



Prescribed Minimum Benefit (PMB) Treatment Baskets 2023

Who we are

Engen Medical Benefit Fund (the Fund), registration number 1572, 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.

Treatment baskets for the Prescribed Minimum Benefit (PMB) Chronic Disease List (CDL) conditions

The Prescribed Minimum Benefit (PMB) Chronic Disease List (CDL) is a list of conditions which all medical schemes need to cover on all the benefit option they offer to their members. This cover includes funding for the diagnosis, treatment and ongoing care for the listed conditions.

Read further to understand what procedures, investigations and consultations are covered for both the diagnosis and ongoing management for each listed condition.

We will only pay Prescribed Minimum Benefit (PMB) claims if your condition has been authorised on the Chronic Illness Benefit

Only claims for procedures and consultations listed in the Prescribed Minimum Benefit (PMB) treatment baskets will be paid from the Chronic Illness Benefit. These are pro-rated based on the date of authorisation of your chronic condition. Where you have cover for the same procedure or test in more than one basket, we limit payment to the number of procedures or tests in the basket that has the highest number.

How we pay for tests to diagnose your condition

If you have been recently diagnosed with and approved for cover for a Chronic Disease List (CDL) condition, we will pay for the tests and procedures in the diagnostic basket in full. We will also pay in full for the consultation with the healthcare provider who made the diagnosis. We will only pay for these tests, procedures and consultation provided that you were an active and valid member of the Fund at the time of the diagnosis and the relevant ICD-10 diagnosis codes are on the claim. Please ask your healthcare provider to provide the date of diagnosis of your condition(s) on the CIB application form to assist us to pay your claims from the correct benefit.

We will pay tests and procedures for your condition according to the treatment baskets

We pay claims from the treatment baskets for the ongoing management of your condition from healthcare providers such as radiologists, dietitians and podiatrists in full.





We pay claims from pathologists who we have a payment agreement with in full up to the agreed rate. We will pay up to a maximum of the Fund Rate if you use a pathologist who we do not have a payment arrangement with. You will have to pay any difference between what is charged and what we pay.

We pay for claims from Diabetes educators up to the agreed rate subject to the limit being available, and the provider being on the Diabetes educator network.

How we pay GP consultations related to your condition

We pay for 4 consultations a year that are related to your approved condition at a GP who is a designated service provider up to the agreed rate. We pay up to a maximum of 100% of the Fund Rate for consultations with a GP who is not a designated service provider. You must pay the difference between what is charged and what we pay.

How we pay specialist consultations related to your condition

Depending on your condition, we pay for a specific number of consultations with a specialist, as listed in the treatment baskets. We will pay the consultation at a specialist who is a designated service provider up to the agreed rate. We pay up to a maximum of 100% of the Fund Rate for consultations with a specialist who is not a designated service provider. You must pay any difference between what is charged and what we pay.

Please make sure your claims have the appropriate ICD-10 diagnosis code

To make sure that we pay your claims from the correct benefit, we need the claims from your healthcare providers to be submitted with the relevant ICD-10 diagnosis codes. Please ask your doctor to include your ICD-10 diagnosis codes on the claims they submit and on the form that they complete, when they refer you to pathologists and radiologists for tests. This will enable pathologists and radiologists to include the relevant ICD-10 diagnosis codes on the claims they submit to ensure that we pay your claims from the correct benefits.

We will not pay claims from the Chronic Illness Benefit if these requirements are not met

We will not pay claims from the Chronic Illness Benefit if:

- The claims are submitted without the relevant ICD-10 diagnosis codes
- You are not yet registered on the Chronic Illness Benefit for a Prescribed Minimum Benefit (PMB) Chronic Disease List (CDL) condition
- You have exceeded the frequency limit on consultations or tests.





To find the closest GP or specialist on our network, please log on to www.engenmed.co.za, select the MY HEALTHCARE tab, then go to Find a healthcare professional.

Treatment Baskets for Chronic Disease List (CDL) conditions

Condition	Baskets for Chron	stic basket			oing manage	ment basket	
	Procedure or test description	Procedure or test code	Number of procedures or tests we cover	Procedure or test description	Procedure or test code	Number of procedures or tests we cover each year	Number of specialist consultations we cover each year
Addison's	U & E only	4171	1	U & E only	4171	3	1
disease	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	3	
	Cortisol level	4499	1				
	ACTH stimulation testing	4523	1				
Asthma	Flow volume test	1188 or 1186	1	Flow volume test	1188 or 1186	1	1
	Peak flow	1192	1	Peak flow	1192	3	
Bipolar mood disorder	AST – Aspartate aminotransferase	4130	1	AST – Aspartate aminotransferase	4130	2	2
	ALT – Alanine aminotransferase	4131	1	ALT – Alanine aminotransferase	4131	2	
	Thyrotropin (TSH)	4507	1	Thyrotropin (TSH)	4507	1	
	U & E only	4171	1	U & E only	4171	2	
				Lithium – flame ionisation	4067	2	
				Drug level in biological fluid	4081 or 4370 or 4493	3	
				Creatinine	4032 or 4221 or 4223	2	
Bronchiectasis	Sputum MC&S – sputum analysis for infection	3867 & 3881 & 3885 & 3887 & 3895 & 3923 & 3924	1	Sputum MC&S – sputum analysis for infection	3867 & 3881 & 3885 & 3887 & 3895 & 3923 & 3924	4	1
	Flow volume test	1188 or 1186	1	Flow volume test	1186	1	
	Peak flow	1192	1	Peak flow	1192	2]
	X-ray of the chest two views, PA and lateral	30110	1				
Cardiac failure	ECG – Electrocardiogram	1232 or	1	ECG – Electrocardiogram	1232	3	2
		1233 or 1234 or 1235 or 1236			1233 or 1234 or 1235 or 1236	1	





Condition	Diagnos	tic basket		Ongoing management basket			
	Procedure or test description	Procedure or test code	Number of procedures or tests we cover	Procedure or test description	Procedure or test code	Number of procedures or tests we cover each year	Number of specialist consultations we cover each year
Cardiac failure	Echocardiography	3621 & 3622 & 3623 & 3620 & 3625	1	Echocardiography	3621 & 3622 & 3623 & 3620 & 3625	2	
	U & E only	4171	1	U & E only	4171	4	
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	4	
	B-Type natriuretic peptide	4488	1	B-Type natriuretic peptide	4488	1	
	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	4	
	X-ray of the chest two views, PA and lateral	30110	1	X-ray of the chest two views, PA and lateral	30110	1	
	Troponin isoforms	4161	1	Drug level in biological	4081 or	3	
	Glucose – random/fasting	4057	1	fluid	4370 or 4493		
	C-reactive protein	3947	1		4493		
	Full blood count	3755	1				
	Thyrotropin (TSH)	4507	1				
	Total cholesterol	4027	1				
Cardiomyopathy	ECG – Electrocardiogram	1232 or 1233 or 1234 or 1235 or 1236	1	ECG – Electrocardiogram	1232 1233 or 1234 or 1235 or 1236	1	2
	Echocardiography	3621 & 3622 & 3623 & 3620 & 3625	1	Echocardiography	3621 & 3622 & 3623 & 3620 & 3625	2	
	U & E only	4171	1	U & E only	4171	4	
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	4	
	B-Type natriuretic peptide	4488	1	B-Type natriuretic peptide	4488	1	
	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	4	
	Glucose – random/fasting	4057	1	Prothrombin index (PI)	3805	24	
	C-reactive protein	3947	1	Therapeutic drug level: Dosage	3806	24	
	Full blood count	3755	1	Drug level in biological	4081 or	3	
	Thyrotropin (TSH)	4507	1	fluid	4370 or		
	Total cholesterol	4027	1		4493		
	X-ray of the chest two views, PA and lateral	30110	1	X-ray of the chest two views, PA and lateral	30110	1	





Condition	Diagno	stic basket		Ongoing management basket				
	Procedure or test description	Procedure or test code	Number of procedures or tests we cover	Procedure or test description	Procedure or test code	Number of procedures or tests we cover each year	Number of specialist consultations we cover each year	
Chronic obstructive	Flow volume test	1188 or 1186	1	Flow volume test	1186	1	1	
pulmonary disease (COPD)	X-ray of the chest two views, PA and lateral	30110	1	Peak flow	1192	2		
	Alpha-1-antitrypsin	4005	1	Drug level in biological fluid	4081 or 4370 or 4493	2		
Chronic renal disease	ECG – Electrocardiogram	1232 or 1233 or 1236	1	ECG – Electrocardiogram	1232 or 1233 or 1236	2	2	
	Full blood count	3755	1	Full blood count	3755	4		
	U & E only	4171	1	U & E only	4171	4		
	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	4		
	Serum calcium	4016 or 4017 or 4375 or 4376	1	Serum calcium	4016 or 4017 or 4375 or 4376	4		
	Serum phosphates	4109 or 4313	1	Serum phosphates	4109 or 4313	4		
	Serum parathyroid hormone (PTH)	4512	1	Serum parathyroid hormone (PTH)	4512	2		
	Protein: Quantitative	4213	1	Protein: Quantitative	4213	1		
				Platelet count	3797	1		
				Urine analysis (dipstick)	4188	4		
				Iron	4071	2		
				Transferrin	4144	2		
				Ferritin	4528	2		
				Dietitian	84200 or 84201 or 84202 or 84203 or 84204 or 84205	1		
Coronary artery disease	ECG – Electrocardiogram	1232 or 1233 or 1234 or 1235 or 1236	1	ECG – Electrocardiogram	1232 or 1233 or 1234 or 1235 or 1236	2	2	
	Echocardiography	3621 & 3622 & 3623 & 3620 & 3625	1	Echocardiography	3621 & 3622 & 3623 & 3620 & 3625	1		
	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	2		





Condition	Diagnos	stic basket		Ongoing management basket			
	Procedure or test description	Procedure or test code	Number of procedures or tests we cover	Procedure or test description	Procedure or test code	Number of procedures or tests we cover each year	Number of specialist consultations we cover each year
Coronary artery	U & E only	4171	1	U & E only	4171	2	
disease	Glucose – random/fasting	4057	1	Glucose – random/fasting	4057	1	-
	Total cholesterol	4027	1	Total cholesterol	4027	1	
	LDL cholesterol	4026	1	LDL cholesterol	4026	1	
	HDL cholesterol	4028	1	HDL cholesterol	4028	1	
	Triglycerides	4147	1	Triglycerides	4147	1	
	C-reactive protein	3947	1				
	Urine analysis (dipstick)	4188	1				
	Full blood count	3755	1				
	Thyrotropin (TSH)	4507	1	1			
	Platelet count	3797	1				
	X-ray of the chest two views, PA and lateral	30110	1				
Crohn's disease	Colonoscopy	1653 or 1656	1	Colonoscopy	1653 or 1656	1	3
	Erythrocyte sedimentation rate or C-reactive protein	3743 or 3947	1	C-reactive protein	3947	2	
	Full blood count	3755	1	Full blood count	3755	2	
	Histology	4567 & 4571 or 4582 & 4584	3				
Diabetes	U & E only	4171	1	U & E only	4171	3	1
insipidus	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	3	
	Osmolality: Serum or urine	4093	1	Osmolality: Serum or urine	4093	1	
Diabetes type 1	ECG – Electrocardiogram	1232 or 1233 or 1236	1	ECG – Electrocardiogram	1232 or 1233 or 1236	1	1 (Ophthal- mologist)
	Microalbuminuria	4261 or 4262	1	Microalbuminuria	4261 or 4262	2	4 (Other Specialist)
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	4	
	Total cholesterol	4027	1	Total cholesterol	4027	1	
	LDL cholesterol	4026	1	LDL cholesterol	4026	1	
	HDL cholesterol	4028	1	HDL cholesterol	4028	1	
	Triglycerides	4147	1	Triglycerides	4147	1	
	U & E only	4171	1	U & E only	4171	1	
	Serum creatinine	4032 or 4223	1	Serum creatinine	4032 or 4223	1	
	Urine creatinine	4221	1	Urine creatinine	4221	1	1
	Glucose – random/fasting	4057	1	HBA1c	4064	4	1
	Two-hour glucose-OGTT	4049	1	Tonometry	3014	1	1





Condition	Diagnos	stic basket		Ongoing management basket			
	Procedure or test description	Procedure or test code	Number of procedures or tests we cover	Procedure or test description	Procedure or test code	Number of procedures or tests we cover each year	Number of specialist consultations we cover each year
Diabetes type 1				Basic capital equipped in own rooms by ophthalmologists	3009	1	
				Fundus examination	3003 or 3004 or 3027	1	
				Dietitian	84200 or 84201 or 84202 or 84203 or 84204 or 84205	1	
				Podiatrist	68301 or 68302 or 68303 or 68304 or	1	
				Diabetes Educator	DFSC1		
				Diabetes Educator	DEDUT or DEDU1	2	
Diabetes type 2	ECG – Electrocardiogram	1232 or 1233 or 1236	1	ECG – Electrocardiogram	1232 or 1233 or 1236	1	1 (Ophthal- mologist)
	Microalbuminuria	4261 or 4262	1	Microalbuminuria	4261 or 4262	2	1 (Other Specialist)
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	4	
	Total cholesterol	4027	1	Total cholesterol	4027	1	
	LDL cholesterol	4026	1	LDL cholesterol	4026	1	
	HDL cholesterol	4028	1	HDL cholesterol	4028	1	
	Triglycerides	4147	1	Triglycerides	4147	1	
	U & E only	4171	1	U & E only	4171	1	
	Serum creatinine	4032 or 4223	1	Serum creatinine	4032 or 4223	1	
	Urine creatinine	4221	1	Urine creatinine	4221	1	
	Glucose – random/fasting	4057	1	HBA1c	4064	4]
	Two-hour glucose- OGTT	4049	1	Tonometry	3014	1	
				Basic capital equipped in own rooms by ophthalmologists	3009	1	
				Fundus examination	3003 or 3004 or 3027	1	





Condition	Diagnos	tic basket		Ongoing management basket			
	Procedure or test description	Procedure or test code	Number of procedures or tests we cover	Procedure or test description	Procedure or test code	Number of procedures or tests we cover each year	Number of specialist consultations we cover each year
Diabetes type 2				Dietitian	84200 or 84201 or 84202 or 84203 or 84204 or 84205	1	
				Podiatrist	68301 or 68302 or 68303 or 68304 or	1	
				Diabetes Educator	DFSC1		_
				Diabetes Educator	DEDUT or DEDU1	2	
Dysrhythmia	ECG – Electrocardiogram	1232 or	1	ECG – Electrocardiogram	1232	3	2
		1233 or 1234 or 1235 or 1236			1233 or 1234 or 1235 or 1236	1	
	Echocardiography	3621 & 3622 & 3623 & 3620 & 3625	1	Echocardiography	3621 & 3622 & 3623 & 3620 & 3625	1	
	24 Hour ambulatory ECG monitoring (holter)	1238 & 1239	1	Threshold testing: Own equipment	1268	1	
	C-reactive protein	3947	1	Programming of atrioventricular sequential pacemaker	1270	1	
	Magnesium: Spectrophotometric	4094	1	Magnesium: Spectrophotometric	4094	1	
	U & E only	4171	1	U & E only	4171	2	
	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	1	
	Thyrotropin (TSH)	4507	1	Prothrombin index (PI)	3805	24	1
	Serum calcium	4016 or 4017 or	1	Therapeutic drug level: Dosage	3806	24	
		4375 or 4376		Drug level in biological fluid	4081 or 4370 or 4493	2	
Epilepsy	EEG – Electro-encephalography	2711 & 2712	1	EEG – Electro-encephalography	2711 & 2712	1	3
	EEG with special activation	75133	1	Drug level in biological fluid	4081 or 4370 or 4493	3	





Condition	Diagno	stic basket		Ongoing management basket				
	Procedure or test description	Procedure or test code	Number of procedures or tests we cover	Procedure or test description	Procedure or test code	Number of procedures or tests we cover each year	Number of specialist consultations we cover each year	
Glaucoma * These codes can	Tonometry	3014 or *11202 or *11212	1	Tonometry	3014 or *11202 or *11212	3	3 (Ophthalmologist or Ocular	
only be billed by an Ocular Therapeutic	Fundus examination	3003 or 3004 or *11366	1	Fundus examination	3003 or 3004 or *11366	3	Therapeutic Optometrist	
Optometrist	Gonioscopy	3002 or *11356	1	Gonioscopy	3002 or *11356	3		
	Basic capital equipped in own rooms by ophthalmologists	3009	1	Basic capital equipped in own rooms by ophthalmologists	3009	3		
	Visual fields	3016 or 3017 or *11443	1	Visual fields	3016 or 3017 or *11443	2		
	Disc and nerve fibre layer analysis or Disc photography	3026 or 3027 or *11624	1	Disc and nerve fibre layer analysis or Disc photography	3026 or 3027 or *11624	1		
	Optical Coherent Tomography (OCT) of Optic nerve or macula	3028 or *11802	2 (1 per eye)	Optical Coherent Tomography (OCT) of Optic nerve or macula	3028 or *11802	2 (1 per eye)		
	Central corneal thickness measurement	3020 or *11702	2 (1 per eye)	Retinal threshold trend evaluation	3018	1		
Haemophilia	Full blood count	3755	1	Full blood count	3755	1	2	
	Factor VIII or Factor IX antigen or Coagulation factors	3758 or 3757	1	Factor VIII or Factor IX inhibitors	3724	1		
	Platelet count	3797	1	Platelet count	3797	1	1	
	Bleeding time	3713	1	-				
	Fibrinogen titre	3825	1	-				
	PTT - Partial thromboplastin time	3837	1					
	Prothrombin index (PI)	3805	1					
	Therapeutic drug level: Dosage	3806	1					
	Thrombin time	3841	1					
Hyperlipidaemia	Total cholesterol	4027	1	Total cholesterol	4027	1	0	
	LDL cholesterol	4026	1	LDL cholesterol	4026	1		
	HDL cholesterol	4028	1	HDL cholesterol	4028	1		
	Triglycerides	4147	1	Triglycerides	4147	1		
	Thyrotropin (TSH)	4507	1	AST – Aspartate aminotransferase	4130	1		
				ALT – Alanine aminotransferase	4131	1		
Hypertension	ECG – Electrocardiogram	1232 or 1233	1	ECG – Electrocardiogram	1232 or 1233	1	1	





Condition	Diagnos	tic basket		Ongoing management basket				
	Procedure or test description	Procedure or test code	Number of procedures or tests we cover	Procedure or test description	Procedure or test code	Number of procedures or tests we cover each year	Number of specialist consultations we cover each year	
Hypertension	24 Hour ambulatory blood pressure	1237	1	Potassium	4113	1		
	Glucose – random/fasting	4057	1	Glucose – random/fasting	4057	1		
	Total cholesterol	4027	1	Total cholesterol	4027	1		
	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	1		
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	1		
	U & E only	4171	1					
Hypothyroidism	Thyrotropin (TSH)	4507	1	Thyrotropin (TSH)	4507	2	0	
	Free thyroxine (FT4)	4482	1	Free thyroxine (FT4)	4482	2		
	Total cholesterol	4027	1					
Multiple sclerosis	MR of the brain pre and post contrast or uncontrasted	10430 or 10410	1	MR of the brain pre and post contrast or uncontrasted	10430 or 10410	1	2	
	MR of the cervical spine and cranio-cervical junction pre and post contrast or uncontrasted	51420 or 51410 or 51400	1	MR of the cervical spine and cranio-cervical junction pre and post contrast or uncontrasted	51420 or 51410 or 51400	1		
	MR of the thoracic spine pre and post contrast or uncontrasted	52420 or 52410 or 52400	1	MR of the thoracic spine pre and post contrast or uncontrasted	52420 or 52410 or 52400	1		
	MR of the lumbar spine pre and post contrast or uncontrasted	53420 or 53410 or 53400	1	MR of the lumbar spine pre and post contrast or uncontrasted	53420 or 53410 or 53400	1		
	Visual evoked potentials (VEP): Unilateral	2681	1	AST – Aspartate aminotransferase	4130	1		
	Visual evoked potentials (VEP): Bilateral	2682	1	ALT – Alanine aminotransferase	4131	1		
Parkinson's disease	No diagnostic or r	monitoring te	ests apply as the	diagnosis of this condition re	emains a clin	ical one	2	
Rheumatoid arthritis	Erythrocyte sedimentation rate or C-reactive protein	3743 or 3947	1	Erythrocyte sedimentation rate or C-reactive protein	3743 or 3947	4	4	
	Full blood count	3755	1	Full blood count	3755	2		
	Platelet count	3797	1	Platelet count	3797	2		
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	4		
	AST – Aspartate aminotransferase	4130	1	AST – Aspartate aminotransferase	4130	4		
	ALT – Alanine aminotransferase	4131	1	ALT – Alanine aminotransferase	4131	4		
	Anti-CCP	4600	1	Anti-CCP	4600	1		
	Rheumatoid factor	3959	1					
	ANF	3934	1]	
	X-ray of the right hand	65105	1	X-ray of the right hand	65105	1	1	
	X-ray of the left hand	65100	1	X-ray of the left hand	65100	1		





Condition	Diagnos	tic basket		Ongoing management basket			
	Procedure or test description	Procedure or test code	Number of procedures or tests we cover	Procedure or test description	Procedure or test code	Number of procedures or tests we cover each year	Procedure or test description
Rheumatoid	X-ray of the right foot	74125	1	X-ray of the right foot	74125	1	
arthritis	X-ray of the left foot	74120	1	X-ray of the left foot	74120	1	
	X-ray of the chest two views, PA and lateral	30110	1	X-ray of the chest two views, PA and lateral	30110	1	
Schizophrenia				AST – Aspartate aminotransferase	4130	2	
				ALT – Alanine aminotransferase	4131	2	
				U & E only	4171	2	
				Creatinine	4032 or 4221 or 4223	2	4
				Drug level in biological fluid	4081 or 4370 or 4493	3	
Systemic lupus	Full blood count	3755	1	Full blood count	3755	4	4
erythematosus	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	4	
	U & E only	4171	1	U & E only	4171	4	
	Platelet count	3797	1	Platelet count	3797	1	
	Erythrocyte sedimentation rate or C-reactive protein	3743 or 3947	1	Erythrocyte sedimentation rate or C-reactive protein	3743 or 3947	4	
	Urine microscopy	3867	1	Total cholesterol	4027	1	-
	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	4	
	Complement fixation test	3963 or 4182	1	Complement fixation test	3963 or 4182	2	
	Extractable nuclear antigens	3934 or 3948	1	Creatinine kinase	4152 or 4153	2	
	DNA antibodies	4529 or 3948	1	Antiglobulin test (Coombs)	3709	2	
	ANF	3934	1	AST – Aspartate aminotransferase	4130	4	
	Histology	4567 & 4571 or 4582 & 4584	3	ALT – Alanine aminotransferase	4131	4	
	Kidney biopsy	1841	1				
	Skin biopsy	4567 & 0233 & 0234 & 0235 & 0237	1				
	X-ray of the chest two views, PA and lateral	30110	1	X-ray of the chest two views, PA and lateral	30110	1	
				Flexible sigmoidoscopy	1676	1	





Condition	Diagnos	stic basket		Ongoing management basket			
	Procedure or test description	Procedure or test code	Number of procedures or tests we cover	Procedure or test description	Procedure or test code	Number of procedures or tests we cover each year	Procedure or test description
Ulcerative colitis	Colonoscopy	1653 or 1656	1	Colonoscopy	1653 or 1656	1	3
				Flexible sigmoidoscopy	1676	1	
	C-reactive protein	3947	1	C-reactive protein	3947	2	
	Full blood count	3755	1	Full blood count	3755	2	
	Histology	4567 & 4571 or 4582 & 4584	3	Histology	4567 & 4571 or 4582 & 4584	1	

Complaints process

You may lodge a complaint or query with the Fund directly on 0800 001 615 or by emailing service@engenmed.co.za. If you are not satisfied with how your query was resolved, please send a complaint in writing to the Principal Officer at the Fund's registered address.

You may, as a last resort, approach the Council for Medical Schemes for assistance: Council for Medical Schemes Complaints Unit, Block A, Eco Glades 2 Office Park, 420 Witch-Hazel Avenue, Eco Park, Centurion, 0157 / 0861 123 267 / complaints@medicalschemes.co.za / www.medicalschemes.co.za /