



YOUR GEMS OPTOMETRY PROVIDER GUIDE 2023

Introduction

Welcome to the GEMS Optometry Management Programme. GEMS always strives to provide members with access to excellent, comprehensive and affordable healthcare. To achieve this, GEMS understands that Optometrists play an essential role in the provision of quality Optometry care to our members. Our enhancement to the optometry benefits demonstrates our commitment to improve members' access to the excellent healthcare to which they have become accustomed.

Summary of Optometry Benefits

The following are applicable to the GEMS Tanzanite One and Beryl options for 2023:

- One eye examination per beneficiary per 12 month period calculated from the month within which same was last rendered to the affected beneficiary ("Eye Examination Cycle"); and
- Examination includes visual, binocular stability and pathology evaluation (including tonometry) and diagnosis.
- One pair of spectacles (frame plus lenses) at the applicable package tariff per beneficiary per 24 month period calculated from the date services were last rendered to the beneficiary, subject to the benefit limit.

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The below table indicates the limits applicable per option:

Benefit Option	Limit Available	
Tanzanite One	Limit of R1 380 per beneficiary/dependant every two (2) years	
Beryl	Limit of R1 748 per beneficiary/dependant every two (2) years	

- Frame choice is from a provider-designated range. Lenses are standard-quality lenses, single vision or bifocal (where appropriate).
- Should the beneficiary select a frame from outside the designated range, R266 must be credited towards this frame in lieu of the 'package' frame and the member will be liable for the difference.
- Benefits are for either spectacles or contact lenses, not both.
- No cash refund or credit is available in lieu of the optometry benefit.
- All providers to use the GEMS Optometry Network tariff codes.
- Accounts from non-network Optometrists will be rejected.
- Upgrades or services outside of the benefit option will not be covered by the Scheme and will be for the patient's account.
- The prescribed minimum benefit entitlement for post cataract surgery has been enhanced for the 2023 benefit year. Prescribed minimum benefit entitlement for post-cataract surgery: Bifocal lenses and frame up to the value of R1 585 with a sub-limit of R266 for the frame will apply where the Optometry benefit is exhausted.

The following are applicable to the GEMS Emerald Value, Emerald and Onyx options for 2023:

- One Optometric examination per beneficiary per 12-month period (subject to clinical necessity), calculated from the date which 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 which services were last rendered to the beneficiary, subject to the applicable limits and Scheme rate.

BENEFIT OPTION	LIMIT AVAILABLE
Emerald Value	Annual family limit available of R5 400 Limit of R2 817 per beneficiary/dependant every two (2) years Frame is limited to R 1 497. Fitting (nylon or rimless, etc.) will not be covered.
Emerald	Annual family limit available of R5 400 Limit of R2 817 per beneficiary/dependant every two (2) years Frame is limited to R 1 497. Fitting (nylon or rimless, etc.) will not be covered.
Onyx	Annual family limit available of R6 392 Limit of R3 325 per beneficiary/dependant every two (2) years. Frame is limited to R2 404. Fitting (nylon or rimless, etc.) will not be covered.

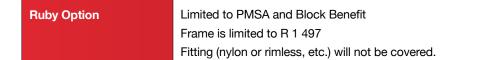
The below table indicates the limits applicable per option:

- Benefits are for either spectacles or contact lenses, not both.
- All providers to use the GEMS Optometry Network tariff codes.
- Accounts from non-network optometrists will be considered for refund to the member per the Scheme refund process that the member must adhere to. Refunds to the member, when approved will be paid according to the Scheme rules and funding protocols.
- Upgrades or services outside the benefit option will not be covered by the Scheme but are for the patient's account.
- Spectacles with accommodative single vision lenses or intermediate-to-near multifocal lenses will be covered up to the relevant clinically appropriate benefit per clinical criteria.
- The prescribed minimum benefit entitlement for post cataract surgery has been enhanced for the 2023 benefit year. Prescribed minimum benefit entitlement for post cataract surgery: Bifocal lenses and frame up to the value of R1 585 with a sub-limit of R266 for the frame will apply where the Optometry benefit is exhausted.

The following is applicable to the GEMS Ruby option for 2023:

- One Optometric examination per beneficiary per financial year, starting on 01 January and ending on 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, subject to prescribed minimum benefits

The below table indicates the limits applicable on the Ruby option:



- Benefits are for either spectacles or contact lenses, not both.
- All providers to use the GEMS Optometry Network tariff codes.
- Accounts from non-network optometrists will be considered for refund to the member per the Scheme refund process that the member must adhere to. Refunds to the member, when approved will be paid according to the Scheme rules and funding protocols.
- Upgrades or services outside the benefit option will not be covered by the Scheme but are for the patient's account.
- Spectacles with accommodative single vision lenses or intermediate to near multifocal lenses will be covered up to the relevant clinically appropriate benefit per clinical criteria.
- The prescribed minimum benefit entitlement for post cataract surgery has been enhanced for the 2023 benefit year. Prescribed Minimum Benefit (PMB) entitlement for post cataract surgery: Bifocal lenses and frame up to the value of R1 585 with a sub-limit of R266 for the frame will apply where the Optometry benefit is exhausted.

Childhood screening (all options) for 2023:

- Preventative health screening is one of the most important healthcare strategies to facilitate early diagnosis and treatment of disease as well as to improve quality of life.
- GEMS offers comprehensive childhood screening for children.
- This screening is a once in a lifetime childhood Optometry screening benefit across all options for beneficiaries up to and including age seven.
- Optometrists are encouraged to utilize the screening benefit available.
- Screening benefits when billed cannot be billed in combination with other codes as this is a standalone event.

Tariff code	Code description	Tariff amount	Service
94000	Individual Child Screening	R 99.90	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).

During a child screening event, per industry norms, the following usually is noted:

- Unaided visual acuity: Assessment of the habitual acuity at distance and near
- Acuity through a +1.50 dioptre sphere lens: To eliminate the possibility of the patient accommodating during the assessment of 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 (NPC): Assessment of ocular movements, alignment of the eyes, and to determine any convergence weakness
- Ophthalmoscopy: To detect and evaluate various retinal vascular diseases or eye diseases and pupil response.

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

Optometry tariffs for 2023

The GEMS Optometry Network tariffs for 2023 are available on the GEMS website (www.gems.gov.za).

Tariff code	Code description	Tariff amount	Service
90011	Vision Exam (when no Material Supplied)	R 261.20	Consultation only
93200	Combined V/Exam+Frame+S/Vision Standard	R 922.20	Consultation, frame and single vision standard lenses
93201	Combined V/Exam+Frame+S/Vision Surfaced	R 989.50	Consultation, frame and single vision surfaced lenses
93300	Combined V/Exam+Frame+Bifocal	R 1 573.10	Consultation, frame and bifocal lenses

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

- Benefits will not be paid if these codes are not reflected in your claim.
- For a single vision or bifocal package, your claim must reflect only the package tariff code and not the individual consultation and other tariff codes, e.g., for the bifocal package only claim 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 rate per the approved GEMS tariff file for Optometry services.

The GEMS Optometry Network tariffs for 2023 will apply to the Ruby, Emerald Value, Emerald and Onyx options.

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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 are applicable to the GEMS Tanzanite One and Beryl options for 2023:

- 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 are applicable to the GEMS Ruby, Emerald, Emerald Value and Onyx options for 2023:

- 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 will not fund claims received for items excluded from benefits as per the Scheme rules.
- Should members on the Tanzanite One and Beryl options select a non-designated frame, the claim
 must reflect the package code tariff as well as the selected frame at the marked price, less R266.
 Only R266 will be paid towards the frame. The balance is 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 on all claims.
- No sunglasses or lenses with a tint over 35% will be covered (spectacles including frames, will be rejected) except for in cases with albinism and proven photophobia, subject to pre-authorisation.



Disclaimer applicable on benefit confirmations:

Benefits listed are subject to the 2023 registered Scheme rules, Optometry Management Programme and in the event of a dispute the Registered Scheme rules takes precedence.

Benefits may also be subject to a beneficiary limit every two (2) financial years, calculated from 1 January of the year within which any optical service was first rendered to any beneficiary following the end of such previous two-year period (if any) ended on 31 December. The family limit is calculated per option either annually as of 1 January. Benefits on the Ruby option are subject to one (1) financial year.

Insured benefit confirmations ideally will not change,



provided that the member has no outstanding accounts which will impact the benefit limits,



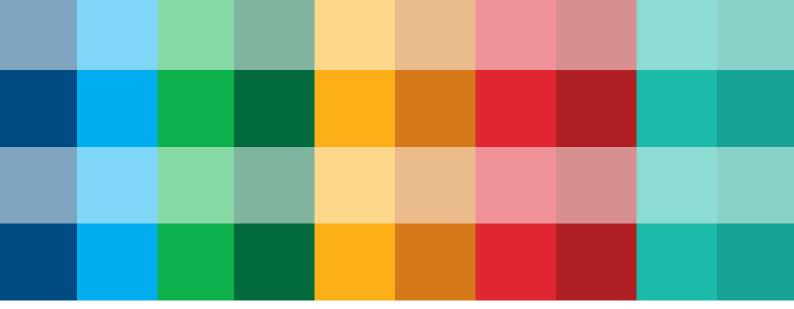
the membership is active, and



the claim is in line with the requirements of Optometry Management Programme.

Optometrists are encouraged to educate members on the different treatment options and what is available per the member's benefit option. Where members may change options, optometry benefits may be affected. Providers are encouraged to check the benefit option at each visit to be able to discuss treatment vs available benefits and potential shortfalls with the member accordingly. Benefit limits and tariff rates may vary from option to option and are subject to available limits (per family, or per beneficiary) and in line with the option structure.

The Scheme does not cover optometry devices that are not regarded as clinically essential or desirable.



Contact details

Monday – Friday: 08h00 – 17h00 Saturday: 08h00 – 12h00 Closed on Sundays and public holidays



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GEMS Contact Centre 0860 436 777 for provider queries 0860 00 4367 for member queries

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GEMS Emergency Services 0800 444 367

GEMS Fraud hotline 0800 212 202 gems@thehotline.co.za

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





