



Reference: PMB Review
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Circular 83 of 2016: Review of the Prescribed Minimum Benefits

1. Background

The Council for Medical Schemes (CMS) is embarking on a process to review the Prescribed Minimum Benefits (PMBs). In terms of the Medical Schemes Act 131 of 1998, the PMBs are subject to review after every two years to address issues relating to:

- (i) inconsistencies or flaws in the current regulations;
- (ii) the cost-effectiveness of health technologies or interventions;
- (iii) consistency with developments in the health policy; and
- (iv) the impact on medical scheme viability and its affordability on members

Following the previous PMB review exercise, the Council for Medical Schemes made submissions to the National Department of Health (NDoH) for the review of the PMBs based on inputs received from various stakeholders. The NDoH did not approve the proposed revision of the PMBs, citing the hospicentric posture as an issue of concern. The NDoH also indicated that the proposed revision did not reflect a prioritization of the current health needs of the country, and that the criteria for inclusion and exclusion of some of the PMB conditions was not clear.

According to the White paper on the National Health Insurance (NHI), medical schemes are expected to play a supplementary role as part of the transition process towards full implementation of the NHI. Once the NHI is fully implemented, medical schemes will be expected to offer complementary cover to fill the gaps in the universal healthcare entitlements offered by the State.

Against this background, the current review process is aimed at addressing all the issues raised, also taking into account the submissions that were made by different stakeholders during the previous review process. The process will place emphasis on the following:

- Alignment of the PMB package with recent developments in health policy;
- specification of a comprehensive set of out of hospital and in-hospital essential healthcare benefits;
- Identification of actions that should be undertaken to ensure the sustainability of the package; and
- Identification of measures required to ensure affordability of the package.

2. Guiding principles

The guiding principles as outlined in the attached [consultative document](#) are as follows:

- **The current health situation of the country:** the package should prioritise the health needs of the country, that is, services covered should be based on the needs of the population;
- **The needs of the country:** the package should address the needs of the country as stipulated in the National Development Plan (NDP);
- **Internationally agreed instruments:** the package should contribute to achieving internationally agreed instruments such as the Sustainable Development Goals (SDG);
- **Clinical and cost effectiveness of interventions:** the services package should adhere to the principles of clinical effectiveness and cost effectiveness;
- **Efficiency:** allocation of services should be in a manner that will optimize value for money;
- **Affordability of interventions:** the package should be affordable to schemes, i.e. the package should be financially viable.

3. Proposed construct

Considering the various principles and objectives of the PMB review, the proposed construct takes into consideration the initial recommendations to align the private sector package with the public sector package, as well as stakeholder comments on the initial proposal as contained in the March 2008 consultation document.

Table1: Proposed construct of the PMB package

Primary Health care package	Hospital level package
Preventative services	Inpatient education packages
Maternal and neonatal services	Maternal and neonatal services
Child health services	Child health services
Curative services	Curative services
Mental health services	Mental health services
Diagnostic: laboratory services	Diagnostic: laboratory services
Diagnostic: imaging services	Diagnostic: imaging services
Pharmaceutical services	Pharmaceutical services
Emergency medical services	Emergency medical services
Palliative services	Palliative services

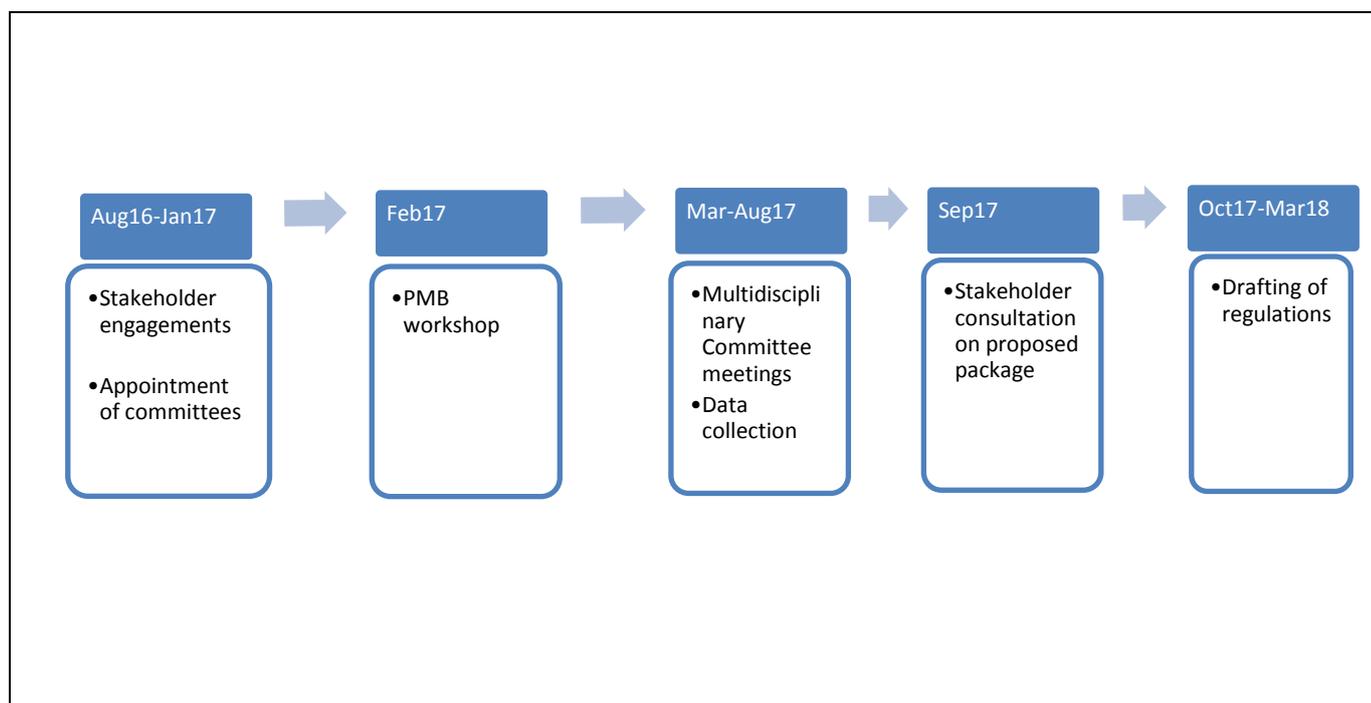
4. Process

The process will assume a participative approach involving all key stakeholders affected by the regulations. The process will be governed by a steering committee, comprising officials of the Department of Health and the Council for Medical Schemes. Multidisciplinary committees dealing with the proposals will be appointed by virtue of members' qualifications, relevant experience and exposure, as well as technical skills. The committees will consider the submissions from different stakeholders and recommend a package to the steering committee. The process will be geared towards supporting the PMB review initiative, and will include the definition and specification of a comprehensive essential healthcare package. This will also take into consideration the identified restraints, and the proposed measures that are necessary to ensure sustainability of the package. A project manager will coordinate the activities of the various committees.

5. Proposed time-frames

The PMB review process will start with consultation meetings with different stakeholders. Consultations with different stakeholders regarding the envisaged process commenced in August 2016. Inputs on the proposed package will be solicited from different stakeholders during the period of November 2016 until January 2017. This will be followed by a PMB workshop on the review project in February 2017. Multidisciplinary committee meetings to interrogate the submissions and to propose recommendations will take place between March 2017 and August 2017. This will be followed by the drafting of the regulations based on the final recommendations, in the second semester of 2017/2018 financial year. The figure below depicts the proposed timeframes and work plans for the review.

Figure1: PMB review work plan



6. Conclusion

Stakeholders are requested to make submission with regards to the process, current challenges as well as propose a healthcare package that will address the needs of the country. Stakeholders are also invited to nominate people to serve on the multidisciplinary teams that will be advising on the package. The multidisciplinary teams will comprise individuals from relevant clinical and health policy disciplines, patient groups, funders, actuaries, public health specialists, and those likely to be involved in the management of the particular condition under review.

Applications to serve on the committees, and the submissions of proposals must be send to pmbreview@medicalschemes.com before the 27th January 2017.

The CMS would like to thank you in advance for your cooperation and participation in different PMB review committees and forums.

PP

A handwritten signature in black ink, appearing to be 'H. Zokufa', written in a cursive style.

Dr Humphrey Zokufa
Chief Executive & Registrar
Council for Medical Scheme