



Treatment Baskets for the Chronic Disease List (CDL) Conditions

Who we are

Retail Medical Scheme (referred to as "the Scheme"), registration number 1176, 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 and an authorised financial services provider (registration number 1997/013480/07). Discovery Health (Pty) Ltd administers Retail Medical Scheme.

Contact us

You can call us on **0860 101 252** or visit www.retailmedicalscheme.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 benefit 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 are covered for both the diagnosis and ongoing management of each condition.

We will only pay Prescribed Minimum Benefit (PMB) claims if your condition has been approved 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 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 consultations if you were an active 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 in full, from the treatment baskets for the ongoing management of your condition from healthcare providers such as radiologists, dietitians and podiatrists.

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 technologists who we do not have a payment agreement 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 consultations listed in the Prescribed Minimum Benefit (PMB) treatment baskets related to your condition from the Chronic Illness Benefit.

Essential Plus and Essential Option

We pay for four (4) consultations that are related to your approved condition a year with a GP who is a DSP up to the agreed rate.

If you use any other GP, 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.

How we pay specialist consultations related to your condition

We pay for consultations listed in the Prescribed Minimum Benefit (PMB) treatment baskets related to your condition from the Chronic Illness Benefit.

Essential Plus and Essential Option

Depending on your condition, we pay for a specific number of consultations with a specialist who we have a payment agreement with.

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.

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 the 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 the following requirements are not met:

- 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 Designated Service Provider network, go to *Find a healthcare professional* on our website.

Contact us

For further information please contact 0860 101 252 or visit www.retailmedicalscheme.co.za.

Page 2 of 14 01/2025





Treatment Baskets for Chronic Disease List (CDL) conditions

Condition	Diagnos	stic basket		Ongoing management basket				
	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Description of the procedure or test	Code for the procedure or test	Number we cover for the 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	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	4057	1	Glucose – random/fasting	4057	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	Thyrotropin (TSH)	4507	1		
	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					
	U & E only	4171	1	U & E only	4171	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	
	Peak flow	1192	1	Peak flow	1192	2	1	
	reak HOW	1174	1	reak HOW	1134	۷		

Page 3 of 14 01/2025





Condition	Diagnos	tic basket		Ongoing management basket				
	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Number of specialist consultations we cover each year	
Bronchiectasis	Flow volume test	1188 or 1186	1	Flow volume test	1186	1		
	X-ray of the chest two views, PA and lateral	30110	1					
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		
	Troponin isoforms	4161	1	Drug level in biological	4081 or	3		
	Glucose – random/fasting	4050 or 4057	1	fluid	4370 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	1		
	Total cholesterol	4027	1	Atrioventricular sequential pacemaker				
	X-ray of the chest two views, PA and lateral	30110	1	X-ray of the chest two views, PA and lateral	30110	1		
Cardiomyopathy	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	2		
	B-Type natriuretic peptide	4488	1	B-Type natriuretic peptide	4488	1		

Page 4 of 14 01/2025





Condition	Diagno	stic basket		Ongoing management basket				
	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Number of specialist consultations we cover each year	
Cardiomyopathy	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	4		
	Glucose – random/fasting	4057	1	Prothrombin index (PI)	3805	24		
	Full blood count	3755	1	Therapeutic drug level: Dosage	3806	24		
	C-reactive protein	3947	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		
	U & E only	4171	1	U & E only	4171	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		
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	1	
	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		

Page 5 of 14 01/2025





Condition	Diagnos	stic basket		Ongoing management basket				
	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Number of specialist consultations we cover each year	
Chronic renal disease				Dietitian	84200 or 84201 or 84202 or 84203 or 84204 or 84205	1		
Coronary artery disease	Creatinine	4032 or 4221 or 4223	1	Creatinine	4032 or 4221 or 4223	2		
	Glucose – random/fasting	4050 & 4057	1	Glucose – random/fasting	4050 & 4057	1		
	U & E only	4171	1	U & E only	4171	2		
	ECG – Electrocardiogram	(1228+1230) or (1229+1231) or 1232 or 1233 or 1234 or 1235 or 1236	1	ECG – Electrocardiogram	(1228+1230) or (1229+1231) 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		
	Total cholesterol	4027	1	Total cholesterol	4027	1	-	
	LDL cholesterol	4026	1	LDL cholesterol	4026	1	1	
	C-reactive protein	3947	1					
	Urine analysis (dipstick)	4188	1					
	Full blood count	3755	1					
	Thyrotropin (TSH)	4507	1					
	Platelet count	3797	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	Faecal Calprotectin (Elastase Quantitative ELISA)	432	1		
Diabetes Insipidus	U & E only	4171	1	U & E only	4171	3	1	

Page 6 of 14 01/2025





Condition	Diagnos	stic basket		Ongoing management basket			
	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Number of specialist consultations we cover each year
Diabetes 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)
	Glucose – random/fasting	4057	1	HbA1c	4064	4	4 (Other
	Microalbuminuria	4261 or 4262	1	Microalbuminuria	4261 or 4262	2	Specialist)
	Serum creatinine	4032 or 4223	1	Serum creatinine	4032 or 4223	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	
	U & E only	4171	1	U & E only	4171	1	1
	Urine creatinine	4221	1	Urine creatinine	4221	1	
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	4	1
	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	
				Podiatrist	68301 or 68302 or 68303 or 68304 or	1	
				Diabetes Educator	DFSC1		
				Diabetes Educator	DEDU1 or DEDUT	2	
				Dietitian	84200 or 84201 or 84202 or 84203 or 84204 or 84205	1	

Page 7 of 14 01/2025





Condition	Diagnos	stic basket		Ongoing management basket				
	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Number of specialist consultations 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)	
	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		
				Diabetes Educator	DEDU1 or DEDUT	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 – Electrocardiogram	1232 or	1	ECG – Electrocardiogram	1232	3	2	
		1233 or 1234 or 1235 or 1236			1233 or 1234 or 1235 or 1236	1		

Page 8 of 14 01/2025





Condition	Diagnos	tic basket		Ongoing management basket				
	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Number of specialist consultations we cover each year	
Dysrhythmia	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	1		
	U & E only	4171	1	U & E only	4171	2]	
	Magnesium: Spectrophotometric	4094	1	Magnesium: Spectrophotometric	4094	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		
	24-hour ambulatory blood pressure	1237	1	Threshold testing: own equipment	1268	1		
				Programming of the Atrioventricular sequential pacemaker	1270 or 75075	1		
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 Technologists)	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		
				Drug level in biological fluid	4081 or 4370 or 4493	3		
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		

Page 9 of 14 01/2025





Condition	Diagnos	stic basket		Ongoing management basket				
	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Number of specialist consultations we cover each year	
Glaucoma * These codes can	Visual fields	3016 or 3017 or *11443	1	Visual fields	3016 or 3017 or *11443	2		
only be billed by an Ocular Therapeutic	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		
Optometrist	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					
	PTT - Partial thromboplastin time	3837	1					
	Prothrombin index (PI)	3805	1					
	Therapeutic drug level: Dosage	3806	1					
	Bleeding time	3713	1					
	Thrombin time	3841	1					
Hyperlipidaemia	Thyrotropin (TSH)	4507	1	AST – Aspartate aminotransferase	4130	1	0	
				ALT – Alanine aminotransferase	4131	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		
Hypertension	ECG – Electrocardiogram	1232 or 1233	1	ECG – Electrocardiogram	1232 or 1233	1	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		
	24-hour ambulatory blood pressure	+	1	24-hour ambulatory blood pressure		1		
				Potassium	4113	1		
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	1]	
	U & E only	4171	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					

Page 10 of 14 01/2025





Condition	Diagnos	tic basket		Ongoing management basket			
	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Number of specialist consultations we cover each year
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	
	CSF-IgG Index	4036	1				
Parkinson's disease	No diagnostic or	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	1
	Platelet count	3797	1	Platelet count	3797	2	1
	Urine analysis (dipstick)	4188	1	Urine analysis (dipstick)	4188	4	1
	U & E only	4171	1	U & E only	4171	1	1
	Creatinine	4221	1	Creatinine	4221	1	1
	AST – Aspartate aminotransferase	4130	1	AST – Aspartate aminotransferase	4130	4	
	ALT – Alanine aminotransferase	4131	1	ALT – Alanine aminotransferase	4131	4	
	Rheumatoid factor	3959 or 4182	1				
	Anti-Nuclear Factor (ANF)	3934	1	1			
	Anti-CCP	4600	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	

Page 11 of 14 01/2025





Condition	Diagnostic basket			Ongoing management basket			
	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Number of specialist consultations we cover each year
Rheumatoid arthritis	X-ray of the right hand or right wrist	65105 or 65135		X-ray of the right hand or right wrist	65105 or 65135		
	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	4	X-ray of the left hip	56100	4	
	X-ray of the right hip	56110		X-ray of the right hip	56110		
	X-ray of the left shoulder	61130	-l —	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	2100		X-ray of the left knee	2100		
X	X-ray of the right knee	72105		X-ray of the right knee	72105		
Juvenile	In addition	to above, the	e below is also ava	ailable for members less tha	n 18 years o	ld	Ophthalmologist
Rheumatoid arthritis	Ultrasound of the right wrist or left wrist	65210 or 65200		Ultrasound of the right wrist or left wrist	65210 or 65200	1	Visit 1 for > 10 years
	Ultrasound of the right foot or right ankle	74225 or 74215	fo U o U	Ultrasound of the right foot or right ankle	74225 or 74215		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	1	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	72205		
	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 sedimentation rate or C-reactive protein	3743 or 3947	2	
Schizophrenia				AST – Aspartate aminotransferase	4130	2	4
				ALT – Alanine aminotransferase	4131	2	
				U & E only	4171	2	

Page 12 of 14 01/2025





Condition	Diagnos	tic basket		Ongoing management basket				
	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Description of the procedure or test	Code for the procedure or test	Number we cover for the year	Number of specialist consultations we cover each year	
Schizophrenia				Creatinine	4032 or 4221 or 4223	2		
				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		
	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		
	Extractable nuclear antigens	3934 or 3948	2	Total cholesterol	4027	1		
	Urine microscopy	3867	1	Creatinine kinase	4152 or 4153	2		
	Anti-Nuclear Factor (ANF)	3934	1	Antiglobulin test (Coombs)	3709	2		
	Histology	4567 & 4571 or 4582 & 4584	3	AST – Aspartate aminotransferase	4130	4		
	DNA antibodies	4529 or 3948	2	ALT – Alanine aminotransferase	4131	4		
	Skin biopsy	4567 & 0233 & 0234 & 0235 & 0237	1					
	Kidney biopsy	1841	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		
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		
	Histology	4567 & 4571 or 4582 & 4584	3	Histology	4567 & 4571 or 4582 & 4584	1		
				Faecal Calprotectin (Elastase Quantitative ELISA)	4362	1		
				Flexible sigmoidoscopy	1676	1		

Page 13 of 14 01/2025





Queries or complaints

You may lodge a query or complaint with Retail Medical Scheme directly on **0860 101 252** 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 Retail Medical Scheme internal disputes process. You can read more about the disputes process on www.retailmedicalscheme.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.

Page 14 of 14 01/2025