



Endoscopic Procedures

Who we are

Engen Medical Benefit Fund (referred to as 'the Fund'), registration number 1572, is a not-for-profit organisation, registered with the Council for Medical Schemes.

Discovery Health (Pty) Ltd, registration number 1997/013480/07, (referred to as 'the administrator') is a separate company and an authorised financial services provider and is responsible for the administration of your membership on behalf of the Fund.

About this document

This document tells you how you are covered for Endoscopic Investigations.

Overview

Endoscopic investigations are covered at 100% of the Fund Rate from the Insured Benefit. These procedures must be done in a Day Surgery Facility, subject to authorization, clinical criteria and the services being obtained at a facility in the Fund's DSP. If the service of non-DSP is used voluntarily, a deductible of **R6 300** applies per admission.

When you are having a planned scope, it is important to call us at least 48 hours before the procedure. When you call us, we will confirm your benefits and tell you how we will pay your accounts.

Day Surgery Network

You should have your scope done in our Day Surgery Network. If your scope is performed outside of our Day Surgery Network, you will have to pay an upfront amount (deductible) of **R 6 300**.

Endoscopic investigations must be obtained from a provider in the Fund's Network of Day Surgery providers. You can find the nearest provider to you on the website, www.engenmed.co.za, by using the MaPS tool.

A clinical exceptions process applies to all cases with complex presentations, and those procedures that may require an extended length of stay. You will be transferred to an appropriate facility, where required.

Engen Medical Benefit Fund, registration number 1572, is regulated by the Council for Medical Schemes and administered by Discovery Health (Pty) Ltd, registration number 1997/013480/07. Discovery Health (Pty) Ltd is an authorised financial services provider.





We cover scopes as a Prescribed Minimum Benefit (PMB) under certain conditions

We will pay the claim as a Prescribed Minimum Benefit (PMB) if the scope report confirms a Prescribed Minimum Benefit (PMB) diagnosis.

Contact us

You can contact us on 0800 001 615 or visit our website at www.engenmed.co.za for more information.

Complaints process

You may lodge a complaint or query with the Fund directly on 0800 001 615 or address a complaint in writing to the Principal Officer at the Fund's registered address. If your complaint remains unresolved, you may lodge a formal dispute by following the Fund's internal disputes process. You can read more about the disputes process on www.engenmed.co.za.

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 /