

VOUCHERS AT A GLANCE

SINGLE VISION			CYL
SPHERE	0.25–2.00	2.25–6.00	Over 6
Plano – 6.00	A £38.70		
6.25 – 9.75		B £58.70	
10.00 – 14.00		C £86.00	
Over 14.00			D £194.10

BIFOCALS			CYL
SPHERE	0.25–2.00	2.25–6.00	Over 6
Plano – 6.00	E £66.80		
6.25 – 9.75		F £84.80	
10.00 – 14.00		G £110.10	
Over 14.00			H £213.40

HES Voucher I £198.80

HES Patient Charge £56.40 (per contact lens)

Small glasses / Special facial characteristics supplement: £63.60

	Single Vision	Bifocal	Repair & Replacement (£)	A	B	C	D	E	F	G	H	I
			One lens:	12.05	22.05	35.70	89.75	26.10	35.10	47.75	99.40	92.10
Complex Lenses	£14.50	£37.00	Two lenses:	24.10	44.10	71.40	179.50	52.20	70.20	95.50	198.80	184.20
Prisms (per lens)	£12.50	£15.20	Front of frame:	12.35	Side of frame:	7.30	Whole frame:	14.60				
Tint/Photo (per lens)	£4.30	£4.80	Small Glasses: Front	56.40	Side of frame:	30.50	Whole frame:	63.60				

GOS Sight Test (Primary Eye Examination) Minimum Intervals

Age	Clinical Condition	Interval
Under 16	All patients	1 year
16 – 59	All patients	2 years
60 – 69	All patients	1 year 2 years
70 & over	All patients	1 year
Any age	Diabetic	1 year
Any age	Glaucoma	1 year 2 years
40 & over	Glaucoma family history (not in monitoring scheme)	1 year 1 year
Any age 40 & over	Ocular hypertension (not in monitoring scheme)	1 year
Under 7	BV anomaly / corrected refractive error	6 months
7 – under 16	BV anomaly or rapidly progressing myopia	6 months

England, Wales

Early Re-test Reason Codes

1.	Patient is at risk of frequent changes of prescription for reasons not requiring medical referral or for reasons already known to a medical practitioner.
2.	Patient has pathology likely to worsen, for example age-related macular degeneration, cataract, corneal dystrophy or congenital anomalies.
3.	Patient has presented with symptoms or concerns requiring ophthalmic investigation: 3.1 resulting in referral to a medical practitioner; or 3.2 resulting in issue of a changed prescription; or 3.3 resulting in either no change or no referral (the patient's record should indicate any symptoms shown to support this category of claim if necessary).
4.	4.1 Patient needing complex lenses; or 4.2 with corrected vision of less than 6/60 in one eye.
5.	Patient has: 5.1 presented for a sight test at the request of a medical practitioner; or 5.2 is being managed by an optometrist under the GOC referral rules, for example suspect visual fields on one occasion which is not confirmed on repeat, or abnormal IOP with no other significant signs of glaucoma; or 5.3 identified in protocols as needing to be seen more frequently because of risk factors.
6.	Other unusual circumstances requiring clinical investigation.

Scotland

Supplementary Codes

2.0	Cycloplegic refraction following primary examination
2.1	Paediatric follow-up
2.2	Referral refinement/repeat or follow-up procedures
2.3	Suspect glaucoma
2.4	<60 dilation and biomicroscopy
2.5	Anterior segment disorder
2.6	Cycloplegic refraction at request of hospital
2.7	Postoperative cataract examination
2.8	Reduced acuity, sudden vision loss, flashes and floaters or neurological symptoms – requires sight test, macular assessment and slit lamp biomicroscopy (possible mydriasis)

Primary Examination Codes

7	Patient new to practice (no access to patient's record)
8	Patient aged 16 (who should have attended at age 15 but did not attend until age 16)

N. Ireland

In Northern Ireland the reason for all early sight tests must be recorded in full on the patient's record and sufficient detail must also be given in the remarks box of the GOS (ST) form to allow an optometric adviser to see clearly why an early sight test has occurred. The exception is for sight tests within three months of the previous test where prior approval must be sought from the Ophthalmic Department of BSO before carrying out the test.