

# TREATMENT BASKETS FOR THE CHRONIC DISEASE LIST (CDL) CONDITIONS

Treatment Baskets for Chronic Disease List (CDL) 2024

## Who we are

Sasolmed (referred to as 'the Scheme'), registration number 1234, is a non-profit organization registered with the Council for Medical Schemes. Discovery Health (Pty) Ltd (referred to as 'the Administrator') is a separate company and an authorised financial services provider (registration number1997/013480/07). Discovery takes care of the administration of your membership for the Scheme.

#### **Overview**

The Chronic Disease List (CDL) is a list of conditions which all registered medical schemes in South Africa must cover on all the network options 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 we cover for both the diagnosis and ongoing management for each condition.

Sasolmed network options are structured in such a way as to maximise cover no matter which network option members choose. Some network options cost more but offer more comprehensive benefits, while others have lower contributions with fewer benefits. Regardless of this, both network options cover more than just the minimum benefits required by law.

#### About some of the terms we use in this document

There may be some terms we refer to in the document that you may not be familiar with. Here are the meanings of these terms.

TERMINOLOGY	DESCRIPTION
Designated service provider (DSP)	A healthcare provider (for example, a GP, specialist, allied healthcare provider, pharmacist, or hospital) who we have an agreement with to provide treatment or services at a contracted Tariff. Visit sasolmed.co.za to view the full list of DSPs.
Scheme Tariff	This is the Tariff we pay for healthcare services from hospitals, pharmacies, healthcare providers and other providers of relevant healthcare services.
Day-to-day benefits	These are the available funds allocated to the Medical Savings Facility (MSF) and Above Threshold Benefit (ATB). Depending on the network option you choose, you may have cover for a defined set of day-to- day benefits. The level of day-to-day benefits depends on the Option you choose.
Emergency medical condition	An emergency medical condition, also referred to as an emergency, is the sudden and (at the time) unexpected onset of a health condition that requires immediate medical and surgical treatment. Failure to provide medical or surgical treatment for an emergency medical condition can result in serious impairment to bodily functions or serious dysfunction of a bodily organ or part and can place the person's life in serious jeopardy.  An emergency does not necessarily require a hospital admission. We may ask you for additional information to confirm the emergency.
ICD-10 diagnosis code	A clinical code that describes diseases and signs, symptoms, abnormal findings, complaints, social circumstances and external causes of injury or diseases, as classified by the World Health Organization (WHO).



TERMINOLOGY	DESCRIPTION
Prescribed Minimum Benefits (PMBs)	In terms of the Medical Schemes Act of 1998 (Act No. 131 of 1998) and its Regulations, all medical schemes have to cover the costs related to the diagnosis, treatment and care of:  An emergency medical condition A defined list of 271 diagnoses A defined list of 27 chronic conditions.  To access Prescribed Minimum Benefits (PMBs), there are rules that apply: Your medical condition must qualify for cover and be part of the defined list of Prescribed Minimum Benefit (PMB) conditions. The treatment needed must match the treatments in the defined benefits.
	You must use designated service providers (DSPs) in our network. This does not apply in emergencies. However, even in these cases, where appropriate and according to the rules of the Scheme, you may be transferred to a hospital or other service providers in our network once your condition has stabilised. If you do not use a DSP, we will pay up to 80% of the Scheme Tariff. You will be responsible for the difference between what we pay and the actual cost of your treatment.  If your treatment doesn't meet the above criteria, we will pay according to your network option benefits.
Waiting Period	A waiting period can be general (up to 3 months) or condition- specific (up to 12 months) and means that the member has to wait for a set time before he or she can claim.

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

Claims for procedures and consultations listed in the Chronic Disease List (CDL) treatment baskets will be paid from the treatment basket for your approved CDL condition. The number of tests and consultations allowed for the ongoing management of a condition 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. For more information on the Chronic Disease List conditions and how to register, visit sasolmed.co.za.

## 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 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 consultations if 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.

## How we pay for consultations and ongoing management related to your condition

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 arrangement with, in full up to the agreed Tariff. We will pay up to the Scheme Tariff 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.



## Nominate a Preferred GP (PGP) for the management of your chronic conditions

If you are approved for a chronic Prescribed Minimum Benefit (PMB) condition, you must nominate a preferred general practitioner (PGP), to be your healthcare provider for the management of your chronic conditions.

For members on the Restricted Network Option, your nominated PGP needs to be in the Sasolmed Restricted GP network to avoid the co-payment.

You can nominate your preferred GP in two simple steps:

- 1. Log in to sasolmed.co.za
- 2. Navigate to nominate your preferred GP on the nomination form.

You can access the Restricted Network GP list at sasolmed.co.za.

Sasolmed Comprehensive Network Option	We pay for 4 consultations a year that are related to your approved condition at your PGP in full up to the agreed tariff. If you use any other GP, we will pay up to 80% of the Scheme Tariff. The difference between what is charged and what we pay, will be for your own cost.
Sasolmed Restricted Network Option	We pay for 4 consultations a year that are related to your approved condition at your PGP in the Sasolmed Restricted GP Network in full up to the agreed tariff.  If you use PGP that is not in the Sasolmed Restricted GP Network, we will pay up to 90% of the Scheme Tariff.  If you use a non-PGP in the Sasolmed Restricted GP Network, we will pay up to 80% of the Scheme Tariff.  If you use a non-PGP that is not in the Sasolmed Restricted GP Network, we will pay up to 70% of the Scheme Tariff.  The difference between what ischarged and what we pay, will be for your own cost.

HOW WE PAY FOR SPECIALIST CONSULTATIONS RELATED TO YOUR CONDITION							
Sasolmed Comprehensive Network Option	Depending on your condition, we will pay for a specific number of consultations with a specialist, as listed in the treatment baskets. We will pay for the consultation at a specialist in full.						
Sasolmed Restricted Network Option	Depending on your condition, we will pay for a specific number of consultations with a specialist, as listed in the treatment baskets. We will pay for the consultation at a specialist in full.						

#### 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 provider to be submitted with the relevant ICD-10 diagnosis codes. Please ask your healthcare provider 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 allow 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 may pay claims from your day-to-day benefits if these requirements are not met

We will pay claims from your available day-to-day benefits if:

- The claims are submitted without the relevant ICD-10 diagnosis codes.
- You have exceeded the frequency limit on consultations or tests.



# **Treatment Baskets for Chronic Disease List Conditions**

CONDITION	DIAGNOSTIC 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 SPECIALISTS WE COVER EACH YEAR	
Addison's disease	U & E only	4171	1	U & E only	4171	3	1	
uisease	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	U & E only	4171	1	U & E only	4171	4	2	
	Echocardiography	3621 & 3622 & 3623 & 3620 & 3625	1	Echocardiography	3621 & 3622 & 3623 & 3620 & 3625	2		



CONDITION	DIAGNOSTIC BASK	ET		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 SPECIALISTS WE COVER EACH YEAR	
Cardiac failure	ECG-	1232 or	1	ECG-	1232	3		
	Electrocardiogram	1233 or 1234 or 1235 or 1236		Electrocardiogram	1233 or 1234 or 1235 or 1236	1		
	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		
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	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	4081 or	3		
	Glucose -random/ fasting	4057	1	biological fluid	4370 or 4493			
	C-reactive protein	3947	1					
	Full blood count	3755	1					
	Total cholesterol	4027	1					
	Thyrotropin (TSH)	4507	1					
Cardiomyopathy	ECG - Electrocardiogram	1232 or 1233 or	1	ECG - Electrocardiogram	1232	3	2	
		1234 or 1235 or 1236			1233 or 1234 or 1235 or 1236	1		
	Echocardiography	3621 & 3622 & 3623 & 3620 & 3625	1	Echocardiography	3621 & 3622 & 3623 & 3623 & 3625	2		
	U & E only	4171	1	U & E only	4171	4		
	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	4		
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	4		
	B-Type natriuretic peptide	4488	1	B-Type natriuretic peptide	4488	1		



CONDITION	DIAGNOSTIC BAS	KET		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 SPECIALISTS WE COVER EACH YEAR
Cardiomyopathy	Glucose – random/fasting	4057	1	Prothrombin index (PI)	3805	24	
	C-reactive protein	3947	1	Therapeutic drug level: Dosage	3806	24	
	X-ray of the chest two views, PA and lateral	30110	1	X-ray of the chest two views, PA and lateral	30110	1	
	Full blood count	3755	1	Drug level in	4081 or	3	
	Thyrotropin (TSH)	4507	1	- biological fluid	4370 or 4493		
	Total cholesterol	4027	1				
Chronic obstructive pulmonary disease (COPD)	X-ray of the chest two views, PA and lateral	30110	1	Peak flow	1192	2	1
uisease (COPD)	Flow volume test	1188 or 1186	1	Flow volume test	1186	1	
	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	
	Serum calcium	4016 or 4017 or 4375 or 4376	1	Serum calcium	4016 or 4017 or 4375 or 4376	4	
				Iron	4071	2	
				Urine analysis (dipstick)	4188	4	
				Platelet count	3797	1	
		<u> </u>	Transferrin	4144	2	1	



CONDITION	DIAGNOSTIC BASI	KET	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 SPECIALISTS WE COVER EACH YEAR	
Chronic renal disease				Ferritin	4528	2		
uisease				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		
	U & E only	4171	1	U & E only	4171	2		
	Glucose – random/fasting	4057	1	Glucose – random/fasting	4057	1		
	LDL cholesterol	4026	1	LDL cholesterol	4026	1		
	HDL cholesterol	4028	1	HDL cholesterol	4028	1		
	Total cholesterol	4027	1	Total cholesterol	4027	1		
	Triglycerides	4147	1	Triglycerides	4147	1		
	C-reactive protein	3947	1					
	Platelet count	3797	1					
	Full blood count	3755	1					
	Urine analysis (dipstick)	4188	1					
	Thyrotropin (TSH)	4507	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		



CONDITION	DIAGNOSTIC 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 SPECIALISTS WE COVER EACH YEAR
Crohn's disease	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 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	_
	LDL cholesterol	4026	1	LDL cholesterol	4026	1	=
	HDL cholesterol	4028	1	HDL cholesterol	4028	1	_
	Total cholesterol	4027	1	Total cholesterol	4027	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	_
	Two-hour glucose- OGTT	4049	1	HBA1c	4064	4	_
	Urine creatinine	4221	1	Urine creatinine	4221	1	_
	Glucose –	4057	1	Tonometry	3014	1	_
	random/fasting			Fundus examination	3003 or 3004 or 3027	1	_
				Basic capital equipped in own rooms by ophthalmologists	3009	1	_
				Dietitian	84200 or 84201 or 84202 or 84203 or 84204 or 84205	1	_
				Podiatrist	68301 or 68302 or 68303 or 68304 or	1	-



CONDITION	DIAGNOSTIC BASI	KET		ONGOING MANAG	EMENT 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 SPECIALISTS WE COVER EACH YEAR
Diabetes mellitus 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)
	HDL cholesterol	4028	1	HDL cholesterol	4028	1	
	Total cholesterol	4027	1	Total cholesterol	4027	1	
	LDL cholesterol	4026	1	LDL cholesterol	4026	1	
	Triglycerides	4147	1	Triglycerides	4147	1	
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	4	
	U & E only	4171	1	U & E only	4171	1	
	Urine creatinine	4221	1	Urine creatinine	4221	1	
	Glucose – random/fasting	4057	1	HBA1c	4064	4	
	Serum creatinine	4032 or 4223	1	Serum creatinine	4032 or 4223	1	
	Two-hour glucose- OGTT	4049	1	Tonometry	3014	1	
	0011			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	
Dysrhythmia	ECG – Electrocardiogram	1232 or 1233 or	1	ECG – Electrocardiogram	1232	3	2
	Lieutocardiogram	1234 or 1235 or 1236		Liectiocaldiogram	1233 or 1234 or 1235 or 1236	1	
	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	1	
	U & E only	4171	1	U & E only	4171	2	
	Magnesium: Spectro- photometric	4094	1	Magnesium: Spectro- photometric	4094	1	



CONDITION	DIAGNOSTIC BASI	KET		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 SPECIALISTS WE COVER EACH YEAR	
Dysrhythmia	C-reactive protein	3947	1	Prothrombin index (PI)	3805	24		
	Thyrotropin (TSH)	4507	1	Therapeutic drug level: Dosage	3806	24		
	Echocardiography	3621 & 3622 & 3623 & 3620 & 3625	1	Echocardiography	3621 & 3622 & 3623 & 3620 & 3625	1		
	Serum calcium	4016 or 4017 or 4375 or 4376	1	Drug level in biological fluid	4081 or 4370 or 4493	2		
	24 Hour ambulatory ECG monitoring (holter)	1238 & 1239	1	Threshold testing: Own equipment	1268	1		
	monitoring (noner)			Programming of atrio-ventricular sequential pacemaker	1270	1		
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		
* These codes can only be	Tonometry	3014 or *11202 or *11212	1	Tonometry	3014 or *11202 or *11212	3	3 (Ophthalmologist or Ocular	
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		
	Visual fields	3016 or 3017 or *11443	1	Visual fields	3016 or 3017 or *11443	2		
	Basic capital equipped in own rooms by ophthalmologists	3009	1	Basic capital equipped in own rooms by ophthalmologists	3009	3		
	Central corneal thickness measurement	3020 or *11702	2 (1 per eye)	Retinal threshold trend evaluation	3018	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)		
	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		



Procedure of Procedure Security	CONDITION	DIAGNOSTIC BASE	KET		ONGOING MANAGEMENT BASKET				
Platelet count   3797		TEST	OR TEST	PROCEDURES OR TESTS WE	TEST	OR TEST	PROCEDURES OR TESTS WE COVER EACH	SPECIALISTS WE COVER	
Factor VIII or   Factor VIII or   Factor VIII or   Factor VIII or   Factor IX antigen or Coagulation   3825   1	Haemophilia	Full blood count	3755	1	Full blood count	3755	1	2	
Factor IX antigen or Cosquidation factors   Factor IX inhibitors		Platelet count	3797	1	Platelet count	3797	1		
PTT - Partial thromboplastin time		Factor IX antigen or Coagulation	3758 or 3757	1		3724	1		
Prothrombin index (Pr)   3805   1   1   1   1   1   1   1   1   1		Fibrinogen titre	3825	1					
Part   Company   Company		thromboplastin	3837	1					
level: Dosage			3805	1					
Thrombin time   3841   1   1			3806	1					
Total cholesterol   4027		Bleeding time	3713	1					
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   4130   1     AST - Alanine   aminotransferase   4130   1     ALT - Alanine   aminotransferase   4131   1     Hypertension   ECG -   Electrocardiogram   4057   1   ECG -   Electrocardiogram   4057   1   Glucose -   random / fasting   7   Total cholesterol   4027   1   Total cholesterol   4027   1     Urine analysis   4188   1   Urine analysis   4188   1   Urine analysis   4188   1     Urine analysis   4032 or   4221 or   4223   4223   4221 or   4223   422		Thrombin time	3841	1					
HDL cholesterol   4028	Hyperlipidaemia	Total cholesterol	4027	1	Total cholesterol	4027	1	0	
Triglycerides		LDL cholesterol	4026	1	LDL cholesterol	4026	1		
Thyrotropin (TSH)		HDL cholesterol	4028	1	HDL cholesterol	4028	1		
ALT - Alanine aminotransferase   Albertansferase   Albertansferase		Triglycerides	4147	1	Triglycerides	4147	1		
Hypertension   ECG -   Electrocardiogram   1232 or 1233   1   ECG -   Electrocardiogram   1232 or 1233   1   1   1		Thyrotropin (TSH)	4507	1		4130	1		
Electrocardiogram   Electrocardiogram   Electrocardiogram						4131	1		
Total cholesterol   4027   1   Total cholesterol   4027   1	Hypertension		1232 or 1233	1		1232 or 1233	1	1	
Urine analysis (dipstick)         4188         1         Urine analysis (dipstick)         4188         1           Creatinine         4032 or 4221 or 4221 or 4223         1         Creatinine         4032 or 4221 or 4221 or 4223         1           U & E only         4171         1         Potassium         4113         1           24 Hour ambulatory blood pressure         1237         1         1         Free thyroxine (FT4)         4482         2         0           Hypothyroidism         Free thyroxine (FT4)         4482         1         Thyrotropin (TSH)         4507         1         Thyrotropin (TSH)         4507         2			4057	1		4057	1		
Creatinine		Total cholesterol	4027	1	Total cholesterol	4027	1		
4221 or   4223			4188	1		4188	1		
24 Hour ambulatory blood pressure		Creatinine	4221 or	1	Creatinine	4221 or	1		
Ambulatory blood pressure		U & E only	4171	1	Potassium	4113	1		
(FT4)         (FT4)           Thyrotropin (TSH)         4507         1         Thyrotropin (TSH)         4507         2		ambulatory blood	1237	1					
	Hypothyroidism		4482	1		4482	2	0	
Total cholesterol 4027 1		Thyrotropin (TSH)	4507	1	Thyrotropin (TSH)	4507	2	_	
1000 010000101		Total cholesterol	4027	1					



CONDITION	DIAGNOSTIC 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 SPECIALISTS WE COVER EACH YEAR	
Multiple sclerosis	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	2	
	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		
	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		
	Visual evoked potentials (VEP): Bilateral	2682	1	ALT – Alanine aminotransferase	4131	1		
	Visual evoked potentials (VEP): Unilateral	2681	1	AST – Aspartate aminotransferase	4130	1		
Parkinson's disease	No diagnostic or mor	nitoring tests apply	as the diagnosis of	this condition remains	a clinical 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		
	X-ray of the left hand	65100	1	X-ray of the left hand	65100	1		
	X-ray of the right foot	74125	1	X-ray of the right foot	74125	1		



CONDITION	DIAGNOSTIC 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 SPECIALISTS WE COVER EACH YEAR	
Rheumatoid 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	4	
				ALT – Alanine aminotransferase	4131	2		
				Creatinine	4032 or 4221 or 4223	2		
				Drug level in biological fluid	4081 or 4370 or 4493	3		
Systemic lupus	Complement fixation test	3963 or 4182	1	Complement fixation test	3963 or 4182	2	4	
erythematosus	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	4		
	Extractable nuclear antigens	3934 or 3948	1	Antiglobulin test (Coombs)	3709	2		
	Full blood count	3755	1	Full blood count	3755	4		
	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		
	Skin biopsy	0233 & 0234 & 0235 & 0237	1	Total cholesterol	4027	1		
	Kidney biopsy	1841	1	Creatinine kinase	4152 or 4153	2		
	Urine microscopy	3867	1	AST – Aspartate aminotransferase	4130	4		
	ANF	3934	1	ALT – Alanine – aminotransferase	4131	4		
	DNA antibodies	4529 or 3948	1					
	DNA antibodies	4529 or 3948	1					



CONDITION	DIAGNOSTIC 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 SPECIALISTS WE COVER EACH YEAR	
Systemic lupus erythematosus	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					
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		
	455 or 458	4567 & 4571 or 4582 & 4584	3	Histology	4567 & 4571 or 4582 & 4584	1		
				Flexible sigmoidoscopy	1676	1		



# **Complaints process**

You may lodge a complaint or query with Sasolmed directly on **0860 002 134** or send an email to enquiries@sasolmed.co.za. If the query or complaint remains unresolved, you may address a complaint in writing to the Principal Officer. Please be sure to include the reference number obtained through the process with the Administrator.

Should your complaint still not be resolved to your satisfaction, you may lodge a formal dispute by following the Scheme's internal disputes process, as explained on the website at sasolmed.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.

#### Contact us

You can call us at **0860 002 134** or visit sasolmed.co.za for more information.