

1 April 2018

FEDHEALTH BLUE DOOR PLAN TARIFFS AND RULES

2018

ISO LESO BRONZE OPTION

BENEFIT REQUIRED	CODE	ISO LESO MEMBERS	NON MEMBERS
Vision Examination, Single Vision Lenses and Frame	93200	R 725	R 635
Vision Examination, Bifocal Lenses and Frame	93300	R 1160	R 1030
Vision Examination, Multifocal Lenses and Frame	93400	R 1565	R 1370
Contact Lens Benefit (includes Vision Examination)	93800	R 1565	R 1030
Vision Examination Only* If no spectacles are clinically required	11001/11081/ 90011	R 525	R 405
PEP PROVIDERS	02PEP	R 50	n/a
Lens Enhancements	No Benefit Applies	Optical Assistant Medical Aid Rate	Optical Assistant Medical Aid Rate

*If claimed in benefit period further material claim will need motivation.

Refer to addendum ISO LESO BRONZE OPTION for details.