

OPTOMETRY BENEFIT

DISCOVERY HEALTH MEDICAL SCHEME
2025



Overview

The Optometry Benefit provides cover for eye-care. Your cover for eye-care depends on the health plan you choose. Certain optometry-related healthcare services may be unlimited, such as eye tests, and other services, such as cover for hardware and surgery, are subject to the day-to-day benefit limits available on your health plan, where applicable.

This document explains the Optometry Benefit and gives details on the benefits available to you according to your specific health plan.

About some of the terms we use in this document

There may be some terms we refer to in the document that you may not be familiar with. Here are the meanings of these terms.

TERMINOLOGY	DESCRIPTION
Above Threshold Benefit (ATB)	Available on the Executive, Comprehensive and Priority plans Once the day-to-day claims that you have sent to us add up to the Annual Threshold, we pay the rest of your day-to-day claims from the Above Threshold Benefit, at the Discovery Health Rate or a portion of it. The Executive Plan has an unlimited Above Threshold Benefit (ATB), the Comprehensive and Priority plans have a limited ATB.
Co-payment	This is an amount that you have to pay towards a healthcare service. The amount can vary, depending on the type of healthcare service, the place of service and whether the amount that the service provider charges is higher than the rate that we cover. If the co-payment amount is higher than the amount charged for the healthcare service, you will have to pay for the cost of the healthcare service.
Day-to-day benefits	The day-to-day benefits are the available money allocated to the Medical Savings Account, cover from the limited Above Threshold Benefit or defined benefits for day-to-day healthcare services. The level of day-to-day benefits depends on the health plan you choose.
Discovery Health Rate (DHR)	This is the rate that we pay for healthcare services from hospitals, pharmacies, healthcare professionals and other providers of relevant healthcare services.
Medical Savings Account (MSA)	Available on the Executive, Comprehensive, Priority and Saver plans You have access to a Medical Savings Account (MSA) at the beginning of each year or when you join the Scheme. You pay this amount back in equal portions as part of your monthly contribution. We pay your day-to-day medical expenses from the money allocated in your MSA. These day-to-day expenses are for general practitioner (GP) and specialist consultations, acute medicine, and radiology and pathology services, among others. You can choose to have your claims paid from the MSA, either at the Discovery Health Rate or at cost. If you have unused money in the account, this will carry over to the next year. If you leave the Scheme or change your plan during the year and have used more of the MSA money than what you have contributed, you will need to pay the difference to us.

Benefits available for your plan type

EXECUTIVE PLAN
<p>There is a limit of R10,550 per person for the year. This is not a separate benefit and limits apply to claims paid from your Medical Savings Account (MSA) and from the Above Threshold Benefit (ATB). We pay up to 100% of the Discovery Health Rate (DHR) for the optometrist.</p> <p>The optometry limit covers lenses, frames, contact lenses and surgery or any healthcare service to correct refractive errors of the eye, like excimer laser. Eye tests are not subject to the limit and are paid from the available day-to-day benefits.</p> <p>If you join the Scheme after January, you will not get the full R10,550, because it is calculated by counting the remaining months of the year.</p>



COMPREHENSIVE SERIES

There is a limit of R7,250 per person for the year. This is not a separate benefit and limits apply to claims paid from your Medical Savings Account (MSA) and from the limited Above Threshold Benefit (ATB). We pay up to 100% of the Discovery Health Rate (DHR) for the optometrist. We pay these claims up to the Above Threshold Benefit (ATB) limit or the benefit limit, whichever you reach first.

The optometry limit covers lenses, frames, contact lenses and surgery or any healthcare service to correct refractive errors of the eye, like excimer laser. Eye tests are not subject to the limit and is paid from the available day-to-day benefits.

If you join the Scheme after January, you will not get the full R7,250 because it is calculated by counting the remaining months of the year.

PRIORITY SERIES

There is a limit of R6,600 per person for the year. This is not a separate benefit and limits apply to claims paid from your Medical Savings Account (MSA) and from the limited Above Threshold Benefit (ATB). We pay up to 100% of the Discovery Health Rate (DHR) for the optometrist. We pay these claims up to the Above Threshold Benefit (ATB) limit or the benefit limit, whichever you reach first.

The optometry limit covers lenses, frames, contact lenses and surgery or any healthcare service to correct refractive errors of the eye, like excimer laser. Eye tests are not subject to the limit and is paid from the available day-to-day benefits.

If you join the Scheme after January, you will not get the full R6,600, because it is calculated by counting the remaining months of the year.

SAVER SERIES

These healthcare services are paid from your available funds allocated to your Medical Savings Account (MSA) up to 100% of the Discovery Health Rate (DHR).

SMART SERIES

Classic Smart Plan

One eye test per member per year at any Smart Network optometrist with a R70 co-payment for the test.

Frames and lenses:

You will have to pay the account because this health plan does not offer additional day-to-day benefits for this healthcare service.

Essential Smart, Essential Dynamic Smart and Active Smart plans

One eye test per member per year at any Smart Network optometrist with a R125 co-payment for the test.

Frames and lenses:

You will have to pay the account because this health plan does not offer additional day-to-day benefits for this healthcare service.

Visit www.discovery.co.za under Medical aid > Find a healthcare provider or click on Find a healthcare provider on the Discovery Health app to find a Smart Network optometrist.

CORE SERIES

You will have to pay the account because this health plan does not offer day-to-day benefits.



KEYCARE SERIES

KeyCare Plus, KeyCare Start and KeyCare Start Regional

You are covered for:

- One eye test per person on the membership
- One pair of clear single vision bifocal or multifocal lenses, or
- A set of basic contact lenses (clear contact lenses with no added colour, tints or designs)

You must go to an optometrist in the KeyCare Optometry Network. This cover is only available every two benefit years (24 months from last date of service) when making use of a network optometrist who is part of the KeyCare Network optometrists.

Visit www.discovery.co.za under Medical aid > Find a healthcare provider or click on Find a healthcare provider on the Discovery Health app to find a KeyCare Network optometrist.

KeyCare Core

You will have to pay the account because this health plan does not offer day-to-day benefits for this healthcare service.

Value-added services

You can get a 20% discount on frames

You can get a 20% discount on your frames and eyeglass lenses when you visit an optometrist in the Optometry Network. The discount is applied immediately at point-of-sale, as a value-added benefit. The discount is available on all health plans except the KeyCare plans.

The discount is only applicable to hardware items such as frames, eyeglass lenses and their add-ons. The discount is not available for contact lenses and professional services such as eye examination fees.

Visit www.discovery.co.za under Medical aid > Find a healthcare provider or click on Find a healthcare provider on the Discovery Health app to find a participating optometrist in the network.

How the discount is calculated

The 20% discount is calculated on the Optical Assistant Rate which is a guide optometrists use for billing purposes.

What to do when you pay cash

For cash payments, you get the discount immediately and you pay the amount that is due after the 20% discount has been applied. If you are on a health plan with available day-to-day benefits, you can submit the invoice and proof of payment to us, and we will pay the claimed amount as shown on the invoice.



Working to care for and protect you

Our goal is to provide support for you in the times when you need it most.

How to contact us

Tel (members): 0860 99 88 77, Tel (health partners): 0860 44 55 66

Go to www.discovery.co.za to Get Help or ask a question on WhatsApp. Save this number 0860 756 756 on your phone and say "Hi" to start chatting with us 24/7.

PO Box 784262, Sandton, 2146. 1 Discovery Place, Sandton, 2196.

What to do if you have a complaint

01 | TO TAKE YOUR QUERY FURTHER:

If you have already contacted the Discovery Health Medical Scheme and feel that your query has still not been resolved, please complete our online complaints form on www.discovery.co.za. We would also love to hear from you if we have exceeded your expectations.

02 | TO CONTACT THE PRINCIPAL OFFICER:

If you are still not satisfied with the resolution of your complaint after following the process in Step 1 you are able to escalate your complaint to the Principal Officer of the Discovery Health Medical Scheme. You may lodge a query or complaint with Discovery Health Medical Scheme by completing the online form on www.discovery.co.za or by emailing principalofficer@discovery.co.za.

03 | TO LODGE A DISPUTE:

If you have received a final decision from Discovery Health Medical Scheme and want to challenge it, you may lodge a formal dispute. You can find more information of the Scheme's dispute process on the [website](#).

04 | TO CONTACT THE COUNCIL FOR MEDICAL SCHEMES:

Discovery Health Medical Scheme is regulated by the Council for Medical Schemes. You may contact the Council at any stage of the complaints process, but we encourage you to first follow the steps above to resolve your complaint before contacting the Council. Contact details for the Council for Medical Schemes: Council for Medical Schemes Complaints Unit, Block A, Eco Glades 2 Office Park, 420 Witch-Hazel Avenue, Eco Park, Centurion 0157 | complaints@medicalschemes.co.za | 0861 123 267 | www.medicalschemes.co.za.

Your privacy is important to us

We hold your privacy in the highest regard. Our unwavering commitment to protecting your personal information and ensuring the security and confidentiality of your data is clearly outlined in our Privacy Statement. You can view our latest version on www.discovery.co.za > Medical aid > About Discovery Health Medical Scheme.