



Optical Benefit 2019

Who we are

SAB Medical Aid (the Scheme), registration number 1209, is the medical scheme. This is a non-profit organisation, registered with the Council for Medical Schemes and administered by Discovery Health (Pty) Ltd, registration number 1997/013480/07, an authorised financial services provider.

Optical benefits

You can get a discount

You can get a 20% discount on your frames and eyeglass lenses when you visit an optometrist in the Preferred Provider Optometry Discount Network.*.

The discount is immediate at point of sale as a value-added benefit to help preserve your available funds.

The discount is only applicable to frames, eyeglass lenses and add-ons.

The discount is not available for contact lenses and professional services such as the fees for the eye examination.

*The MaPS tool on the website helps you find Healthcare Providers in the Preferred Provider Optometry Discount Network.

How the discount is calculated

The 20% discount is calculated on the Optical Assistant Rate and that amount is the Scheme Rate.

Example: R1 000 = Optical Assistant Rate, Scheme Rate would be R1 000 – 20% = R800

(The Optical Assistant Rate is a guide optometrists use for billing purposes.)

What to do when you pay cash at an Optometry Discount Network Provider

You are not required to pay cash at an Optometry Discount Network Provider – they will submit the claim to the Scheme on your behalf. In the event that you do pay cash up front, the discount is immediate and you pay the amount that is reached after the 20% discount has been applied. Once you have paid, you must submit the proof of payment to us and we will pay you the amount as shown on the invoice.

Optometry Benefit on your Option

Comprehensive Option

You have cover for eye examinations and tests from your Day-to-day Benefit. We pay 100% of the claimed amount or the Scheme Rate (whichever is lower) if you use an optometrist in the Preferred Provider Optometry Network. If you do not use an optometrist in the network, we pay 80% of the claimed amount or the Scheme Rate, whichever is lower.

You can get a 20% discount on your frames and eyeglass lenses when you visit an optometrist in the Preferred Provider Optometry Network. Frames and readers are paid from your Optical limit, once every two years. One pair of eyeglass lenses are paid from your Day-to-day Benefit per year, with a sub-limit for lens hardening and tinting up to 35%.

Contact lenses do not qualify for a 20% discount. They are covered from your annual Contact lenses limit at 100% of claimed amount or the Scheme Rate (whichever is lower) via preferred network Optometrist or 80% of the claimed amount or the Scheme Rate (whichever is lower) when a non-Network Provider is used.

Consultations with an Ophthalmologist will be covered from your Consultations and Visits limit, at 80% of the claimed amount or the Scheme Rate, whichever is lower. If we have negotiated rates with the specialist, we will pay for specific treatments up to the agreed rate. If you don't use a specialist in the network, you will be responsible for any shortfall between what the Healthcare Provider charges and the Scheme Rate - a 20% co-payment will apply.

The MaPS tool on the website helps you find Healthcare Provider in the network.

As a member of the SAB Medical Aid you have additional Wellness Benefits. As part of your Wellness Benefits, you have access to a Glaucoma screening test once every two years if you are between the age of 40 and 50, and one test every year if you are over the age of 50.

Essential Option

You have cover for eye examinations and tests from your Overall Annual Limit, at 100% of claimed amount or the Scheme Rate (whichever is lower) via preferred network Optometrist or 80% of the claimed amount or the Scheme Rate (whichever is lower) when a non-Network Provider is used.

You can get a 20% discount on your frames and eyeglass lenses when you visit an optometrist in the Preferred Provider Optometry Network. Frames, eyeglass lenses and readers are paid from your Optical limit up to the Overall Annual Limit, once every two years.

Contact lenses are not covered on your Option.

Consultations with an Ophthalmologist will be covered from your Consultations and Visits limit, at 80% of the claimed amount or the Scheme Rate, whichever is lower. If we have negotiated rates with the specialist, we will pay for specific treatments up to the agreed rate. If you don't use a specialist in the network, you will be responsible for any shortfall between what the Healthcare Provider charges and the Scheme Rate – a 20% co-payment will apply

The MaPS tool on the website helps you find Healthcare Provider in the network.

As a member of the SAB Medical Aid you have additional Wellness Benefits. As part of your Wellness Benefits, you have access to a Glaucoma screening test once every two years if you are between the age of 40 and 50, and one test every year if you are over the age of 50.

Contact us

You can call us on 0860 002 133 or visit our website at www.sabmas.co.za for more information.

Complaints process

You may lodge a complaint or query with SAB Medical Aid by completing an online *complaints* form at www.sabmas.co.za or address a complaint in writing directly to the Principal Officer. If your complaint remains unresolved, you may lodge a formal dispute by following the Scheme's internal dispute process on the SABMAS website. 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 email complaints@medicalschemes.com. Customer Care Centre: 0861 123 267 / website www.medicalschemes.com