

DIABETIC RETINOPATHY

What diabetic retinopathy is

Diabetic retinopathy is a common complication of diabetes mellitus that affects the eyes. It is caused by damage to the back of the eye, and it can cause vision loss and even blindness if it is not managed. When diabetic retinopathy is detected early (often before the start of symptoms), treatment can be very effective at preventing loss of vision.

There is strong evidence to support routine screening for diabetic retinopathy. This is why we have a screening programme for diabetic retinopathy.

Members who have access to the diabetic retinopathy screening

Children and adults on all benefit options for all the schemes Discovery Health administers have cover for the screening, if they are registered on the Chronic Illness Benefit (CIB) for diabetes type 1 or type 2. These members do not have to get authorisation to go for the screening.

This new screening programme consists of three levels of screening:

- Primary grading examination
- Secondary grading examination
- Tertiary grading examination

Most members can be screened for diabetic retinopathy by visiting a participating optometrist, but some members can only be screened by an ophthalmologist (eye doctor).

Members who qualify for screening by an ophthalmologist

- Members younger than 18 years of age
- Members who have visual symptoms, including:
 - Vision loss that cannot be corrected
 - Blurred vision
 - Floaters (black or grey dots, strings or cobwebs that drift around in your vision)
 - Members who are pregnant
 - Members with a history of retinal surgery, laser treatment of the retina or intraocular injections

If you do not have to go to an ophthalmologist, your optometrist or primary care provider can do this screening test for you, if they have the necessary equipment. You can visit our website to find an optometrist or primary care provider who is part of our network for retinopathy screening.

How this procedure works

For most members, the screening starts at the primary screening. If the healthcare professional finds anything to be concerned about, they will refer you for the next level of screening.

How the primary grading examination works

A doctor or optometrist will use a special camera to take photographs of the back of your eyes. They will then upload the photographs to a computer system with artificial intelligence, which will detect if you need further screening.

You will get a screening report immediately. If the examination does not find any signs of retinopathy, you will be asked to have another screening 12 months later.

There will be no cost to you when a doctor or optometrist in our network for diabetic screening does the primary grading examination. If you are not sure if your doctor or optometrist is part of our network for diabetic screening, speak to your health coach. They can help you to make sure you have cover for the screening.

If the primary examination finds signs of retinopathy, you will need an eye examination by an optometrist; in other words, you will go for a secondary grading examination.

How the secondary grading examination works

A secondary grading examination is a more comprehensive examination performed by an optometrist. It is very important to do your secondary grading examination, immediately after your primary grading examination.

There will be no cost to you when an optometrist in our network for diabetic screening does the secondary grading examination. If you are not sure if your doctor or optometrist is part of our network for diabetic screening, speak to your health coach.

The optometrist will decide if they must refer you to an ophthalmologist for a tertiary grading examination. If they think it is necessary, they will refer you.

How the tertiary grading examination works

When you visit the ophthalmologist, they will confirm if there are signs of diabetic retinopathy using:

- The information the optometrist sent from the primary and secondary grading examinations
- The results of any extra tests the ophthalmologist thinks are necessary

We pay the consultations and tests up to the scheme rate and you may have to pay the balance of the account if your chosen ophthalmologist charges more than this rate.

You will stay under the care of an ophthalmologist, with individual follow-up consultations and a treatment plan.

You can have one ophthalmologist consultation per year as part of your standard basket of care. If the ophthalmologist confirms your diagnosis of diabetic retinopathy, you will get access to extra consultations as part of your basket of care.

How we pay if you get services that are not part of the benefit

If you choose to get extra tests or use an out-of-network optometrist or doctor, there may be co-payments. We will pay the co-payments from your available day-to-day benefits, such as your Medical

Savings (MSA) or Above Threshold Benefit (ATB), to the maximum of the external medical item limit where applicable. Members who have chosen health plans without day-to-day benefits will have to pay the co-payments from their own pocket.

Contact us

For queries relating to the Diabetes Care Programme, please contact your Care Navigators on 0860 44 44 39 or send an email to Members_DCP@retailmedicalscheme.co.za