



COUNCIL FOR MEDICAL SCHEMES

REGULATORY PLAN AND BUDGET 2006/7



STRATEGIC OBJECTIVES

Secure an appropriate level of protection of beneficiaries of medical schemes and the public by authorizing the conduct of medical schemes business and monitoring the financial performance of schemes.

Provide support and guidance to trustees and promote understanding of the medical schemes environment by trustees, beneficiaries and the public.

Foster compliance with the Act by medical schemes, administrators and brokers and initiate enforcement action where required.

Investigate and resolve complaints raised by beneficiaries and the public.

Monitor the impact of the Act, research developments, and recommend policies options to improve the regulatory environment.

Foster the continued development of the CMS as an employer of choice.

Develop strategic alliances nationally, regionally and internationally.

COUNCIL FOR MEDICAL SCHEMES

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TABLE OF CONTENTS

PART 1: CHIEF EXECUTIVE OFFICER'S OVERVIEW	4
PART 2: REGULATORY PLAN.....	9
BENEFITS MANAGEMENT	10
FINANCIAL SUPERVISION	16
ACCREDITATION	22
RESEARCH & MONITORING	27
COMPLIANCE	30
LEGAL SERVICES	34
COMPLAINTS ADJUDICATION	38
COMMUNICATION	42
THEME PROJECT	45
RISK EQUALISATION	47
HUMAN RESOURCES	50
INTERNAL FINANCE	56
INFORMATION SYSTEMS AND KNOWLEDGE MANAGEMENT	62
PART 3: BUDGET	72
INCOME BUDGET FOR THE FINANCIAL YEAR 2006/2007	73
FULL BUDGET FOR THE FINANCIAL YEAR 2006/2007	74
BUDGET PER UNIT	77
<i>CEO</i>	77
<i>Legal</i>	77
<i>Communications</i>	78
<i>Financial supervision</i>	78
<i>COO</i>	79
<i>Research & Monitoring</i>	79
<i>Accreditation</i>	80
<i>Complaints</i>	80
<i>Compliance</i>	81
<i>Benefits Management</i>	81
<i>Human Resources</i>	82
<i>Internal Finance</i>	83
<i>Information Systems and Knowledge Management</i>	84
<i>Risk Equalisation Fund</i>	85



PART 1: CHIEF EXECUTIVE OFFICER'S OVERVIEW

Chief Executive Officer's Overview

Introduction

This Regulatory Plan explains the Council for Medical Schemes' priorities for 2006/2007. It is also the basis that we and others will judge the progress we are making in our work. The plan also incorporates the budget required to deliver on these activities.

As in the previous years, the background to this plan remains unchanged. We remain committed to:

- Securing an appropriate level of protection for beneficiaries of medical schemes by ensuring that the medical schemes market operates fairly, effectively and in a clean and sustainable manner;
- Pursuing a risk-based regulatory approach, which seeks to identify the 'big problems' in the medical schemes industry and to find ways to solve them.
- Regulating in a manner that is proportionate and that recognizes the responsibilities of trustees to govern the operations of medical schemes.

Securing adequate protection for beneficiaries

We indicated the need, following the findings of our theme project on *Fair Treatment of Beneficiaries*, for medical schemes to simplify their benefits offerings to members. We covered some ground in this regard during 2005/06 with a focus on simplifying the operations of medical savings accounts and the so-called annual routine benefits for out of hospital cover.

We will continue this theme in 2006/07 and will seek to conclude proposals for the development of comprehensive benefits to be offered alongside a small number of supplementary benefits. We believe that this new structure of benefits will simplify benefits design considerably and be far more easily understood by members. It will not impose any added administrative burdens. The new benefit restructuring will also encourage medical schemes to compete more effectively on price, efficiency and choice of designated service providers while establishing a platform for the imminent implementation of risk equalization in South Africa.

We have learnt many lessons from the experience of requiring medical schemes to submit benefit and contribution changes during October of each year for assessment before these rules take effect. We will further streamline this process during 2006/07 and begin the implementation of online submission of changes to benefits and contributions in order to improve the efficiency of our work. We will also refine our *Benefits Analyser* tool that worked so well in the assessment of contributions and benefits during 2005.

Our work on accreditation of intermediaries will continue during 2006, with a key focus on ensuring greater compliance with the accreditation conditions, assessing the financial soundness of administrators and managed care entities and responding a lot more effectively to complaints about broker conduct. We will continue to pay considerable attention to improving the financial soundness of medical schemes. At the same time, one of the key regulatory challenges will be to ensure appropriate transition by medical schemes to the new *International Financial Reporting Standards (IFRS)*.

We have seen some pleasing leveling off of contribution increases over the last two years. We need to continue work on ensuring that these decreases are sustained. In this context, we will continue our robust approach to the analysis of proposed contributions increases that are above CPIX, and will not approve these without substantial motivation. We also hope to conclude our investigation into the large increases faced by medical schemes in respect of hospital expenditure. We will also approach the Competition Commission for targeted investigations into the conduct of some hospitals in this regard.

Our consultations on governance during 2005 have suggested that the existing model of medical scheme governance (which is predicated on promoting member participation and ensuring independence of trustees from parties with commercial interest) should be retained with some enhancements. These relates, first, to improving the manner in which annual general meetings and trustee elections are conducted and second, to strengthening the capacity of schemes and principal officers to provide oversight of members' funds. We will seek regulatory changes this year in order to further strengthen governance of medical schemes.

We will continue our focus on fair treatment of members in a number of ways. First, we will continue to require that all high impact medical schemes should set out their visions with regard to treating beneficiaries fairly and build this into the operations and culture of their medical schemes. After all, we continue to believe that treating

consumers fairly is ultimately the responsibility of Board of Trustees and senior management of medical schemes. Second, we will place renewed emphasis on the work we do with trustees in order to improve the clinical governance of their schemes in the interest of protecting members' benefits. Finally, our consumer education work will place greater focus on providing members with the type of information needed to make effective decisions about their schemes.

Our enforcement powers remain important tools to deploy in order to better protect beneficiaries. During 2005, we refined our compliance strategy to incorporate the use of an array of compliance tools such as education, outreach, partnership, consensus and facilitation. We also enhanced our compliance capacity quite substantially. We intend to focus our attention firmly on a number of compliance priorities, including governance and broker payments. As before, we will seek to establish greater predictability of enforcement actions in order to improve their effectiveness, and to reduce the time lag between an infraction having taken place and any subsequent enforcement action.

Our work on building the Risk Equalisation Fund (REF) system will continue. We will work with the Department of Health and Parliament to finalise the required legislation this year. We will also complete the development of the new IT infrastructure and other capacities required to deliver risk equalisation. We hope to indicate during the course of the year whether all the required systems will be in place in time for the risk equalization transfers to be effected in January 2007. We also propose to conclude the review of, and act on industry recommendations on facilitating access to medical schemes by those with low incomes.

Theme projects for 2006 / 07

We will continue to complement our risk based regulatory approach with theme based work. We will engage in a theme project seeking to establish capital adequacy standards for managed health care entities during this year.

Our people and other business capabilities

Our ability to deliver on our objectives depends critically on recruiting and retaining smart, capable and committed people. We will continue our work on fostering the development of the Council as an employer of choice. In this regard, we will sharpen our focus on remuneration policies, skill development strategies and the development of a strong and strategically relevant organizational culture that will assist in enhancing our performance.

In the final analysis, we believe that we will improve the medical schemes environment if we do well on four broad thematic concerns:

- Improving the *governance of medical schemes* and our own ability to take appropriate enforcement actions in a timely and proportionate manner.
- Reducing costs of medical schemes membership and removing *constraints for the development of low cost health insurance*.
- Continuing to find ways of *embedding the fair treatment of members* in the strategies and operations of medical schemes; and
- Placing our staff at the centre of our organizational purpose, by ensuring that we continual work on *aligning our business plans with a strategy for people* and their development.

Our budget

We propose expenditure of R41,123, 359 during 2006/07. This is 7,5% higher than our last year's expenditure. The effect on levies charged will be an increase to R11,40 from R9,80 per member per year.

Conclusion

The Medical Schemes Act places a number of responsibilities on the Council. These are broad and complex. We hope that the that the overall balance of activities that we have proposed in this regulatory plan will be seen as a reasonable judgment in effecting our medium term strategic direction but also building on the work of the last year. In particular, we hope that this work will allow us to deliver on our statutory remit of securing the protection of members and promoting the stability of medical schemes.

T. Patrick Masobe

March 2006.



PART 2: REGULATORY PLAN

Benefits Management

Provide support and guidance to trustees, and promote understanding of the medical schemes environment by trustees, beneficiaries and the public

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Promote sound corporate governance of medical schemes	Participate in BOT training workshops on scheme rules in line with training targets	Appropriate and effective training of Trustees on scheme rules	Improved governance of schemes by BOT's
	Participate in BOT training workshops on clinical governance module, and other clinical issues	Appropriate and effective training of trustees on clinical governance and other clinical issues	Improved clinical governance of schemes
Ensure fair treatment of beneficiaries by determining minimum standards of information provided to the public	Finalise guidelines for compilation of marketing material and application forms used by medical schemes	Proposed marketing guidelines, May 2006; Application forms by June 2006.	Information provided to members by schemes is simple, understandable and promotes fairness
	Publish the documents on the website for comments from stakeholders by end April 2006	Websites publication, July 2006	
	Collate all responses	Revised versions to SMM, August 2006	
	Publish final versions	Final guidelines, September 2006.	

Secure an appropriate level of protection for beneficiaries of medical schemes by authorizing the conduct of the business of medical schemes

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Ensure compliance by all schemes in their rules with the Act, amended regulations and revised model rules	Development of a procedure for evaluation of scheme rules	Document outlining procedure for evaluation of scheme rules by end of April 2006	Scheme rules that are consistent with legislation
	Circulate to schemes the revised dates for submission of contributions and benefits. Advise schemes that there will be no marketing of contributions and benefits prior to their approval	Circular outlining revised process for submission of contributions and benefits by April 2006	Contributions and benefits changes are evaluated and approved prior to implementation by schemes
	Ensure submission by schemes of Appendix I and Annexures A and B on contributions and benefits changes by 1 Sept 2006	Appendix I and Annexures A and B received by 1 Sept 2006	
	Engage in review and approval of contributions and benefits together with R and M and FSU	Recommendations to Registrar on annual contributions and benefits changes for each scheme	Contributions and benefits changes approved and registered by 31 December 2006.
	Analyse and recommend rest of rule amendments for approval	Submit recommendations to Registrar within 7 working days from date of receipt	Rules are consistent with Act, Regulations and policy framework
	Communicate reasons for not registering rules to schemes	Letter within 7 days of analysis of rules	
	Interpret and guide stakeholders re contents of model rules	Communication to stakeholders, as required	Ensure compliance with legal and policy issues

Part 2: Regulatory Plan Benefits Management

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Develop standards for electronic submission of contributions and benefits	Develop a technical specification document in conjunction with IT	Finalise the template by April 2006	Online submission of contributions and benefits by 1 September 2006
	Commence pilot study with identified analyst and schemes	Publish the documents on the website for comments from stakeholders, by May 2006	
	Finalisation of the document by collating responses from stakeholders, by June 2006	Report on the standards for submission of contributions and benefits by August 2006	
	Begin testing exercises of the electronic submission process in July 2006		
Amalgamations and liquidations	Manage amalgamation in compliance with the approved expositions and prevailing legislation	Prepare a report based on amalgamation documents within 21 days	Ensure compliance with relevant provisions upon amalgamation of schemes
	Manage liquidation procedures in compliance with the approved expositions and prevailing legislation	Report based on exposition documents within 14 days	
Contribute to the implementation of the Risk Based Operating Framework at CMS	Assist in developing a Risk Assessment Frameworks (RAFs) and Risk Mitigation Plans (RMPs) for schemes judged high impact	Updating of RAF for high impact schemes. Ongoing.	Schemes are supervised in line with the risk they pose
Clinical support in relation to benefits	Rendering of clinical advice and support as per request	Advice provided to BMU analyst, within one week of request	Evidence based and complaint rules, which facilitate access to appropriate quality care
	Review of compliance of benefits and exclusions with PMB regulations	All scheme benefits and exclusions reviewed according to positive exclusion list that complies with Medical Schemes Act	

Investigate and resolve complaints raised by beneficiaries and the public

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Clinical support in resolution of complaints	Rendering of clinical advice and support as per request	Advice provided to Complaints unit, within one week of request	Clinically appropriate resolution of complaints, resulting in greater protection for consumers
	Documenting of decisions made in the complaints resolution process	Monthly preparation of a summary of decisions on complaints	

Monitor the impact of the Act, research developments and recommend policy options to improve the regulatory environment

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Review of Prescribed Minimum Benefits	Propose technical and corrective amendments to PMBs.	Technical corrections presented to SMM by mid April. DoH by end April	Corrections to PMB's made in resulting in improved enabling framework consistent with policy developments
	Cooperation with Department of Health and other relevant stakeholders during public commentary process	Report collating public comments and recommendations by July 2006	
	Proposed amendments to regulations forwarded to Department of Health by end June 2006	Gazetted PMB regulations by August 2006	
	Interpretation of PMBs to medical schemes and other relevant stakeholders	Publications of circulars and other official documents to clarify	Improved protection of beneficiaries

Part 2: Regulatory Plan Benefits Management

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
		understanding and implementation of PMBs	
	Formulation of a negative list for in-hospital benefits.	A negative list discussion document by May 2006.	Improved consistency within benefit schedules. A standardised package of essential benefits based on Evidence-based Medicine, affordability
	Define methodology applicable, together with inclusion criteria, for PMBs	Document on exclusion and inclusion criteria for PMBs, by December 2006	
Review of CDL therapeutic algorithms	Finalisation and review of CDL algorithms	Gazetting of the outstanding and reviewed algorithms, as possible, but no later than December 2006	CDL algorithms which are complete, up to date, and evidence-based
Managed Health Care	Participation within the managed care steering sub-committee with regards to the accreditation of new applications for managed care organisations and review of compliance parameters set out in accreditation certificate	Review and preparation of recommendations to Council with regards to new applications and review of three-monthly compliance parameters	Appropriate accreditation of managed care entities that comply with Regulations

Develop strategic alliances nationally, regionally and internationally

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Improve relations with provider groups and medical schemes	Regular meetings with groups of providers and Medical Advisors and identified stakeholders Road show and training sessions for stakeholders	Increased awareness and understanding of the regulatory environment by providers, medical advisors and stakeholders Promote communication and cooperation within industry Effective interaction with providers and stakeholders	Informed providers and stakeholders and increased consumer protection

Financial Supervision

Secure an appropriate level of protection for beneficiaries of medical schemes and the public by monitoring the financial performance and soundness of medical schemes

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Help improve standard of medical schemes' reporting.	Training of administrators on the preparation of financial statements and returns.	Administrator workshops by March 2007.	Improved quality of data submitted by medical schemes, and efficient use of resources.
Update Audit and Accounting guide issued by SAICA.	Liaise with SAICA to reflect amendments to the Act, Regulations and Accounting and Audit standards in the Audit and Accounting Guide for Medical Schemes.	Revised Audit and Accounting Guide (November but dependant on SAICA's processes).	Enhanced financial reporting based on updated legislation and accounting standards reflected in the guide.
	Attendance of accounting seminars and workshops.	Accounting seminars and conferences	Understanding of accounting and auditing changes.
Improve statutory returns as tools for reporting.	Identify and document changes to statutory returns to incorporate changes in accounting standards and legislation.	Refined statutory returns: Annual return IT specifications by Oct '06. Quarterly returns IT specifications by Jan '07.	Improve quality of data for sound decision making (both regulatory and scheme management).
	Development of quarterly returns (QR).	Quarterly returns changes finalised by April '06 (starts in Feb '06 – '06 QR) and April '07 (starts in Feb '07 – '07 QR).	To inform stakeholders of the financial performance of the industry on an ongoing basis.
	Development of the 2006 annual return.	Annual return changes finalised by Feb '07.	
	Disseminate the 2006 on-line annual	Annual return available for completion by	

Part 2: Regulatory Plan Financial Supervision

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	statutory return. Disseminate 2006 on-line quarterly statutory returns. Analysis of quarterly returns. Analysis of annual returns.	Mar '07. Quarterly return available for completion by May '06. Publication of reports: Q1 – end July Q2 – end October Q3 – End February Q4 – End April Financial analyses of the Annual return, by end June '06.	
Monitor the financial soundness of medical schemes.	Identify schemes that do not comply with Regulation 29, using the returns and supporting documents.	Quarterly reports of non compliant schemes.	Improved financial position and performance of the medical schemes and compliance with the Act.
	Identify schemes that do not comply with the Act and Regulations in financial aspects other than investments using the returns and supporting documents.	Quarterly reports of non compliant schemes.	
	Examine and evaluate the structure and elements of the Regulation 29(4) business plans in order to assess the true financial position and performance of the medical schemes. Monitoring schemes' compliance with the agreed action plan.	Report on scheme's action plan, 8 weeks after receipt of business plan. Quarterly report on extent of compliance with agreed action plan.	
Ensure compliance with the financial aspects of the Act.	Analysis of the following applications:	- Auditor reports by end August.	Improved levels of compliance.
	- Auditor approval; - Reinsurance contracts;	- Reinsurance contracts;	

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	<ul style="list-style-type: none"> - Exemptions; - New schemes; - Amalgamations. 	<ul style="list-style-type: none"> ○ Reply to schemes within 30 days of receipt of application; ○ Report within 4 weeks of receipt of all information. <p>Reports within 4 weeks of receipt of all information for:</p> <ul style="list-style-type: none"> - Exemptions; - New schemes; - Amalgamations. 	
	<p>Identify schemes that are non-compliant iro. investments.</p> <p>Update the internal investments manual as new products and data become available.</p>	<p>Report on investments, 8 weeks after submission of Annual Returns.</p> <p>Updated manual by March 2007.</p>	
Ensure that financial guidelines used by CMS are up to date.	<p>Review auditor approval process.</p> <p>Review of the following standard documentation:</p> <ul style="list-style-type: none"> - Business plans; - Management accounts; - Reinsurance guidelines. 	<p>Revised auditor approval procedure by end April 2006.</p> <p>Revised documentation by end March 2007.</p>	Improved and updated standard documentation to be used by medical schemes.
Contribute to the development of the Risk Based Framework	<p>Review and update of the RAP's for all high impact schemes.</p> <p>Review and updating of the RMP for all high impact schemes.</p>	<p>Quarterly updated RAPs.</p> <p>Annual updated RMPs.</p>	Schemes are supervised in line with the risk they pose.
Registration of rules in respect of contributions and benefits.	Engage in the assessment of all contribution and benefit changes together with BMU and R & M.	Final decisions on the 2007 contribution and benefit changes by end December 2006.	Contribution and benefit changes are assessed for their financial impact.
Assist in ensuring that medical schemes' benefit options are financially sound.	Assessment of the financial impact of new benefit options and material	Report in respect of new benefit options and material restructuring to existing	Improve financial soundness of the benefit options in a medical scheme.

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	restructuring of existing options to ensure that options are financially sound and self-supporting.	options within 4 weeks after all information has been received.	

Provide support and guidance to trustees, and promote understanding of the medical schemes environment by trustees, beneficiaries and the public

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Promote good governance in the medical schemes industry.	Update the financial modules for the Board of Trustees Manual.	Updated financial modules for the BoT manual on request by the training unit.	Improved financial understanding of schemes by BoTs.
Contribute to BoT training on financial issues.	Prepare and present modules on financial management of schemes to BoTs at training workshops.	Financial modules presented as per training targets.	Increased capacity by BoTs for financial management of schemes.
	Take part in Registrar's Annual Report road shows with BoTs.	Presentations at road shows, during September 2006.	Greater industry appreciation of findings of annual report.

Foster compliance with the Act by medical schemes, administrators, managed care organizations and brokers

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Accreditation of managed care organizations.	Participation in managed care accreditation review processes.	Advice provided on request of Accreditation unit.	Accreditation in compliance with Medical Schemes Act.
Accreditation of administrators.	Participation in administrator accreditation review processes, including evaluation of reports.	Assistance provided on request of Accreditation unit.	Administrators function in terms of regulatory standards.

Monitor the impact of the Act, research developments and recommend policy options to improve the regulatory environment

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Improving cost containment and efficiency within medical schemes.	Informational support in terms of analysis of specific statutory return data as requested.	Report on data within 2 weeks (depending on the nature and extent of information) of request by R & M.	Greater understanding of hospitals as cost drivers as a basis for policy review.
	Financial analysis of additional financial information received directly from third parties.	Report on data within 2 weeks (depending on the nature and extent of the additional information) of request by R & M.	
Legislation.	Participation in changes to the Act.	Recommendations for improvement to the legislative framework.	Improved enabling regulatory framework consistent with policy developments.
	Internal evaluation and identification of the shortcomings in Annexure B read together with regulation 30.	A proposal for the revision of Annexure B by March 2007.	

Foster the continued development of the CMS as an employer of choice

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Manage performance in line with care and growth principle.	Perform two performance evaluations sessions for staff.	First performance evaluation session by October. Second performance evaluation sessions by February.	Prioritise competing demands to ensure individual, team and council's goals and strategic objectives are achieved.

Part 2: Regulatory Plan Financial Supervision

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	Monthly meetings with staff.	Monthly unit and individual staff meetings.	
Financial management	Make and justify budgetary proposals for expenditure and revenue; Report progress and performance in terms of the PFMA; Monitor and evaluate the unit's expenditure for irregular, unauthorised or over-spending.	Compliance with internal controls; annual budget submissions by second week of February; contain spending within approved budgets.	Ensure compliance with internal financial controls and the PFMA in respect of the area under FSU's control.

Risk Equalisation Fund – Support by FSU

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Understanding the accounting impact on medical scheme	Analysing accounting impact on solvency & liquidity of the schemes	Shadow entries	Greater understanding of impact of REF on schemes' solvency

Accreditation

Provide support and guidance to trustees, and promote understanding of the medical schemes environment by trustees, beneficiaries and the public

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Promote sound corporate governance of medical schemes.	Participate in BOT training workshop in relation to accreditation matter.	BOT Training workshops.	Improved governance of schemes by BOT's

Foster compliance with the Act by managed care organisations

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Effect accreditation of managed care organizations	Perform accreditation evaluations by conducting desk based analysis, surveys and on site inspection of managed care facilities and prepare findings reports.	Report to registrar within 2 months of receiving application.	Accreditation in compliance with MSA.
	Manage the renewal of accreditation in respect of previously accredited entities.	Within 2 months of receipt of all relevant information.	
	Evaluate responses to conditions imposed and make recommendations re. continued accreditation status.	Reports in September 2006 and February 2007.	Accreditation in compliance with MSA.
Resolve complaints against accredited entities.	Investigate complaints against accredited managed care entities.	Report within 2 months of complaint being lodged.	Ensure compliance with Act and accreditation requirements.

Part 2: Regulatory Plan Accreditation

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	Manage disciplinary procedures pertaining to suspension and withdrawal of accreditation.	Recommendations to the registrar within 3 months of complaint being lodged.	
	Publication of suspension/withdrawal on council website and as determined.	Notice within 5 days of decision..	
Contribute to policy development and improvement of regulatory framework.	Review contracts and service level agreements between schemes and managed care organisations.	Reports on findings in June, September and December 2006 and March 2007.	Improved regulatory framework for managed health care.
Contribute to financial soundness of managed care entities.	Review financial status of accredited entities and take action where appropriate.	Report on financial position of risk bearing managed care entities on September 2006 and March 2007.	Managed care entities are financially sound.
	Train managed care entities on accreditation procedures and requirements in terms of the Act.	Industry workshop by September.	Greater understanding of accreditation process.

Foster compliance with the Act by Administrators

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Accreditation of administrators.	Review results of previous accreditations and identify areas for improving accreditation criteria. Manage the evaluation process by conducting surveys and onsite inspections of administrator facilities for first time applicants.	Revised accreditation criteria by April 2006. Accreditation assessment conducted within 3 months of application. Evaluation report to the Registrar within 4 months of application.	Accreditation in compliance with the MSA.

Part 2: Regulatory Plan Accreditation

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
		Council decision by end of fourth month of application.	
	Manage the renewal of administrator accreditation process and steering committee evaluation of renewals.	Report prepared by steering committee within 2 months of receiving all relevant information.	Administrator accreditation renewal process done in accordance with the MSA.
		Seven administrator accreditation renewal evaluations completed and findings reports prepared by March 2007.	
	Participate in meetings of Council subcommittee to approve applications.	Reports for meeting 4 weeks in advance.	Administrators are accredited in terms of the Act.
Ensure compliance by administrator with the financial solvency requirements of accreditation.	Ensure submission of Regulation 22 and 25 annual reports within 4 months after administrator financial year end.	Regulation 22 and 25 reports.	Administrators are financially sound.
	Prepare report on extent of compliance with recommendations regarding action to be taken to effect compliance.	Report within a month of receiving submissions.	Administrators function in terms of regulatory standards.
Ensure compliance with accreditation conditions.	Evaluate responses to conditions imposed and make recommendations regarding continued accreditation status if required.	Report in September 2006 and February 2007.	Administrators comply fully with conditions imposed.
Contribute to policy development and improvement of regulatory framework.	Review contracts and service level agreements between schemes and administrators. Five contracts to be reviewed each quarter.	Report on finding in June, September, December 2006 and March 2007.	Improved regulatory framework for administrators.
Resolve complaints against accredited administrators.	Investigate complaints accredited administrators.	Report within 2 months of complaint being lodged.	Ensure compliance with the Act and accreditation requirements.

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	Manage disciplinary procedures pertaining to suspension and withdrawal of accreditation.	Recommendation to the Registrar within 3 months of complaint being lodged.	
	Publication of suspension/withdrawal on Council website and as determined.	Notice within 5 days of decision.	

Foster compliance with the Act by broker and broker organisations

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Ensure accreditation of brokers in terms of the Act.	Review and process applications for accreditation of brokers.	60% of applicants for accreditation or renewal within 30 days of receipt.	All brokers are accredited in terms of the Act.
		100% within 60 days of receipt.	
	Maintain database for broker accreditation.	Complete records are maintained.	
	Revise broker application form to ensure adequate disclosure of accreditation requirements.	Revised forms by April 2006.	
	Send renewal notification to brokers before expiry of accreditation.	Notification sent at least 20 days before expiry of accreditation.	Ensure timely accreditation.
Resolve complaints against brokers.	Manage disciplinary procedures pertaining to suspension and withdrawal of accreditation, including liaison with FAIS Ombud and FSB.	Report to Registrar within 2 months of complaint.	Ensure compliance with accreditation requirements.
	Publication of suspension/withdrawal of broker accreditation website and as	Notice within 5 days of decision.	

Part 2: Regulatory Plan Accreditation

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	determined.		
Contribute to policy development and improvement of regulatory framework.	Review contracts and service level agreements between schemes and brokers.	20 Contracts to be reviewed each quarter with focus on high impact schemes. Report on findings and recommendations in June, September, December 2006 and March 2007.	Improved regulatory framework on accreditation of brokers.
Contribute to development of risk based framework.	Complete designations sections of RAP's and RMP's for high impact schemes.	Completed RAP's and RMP's for high impact schemes.	Schemes are supervised in line with the risk they pose.

Foster the continued development of the CMS as an employer of choice

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Manage performance in line with the care and growth model.	Perform 2 performance evaluation sessions for staff. Monthly feedback meetings with staff.	First performance evaluation session by October 2006, second by March 2007.	Improved performance culture.
Financial management.	Make and justify budget proposals for expenditure and revenue. Report on progress and performance in terms of the PFMA; monitor and evaluate expenditure for irregular or unauthorized spending within the unit.	Compliance with internal controls; annual budget submissions by second week of February 2007; manage spending within approved budget.	Ensure compliance with internal financial controls and the PFMA in relation to the unit.

Research & Monitoring

Monitor the impact of the Act, research developments and recommend policy options to improve the regulatory environment

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Monitoring the impact of the Medical Schemes Act and trends in Private Health Finance	Review of contents of quarterly and annual statutory returns	Report to IT on additional indicators by September 2006	Appropriate data collection by the office to meet policy and regulatory needs
	Analysis of non accounting data, including, demographics, utilisations, burden of disease and geographic distribution of membership for quarterly and annual statutory returns	Submission of annual report by end June 2006 Submission of quarter 1 report by end July 2006 Submission of quarter 2 report by end August 2006 Submission of quarter 3 report by end November 2006 Submission of quarter 4 report by end February 2007	Improved monitoring of the legislation Better informed industry and public
	Statistical analysis of trends in the cost and utilisation of benefits in the medical schemes industry	Report on trends in cost and utilisation by end November 2006	Improved understanding of member access to medical schemes
Monitor changes to contributions within medical schemes	Participation in the development of a framework for assessment of scheme rules	Report outlining procedure for approval of scheme rules by end of April 2006	Schemes rules that are consistent with legislation
	Participate in review and approval of contributions and benefits together with	Recommendations on annual contribution and benefit changes, by 31 December 2006	Contribution increases approved and registered by 31 December each year.

Part 2: Regulatory Plan Research & Monitoring

R&M and FSU

Report on trends in contributions and
benefits changes by Dec 2006

National Health Reference Price List	Development of NHRPL tariffs Ongoing maintenance of NRPL	Publication of final NRPL by Sept 2006	A more scientifically based reference price list, to serve as a basis for price negotiations, benefit determination and planning purposes
Cost containment and efficiency within medical schemes: Expenditure on hospitals	Assessment of causes and implications of increasing medical schemes expenditure on hospital Recommendations and solutions	Report as per project plan by October 2006	Greater understanding of hospitals as cost drivers as a basis for policy review
Monitoring of implementation of ICD10	Ongoing monitoring by the National Task Team with emphasis on confidentiality Assessment of ICD 10 implementation after 1 year, through stakeholder consultation and quantitative assessment of compliance	A report on the status of ICD 10 implementation and management of confidentiality by end August 2006	Greater efficiency through standardisation of billing practices and data collection
Legislative development	Draft REF and other amendments Submission of amendments to Cabinet for approval Consultation on draft Bill Tabling in Parliament	Draft REF Amendment Bill Approved Bill, April 2006 Revised draft, July 2006 Adoption of Bill by Parliament, September 2006.	Achievement of health related cross-subsidies within medical schemes

Part 2: Regulatory Plan Research & Monitoring

Support the development of SHI for SA	Research possible risk adjusted formula for the allocation of funds to medical schemes under SHI	Literature review of international experience on risk adjusted allocation by December 2006 Proposals on developing formula for SA, February 2007	Funds allocated on basis of need
Review of medical scheme benefit design	Participate in the process of the review of the minimum benefit package by BMU	Manage the benefit structure process Final proposals on benefit structure by end May	Consistent access to a common minimum package of benefits for all scheme members
Fair treatment of beneficiaries	Issue circular to schemes requesting information on PMBs, CDLs and DSPs to members to be made more explicit	Circular to schemes with examples of information to members, by June 2006	Improved awareness of CDLs and DSPs.

Compliance

Foster compliance with the Act by medical schemes and initiate enforcement actions where required

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Full inspection of non compliant schemes	Inspection triggered by auditor interviews, market intelligence, financial or governance concerns.	Initiate inspection within 10 days of concerns being raised.	Monitoring scheme compliance in terms of inspection report.
Ensure compliance with demarcation agreement	Liaise with FSB and SAIA to manage demarcation agreement.	Products evaluated for compliance	Insurers complying with demarcation agreement.
	Approach High Court for a declaratory order in respect of the demarcation agreement.	Papers drafted and signed by April 2006. In court by September 2006. Judgment by November 2006.	Obtain legal clarity on the definition of "doing the business of a medical scheme" and the powers of the Registrar.
	Review of products "doing the business of a medical scheme".	Within 3 months of becoming aware of the product.	Products complying with the demarcation agreement.
Ensure schemes comply with investment requirements (Annexure B and Regulation 30)	Follow up and monitor non-compliance by schemes in respect of Annexure B read with Regulation 30.	Annually – within 1 month of receiving report from FSU.	Schemes complying with Annexure B or exemption granted by Council.
Ensure compliance with provisions of the MS Act and Regulations	Follow up and monitor non-compliance by schemes recorded in quarterly reports.	Quarterly – within 1 month of receiving report from FSU.	Schemes complying with the MS and Regulations.
Risk Assessment Framework	Follow up and monitor compliance with Risk Mitigation Plans.	RMP monitoring reports in June, September , December and March 2007	Schemes complying with Risk Mitigation Plans.

Foster compliance with the Act by medical schemes and initiate enforcement actions where required

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Ensure schemes comply with identified priorities – NON HEALTHCARE EXPENDITURE	Monitoring and inspection of schemes to check for compliance with non-healthcare expenditure (with focus on illegal payments to brokers,	Reporting on brokers payment identified schemes in September and February 2007	Enforcement of compliance. Monitoring compliance with the Registrar's directives.
	Prosecution of non-compliance.	Charges laid within 2 weeks of decision.	Compliance with the MS Act and Regulations.
Ensure schemes comply with identified priorities – GOVERNANCE	Monitoring and inspection of schemes to ensure good governance (including conflicts of interest with specific reference to procurement to ensure schemes get value for money).	Reports on governance in identified schemes in July and December. Prosecution of non-compliance.	Enforcement of compliance. Monitoring compliance with the Registrar's directives.
	Implementation and monitoring of "fit and proper" standards and criteria for trustees.	Directive to trustees on "fit and proper" criteria, by June 2006.	Medical schemes are governed by trustees who are "fit and proper"
	Identification of trustees who do not meet "fit and proper" standards and criteria	50% by October and 100% by December 2006.	
Enforce rulings made by the Registrar, including persistent non-adherence	Review rulings made by the Complaints Adjudication Unit with the view to enforcing same.	Monthly report to SMM on rulings	Adherence to rulings.
	Advise Legal Services of persistent non-adherence for possible court action.	Monthly memorandum to Legal Services concerning persistent non-adherence.	Persist non-compliance with rulings dropped.
Preparation of exemption applications for Council	Provide recommendations to the Registrar in respect of applications for exemptions.	Recommendations 30 days prior to Council meeting.	Adherence to the MS Act and Regulations by schemes.

Provide guidance and support to trustees, promote an understanding of the medical schemes environment by trustees, beneficiaries and the public

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Promote an understanding of the Medical Schemes Act by boards of trustees	Organise and participate in trustee training workshops. Develop an Introductory Trustee Pack – for publication on the CMS website.	Monthly workshops in various centres in 2006/7. Trustee pack in July 2006.	Improve governance and decision making in medical schemes.
Provide training on compliance priorities to boards of trustees	Participation in trustee training.	Participation in BoT monthly workshops as per training targets.	Improved standards of governance of medical schemes.
Inform staff, Council members and certain stakeholders of current events and provide internal support	Produce <i>Masihambisane</i> to be used as an internal "communiqué" to staff on relevant issues.	Monthly.	Improved internal communication.
Promote an understanding of the medical schemes environment by boards of trustees, beneficiaries and the public	Contribution to <i>CMS News</i> . Consumer news updates for publication on the CMS website.	Monthly – 1 article per month (3 per quarter). Monthly.	Informed consumers and stakeholders
Consumer Education	Consumer education workshops/seminars with consumer groups and advice centres, trade unions, paralegal officers, EAPs etc.	Monthly workshops.	Improved understanding of consumer needs and protection.

Provide guidance and support to trustees, promote an understanding of the medical schemes environment by trustees, beneficiaries and the public

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Consumer Education	Participation in activities organised by Provincial Consumer Affairs Offices and other consumer groups.	As per request.	Improved understanding of consumer needs and protection.

	Participation in Outside Radio Broadcasts (ORBS).	Quarterly.	
Promote an understanding of the medical schemes environment by employer groups	Information sessions/meetings and seminars with employer groups.	3 sessions for 2006/7.	Greater understanding by employers of the healthcare needs of their employees and changes in the healthcare environment.

Foster the continued development of the Council as an employer of choice

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Manage performance in line with the care and growth principles	Implement the performance management system with staff.	Bi-annually – September 2006 and March 2007.	Staff who understand performance and are performance driven.
Feedback meetings with staff	Arrange unit meetings and one-on-one meetings with staff.	Monthly.	Staff who are informed and understand what is expected.
Management of the Compliance Unit budget	Ensure that the unit budget is properly managed.	Variances managed within 5% of budgets.	Meet budget targets.

Legal Services

Provide support & guidance to trustees and promote understanding of the medical schemes environment by trustees, beneficiaries & the public.

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Promote sound corporate governance amongst Board of Trustee Members	Participation in trustee training & education on the Act, their responsibilities as trustees and principles of good governance.	Presentations at BoT workshops per training targets;	Improved governance of medical schemes; Trustees with sound knowledge & grasp of legal implications and fiduciary responsibilities.

Securing an appropriate level of protection for beneficiaries of medical schemes & the public by authorising the conduct of the medical schemes industry

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Ensure compliance of all medical scheme rules with the Act and Model Rules	Render technical legal assistance on rule amendments.	Advise provided on rules within a week of request	Rule amendments in accordance with the Act
	Render legal advice in instances of disputes concerning registration of schemes & rule amendments	Advise provided to other units within a week of request	Properly resolved disputes in accordance with the Act

Investigate & resolve complaints raised by beneficiaries & the public

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Render support to Adjudication Unit	Render support & advice on complaints of a complex legal nature.	Legally sound & enforceable rulings	Legal certainty and confidence in the Council.
	Take responsibility for appeals brought before Council	Appeals scheduled and heard within 60 days	Improved protection of members
	Secretarial support to the Council Appeals Committee as well as the Appeal Board	Meetings of the Appeals subcommittee in April, July, October and February 2007 Meetings of the Appeal Board in May, October and March 2007.	Greater resolution of disputes

Render legal support to various units

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Provide legal support to the Registrar & the Council/ Operational Units in the Office of the Registrar	Review of contracts, policies & procedures of units	Sound contracting with third parties	Proper delivery of service to the industry
	Provide secretarial support to the Council and Exco	Minutes of Council and EXCO meetings within 14 days of the meeting	Proper record of Council and EXCO activities
	Render prompt, reliable internal legal opinions.	Written legal opinions within 30 days of request (or sooner depending on the urgency)	Council's actions take place within context of sound legal advise
	Obtain Counsel advice & opinion when	Written legal opinions within 30 days of	

Part 2: Regulatory Plan Legal Services

	appropriate	request (or sooner depending on the urgency)	
	Take responsibility for litigation against Registrar & Council - brief Counsel and drive legal process	Court papers lodged in line with required timelines	Actions of the Council/ Registrar protected
Promote an understating of the legal Framework in which we operate	Track changes to complementary laws and other related regulatory laws	Six monthly presentations to SMM on changes to complimentary laws and newly decides cases	Improve the understanding of legal issues that impact on the mandate of Council
	Presentations to Council and EXCO on other legislation that may impact on their ability to exercise their powers and functions as provided for in the Act	Presentation on <i>Protection of Funds Act</i> to Council in May; <i>Inspection of Financial Institutions Act</i> during August.	Improved understanding of the Medical Schemes environment by the Council
Participation in activities of Legislative Review Committee	Regular review of current & new legislation having an impact on the provisions of the Medical Schemes Act	Input provided to R&M for possible legislative amendments	Regularly updated Medical Schemes Act

Foster the continued development of Council as employer of choice

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Manage staff performance	Conduct two performance evaluations of staff	Performance assessment of reports during October and March of each financial year.	
	Hold monthly feedback meetings with staff	Monthly meetings with reports	
Manage unit budget	Management of unit budget in line with operational plan	Variances on budgets are contained within 5%.	

Complaints Adjudication

Investigate and effectively resolve complaints raised by members and the public.

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Determination of jurisdiction in respect of complaints raised by beneficiaries	Determine whether the matter falls within the jurisdiction of Council for Medical Schemes	Acknowledgement letter sent within a day where the matter falls within Council's jurisdiction Referral letter sent within a day to the relevant statutory body. Letter sent to the complainant within a day where the matter falls outside Council's jurisdiction.	Informed members and enhanced customer service
Analysis of complaints raised by beneficiaries	Analyze complaint raised by beneficiaries as required by section 47 of the Medical Schemes Act	Analysis done within seven days of receipt of complaint	Providing excellent customer service
	Send a letter to the complainant informing him/her of the status of the complaint	Letter within 8 days of receiving complaint	Informed members
	Send letter to the scheme for comments as prescribed	Letter within 8 days of receiving complaint	Ensure compliance with the provisions of the Act
Resolve complaints	Analyse responses from schemes in order to make decisions / rulings	Decisions / rulings within 60 days of referral of the complaint to the scheme	Speedy resolution of complaints
	Advise parties in writing of the decisions	Within a day of making such a decisions	Informed parties

Part 2: Regulatory Plan Complaints Adjudication

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	made		
	Facilitate mediation meetings between the parties and resolve the complaint where there is a dispute of facts	Mediation meeting within thirty eight days of the referral to the scheme with the complaint resolved within 60 days of such referral	Transparent dispute resolution process Improved confidence in the complaints resolution process
Appeals in terms of section 48 and 49 of the Medical Schemes Act	Refer Notices of Appeal and all the relevant documentation to the Secretariat of Council's Appeal sub committee	Within a day of receipt of the Notice of Appeal	Appeals are dealt with by Council effectively
	Make representations to Council's Appeal sub committee on behalf of the Registrar in respect of Section 48 and 49 appeals	Heads of arguments submitted to Registrar a week before a hearing Appearance before sub-committee as advised.	
Appeals in terms of Section 50 of the Medical Schemes Act	Provide input to the Appeal Board on behalf of the Registrar	Heads of arguments submitted to Registrar a week before a hearing Appearance before Appeal Board as advised.	Appeals are dealt with effectively

Secure an appropriate level of protection for beneficiaries of medical schemes by monitoring the conduct of medical schemes

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Monitoring non compliance with the provisions of the Medical Schemes Act	Identify medical schemes that do not comply with the legislation through an assessment of complaints received.	Monthly reports to Compilation of reports on a monthly basis	Improved compliance and performance within medical schemes.
Consultation with beneficiaries of medical schemes	Render advice to beneficiaries on provisions of the Medical Schemes Act	On request	Informed beneficiaries
Provision of accurate information to stakeholders	Conduct training of legal officers on specific aspects of the Act	Bi-weekly training meetings	Improved understanding of the medical scheme industry
Contribute to regulation of schemes in line with the risks they pose	Coordinate the development of RAF and RMP for identified schemes	RAFs and RMPs within organizational targets	Identified risk in high impact schemes is mitigated

Provide guidance and support to trustees, and promote an understanding of the medical schemes environment by trustees, beneficiaries and the public of the medical schemes environment

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Provision of accurate information to stakeholders	Participate in the training of Board of Trustees, consumer groups and Trade Unions	Per training unit targets.	Greater awareness by the public on complaints resolution mechanism within the medical schemes industry
	Radio Talk Shows on the complaints handling process	On request from the Training Unit	

Foster the continued development of the Council as an employer of choice

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Management of the Complaints Adjudication Unit	Monitor and manage the performance of staff within the unit	Performance appraisals held twice a year.	To enhance CMS as employer of choice
	Oversee unit budget	Monthly meeting held with every staff member	A culture of feedback and performance
		Expenditure managed within budget	Expenditure reflects activities

Communication

Promote greater understanding of the medical schemes environment by trustees, beneficiaries and the public

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Inform public and stakeholders, and media of the work of Council for Medical Schemes and promote image of Registrar, staff and the work of the Council	<p>Inform public and media about events and trends at Council and establish Council as open and responsive in the public interest</p> <p>Diffuse and use contentious issues to spark public participation in debates to better inform beneficiaries and the public</p> <p>Internal workshops with key individuals to establish needs and set priorities for issues and messages that Council seeks to impart to members and the public. These need to be prioritized with a list of potential useful methods of imparting information e.g. Website, CMS News, press conferences, releases etc.</p>	<p>Appear on radio, TV, and print media when relevant and on request. Deal with media inquiries</p> <p>Workshop and report on communication priorities, April 2006</p>	<p>Informed and educated beneficiaries and public</p> <p>Proactively ensuring that messages prioritized by Council reach members/public/stakeholders effectively</p>
Promote understanding of medical scheme environment by trustees, beneficiaries and public	Co-ordinate publication of annual report	Reports from units, end March 2006	

Part 2: Regulatory Plan Communication

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	Draft of Part I of report	End April 2006	Provide resources, information for the industry on annual performance of schemes; meet our statutory reporting obligations in terms of the PFMA
	Editing of Part I	Completed, May 2006	
	Edit Part I of Annual Report	End July 2006	
	Manage lay-out, design and printing	End August 2006	
	Co-ordinate publication of <i>CMS News</i> : electronic and in print. News reports to prioritise information on REF, ICDIOs, benefits and operation of managed care	<i>CMS NEWS</i> published in June, September, December and March 2007.	Informed members and public.
	"Update" editions on specific issues where necessary		
Inform Council and Council staff of current developments where necessary	Edit <i>Mashiambisane</i> , edit work performed for publication where agreed	Monthly and when necessary	Informed colleagues
Inform beneficiaries, public and stakeholders with REF, ICDIOs etc. in mind	Press conferences, information seminars, ad campaigns where necessary and workshops to inform on ICDIO, REF, LIMS, benefits and operation of managed care	Outcome of internal workshop (below) will assist in determining method, timing of disseminating information	Informed consumers and stakeholders
	Use editorial and advertising in print and electronic media to inform and educate the public and stakeholders on priority issues	Campaigns during 2006/7 (ads, information, target specific groups, co-operation with training)	

Part 2: Regulatory Plan Communication

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Publish educational and information material	<p>Edit and publish trustee training manual</p> <p>Re-edit end May/June 2006, commission added writing where necessary</p> <p>Publish pamphlets on specific issues, e.g. ICDDIO coding, benefits, managed care and republish existing pamphlets where necessary</p>	<p>Revised content by end April, discuss with publisher during same period</p> <p>Trustee training manual published by August 2006.</p> <p>Pamphlet on ICDDIO code for members in May 2006.</p> <p>New pamphlets on topics such as benefits to be determined by BMU or relevant units</p>	Trustees have adequate information on medical schemes.

Theme Project

Formulating capital adequacy standards (solvency requirements) for managed health care organizations

Background

Following commencement of a process to accredit all managed care organizations from January 2004, at least 50 of these were accredited as of February 2006. Analyses concluded recently by the Council for Medical Schemes reveal that among the accredited organizations, the majority are not taking any risk. Nonetheless, there is a significant presence of organizations that assume liability for financial and clinical outcomes in respect of the programmes they offer. Concerns have existed for a while that risk-taking entities may leave medical schemes and their members exposed to financial catastrophe should they become insolvent. A need therefore exists to formulate and put in place stringent financial reserving requirements to ensure that managed care organizations are able to meet their obligations in the event that they become insolvent.

Project conceptualization

Financial reserving requirements must be treated differently depending on whether or not a managed care entity assumes risk. This statement however, does not implicitly suggest that non risk-bearing MCOs should not have reserving requirements attached to them. A suggestion has been made for instance, that such entities may be liable for non-performance compensation to a medical scheme. There is a strong case to be made nonetheless, to have in place much more stringent solvency requirements for risk-bearing MCOs considering the liability they may have to carry.

Proposed areas of work

Several ideas have emerged on an approach to formulate reserving requirements for managed care entities. Some of these are as follows:

- To mimic the existing medical schemes solvency ratio of 25% of contributions and extending the same to managed care organizations
- To transfer risk commensurately, to third party managed care entities that take partial or full risk and require these entities to provide financial guarantees for this risk
- If the above is chosen, to then conduct risk analyses for MCOs such that financial guarantees are abused on each entity's risk exposure

Capital reserving or solvency requirements are necessary to protect the medical scheme and its members in the event that the managed care organization is unable to provide a service contracted for due to financial inability. Several questions arise: the nature of the risk to be covered needs to be fully understood – is it merely the

Part 2: Regulatory Plan Solvency Theme Project

ability to repay to the scheme the money paid for services not rendered; does it include having to pay someone else for that service; does it possibly include damages if the patient has suffered in any way?

It is therefore proposed that focused research be conducted first, to provide answers to these questions before the specific solvency framework could be suggested and implemented. The following activities are envisaged:

Activity	Outputs
Meta-analytical research on existing managed care solvency framework in place in other countries	A report on various options for a solvency regime, by October 2006
Focused discussions with selected managed care organizations	
Risk analysis for MCOs: phase 1	March 2007
Risk analysis of MCOs: phase 2	October 2007
Implementation of the solvency framework	1 January 2008

The theme project will be conducted by Research & Monitoring, Financial Supervision, Accreditation and Benefits Management.

Risk Equalisation

Implement systems and build capacity to introduce transfers to and from the Risk Equalisation Fund when the required capacity exists within the CMS office and medical schemes.

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Information Technology: Implement the REF IT Systems to integrate with existing CMS IT Systems	Develop Software systems to store Medical Scheme beneficiary data on a central Registry	Test the upload of Data form Medical schemes using a REF portal End June 2006	This will satisfy the need to have direct electronic communications between schemes and the Registry
	Review the security and business recovery requirements of the REF IT Systems	Report on the existing business recovery and security systems in relation to the REF requirements End June 2006	Inform the decision on whether additional funds should be acquired for the upgrading of the security and business recovery components of the REF.
	Load and Audit initial beneficiary Data on the Registry	Audit report on the quality of data received form Medical Schemes Mid October 2006	This will inform the office on the quality of the data on the registry and will play a key role in determining the starting date for financial transfers and inform the decision on the possible phasing in of Risk Factors for the REF
	Implement all components of IT systems required by REF: <ul style="list-style-type: none"> • Infrastructure • Registry • Workflow management • Reporting 	Complete a mock payment run on the financial transfers End November 2006	This complete evaluation of all systems will indicate areas that need to be improved before financial transfers could commence.

Part 2: Regulatory Plan Risk Equalisation

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Organisation Building:	Recruit, select and appoint the first REF Staff members, including the Head of REF and experienced staff in the Registry, Finance, and Audit units as well as support staff in the IS Department	Successful appointment of the staff that will lead the further development of the REF Office by Beginning of May 2006	The internal capacity to further develop and implement REF systems shall be established
	Appoint the Remainder of the REF Staff	The completed staff establishment should be appointed End January 07	The complete staff establishment required for the implementation of the REF shall be appointed.
Legal Framework:	Develop enabling amendments to the Medical Schemes Act that will support the development of a system of risk equalisation and a revised benefit framework	Prepare Draft Bill for Public Comments after Cabinet approval has been obtained: End April 2006	The public will have the opportunity to comment on the contents of the Bill
	Redraft the Bill based on Public Comments	Submit a cabinet Memo along with a redrafted Bill Early July 2006	Public comment will be incorporated in the Bill
	Request Cabinet to table the revised Bill in Parliament	Parliamentary Approval of Draft Bill End September 2006	The legislation that supports the transfer of funds to and from the REF will be completed.

Part 2: Regulatory Plan Risk Equalisation

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Research:	Repeat the REF Weighting table pricing study	Publish the REF weighting table for 2007 End July 2006	Schemes will be able to calculate their contribution for the following year based on the most recent information available.
	Review the Guidelines to the REF Entry and Verification Criteria	Publish the Criteria that shall be applicable for 2007 End July 2006	Schemes will be able to develop for systems to accurately identify REF Beneficiaries
Recommendation to the Minister:	Report to the Minister on the Capacity in the REF Office and on the readiness of Medical schemes to start with the transfer of Funds	A report on the REF Office's capacity as well as on the quality of Data submitted to the REF Office during the Shadow period End of June 2006	The Minister will have the information that she requires to make a decision on the date when the Transfer of REF Funds should commence

Human Resources

Continue the development of CMS as an employer of choice

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Realign the organizational objectives and the context within which staff work, by facilitating the development of organizational strategy through CMS Active	Co-ordinate sessions to develop organisational strategy Communicate proposals and progress of the process to the wider organization.	<i>CMS Active</i> sessions during April, August, November and March 2007 Report quarterly to the wider organization on progress being made by <i>CMS Active</i>	People within the organization are put in the center of organizational strategy which allows for collective thought, trust and commitment to developing direction for the Council
Develop proposals, through CMS Active, on issues pertaining to the following people processes:	<i>CMS Active</i> visioning sessions on improving culture and developing tools to manage and change culture	<i>CMS Active</i> proposals on improving culture by 30 April 2006. Report back to staff to finalise proposals by 30 May 2006.	Culture is leveraged as a tool to enable CMS to better deliver on its strategic objectives
	<i>CMS Active</i> visioning sessions on career pathing and success planning	<i>CMS Active</i> proposals on career pathing and succession planning by 30 August 2006. Report back to staff to finalise proposal by 30 September 2006. Report to the HR sub-committee by 30 October 2006	Staff are able to identify long term career at Council

Part 2: Regulatory Plan Human Resources

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
		Report to Council by 30 November 2006	
	<i>CMS Active</i> visioning sessions on remuneration strategy	<i>CMS Active</i> proposals on remuneration strategy by 30 November 2006. Report back to staff to finalise proposal by 30 January 2007. Report to Council by 30 February 2007	Remuneration strategy supports our business goals.
	<i>CMS Active</i> visioning sessions on improving diversity and reinforcing non-discrimination.	<i>CMS Active</i> proposals on improving diversity and reinforcing non-discrimination by 01 March 2007. Report back to staff to finalise proposal by 30 March 2007	An organization where barriers have been dissolved while still operating within the letter and spirit of non-discrimination laws
Manage the HR requirements of the organization with particular attention to scarce skills	Secure suitably qualified permanent and temporary staff	Timely recruitment of talented personnel for both permanent and temporary positions through advertising and headhunting	Improved management of recruitment Talented staff are attracted and retained
Employee Assistance Programmes	Develop draft proposals and consult with staff on the following issues pertaining to: ▪ Employee Wellness	Employee Wellness managed through participation in physical exercise on a monthly basis (gym membership) Health promotion activities on an	A healthy workforce is maintained thus aiding the reduction of costs associated with health and wellness matters.

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	<ul style="list-style-type: none"> ▪ HIV/AIDS ▪ Health matters ▪ Personal problems etc 	<p>annual basis – August 2006</p> <p>Counseling provided and facilitated on request. Report on outcome provided to Head/Manager following intervention.</p>	

Implement affirmative action and employment equity in line with national policy

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Manage equity profile in line with National Objectives.	Report on Employment Equity in terms of the Employment Equity Act	DoL informed of Employment Equity plan for the Council for Medical Schemes for 2006/7 by October 2006	Equity targets within the Council developed in line with the Employment Equity Act
	Facilitate the EE Forum - Inform and engage staff in process of monitoring the Employment Equity plan.	Report on the implementation of EE plan tabled to SMM by 1 December 2006.	Requirements of the Employment Equity Act fulfilled.
	Submit EE Plan to Department of Labour	EE Plan finalized by 1 October 2006 and submitted to DoL	Requirements of the Employment Equity Act fulfilled.

Assist managers and the organization in managing performance

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Manage performance in line with care and growth principle.	Provide support and guidance to managers to implement a new performance management system	Performance assessment forms distributed to Heads/Managers in August 2006 and February 2007 prior to review. Advice rendered to Heads / Managers and staff on performance matters where required	A performance driven organisational culture is nurtured and developed Managers are competent and objective in their management of performance of staff
	Collate results and submit to moderation committee as required and formalize payment of performance bonuses	Results are collated, documented and tabled to the moderating committee for approval, by end February 2007	
		Payment of performance bonuses effected by March 2007	

Organizational efficiency and effectiveness

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Monitor efficiency and effectiveness of organisation	Provide ongoing employee relations and general consultancy to Heads, Line Managers and Staff including the provision of the following management reports to SMM	Reports to SMM during June, September, December and March 2007	Effective and efficient management of Human Capital in the employ of the Council.
	<ul style="list-style-type: none"> • Leave statistics • Cost of training and development • Employment Equity 	Report on implementation and cost of skills development during September and February 2007	Improved internal service to staff.
		Report on implementation of EE policy during September and February	

Training and skills development

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Implement various management programmes	Procure management and technical courses for Council's staff and management	Training programs submitted to staff and management on ongoing basis	Staff and management acquire various competencies in management and technical areas
	Provide in-house training where appropriate		Training of staff managed in term of defined policy and programmes
			Requirement of Skills Development Act fulfilled.

Part 2: Regulatory Plan Human Resources

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	Develop training and professional development policies in line with the Skills Development Act	Update training and development policies in line with changes in legislation as and when it occurs.	
	Consult Training Committee on Education, Training and Development (ETD) policy framework	ETD policy developed in consultation with the Training committee and submitted to SMM for approval by 1 November 2006.	
	Submit the Workplace Skills Plan (WSP) and Annual Training Plan	<p>Submit to SMM for approval April 2006.</p> <p>Submit Annual Training Report to HWSETA by 30 June 2006 for 2005/2006</p> <p>Submit WSP to HWSETA by 30 June 2006 for 2006/2007</p>	

Internal Finance

Ensure financial management of Council in a manner that is consistent with Public Finance Management Act and other applicable legislation

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Prepare accurate monthly management accounts for Council. S40 (4) b	Accurate recording and processing of transactions in various books of first entry. Correct allocation of account codes in the processing of EFT transactions, cheques and receipts.	Submit financial information in the prescribed format on actual revenue and expenditure of the preceding month. Management reports e.g. Income statement, Balance Sheet, Cash flow statement, Variance report and notes to the financial statements are produced within seven (7) days of month end.	Management accounts are produced monthly and serve at SMM, Council and Audit Committee. The structures interrogate these accounts and provide advice where applicable. Decisions are taken on the basis of a fair presentation of accounts.
Prepare Annual Financial Statements in the form required by the Auditor General for audit. (S55). Financial statements are prepared in accordance with the Generally Accepted Accounting Practice.	Collect all the invoices and receipts and any other relevant information needed for the making of provisions and prepayment. - Prepare an audit file	Annual financial statements are submitted to the Auditor General and Treasury on 31 May each year. - Audit Committee evaluates the AFS seven days after the Auditor General report. - Submit annual financial statements to relevant Treasury and the Executive Authority by 31 August each year. Templates from National Treasury are completed in time	To have an unqualified audit opinion each year. Annual financial statements are tabled in the National Assembly by the Minister on 30 September each year.

Part 2: Regulatory Plan Internal Finance

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
		Management letter is responded to and presented to the audit committee	
Maintenance of effective and efficient Internal Controls. (TR.3.2), S38 (ia), S76 (4). Revision of finance policies and procedure manual in line with the PFMA and treasury regulations and the Preferential Procurement Act.	Conduct a risk assessment regularly to identify emerging risk of Council. (Work of internal auditors). Document the necessary changes and discuss them at SMM, Audit Committee and Council Communicate the internal controls to all staff.	Revised policies incorporated in the finance and procedure manual annually.	Ensure that Council transactions are conducted in terms of the finance policies, HR policies and any other relevant legislation governing Council. Maintenance of policies that is consistent with changing needs of the corporate environment and relevant legislation. An improved culture of adherence to internal control is maintained in Council. Workshops are conducted with staff.
To ensure Audit Committee meetings are held quarterly. (TR.3.1), S76 (4d) - An effective and properly constituted Audit Committee in terms of the PFMA.	Audit committee meetings are held quarterly. - Preparation of documentation and distribution to Audit Committee members seven days before the meetings to all audit committee members e.g. Financial Statements, policy documents etc. - Communicate Audit Committee recommendations to relevant structures of Council. Review Terms of Reference of Audit Committee	Audit committee meetings take place as scheduled. - Audit Committee recommendations are implemented timeously.	Continuous assessment of the financial position of Council and the identification of risks inherent in the management of an organisation. Provide financial advice to Council.

Part 2: Regulatory Plan Internal Finance

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	<p>members annually.</p> <p>Review audit charter and communicate to Audit Committee members annually.</p>		
<p>Preparation and maintenance of Annual Budget. (S53)</p> <p>Review budget to ensure consistency with approved budget and projected cash flow.</p>	<p>Consultative budget meetings are convened in line with the budget cycle.</p> <ul style="list-style-type: none"> - Cost centre heads submit their budget inputs with clear projections on a month to month basis. Obtaining quotations where applicable. - Consolidate the Council budget. - Monthly variance reports are produced. 	<p>Spending is in line with the approved budget.</p> <ul style="list-style-type: none"> - Reviews are documented to comply with the Public Finance Management Act (PFMA). - A consolidated budget is submitted six months before or another period agreed to. <p>Medium Term Expenditure Framework projections are produced</p> <p>Templates on the estimates of national expenditure are produced and sent to National Treasury.</p>	<p>The annual budget is submitted to Council for approval.</p> <ul style="list-style-type: none"> - The budget is approved by the Executive Authority. - A levy on schemes is determined and published in the gazette.
Revenue Management (S38)(I)	<p>Collect all monies due to Council.</p> <p>Maintain proper records of all debtors.</p> <p>Charge interest on overdue accounts.</p>	<p>Improved debtor's collection system is maintained in Council.</p> <p>Management of revenue is in line with the PFMA.</p>	<p>An accurate presentation of Debtors balances in the balance sheet.</p> <p>Manage revenue efficiently and effectively.</p>

Part 2: Regulatory Plan Internal Finance

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Maintenance of the Supply chain Management Framework(s76) 4 (c)	Maintain and update a supplier database annually. Continuous risk assessment in the organisation. Ensure that an effective Tender committee is in place. Risk Management committee meetings. Communicate Supply Chain Management changes to all staff. Submit monthly report to Treasury as required by the SCM framework.	An efficient and effective procurement system is maintained.	Full compliance with the supply chain management framework.
Procurement system (T.R. 16.6.)	Review procurement policy in the policies and procedures document. Ensure that procurement is in line with policy.	Sign contracts and service level agreements with preferred suppliers. Ensure that procurement is made from the compiled supplier database.	A fair, open and transparent procurement system that ensures compliance with BEE principles is maintained. Report on BEE suppliers is provided.
Cash Management (SII)	Maintenance of an EFT system. Adherence to investment policies. Making timeous payments. Cash forecast/cash flow projections. Bank accounts approved by Treasury.	Determine cash flow requirements from time to time. Investments are held with approved financial institutions.	Make informed decisions on cash flow requirements.
Asset Management (S31)(I)d	Maintenance of:	Proper control systems exist for	Council's assets are not exposed to

Part 2: Regulatory Plan Internal Finance

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	<ul style="list-style-type: none"> an up to date fixed asset register an up to date register of redundant assets perform an impairment test at year end balanced date quarterly physical verification of assets <p>Ensure that assets are insured at all times.</p>	assets.	risks.
Personnel costs management. (T.R 8.3.)	<p>A payroll system that complies with relevant legislation is maintained.</p> <p>Liase with HR on personnel records that effect salary.</p> <p>Prepare accurate information on the IRP5 at the end of each tax year.</p> <p>Statutory creditors are settled by the 7th of each month.</p> <p>Legislated deductions against payroll are made.</p> <p>Ensure that all appointments are approved by the CEO.</p> <p>Changes to conditions of employment approved by CEO.</p> <p>Ensure that the payroll system is updated as changes in legislation are released(Tax laws, UIF etc)</p>	<p>Salaries are paid on the 25TH of each month.</p> <p>Personnel costs are within budget.</p>	All salaries are within budget and for appointed staff.
Keeping abreast of the changes in	Effect changes to the Treasury Regulations	Implement the required changes in	Full compliance with the PFMA and

Part 2: Regulatory Plan Internal Finance

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Treasury Regulations and the PFMA	and the PFMA: <ul style="list-style-type: none"> • Liaise with the National Treasury and the Office of the Auditor General. • Attend workshops and seminars organised by Treasury or Auditor General • Effect changes in our policy and procedures manual • Communicate changes to staff SMM and Audit Committee. 	order to comply with the PFMA and Treasury Regulations.	Treasury Regulations.
Render support to the REF	Create REF as a separate company for mock trials Ensure that information from REF is signed by the Head of REF and the REF committee Prepare schedules for transfer Once REF is a legal entity we tender for a separate bank account.	Mock trials are performed June 2006 Produce quarterly financial reports	Transfers of funds from REF to schemes

Information Systems and Knowledge Management

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
To facilitate an efficient, timely, focused and educated workforce, through information technology interventions.	Maintain an efficient IT Helpdesk. Maintain and create new end-user profiles on Microsoft Active Directory, Exchange and on the telephone, fax and SMS systems. Respond to all calls logged by end-users within 30 minutes after having received such. Assist the Internal finance unit with the upkeep of the IT Asset Register. Assist with the procurement of IT goods and services. Deploy new versions of Microsoft software applications and patches. Perform regular network cable and equipment testing. Maintenance of printer and photocopy machines.		Improved workforce efficiency through electronic collaboration, training interventions as well as an efficient helpdesk function.

Part 2: Regulatory Plan Information Systems and Knowledge Management

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	Render an improved Microsoft Office support function through the MS Power Users and recommend training interventions through the IT Training Committee.		
To source and maintain the latest information on our stakeholders by developing, implementing and maintaining reliable, stable and efficient it systems.	Develop a new Rules and Benefits Assessment Online Portal / Questionnaire	New Rules and Benefits database with associated portals for internal and external users developed by End May 2006	Improved assessments and approvals of scheme benefit options.
	Consolidate all Database Applications and ensure that relationships are well established.	Link all database applications to newly established Schemes Master Database and "pull information" where appropriate by End June 2006.	Internal and external end-users able to drill-down from scheme level to individual record level on related database applications such as the broker accreditation system
	Re-design the NHRPL Portal and database.	Amend the NHRPL database and associated portals by End August 2006	Improved NHRPL Portal which enhances service to stakeholders.
	Re-Design the Complaints Database	Amend the Complaints Systems and associated portals by End October 2006	Improved complaints system supports and enhances the Unit's ability to render a more efficient complaints resolution service.

Part 2: Regulatory Plan Information Systems and Knowledge Management

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	Improve the CMS Website	Regroup information on our website to make location thereof easier and add a search function. Acquire Acrobat Indexer to enhance searching for Acrobat files by End November 2006	Improved access to and location of information on our website.
	Business Process Management	Identify critical business processes, design and deploy through K2.NET BPM solution by End December 2006 This includes: <ul style="list-style-type: none"> • Tracking of correspondence (Tracker). • Procurement process. • Contacts management and call escalation (CRM). 	Improve workplace efficiency by automating certain critical business processes.
	Develop a CMS BI Interface and Reporting Module using MS SQL Reporting Services by End March 2007	Identify and build data cubes that support the creation of critical dynamic reports. Compile dynamic reports. "Expose" reports on a web based internally accessible portal.	Improved business decision making through deployment of relevant business reports on an easily accessible and user friendly portal.
	Re-design the Auditor Approval Questionnaire.	Make amendments to the Auditor Approval questionnaire by End May 2006.	Improved and more accessible auditor approval process facilitated by enhancements to the online auditor approval

Part 2: Regulatory Plan Information Systems and Knowledge Management

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	Amend the Online Quarterly Statutory Returns for 2006.	Make specific amendments to the Online Quarterly Returns in accordance with SAICA guidelines and to improve the overall functioning of the system by End April 2006	Improved and more accessible Online Quarterly Statutory Return System.
	Amend the Online Annual Statutory Returns for 2006	Make specific amendments to the Online Annual Returns in accordance with SAICA guidelines and to improve the overall functioning of the system by End February 2007.	Improved and more accessible Online Annual Statutory Return System
Ensure 100% "uptime" through effective maintenance, upgrade and administration of the cms information technology infrastructure	<p>LAN infrastructure tested and maintained.</p> <p>Server farm health regularly assessed and required "patches" loaded.</p> <p>Telephony infrastructure tested and maintained.</p>	<p>LAN cabling tested twice annually for problems and defunct cabling replaced or patched</p> <p>Ensure that all servers are running the latest service packs and that they perform optimally once a week.</p> <p>Perform checks on the Telephone system once a week.</p>	All servers and telephone system components running at peak performance with 100%.
Ensure that disaster recovery and data backup procedures are in place.	Perform Daily Differential Backups and Weekly Full Backups.	Backups performed on a scheduled daily and weekly basis.	Risk to the organisation mitigated through the application of sound disaster recovery

Part 2: Regulatory Plan Information Systems and Knowledge Management

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	Uninterrupted Power Supply System (UPS) tested and maintained.	Backup tapes stored offsite on a weekly and monthly basis.	and backup procedures.
	Environmental Monitoring System on main server room tested and maintained.	Backed up data restored to test backup success on a monthly basis	
Ensure that adequate domain security measures are in place	Security infrastructure tested and regularly checked for vulnerabilities.	Check Intrusion Detection Logs weekly to monitor possible intrusion attempts and perform a controlled penetration test at least once a year to test system vulnerability.	Implementation of adequate domain security measures ensure that unauthorised access attempts are prevented, the end-user environment controlled and restricted and the CMS domain kept Virus Free..
	Continue to Fine tune Group Policy to enable a secure private network.	Perform a monthly review of Group Policy Objects and fine tune if required.	
	Ensure the upkeep of Anti-Virus Measures to prohibit the spread of computer viruses or malicious Trojans or worms.	Perform daily checks to ensure that the newest Anti-Virus Patterns have been disseminated on the domain.	
To ensure that information technology policies and procedures are formulated and updated.	Hold at least 2 IT Sub-Committee meetings per annum.	Hold at least 2 IT Sub-Committee meetings per annum.	Sound IT Governance promoted by establishing a proper functioning IT Sub-Committee of Council and an IT Steering Committee.

Part 2: Regulatory Plan Information Systems and Knowledge Management

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	Establish an Internally focused IT Steering Committee.	Establish the Steering Committee. Hold monthly meetings.	
	Finalise a Business Continuity Plan which will incorporate a Disaster Recovery Plan by end January 2007.	Business Continuity Plan (BCP) finalized in close collaboration with the IT Steering Committee. BCP adopted by Council IT Sub-Committee.	Risk managed and mitigated by formulating and adopting a proper BCP.
To render excellent customer service by operating an efficient and effective call center	Handle telephonic enquiries and queries	Resolve 90% of queries on first contact.	100% of queries logged in relation to calls handled daily.
	Informing members of the public about their rights and duties	Ensure that members of the public receive correct information and where such information need to be obtained, obtain it within 24 hours.	Improved confidence in the customer service that is rendered by the Call Center.
	Record all queries on the database	All queries logged on a central database and escalated where applicable within 24 hours.	Enhance customer service
	Respond to email and fax queries	Respond to email and fax queries and enquiries within 48 hours	Enhance customer service
Information management through effective utilisation of the cms resource center	<i>Collection Building</i> - identification and procurement of information materials and renewal of subscriptions to journals and databases.	Obtain a diverse collection of information materials that suit the information needs of CMS. Ensure that procurement of these	Information needs of CMS satisfied.

Part 2: Regulatory Plan

Information Systems and Knowledge Management

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
		materials are done within the procurement guidelines of CMS.	
	<i>Information Processing</i> -Processing of new information materials, by means of aligning the centre to conform to standards and being a user friendly entity.	Create a new virtual E-Library by "exposing" all resources and information available in the Resource Center to staff on web based Portal by end April 2006.. To develop a system of Cataloguing and classification of information Materials for ease of access based on a new electronic system to be acquired for CMS by end June 2006. To add the holdings on both SABICAT and WORLDCAT for the purpose of Inter-Library loans on an ongoing basis.	Resource Center and the resources it holds, made more accessible to staff.
	<i>Stock Taking</i> -To determine the type of information material to be stored and to always be in line with the objectives of different units within CMS	Once a year (October), the centre will have an assessment of its collection to determine if material should be either weeded or maintained.	Ensure that resource material being kept in the resource center remains up to date.
	<i>Information Retrieval</i> -Continuously keeping in touch with objectives of different units, the centre will always identify and satisfy information needs of	<i>Proactive</i> – Initiative and implement strategies to have a relevant Current Awareness Service that responds to the needs of CMS	Information needs of units and individual staff members satisfied.

Part 2: Regulatory Plan Information Systems and Knowledge Management

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	individual staff member and units	<i>Reactive</i> – To have an appropriate time frame to respond to information needs of staff members, initiate Inter-Library Loans were possible, and refer to other electronic information services	
	<i>Networking</i> - Will continue to keep in touch and work together with other institutions with same interest as the Centre – KMPG, SLIS, LIASA, HICSA	As the centre is becoming more inclusive, continue to identify and use networking opportunities with other organizations.	Increased networking with other institutions that hold the same interest as CMS.

Part 2: Regulatory Plan

Information Systems and Knowledge Management

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
Promotion of access to information (poatia)	<p>POATIA requests – to process requests as required by the act</p> <p><i>Statistical information</i> – Several statistical information to be submitted to various organs of the government as required by the Act.</p> <p><i>Preparation of a Manual</i> – To develop a guide on how to request information from CMS</p> <p>Deal with all web related enquiries from stakeholders requesting information from the Council for Medical Schemes under POATIA.</p>	<p>Respond within 30 days of the receipt of a request as required by (Section 25) of the Act.</p> <p><i>Section 32 Statistics) and Section 15 Statistics</i> to be submitted to both the South African Human Rights Commission and Department of Justice and Constitutional Affairs by 30 April 2006 and 28 January 2007 respectively.</p> <p>Prepare a Manual in three (3) languages as required by Section 14(1) of the Act by end of August 2006.</p> <p>Handle individual web based enquiries for information and:</p> <ul style="list-style-type: none"> Engage with stakeholders where such enquiries fall under POATIA. Redirect such enquiries to heads of respective cost centers where such enquiries do not fall under POATIA. 	Full compliance with the Promotion of Access to Information Act.
Records management	Establish a uniform File Classification	Compile a uniform File Classification List	A uniform file classification list

Part 2: Regulatory Plan Information Systems and Knowledge Management

OBJECTIVES	ACTIVITIES	OUTPUTS	OUTCOME
	List for CMS	(FCL) for the organization by end April 2006. Finalize the FCL taking into account inputs received from the various business units by end May 2006. Submit FCL for approval by National Archives by end June 2006. Implement the FCL electronically across CMS by end August 2006.	established which contributes to improved record keeping within CMS.



PART 3: BUDGET

Income budget for the financial year 2006/2007

INCOME	Total	Month												Total
	Budget	April	May	June	July	Aug	Sept.	Oct	Nov	Dec	Jan	Feb	Mar	
Accrediatiton Fees	6,500,000	541,667	541,667	541,667	541,667	541,667	541,667	541,667	541,667	541,667	541,667	541,667	541,667	6,500,000
Interest Received	1,000,000	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333	1,000,000
Ley on Medical Schemes	31,775,342		15,887,671				15,887,671							31,775,342
Registration Fees	300,000	25,000	25,000	25,000	25,000	25,000	25,000	25,000	25,000	25,000	25,000	25,000	25,000	300,000
Surplus Funds	1,500,000	1,500,000												1,500,000
														0
Total	41,075,342	2,150,000	16,537,671	650,000	650,000	650,000	16,537,671	650,000	650,000	650,000	650,000	650,000	650,000	41,075,342

Full budget for the financial year 2006/2007

Expenditure	Total	Month											
	Budget	April	May	June	July	Aug	Sept.	Oct	Nov	Dec	Jan	Feb	Mar
Accreditation Costs	100,000	0	0	20,000	0	20,000	0	0	20,000	20,000	0	20,000	0
Administrators Training	88,400	0									44,200	0	44,200
Appeal Board	325,000	81,250	0	0	0	81,250	0	0	81,250	0	0	81,250	0
Audit Fees: Internal	244,058	10,410	58,410	0	58,418	0	0	58,410	0	0	58,410	0	0
Audit Fees: External	270,000	0	0	50,000	0	0	60,000	0	80,000	0	60,000	0	20,000
Bank Charges	50,000	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167
PMB Review	140,000	11,667	11,667	11,667	11,667	11,667	11,667	11,667	11,667	11,667	11,667	11,667	11,667
Cleaning & Gardening	138,000	11,500	11,500	11,500	11,500	11,500	11,500	11,500	11,500	11,500	11,500	11,500	11,500
Computer Expenses	152,387	12,699	12,699	12,699	12,699	12,699	12,699	12,699	12,699	12,699	12,699	12,699	12,699
Conferences and Seminars	534,985	49,469	64,469	89,719	160,469	28,219	41,469	18,469	16,469	12,219	28,469	4,469	21,076
Consultancy Fees	280,000	4,167	4,167	16,667	4,167	44,167	156,667	4,167	4,167	16,667	4,167	4,167	16,667
Consumer Education	265,000	0	20,000	20,000	50,000	10,000	15,000	65,000	15,000	5,000	5,000	5,000	55,000
Council Committees	302,670	15,000	15,000	43,000	15,000	15,000	43,000	15,000	15,000	43,000	15,000	15,000	53,670
Courier & Postage	123,110	10,259	10,259	10,259	10,259	10,259	10,259	10,259	10,259	10,259	10,259	10,259	10,259
Depreciation	1,000,000	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333
Donations	5,500	0	0	0	0	0	0	0	0	5,500	0	0	0
Entertainment	15,720	1,165	1,165	1,765	1,165	1,165	1,165	1,165	1,765	1,705	1,165	1,165	1,165
Employee Wellness	120,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000
External Storage	60,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000
Fair Treatment	100,000	0	0	30,000	0	25,250	0	0	0	0	44,750	0	0
General Expense Admin	48,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000
Group Personal Insurance	54,000	4,500	4,500	4,500	4,500	4,500	4,500	4,500	4,500	4,500	4,500	4,500	4,500
HR/Organizational Strategy	426,000	35,500	35,500	35,500	35,500	35,500	35,500	35,500	35,500	35,500	35,500	35,500	35,500
Insurance	120,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000
Internet Expenses	205,812	17,151	17,151	17,151	17,151	17,151	17,151	17,151	17,151	17,151	17,151	17,151	17,151
Investigation Costs	732,967	70,000	32,967	0	100,000	80,000	250,000	200,000	0	0	0	0	0
Legal Fees	1,917,452	0	0	441,863	0	0	491,863	0	0	491,863	0	0	491,863
Media and Promotion	500,030	0	0	70,000	250,000	80,000	40,000	0	25,000	25,000	10,030	0	0
Council Members fees	242,000	0	48,000	10,000	10,000	48,000	10,000	10,000	48,000	0	10,000	48,000	0

Part 3: Budget for 2006/7

Expenditure	Total	Month											
	Budget	April	May	June	July	Aug	Sept.	Oct	Nov	Dec	Jan	Feb	Mar
Motor Vehicle	20,000	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667
Printing	60,000	1,667	1,667	21,667	1,667	21,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667
Recruitment & Relocation	250,000	0	0	0	150,000	0	0	0	0	100,000	0	0	0
Refreshments	45,020	3,660	3,660	3,660	3,660	4,060	3,660	3,660	4,060	3,660	3,660	3,960	3,660
Rent	2,379,795	187,000	199,345	199,345	199,345	199,345	199,345	199,345	199,345	199,345	199,345	199,345	199,345
Rental Copiers	493,480	41,123	41,123	41,123	41,123	41,123	41,123	41,123	41,123	41,123	41,123	41,123	41,123
Rental Other Assets	6,000	500	500	500	500	500	500	500	500	500	500	500	500
Operational Planning	150,000	0	0	0	0	0	0	0	0	70,000	80,000	0	0
Repairs & Maintenance Office	61,164	5,097	5,097	5,097	5,097	5,097	5,097	5,097	5,097	5,097	5,097	5,097	5,097
Research Costs	560,000	150,000	60,000	0	100,000	60,000	0	50,000	0	100,000	0	40,000	0
Knowledge Management	150,000	12,500	12,500	12,500	12,500	12,500	12,500	12,500	12,500	12,500	12,500	12,500	12,500
RSC - Levies	25,500	8,500	8,500	8,500	0	0	0	0	0	0	0	0	0
Salaries	26,122,555	1,915,781	2,134,569	1,999,726	2,045,852	1,914,748	2,103,127	2,065,918	2,025,900	1,910,587	2,033,721	2,066,709	3,905,917
Security- Computers	105,000	8,750	8,750	8,750	8,750	8,750	8,750	8,750	8,750	8,750	8,750	8,750	8,750
Year End Function	24,000	0	0	0	0	0	0	4,000	0	20,000	0	0	0
Staff Training	495,086	41,257	41,257	41,257	41,257	41,257	41,257	41,257	41,257	41,257	41,257	41,257	41,257
Stationery	174,831	14,153	15,153	15,153	14,153	15,153	15,153	14,153	14,653	14,153	14,653	14,153	14,153
Strategic Planning Costs	100,000	0	0	0	0	0	50,000	50,000	0	0	0	0	0
Subscriptions	34,000	0	0	1,750	11,000	0	750	0	7,500	8,250	2,500	600	1,650
Telephone & Fax	652,978	54,415	54,415	54,415	54,415	54,415	54,415	54,415	54,415	54,415	54,415	54,415	54,415
Temp Services	96,642	8,054	8,054	8,054	8,054	8,054	8,054	8,054	8,054	8,054	8,054	8,054	8,054
Transcription Services	31,165	0	0	7,791	0	0	7,791	0	0	7,791	0	0	7,791
Travel	170,892	13,679	13,679	13,679	20,427	13,679	13,679	13,679	13,679	13,679	13,679	13,679	13,679
Trustee Training	310,000	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833
Water & Electricity	212,760	17,730	17,730	17,730	17,730	17,730	17,730	17,730	17,730	17,730	17,730	17,730	17,730
Workman's Compensation	190,000	0	0	0	0	0	190,000	0	0	0	0	0	0
NRPL	120,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000
TOTAL:	41,601,958	2,972,601	3,127,451	3,510,985	3,642,023	3,108,403	4,141,036	3,221,333	3,020,155	3,516,786	3,077,116	2,965,864	5,298,203

Part 3: Budget for 2006/7

Expenditure	Total	Month											
	Budget	April	May	June	July	Aug	Sept.	Oct	Nov	Dec	Jan	Feb	Mar
CAPITAL BUDGET													
Computer Software	283022												
Computer Equipment	184,760												
Other Assets													
Motor car													
Office Equipment													
Furniture and Fittings	53,619												
TOTAL CAPITAL BUDGET	521,401												
TOTAL BUDGET	42,123,359												
Less: Depreciation	1,000,000												
WORKING BUDGET	41,123,359												

Budget per unit CEO

Budget	Total	Month											
	Budget	April	May	June	July	August	September	October	November	December	Jan	Feb	March
Conferences Seminars & W/Shops	120,000	5,000	60,000	12,000	35,000			8,000					
Council Committees	302,670	15,000	15,000	43,000	15,000	15,000	43,000	15,000	15,000	43,000	15,000	15,000	53,670
Courier & Postage	40,000	3,333	3,333	3,333	3,333	3,333	3,333	3,333	3,333	3,333	3,333	3,333	3,333
Entertainment	2,000	167	167	167	167	167	167	167	167	167	167	167	167
Members Fees - Council	242,000		48,000	10,000	10,000	48,000	10,000	10,000	48,000		10,000	48,000	
Refreshments	5,000	417	417	417	417	417	417	417	417	417	417	417	417
Salaries	1,222,002	87,643	150,231	87,643	87,643	107,698	87,643	87,643	87,643	87,643	87,643	87,643	175,286
Stationery	50,000	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167
Staff Training	26,000	2,167	2,167	2,167	2,167	2,167	2,167	2,167	2,167	2,167	2,167	2,167	2,167
Strategic Planning Costs	100,000						50,000	50,000					
Travel	30,000	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500
TOTALS	2,139,672	120,393	285,981	165,393	160,393	183,448	203,393	183,393	163,393	143,393	125,393	163,393	241,706

Legal

Budget	Total	Month											
	Budget	April	May	June	July	August	September	October	November	December	Jan	Feb	March
Appeal Board	325,000	81,250				81,250			81,250			81,250	
Conferences Seminars & W/Shops	22,750			11,250		3,750				7,750			
Courier & Posage	15,000	1,250	1,250	1,250	1,250	1,250	1,250	1,250	1,250	1,250	1,250	1,250	1,250
Entertainment	1,200	100	100	100	100	100	100	100	100	100	100	100	100
Legal Fees	1,917,452			441,863			491,863			491,863			491,863
Refreshments	1,200	100	100	100	100	100	100	100	100	100	100	100	100
Salaries	1,392,514	99,751	113,461	99,751	99,751	99,751	99,751	99,751	99,751	99,751	137,079	99,751	244,215
Stationery	3,000	250	250	250	250	250	250	250	250	250	250	250	250
Staff Training	19,632	1,636	1,636	1,636	1,636	1,636	1,636	1,636	1,636	1,636	1,636	1,636	1,636
Transcription Services	31,165			7,791			7,791			7,791			7,791
Travel	10,620	885	885	885	885	885	885	885	885	885	885	885	885
TOTALS	3,739,533	185,222	117,682	564,876	103,972	188,972	603,626	103,972	185,222	611,376	141,300	185,222	748,090

Budget per unit continued

Communications

Budget	Total	Month											
	Budget	April	May	June	July	August	September	October	November	December	Jan	Feb	March
Conferences Seminars & W/Shops	8,000			6,000		2,000							
Entertainment	1,200	100	100	100	100	100	100	100	100	100	100	100	100
Media and Promotion	500,030			70,000	250,000	80,000	40,000		25,000	25,000	10,030		
Refreshments	1,200	100	100	100	100	100	100	100	100	100	100	100	100
Salaries	613,414	44,101	44,101	44,101	44,101	44,101	44,101	84,202	44,101	44,101	44,101	44,101	88,202
Stationery	1,500	125	125	125	125	125	125	125	125	125	125	125	125
Staff Training	12,240	1,020	1,020	1,020	1,020	1,020	1,020	1,020	1,020	1,020	1,020	1,020	1,020
Travel	10,000	833	833	833	833	833	833	833	833	833	833	833	833
TOTALS	1,147,584	46,279	46,279	122,279	296,279	128,279	86,279	86,380	71,279	71,279	56,309	46,279	90,380

Financial supervision

Budget	Total	Month											
	Budget	April	May	June	July	August	September	October	November	December	Jan	Feb	March
Administrators Training	88,400										44,200		44,200
Conferences Seminars & W/Shops	130,235	44,469	4,469	4,469	24,469	4,469	4,469	4,469	4,469	4,469	4,469	4,469	21076
Consulting Fees	100,000						100,000						
Entertainment	1,500	80	80	80	80	80	80	80	80	620	80	80	80
Refreshments	1,500	125	125	125	125	125	125	125	125	125	125	125	125
Salaries	4,649,480	298,873	364,329	338,486	457,132	338,486	378,599	338,486	338,486	338,486	405,331	338,486	714,300
Stationery	18,036	1,503	1,503	1,503	1,503	1,503	1,503	1,503	1,503	1,503	1,503	1,503	1,503
Staff Training	100,000	8,333	8,333	8,333	8,333	8,333	8,333	8,333	8,333	8,333	8,333	8,333	8,333
Subscriptions	15,000								7,500	7,500			
TOTALS	5,104,151	353,383	378,839	352,996	491,642	352,996	493,109	352,996	360,496	361,036	464,041	352,996	789,617

Budget per unit continued

COO

Budget	Total	Month											
	Budget	April	May	June	July	August	September	October	November	December	Jan	Feb	March
Conferences Seminars & W/Shops	35,000			6,000			8000				21000		
Entertainment	1,200	100	100	100	100	100	100	100	100	100	100	100	100
Refreshments	1,200	100	100	100	100	100	100	100	100	100	100	100	100
Salaries	991,266	71,149	71,149	71,149	71,149	71,149	121,904	71,149	71,149	71,149	71,149	71,149	157,872
Stationery	6,000	500	500	500	500	500	500	500	500	500	500	500	500
Staff Training	20,000	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667
Subscriptions	4,000										2,500	600	900
Travel	10,000	833	833	833	833	833	833	833	833	833	833	833	833
TOTALS	1,068,666	74,349	74,349	80,349	74,349	74,349	133,104	74,349	74,349	74,349	97,849	74,949	161,972

Research & Monitoring

Budget	Total	Month											
	Budget	April	May	June	July	August	September	October	November	December	Jan	Feb	March
Conferences Seminars & W/Shops	14,000			6,000		8000							
Entertainment	1,320	110	110	110	110	110	110	110	110	110	110	110	110
Printing	40,000		0	20,000		20,000		0	0	0	0	0	0
Refreshments	1,320	110	110	110	110	110	110	110	110	110	110	110	110
Research Costs	560,000	150,000	60,000		100,000	60,000		50,000		100,000		40,000	
Salaries	2,892,242	206,803	206,803	255,516	206,803	206,803	253,393	244,131	232,646	206,803	217,623	205,803	449,115
Stationery	4,000	333	333	333	333	333	333	333	333	333	333	333	333
Staff Training	33,718	2,810	2,810	2,810	2,810	2,810	2,810	2,810	2,810	2,810	2,810	2,810	2,810
Subscriptions	10,000				10,000								
Travel	10,000	833	833	833	833	833	833	833	833	833	833	833	833
Project NRPL	120,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000
TOTALS	3,686,600	371,000	281,000	295,713	331,000	309,000	267,590	308,328	246,843	321,000	231,820	260,000	463,312

Budget per unit continued

Accreditation

Budget	Total	Month											
	Budget	April	May	June	July	August	September	October	November	December	Jan	Feb	March
Accreditation Costs	100,000			20,000		20,000			20,000	20,000		20,000	
Conferences Seminars & W/Shops	27,000			9,000	9000				9000				
Entertainment	1,200			600					600				
Refreshments	1,100					400			400			300	
Salaries	2,303,241	138,628	171,549	171,549	171,549	171,549	171,549	171,549	251,060	171,549	179,690	206,505	326,515
Stationery	42,996	3,583	3,583	3,583	3,583	3,583	3,583	3,583	3,583	3,583	3,583	3,583	3,583
Staff Training	48,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000
Travel	45,000	3,750	3,750	3,750	3,750	3,750	3,750	3,750	3,750	3,750	3,750	3,750	3,750
TOTALS	2,568,537	149,961	182,882	212,482	191,882	203,282	182,882	182,882	292,393	202,882	191,023	238,138	337,848

Complaints

Budget	Total	Month											
	Budget	April	May	June	July	August	September	October	November	December	Jan	Feb	March
Conferences Seminars & W/Shops	26,000				18000		8000						
Entertainment	1,200	100	100	100	100	100	100	100	100	100	100	100	100
Refreshments	1,200	100	100	100	100	100	100	100	100	100	100	100	100
Salaries	1,917,286	136,949	168,167	162,792	158,704	136,949	136,949	157,237	136,949	136,949	136,949	136,949	311,743
Staff Training	47,500	3,958	3,958	3,958	3,958	3,958	3,958	3,958	3,958	3,958	3,958	3,958	3,958
Stationery	5,639	470	470	470	470	470	470	470	470	470	470	470	470
Travel	2,500	208	208	208	208	208	208	208	208	208	208	208	208
TOTALS	2,001,325	141,786	173,004	167,629	181,541	141,786	149,786	162,074	141,786	141,786	141,786	141,786	316,580

Budget per unit continued

Compliance

Budget	Total	Month											
	Budget	April	May	June	July	August	September	October	November	December	Jan	Feb	March
Conferences Seminars & W/Shops	36,000				18000		15000				3000		
Consumer Education	265,000		20,000	20,000	50,000	10,000	15,000	65,000	15,000	5,000	5,000	5,000	55,000
Fair Treatment	100,000			30,000		25,250		0	0		44,750		
Investigation Costs	732,967	70,000	32,967		100,000	80,000	250,000	200,000					
Entertainment	1,200	100	100	100	100	100	100	100	100	100	100	100	100
Refreshments	1,200	100	100	100	100	100	100	100	100	100	100	100	100
Salaries	2,471,082	222,076	229,203	190,073	177,363	177,363	177,363	212,708	177,363	177,363	177,363	198,118	354,726
Stationery	9,660	805	805	805	805	805	805	805	805	805	805	805	805
Staff Training	24,996	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083
Trustee Training	310,000	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833	25,833
Travel	24,772	1,502	1,502	1,502	8,250	1,502	1,502	1,502	1,502	1,502	1,502	1,502	1,502
TOTALS	3,976,877	322,499	312,593	270,496	382,534	323,036	487,786	508,131	222,786	212,786	260,536	233,541	440,149

Benefits Management

Budget	Total	Month											
	Budget	April	May	June	July	August	September	October	November	December	Jan	Feb	March
Conferences Seminars & W/Shops	40,000		0	20,000	20,000		0	0	0	0	0	0	0
Refreshments	1,200	100	100	100	100	100	100	100	100	100	100	100	100
PMB Review	140,000	11,667	11,667	11,667	11,667	11,667	11,667	11,667	11,667	11,667	11,667	11,667	11,667
Consulting fees	80,000					40,000	40,000						
Printing	20,000	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667
Salaries	2,258,278	155,604	174,128	174,128	174,128	174,128	194,416	186,448	199,981	174,128	174,128	186,448	290,613
Stationery	6,000	500	500	500	500	500	500	500	500	500	500	500	500
Staff Training	30,000	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500	2,500
Subscriptions	2,000			1,000	1,000								
Travel	20,000	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667
TOTALS	2,597,478	173,704	192,228	213,228	213,228	232,228	252,516	204,548	218,081	192,228	192,228	204,548	308,713

Budget per unit continued

Human Resources

Budget	Total	Month											
	Budget	April	May	June	July	August	September	October	November	December	Jan	Feb	March
Conferences Seminars & W/Shops	25,000			9,000		10000		6000					
Donations	5,500									5500			
Employee Wellness Programme	120,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000
Entertainment	1,500	125	125	125	125	125	125	125	125	125	125	125	125
HR/Organisational Strategy	426,000	35,500	35,500	35,500	35,500	35,500	35,500	35,500	35,500	35,500	35,500	35,500	35,500
Motor Vehicle	20,000	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667	1,667
Operational Planning	150,000									70,000	80,000		
Recruitment & Relocation	250,000				150,000					100,000			
Refreshments	26,500	2,208	2,208	2,208	2,208	2,208	2,208	2,208	2,208	2,208	2,208	2,208	2,208
Salaries	1,288,130	134,885	101,893	92,295	92,295	92,295	92,295	118,138	92,295	92,295	92,295	102,559	184,590
Stationery	8,000	667	667	667	667	667	667	667	667	667	667	667	667
Year End Function	24,000							4,000		20,000			
Staff Training	25,000	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083	2,083
Subscriptions	3,000			750			750			750			750
Temp Services	96,642	8,054	8,054	8,054	8,054	8,054	8,054	8,054	8,054	8,054	8,054	8,054	8,054
Travel	1,500	125	125	125	125	125	125	125	125	125	125	125	125
TOTALS	2,470,772	195,313	162,321	162,473	302,723	162,723	153,473	188,566	152,723	348,973	232,723	162,987	245,768

Budget per unit continued

Internal Finance

Budget	Total	Month											
	Budget	April	May	June	July	August	September	October	November	December	Jan	Feb	March
Audit Fees : Internal	244,058	10,410	58,410		58418			58410			58410		
Audit Fees : External	270,000			50,000			60,000		80,000		60,000		20,000
Bank Charges	50,000	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167
Cleaning & Gardening	138,000	11,500	11,500	11,500	11,500	11,500	11,500	11,500	11,500	11,500	11,500	11,500	11,500
Conferences Seminars & W/Shops	15,000			6,000			6,000		3,000				
Consultancy Fees	50,000	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167	4,167
Courier & Postage	68,110	5,676	5,676	5,676	5,676	5,676	5,676	5,676	5,676	5,676	5,676	5,676	5,676
Depreciation	1,000,000	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333	83,333
Entertainment	1,000	83	83	83	83	83	83	83	83	83	83	83	83
General Expense Admin	48,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000
Group Personal Insurance	54,000	4,500	4,500	4,500	4,500	4,500	4,500	4,500	4,500	4,500	4,500	4,500	4,500
Insurance	120,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000
Refreshments	1,200	100	100	100	100	100	100	100	100	100	100	100	100
Rent	2,379,795	187,000	199,345	199,345	199,345	199,345	199,345	199,345	199,345	199,345	199,345	199,345	199,345
Rental Other Assets	6,000	500	500	500	500	500	500	500	500	500	500	500	500
Repairs, Maintenance Office Air conditioners & computers	61,164	5,097	5,097	5,097	5,097	5,097	5,097	5,097	5,097	5,097	5,097	5,097	5,097
RSC - Levies	25,500	8,500	8,500	8,500		0	0	0	0	0	0	0	0
Salaries	1,628,282	116,236	161,315	134,003	126,994	116,236	134,003	116,236	116,236	116,236	116,236	142,079	232,472
Staff Training	48,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000	4,000
Stationery	15,000	1,250	1,250	1,250	1,250	1,250	1,250	1,250	1,250	1,250	1,250	1,250	1,250
Travel	1,500	125	125	125	125	125	125	125	125	125	125	125	125
Water & Electricity	212,760	17,730	17,730	17,730	17,730	17,730	17,730	17,730	17,730	17,730	17,730	17,730	17,730
Workman's compensation	190,000						190,000						
TOTALS	6,627,369	478,374	583,798	554,076	540,985	471,809	745,576	530,219	554,809	471,809	590,219	497,652	608,045

Budget per unit continued

Information Systems and Knowledge Management

Budget	Total	Month											
	Budget	April	May	June	July	August	September	October	November	December	Jan	Feb	March
Computer Expenses	152,387	12,699	12,699	12,699	12,699	12,699	12,699	12,699	12,699	12,699	12,699	12,699	12,699
Conferences Seminars & W/Shops	36,000				36,000								
Consultancy Fees	50,000			12,500			12,500			12,500			12,500
External Storage	60,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000
Entertainment	1,200	100	100	100	100	100	100	100	100	100	100	100	100
Internet Expenses	205,812	17,151	17,151	17,151	17,151	17,151	17,151	17,151	17,151	17,151	17,151	17,151	17,151
Refreshments	1,200	100	100	100	100	100	100	100	100	100	100	100	100
Rental Copiers	493,480	41,123	41,123	41,123	41,123	41,123	41,123	41,123	41,123	41,123	41,123	41,123	41,123
Knowledge Management	150,000	12,500	12,500	12,500	12,500	12,500	12,500	12,500	12,500	12,500	12,500	12,500	12,500
Salaries	2,495,338	203,083	178,240	178,240	178,240	178,240	211,161	178,240	178,240	194,134	194,134	247,118	376,268
Security- Computers & Building	105,000	8,750	8,750	8,750	8,750	8,750	8,750	8,750	8,750	8,750	8,750	8,750	8,750
Stationery	5,000		1,000	1,000		1,000	1,000		500		500		
Staff Training	60,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000
Telephone & Fax	652,978	54,415	54,415	54,415	54,415	54,415	54,415	54,415	54,415	54,415	54,415	54,415	54,415
Travel	5,000	417	417	417	417	417	417	417	417	417	417	417	417
TOTALS	4,473,395	360,338	336,495	348,995	371,495	336,495	381,916	335,495	335,995	363,889	351,889	404,373	546,023

Budget per unit continued

Risk Equalisation Fund

Budget	Total	Month											
	Budget	April	May	June	July	August	September	October	November	December	Jan	Feb	March
Computer Equipment	6,740,228	1,305,847	1,350,462	1,302,462	1,313,573	493,009	493,009	80,311	80,311	80,311	80,311	80,311	80,311
Computer Software	2,738,937	846,313	423,156	443,156	443,156	443,156	20,000	20,000	20,000	20,000	20,000	20,000	20,000
Maintenance	1,326,025				122,602	100,000							
Conferences & Seminars	230,000				50,000		50,000		130,000				
Consulting Fees	470,000			235,000					235,000				
General Office Admin	120,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000
Office Furniture	162,000	144,000			18,000								
Printing	70,000		70,000										
Recruitment & Reallocation	140,000	100,000		40,000									
Rental	793,800	66,150	66,150	66,150	66,150	66,150	66,150	66,150	66,150	66,150	66,150	66,150	66,150
Salaries	4,397,088	144,165	355,059	355,059	355,059	355,059	392,883	392,883	392,883	392,883	420,385	420,385	420,385
Staff Training	87,943	2,883	7,101	7,101	7,101	7,101	7858	7858	7858	7858	8408	8408	8408
Stationery	30,000	280	2,523	2,523	2,523	2,523	2804	2804	2804	2804	2804	2804	2804
Telephone & Faxes	36,166	338	3,042	3,042	3,042	3,042	3,380	3,380	3,380	3,380	3,380	3,380	3,380
Travel	49,999	1,639	4,037	4,037	4,037	4,037	4,468	4,468	4,468	4,468	4,780	4,780	4,780
Water & Electricity	75,600	6,300	6,300	6,300	6,300	6,300	6,300	6,300	6,300	6,300	6,300	6,300	6,300
TOTALS	17,467,786	2,627,915	2,297,830	2,474,830	3,504,966	1,490,377	1,056,852	594,154	959,154	594,154	622,518	622,518	622,518