Examination includes visual, binocular stability and pathology evaluation (including tonometry), and diagnosis.
- One pair of spectacles (frame plus lenses) at the package tariff code per beneficiary per 24-month period calculated from the date services were last rendered to the beneficiary, subject to the benefit limit.
- Frame choice from a provider-designated range; standard-quality lenses, single vision or bifocal.
- Should the beneficiary select a frame from outside the designated range, R232 must be credited towards this frame in lieu of the 'package' frame.
- Benefits are for either spectacles or contact lenses, not both.
- No cash refund nor credit is available in lieu of the optometry benefit.
- Tariff codes are restricted to the GEMS optometry network tariff codes.
- Accounts from non-network optometrists will be rejected.
- Upgrades or services outside the list of benefits are not covered by the Scheme, but will be for the patient's account.
- Prescribed minimum benefit entitlement for post-cataract surgery: Bifocal lenses and frame to the value of R1 176, with a sub-limit of R232 for the frame (where the optometry benefit has been exhausted).

The following apply to the **GEMS Emerald Value, Emerald and Onyx options for 2020**:

- One optometric examination per beneficiary per 12-month period (subject to clinical necessity) calculated from the date services were last rendered to the beneficiary.
- A comprehensive examination (11001) includes visual, binocular stability and pathology evaluation (including tonometry), and diagnosis.
- One pair of spectacles (frame plus lenses) per beneficiary per 24-month period, calculated from the date services were last rendered to the beneficiary, subject to the applicable limits.
- Frames are subject to applicable sub-limits. Fitting (nylon or rimless, etc.) is not covered.
- Benefits are for either spectacles or contact lenses, not both.
- Tariff codes are restricted to GEMS optometry network tariff codes.
- Accounts from non-network optometrists are refunded to the member.
- Upgrades or services outside the list of benefits are not covered by the Scheme, but are for the patient's account.
- Spectacles with accommodative single-vision lenses or intermediate-to-near multifocal lenses are covered to the relevant clinical appropriate benefit.
- Prescribed minimum benefit entitlement for post-cataract surgery: Bifocal lenses and frame to the value of R1 176, with a sub-limit of R232 for the frame (where the optometry benefit has been exhausted).

The following apply to the **GEMS Ruby option for 2020:**

- One optometric examination per beneficiary per financial year, starting on 1 January and ending 31 December of the same year.
- A comprehensive examination (11001) includes visual, binocular stability and pathology evaluation (including tonometry), and diagnosis.
- One pair of spectacles (frame plus lenses) per beneficiary per financial year, limited to available benefit in either the personal medical savings account or block benefit.
- Frame sub-limit of R1 430 per beneficiary. Fitting (nylon or rimless, etc.) is not covered.
- Benefits are for either spectacles or contact lenses, not both.
- Tariff codes are restricted to GEMS optometry network tariff codes.
- Accounts from non-network optometrists will be refunded to the member.
- Upgrades or services outside the list of benefits are not covered by the Scheme, but are for the patient's account.
- Spectacles with accommodative single-vision lenses or intermediate-to-near multifocal lenses are covered to the relevant clinical appropriate benefit.
- Prescribed minimum benefit entitlement for post-cataract surgery: Bifocal lenses and frame up to the value of R1 176, with a sub-limit of R232 for the frame (where the optometry benefit has been exhausted).

Childhood screening (all options) for 2020:

- Once-a-lifetime childhood optometry screening benefit across all options for beneficiaries up to and including age seven.
- Screening can be performed and charged only in isolation (without any other examinations or material).

Tariff Code	Code Description	Tariff	Service
94000	Individual Child Screening	R86.50	Screening only

Signed consent must be obtained from the child's parent/guardian before screening takes place (this consent and the patient report must be produced on request).

A **child screening** must assess the following:

Unaided visual acuity: Assessment of habitual acuity at distance and near
Acuity through a +1.50 dioptre sphere lens to eliminate the possibility of the patient accommodating during his/her habitual visual acuity test
Colour vision to determine the presence of colour blindness or deficiency
Stereo acuity (depth perception) to ascertain that depth can be seen in binocular views
Ocular motilities, cover test and near point of convergence: Assessment of ocular movements and alignment of the eyes, and identification of any convergence weakness
Ophthalmoscopy to detect and evaluate various retinal vascular diseases or eye diseases, and pupil response

Any deviation from clinically accepted norms will require a comprehensive eye examination (the screening will then be void and only an eye examination must be charged).

Optometry tariffs for 2020

The GEMS optometry network tariffs for 2020 are available at www.gems.gov.za.

The following tariffs will apply to both the **Tanzanite One** and **Beryl** options:

Tariff code	Code description	Tariff	Service
90011	Vision Exam (when no Material Supplied)	R226.10	Consultation only
93200	Combined V/Exam+Frame+S/Vision Standard	R798.30	Consultation, frame and single-vision standard lenses
93201	Combined V/Exam+Frame+S/Vision Surfaced	R856.50	Consultation, frame and single-vision surfaced lenses
93300	Combined V/Exam+Frame+Bifocal	R1 361.70	Consultation, frame and bifocal lenses

- Benefits will be paid only if these codes are reflected in the claim.
- For a single vision or bifocal package, the claim should reflect only the package tariff code and not the individual consultation and other tariff codes, e.g. for the bifocal package claim only for 93300 and do not include 90011.
- Disposable or permanent contact lenses for the Tanzanite One and Beryl options are to be billed by using the appropriate product tariff code and cost.

The GEMS optometry network tariffs for 2020 will apply to the Ruby, Emerald Value, Emerald and Onyx options.



Qualifying criteria

The optometry benefit is subject to qualifying norms, including family or beneficiary limits where applicable. Benefits will be subject to the Optometry Benefit Management Programme.

The following apply to the **GEMS Tanzanite One and Beryl** options for 2020:

- Unaided visual acuity of worse than 6/9 (Snellen rating) for distance or near (where appropriate).
- Refractive error of minimum 0.75 dioptre sphere or 0.75 dioptre cylinder, or reading Rx (add) of at least +1.50 dioptre sphere.
- For bifocals, both distance and near norms must be satisfied.

The following apply to the **GEMS Ruby, Emerald Value, Emerald and Onyx** options for 2020:

- Unaided visual acuity of 6/9 (Snellen rating) or worse for distance or near (where appropriate).
- Refractive error of minimum of 0.50 dioptre sphere or 0.50 dioptre cylinder, or reading Rx (add) of +1.00 dioptre sphere.
- For bifocals and multifocals, both distance and near norms must be satisfied.

Claims for spectacles and lenses that do not meet the qualifying criteria for benefits will be rejected.



Out-of-benefit upgrades

- Out-of-benefit upgrades are payable by members directly to the participating optometrist at no more than the relevant GEMS optometry network tariff.
- The Scheme accepts no responsibility for accounts for extras chosen by beneficiaries that are excluded by the Scheme Rules.
- Should members on the Tanzanite One and Beryl options select a non-designated frame, the claim must reflect the package tariff code as well as the selected frame at the marked price less R232. The balance is strictly for the member's account.
- All additional out-of-benefit items are to be reflected on the claim, but they will not be funded. Please discuss this with the member. Split billing is prohibited.
- Sunglasses or lenses with a tint over 35% will not be covered (claims for spectacles, including frame, will be rejected).

Disclaimer applicable on benefit confirmations:

Benefits listed are subject to the 2020 registered Scheme Rules, Optometry Benefits Management Programme and in a dispute, the Registered Scheme Rules takes precedence.

Benefits may also be subject to a beneficiary limit every two financial years, calculated from 1 January of the year within which any optical service was first rendered to any beneficiary following the end of the previous two-year period (if any) ended on 31 December. The family limit is calculated per option either annually or biannually from 1 January.

Insured benefit confirmations should not change provided the member has no outstanding accounts that affect the benefit limits, the membership is active and the claim is in line with the requirements of Optometry Management Programme.

Benefit confirmations and payments may vary for options where benefits are subject to the availability of family, beneficiary and/or available medical saving account limits.

The Scheme does not cover optometry devices that are not regarded by the relevant managed healthcare programme as clinically essential or desirable.

GEMS Network Provider



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Saturday: 08h00 to 12h00

Closed on Sundays and public holidays



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The digital membership card is available on the GEMS Member app and is convenient for members and their beneficiaries. Make use of the multi-function GEMS Member app to interact with the Scheme at home or on the go to make your life easier. Use the QR code to download the GEMS Member App.