

MEDIHELP

Optometry

Service Provider Guide 2026

1 SUMMARY OF OPTOMETRY BENEFITS

The following are applicable to the MedPlus, MedElite, MedPrime, MedReach and MedAdd options:

- One optometric examination (11001) per beneficiary per 24 month period.
- 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 period, subject to the applicable limits.
- Frames are subject to applicable sub-limits.
- Benefits are for either spectacles or contact lenses, not both.
- Tariff codes are restricted to Opticlear tariff codes.
- 15% Discount (on material) is applicable and must be credited to the member's account, calculated on the claim amount per item. Claims to be submitted to Opticlear without discount deducted (full amount).
- Accounts from non-network optometrists will be refunded to the member at Scheme Out of Network rates.
- Upgrades or services outside the list of benefits 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 benefit.

For the MedSaver option, benefits are subject to the available savings (15% discount is applicable on material).

For the MedMove option, benefits are restricted to one optometric examination (11001) per beneficiary per 24 month period. A co-payment of R135 is applicable.

NOTE: Benefits listed are subject to the Scheme Rules.

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

2 OPTOMETRY TARIFFS

The Opticlear tariffs for 2026 are available on the Opticlear website (www.optics.co.za).

3 QUALIFYING CRITERIA

The optometry benefit is subject to qualifying norms (MedPlus, MedElite, MedPrime, MedReach and MedAdd).

The following are applicable to these options:

• 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 at the discounted rate of 15% (The discount is allocated to the member).
- The Scheme accepts no responsibility for accounts for extras chosen by beneficiaries that are excluded as per the Scheme Rules or Opticlear (Optometry Management Program).
- All additional out-of-benefit items are to be reflected on the claim, but they will not be funded by the scheme - these will be funded from savings – if available. 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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