



## Optical Benefit (Core Saver and Plus Plans)

### Who we are

Bankmed (referred to as 'the Scheme'), registration number 1279, is a non-profit organisation, registered with the Council for Medical Schemes. Discovery Health (Pty) Ltd (referred to as 'the administrator') is a separate company and an authorised financial services provider (registration number 1997/013480/07) which takes care of the administration of your membership for the Scheme.

### Overview

The Optical Benefit covers healthcare services in respect of eyes, vision, visual systems and the processing of visual information.

This document will explain the benefit for 2022 and provides details on how the benefit works for your specific Plan.

#### Terms used in the document:

Term	Meaning
Day-to-day benefits	These are the funds available in your Medical Savings Account or under the Above Threshold Benefit, applicable to the Plus Plan only
Scheme Rate	This is the rate at which Bankmed will pay Healthcare Professional accounts

### Optometry Benefit on your Plan

#### Core Saver Plan

We pay for optical benefits from the available funds in your Medical Savings Account up to 100% of the Scheme Rate for the Bankmed Optometry Network.

#### Plus Plan

A limit of R4 880 is available for each member a year. We pay up to 100% of the Scheme Rate for the Bankmed Optometry Network. This limit applies to claims paid from your Medical Savings Account or Above Threshold

Benefit. This is not a separate benefit, you need to have funds in your Medical Savings Account or have reached your Above Threshold Benefit, before we pay up to this limit.

If you join Bankmed after January, you won't receive the full R4 880, because it is calculated by counting the remaining months of the year.

The optical cover includes professional services, cover for prescription lenses, contact lenses and readymade readers (through optometrists only). We pay up to 100% from your available Medical Savings Account for frames and lens add-ons. Frames and extras do not accumulate towards reaching the Annual Threshold and are not covered as an Above Threshold Benefit.

### **What to do when you pay cash**

For cash payments, you receive the discount immediately and you pay the amount after the 20% discount has been deducted. Once you have paid, you must submit the invoice and proof of payment to us and we will pay the claimed amount as reflected on the invoice.

### **Complaints process**

You may lodge a complaint or query with Bankmed directly on 0800 BANKMED (0800 226 5633) or address a complaint in writing directly to the Principal Officer. Should your complaint remain unresolved, you may lodge a formal dispute by following Bankmed's internal disputes process.

Members, who wish to approach the Council for Medical Schemes for assistance, may do so in writing to: Council for Medical Schemes Complaints Unit, Block A, Eco Glades 2 Office Park, 420 Witch-Hazel Avenue, Eco Park, Centurion, 0157 or via e-mail at [complaints@medicalschemes.co.za](mailto:complaints@medicalschemes.co.za). Customer Care Centre: 0861 123 267/website [www.medicalschemes.co.za](http://www.medicalschemes.co.za).

