Treatment Baskets for the Chronic Disease List (CDL) conditions

2025



Who we are

TFG Medical Aid Scheme (referred to as "the Scheme"), registration number 1578, is a non-profit organisation, registered with the Council for Medical Schemes.

Discovery Health (Pty) Ltd (referred to as "the Administrator"), is a separate company who is registered as an authorised financial services provider (registration number 1997/013480/07), administers TFG Medical Aid Scheme.

Contact us

You can call us on 0860 123 077 or visit www.tfgmedicalaidscheme.co.za for more information.

Treatment baskets for the 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 plans 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 condition.

We will only pay Chronic Disease List (CDL) claims if your condition has been approved on the Chronic Illness Benefit

Only claims for procedures and consultations listed in the Chronic Disease List (CDL) treatment baskets will be paid from the Chronic Illness Benefit. These are pro-rated based on the date of approval 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 Scheme at the time of the diagnosis and the relevant ICD-10 diagnosis codes are on the claim. Please ask your doctor 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 and medical technologists who we have a payment agreement with in full up to the agreed rate. We will pay up to a maximum of the Scheme Rate if you use a pathologist or medical technologist who we do not have a payment arrangement with. You must 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.

How we pay for GP consultations related to your condition

TFG Health

We pay for four (4) consultations a year that are related to all your approved conditions at your nominated primary care GP in the GP Network, in full up to the agreed rate.

If you use any other GP, or your nominated primary care GP is not in the GP Network, we will pay up to a maximum of 80% of the Scheme Rate. You must pay any difference between what is charged and what we pay.

TFG Health Plus

We pay for four (4) consultations a year that are related to your approved condition at a GP who is a designated service provider in full up to the agreed rate.

We pay up to a maximum of 100% of the Scheme Rate for consultations with a GP who is not a designated service provider. You must pay any difference between what is charged and what we pay.

Nominate a primary care GP for the management of your chronic conditions

There is overwhelming medical evidence that patients experience improved health outcomes when their primary care is coordinated through a single primary care GP. For members on the TFG Health Benefit Plan, you and your dependants need to nominate a primary care GP for the effective management of your chronic conditions.

When you visit your nominated network GP for the management of your chronic condition, we'll cover the consultation in full up to the agreed rate. If you see a GP who is not your nominated primary care GP, or your nominated GP is not a network GP, you will experience a co-payment. You and your dependants can





change your nominated GP three times a year. You can nominate your GP or manage your existing nomination by calling us on 0860 123 077.

How we pay for specialist consultations related to your condition

TFG Health

Depending on your condition, we pay for a specific number of consultations with a specialist in the Specialist Network in full up to the agreed rate.

We pay up to a maximum of 80% of the Scheme Rate for consultations with any other specialist. You must pay any difference between what is charged and what we pay.

TFG Health Plus

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 in full up to the agreed rate.

We pay up to a maximum of 100% of the Scheme 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, medical technologists and radiologists for tests. This will enable pathologists, medical technologists 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, navigate to Find a healthcare professional on www.tfgmedicalaidscheme.co.za.





Treatment baskets for the Chronic Disease List (CDL) conditions

Condition	Diagnos	stic test codes		Ongoing management			
	Diagnostic test description	Diagnostic test codes	Number of diagnostic test we cover	Follow-up test description	Follow-up test codes	Number of follow-up tests we cover each year	Number of specialist consultations we cover each year
Addison's disease	U & E only	4171	1	U & E only	4171	3	1
	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	2	2
	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	
	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	2	
	CT Brain uncontrasted	10300 or 10310 or 10320	1	Lithium – flame ionisation	4067	2	
	ECG – Electrocardiogram	1232 or 1233 or 1234 or 1235 or 1236	1	Serum calcium	4016 or 4017 or 4375 or 4376	1	
	EEG with special activation	75113	1				
	Full blood count	3755	1	Full blood count	3755	1	
	Gamma glutamyl transferase (GGT)	4134	1	Gamma glutamyl transferase (GGT)	4134	1	
	Glucose – random/fasting LDL cholesterol	4057 4026	1	Glucose – random/fasting	4057	1	
	HDL cholesterol	4028	1	LDL cholesterol	4026	1	
	Triglycerides	4020	1	HDL cholesterol	4028	1	-
	Thyrotropin (TSH)			Triglycerides	4147	1	-
	U & E only	4507	1	Thyrotropin (TSH)	4507	1	-
		4171	1	U & E only	4171 4287 or	2	-
	Toxic drug screen	4287 or 4370 or 4493	1	Toxic drug screen	4287 or 4370 or 4493	3	
	Syphilis testing (VDRL or THPA)	3940 or 3949 or 3951	1				
Bronchiectasis	Flow volume test	1188 or 1186	1	Flow volume test	1186	1	1
	X-ray of the chest two views, PA and lateral	30110	1				





Condition	Diagnos	stic test codes			Ongoing manage	ment	
	Diagnostic test description	Diagnostic test codes	Number of diagnostic test we cover	Follow-up test description	Follow-up test codes	Number of follow- up tests we cover each year	Number of specialist consultations we cover each year
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	
	Peak flow	1192	1	Peak flow	1192	2	
Cardiac failure	ECG – Electrocardiogram	(1228+1230) or (1229+1231) or	1	ECG – Electrocardiogram	(1228+1230) or 1232	3	2
		1232 or 1233 or 1234 or 1235 or 1236			(1229+1231) or 1233 or 1234 or 1235 or 1236	1	
	Echocardiography	3620 & 3621 & 3622 & 3623 & 3624 & 3625	1	Echocardiography	3620 & 3621 & 3622 & 3623 & 3624 & 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 4370	3	
	Glucose – random/fasting	4050 or 4057	1	fluid	or 4493		
	C-reactive protein	3947	1	Threshold testing: own	1268	1	
	Full blood count	3755	1	equipment			
	Thyrotropin (TSH)	4507	1	Programming of the	1270 or 75075	1	
	Total cholesterol	4027	1	Atrioventricular sequential pacemaker	13013		





Condition	Diagno	stic test codes		Ongoing management				
	Diagnostic test description	Diagnostic test codes	Number of diagnostic test we cover	Follow-up test description	Follow-up test codes	Number of follow- up tests we cover each year	Number of specialist consultations we cover each year	
Cardiomyopathy	ECG – Electrocardiogram	1232 or 1233 or 1234 or 1235 or 1236	1	ECG – Electrocardiogram	1232 1233 or 1234 or 1235 or 1236	3 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 fluid	4081 or 4370 or 4493	3		
	Thyrotropin (TSH)	4507	1	Threshold testing: own equipment	1268	1		
	Total cholesterol	4027	1	Programming of the Atrioventricular sequential pacemaker	1270 or 75075	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		
Chronic obstructive pulmonary	Flow volume test	1188 or 1186	1	Flow volume test	1186	1	1	
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	Full blood count	3755	1	Full blood count	3755	4	2	
disease	U & E only	4171	1	U & E only	4171	4		
	Serum parathyroid hormone (PTH)	4512	1	Serum parathyroid hormone (PTH)	4512	2		





Condition	Diagr	nostic test codes		Ongoing management			
	Diagnostic test description	Diagnostic test codes	Number of diagnostic test we cover	Follow-up test description	Follow-up test codes	Number of follow-up tests we cover each year	Number of specialist consultations we cover each year
Chronic renal disease	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	4	
	ECG – Electrocardiogram	1232 or 1233 or 1236	1	ECG – Electrocardiogram	1232 or 1233 or 1236	2	
	Serum phosphates	4109 or 4313	1	Serum phosphates	4109 or 4313	4	
	Serum calcium	4016 or 4017 or 4375 or 4376	1	Serum calcium	4016 or 4017 or 4375 or 4376	4	
	Protein: Quantitative	4213	1	Protein: Quantitative	4213	1	
				Urine analysis (dipstick)	4188	4	
				Iron	4071	2]
				Transferrin	4144	2]
				Ferritin	4528	2	
				Dietitian	84200 or 84201 or 84202 or 84 203 or 84204 or 84205	1	
Coronary artery disease	ECG – Electrocardiogram	(1228+1230) or (1229+1231) or 1232 or 1233 or 1234 or 1235 or 1236	1	ECG – Electrocardiogram	(1228+123 0) or (1229+123 1) or 1232 or 1233 or 1234 or 1235 or 1236	2	2
	Echocardiography	3620 & 3621 & 3622 & 3623 & 3624 & 3625	1	Echocardiography	3620 & 3621 & 3622 & 3623 & 3624 & 3625	1	
	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	2	
	HDL cholesterol	4028	1	HDL cholesterol	4028	1	
	LDL cholesterol	4026	1	LDL cholesterol	4026	1	





Condition	Diagno	stic test codes		Ongoing management			
	Diagnostic test description	Diagnostic test codes	Number of diagnostic test we cover	Follow-up test description	Follow-up test codes	Number of follow-up tests we cover each year	Number of specialist consultations we cover each year
Coronary artery	Triglycerides	4147	1	Triglycerides	4147	1	
disease	Glucose – random/fasting	4050 or 4057	1	Glucose – random/fasting	4050 or 4057	1	
	U & E only	4171	1	U & E only	4171	2	
	C-reactive protein	3947	1				
	Urine analysis (dipstick)	4188	1				
	Full blood count	3755	1]			
	Thyrotropin (TSH)	4507	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
	Histology	4567 & 4571 or 4582 & 4584	3	Faecal Calprotectin (Elastase Quantitative ELISA)	4362	1	
	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	
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 mellitus 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	1
	HDL cholesterol	4028	1	HDL cholesterol	4028	1	1
	Triglycerides	4147	1	Triglycerides	4147	1	
	U & E only	4171	1	U & E only	4171	1	
	Urine creatinine	4221	1	Urine creatinine	4221	1	1





Condition	Diagnos	stic test codes		Ongoing management			
	Diagnostic test description	Diagnostic test codes	Number of diagnostic test we cover	Follow-up test description	Follow-up test codes	Number of follow-up tests we cover each year	Number of specialist consultations we cover each year
Diabetes mellitus type 1	Serum creatinine	4032 or 4223	1	Serum creatinine	4032 or 4223	1	
	Glucose – random/fasting	4057	1	HbA1c	4064	4	
	Two-hour glucose-OGTT	4049	1	Fundus examination	3003 or 3004 or 3027	1	
				Tonometry	3014	1	
				Basic capital equipped in own rooms by ophthalmologists	3009	1	
				Podiatrist	68301 or 68302 or 68303 or 68304 or	1	
				Diabetes Educator	DFSC1		
				Diabetes Educator	DEDUT or DEDU1	2	
				Dietitian	84200 or 84201 or 84202 or 84203 or 84204 or 84205	1	
Diabetes mellitus type 2	ECG – Electrocardiogram	1232 or 12 33 or 12 36	1	ECG – Electrocardiogram	1232 or 1233 or 1236	1	1 (Ophthal- mologist) 1 (Other Specialist)
	Microalbuminuria	4261 or 42 62	1	Microalbuminuria	4261 or 4262	2	
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	4	
	Total cholesterol	4027	1	Total cholesterol	4027	1	1
	LDL cholesterol	4026	1	LDL cholesterol	4026	1	1
	HDL cholesterol	4028	1	HDL cholesterol	4028	1	1
	Triglycerides	4147	1	Triglycerides	4147	1	
	U & E only	4171	1	U & E only	4171	1	1
	Serum creatinine	4032 or 42 23	1	Serum creatinine	4032 or 4223	1	
	Urine creatinine	4221	1	Urine creatinine	4221	1	
	Glucose – random/fasting	4057	1	HbA1c	4064	4	





Condition	Diagnos	tic test codes		Ongoing management			
	Diagnostic test description	Diagnostic test codes	Number of diagnostic test we cover	Follow-up test description	Follow-up test codes	Number of follow-up tests we cover each year	Number of specialist consultations we cover each year
Diabetes mellitus	Two-hour glucose- OGTT	4049	1	Tonometry	3014	1	
type 2				Basic capital equipped in own rooms by ophthalmologists	3009	1	
				Fundus examination	3003 or 3004 or 3027	1	
				Diabetes Educator	DEDUT or DEDU1	2	
				Podiatrist	68301 or 68302 or 68303 or 68304 or	1	
				Diabetes Educator	DFSC1		
				Dietitian	84200 or 84201 or 84202 or 84203 or 84204 or 84205	1	
Dysrhythmia	ECG –	1232 or		ECG – Electrocardiogram	1232	3	2
	Electrocardiogram	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	
	U & E only	4171	1	U & E only	4171	2	
	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	1	
	C-reactive protein	3947	1	Prothrombin index (PI)	3805	24]
	Thyrotropin (TSH)	4507	1	Therapeutic drug level: Dosage	3806	24	
	Serum calcium	4016 or 4017 or 4375 or 4376	1	Drug level in biological fluid	4081 or 4370 or 4493	2	
	Magnesium: Spectrophotometric	4094	1	Magnesium: Spectrophotometric	4094	1	
	24-hour ambulatory ECG monitoring (holter)	1238 & 1239	1	Threshold testing: own equipment	1268	1	
				Programming of the Atrioventricular sequential pacemaker	1270 or 75075	1	





Condition	Diagnos	tic test codes		Ongoing management			
	Diagnostic test description	Diagnostic test codes	Number of diagnostic test we cover	Follow-up test description	Follow-up test codes	Number of follow-up tests we cover each year	Number of specialist consultations we cover each year
Epilepsy	Clinical interpretation and report of item 2711: Electro-encephalogram (EEG): 20-40 minutes record (Professional component)	2712	1	Clinical interpretation and report of item 2711: Electro-encephalogram (EEG): 20-40 minutes record (Professional component)	2712	1	3
	Electro-encephalogram (EEG): 20-40 minutes record: (done by Medical Practitioners) or EEG with special activation (done by Clinical	2711 or 75133	1	Electro-encephalogram (EEG): 20-40 minutes record: (done by Medical Practitioners) or EEG with special activation (done by Clinical Technologists)	2711 or 75133	1	
	Technologists)			Drug level in biological fluid	4081 or 4370 or 4493	3	
Glaucoma * These codes	Tonometry	3014 or *11202 or *11212	1	Tonometry	3014 or *11202 or *11212	3	3 (Ophthalmologis or Ocular Therapeutic
can only be billed by an Ocular	Fundus examination	3003 or 3004 or *11366	1	Fundus examination	3003 or 3004 or *11366	3	Optometrist)
Therapeutic 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	Factor VIII or Factor IX antigen or Coagulation factors	3758 or 3757	1	Factor VIII or Factor IX inhibitors	3724	1	2
	Full blood count	3755	1	Full blood count	3755	1	
	Platelet count	3797	1	Platelet count	3797	1	
	Fibrinogen titre	3825	1	1			
	Prothrombin index (PI)	3805	1				





Condition	Diagnos	tic test codes			Ongoing manag	gement	
	Diagnostic test description	Diagnostic test codes	Number of diagnostic test we cover	Follow-up test description	Follow-up test codes	Number of follow-up tests we cover each year	Number of specialist consultations we cover each year
Haemophili	Bleeding time	3713	1				
Пастторгііі	Therapeutic drug level: Dosage	3806	1				
	PTT - Partial thromboplastin time	3837	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
	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	1	
				Potassium	4113	1	
	24-hour ambulatory blood pressure	1237	1	24-hour ambulatory blood pressure	1237	1	
	Glucose – random/fasting	4057	1	Glucose – random/fasting	4057	1	
	Total cholesterol	4027	1	Total cholesterol	4027	1	
	U & E only	4171	1	U & E only	4171	1	
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	1	
Hypothyroidism	Free thyroxine (FT4)	4482	1	Thyrotropin (TSH)	4507	2	0
	Total cholesterol	4027	1	Free thyroxine (FT4)	4482	2	
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	





Condition	Diagnos	stic test codes			Ongoing mana	gement	
	Diagnostic test description	Diagnostic test codes	Number of diagnostic test we cover	Follow-up test description	Follow-up test codes	Number of follow-up tests we cover each year	Number of specialist consultations we cover each year
Multiple sclerosis	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 monitoring te	sts apply as the di	agnosis of this condition rema	ains a clinical on	е	2
Rheumatoid arthritis	X-ray of the right hand or right wrist	65105 or 65135	4	X-ray of the right hand or right wrist	65105 or 65135	4	4
	X-ray of the left hand or left wrist	65100 or 65130	-	X-ray of the left hand or left wrist	65100 or 65130		
	X-ray of the right foot or right ankle	74125 or 74105		X-ray of the right foot or right ankle	74125 or 74105		
	X-ray of the left foot or left ankle	74120 or 74100		X-ray of the left foot or left ankle	74120 or 74100		
	X-ray of the left hip	56100		X-ray of the left hip	56100		
	X-ray of the right hip	56110		X-ray of the right hip	56110		
	X-ray of the left shoulder	61130		X-ray of the left shoulder	61130		
	X-ray of the right shoulder	61135		X-ray of the right shoulder	61135		
	X-ray of the left elbow	63100		X-ray of the left elbow	63100		
	X-ray of the right elbow	63105		X-ray of the right elbow	63105		
	X-ray of the left knee	72100		X-ray of the left knee	72100		
	X-ray of the right knee	72105		X-ray of the right knee	72105		
	X-ray of the chest two views, PA and lateral	30110	1	X-ray of the chest two views, PA and lateral	30110	1	
	Creatinine	4221	1	Creatinine	4221	1	
	Erythrocyte sedimentation rate or C-reactive protein	3743 or 3947	1	Erythrocyte edimentation rate or C-reactive protein	3743 or 3947	4	
	Full blood count	3755	1	Full blood count	3755	2	
	AST – Aspartate aminotransferase	4130	1	AST – Aspartate aminotransferase	4130	4	
	ALT – Alanine aminotransferase	4131	1	ALT – Alanine aminotransferase	4131	4	
	Anti-CCP	4600	1				
	Rheumatoid factor	3959 or 4182	1				
	Anti-Nuclear Factor (ANF)	3934	1	Platelet count	3797	2	
	Platelet count	3797	1				
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	4	





Condition	Diagnosi	ic test codes			Ongoing mana	gement				
	Diagnostic test description	Diagnostic test codes	Number of diagnostic test we cover	Follow-up test description	Follow-up test codes	Number of follow-up tests we cover each year	Number of specialist consultations we cover each year			
Rheumatoid arthritis	U & E only	4171	1	U & E only	4171	1				
Juvenile	In addition to above, the below is also available for members less than 18 years old									
Rheumatoid arthritis	Ultrasound of the right wrist or left wrist	65210 or 65200	1	Ultrasound of the right wrist or left wrist	65210 or 65200	1	Visit			
	Ultrasound of the right foot or right ankle	74225 or 74215		Ultrasound of the right foot or right ankle	74225 or 74215		1 for > 10 years old or			
	Ultrasound of the left foot or left ankle	74220 or 74210		Ultrasound of the left foot or left ankle	74220 or 74210		2 for < 10 years old			
	Ultrasound of the hip joints	56200		Ultrasound of the hip joints	56200					
	Ultrasound of the left shoulder joint	61200		Ultrasound of the left shoulder joint	61200					
	Ultrasound of the right shoulder joint	61210		Ultrasound of the right shoulder joint	61210	-				
	Ultrasound of the left elbow joint	63200		Ultrasound of the left elbow joint	63200					
	Ultrasound of the right elbow joint	63205		Ultrasound of the right elbow joint	63205					
	Ultrasound of the left knee joint	72200		Ultrasound of the left knee joint	72200					
	Ultrasound of the right knee joint	72205		Ultrasound of the right knee joint						
	Ultrasound of the tempero-mandibular joints, one or both sides	15200	-	Ultrasound of the tempero-mandibular joints, one or both sides	15200					
	Ultrasound of any joint	5102		Ultrasound of any joint	5102					
	Erythrocyte sedimentation rate or C-reactive protein	3743 or 3947	1	Erythrocyte edimentation rate or C-reactive protein	3743 or 3947	2				
Schizophrenia				Creatinine	4032 or 4221 or 4223	2	4			
				Drug level in biological fluid	4081 or 4370 or 4493	3				
				AST – Aspartate aminotransferase	4130	2				
				ALT – Alanine aminotransferase	4131	2				
				U & E only	4171	2				





Condition	Diagnos	tic test codes			Ongoing mana	gement	
	Diagnostic test description	Diagnostic test codes	Number of diagnostic test we cover	Follow-up test description	Follow-up test codes	Number of follow-up tests we cover each year	Number of specialist consultations we cover each year
Systemic lupus	Full blood count	3755	1	Full blood count	3755	4	4
erythematosus	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	4	
	Platelet count	3797	1	Platelet count	3797	1	
	Complement fixation test	3963 or 4182	1	Complement fixation test	3963 or 4182	2	
	Erythrocyte sedimentation rate or C-reactive protein	3743 or 3947	1	Erythrocyte sedimentation rate or C-reactive protein	3743 or 3947	4	
	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	4	
	U & E only	4171	1	U & E only	4171	4	
	Extractable nuclear antigens	3934 or 3948	2	Antiglobulin test (Coombs)	3709	2	
	Urine microscopy	3867	1	AST – Aspartate aminotransferase	4130	4	
	Anti-Nuclear Factor (ANF)	3934	1	ALT – Alanine aminotransferase	4131	4	
	DNA antibodies	4529 or 3948	2	Total cholesterol	4027	1	
	Kidney biopsy	1841	1	Creatinine kinase	4152 or 4153	2	
	X-ray of the chest two views, PA and lateral	30110	1	X-ray of the chest two views, PA and lateral	30110	1	
	Histology	4567 & 4571 or 4582 & 4584	3				
	Skin biopsy	4567 & 0233 & 0234 & 0235 & 0237	1				
Ulcerative colitis	Colonoscopy	1653 or 1656	1	Colonoscopy	1653 or 1656	1	3
	C-reactive protein	3947	1	C-reactive protein	3947	2	
	Full blood count	3755	1	Full blood count	3755	2	
				Faecal Calprotectin (Elastase Quantitative ELISA)	4362	1	
				Flexible sigmoidoscopy	1676	1	
	Histology	4567 & 4571 or	3	Histology	4567 & 4571 or	1	
		4582 & 4584			4582 & 4584		





Complaints process

You may lodge a complaint or query with TFG Medical Aid Scheme directly on 0860 123 077 or address a complaint in writing to the Principal Officer at the Scheme's registered address.

Should your complaint remain unresolved, you may lodge a formal dispute by following the TFG Medical Aid Scheme internal disputes process.

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.

