



## RULINGS ISSUED BY THE OFFICE OF THE REGISTRAR

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DJ obo N v Discovery Health Medical Scheme

Declined funding of appliance.

This complaint was lodged by Dr. DJ ("the Complainant") on behalf of Mrs. N ("the member") against Discovery Health Medical Scheme ("the Scheme"). The complaint concerns the Scheme's decision to decline funding of an abduction arm sling which was prescribed for the member. According to the complainant an application for PMB (Prescribed Minimum Benefit) funding was submitted to the Scheme, but the application was rejected by the Scheme. The complainant contended that despite providing all required documents and information, the Scheme maintained its rejection of the PMB application.

The complaint was referred to the Scheme in terms of Section 47(1) of the Medical Schemes Act. In terms of the Scheme's response to the Council for Medical Schemes (CMS) the non-payment of the member's abduction arm sling is because the treatment was requested for a non-Prescribed Minimum Benefit (PMB) conditions (Rotator cuff syndrome (ICD-10 Code M75.1) and Presence of orthopaedic joint implants (ICD-10 Code Z96.6). The Scheme explained that the Shoulder smart sling billed by the complainant was classified as an external medical item (EMI), which is ordinarily payable from the Medical Savings Account (MSA) or Above Threshold Benefit (ATB). As the member belongs to a plan without an MSA or ATB day-to-day benefit component, the claim was rejected and became the member's responsibility.

A clinical opinion was sought from the Registrar's Clinical Review Committee ("the CRC") to confirm whether the members condition qualifies as a PMB and whether the treatment qualifies as PMB level of care. After assessing all the documents from all the parties, the CRC responded the member's condition Rotator cuff syndrome (ICD10 code M75.1) is not included in the PMB Regulations under the Diagnosis and Treatment Pairs of the "Musculoskeletal System: NOS," and the post-operative provision of the Shoulder smart sling does not qualify as PMB level of care. The CRC further emphasised that although the initial shoulder injury may have been of sudden onset, the applicable PMB code limits PMB funding to the stage where a PMB condition has been excluded by additional medical evidence. In this case, the diagnostic imaging and clinical reports confirmed

the absence of a PMB condition, and therefore the Scheme was not obliged under the PMB provisions to fund the item in full.

The Registrar found that the Respondent is correct in its funding decision. The complaint is hereby dismissed.